

Obstacles and opportunities for students with disabilities in entering and in preparation to graduate into professions in higher learning: The case of a university in South Africa



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DECLARATION

I, Sibonokuhle Ndlovu hereby declare that the contents of this thesis are my own unaided work and it represents my own ideas and opinions. This thesis has not been previously submitted for academic examination for any qualification.

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ABSTRACT

This study explores how obstacles are confronted, and opportunities presented to students with disabilities to enter and be professionalised into Medicine, Law and Education, at an institution of higher learning in South Africa. The argument for the thesis is that policies of non-discrimination, same entry requirements and individual accommodations, makes it appears as if students with disabilities have an equal opportunity of access, professionalisation and completing the programmes within the minimum stipulated time. However, the Institution and the work settings for integrated learning are not totally transformed and there is a lack of radical inclusion, to allow all diverse students to be included. As such, students with disabilities confront inequitable structures and practices at entry and professional learning, resulting in them taking longer to complete the specific programmes. Through the mixed method research, the main finding of the study is that the same entry level requirements for all students, a lack of understanding of the prior disadvantage of attending special schools, and the nature of specific professions, limit students with disabilities' entry into Medicine and Law. Access to Education is limited, particularly by the inaccessible built environment of the School of Education. Exclusionary teaching practices present a major barrier to professional learning. At the work setting for integrated learning, the built environment is inaccessible, and attitudes are negative. Individual accommodations at the Institution are not necessarily extended to field practice. Thus, despite the level of institutional transformation and individual accommodations, professionalisation both at the Institution and at the work settings for integrated learning, is limited. Change and improvement is hence recommended. The unique theoretical contribution lies in the application of Decolonial Theory to a disability study. It makes visible the invisible underlying reasons for oppression, unconsciousness, resistance to change, and reason to privilege suppressed voices, including those of persons with disabilities.

KEY WORDS: Higher learning, students with disabilities, access, obstacles, opportunities, inclusion, professional degrees, throughput, transformation,

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DEDICATION

Dedicated to students with disabilities and the Disability Unit staff members at the Institution who participated in the study

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Conference and seminar presentations

Participated and presented a paper titled: Throughput in professional degrees for students with disabilities in South African Higher Learning: Obstacles and Opportunities. *Regional Conference: Higher Education Research and Policy Network (HERPNET)*. Wits School of Education, Johannesburg, 20-23 September 2015

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Participated and presented a paper on work in progress titled: Professional Learning: Obstacles and Opportunities. *Centre for Critical Research in Race and Identity*. University of KwaZulu Natal, Durban, 6. November 2014

Participated and presented a poster titled: Obstacles and Opportunities for Students with Disabilities in entry, in Preparation to Graduate into Professions and Completing the Programmes: The Case of the University in South Africa. *PhD Research weekend*. Wits School of Education, Johannesburg, 13 October 2014

Participated and presented a paper titled: Obstacles and opportunities that confront students with disabilities to enter the specific professional degrees, in preparation to graduate into the specific professions and to complete them and in a specific context of higher learning in South Africa. *Inclusion Saturday*. Wits School of Education, Johannesburg, 19 September 2014.

Participated and presented a paper on work in progress titled: Obstacles and opportunities for students with disabilities in entry and in preparation to graduate into professions in higher learning in South Africa. *Centre for Critical Research in Race and Identity*. University of KwaZulu, Durban, 13 May 2014.

ABBREVIATIONS

ADA	American with Disability Act
CCDU	Careers and Counselling Development Unit
CCRI	Centre for Critical Research in Race and Identity
CHE	Council for Higher Education
DU	Disability Unit
DSA	Disabled Student Allowance
DHET	Department of Higher Education and Training
DDA	Disability Discrimination Act
DRC	Disability Rights Commission
DRTF	Disability Rights Task Force
LLB	Legum Baccalaureus (Latin) (Bachelor of Laws)
NRF	National Research Foundation
NSFAS	National Student Financial Aid Scheme
SENDA	Special Education and Non-Discrimination Act
PMA	Post graduate Merit Award
UD	Universal Design
UDL	Universal Design of Learning
UK	United Kingdom

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CHAPTER ONE: ORIENTATION TO THE STUDY

1 INTRODUCTION

One of South Africa's current objectives is to produce a workforce that is adequately skilled to participate and compete within the global economy of the 21st century through higher learning (Carrim & Wangenge-Ouma, 2012). The urgency has come about as a result of the report produced by the National Skills Development Authorities (Department of Higher Education and Training, 2011), who observe an imbalance between higher learning output and the national skills in terms of specific professions. If the country's professed goals of equality and inclusion are to be met, the skilled workforce needs to include historically disadvantaged persons such as women, blacks and people with disabilities. According to the Constitution and other pertinent legislation, persons with disabilities should have access to higher learning, equal education and employment opportunities. What will pave the way for these employment opportunities is entry into professional degrees, followed by a process of professionalisation and training, and ultimately graduation into a profession. It is against that background that the study explores how obstacles are confronted by persons with disabilities when they enter into specific professional degrees programmes. The study also looks at opportunities available to these individuals, which culminates in completing the programmes and graduation. South Africa has been seeking to empower historically disadvantaged social groups since the end of apartheid, which is why research into professionalisation of our workforce is important. The present study focuses on higher learning because it is core to professional learning. It is important to note that a single institution of higher learning in South Africa has been used as the case study.

The Government has made attempts to ensure the inclusion of persons with disabilities within various spheres of our society, particularly through the Constitution (Republic of South

Africa, 1996). Several items of legislation have been developed for the purposes of equity in employment and non-discrimination. These documents include the employment equity Act, No 55 of 1998 (RSA, 1998a) and the Promotion of Equality and Prevention of Unfair Discrimination Act, No 4 of 2000 (RSA, 2000). Policies geared specifically at basic education and higher learning are, among others, the Education White Paper 6: Special Needs Education: Building an Inclusive Education and Training System (EWP6) (DoE, 2001b), and the Education White paper 3: Transformation of the Higher Education System (DoE, 1997). These were developed to engender inclusion and transformation in basic education and higher learning respectively. Other such policies will be discussed in detail in the literature review chapter of this thesis.

Persons with disabilities continue to be excluded from professional employment in South Africa. In a study commissioned to explore employment equity, Ramutloa (2010) reported that only 3 909 persons with disabilities were in professional employment within South Africa. This is cause for concern, because such persons are protected from discrimination by the Constitution (RSA, 1996), and, as was mentioned in the previous paragraph, there is other legislation designed to ensure equity and non-discrimination of all persons. Also, the transformational agenda purports to broaden opportunities for formerly-disadvantaged social groups to have access to higher learning and employment. Levels of professional employment, particularly within these formerly-disadvantaged groups, might be increased by ensuring increased access to professional qualifications. It should be foregrounded however that students with disabilities are general few compared to other student population in South African higher learning. The Fotim Report (2001) stated that they make less than 1% of the student population. However, the accuracy of this figure cannot be determined because it's not all students who disclose their disabilities. Others are not known. This study, which explores entry into specific professional degrees, as well as the process of professionalisation

within higher learning and completion of the programmes by students with disabilities, will be useful in illuminating the complexity that underlies the entrenched exclusion I have alluded to.

The study is part of the national project for the Department of Higher Education and Training (DHET) entitled *Education and Emancipation* and is co-ordinated through the Centre for Critical Research in Race and Identity (CCRRI) at the University of KwaZulu Natal. This study in particular aligns with the research theme of Project 3, which falls under the umbrella of the broader project, and is designated as “Graduating into professions: Obstacles to graduating certain social groups and evaluating progress in addressing those obstacles”. This particular theme has to do with the exploration of the effects of race, gender and class on the access of Blacks and women to specific professions and professional employment. The objective is to identify key obstacles to this access and address them. Those with disabilities were not initially included in the broader project, but the present study deems this inclusion indispensable; it will indisputably contribute to the general goals of the project and specifically to the theme of Project 3. How this study came to prioritise students with disabilities is detailed in Section 1.4.

1.2 PROBLEM STATEMENT

The National Skills Development in South Africa has reported an imbalance in terms of higher learning output and the nation’s proportion of skilled individuals, particularly in terms of certain professions listed as Accounting, Architecture, Engineering, Law, Medicine, Psychology and Social work (Department of Higher Education and Training, 2011). As Earlie (2008) has observed, the supply of professional skills is wholly dependent on the output of said skills from the national tertiary education system. Such a shortage suggests a problem with the throughput levels in higher learning. This problem was identified by the Department

of Higher Education and Training (DHET, 2011). Each study in the broader project of which this thesis forms a part focusses on a specific aspect of the problem of this imbalance, in order that all findings can be put together to address the problem. The present study specifically explores the educational journey undertaken by students with disabilities; that is, the entry, the actual professionalisation, and completion of the specific programmes to graduate into professions. This focus is geared to understanding precisely *where* the inadequacy is that leads to the widespread exclusion of persons with disabilities, as well as how the obstacles and opportunities are experienced by such persons. As has already been highlighted, South Africa's intention is to produce a skilled workforce which can compete within the current global economy (Carrim & Wangenge-Ouma, 2012), the aim is necessarily (and ethically) undergirded by the goals of inclusivity and equality: all persons, including those with disabilities, are expected to participate and contribute to this objective. With this in mind, one of the goals of the current study has been to establish that disability needs to be viewed in terms of diversity.

1.3 AIM/ RESEARCH AGENDA

The study seeks to explore both the obstacles and opportunities that students with disabilities are faced with when attempting to gain access to professional degrees. The obstacles and opportunities will also be explored in their professional learning, to understand whether or not those students complete the programmes within minimum period of time established for the general student population to obtain the qualification. The aim of this study is to generate a knowledge base which policy makers could draw on in order to make their interventions better informed and more effective. There should be, I argue, a radical improvement of the whole process of entry of students with disabilities into professional degrees and of their preparation to graduate. It should be noted, it applies to the specific institution upon which the present study bases its observations, and might also apply broadly. The radical

intervention described here is however beyond the scope of the current study; however it should nevertheless be a priority of relevant policymakers. My aim is to work in partnership with the students with disabilities and Disability Unit staff members as the participants, through the research process to solicit data. The recommendations for change and improvement provided by them will be conveyed, and it is hoped that the recommendations, supported by data, will be integrated into policy strategies.

1.4 SIGNIFICANCE OF THE STUDY

Disability as a concept and as a social identity has been widely researched in the mainstream and critical disability contexts, and this has resulted in the development of different conceptualisations of what it is to fall into the category of disabled persons. The research has also resulted in laudable achievements in terms of improving living condition of persons with disabilities. While this rich and extensive body of knowledge will not be overlooked, this study seeks a further nuanced understanding that could be developed by applying Decolonial Theory to a disability study, the theory which mainly explains oppression in the context of race. Employing the theory in the disability context could bring additional subtlety to the conception of disability.

A number of scholars have done research on the access and inclusion of students with disabilities in higher learning. Internationally, they include among others, Holloway (2001), Fuller, Healey, Bradley and Tim (2004), Slevin, Kenny and McNeela (2004) and Goode (2007). In Africa, notable studies have been conducted by Chataika (2007) and Hugo (2012), and in South Africa specifically, the work of Matshediso (2007), the Fotim Report (2011), and Bell (2013), is particularly noteworthy. These studies will be further discussed under Section 1.7 in the chapter, so as to provide necessary detail. The present study's unique contribution to this field of research is that it focuses specifically on access to and inclusion

in professional degrees of students with disabilities. Furthermore, the study has a particular interest on the on-time completion of the specific programmes by students disabilities. In one of its recommendations, the Fotim Report (2011) states that there is need for the throughput rate of students with disabilities to be interrogated within South African higher learning. Though the recommendation is aimed at all programmes generally in institutions of higher learning the study narrows the focus to the context of Law, Medicine and Education professional degrees. Medicine and Law are selected because they are among the specific programmes singled out by the CCRRI to be the focus of Project 3. Education is selected on the grounds that it is contested as a profession. Haralambos (1991) argues that there are high and low level professions and he classifies Medicine and Law in the high category and Education in the low. For the purposes of representativity of all levels of professions in the study, Education is also included as a profession of focus. Thus, the focus of the thesis responds to the call of the transformation policy (DoE, 1997), which states that particular attention needs to be paid to students with disabilities, and to *their* throughput rates, specifically.

Among the studies listed in the previous paragraph, some have focussed on access and inclusion of former disadvantaged social groups in the South African higher learning context. Badat (2010) and Carrim and Wangenge-Ouma (2012) have given attention to Blacks and women. Matshediso (2007), the Fotim Report (2011) and Bell (2013) have focussed on students with disabilities. However, research conducted in this field has tended to over-generalise its conclusions to all and overlook the obstacles and opportunities that are specific to students with disabilities who are either black, or female, or both. This inevitably adds complexity that should not be overlooked. Thus, though disability is understood in the context of diversity, the present study focusses on students with disabilities specifically. All diverse students could confront obstacles and opportunities at entry and in professional

learning. However, there could be unique ones that are specifically confronted by students with disabilities. It is the specific obstacles and opportunities that the study is focussed on, to provide baseline data on which the intervention by the responsible stakeholders in the Department of Higher Education and Training, could base. As Maguvhe (2015) argues that the focus is no longer in adapting the environment for only certain social groups but to create an environment that is welcoming to all diverse students, the intervention might not only improve access and professional learning for students with disabilities only but all diverse students. Of importance is that there is a total institutional transformation in which all diverse learners are included. Thus, though I subscribe to broad inclusion in which all diverse students are encompassed and not a narrow focus on a vulnerable group, the focus is students with disabilities specifically. Details of broad inclusion have already been discussed in Chapter Two under Section 2.2.

The thesis reaches beyond the constraint of the original project's focus, which was specifically Blacks and women as formerly disadvantaged social groups. It was noted that students with disabilities who were also identified specifically as traditional students in the National Plan and are in need of inclusion in the South African higher learning (DoE, 2001a), are overlooked. As the original focus of the project was aimed specifically at the current conditions faced by Blacks and women within the context of higher learning, there was a risk that persons with disabilities would not be included. However, by focussing on students with disabilities specifically, this particular study becomes inclusive on many levels, and adds much-needed nuance to the objectives of the broader project. The individuals whose inclusion needs to be researched and addressed could include black and white men and women with disabilities, since disability transcends the boundaries of race and gender. Had the original focus on Blacks and women been rigidly adhered to, white and male persons with disability would have been overlooked. Furthermore, the theme originally focussed only on

the obstacles to inclusion with regard to specific professions. The present study goes beyond this and includes opportunities too. It is because obstacles alone do not provide a nuanced picture of the phenomena under study. The increased focus makes the study significant.

It should be fore grounded that the researcher subscribes to an understanding of disability, access and inclusion in the broad context of diversity and multiple identities, as informed by Critical Disability Theory. However, in the context of the present study, it is students with disabilities specifically who are focussed on. Vehmas and Watson (2014) argued that “There is no evidence that the categories that are applied to disabled people create an unnecessary divide between disabled and non-disabled” (p. 648). It should thus be understood that focussing on students with disabilities does not imply segregation. The integral part is to make an effort to attain genuine inclusion of all diverse students. To reiterate, a premise of the thesis is that an understanding of the opportunities and obstacles that face students with disabilities could bring about the necessary intervention, and ultimately, positive change.

1.5 RESEARCH QUESTIONS

The main research question of this study is:

How are opportunities presented and obstacles confronted by students with disabilities to enter specific professional degrees, and in professional learning to complete the programmes timeously, and graduate into specific professions at a specific institution of higher learning in the South African context?

Sub research questions:

How are both opportunities and obstacles encountered by students with disabilities when they enter into Medicine, Law and Education professional degrees?

How are both the opportunities and obstacles encountered by students with disabilities in the process of professional learning, in which the aim is to complete the specific programmes within the minimum stipulated time and graduate into the three professions?

What recommendations can be made to policy makers to improve entry, professional learning, and timeous completion of the programmes, in the context of a specific institution of higher learning in South Africa?

1.6 PREVIOUS AND OTHER RELATED STUDIES

Previous studies that have been conducted in the field need to be engaged with in this chapter so as to establish an understanding of what has already been achieved. This coverage will locate the present study within the existing scholarship. Importantly, this review of available literature aims to delineate the gap in the field, and therefore illustrate the need for this research's unique contribution. As has already been highlighted in Section 1.4, a number of studies have been conducted on access and inclusion of students with disabilities in higher learning, internationally, in Africa, and South Africa specifically. Of particular interest is Holloway's (2001) study, in which policy is considered to be a primary factor if good practices are to be implemented for the inclusion of students with disabilities. Slevin, Kenny and McNeela (2004) believe that access needs to be both integrated and differentiated, so that specific requirements (based on specific disabilities) are appropriately registered and addressed for the adequate addressing of differences. Fuller, Healey, Bradley and Hall (2004) advocate for the voice for those with disabilities to be privileged when they state that there is a "need to continue to seek out, listen to and act upon the voices of disabled students [...] to make higher learning inclusive" (Fuller et al., 2004, p. 316). Goode (2007) argues that the curriculum is integral to inclusion, and suggests that teaching and learning should be integrated and differentiated so as to cater for the unique needs of students with disabilities. It

could be argued that this international literature understands inclusion in light of catering for unique needs through differentiation, that it endorses having policy to enforce the catering for different needs, and that there is general advocacy within this literature for the voices of those with disabilities to be listened to.

In the context of Africa, Chataika's (2007) study focuses on the inclusion of students with disabilities in Zimbabwean higher learning specifically. The study observes that the inclusion of students with disabilities is limited within this context by institutional barriers which include inappropriate disabilities in Zimbabwean higher learning specifically. The study observes that the inclusion of students with application and admission procedures, physical access, inappropriate teaching methods, a lack of support and resources as well as of political will, which in turn manifests in a lack of appropriate legislation. Hugo (2012) explores whether students with disabilities in Colleges in Namibia are integrated or included. The finding is that "What has been achieved in higher learning so far in Namibia is integration rather than inclusion" (Hugo, 2012, p. 324).

In South Africa specifically, studies by Riddel (1998) and Howell (2006) explore how the perceptions of stakeholders in higher learning influence the inclusion of students with disabilities. It is commonly found that negative perceptions about students with disabilities' potential and capabilities play a part in their exclusion. Matshediso (2007) highlights how students with disabilities are included and excluded in different higher learning institutions. The Fotim Report (2011) explores how Disability Units help in supporting students with disabilities. Bell (2013) investigates how students with hearing impairments access higher learning and how they are included in a single institution of higher learning.

There are other related studies that are also being carried out as part of the DHET project and under the same theme, 'Graduating into professions'. Of these, the most pertinent to the

present study is that conducted by Erasmus (2013), which focuses on compiling literature on seven specific professions, namely Accounting, Architecture, Engineering, Law, Medicine, Psychology and Social work. The aim of Erasmus' study is to provide literature to be reviewed, to complement that already provided by CCRRI, and to identify the gaps in existent literature on professions. A bibliography of literature is compiled on these seven professions and presented in alphabetical format. Her bibliography comprises 34 articles on Medicine in the South African context, however her focus is mostly on Blacks and women as disadvantaged social groups, and none of the cited studies focusses specifically on students with disabilities. She compiled a list of 15 studies on Law, but again, none of them refer to those with disabilities within the frame. What it suggests is that those with disabilities are considered to merely form a part of the mainstream. The study seeks to focus on the specific programmes in the light of students with disabilities, specifically.

Furthermore, there are other ongoing studies which are also contributing to the project and to the specific theme. Two of these are being simultaneously conducted at one university in South Africa. One is exploring the changes and continuities for a new generation of students in higher learning, and is being conducted by the Centre for Higher Education (CHED, in progress). The other is investigating how the gap in the demand for national skills could be closed (Fisher & Scott, in progress). The third looks at the sociology of professional work in South Africa (South African Review of Sociology: Special Issue, in progress). The fourth is being carried out by CHE (CHE, in progress) and is exploring the effectiveness of the LLB degree in South Africa, after concern was raised about the quality of recent graduates of Law. It reflects that there is a lot of research related to the present study that has already been carried out and also ongoing.

1.7 UNIQUENESS OF THE STUDY AND CONTRIBUTION TO KNOWLEDGE

The collection of studies alluded to here reflect that specific aspects, such as access and inclusion into higher learning, teaching and learning of students with disabilities, influence of policy on inclusion, and the importance of voice of students in inclusion, have been researched before. Erasmus (2013) focuses on professions, and the ongoing one by CHE looks at the quality of the skills set of the Law graduate after graduation. While all these studies seem to be related to the present, none of them focuses on entry into professional degrees, professional learning and completion of the programmes in relation to students with disabilities. Thus, the present study is an attempt to fill that gap and contribute necessary and currently unavailable knowledge. It is a priority of this study to provide an opportunity to the participants to speak for themselves.

None of the mentioned studies have used the theoretical framework of Critical Disability and Decolonial Theories, which this study does. The application of Decolonial Theory to a disability study is considered to be particularly unique. While it is understood that disability is categorised in the disability field, Decolonial Theory brings the idea of zones of being and non-being, and the invisible abyssal line that divides the two zones into two. What this theory brings to light is the invisible reason why those with disabilities are located in the zone of non-being, and the underlying reason why they are collectively oppressed together with those ‘others’ also located in this zone. Decolonial Theory also provides the concept of agency as a way of resisting oppression. It is thinking within the systems of mostly Western reason which insidiously perpetuate various forms of oppression. Agency could enable speaking out and acting out the necessary resistance to bring about change. Furthermore, the theory explains the concepts of social and epistemic location. The idea of epistemic location specifically could add on to an understanding of why dismantling oppression by those with disabilities could be difficult if they are not aware of oppression and think like their oppressors.

Decolonial Theory could also provide a necessary extension of Critical Disability Theory in terms of understanding how indispensable the voice of persons with disabilities is. It is understood that persons with disabilities' voice should be privileged because they have a lived experience of disabilities (Devlin & Potheir, 2006), and that those without disabilities have been speaking for and misrepresenting them (Hosking, 2008). Decolonial Theory has created a framework in which personal experience and anecdotal evidence are seen as valuable, and provide important means to appreciate divergent views from diverse, plural and different people (Ndlovu-Gatsheni, 2001). Such theory also emphasises that no voice should be stifled, as all knowledges have value and are useful (Dastile & Ndlovu-Gatsheni, 2013). Thus, the present study could contribute empirically and theoretically, as the Decolonial Theory provides a way to render visible the invisible and underlying reasons for specific issues in the disability field and provides ways of overcoming them.

Schooling, higher learning, as well as the work setting are important systems to understand in order to grasp what affects entry into specific professional degrees and professionalisation. Professional learning takes place both in higher learning and work settings, and the combination of the two, which takes place during field practice, for instance, results in integrated learning. However, due to time constraints, the focus of the present study is on higher learning only, and data will be collected from a single institution, which is the case study. The figure below provides a visual representation of where the focus of this study falls.

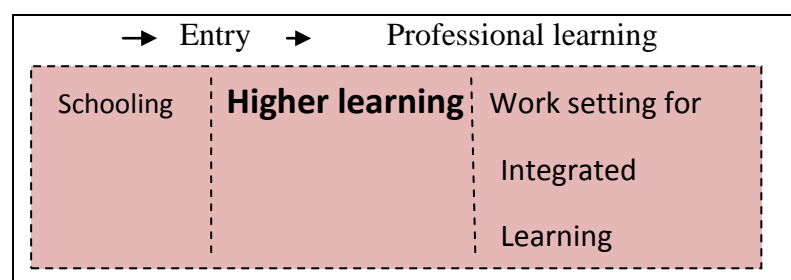


Figure 1: Focus of the study is higher learning

Figure 1 shows three distinct sections, which illustrate that schools, higher learning institutions and work settings are intrinsically linked in terms of integrated learning. In other words, they are all important for entry and professional learning as they are all dependent on each other. Schooling is important at entry because it provides higher learning with students. Higher learning institutions receive learners who qualify for entry, and then proceed to professionalise them and expose them to pertinent theoretical knowledge, and send them to the work setting for practical learning. The lines are dotted to show that the boundaries are porous, as a result of the categories being intimately connected. In the whole study, the term ‘Institution’ will be used to refer to the particular case of study, to protect the integrity and anonymity and ‘work setting for integrated for learning’ for ‘workplace’. Integration implies that both field practice and full practice take place in that one workplace. It is viewed as the field in which students do their practice as part of professional learning before they graduate to be full-time professionals.

1.8 PRELIMINARY LITERATURE REVIEW ON KEY CONCEPTS

A preliminary literature review has been done before the start of the research to understand the key concepts of the study. These are models of disability, professional degrees, access and inclusion in higher learning internationally and in South Africa, policy, and transformation. In the introductory chapter, the literature review has cast a wide net and is not in-depth. The reason for this is to provide a general overview on issues that are pertinent to the study; the review simply serves as a baseline understanding of pertinent issues. A review of access and inclusion is not repeated in the section that follows because that has been covered in Section 1.7. Further review of specific key issues will be conducted in the next chapter, in which there is depth and critique. It should be fore grounded again that although this study looks at a single institution of higher learning, literature on schooling and work settings is reviewed in the next chapter because those are interactive systems whose

boundaries are porous. These systems interact and influence one another throughout the process, from entry, through the process of professionalisation, and ultimately to the graduation of individuals into the respective professions.

1.8.1 Models of disability

Literature on the individual and social models (UPIAS, 1976; Brisenden 1986; Oliver, 1990, 1996a, 1996b; Barnes & Mercer, 2003, 2005; Shakespeare, 2006; Barnes, Oliver & Barton, 2008; Goodley, 2011) will be reviewed in this section. The purpose of this review is to give a general overview of how disability is conceptualised in particular contexts, such as higher learning. It also helps to show which model is dominant, and how this influences access and inclusion of students with disabilities, specifically at the Institution that provides the case study. The information provided in this review undergirds the study's understanding of the factors affecting entry, professional learning and completion of the specific programmes by students with disabilities at the Institution. This section also provides background for tracing conceptions of disability from pre-colonial times through to the present, which is done in the next chapter.

1.8.2 Professional degrees

A preliminary review of literature on professional degrees will also be provided. It will show how professional degrees are different from other programmes, as well as what constitutes their professional knowledge (Young & Muller, 2014). It will enable the choice of three professional degrees for the purpose of this study. The selection has been complicated by the fact that what qualifies as a profession is highly contested (Turner & Hodge, 1970). However Medicine, Law and Education will be selected for this study and the criteria for selection is explained in detail in Chapter Four. The review also forms the basis from which to understand professional learning at the specific institution of higher learning. Thus, the

review is important for providing an understanding of what hinders and promotes the professionalisation of students with disabilities.

1.8.3 Transformation

The objective of transformation in higher learning in South Africa is an important aspect of this study. An understanding of transformation puts the changes that have been effected in higher education since 1994 in perspective. Such understanding also provides a framework in which to grasp the limitations that are still experienced in higher education. In the context of this study, the preliminary review affords an understanding of the access of students with disabilities and how they are included in a formerly advantaged institution. Thus, literature on the issues of transformation (Odendaal-Magwaza & Farman, 1997; Leonard & Grobblers, 2005; Kraak, 2005; CHE, 2008; Badat, 2010; Carrim & Wangenge-Ouma, 2012; Ndlovu-Gatsheni, 2013) has been included.

1.8.4. Policy

Literature on policy in developed countries such as the United Kingdom (Hurst, 1999; Hall & Tinklin, 2002; Chataika, 2007) has been reviewed in order to assess whether or not it could be used as the benchmark for South Africa. Local policies of inclusion (DoE, 2001b), in addition to Transformation White Paper 3: Transformation of the Higher Education System (DoE, 1997), are also reviewed as they are foundational in the South African context so as to understand how they enforce inclusion of students with disabilities and transformation generally at Institution. Fulcher (1989) is in agreement with Holloway (2001), who has argued that policy does not always translate into action. This has also been experienced by Slee (2011), who remarks that it might not always work as intended. The review of the aforementioned policy documents therefore will help to understand what has and has not been implemented and what had been and not been integrated to policy (Ball, 2008).

1.9. THEORETICAL FRAMEWORK

The theoretical framework that informs the study is premised on both Critical Disability and Decolonial Theories. The two sets of theory are important for the emancipation and empowerment of persons who are oppressed, and this includes those with disabilities. The theories are also important for illuminating the hegemonic practices within specific contexts, such as the Institution of higher learning. The theories illuminate how the practices and structures at the institution promote or hinder students with disabilities' access into specific professional degrees and their preparation to graduate into the specific professions in time.

1.9.1 Critical Disability Theory

Critical Disability Theory is a theory that was a development from Meta-Critical Theory (Brookfield, 2005). The theory explains issues of disability with the purpose of empowering and emancipating those with disabilities. It falls under the umbrella that incorporates theories such queer theory, critical race theory, and/or feminism. Like the other theories, it seeks to critique established, hegemonic and narrow understandings, in this case with regard to disability and the oppression of persons with disabilities.

Critical Disability Theory is an important aspect of the study. It is a bottom-up theory (Devlin & Potheir, 2006), which involves creating opportunities for persons with disabilities to have the opportunity of sharing their lived experiences of disability and for their voices to be heard. It posits that disability is a form of diversity, and this extends beyond an outmoded understanding of disability as an identity for persons with impairments (Goodley, 2011). As argued by Vehmas and Watson (2014), critical disability theorists have deconstructed the dualist dichotomy of 'disabled and non-disabled', arguing that such a construct casts one group as superior and the other as inferior. This results, inevitably, in one group dominating the other. The theory can enable the emancipation of the oppressed (Mertens, 2003; Mertens

et al. 2013) when it is employed to further the objective of transformative paradigm. All of this illustrates that the aims and objectives of the study can be achieved by employing Critical Disability Theory as the torchlight to illuminate the phenomena under study. The theory explains, for example, how disability is socially constructed (Devlin & Potheir, 2006), the value of the voice of those with disabilities (Titchkosky, 2003; Hosking, 2008), intersectionality, collectivity and individuality (Goodley, 2013) and disableism and ableism (Goodley, 2014). These concepts are explained and elaborated on in Chapter Three.

1.9.2 Decolonial Theory

Decolonial theory (DT) is a long-standing theory which was popularised by Quijano in the 1990s (Quijano, 2000). It is not a theory that addresses disability *per se*, but it promotes the agency and the emancipation of oppressed and marginalised social groups in society in general. It is being used to illuminate issues of disability in a different way. The proponents of the theory are, among others: Grosfoguel (2007, 2011), Quijano (2000, 2007), Mignolo (2007), and Maldonado-Torres (2007), who all work in Latin America, which is understood to be part of the Global South. Mignolo (2007) has described the theory as “an-other thought that seeks to inaugurate, an-other logic, ‘an-other’ language and ‘an-other’ thinking that has the potential to liberate people’s minds from [...] hegemonies” (p. 56). Thus, the theory offers a new way of understanding what has been long understood in the same way, by illuminating disability from a different angle.

The theory seeks to view the concept of the ‘other’ from a different perspective. It starts by problematising coloniality and its effects. It seeks to engender consciousness and enlightenment, because the oppressed ‘other’ has been taken for granted by the dominant power (the West) and this has been largely accepted as part of modernity. Like Critical Disability Theory, the theory seeks to promote the agency of individuals who have been cast

as ‘other’, but it does so from the angle of unmasking the ills of coloniality and then seeking to de-colonise those systemic constructs that perpetuate oppression. The theoretical concepts of coloniality, coloniality of being, coloniality of power, coloniality of knowledge, decoloniality, locus of enunciation, shifting the reason of geography, and decolonial turn are used to inform this study, and they complement the central concepts of the Critical Disability Theory. This useful intersection will be employed to illuminate and explain issues that emerge from data. Details of both theories are further provided and discussed in Chapter Three.

There are previous studies which have also employed Critical Disability Theory and Decolonial Theory respectively. Among others, Lalvani and Polvere (2013) and Coate (2014) have used the former in the field of Social Work. In the study by Lalvani and Polvere, Critical Disability Theory was used to understand families of children with disabilities, and to locate the limitations of those families in a sociocultural rather than the medical context. In the study by Coate, the theory was used to understand the key factors that contribute to the isolation and exclusion of those with physical disabilities when such individuals attempt to access the built environment. There are also doctoral students who have employed Decolonial Theory in the context of their disciplines. Of particular significance is Ndlovu (2015), who applied the theory within the discipline of Anthropology to better understand how cultural villages as tourist attraction in South Africa reproduce colonial images of those in power rather than the actual identities of the subaltern. He used Decolonial Theory to unmask the hidden presence of coloniality in the physical manifestation of cultural villages. In the same vein, I seek to use the theory to unmask coloniality in current conceptions of disability, and thereby advance the agency of those with disabilities so that they can dismantle oppression, specifically within the context of higher learning. As has already been highlighted in Section

1.8, the uniqueness of the present study is that the Decolonial Theory is combined with Critical disability theory to make a theoretical framework that informs the study.

1.10 METHODOLOGY

Methodology involves the way in which a study is carried out in order to achieve its aims and objectives, and to answer its research questions. A detailed description of how the study has been conducted, including the philosophic foundations and how data has been analysed, is given in Chapter Four. Providing further detail is not considered necessary in this introductory chapter, because there is a full chapter on methodological considerations. Thus, a brief description of the research design, case study, methods of collecting data, and how the participants were sampled, will be given in the sections that follow. This has been done so as to avoid repetition and monotony.

1.10.1 Research design

A mixed method approach was adopted for this study (Mertens, 2009; Tashakkori & Teddlie, 2010; Barnes, 2012). Among the reasons for this, is the ontological position of the researcher, as well as the fact that the design is commensurate with the transformative paradigm, which is central to this study (Mertens et al., 2013). The approach combines the quantitative and qualitative research designs. In the case of this study, the former lays foundation for the latter, and the qualitative research design is prioritised. This prioritisation promotes one of the primary objectives of the study, which is to privilege the voice of the participants. Qualitative research design is able to capture the multiple realities as constructed by participants. In this, the researchers has been influenced by Creswell (2003), who has argued that a qualitative research design is best suited to the study of the meaning and purpose of human action. This is because, within this design, knowledge claims are derived from the varied, constructed and interpreted perspectives of research participants. How the participants construct their social

reality is most important and thus, the qualitative design gives the required space to the voice of the participants and to their lived experiences of disability.

1.10.2 Case study

A single formerly advantaged institution of higher learning was used as the case study. A case study is defined by Gerring (2007, p. 20) as “the intensive study of a single case where the purpose of that study is – at least in part – to shed light on a larger class of cases”. This particular case study enables understanding issues of transformation in higher learning, which in turn involves how historically-disadvantaged social groups, who have previously been excluded, are presently included at the Institution. The Institution has exceptionalities, which are described in detail in Chapter Four. Using this particular Institution as the case study illuminates and sheds light on the phenomena under study in a much clearer way than a focus on another institution, for example, because it is outstanding in terms of its approach to disability.

1.10.3 Methods of gathering data

Data for the study has been collected through the survey method, and by way of in-depth interviews. The survey method is used to get broad opinions of the participants, and the interviews provide depth and thereby compliment the former method.

1.10.3.1 The survey method

Data was first collected using the survey method. The survey method is useful in shedding light on what the researcher seeks to understand within his study. Arguing that the method gives a broad grasp of what needs to be understood in detail later, Vidich and Shapiro (1955, p. 31) state that “Without survey data, the observer could only make a reasonable guess about

his area of ignorance”. Thus, the method seeks to enlighten the broad reflections on the phenomena to be studied.

Further merit of the survey method is that it enables sourcing data from a number of participants simultaneously. Thus, the method is a useful tool for providing breadth to the study. Jick contends that surveys “take the form of multiple scales or indices focussed on the same construct” (1979, p. 603). Through this method, ideas are sourced about the same phenomena to get understanding of it from different participants. The survey is important as it provides a broad sampling of the opinions of the participants, which is necessary as the foundation on which to build depth and more understanding through the interviews.

The questionnaire is commonly used to carry out the survey. It is designed to obtain quantitative data and employs the Likert scale (Jamieson, 2004). The questionnaires have been informed by this study’s research questions. The questions asked were about the same phenomena, and narrowed the focus to how these phenomena manifest within the individual programmes being studied. The questionnaires were distributed to Disability Unit staff, to students with disabilities doing their final year of study (fourth year), as well as to post graduates in specific professional degrees.

1.10. 3.2 In-depth interview

Qualitative data is gathered through the use of in-depth interviews. As defined by Babbie and Mouton (2001), this form of interview is a conversation in which the interviewer establishes a general direction and pursues specific topics raised by the respondents. By virtue of being conversational, it allows for free interaction between the researcher and participants, with the latter probing further for depth.

The specific type of interview trumps others because it allows the participants to speak for themselves (Babbie, Mouton & Prozesky, 2001). It also gives room for the researcher to probe further for specific information, which generates new revealing data on a subject (Babbie & Mouton, 2001; Legard, 2003). It offers active participation by the interviewer and also gives the interviewees voice, and makes allowance for both subjective and interpretive meaning (Rubin & Rubin, 1995). The in-depth interview is necessary for this study because there is a need to probe on the broad opinions that come out of the survey.

In-depth interviews are conducted through an open-ended interview guide. Such a guide has questions that are predesigned by the researcher. It is in line with what Robson (2002) proposes:

The structure of open-ended interview guide is distinguished by having those kinds of questions which can be modified, re-worded, explained to the interviewee, or omitted if the situation is deemed necessary. (p. 270)

By virtue of its flexibility, the open-ended interview guide is the most suitable data collection tool; it enables the qualitative data to flow as the participants can clarify the broad opinions. Thus, it is a good tool to collect finer details and in-depth information.

The in-depth interview has the drawback of the researcher asking leading questions. Creswell (2003) and Legard (2003) both assert that the validity and quality of research can be compromised by the researcher doing this. This means that, like all other data gathering techniques, in-depth interviews have limitations which come about as a result of the researcher inadvertently influencing the participants based on what he or she wants to hear. The researcher runs the risk of misinterpreting data given by informants because of the influence of preconceived viewpoints about the subject of research (Mikkelsen, 1995). It could be argued that subjectivity can simply not be avoided, which is argued by Berger (2003). According to him, knowledge production cannot be independent of the researcher.

Thus, I acknowledge that I could not be entirely objective while co-constructing knowledge with the participants in the process of interviewing them.

1.11 SAMPLING

Sampling is important because one cannot study an entire population. Ritchie (2003) describes the process that involves identifying and selecting relevant sources of data and the rationale for choosing a case or cases and rejecting others. Following Ritchie (2003), the sample units have been chosen because they possess particular features or characteristics which enable detailed exploration and understanding of the central puzzles which need to be studied. Thus, informed by the main research question of the study, the process of sampling involves choosing particular participants who can provide rich data on the phenomena under study. Such a sample is purposive. In the present study, those individuals sampled are students with disabilities and the Disability Unit staff because they are capable of providing rich data. The sample incorporates a variety in terms of category of disability, age, class, race, gender and experience working at the DU at the institution. It should be fore-grounded that the methodology that is used in the present study derives from the Western literature. It could be contested for a study informed by Decolonial theory as a theory that opposes the universality propagated in the Western episteme. Use of Western methods, research instruments and English language in an African context, might be viewed as contradictory. It is thus a limitation of the present study to use a Western episteme in a study informed by Decolonial Theory. The limitation will be discussed further in Chapter Eight.

1.12 CHANGE AND IMPROVEMENT NOT GUARANTEED

This study has been conducted with the objective and expectation of influencing positive change. However, the aim of change and improvement as described in Section 1.5 is not guaranteed. Policy makers' interventions are not guaranteed, even after data has been

generated and presented to them as a resource. Bloor (2004) observes that the policy community rarely make interventions based on researchers' studies, and tend to commission studies to confirm a preferred policy option instead. Unfortunately, they "delay a necessary but inconvenient intervention" (Bloor, 2004, p. 306). What this suggests is that policy makers prefer a top-down approach, which involves having their policies confirmed by research, basing policies on research that has already been conducted. Thus, policy makers might not intervene, even when a transformative study has been successfully carried out and recommendations provided.

Change and improvement may also not take place due to the paucity of participants. In the South African context of higher learning, students with disabilities are generally few (Fotim Report, 2011). This is difficult to contest because there are no accurate statistics as some of these individuals do not disclose their disabilities and do not utilise the DU services (Fotim Report, 2011). According to the Fotim Report (2011), the students with disabilities at the specific Institution might also be few (as a result of underrepresentation and non-disclosure) and possibly also the DU members who support them. Thus, though those participants could advocate for change, their voice might not suffice because of a perceived statistical insignificance.

Diversity and intersectionality within the student body with disabilities could also make change difficult. With the interplay of these factors, students with disabilities might have different obstacles and opportunities. For example, given that disability is experienced by the entire socioeconomic spectrum, challenges faced by those with significant financial resources are experienced differently to those who do not have the same resources. A result of this, the call for change by different individuals with disability could vary significantly. Mertens, Sullivan and Stace (2013) also observe that heterogeneity within disability leads to issues that

are not easily addressed (p. 498). Shakespeare (2010) observes, for example, that even if students with disabilities have the same impairments, their disabilities could be different and their needs unique. Thus, it might not be possible to change and improve the situation for all diverse individuals with disabilities across the three professional degree programmes selected for this study. And when the participants' opinions are divided, it might be a dilemma for those in power in terms of whose voice to listen to.

Change could also be compromised by the socio-political context within which it is proposed. The Institution itself, its authorities, the participants, the researcher and policy makers, all exist within a socio-political context characterised by massive inequalities inherited from apartheid (Howell, 2005) and colonial regimes. Given this complexity, change in favour of the minority group of students with disabilities might depend on what is valued politically. Devlin and Potheir (2006) note that issues of disability have to do with:

...issues of social values, institutional priorities and political will. They are questions of power, who and what gets valued and who and what gets marginalised... (p. 9)

This suggests that change is facilitated when need aligns with what is of political value at the time. Thus, though the participants might offer their voice for change and improvement, it might not be listened to, and there may be no intervention by the policy makers.

Another obstacle to the intervention called for by this study is the issue of 'reasonable accommodation'. Howell (2005) explains that what responsible stakeholders in institutions lay out as 'reasonable accommodation' has to do with what is possible for them, and they use policy to protect themselves. Thus, research with a transformative objective can be carried out, but if participants' recommendations are considered 'unreasonable', change might not be possible because policy already states what is considered 'reasonable'.

In conclusion, it is possible that change and improvement could come about as a result of this study, but it is also possible that the findings do not find their way into any meaningful intervention. The obstacles discussed are not meant to dispute that change could be possible or to contradict what the study seeks to achieve, but they are put forward to show that it cannot be taken for granted that when data has been generated and participants' plea for change has been relayed, there will automatically be an intervention. It has been foregrounded so that it is understood that the researcher cannot be held responsible for the desired change not being brought about.

1.13. CHAPTER OUTLINE

The thesis is divided into eight chapters:

CHAPTER ONE provides the setting, introduces the study by providing the background, outlining the problem and the rationale of the study, discussing the research aims, objectives and providing the research questions of the study, previous and other studies, as well as locating the study within an existing body of research. The chapter explains the uniqueness of the study, that is, how it contributes to the existing scholarship in terms of entry, professional learning and completion of programmes by students with disabilities in a specific institution. It discusses the preliminary literature on key concepts in the study, and provides a brief description of the theoretical framework and methodology for the study. The chapter concludes by explaining why the desired change may not necessarily take place.

CHAPTER TWO provides the literature review: It reviews the specific literature important to the study. It does so under different sections to understand disability, access and inclusion in higher learning, professional degrees, transformation and policy. The particular issues are reviewed in light of the entry and preparation of students with disabilities for professions at the specific Institution. Limitations and strengths of previous studies are

identified. The purpose of identifying the former is to isolate areas that the present study and other research could address.

Literature on inclusion is reviewed from a broad global perspective, and also from the South African context specifically, to see how the former influences the latter. The review provided of professional degrees is meant to provide an understanding of what is meant by professional knowledge. This can illuminate how the inclusion or exclusion of persons with disabilities impacts professional learning and completion of the specific programmes at the examined Institution.

CHAPTER THREE is about the theoretical considerations of the study, that is, the theoretical framework built on the concepts from Critical Disability and Decolonial Theories which anchors the study. In this chapter, different concepts from the two theories are used to illuminate issues of disability, oppression, inclusion and exclusion of students with disabilities in higher learning. The theories are also used to examine the inclusion and exclusion students with disabilities face when they enter the work settings for integrated learning for field practice. The concepts from Decolonial Theory also explain how students with disabilities could resist and challenge the oppression in order to engender change. Importantly, the theories are also critiqued in terms of their limitations.

CHAPTER FOUR describes the methodological considerations that have been used to carry out the study. The chapter explains how the study is designed and why this is so. The philosophic assumptions informing the study and the designs are described. Methods used to collect data are presented and discussed, along with how data is integrated, analysed and legitimated. Ethical considerations are also described.

CHAPTER FIVE provides the quantitative analyses and the findings. It presents the accounts of the participants, discusses the qualitative results, and provides the findings with regard to how obstacles are confronted and opportunities presented in entry into the specific professional degrees. The chapter also discusses how these findings illuminate the problem of the study.

CHAPTER SIX presents the quantitative analyses and the findings in terms of the broadly-espoused opinion of the participants. The chapter relays the accounts of the participants, discusses the qualitative results and provides findings on how obstacles are confronted and opportunities presented in professional learning, both at the institution and at the settings of integrated learning. It also connects these findings to the problem of the study.

CHAPTER SEVEN provides the quantitative analyses and the broad opinion in terms of the need for change. The accounts of the participants are presented and qualitative results are discussed. The recommendations for change and improvement provided by the participants are shown. How this addresses the problem of the study is then also discussed.

CHAPTER EIGHT concludes the study. It reiterates the primary thesis of the study, surveys how the main research questions and the aim of the study has been addressed, and defends the project's originality and contribution to scholarship. The limitations of the study are also discussed, and recommendations for further research are all provided to conclude the study.

CHAPTER TWO: LITERATURE REVIEW: INCLUSION INTO PROFESSIONAL DEGREES: OBSTACLES AND OPPORTUNITIES

2 INTRODUCTION

This chapter reviews existent literature to better understand and make meaning of the specific concepts and issues related to the present study. As I have intimated in the introductory chapter, the historical conception of disability from the past to the present, access and inclusion in higher learning, professional degrees, transformation and policy will be further reviewed in this chapter. The review follows Leedy and Ormrod (2013), who argue that a literature review involves a peripheral exploration, and then a re-examination, or closer look, at what others have researched in specific areas. The limitations and strengths in the existent literature are identified and highlighted, which assists me to position the present study within the context of the others, and to convey an understanding of its specific problem (Leedy & Ormrod, 2013).

Still following Leedy and Ormrod (2013), the review is done in a systematic way. The key search terms related to the topic of the study, namely disability, policy, professional degrees, professions, transformation, inclusion, entry and graduation, were used to systematically search for dissertation abstracts, journals in disability, and articles from Google Scholar. Relevant books published between 1955 and 2016, as well as policy documents, were searched for both online and from the library, and consequently used as sources in this review of related and relevant literature. The review examines the global context and then narrows its focus to the South African one, where the study is located.

2.1 CONCEPTUALISATION OF DISABILITY FROM THE PAST TO PRESENT

Disability has been conceptualised in different ways within the period spanning the pre-colonial to the present. The earliest conceptions under examination, namely those from a pre-

colonial era, the understanding in African societies were informed by the beliefs people held, and these resulted in either positive or negative conceptions of disability. Among other scholars, Kisanji (1995) has argued that in traditional communities dominated African traditional beliefs in witchcraft, on one hand disability was understood as punishment or a curse, or as a result of having been bewitched for wrongdoing by parents. On the other, those with disabilities were considered innocent victims of fate and were accepted as a gift from the supernatural. As a result of the former understanding, those with disabilities were ostracised, discriminated against, and treated with cruelty. In communities which embraced the latter view, persons with disabilities were over-protected, patronised and exempted from doing chores (Murphy, 1990). This gentler approach was commonly found in Shona and Ndebele communities in Zimbabwe (Devlieger, 1998) in Zambia (Phiri, 1979) in Wapogoro in Tanzania (Aail-Jileck, 1965) and in Nigeria (Onwegbu, 1977).

In contexts of higher learning, students with disabilities are often be pitied and understood as charity cases when the view is traditionally informed. The limitation of this stance is that it only emphasises religious and cultural factors as informing conceptualisation of disability in African societies. Oliver and Barnes (2012) argue that this understanding is derived from small-scale studies carried out in a few rural communities, and is therefore reductive. Understanding disability and the conceptions of disability across all African societies is an enormous undertaking, and much more research on the topic is necessary.

In Western societies, the conception of disability has varied from one culture to the other (Stone, 1984). During the feudal system, societies' economies were based on primitive farming and though that required manual labour, it is stated that disability was not emphasised as people worked collectively as members of society (Oliver, 1990). However, during the industrial revolution, disability emerged because members of society had to work

in factories, and those with physical disabilities were often excluded from the workforce. Scholars like Finkelstein (1980) and Oliver (1990) cast this as a historical-materialist conception of disability, because it was informed by the demand for production and market forces of the day. A critique of this conception from a post-structuralist perspective is that only economic determinism is used to understand disability, and individual agency is overlooked. The historical-material conception of disability is therefore reductive, because those with disabilities are not merely passive victims of oppression.

During the colonial period, the dominant view was that disability was an individual problem. It was a tragedy that limited individuals with disabilities from functioning within a ‘normal’ society. The period featured professional intervention such as rehabilitation, medical correction, and institutionalisation so as to give charity, care and special education in order to ‘normalise’ those with disabilities (Barnes & Mercer, 2010). It can be argued that this charitable understanding of disability results in the capabilities of those with disabilities being undermined. Within this paradigm, intervention is directed towards individuals rather than towards transforming the social contexts to include all (Oliver, 1990). Furthermore, individuals with disabilities are deprived of their own voice, which is subdued by those of the ‘professionals’, who also experimented with their bodies (Grech, 2015). As the independence of those with disabilities is being sought, it is important to dismantle the view of disability held during the colonial period, because it perpetuates their oppression.

Disability has also been conceptualised in a variety of ways in the postcolonial world. It should be foregrounded however that because the study is informed by Decolonial Theory, which is discussed in detail in the next chapter, the term ‘postcolonial’ is not being taken to signify a period free of colonialism. This is because colonialism has manifested differently since the ostensible ‘independence’ gained by so many countries from their colonial rulers,

particularly in the Global South. The ‘postcolonial’ period, for the purposes of this study, has been understood in light of the views of Lomba (2001) who argues that the period has not been characterised by the end of colonialism, but has been marked by new forms of colonial domination and its systemic legacies, which are often invisible and therefore difficult to eradicate. The period should therefore be understood as the time from colonialism to the present. During this time, a conventional understanding of disability has been established, and this, in turn, is being critiqued and reworked by Critical Disability scholars. Justifying the present criticisms, Grech (2015) argues that disability, as well as persons with disabilities, their voice, as well as other central elements of a conception of disability tend to be over-simplified, over-generalised, and homogeneous and de-contextualised within the Global South. The echoes of colonialism should not be overlooked. An awareness of its legacies helps one to understand that disability existed; it was constructed and constituted during colonial times. Thus, the strength of the currently-espoused understanding of disability is useful for the present study for a deeper understanding of disability and how it evolved. The discussion now turns to models of disability which enable understanding of how disability could be understood in specific social contexts and consequently, inform understanding of exclusion or inclusion of those with disabilities.

2.1.1 Models of disability

There are specific models that have been and are still being used to understand disability. They include, among others, the individual, the social (Oliver, 1990), the social relational (Thomas, 2004), biopsychosocial (in the context of ICDH and ICF context) (WHO, 1980; 2014) and the affirmative model (Swain & French, 2010). All these models are helpful in understanding how disability is conceptualised in specific contexts. However, in the present study, only the individual and social models are discussed. They are most relevant because

they illuminate how students with disabilities' entry into the specific professional degrees and their professional learning could be hindered or promoted in higher learning, both in general and at the specific Institution under study. The two models are discussed in the following section, starting with the individual.

2.1.1.1 The individual model

In the individual deficit model, popularised in the 1960s, disability is viewed as a tragedy that afflicts an individual and is associated with flawed minds and bodies, crippled people confined to wheelchairs, victims of conditions such as cerebral palsy, deafness, blindness and varieties of mental illnesses (Barnes & Mercer, 2003). This understanding results from using the able-bodied 'normality' as the yardstick for judging people. Within this paradigm, those with impairments would be cast as less normal, and therefore less human (Barnes, Oliver & Barton, 2008). The limitations experienced by an individual with a disability are thus understood as resulting from the impairment that the he or she has (Goodley, 2011). The interventions based on the individual model are also critiqued because of decisions made for those with disabilities by the professionals. It could be argued that when disability is understood in terms of this model, could on one hand increase hindrances to inclusion, and on the other, promote it for students with disabilities in higher learning. They could be excluded because their impairments are viewed through the lens of inability, which would result in negative perceptions of their capabilities and a focus on their limitations, inadequacies, which can all be compounded by the use of disempowering and disabling language (Brisenden, 1986). Thus, inclusion in terms of entry into professional degrees and professional learning could be less likely.

However, the charitable aspect of this view of disability could result in the promotion of students with disabilities' learning. This approach could result in intervention, provision and

support meant to overcome an individual's impairment and meant to 'normalise' them. For example, they could be provided with relevant assistive devices as a way to overcome their impairments, which could also assist their learning. This form of intervention has however been heavily critiqued by disability activists (Barnes & Mercer, 2005; Oliver, 1990, 1996) from the 1970s to date. The argument of its critics is that when disability is conceptualised in this way, the social contexts that are oppressive are overlooked. The discussion moves to the social model in the section below.

2.1.1.2 The social model

The strong social model, which has been thus referred to by Shakespeare and Watson (2001), was initiated by persons with physically disabilities in the 1970s. They argued that their disadvantage was imposed on them by society, and not by their impairments (UPIAS, 1976). It could be argued that this model has saved disability movements and its strength originates from activists with disabilities, who seek social change for themselves. Discussing disability as a social construct, Oliver (1990) asserts that oppression is in socio-cultural contexts, and that the emphasis should be on removal of the barriers in social environments. It is further argued that this social model promotes persons with disabilities' sense of self worth and collective identity (Crow, 1996), and it counteracts exclusion and discrimination (Gallagher, Connor & Ferri, 2014). What it emphasises is that when barriers have been removed in the environment, persons with disabilities become included because they can access the social and physical environment from which they are traditionally excluded. In view of this, Gallagher et al. (2014) argue that the social model does not emphasise biological determinism, which reinforces that disability does not result from impairments but from a social construct which ensures that some quadrants of society remain out of reach for some.

Like the individual model, the social model has also been critiqued. Mainly, what has been contested is the separation of disability and impairment. Critics like Crow (1996) and Corker and Shakespeare (2002) argue that the effects of impairment are overlooked within this model, and persons with disabilities are deprived of recognition of their experiences resulting from impairments. Shakespeare's (2010) argument is that not all limitations are in the environment. Furthermore, Anastasiou and Kauffman (2011), who are vocal proponents of Special Education, argue that the social model seeks inclusion at the expense of effective instruction. It could be argued that in the context of this study, though the model seeks non-discrimination, it could limit the effective professional learning of students. Shakespeare and Watson (2001) propose that the model should be entirely abandoned. However, in defence, Finkelstein (2004) and Oliver (1996) argue that emphasis on impairments as limiting presents a danger of bringing back the individual model, which is oppressive to people with disabilities. Against that background, it could be argued that the criticism might present a dilemma for stakeholders in higher learning who have moved on from the individual model. It could influence them to move back and forth between the two models to include all diverse students at entry and in professional learning.

The biopsychosocial model was once proposed as one that could reconcile both models (WHO, 1980). This view was however roundly critiqued by disability activists, who argued that it was no different from the individual model because it starts from the "analysis of bodily function and activity [...] rather than [being] grounded in social and political inclusion" (Barnes & Mercer, 2004, p. 8). The debate surrounding the social model is ongoing, and critical disability scholars like Gabel and Peters (2004), Tremain (2005) and Goodley (2013), argue that disability and impairment are inseparable. This is discussed in detail within the context of Critical Disability Theory in Chapter Three.

Despite the criticisms of the social model, in the present study, it is nevertheless used to guide the understanding that barriers for those with disabilities are in the social contexts, and not as merely resulting from their impairments. It informs understanding of how obstacles for access into specific professional degrees and in professional learning are confronted by students with disabilities at the Institution. Importantly, the model is being used as a tool and not a theory (Oliver, 1990). I am standing on the shoulders of Oliver (2013) as the disability giant, and I view the strong social model to be useful because it helps to understand that disability is a social construct, and as such, it can be deconstructed.

When the stakeholders' view of disability is informed by the social model in higher learning, students with disabilities viewed as 'traditional students' (DoE, 2001a), access to higher learning can be promoted so that they are empowered. When considered as 'traditional students', individuals with disability are included within other disadvantaged social groups, who should be included as part of the agenda of transformation (DoE, 1997). In terms of professionalisation, the stakeholders would understand that structures and practices at the institution should be transformed for all diverse students to access learning. As South African higher learning in general and the Institution under study is the focus of this thesis, it is important to understand which models are used at present, which will be further discussed in the next section.

2.1.3 Disability models used in South African higher learning

In the South African context of higher learning, the individual model is still dominant, and this has been observed by Fulcher (1989), as well as and in the Fotim Report (2011). It has also been argued that the social model has been adopted (The Integrated National Strategy (INDS), 1997). What this has enabled is a view that disability is a human rights issue (Swartz & Schneider, 2006), and the barriers that are both attitudinal and physical are understood to

be disabling (Fotim report, 2011). It could be argued that when the two models are being used simultaneously, responsible stakeholders can move from one model to the other to understand disability within shifting contexts at specific times. While the individual model can help those with disabilities access provision, the social context might remain untransformed because the intervention would be directed towards individuals rather than at the environment in which individuals are expected to inhabit. Since South Africa seeks the transformation of its practices and structures to be inclusive within higher learning, the present study seeks to understand which model is used at the Institution in question so as to inform the transformation which is intended. The discussion now moves from models of disability to inclusion, which is key to the study, as it informs an understanding of whether or not students with disabilities are included in entry and professional learning at the Institution.

2.2 INCLUSION

Inclusion is a broad concept which can be understood and defined in different ways. An understanding of this topic needs to take into account matters such as different socio-economic classes, as well as political and social perspectives. For the present study, inclusion is important internationally and in South Africa because it is now considered a human right, and there has been a professed commitment to include all. Ainscow et al. (2006) have developed six ways in which inclusion can be conceived of. Of interest to the present study is the narrow and broad ways of understanding the concept. Narrowly, inclusion is concerned with the inclusion of groups that are vulnerable to exclusion, such as those with disabilities, in the mainstream. However, broadly, it focusses on the inclusion of all. The broad conception incorporates many “identity markers”, such as “poverty, gender, language, migrant status and sexual orientation” (Walton, 2016, p. 53). I subscribe to a broad conception of inclusion. However, in the present study I focus on students with disabilities specifically and the reasons for that are provided in Chapter One, under Section 1.4. As

South Africa is said to be “the most unequal country in the world” (Walton, 2016, p. 53), I am a proponent of the agenda of equity that recognises the need to address social disadvantage that is experienced by all diverse persons, including those with disabilities. Miles and Singal (2010) noted that those with disabilities have continued to be excluded from the “international agenda and planning” (p. 5), despite the broad initial vision and the ambitious rhetoric of the International Education For All (EFA). Importantly for the present study, broad inclusion of all is viewed as essential, especially when it considers students with disabilities. The following review to understand inclusion in higher learning and in the South African context starts broadly by looking at the international contexts.

2.2.1 Global initiatives of inclusion

Inclusion of all people, particularly those who are disadvantaged, is a global concern. As a result, there have been and there are still efforts that are being made globally to include all people in mainstream education and employment. The section that follows reviews literature on global efforts in terms of the international instrument, the United Convention on the Rights of Persons with Disabilities.

2.2.1.1 The United Nations Convention on the Rights of Persons with Disabilities (UNCRPD)

The United Nations Convention on the Rights of Persons with Disabilities (UNCRPD) was developed to include persons with disabilities globally. It is an international legal instrument that provides a framework for the rights of people with disabilities, and categorises those with disabilities as members of a social group in their own right. It asserts that states should recognise the right of persons with disabilities, and there should be equal opportunity and no discrimination. The UNCRPD also addresses inclusive education for persons with disabilities, stating that states have to ensure that there is an inclusive education system at all

levels (UNICEF, 2008). It could be argued that inclusion has become a human rights issue as a result of the Convention. Thus, legally, an individual cannot be denied inclusion at any level. The countries involved had to sign the UNCRPD as a symbol of their commitment, and this commitment is addressed in the section below.

2.2.1.1.1. Adoption and ratification of UNCRPD

UNCRPD was adopted by the United Nations in 2006 and was ratified by seventy-six countries (UNICEF, 2008). These countries therefore formally agreed to the instrument, officially adopted it, and pledged to give people with disabilities their rights without discrimination, and to provide an inclusive education system. They also had to formulate legislation and policy frameworks as informed by the Convention. South Africa ratified the UNCRPD in 2007. Of particular interest is that legislation and policies of inclusion such as the Education White Paper 6 (DoE, 2001b) were developed before the ratification. It could be argued that the Convention simply reinforced what was already in place.

While the UNCRPD is an important global initiative of inclusion, it does not solve the countries' internal problems. In South Africa, inclusion is problematic (Carrim, 2002) and the unemployment levels of persons with disabilities continue to rise (Swartz & Schneider, 2006). In essence, despite the Convention, conditions within specific contexts dictate what happens on the ground. The UNCRPD can be seen as a top-down approach, in which what it enshrines in its legislation regularly contradicts the realities on the ground. Thus, despite its radical proposals, the UNCRPD may not help to address the socio-economic and political problems of a nation, which hinder the full inclusion of all diverse persons and those with disabilities. It could be argued that the international legal instruments, legislations and national policies might all be in place, but each country faces different challenges that could hinder the implementation of these instruments. Thus, the extent to which the international

legal instruments result in the inclusion of all people, incorporating those with disabilities, could vary from country to country. It is those on the ground with lived experiences of barriers that need to be actively involved to make the instrument work for them. Inclusion is now discussed in the context of higher learning in the United Kingdom, and ultimately the focus shifts to the South African context.

2.2.2 Inclusion in higher learning in the United Kingdom

The researchers in the Fotim Report (2011) viewed inclusion in the United Kingdom as an example that could serve as the benchmark for South Africa, in terms of international standards and practices to support of students with disabilities. South Africa seeks to emulate the UK's inclusion of students with disabilities in higher learning to the extent that a team from South Africa went to visit DUs and universities in the UK to learn from the stakeholders there (Fotim, 2011). The team reported that the support, services and processes are well established, and ensure that students with disabilities participate and succeed in their learning. Given this study's concern with the inclusion of students with disabilities in specific professional degrees, as well as with these students completing them to graduate into the relevant professions in time, a review of literature on inclusion and policy in the UK is important. Policy in the UK is reviewed later in the Chapter in Section 2.9. Caution will be applied however, given that this particular study is informed by the Decolonial Theory, and emulating the West is contested as it is viewed as perpetuating the oppressive zones of being and non-being (Shahjahan & Morgan, 2016). The concept of zones is discussed in detail in the next chapter, and the limitations of reviewing literature on UK will be discussed (as a limitation of the study) in Chapter Eight.

The UK's implementation of inclusion, which is considered an international standard, had challenges in the beginning. Barnes (1991), along with Leicester and Lovell (1994), argues that there was unwillingness and resistance to include specifically those with disabilities within this context. Riddel, Tinklin and Wilson (2005) report that students with disabilities played a role in their inclusion by raising their voice to bring about change. It suggests that inclusion of all diverse students in higher learning does not find easy expression in practice. However, it can be achieved when those with lived experience of disability are actively involved in instituting change. Chataika (2007) observes that the implementation of inclusive practices in the UK, there was a more proactive and standardised approach in relation to the needs of all students. It was through their own efforts (their 'proactive approach') that students with disabilities as part of diversity became included. South Africa could learn from how inclusion in the UK evolved to be where it is today.

Ways of supporting students with disabilities in higher learning are different in South Africa and the UK. As reported in the Fotim report (2011) a team that visited DUs and Universities in UK found that DUs there operate differently. Responsible stakeholders play a coordinating role in which they link with other supporting units so that students with disabilities solicit support from those units of their own volition. On the contrary, in South Africa, students with disabilities go to the DUs for support and assistance. The UK's approach helps students with disabilities to take responsibility for their learning. Since the Fotim report presented its findings five years ago, there has been time for these findings to alter South African practices on the ground. The present study seeks to understand whether or not its recommendations for support are being practiced at the Institution. Despite the UK's advancement in terms of inclusion of all diverse students, including those with disabilities in higher learning, barriers are still experienced. It is further discussed in the section below.

2.2.2.1 Barriers to inclusion in higher learning in United Kingdom

Literature reveals that there are also barriers to inclusion in higher learning in the UK. Riddel, et al. (2005) study, which was carried out across eight institutions, recommended improvement with regard to support services and staff development, among other things. What this reveals is that there were barriers relating to those areas. The recommendation to improve staff development also suggests that there are some limitations to the teaching and learning of students with disabilities or attitudinal barriers in staff. Confirming this, Lloyd's (2008) study reveals that the curriculum is still exclusionary to students with disabilities. Inclusion has therefore not been flawlessly instituted in the UK. Though Riddel et al. (2005) and Lloyd's (2008) studies are not the most recent, and changes may have since been introduced, what they reveal is that inclusion in the specific context is also not without barriers.

The commercialisation of education in higher learning is another barrier to inclusion in higher learning in the UK. Holloway (2001) has argued that university "education has become an increasingly competitive business" (p. 606). When education is viewed in this way, inclusion of all might be compromised. It could be argued that students from low-socioeconomic classes, who do not have adequate funding, as well as students with disabilities whose learning is generally expensive due to the highly-priced equipment they require, might be excluded. As the UK is viewed as a benchmark (Fotim Report, 2011), stakeholders in South African higher learning might have viewed the commercialisation of education that has taken place there as a legitimate development. There is already a report by CHE (2000) which states that in previously advantaged institutions of higher learning in South Africa, the focus is on "paying" programmes[...] excessive marketisation and commodification with little attention to social and educational goals" (p. 6-7). This trend

could defeat transformative efforts, since particular programmes could be reserved for the paying elite.

The review turns to inclusion in South African higher learning specifically. Access is also reviewed as it is inseparable from inclusion. Inclusion and access are important to understand because they undergird an understanding of entry into the specific professional degrees, professional learning and completion of the programme at the Institution by students with disabilities. Inclusion in the context of the Institution could also have been reviewed to understand how the students with disabilities are included or excluded. However, for purposes of confidentiality and anonymity this has not been done. Some web material has some identifying information and the Institution's identity could be inadvertently revealed.

2.2.3 Inclusion in South African higher learning

Access is a complex issue that should not be narrowly understood to simply mean 'the opportunity to get in'. The complexity is in that access is inseparable from both participation and success. With specific reference to Black students, Akoojee and Nkomo (2007) explain that access with participation sought deracialisation so those students from historically-disadvantaged groups could also have access to institutions from which they were formerly denied entry. They argue that presently the notion of access has been bound up with that of success, with the objective that those students do not only access the specific institutions, but also succeed.

In post-apartheid South Africa, there has indeed been an increased opportunity for access to higher learning by diverse students, including those from formerly-disadvantaged social groups such as Blacks, women, and those with disabilities. This has occurred in response to the transformational agenda of redressing the inequalities of the past, hence the broadening of equal access to all in higher learning (CHE, 2008) Studies such as those conducted by CHE

(2010, 2013) and Carrim and Wangenge-Ouma (2012), whose object of analysis was race and gender, reported an increased enrolment of diverse students in both historically-disadvantaged and advantaged institutions of higher learning in South Africa. The National Plan has been used to facilitate that access. Students with disabilities are also considered as part of the group referred to as ‘traditional students’, who should have access to higher learning (DoE, 2001a). Although it has been contended that the inequalities for those with disabilities start in earlier schooling (Howell, 2005), Howell (2006) argues that there have been changes in terms of attitudes in schooling, and that this has resulted in those learners having better opportunities for access to higher learning. It could be argued that diverse students now have significantly increased access to higher learning. However, for students with disabilities, access is still limited, as has been shown. Mere access is insufficient, equity is also essential, and this enhances full participation and success, especially for the formerly-disadvantaged. There are specific barriers confronted specifically by those with disabilities which limit their access. One of these is that stakeholders in higher learning have low expectations of the potential and capabilities of these students (Howell, 2006). In addition, “policy warns against institutions recruiting students who do not have potential to pursue further study [...] and [it is suggests that institutions] not retain students who do not have chance of success” (DoE, 2001a, p. 25). This clause could be cynically employed to protect the responsible stakeholders in higher learning institutions, and enable them to exclude at entry those students whose capabilities they do not believe in. Students with disabilities’ exclusion could then arguably be justified. Also, a lack of funding enabling the support of specific categories of disabilities (Matshedisho, 2007) along with infrastructural barriers for those with physical disabilities (Engelbrecht & de Beer, 2014), hinder students with disabilities’ access to higher learning. If access to higher learning in general is limited, the

same would inevitably be true for the specific professional degrees. The study seeks empirical evidence to support this claim.

South Africa is said to be the most advanced in terms of inclusion within the broader African context (Chataika, 2007). However, with specific reference to those with disabilities, the Fotim Report (2011) relates that those with disabilities are not fully included. This is complicated by an awareness that in the country's segregated past; higher learning was never segregated in terms of disability, only along racial lines (CHE, 2000). It was only at the level of schooling that there was segregation, with special schools for learners with disabilities and mainstream schools for those without them (Howell, 2006). In the democratic present, there has been a move for all students, with and without disabilities, of all races and genders, to learn together in formerly-advantaged and formerly-disadvantaged institutions of higher learning (CHE, 2000). It is important for the present study to understand why students with disabilities still experience exclusion within these institutions. For the purposes of this study, I am particularly interested in how they are excluded from the professional degrees. As is the case in the UK, these barriers might not be insurmountable, and this is pursued further in the following section

2.2.3.1 Barriers to inclusion in higher learning

There are, in general, significant barriers to inclusion of all diverse students in South African higher learning. Of significance are infrastructural barriers. It is because the built environment in South Africa has not been built with all diversity in mind, and this has resulted in its inaccessibility for many. The built environment is often inaccessible to students with disabilities, and this limits their learning. In institutions of higher learning, there are still some lecture rooms, libraries, toilets, door handles or lifts that are still inaccessible to students with physical and motor limitations (Engelbrecht & de Beer, 2014) and visual loss. In cases where there are accommodations within the built environment, they often take the

form of the bare minimum, and are at the back of buildings (Hall & Belch, 2000). It limits the choices of movement of students with specific categories of disability. However, there have been instances of retrofitting and building of new structures as informed by the principles of UD taking place in some institutions (Fitchett, 2015). While there is improvement, some institutions have specific buildings that are preserved for their architectural designs and heritage (Chipkin, 1993). These are not permitted to be altered or retrofitted. At places of work, the built environment is also inaccessible to people who employ wheelchairs and to those with total visual loss. However, retrofitting is being done in some work spaces. Swartz and Schneider (2006) explain however that while this is so, accessibility to those with disabilities might not be achieved soon enough because of the costs involved. In addition, there are also restrictions imposed by National Buildings Regulations which should be followed (SANS, 2011), and these do not apply to institutions of higher learning.

Public transport is another major barrier for the inclusion of persons with disabilities in South Africa. This applies to the general populace and students with disabilities are also affected by this because professionalisation include field-practice at integrated setting for learning.. Buses, cars and trains are still inaccessible for people who use wheelchairs and those with visual limitations (Parliamentary Monitoring Group South Africa, 2013). This is more pronounced in rural areas, but in urban areas there are still very few accessible transport modes (Khuzwayo, 2011). It could be argued that despite the agenda of transformation, when infrastructure like the built environment and transport are still inaccessible, inclusion of all students has simply not yet been attained. The acquisition of professional knowledge specifically might also be limited because those with disabilities may have difficulties accessing learning venues and getting to lectures in time. And as Odendaal-Magwaza and Farman (1997) report, most field practice is done off-campus, and this presents a challenge to students with disabilities. Even if transport at the institution is accessible, their field practice

could suffer as a result of public transport and their professionalisation could be negatively affected.

Higher learning stakeholders' low perception of the capabilities of students with disabilities is another barrier for inclusion in South Africa. Riddel (1998), in agreement with Howell (2006), contends that stakeholders doubt the potential of students with disabilities to succeed within a context of higher learning. Such students are often therefore excluded from programmes that are believed to be academically demanding (Odendaal-Magwaza & Farman, 1997). It could be argued that this reflects the reproduction and continuation of past conceptions of disability, in which it was associated with incapability. With this perception, intellectually capable students with disabilities could be excluded from programmes for which they qualify because of these assumptions. Since perceptions take a long time to change, those with disabilities could be denied entry into specific professional degrees because of low expectations of their projected academic performance. Woldefendale (1996, cited in Howell, 2006) argues that, "Eligibility for higher learning is, in general, defined by fairly rigidly defined processes that are effective in filtering out the eligible few from the ineligible many" (p. 166). This implies that exclusion starts as early as the application process, because only those who have the credentials in terms of academic aptitude qualify for higher learning. Students with disabilities might be susceptible to this form of exclusion, and their case may be exacerbated in ways already highlighted, when their "potential [...] to cope within the existing institutional environment" (Riddel, 1998, p. 213) is also underestimated. Given this, the present study seeks to understand how students with disabilities confront the obstacles in terms of entry of the three specific programmes and how they confront them in professional learning. Ultimately, as I have stated, I want to discover how these obstacles impact their completion of the respective programmes. It is evident that

despite the efforts of inclusion, barriers continue to be faced. It is important to review radical inclusion to understand the extent to which it could facilitate inclusivity of all diversity.

2.3 RADICAL INCLUSION

Radical inclusion involves a social reconstruction of what was the original idea in the project of inclusion conducted by UNESCO (1994). It is a new way of thinking about inclusion in which contexts (of education, in this case) are totally transformed to be inclusive to all students. It asserts that all students should be able to access, participate in, and succeed. In the context of inclusive education in schools, Slee (2011) argues that the concept has been misconstrued as there has been an “inauthentic engagement with the aspirations of the original idea”, resulting in many versions of inclusion that retain the “embedded assumptions about individual defectiveness and special needs education” (p. 155). That implies there has been a move away from idea of the original inclusive education. As a result, inclusion is being thought of in terms of the support and accommodation of those with disabilities in the mainstream, and meeting of their individual needs. When this has been done it is “ticked off and measured” (Walton, 2016, p. 56) as inclusion. It should be fore-grounded that while the proponents of inclusive education as amongst others, Slee (2011), Greenstein (2014) and Walton (2016) focus on schooling, their arguments are considered to also apply to inclusion broadly and even in higher learning contexts. It is because the two systems of education have porous boundaries and schooling is the base for higher learning. As the systems influence each other, what happens in schooling has influence in higher learning. Furthermore, inclusive education and inclusion are used interchangeable.

While it is believed that meeting all diversity in the mainstream schools its inclusion, the structure of school in itself is heavily critiqued. Greenstein (2014) argues that it is structures in themselves which are exclusionary because they are informed by functionalist models and

neoliberal policies. Neoliberal understanding ties education to economic productivity and marketisation. As productivity is associated with able-bodiedness, those with impaired bodies might be alienated. It is in that respect that functionalist approach and neoliberalism are critiqued for being disablist to students with disabilities (Devlin & Potheir, 2006). Furthermore, as so informed by the neoliberal policies and functionalist approaches, tests are used as measure for meeting educational standards and failure is viewed as pathological by teachers and school authorities (Greenstein, 2014). Those with disabilities, who already have a limitation, might be excluded in terms of the competitive demand of performance for all students. Dudley-Marling (2004) argues that learners with disabilities fail to achieve in the context of standardised curriculum, assessment and instruction, targeted to 'normal' learners and when they fail, their failure is situated in their minds and bodies rather than the schooling practice which produces it. Basing on Dudley-Marling's (2004) argument, when failure is pathologised, intervention might be directed on individual learners rather the schooling context which is exclusive. Oliver (1990) argued that when disability is located in an individual, intervention is directed on the individual rather than on an oppressive social context. Thus, while mainstream schools are viewed as inclusive structures that bring together all diverse learners together, they do not allow for full participation and inclusion of all.

Single reality epistemologies representing the dominant culture characterise the curriculum in the mainstream schools. While mainstream schooling is supposed to be inclusive to all diverse learners, learners with and without disabilities who do not have the dominant cultural background, could find learning uncomfortable and the context difficult to acclimatise to. The particular learners could be marginalised because they bring a different culture and knowledge from their homes (Greenstein, 2014). In such a context teaching and learning could be favourable to learners from the dominant culture. There could be lack of

full participation and exclusion for learners from other cultural backgrounds. An inclusive education within such contexts is challenged and troubled by Greenstein (2014). She argues that policies call for inclusive education in an oppressive structure rather than aiming to transform the structure in itself. It implies that it is the ethos of the mainstream school that should be transformed first, if there has to be inclusion of all diverse learners.

In the context of South Africa, making schools accessible to all, to respond to all diverse learners' learning needs is still viewed as inadequate (Walton, 2016). The version of inclusion proposed is of a radical reconstruction which includes equity, identifying obstacles to access, participation, belonging, curriculum, facilities and support. Individual accommodation might not achieve all of that (Walton, 2016). It is in that respect that Greenstein's (2014) argues that a total overhaul is therefore required, which would involve a radical transformation of the contexts so that they include all students. As noted by Walton (2016), it requires a "return to the drawing board and a completely new way of thinking and doing education" (p. 57). Whilst Greenstein proposes radical inclusion in the context of schooling, the propositions could also apply in higher learning. Mathopha (2007) argues that institutions of higher learning are first and foremost mainstream education institutions; which also endeavour to address barriers to learning and participation of their students. Bell (2013) notes that in the South African context, inclusive education started in schooling, to roll into higher learning. Radical inclusion could also start in schooling and consequently roll into higher learning.

The practical implementation of radical inclusion in the South African context of higher learning might not be without challenges though. There is tension between neoliberalism, within which institutions of higher learning exist, and the transformation agendas and goals they are supposed to implement (Badat 2015). With the two conflicting ideas of neoliberalism

and transformation influencing the structure of higher learning, radical inclusion might be difficult to implement. Wolpe (1991) argues that the economic resources required to address the inequalities of the core structural conditions of the legacy of Apartheid in Education sphere; are not available and will not be in the near future. Meeting transformational agendas in institutions of higher learning within such a context could be limited by funding. It is a situation that has implications for economic resources which are currently over-stretched to address all transformational issues. Badat (2015) confirms it when he argues that South Africa has low state funding for higher education. While there has been an increased access of diverse students to higher learning, the Government subsidy has not increased. Furthermore, though NSFAS for disadvantaged students has been increased, it is still not enough (Badat, 2015). Without adequate funding, radical inclusion in which all diverse students, including those with disabilities are fully included might be difficult to achieve. However, I still strongly propose for a move geared towards radical inclusion because if there is a total overhaul and transformation of the system of higher learning, all students could be genuinely included. The review turns to the issue of equity below.

2.4 EQUITY

Issues of equity are important to review in the present study as the goal of the democratic government is to address the inequalities of the past. Both in higher learning and workplace, equity to include all persons has been made. For consideration in education in higher learning specifically there has been an enactment of policies, among others the White Paper 3: Transformation in higher learning (1997), which specifies the imperatives of equity. The specific policy has been discussed in detail under the Section 2.10.2, entitled Policy in South Africa.

Equity of access is addressed in a number of clauses in policy. It is stated that the goal of transformation in higher learning is to give fair chances of access to all students who have the potential. Furthermore, it states that there should be eradication of all forms of unfair discrimination (White paper 3: Transformation in higher learning, 1997). It implies all diverse students including those with disabilities cannot be denied access into higher learning. Thus, equal opportunity of access is given to all diverse students and those with disabilities specifically. It is argued that there has been increased access of formerly disadvantaged social group, as women, the blacks and students with disabilities (CHE, 2013) in South African higher learning. It could be viewed as influenced by imperatives of equity provided and outlined in policy.

The goal of the government is not only to promote the equity of access but also that of outcome. The National Plan states that all students should be included in the process of teaching and learning so as to have better chances of success (DoE, 2001a). Thus, efforts are being made that all students, including those with disabilities, are afforded chances of throughput. However, Howell (2006) observes that there are no specifications as to how the unique learning needs of those with disabilities should be met. He also noted that despite the equity imperatives for all diverse students, the difficulty of including students with disabilities in higher learning contexts have been shaped by the past and are being reproduced. It thus continues to play out to the disadvantage those students.

Equity of success is difficult to achieve in higher learning because of continued influence of class and race. Badat (2015) argues that due to lack of adequate preparation for university, formerly disadvantaged students continue to drop out. They also do not graduate within the minimum of time for an academic programme. Thus, though formerly disadvantaged students can access higher learning, their success is low. It suggests that despite the equity of access

and success meant for all diverse students, there could still be reproduction of the past, in which it is students from privileged class and race who still have better opportunity of both access and success in higher learning. Badat (2015) further argues that without first setting out to dismantle the core historical privileges, equity might be difficult to attain. With that as the situation, it suggests that though equity could have influenced increased access of formerly disadvantaged students, inclusive of those with disabilities, success could be limited. The limitation is manifesting in dropouts and late completion of programmes (Badat, 2015). Understanding equity of access and success as policy imperatives is important for the present study, it informs the analysis of how policy influences students with disabilities' access into the specific professional degrees and their professional learning at the Institution.

2.5 UNIVERSAL DESIGN

The Universal Design arose from a movement in the field of architecture in United States. It emerged because of the problems encountered when retrofitting buildings for access of persons with disabilities, and it gained prominence in the 1990s (Shapiro, 1993). It involves designing space, objects, and technological devices for accessibility and use by individuals with and without disabilities (Mace, 1998). Defined in Fotim report (2011, p. 98) it is “a framework for the design of places, things, information, communication and policy to be usable by the widest range of people”. It therefore seeks the inclusion of all from the outset (Centre for Universal Design, 1997), and could be viewed as seeking total inclusivity because all people's access is considered, and not only those with disabilities.

Universal Design is guided by seven principles, developed by the Centre for Universal Design (1997). They can, it is proposed, also be used “to evaluate the existing or new design” (Story, Muller & Mace, 1988, p. 4). In essence, the principles could be used not only to inform and guide new designs, but also be used to evaluate and improve existing ones. The

table below presents the seven principles as adapted from the Centre for Universal (1997).

They seem to be useful in facilitating the inclusion of all, if they could be well followed.

Table 1: Principles of Universal Design

PRINCIPLE	GUIDELINES	EXPLANATION
1	Equitable use	The design is useful and marketable to people with diverse abilities.
2	Flexibility in use	The design accommodates a wide range of individual preferences and abilities.
3	Simple and intuitive	Use of the design is easy to understand regardless of the user's experience, knowledge, language, skills, or current concentration level.
4	Perceptible information	The design communicates necessary information effectively to the user, regardless of ambient conditions or the user's sensory abilities.
5	Tolerance of error	The design minimises hazards and the adverse consequences of accidental or unintended actions.
6	Low physical effort	The design can be used efficiently and comfortably and with minimum fatigue.
7	Size and space for approach and the use	Appropriate size and space is provided for approach, reach, manipulation and use, regardless of the user's body size, posture and mobility.

Source: Adapted from the Principles of Universal Design (Version 2.0): Centre for Universal Design (1997).

The Universal Design has potential to influence inclusion in the South African higher learning. Story et al. (1998) argue that “Successful Universal Design solutions do not call attention to themselves as being anything more than easier for everyone to use, which is exactly what they are [...] Everyone benefits” (p. 4). The intention is to include all; however there is the possibility of some not being totally included. It could be argued that universality might not mean suitability for all. The Fotim report (2011) recommends that the principles of Universal Design be incorporated into existing buildings in institutions of higher learning in South Africa. There has, it can be contended, been an oversight of schooling and work settings for integrated learning. There is a need for Universal Design within these settings too because they are inextricably linked to higher learning. Also, despite the possibilities for the

built environment presented by Universal Design, a limitation could be in the actual implementation. It has been observed that some architects fail to interpret the principles correctly when designing new buildings and this result in continued inaccessibility for those with disabilities (Kathryn, 1995). For this study, it is important to understand whether or not the idea of Universal Design is being applied to buildings at the Institution as the Fotim Report (2011) has recommended.

2.5.1. Universal Design in Learning

Universal Design in Learning is viewed as a way in which all diverse students' learning needs could be met. Pliner and Johnson (2004), for instance, are in agreement with the Fotim report (2011), and have argued that it is necessary for the curricula if all students are to be included in learning. The field of neuroscience informs us that human beings have different learning styles and preferences; this has been confirmed through brain scanning technology (Rose & Meyer, 2000). Universal Design is also understood by Eagleton (2008) as:

An approach to curriculum design that emphasise flexible goals, methods, assessments and materials so as to decrease the barriers that typically limit students' access to learning. (p. 5)

The approach thus focusses on meeting diverse learning needs from the outset. Rose and Meyer (2000) further contend that within this approach, those who teach are guided by its principles to consider from the start the individuals' backgrounds, abilities and disabilities, and then design a curriculum accessible to all in terms of methods, learning and assessment. This would involve a minimisation of individual academic accommodations, because all individuals' unique learning needs would be catered for, even before they come to class. Boone and Higgins (2007) however remark that access to the curriculum alone is insufficient because it does not automatically result in learning. There has been increased awareness that appropriate Universal Design for Learning is one that optimises learning and the key to this is

creating maximum flexibility from the start, and also capitalising on technology to meet the needs of all (Eagleton, 2008). The Universal Design in Learning could even help save time that is spent on academic accommodations and adjustments, to further increase students with disabilities' access to learning. Matshediso (2007) has observed that in South African higher learning institutions, most academic staff are not interested in attending workshops on teaching students with different categories of disabilities. Both the staff and all diverse students might benefit from an approach of Universal Design in Learning.

It should be reiterated however that using the approach might not guarantee learning. Those who teach could mistake access to the curriculum for access to learning, while they are simply not one and the same. Eagleton (2008) also notes that universality for all might not be achieved, as some people might still not fully utilise the design despite how thoughtfully it has been implemented. To overcome this Rose and Meyer (2000) suggest that careful attention should be paid to the goals of learning experiences, and that such opportunities are maximised for all students. Thus, inclusion could be promoted by using the Universal Design in Learning at an institutional level. This is discussed in the next section.

2.6 PROMOTION OF INCLUSION AT AN INSTITUTIONAL LEVEL

Relevant literature reveals that there are specific ways in which inclusion can be promoted at the institutional level. It is argued that students could promote their own inclusion in institutions of higher learning. With specific reference to those with disabilities, Chataika (2007) argues that these individuals are not passive victims of circumstances, and she views self-advocacy as one way in which they could negotiate or fight to be included. The section that follows looks at self-advocacy and at how it could be used by students to promote their own inclusion in higher learning institutions.

2.6.1 Self-Advocacy

Self-advocacy refers to an act of negotiating, demanding or fighting to get support and provision from providers of service. In this section, self-advocacy is discussed specifically in light of students with disabilities. Swart and Greyling's (2011) study researched the self-advocacy of those with disabilities in South African higher learning, and found that many students with disabilities are aware that it is they who should advocate to change their circumstances, because no one else will do it for them. Test, Fouler, Wood and Eddy (2005) argue that such advocacy is a sub-skill in self determination that an individual with disabilities can develop independently, or it can be taught in the context of formal learning.

Self-advocating successfully requires the development of specific skills and attributes. Getzel and Thoma (2008) argue that, for individuals with disabilities, knowledge of themselves, of their rights, communication skills, and problem solving skills are important for self-advocacy. Furthermore, personal characteristics like patience, friendliness, determination and agency are also identified by Swart and Greyling (2011) as necessary for students with disabilities who wish to self-advocate. They need these to negotiate and sometimes demand support. Bell (2013) asserts that it is the responsibility of Disability Unit staff members to teach these skills to students with disabilities. Without the necessary skills, they might not begin to self-advocate. The present study therefore seeks to understand whether or not the students with disabilities could self-advocate, and influence their inclusion in professional learning at the Institution. Related literature has also emphasised that the practice of working together enables the achievement of common goals. The section below discusses partnership as another way that could enhance inclusion.

2.6.2 Partnership

Partnership can be taken to mean the same as collaboration. It refers to joint action between two or more stakeholders, to achieve a commonly-defined goal, by working together across boundaries in a public relationship (Kuenzel & Welscher, 2009). In essence, it involves the cooperation and working together by stakeholders to achieve a specific purpose.

Partnership is reflected on in a British study in which stakeholders in higher learning worked together with those at the workplace. The goal was to help students with disabilities access professional learning in the field practice during work placement. The study was carried out by Botham and Nicholson (2014), and aimed to discover how students with disabilities can continue to be supported when they are placed at workplace by institutions of higher learning. A plan referred to as ‘the procedure’ was developed between the partners to guide the process of how the students were to be supported. The researchers continued to evaluate and modify the plan, and the findings found that collaboratively working through a plan was useful. There is a confirmed need for communication between the partners and students with disabilities, who should disclose their disabilities so that the necessary accommodations are made (Botham & Nicholson, 2014). It could be argued however that it is not a given that both members of a partnership will fulfil their obligation to achieve the common goals. The present study will also seek to understand how responsible stakeholders are working together and forming partnerships to include students with disabilities in professional learning at the Institution. The main concern of the study is the access and inclusion of students with disabilities in specific professional degrees. Thus, the key concept of profession is discussed in the next section.

2.7 PROFESSIONS

Professions are a major component of the present study, hence the need for an in-depth review of literature, to illuminate professionalisation of students with disabilities into specific professions in an Institution of higher learning. The argument for the particular section is that all students with and without disabilities are professionalised in the same way, to develop professional identity, culture, and to access professions of their own choices. In the professional socialisation process, all students might on one hand confront obstacles and on the other, opportunities that could hinder or promote their professionalisation. However, students with disabilities specifically, might confront unique obstacles that could negatively impact their professionalisation. The review highlights how students with disabilities studying professional degrees maybe uniquely impacted in the socialisation process. The review starts broadly by looking at what professions entail, moves on to the socialisation process in general and narrows down into three professions of focus. It further reviews professional identity, culture, privilege and access.

A profession is defined by a number of scholars, as among others, Abbott (1988), Macdonald (1995) and Johnson (2015). Their definitions are common in that a profession has esoteric or abstract knowledge that is specialised, and it aims to serve the community. A profession is different from a skill because its professional knowledge is applied differently depending on the uniqueness of cases (Abbott, 1988). For an example, within the context of medical profession, a professional doctor may treat patients differently though the case of diagnosis is the same. Thus, the application of knowledge is different from technicians who follow explicit steps they know should solve the problem across all cases (Frankel, 1989 cited in Higgins-Kleyn & Kapelianis, 1999).

Professions are autonomous. Friedson (1986) argues that autonomy is in the monopoly of knowledge. When knowledge is monopolised it means specialised knowledge and its application is only accessible to those within the profession (Ndlovu & Walton, 2016). There is high degree of control over the profession itself and professionals, hence the autonomy. In the past autonomy has been a distinguishing factor that made professions different and more privileged over other occupations. However, autonomy has become a highly contested term. The contestation arises from continuous shifting and fluidity of professions. Baum (2009) argues that professions have become volatile and the pre-established categories and identities are no longer recognised. Furthermore, building a professional identity has also become complicated as professions have become flexible and fluid (Trede, et.al, 2012). It therefore implies that there has been a change and fluidity in terms of rigid control, norms and values that distinguished one profession from the other. The degree of autonomy which made professions unique is no longer as it was in the past. The profession of Medicine specifically is said to be fast-paced, competitive and rapidly changing (Meeks, Bisagno, Jain & Herzer, 2015). Thus, graduates need to be professionally adaptable to suit the changing employment market (Trede et.al, 2012), and both students with and without disabilities should be socialised in a way that they are able to keep up with the rapid changes in professions. Meeks et al (2015) further argue that there are substantial barriers that exclude persons with disabilities from keeping pace with the medical education and practice specifically. They cite negative attitudes, lack of effective communication with patients and other practitioners and being expected to identify visual and auditory information, as some of the barriers that are confronted by those with disabilities. It suggests that though students with disabilities can enter Medicine in higher learning, those with dyslexia, hearing and visual impairments might still be limited to practise competitively in the medical field as students and as interns. In the South African context, those with physical disabilities might also experience difficulties in

practising for the specific profession because of the inaccessibility of built environment. Swartz and Schneider (2006) argue that making the built environment accessible to all is a dream in the pipeline because of the expenses involved in retrofitting old buildings and constructing new accessible ones.

Professions are guided by code of ethics and moral principles. Higgs-Kleyn and Kapelianis (1999) argue that moral values and ethics are prerequisite for professions to serve communities well. Adding credence to that, Winch (2014) argues that judgments made by professionals are not “technical ones but also involve ethical and political considerations to which one’s personal and occupational values are highly relevant” (p. 58). It means that professionals are guided by morals and code of ethics to provide a principled practice in society. However, Grace (2014) argues that in the present capitalist context, morals and ethics underpinning professions have disintegrated. Ethics and moral codes have been replaced by seeking monetary value within the space of global commodification and economic marketisation. By virtue of change in terms of market forces, professional labour force is now directed to economic production and global competitiveness, rather than serving the community as before. As argued in capitalist societies, productive labour-force is associated with able-bodiedness (Russel & Malhotra, 2009). Thus, students with impaired bodies might not be preferred in terms of entering professional degrees in higher learning and consequently accessing professions as graduates. The review turns to professions as understood in the past and the change that has happened.

2.7.1 Professions in the past and change

The way professions were understood in the past and in the present is different. Hall (2005) argue that in the past professions were constructed and shaped by colonialism and they also reproduced it. They were designed by the colonial authorities for the purposes of power and

control. Hall (2005) further explains that knowledge was monopolised, expertise mystified and the professional groups who were the dominant elite took control of professions, regulated and monitored knowledge to protect it from others. From Hall's argument, though professions were there during the pre-colonial era, the colonial encounter shaped them in a way that suited the colonialists' purposes of domination and control. However, there has been change from how professions were understood in the colonial era. Their autonomy has become highly contested because of the fluidity they have become (Trede, Macklin & Bridges, 2012).

In the past professions were monopolised by the colonial authorities. Cobley (2015) argues that professionals were numerically very few in Africa and students from Africa went to Europe or America for professional training. The few who acquired the professional status formed the nucleus of the political elite. In British, Portuguese and Belgian colonies, including Equatorial Africa, professionals were very few until very late because Africans were excluded from schooling beyond secondary levels. In South Africa, it was only in 1880 that the first black doctor practised and a lawyer started in 1910 (Cobley, 2015). In essence, in Africa at large and in South Africa specifically, access to professions was limited to a few during the colonial period.

In the past social class and gender influenced choice of professions Hall (2005) argued that during the industrial revolution, it is the middle and upper class men, who could access university. As a result in patriarchal societies, the belief was that certain professions were for men and the elite. For instance, Medicine was mainly male dominated, with a few wealthy women and thus the profession reflected the values on middle and upper class (Hall, 2005). Furthermore, in those particular societies, women's roles were constructed to be at home with children and servants (Hall, 2005). It was only from the 19th century and after then that

women also started entering professions, and even as they did, they went into caring professions such as nursing and teaching (Cobley, 2015). It suggests that gender and class had a great influence in determining who entered which profession. Furthermore, disability was another variable used for exclusion in professions in the past. Gill (1995) argues that the American colonies did not include persons with disabilities in professions because they required financial support. However, there has been change to that as Social Movements fought against such discrimination in the 1960s (Gill, 1995). In essence, gender, class and disability stereotypes towards professions have changed with time. Kent and De Villiers (2007) argue that in the South African context Medicine is no longer a white male dominated profession. It implies that race also is no longer determinant factor in accessing specific professions. Since the stereotypes of gender, class and disability held about professions in the past have changed, it suggests that male, female and transgender students with and without disabilities, and even from low-socio economic class, can now have the opportunity of access into the three professional degrees in higher learning and consequently, the relevant professions.

In the past professional knowledge was monopolised by professionals. Hall (2005) argues that monopoly of knowledge was more pronounced in the medical profession and as a result, doctors had all the expertise and say over patients. It implies the patients had to take the doctor's diagnosis and treatment as stated. Hall (2005) thus argues that the relationship between professionals and clients in Medicine was authoritarian. During clinical practice, medical students with disabilities might not be accorded the same status of authority as those without, because of impaired bodies. With specific reference to the American context, Meeks et. al (2015) argue that there is medical culture in which physical appearance and perfection of a doctor is emphasised. Furthermore, there is also an assumption that an individual with an impaired body is inherently less capable in his or her practice of Medicine (Meeks et al,

2015). Besides, society has a general preconception that those with disabilities have no technical ability (Lavda 2012). Lack of technical ability is reiterated by Meeks et al (2015) that in the medical field specifically, students with disabilities are not trusted in environments that require strict technical standard for the sake of patients' safety. With those stereotypes about the medical profession and disability, it suggests that students with disabilities' clinical practice incur scrutiny by both patients and other practitioners. It might not be comfortable for students with disabilities to practise under conditions of scrutiny. Being scrutinised could be exacerbated in the South African context because people still hold negative attitude towards persons with disabilities at workplaces (Wiggert and Barnard, 2012). Thus, compounded with the discourse of emphasising appearance and image (Lavda, 2012), medical students with disabilities might find it difficult to do the clinical practice in the field and during internship. The review now turns into how socialisation into professions happens.

2.7.2 Socialisation into professions

Socialisation into a profession has been defined by a number of scholars who include among others, Austin (2002), Cooper-Thomas and Anderson (2002), Utley-Smith, Phillips and Turner (2007) and Lai and Lim (2012). What emerges as common in all definitions is how socialisation is seen as a process in which a new member learns and internalises the norms, required behaviour patterns, attitudes, roles and value systems of a particular profession. Thus, professional socialisation could be understood to imply professionalisation, which refers to the way in which people are acculturated and shaped, to be recognised, legitimised and accommodated as professionals (Griffin, Green & Medhurst, 2005). Professional socialisation therefore, could be viewed as a life-long process that takes place as soon as an individual enters a professional degree in higher learning, in practice at workplaces and even after graduation as he or she enters the profession and continues in professional development.

Thus, it is a continuous and life-long process. However, for the scope of the present study, the focus is on the process as it happens in higher learning and in practice.

Professional socialisation helps a new member understand the actual attributes of a particular profession. Lai and Lim (2012) argue that students bring along their own preconceived beliefs about the profession. In the socialisation process then an individual is socialised in the actual values, norms, attitudes and required behaviours of the profession. When an individual has internalised the new ones, he or she co-opts them in his own self-concept (Lai & Lim, 2012). It implies the socialisation process in generally changes an individual from his or her previous understanding of a particular profession, to a new one. When he or she is being socialised, he or she gets to further learn new set of the attributes in line with the profession. What is sought in the process of socialisation is that students who hold values and beliefs which are contrary to those of the profession are helped to change their previous conceptions. Professional socialisation is thus a process that seeks to help students who aspire for a specific profession to understand it better.

The goal of professional socialisation is to benefit both the new member and the profession itself. The former benefits in terms of development of positive attitudes towards the particular profession and being enabled to function properly within the profession (Utley-Smith et al., 2007). Being positive sustains the individual to stay longer within the profession, consequently enabling the individual further professional development (Cooper-Thomas & Anderson, 2002). It implies that the individuals who have been well socialised into a particular profession stay longer in it. In terms of benefitting the profession itself, it is argued that by virtue of having a new proficient member, it adds on by keeping the profession

surviving (Cooper-Thomas & Anderson, 2002). Professional socialisation could thus be viewed as a necessary process which benefits both parties.

Professional socialisation is a dynamic process. As social contexts in which professionals practise continue to change, so is the need for the socialisation process to also change to suit the contexts. With specific reference to law, Sullivan, Colby, Wegner, Bond and Shulman, (2007) argue that pressures and opportunities of different social environments to which law would be applied, determine the process of socialisation. In essence, the social contexts in which practice will take place also need to be considered in the socialisation process. For students with disabilities, it is not the socialisation process alone that should continually match the work context, the context itself should also continue to change to suit the unique needs of the student at all times (Burgstahler, 2001). For example, when there has been change from Braille to JAWS, the students with visual impairments should be socialised into valuing and using JAWS. Consequently, the work environment should change from Braille system to JAWS, to include students with that kind of impairment. Having reviewed the issue of socialisation into professions broadly, the focus narrows down to socialisation into the professions of Law and Education and Medicine specifically, as the focus of the study.

Socialisation into Law

Socialisation into Law starts in higher learning in Schools of Law. Scholars, among others, Provine (1986), Kennedy (1990), Moll (1990) and Wice (1991), agree that the students of Law are socialised into thinking like lawyers. It means inculcating the ideology of Law into the students to transform the preconceived beliefs and ideas about law they brought along, which could compete and conflict with the profession of Law (Kennedy, 1990). The process

of socialisation therefore involves impacting specific elements of formal legal education to shape the students and produce in them personalities suitable for the legal profession (Wice, 1991). The specific elements of legal education into which students are socialised into, are discussed below.

In Law Schools students are socialised into making logical decisions and argument. Schleef (2001) argues that in order to develop the two, they are provided with vast materials, which they are required to break down and decipher, to come out with a decision and argument that has logic. They are also taught to manipulate facts and rules quickly, accurately and apply them to a hypothetical situation. Besides mastery of rules, they are also oriented to be preoccupied with procedure and processes to develop reasoning by analogy (Moll, 1990). The kind of socialisation is meant for students to understand that for any dispute there is a rule that applies or that could derive from the situation. Provine (1986) views that as key to thinking like a lawyer, as it promotes rational approach and development of analytic skills, needed in the profession.

Students of Law are further socialised to uphold the values of the profession. They are socialised into cherishing impartiality fairness, justice and common sense, and not letting emotions interfere with judgement (Sullivan, et. al, 2007). Being socialised that way is meant to develop objectivity in analysis and handling of sensitive case, so that there is fair judgement. Erlanger and Klegon (1979) argue that it is important that students are able to distinguish legal from non-legal issues, reason formally and express themselves without emotion. A student of Law was quoted as saying, “They are turning me into someone else, they are making us different,” (Miller, 1995, p. 23). The student’s statement implies that proper socialisation into law changes one’s way of thinking to that of a lawyer. Miller (1995)

however critiques that kind of socialisation, arguing that it results in law students often wanting to dominate in groups in which they participate. While dominating others can be viewed in the negative light, it could imply that socialisation into the legal profession of Law has indeed taken place because a law student is demonstrating thinking like a lawyer in all situations. As Miller (1995) argues that in all countries, students of law are socialised into the profession in the same way, it suggests that even in the South African context, students with and without disabilities studying Law, are also socialised into thinking like lawyers.

Law students are further socialised into the profession when they are attached for field-practice. Vawda (2004) argues that when being socialised into clinical law, they engage practically to learn the skills, ethics and values of the profession, under the supervision of mentors. The methods used in the socialisation process are experiential and they include simulated exercises or actually representing clients in real life legal problem (Vawda, 2004). Thus through clinical law, students have the opportunity of applying the key elements of thinking as a lawyer which they have been socialised into, from law schools. In the South African context, clinical law is referred to as Practical Legal Study and how and when it is done varies from one university to the other (Du Plessis, 2015). Internationally, and in South Africa, there is little time for socialisation into clinical law (Motala, 2006). Sulvan et al. (2007) argue that thinking as a lawyer in practice, is delayed as students continue to think more like students rather than apprentices of law. They view the delay as creating problems for students when they enter the law practice. Clinical law is further limited by lack of adequate resources. Vawda (2004) argues that field-practice requires more resources because of the way it occurs. Both students with and without disabilities could be limited when they lack adequate resources to enable their field practice. The focus turns to Education.

Socialisation into the teaching profession

Socialisation into the teaching profession happens during pre-service and teaching experience. Knowles, Cole and Pressmead (1994) argue that pre-service takes place in higher learning and students are socialised into pedagogy, societal and ethical code of conduct expected of a teacher in the classroom, schools and in community. Mascatelli (2008) further argues that students are socialised into various theories and teaching methods and by the time they enter the field for teaching experience, they have already formed a visual and mental picture of the classroom, methods to use to implement the curriculum and ideas of maintaining discipline in learners. Thus, the socialisation of student-teachers by the lecturers at the university lays the base and foundation for the next socialisation phase through teaching experience.

At the work place, socialisation takes place as student-teachers apply theory to practice, under the supervision of lecturers and mentors. Mascatelli (2008) argues that student-teachers are socialised through situational learning. Drawing from Lave and Wenger (2002), she explained that students participate in educational community of practice, who are other teachers, mentors, and learners. Thus, the students learn through a social situation to master new skills and hence transform preconceived beliefs about the profession and develop the required behaviour. Zeicher (1986) views teaching experience as an apprenticeship in which a student is socialised into the real world of teaching. It is during the socialisation process in practice when a student moves from theory based learning experiences to application of knowledge in a real context of classroom (Zeicher, 1986).

In pre-service student-teachers are socialised to internalise the social rules and relationships of the profession they will enter (Utley-Smith & Turner, 2007). Lecturers and mentors in

schools, transfer the professional values, knowledge, skills, norms of the profession into the students (Clikeman & Henning, 2000). The review further moves to focus on Medicine.

Socialisation into Medicine

Socialisation into the profession of Medicine takes place in pre-clinical, clinical and internship phases. The preclinical phase involves students' learning in Medical schools, the clinical involves field-practice in workplaces as hospitals and the internship; it's when graduates continue to practise for a specified period as interns, after graduation. However, pre-clinical and clinical phases of socialisation are not viewed as separate phases. Lamdin (2006) argues that socialisation into Medicine is done in "an apprenticeship-style" (p. 3), with learning of theory, observation and application done alongside. Thus, preclinical and clinical phases are interlinked processes that take place simultaneously.

During the socialisation process, medical students are socialised to be doctors. Lamdin (2006) explains in non-complicated ways how the socialisation process happens in preclinical and clinical phases respectively. He argues that medical students are first theoretically oriented into the biomedical science, which involves being explicitly taught the human biology and the anatomy of the body. Human dissection is the method used for students to learn anatomy. They are also taught physical examination and making case history of patients. They are further socialised into disease, its underlying pathology and how to diagnose it in patients. They also learn about medical language and the relevant terms to use. When they shift to the clinical, they are socialised to apply the biomedical scientific knowledge in real life situation on patients. They examine patients, diagnose disease, and make case history of patients (Lamdin, 2006).

Socialisation into Medicine also involves learning attributes of humanity. Grant (2002) argued that medical education does not only involve the formal medical curriculum but also humanity-oriented learning. It includes respect, dignity and morals that medical students are socialised into, for them to work well with patients. Grant (2002) views the aspect of humanity as also important as it enables students to be sensitive to the patients' emotional needs. Doran (1993) thus concludes that proper socialisation into Medicine does not overlook humanity in the medical education.

Socialisation into Medicine is also viewed as involving situational learning. Drawing from Lave and Wenger (2002), Eraut (2000) views the socialisation of medical students as a social activity that involves other people in the medical field as lecturers, who are also doctors, mentors and patients. All those involved play different roles which enable the medical students to also participate in a community of practice. As medical students participate, they also learn from other members and they become socialised into the profession. Thus, students with and without disabilities studying Medicine, need to internalise the theory of medical education, be able to apply it in practice as they participate in community of practice and empathise with patients. As argued that the ultimate goal of professional socialisation is development of professional identity (Trede et.al, 2012), the review thus turns to that.

2.7.3. Professional identity

A number of definitions for professional identity have been provided by scholars as among others, Higgs (1993), Ibarra (1999), Paterson, Higgs, Wilcox and Villenure (2002), and Lawler, (2008). Though their definitions differ from one scholar to the other, they all agree that it involves identifying with attitudes, values, beliefs, behaviour roles and having the self-image and sense of belonging to a particular profession. Lawler (2008) argues that having

internalised the specific attributes, one becomes identical to the members of the profession in which he or she belongs, and different from those who do not belong with her or him in the profession. Professional identity could therefore be understood as the self-image that one develops to identify with other members of the same profession, and also a variable that distinguishes members of one profession from the other. Trede, Madelin and Bridges (2012) state that professional membership is another way in which individuals can self-identify to a profession. It is because those who belong to the same profession also belong to the same professional body. By virtue of belonging together, students with and without disabilities could also self-identify with other members of the same profession. However, Slay and Smith (2011) argue that due to stigmatisation and marginalisation persons with disabilities are depicted as non-professionals by society. When it continues to happen, those with disabilities end up internalising the perception that they are different from others.. Thus, even if they become professional, persons with disabilities would have developed feelings of indifference towards themselves; hence resist identifying with the profession and other professionals (Slay & Smith, 2011). Basing on Slay and Smith's argument, students with disabilities who have previous experiences of marginalisation and stigmatisation might also find it difficult to self-identify with a profession and other members, more specifically those without disabilities.

Professional identity development requires concerted effort from both the students themselves and from the mentors. Trede et. al, (2012) argue that it requires the student's active engagement in terms of practice, self-reflection and acting, in combination with collaborative, dialogic learning and appropriate support from mentors. It implies that professional identity development involves both internal and external processes in which both the students and the academics play a role. However, it has been found that lecturers in universities do not have an explicit programme to teach professional identity to students

(Trede, et. al, 2012). Furthermore, lecturers do not follow their students through to workplace. West and Chur-Hansen (2014) argue that without continued support, medical students specifically, unlearn what they have been exposed to at the university. Lack of follow up to the field has a greater negative impact on students with disabilities. In the context of Britain, Botham and Nicholson (2014) observe that the particular students require continued support from the university to workplace. It suggests that with continued support by lecturers from the university, students with disabilities could be helped to develop appropriate professional identity at workplace.

Professional identity could be imposed on members by authorities in power. Alvesson (2001) argues that employers impose professional identity for normative institutional control and professionals are coerced to develop identities concomitant with the objectives of the management and not of a specific profession. Such an imposition is resisted by professionals (Alvesson & Wilmot, 2002). It implies professional identity could be used for regulation and serving the personal interests of those in power. Professional identity could become oppressive to members who self-identify to fulfil what management wants, and not with the values, attitudes and behaviours required of the profession in itself. Webb (2015) views the imposition as a top-down process in which members self-identify to conform to the imposed 'do as you are told' identity. Kartermann and Alvesson (2009) also argue that professionals resist such impositions. Students with and without disabilities might also resist to self-identify with specific professions should authorities impose their own values, attitudes and behaviours patterns on them. The review moves on to professional culture which is developed through socialisation.

2.7.4 Professional culture

Professional culture refers to shared values and set of practices of professionalism, which have been developed by members of a particular profession. Hoyle and Wallace (2005) define professional culture as “a configuration of beliefs, practices and relationship and language and symbols distinctive to a particular social unit” (p. 103). It has to do with “shared ideology, values and general ways of and attitudes to working,” (Linda, 2008, p.7). In essence, professional culture refers to internalised attitudes, specific ways of functioning and behavioural response manifested in a specific professional context. Thus, with specific set of values, beliefs, moral and attitudes in individuals, a common behaviour pattern related to specific professions, is developed. Linda (2008) argues that there is a thin line of distinction between professional culture and professionalism. It suggests that the latter is constituted by the former and practising in a specific professional way reflects the culture embedded in a particular profession.

Professional culture influences the value judgements in practising in a morally accepted manner. With specific reference to the profession of Medicine in the South African context, van Bogaert and Ogubango (2010) list among other things values as justice, dignity, beneficence, truthfulness as constituting the professional culture. They argue that such values inform and shape how doctors treat their patients to avoid suffering, injustice and causing harm. In essence, informed by a set of specific values and morals of Medicine, a doctor is guided into making morally accepted decisions and manifest behaviour acceptable to the medical profession. Thus, it is important to understand that professional culture helps in guiding and directing professional practice by the respective professionals in different professions. Thus, there is need to teach students specific ways of functioning and behavioural patterns that characterise specific professions, to develop an appropriate professional culture.

The culture of professions influence and shape how different professions are conceptualised. Ramachandran, Rao and Goles, (2008) argue that culture impacts on different professions differently and influences specific ways of thinking and understanding of roles and responsibilities of professionals in specific professions. For example, as informed by specific beliefs about gender inequalities, Law as a profession has been associated with masculinity. Harris (2000) argues that masculinity is prized because the profession requires specific attributes as aggressiveness and courage that is derived from masculine gender. In the South African context specifically, men with disabilities might not be seen as masculine because of impaired bodies. Ratele (2008b) explains that culturally, in a heterosexual patriarchal capitalist society, there is a hegemonic form of masculinity. The kind of masculinity is attributed to aggressiveness, courage, strength, drive, ambition, career orientation and self-reliance (Lipanya, 2014). Thus, any man who does not portray such character attributes is not considered fully masculine. By virtue, that form of masculinity is valued, cherished and sought after by most South African males of all races (Lipanya, 2014). However, hegemonic masculinity could be denied on reasons of ethnicity, sexual orientation and disability (Gershick & Miller, 1997). Furthermore, as in ableist societies there is idealisation of particular bodies and devaluation of others, men with disabilities could be viewed as lacking that kind of masculinity and all attributes that go along with it. According to Lipanya (2014) the valuation of body in terms of masculinity is inculcated in members of society and children grow up with that culture. Thus, when the profession of Law is so framed around masculinity, women and men with disabilities might find it difficult to enter the profession of Law because of those cultural stereotypes. Collier (1995) however argues that there is no relationship between masculinity and lawyering. It suggests that gender and masculinity might not hinder entry into law; hence women and men with disabilities have an equal

opportunity of accessing the professional degree of Law. Thus, those who are not oppressed and limited by internalised gender and masculinity stereotypes can enter the programme and consequently, the profession. The review turns to professional privilege as another important aspect that needs understanding where it concerns professions.

2.7.5. Professional privilege

Professions have specific privileges over other occupations. The privileges are identified by Portwood and Fielding (1981) as status, wealth and power. The three are discussed in detail in this section. In the context of professions, status involves professionals having high degree of control over their own work (Friedson, 1986). In essence, professionals make their own decision in terms of how they decide to work. For example, making reference to the profession of law specifically, Atkinson (2013) concurs with Friedson (1986), that the profession itself and stakeholders within the profession are not regulated by the state or market forces, but by the autonomous institutions of the occupation itself. It implies that all citizens have to abide by law as instituted by law society and the states have no power and control over that. Thus, autonomy is interlinked with the privilege of status as professionals control their own jurisdiction. However, it's not all professions that have the privilege of status, and have total control on how they work. For example, the teaching profession's level of control and consequently autonomy is limited as discussed in detail in section 2.7.4.3 below.

Professions have the privilege of power. Barber (1963) cited in Haralambos and Holborn, (1991) argues that professions in the past were regarded as having power in themselves. Jackson (2015) argues that power is in professionals being custodians of specialised knowledge and having the expertise that society need. Sharing the same view, Hughes (1971) also argues that the authority and power of professions derive from the specialist

nature of work, done only by qualified members who have the license to practise. Power also manifests in professionals in a particular profession having the authority to tell society what to do and what not to do (Hewitt, Thomas & Wilson, 2007). The major source of power is in knowledge monopoly (Friedson, 1986). Monopolising knowledge involves professionals in a specific profession keeping the specialised knowledge to themselves (Jackson, 2015). Basing on Foucault (1982) who views knowledge and power as inextricable inter-connected, professions might be said to be powerful because of their specialised knowledge, which is not accessible to all people.

The power of professions is reflected in gate-keeping. Gate-keeping involves internal control of the organisation of a profession and consequently, over how members work (Hewitt et. al, 2007). Thus, through their professional bodies and association professions have the power to define and determine entry level qualifications and criteria of entrance to a particular profession. The profession also has power to control members' professional work through defining codes of ethical conduct. Hughes (1971) thus argues, professional bodies claim legal, moral and intellectual mandate. However, due to improved educational levels in society, monopoly of knowledge is gradually losing hold and is now being eroded. Hewitt et. al, (2007) note that due to access to medical knowledge, the medical profession is now open to scrutiny. Mistakes of doctors are now open to criticism by non-medical professionals including patients. However, the profession of Medicine is said to be resisting losing the monopoly of knowledge (Freidson, 1986). How the profession has managed to hold on to knowledge monopoly and consequently remained autonomous will be discussed in detail in the Chapter under Section 2.7.7.

Wealth is another privilege for professions. Wealth is a broad term that can have different meanings from different contexts. It is important thus to explain it in context of the present

study. It is referred to in terms of financial benefits. It has been observed that professions provide a comfortable income and professionals are reasonably rewarded for the services they render to society (Jackson, 2015). Adding to that, Macdonald (1995) also observes that within professions, practice is influenced by the economic order, and the goal of obtaining high pay and privilege for members. Professions can thus afford wealth for professionals engaged in them. However, the issue of wealth as a privilege for professions might be an issue of debate. The privilege of wealth could be viewed as a starting point rather than an end product in terms of professions. It starts from being wealthy and having status in society that one might have access to powerful professions. Drawing from Hall's (2005) argument that specific professions as Medicine in the past were associated with elite backgrounds, even today the economic background might still be a determining factor to enter powerful professions. Students with and without disabilities from low socio-economic backgrounds who go to disadvantaged schools, might still find it difficult to enter the programme of Medicine in higher learning because of high entry requirements. Having reviewed literature on professional privilege, the review moves to professional access, more specifically with regards to the South African context, hence the discussion below.

2.7.6 Professional access

Professional access refers to graduates who have completed professional degrees in higher learning, entering into respective professions and staying in them. In the South African context, graduates with and without disabilities could be expected to access professions they have studied for without difficult because of policy. The Employment Equity Act no 55 of 1988 (Republic of South Africa, 1988a), seeks to address the inequalities of the past. It puts in place the imperative aspect of equity of access in terms of employment for all people and more specifically the formerly disadvantaged social groups. The policy will be explained in detail in section 2.9.2 below. With such a policy in place, it could be expected that graduates

with disabilities who have completed professional degrees in higher learning, also have the opportunity of access to professions. However, literature reveals that very few people with disabilities access professional employment in South Africa (Ramutloa, 2012). The underlying reason for that has not been found as yet. In this Chapter, in Section 2.2.3.1, above, contextual obstacles as inaccessible public transport (Khuzwayo, 2011), the built environment (Swartz & Schneider, 2006) and negative attitudes at work place (Wiggert-Barnard & Swartz, 2012), have been discussed as some of the obstacles confronted by students with disabilities to do their field-practice at workplaces. The same obstacles could also have the same negative implications for graduates with disabilities to enter the specific professions and staying in them.

The process of accessing professions is not smooth as expected. When socialisation into Education, Law and Medicine has taken place in higher learning and in field-practice; graduates might enter the specific professions but still confront challenges that limit their stay in the profession. Using the teaching profession as an example, it has been found that new graduates confront a number of challenges that makes them leave the professions soon after entry (Mascatelli, 2008). With specific reference to the South African context, Armstrong (2015) argues that graduate teachers leave the profession because of overwhelming workloads, low salaries and lack of professional development. While the obstacles to access the professions could be confronted by all new graduates, those with disabilities could be more affected. Contextual obstacles as inaccessible built environment (Swartz & Schneider, 2006) and public transport (Khuzwayo, 2011), and negative attitudes (Wiggert and Barnard, 2012), could also compound the challenges that Armstrong (2015) cite. Graduate teachers with disabilities could thus find it difficult to access and stay in the teaching profession.

Contradicting preconceived beliefs and values that conflict those of the professions could also make access into professions difficult. During the socialisation process, students can be resistant to change by holding on to their pre-existing beliefs they bring along with them about a profession. With specific reference to Law, Miller (1995) argues that it is difficult to assimilate students into the profession when they are resistant. Chiodo and Brown (2007) also argue when graduate teachers resist the socialisation process and do not identify with the profession, they consequently find it difficult to access the profession. It could be difficult for graduates with and without disabilities to access and stay in specific professions when they resist to change from their pre-existing beliefs. Professional access is not within the scope of the present study. However, the review gives an insight as to what kind of obstacles students who complete the specific programme at the Institution could confront, to access the specific professions when they graduate.

2.7.7 Contestation of professions

As already been highlighted, the concept about professions has changed. Other scholars as Taylor and Runt'e (1995) argue that there is nothing considered as a profession anymore and those who continue to cling to the idea and do not want to surrender their superiority. Adding to that Linda (2006) argued that autonomy is giving way to accountability, resulting in deprofessionalisation rather than professionalisation, hence the marketisation of professions. With those contestations raised, professions might be losing the virtue of having the mandate of serving society, the control of professionals over themselves and privileges they had before. With that said, literature is further reviewed on the three professions of focus, to understand how they still qualify to being regarded as professions against the backdrop of contestations.

Contestations of Medicine as a Profession

There is contestation internationally and in South Africa specifically about Medicine as a profession. It arises predominantly from the notion of its autonomy. One argument is that its specialised knowledge has been diluted by drawing from other disciplines, and it has become more social rather than specialised. Eraut (2005) argues that it should be considered as an applied field and not a profession and in his justification he has stated:

[...] the rationale derives from the social purpose and not from a distinctive form of knowledge. Typically it uses theories from a range of formal disciplines, appropriating and resituating them in its professional context. (p. 3)

In the South African context, the argument is that the curriculum has now become more general than specialist (Fincher, 2004). This is because there has been a shift to emphasise primary health care so as to produce doctors who can meet the broad health needs of the country's population, and this includes serving in rural areas. The changes are described as follows:

Specialist domains are changing to primary care leadership. Curricula are no longer driven by preclinical and clinical specialities and family medicine is taking an increasing central role in guiding the way students learn and what they learn and where they learn it. (Kent & De Villiers, 2007, p. 906)

However, McNamara and Fealy (2014) contend that Medicine has managed to remain autonomous and responsible stakeholders have maintained its integrity and jealously guarded its highly-specialised knowledge. Although Medicine also draws its knowledge from other disciplines, its specialised knowledge remains undiluted. It has been argued, as stated previously in this chapter, that Medicine is constituted by clinical science and biomedical knowledge (Eraut, 2005), and this means that it draws its knowledge from the fields of science. The specific subjects within this field belong to what is known as STEM (Science,

Technology, Engineering and Mathematics), and these subjects are considered to be “intrinsically more powerful than others” (Young & Muller, 2013, p. 229). Young and Muller (2013) draw on Bernstein’s understanding of knowledge structures in terms of horizontality and verticality. Horizontal knowledge is segmentally organised and do not have “grammars separate from their theories” (Bernstein, 2000, p. 168). It means the internal and external relation of knowledge might not be separated. For example, knowledge of heat could either derive from the everyday experience or scientific meaning derived from theory of heat. The science subjects in Medicine are perceived to have vertical knowledge, meaning that their concepts and theories build upon each other in a hierarchical format in which students could only produce “legitimate truth when they have obtained mastery of the required procedures” (Bernstein, 1999, p. 165). Such knowledge structure is powerful because it is cumulative. McNamara and Fealy (2014) state it that Medical knowledge is accumulative because of the advancement of natural sciences. Thus, though there could be horizontally-structured knowledge in Medicine, it could be argued that Medicine is a powerful professional degree as there is more verticality in its knowledge structures.

Contestation of Law as a Profession

Law is described as a classic profession that combines both esoteric and cultural knowledge. Friedson (1986) argues that nearly everyone understands that Law is a classic profession because it delivers esoteric knowledge that serves a social function. He further states that law might not be guaranteed or regulated by the state or market forces, but by the autonomous institutions of the occupation itself. Friedson’s view concurs with Atkinson’s (2013) who argues that who also argues that it difficult for law to be regulated by the state or profit firms. The two scholars’ description fits well with meeting the criteria of autonomy which is one way to distinguish a profession from other occupations. Moreso, the practice of law is difficult to regulate by state because internal institutions guarantee the protection and further

generation of specialised and relevant knowledge. From that it might be concluded that law qualifies as a profession.

There are complaints about the actual learning of Law in higher learning. There are assertions that Law programmes in universities do not expose their students to adequate practice for them to acquire the necessary practical skills needed for when they enter professional practice (Letsika, 2002). Other complaints have been levelled at universities by stakeholders in the legal profession itself, and they contend that law graduates are not adequately skilled. In the South African context, complaints tend to be about the Law programmes failing to integrate theoretical and practical components of legal education (Motala, 1996). To compound this, Nicholson (2004) critiques the professional knowledge itself and the teaching and learning that takes place in schools of Law. He argues that there are volumes of content knowledge which students are required to familiarise themselves with, and that they are then expected to reproduce these in tests and examinations. As was noted in the introductory chapter, there is ongoing study into the inequality this engenders, and it is beyond the scope of this study. The present study focusses on whether or not students with disabilities complete the programme within the set time at the Institution. The review of professional knowledge of the three programmes ends with Education.

Education as a Profession

The position of Education as a profession is contested. This is based on the fact that it does not possess a high degree of autonomy (Hargreaves, 2000), which is a key requirement in the definition of a profession. It is said that teachers are restricted because their practice is directed, monitored and shaped by organisational goals (Demirkasimoglu, 2011). It can be argued that teachers' practice is controlled and their decision-making restricted as they teach from a predesigned curriculum mandated by the state to meet its ideology. Although they

have a choice of teaching methods, they conform to specified standards and performance levels which are regulated through public examinations. There have however been changes in South Africa's education system since the apartheid period, which includes a drive to embrace professional practice (Rusznayak, 2015). Thus, despite the external controls, Education is also a profession (Taylor & Runt'e 1995). For the present study, the literature review on contestation of professions could help to understand why Medicine, Law and Education still qualify as true professions, and that could consequently justify the focus on the respective professional degrees. As access into professions starts from entering into professional degrees in higher learning, the review turns to focus on that.

2.7.8 Professional degrees in higher learning

Literature on professional degrees and professional knowledge respectively is reviewed because it forms the backbone of the present study. Since this study's focus is specific professional programmes, it is important to understand how the specific programmes are different from others, and what constitutes the professional knowledge for each one. This could shed light on the specific obstacles confronted and opportunities presented to students with disabilities who enter these programmes, and acquire specific professional knowledge.

A professional degree is a "high level qualification" (Macdonald, 1995, p. 161) in higher learning. Its curriculum is characterised by esoteric or abstract knowledge, which is applied differently from one case to another in practice (Abbott, 1988). These academic programmes are different from others in terms of how professional knowledge is applied in practice. Professional knowledge is not applied in the same way across all cases, and what this requires is the professional's expertise to be able to adapt and 'think on their feet' within the context of practice. This form of professional knowledge is applied differently, and this distinguishes professional practice different from technical practice. Ndlovu and Walton (2016) argue that

the curriculum for professional degrees require both theory and practical application. This means professional learning needs to combine theoretical and practical knowledge, both at an institution of higher learning and in the work setting, for integrated learning. The theoretical knowledge, as understood by Friedson (2001), is the “foundation in abstract concepts and formal learning” (p. 35). In other words, specialised knowledge is the base from which the principles that inform practice are derived (Shay, 2013). Clarke and Winch (2004) argue that there is need for knowledge of theories and the ability to recognise the contexts to which they apply. This involves both the acquisition of knowledge and the ability to apply it in practice, which is indispensable for a process of professionalisation.

Professional degrees are also distinguished from other programmes by way of their involvement with professional bodies (Harvey & Mason, 1995). There are specific professional programmes that are accredited by these bodies, and the criteria for accreditation are based on the suitability of the institution to offer a particular programme. For the accredited programmes, the responsible stakeholders, representing different professions, are also involved in the design of the curriculum (Jamal & Bowie, 1995) of the specific programmes. They determine the specific professional knowledge required, as well as the ethical conduct, they standardise the profession, examine the students for competence, and ensure that members abide by established ethical principles (Harvey & Mason, 1995). These bodies determine the internal and external quality of the programmes, and are gate-keepers because they monitor that the professionals’ practice complies with the formal ethical principles. The professional bodies’ involvement is important in terms of maintaining moral professional practice and appropriate standards. Partnership could also be established between the specific stakeholders and those in higher learning to improve issues to do with professional degrees. To support this, one of the questions asked in project 3 at the CCRRI is: What is the action that has been taken by formal bodies to overcome the obstacles in entry

and completing the degree programmes? While this is beyond the scope of the present study, the question shows that professional bodies might not only accredit and prescribe the curricula, but could also make interventions when problems to do with professional degrees emerge.

2.7.8.1 Professional knowledge

The professional knowledge of each professional degree is different. Each programme is unique and has specialised knowledge that forms its foundation, making it distinct as a profession (Abbott, 1988). Defining professional knowledge, Dickson (2007) states that it is know-about and know-how knowledge that is applied to practice. Thus, it is specialised knowledge of a specific profession (theoretical), and its practical application.

While professional knowledge for each programme is different, there are aspects that are common across all of them. Ethical standards specifically are emphasised as part of all professional practice (Higgs-Kleyn, & Kapelianis, 1999). This is why there is need for those who offer a specific professional programme to register with the respective professional bodies, so that there is commitment to an ethical standard of practice. Proficiency in English is a requirement across all professional practice, because students should be able to engage with and comprehend a standard interpretation of what their job entails, and also be able to converse with all people through the international language. Numeracy is also required for calculation. In this changing world with rapid developments in technology, integrating technology to professional practice has also become key across all professional degrees.

What constitutes the professional knowledge of each programme is, inevitably, broad. There are elements of such programmes that are general to all enrolled students and others for specialisations within the profession. For example, in Law, there is different knowledge for advocacy, attorney, judicial and legal advisors. For the purposes of the study, only the basic

elements of professional knowledge common across each programme are described. As the present study seeks to understand professional learning of specific programmes and graduating into the respective professions at the Institution, it is the professional knowledge in Medicine, Law and Education that is reviewed. It should also be understood that all students, including those with disabilities, are professionalised in the same way to graduate into the specific professions. I therefore employ the term ‘students’ to refer to all who are being professionalised across the three programmes. The review starts with Medicine.

Professional knowledge of Medicine

Medical professional knowledge constitutes codified knowledge which includes formal abstract scientific knowledge for Medicine that is reliable and credible. It is publishable and has the status of being incorporated in the learning programme, examinations and qualification (Eraut 2005). Explaining what constitutes this codified knowledge Eraut (2005), states that it comprises clinical science and biomedical knowledges. Further, Patel and Kaufman (2000) state the clinical science knowledge is based on a complex taxonomy in which diseases and their underlying pathology are explained. The biomedical knowledge is derived from a range of other formal disciplines, and is based on the general principles of chains of causal mechanisms. The specialised knowledge for this specific programme, including both the clinical and biomedical knowledge, is important for medical students to draw from and apply in practice. Both forms of knowledge are needed because learning to explain symptoms and diagnosing might be different from learning to explaining the cause of the disease. Patel, Evans and Groen (1989) explain that clinical knowledge and biomedical knowledge are not completely compatible, and those who generate them have different ways of structuring knowledge.

Medical professional knowledge also includes un-codified knowledge. What this form of knowledge incorporates is cultural and personal knowledges. The former is about different cultural beliefs about health, illness, sickness and disease which are espoused by patients. The latter includes the attitudes, emotions and self-knowledge (Eraut, 1997) of the doctor. Eraut (2005) observes that un-codified knowledge is acquired informally, through interactions and participation in different social contexts. There is however debate around whether there should be structured ways of acquiring this form knowledge, such as written texts. It could be argued that the medical students should understand and respect the cultural background of the patients they treat, because this background influences the patients' behaviour and willingness to cooperate with the requirements of treatment. Furthermore, doctors' own cultural beliefs and the personal knowledge that they bring is also important as part of medical professional knowledge. It is in that light that it is argued:

Doctors need to be far more aware of the expectations and preferences of different patients and that could be addressed by learning more of cultural responsive communication skills. (Eraut, 2005, p. 4)

The professional learning that takes place in the field is referred to as clinical practice (Eraut, 2000). As in other professional degrees, professional learning involves the acquisition of specific elements of medical knowledge by the medical students at an institution of higher learning, as well as in the field. Clinical practice involves the ability to apply both codified and un-codified knowledge with expertise from one case to another. Thus, such professional practice is informed by the clinical and biomedical, cultural and personal knowledges as the medical professional knowledge. The present study seeks to understand whether medical students with disabilities are able to acquire the professional knowledge of Medicine to meet the requirements and complete the programme within minimum time at the Institution. The Law programme is discussed next.

Professional knowledge of Law

The professional knowledge of Law includes legal knowledge and skills which law students are required to develop to be able to meet the practical demands of the profession. Different countries and institutions of higher learning emphasise different aspects of legal professional knowledge, because the curriculum for law varies significantly from place to place (Pickett, 2010). The programme's knowledge is constituted by volumes of core content of statutes, cases, legal rules and principles (Nicholson, 2014). Pickett's (2010) study of an extensive survey on the teaching and learning of Law in the undergraduate LLB programme in South African universities has helped us to understand the specific elements that constitute legal professional knowledge. He investigated whether or not students of law had developed skills related to reading and interpreting statutes and legal documents and drafting them. These include pleadings, wills, and leases, among others. They need to be able to investigate, analyse, construct and communicate an argument to solve legal disputes. They are required to understand the Constitution, its ramifications, Acts of Parliament and also possess knowledge with regard to issues of common, regional and international law. These students also have to understand the principles of law, the rule of practice, and criminal procedure (Pickett, 2010). These are understood as the specialised knowledge and legal skills that form part of the professional knowledge of Law.

Professional knowledge in Law is also constituted by a Clinical Legal Education. This was incorporated in the legal curriculum for Law (Hoffman, 1994) as a method of teaching law through application and practice (Giverver, Baker & McDevitt, 1995), and is viewed as necessary to prepare students practically by equipping them with much-needed lawyering skills (Barnhizer, 1990). Clinical Legal Education is a global term that is used to refer to clinical practice in which students are exposed to the practical learning of Law. Describing

this course component, Vawda (2004) observes that it involves the learning of skills, ethics and values for law in practical legal work, and students are guided by their lecturers or practising lawyers. Different institutions of higher learning in South Africa have different names to refer to the Clinical Legal Education, and they also have varied durations of required field practice. The Institution in question refers it as the Practical Legal Study (PLS), and it is a course that is undertaken in the final year of the LLB programme (Du Plessis, 2015). Other institutions, which cannot be named for purposes of anonymity, have other names for it, such as Practical Law, Applied Legal Studies, Legal Practice and Community Service Learning. At one institution, field practice is introduced from first year, and students learn and practise legal ethics, legal analysis, advocacy, legal drafting, practical legal labour law and divorce law, among other things (Du Plessis, 2015). Varied approaches are used in teaching and learning in Clinical Legal Education, but most are experiential and are geared towards problem-solving (Vawda, 2004). They include mock trials, moot courts, and law clinics. Law clinics involve real involvement with clients, while moot courts and mock trials seek to teach students court procedure through a staged process not involving real clients. Letsika (2002) describes them as, “simulating the court situation and [incorporating] various roles [such] as defence counsel, witnesses and judge” (p. 44). All three of these practical approaches help students to apply knowledge to practice. However, the first two are preferred to law clinics, because they are less expensive, and not all institutions even have law clinics (Letsika, 2002). In the South African context, students are required to serve compulsory articles of clerkship (Attorneys Act 53 of 1979) before they enter the profession.

Professional knowledge in Education

There are key elements and domains that constitute professional knowledge in Education. Internationally and in the South African context, a number of education scholars, who include Shulman (1986), Clarke and Winch (2004), Barge (2014), Shay (2013), Winch (2014),

Shalem (2014), and Rusznyak (2015), discuss what constitutes professional knowledge in this field, both in primary and secondary sectors. The focus for this study is circumscribed by looking specifically at the five basic professional knowledges a student of Education should acquire to become a competent educator, as provided by DHET (2015) in the South African context. They are summarised in the table below:

Table 2: Summary of the basic professional knowledge in Education

Professional Knowledge	Area of Focus
Disciplinary /Subject Matter Knowledge	Foundational knowledge in Education and specialised knowledge of specific discipline
Pedagogical Knowledge	Principles, practices and methods of teaching. Knowledge of learners and the curriculum.
Situational Knowledge	Learning about the South African context, knowledge of diverse learners and challenges they face.
Fundamental Knowledge	Learning to converse in second official language, Information and Communication Technologies.
Practical Knowledge	Study of practice and actual practising in classroom contexts.

Adapted from the Department of Higher Education and Training (2015)

The table represents the professional knowledges and areas of focus in which they apply. The divisions are dotted to show that boundaries are porous, and all of these forms of knowledge are interrelated and connected. A combination of them comprises the professional knowledge that is taught and learnt by students in teacher-education at institutions of higher learning and in schools as the field of practice. A detailed review of the knowledges is provided in the section that follows.

Disciplinary/Subject Matter Knowledge

Disciplinary or subject content knowledge pertains to the acquisition of forms of knowledge that are foundational to Education. These include the sociology, psychology and philosophy of Education. Darling-Hammond (2006) argues that students confront their own knowledge

assumptions as a strong foundation for their own way of teaching. The learning of such knowledge is important to inform an understanding of how teaching and learning happens. The students also learn about the specific knowledge of their discipline of specialisation. Lampert (2010) reiterates that what is required from educators in training is that they “understand the subject matter, plan lessons around it, represent it, demonstrate it and explain it” (p. 22). It was reported that in the South African context, weak subject knowledge of educators is the reason for poor teaching and learning in schooling (Taylor, 2010). It could be argued that it is from the disciplinary knowledge that students learn to draw from the theoretical foundations of Education and competently teach subjects within their specialisations.

Pedagogical Knowledge

Pedagogical knowledge involves the acquisition of methods of teaching including the principles and practices. It also involves the prior knowledge of learners, how they learn, the curriculum and assessment. Pedagogical knowledge provides the student-teacher with knowledge to draw on in order to be able to convey the subject matter appropriately to the learners. It also involves the specialised pedagogical content knowledge and that pertains to learning to apply appropriately the methods, concepts and rules of a specific discipline. Inclusive education is said to form part of pedagogical knowledge (DHET, 2015). I maintain that as all diverse learners with and without disabilities need to be included, it is important that students learn how to create a learning environment that suits all learners.

Situational Knowledge

Situational knowledge is acquired by learning about a specific context. It involves students learning about the differentiated society in South Africa, and diverse challenges confronted by learners in different contexts. In the democratic South Africa, schools have become diverse in terms of race, ethnicity, class, language, class, religion (Cornbleth, 2008). Phasha

and Moichela (2011) argue that there is therefore a pressing need for the preparation of educators who can practise well in diverse settings. The country's education policy states that there should be respect for difference and an understanding of "the impact of class, race, gender and other identity-forming forces on learning" (DoE, 2000, p. 19). With situational knowledge, that is, when student-teachers are aware of the needs of diverse learners and how their learning is influenced by different contexts and they teach more competently.

Fundamental Knowledge

Fundamental knowledge has to do with learning to converse in a second official language. It could be argued that as South Africa is multilingual, all languages are valuable. Both the students and learners that he or she would teach should be able to competently converse. Walton (2016) has contended that recognition of home language drives inclusive teaching and learning that is not segregative. Fundamental knowledge also involves the learning of Information and Communication Technologies (ICTs), so that students are able to integrate and use ICT in their teaching in an age of technology. Carlson (2002) has argued that when technology is integrated into the curriculum, it improves teaching and learning.

Practical Knowledge

Practical knowledge involves learning from practice (DHET, 2015). It is the kind of learning in which varied ways of practice across different contexts are studied and analysed. It helps students learn to "theorise practice as [a] basis for learning" (DHET, 2015, p.10). This aligns with Winch's (2014) argument that the educator draws from the theoretical knowledge to inform practice. Thus, practical knowledge also includes learning in practice, while teaching in classroom contexts. Students can learn through observing others teach and reflecting on the practice of others. They can also prepare lessons, teach and reflect on their own teaching. To reiterate, learning in practice involves a student learning to draw from all the general and

specialised knowledge that forms professional knowledge in Education, and apply it at field practice. It is argued that practical learning is an important component of learning to teach (DHET, 2015).

Professional judgement also needs to be exercised by students of Education. Shalem (2014) explains that such judgement is expertise in decision making that is also derived from theoretical knowledge. She argues:

Teachers have to exercise professional judgement when selecting emphasis for the content to be taught, designing a sequence of contents in a specific topic, choosing correct examples to demonstrate a concept, interpreting learners' errors, dealing with cultural differences in learners and so forth. (p. 7)

Professional judgement is important because in order for a practitioner to contextualise and apply knowledge differently as required by specific situations, they need to exercise it (Shalem, 2014). Professional judgement and its application in practice is informed by a theoretical foundation of knowledge, and as Bigge and Shermis (1999) contend, one needs to be meta-cognitive about one's practice. As completing the specific programmes in the minimum time is a main concern of the study, the discussion now turns to throughput.

2.8 THROUGHPUT IN SOUTH AFRICAN HIGHER LEARNING

In the post-apartheid period, there have been increased enrolment rates in South African higher learning institutions, and this inclusion has incorporated formerly-disadvantaged social groups. A number of studies, like CHE (2010, 2013) and Carrim and Wangenge-Ouma (2012), have examined the participation and throughput rates of specific categories of students, to determine trends in the throughput in higher learning. Throughput is a broad term that can be defined and understood differently in different learning contexts. In CHE (2007) throughput is understood in terms of rates and it involves the:

Calculation of how many students in a given cohort completed their degree and graduated within the stipulated time, how many dropped out and how many took longer than the stipulated time to graduate (p. iii).

This suggests that the throughput rate is not only about those who complete their degrees within the stipulated time, but it includes those who drop out and who complete later than others. A throughput rate can be calculated in different ways in different learning contexts. Some higher learning institutions calculate it by matching the graduation rate of a cohort of students against the year of enrolment and completion for specific programmes. This approach gives them an impression of whether the throughput is low or high. From the ways in which throughput is calculated and determined, it could be argued that the concept could be understood differently in different context, depending on what stakeholders want to focus on. In the scope of the present study, throughput is thus understood simply to mean the rate at which students (with and without disabilities) prove themselves are able to do the amount of work required for a specific programme and completing it within the allocated time limit.

The general finding of the studies referred to here is that throughput rate is low across the board in South African institutions of higher learning. CHE (2013), for example, reveals that only one in four students from formerly-disadvantaged social groups such as women and blacks in contact-based institutions graduate within the minimum time, and 55% of the initial intake never graduate. In the light of this, in a recent summit on reflections on transformation in higher learning, it was concluded that among other things, the expansive higher education system lacks growth, has low participation and low completion rates (Second Higher Education Summit, 2015).

There are a number of potential reasons for low throughput in higher learning. Financial exclusion, lack of resources, as well as a lack of preparedness for higher learning on the part of the students, were all put forward in CHE (2010) as some of the causes. Scott, Yeld and

Hendry (2007) maintain that determining throughput accurately presents challenges because sometimes students leave the university to complete their programmes at another institution. This would illegitimately contribute to a low throughput level at the university where the student started the programme. In such a situation, throughput rates could be miscalculated and misrepresented.

The specific studies outlined in the first paragraph of this section have used gender and race as variables for calculating throughput rates in South African higher learning. While students with disabilities might also have been included in those categories, as a category of their own, their throughput rate has not been provided. One of the recommendations of the Fotim Report (2011) is that the throughput rate for students with disabilities should be looked into specifically. Thus, in the present study, review of literature on throughput helps to understand whether or not students with disabilities specifically complete the three specific professional degrees of focus within the minimum time expected. The review moves to transformation, it is key to the present study because one of its objectives is positive change in higher learning. There is need to grasp what changes have already changed.

2.9 TRANSFORMATION

Transformation is a very broad term and implies change from what has previously been accepted as the norm. Since the end of apartheid in South Africa, there has been transformation of systems in an attempt to achieve inclusion for all. In the present study, the focus is on the systems of schooling, higher learning and work settings for integrated learning (workplace). This is because these systems are inextricably linked; they interact with one another and their boundaries are porous, resulting in mutual influence. As such, they influence entry into the specific professional degrees as well as the professional learning of all students to graduate into the relevant professions. Thus, though the introductory chapter

stated that my focus is on higher learning, a glimpse into schooling and work settings for integrated learning is necessary. The review starts with schooling.

2.9.1 Transformation in Schooling

There has been some systemic transformation in terms of schooling in South Africa. While previously there was segregation in terms of disability, there has since been an effort to embrace inclusive education, in which all diverse learners are educated together in the mainstream. A number of scholars who include Naiker (2005), Walton, Nel, Hugo and Muller (2009) and Walton and Nel (2012), have done research on inclusive education in schooling to understand what it is and how it is working for diverse learners. What is emphasised is barrier removal, so that all learners, including those with disabilities, access learning in an inclusive learning environment in mainstream schools. Bell (2013) stated that inclusive education started in schooling and rolled into higher learning. It could be argued that though there are still barriers and obstacles that are confronted by learners and prevent their full inclusion, the move towards inclusive education has resulted in some change in schooling as a system. There have also been some changes in terms of adjustments in special schools, specifically in schools for the Deaf, to include learning areas that were not formerly offered to learners with hearing impairments (Peel, 2005). Howell (2006) also argues that there has been some change in terms of attitudes towards learners with disabilities by teachers in schooling resulting in positive change in terms of those learners having access to higher learning. The review now looks at transformation in higher learning.

2.9.2 Transformation of higher learning as a system

Transformation in the context of South African higher learning refers to institutionalisation of a new social order from the past social and economic structures and practices inherited from apartheid (Badat, 2010). What this involves is a change from the previous segregative

educated system to embrace inclusion of all, which the Government has committed itself to make. The driving force behind transformation in higher learning in South Africa is equal access and greater participation by all. Ndlovu-Gatsheni (2013, p. 183) argues that the purpose of transformation is to “depart from apartheid legacy to assert the values [...] and principles of constitutional democracy”. Therefore, institutions of higher learning are viewed by Government as power-structures that can be used as vehicles to achieve its transformational goal. In this respect, transformation of institutions of higher learning is viewed by stakeholders as a way in which the goals of inclusion of previously-disadvantaged social groups, such as those with disabilities, can be achieved (CHE, 2008). The concept of transformation is quite broad and includes a number of structural issues, like the merger of institutions of higher learning, policy formulation, funding, new Government plans and initiatives, the definition of goal and objectives of higher education, academic structures and quality assurance (Badat, 2010) as well as the challenges to all of these. In spite of the changes that have occurred over our 22 years of democracy, a fully transformed system has not yet been achieved, and specific issues of challenge have been reported in the Second National Higher Education Summit. These include an expanded higher education system through the broadening of opportunities of access. However, as highlighted in Section 2.2, there are low participation and success rates, specifically of formerly-disadvantaged social groups (CHE, 2013). Access, in the full sense of the word (which must include success) is therefore at stake, despite the transformational agenda that all diverse students should have entry to higher learning.

Eurocentric curricula and pedagogy are still dominant in South African higher learning. Unfortunately, academic cultures tend to ignore issues associated with teaching and learning and generating a curriculum that is inclusive to all (Second National Higher Education Summit, 2015). This imposes limits, not only the students’ learning, but also academics’

teaching. Mamdani (2011) argues that it is challenging to teach in an African location with intellectual paradigms that are Western. In reaction to this, there has been pressure from the critical voices, and this has culminated in ongoing student and academic movements opposing the existing order. What this exposes is that the system has not been able as yet to respond to all diverse needs. In the light of that it is argued:

Significant parts of the academic systems across all universities have not fully adapted to being responsive to the realities of highly segmented, socially diverse and cognitively differentiated learning communities and in many institutions the student supports are weak, under-resourced and unable to provide high quality, holistic student life experience. (Second National Higher Education Summit, 2015, p. 10)

While diverse students can access higher learning, the system is not yet able to include all students in academic learning as expected. Phasha and Moichela (2011) report that there have been acknowledgements that Euro-Western perspectives are limited, hence the need for shifting to inclusive alternatives. Reviewing literature on transformation in higher learning without looking at neoliberalism as the context within which institutions of higher exist including the specific Institution, is not enough, as that could have a significant impact in terms of throughput for students with disabilities.

2.9.3. Neoliberalism and transformation in higher learning

Review of literature on transformation in higher learning without looking at neoliberalism is not enough. Badat (2015) argued that on one hand institutions of higher learning are obligated to facilitate the agendas of transformation, on the other, their practices are informed by neoliberal policies. Thus, for the present study, both neoliberalism and transformation are important to understand because they have a significant impact in terms of access, professional learning and completing the specific programmes within minimum time by students with disabilities.

Neoliberalism has to do with competitive economic and political practices that advance individual entrepreneurial freedom and marketisation (Harvey, 2005). As viewed in the light of higher learning, Giroux (2014) argues that it is a doctrine in which among other things, students are seen basically as consumers of saleable commodity such as credentials or set of workplace skills. It implies that in neoliberal universities education and skills are viewed in the light of marketable commodities whose consumers are students. With specific reference to the schooling context, Gabbard and Atkinson (2007) argue that neoliberalism is a tool of restoring power of the elite, it fuels inequalities and it results in marginalisation rather than inclusion. By virtue of commodification of education within a neoliberal context, there could be perpetuation of class division and privileging of the elite's access to the specific professional degrees.

The South African institutions of higher learning are also informed by neoliberal policies. Badat (2015) argues that the institutions exist in an epoch of globalisation in conjuncture with the dominance of neoliberalism. Commodification and marketisation of education has also been reported in the South African context of higher learning. In CHE (2008), it is stated that marketisation of education is one of the inefficiencies of previously advantaged institutions. Furthermore, one of the aims of higher learning is to solidify education for global competition in terms of skilled labour (Carrim & Wangenge-Ouma, 2012). In essence, the institutions of higher learning could be viewed as influenced by core assumptions of placing value in productivity and marketisation for global competition. Nayyar (2008) argues that what is taught and researched has shifted towards the vocational because education has become a business. When higher education has become a commodity of business, the agenda of transformation could be suppressed because neoliberalism and transformation are incompatible. Badat (2015) reiterates that when wider economic policies of neoliberalism shapes and influences higher education, it constrains transformation. Thus, though

transformation seeks the inclusion of all diverse students, students with and without disabilities from disadvantaged socio economic contexts, could be limited in entering the specific professions at the Institution because professional degrees are said to be expensive (Le Ngrange, 2014).

The neoliberalistic assumption of valuing productivity has implications for disability. Grech (2015) argues that neoliberalism “perpetuates the colonial notions of able-bodiedness driven by productive output” (p. 15). It suggests that value is placed on able-bodiedness because it’s supposedly capable of productive labour-force. Those with disabilities could be marginalised on reasons of impaired bodies, thought of as unproductive. Devlin and Potheir (2006) observe that there is marginalisation of those with disabilities within neoliberal contexts. Marginalisation of those with disabilities might not be expected in the context of South Africa, because of policies of non-discrimination and equity. However, by virtue of the Institution’s existence within a context of neoliberalism, inequalities could still be perpetuated. Students who are previously disadvantaged and those with disabilities could still confront specific obstacles related to access, professional learning and graduating into the specific professions within minimum time. The latter is of much greater interest from the understanding that the quality of the contemporary neoliberal universities is determined through completion of programmes within minimum time by all students. Understanding the incompatibility of neoliberalism and transformation is important for the analysis of the recommendations provided for students with disabilities to complete the specific professional degrees within minimum time.

Within neoliberalistic contexts, education is competitively sought and not a democratic right. In schooling specifically, Greenstein (2015) explains that all learners are required to meet specific national educational standards in mainstream schools. Tests instruments are used to

determine the achievement level of all learners and in the process yield to competitive performance. Using tests instruments as measure of success might also apply in higher learning. In the South African context specifically, Schaap and Luwes (2013) report on using literacy tests as a predictor of academic performance and success in a specific learning area in an institution of higher learning. Critical Disability scholars critique measuring of success using tests because it results in competitive performance. However, competitive performance is viewed as disabling to students with disabilities (Devlin & Potheir, 2006). In the South African higher learning contexts, competitive performance could be viewed as presenting an uneven platform for those with disabilities because they are already disadvantaged from schooling (Howell, 2006). For the present study, understanding competitive performance as informed by neoliberalism helps to understand how students with disabilities are disabled at the Institution, in relation to access, professional learning and completing the programmes within minimum time.

2.9.4 Transformation in work settings

Literature on systemic transformation of work settings in the South African context is limited. However, available literature reveals that because of legislated disability rights specified in the Constitution and other relevant policies, there have been some positive changes in terms of social and physical structures and practices to promote access for all diverse people. For example, access to employment has to align with non-discrimination and equity policies. The specific policies will be discussed in detail in Section 2.6. In terms of employment, a specific percentage of the workforce has to come from formerly-disadvantaged social groups. Thomas (2002) has argued that since the early 1990s, the employment equity and non-discrimination policies have made significant transformation at site of work for integrated learning in terms of the inclusion of historically-disadvantaged groups. Efforts are also being made to

transform infrastructure so that it is accessible to those with disabilities, specifically those who are limited by physical structures such as the built environment. A detailed review on that has already been provided in Section 2.2.3.1.

In terms of attitudes is not clear to conclude whether they are positive or negative towards persons with disabilities at work settings as informed by transformation. Watermeyer and Swartz (2006) state that in South Africa, persons with disabilities experience “hostile and patronising attitudes” (p. 1). Persons with disabilities are not explicitly excluded, and Howell, Chalklen and Alberts (2006) argue that “attitudes and institutional practices [...] have perpetuated some of the deepest inequalities and most severe forms of discrimination in our country’s history” (p. 78). It can be argued that attitudes have not transformed, because those with disabilities are still excluded. However, a survey carried out in 500 companies on employer attitudes towards those with disabilities revealed that employers with higher exposure to persons with disabilities have better attitudes towards them, and they are also more willing to employ them when they have infrastructure that can reasonably accommodate their specific category of disability (Wigget-Barnard & Swartz, 2012). The issue of attitudes therefore seems to depend on specific work contexts and their level of understanding of disability and the accessibility of physical structures. The present study will thus seek to understand how specific students with disabilities experience attitudes both in higher learning and at work settings for integrated learning.

Transformation of specific systems might not be easily achieved. Though there has been some transformation, literature reveals barriers and challenges persist in the three systems as schools, higher learning institutions and work settings for integrated learning. As systems are interconnected as described in the introductory chapter in Section 1.7, a limitation in one system could influence another system. The study will seek to understand how the systems

and their transformation influence the inclusion of students with disabilities at entry, in professional learning and completion of their programmes respectively. A closer look is also applied to institutional transformation, because the Institution was previously advantaged, which is more carefully examined in the section below.

2.9.5 Institutional transformation

There has been some level of transformation in previously-advantaged institutions. There has been a move to include all diverse students as informed by a culture that purports to embrace difference (Badat, 2010). In an attempt to change institutional culture to embrace diversity, including that of the historically-disadvantaged, strategic policies have been developed (Cross, Shalem, Backhouse and Baloyi, 2010). The aim of such policies is to afford access and equal opportunities to students with disabilities specifically (Fotim Report, 2011). While this might not automatically result in inclusion, it suggests that there has been some level of recognisable institutional transformation which may one day accommodate all diverse students, including those with disabilities.

Traces and Residues of the Past in Previously-Advantaged Institutions

Traces and residues of the past are still being experienced in formerly-advantaged institutions of higher learning, despite all efforts of transformation. These institutions still reproduce and reinforce their inherited privileges, and structures and practices continue to reflect the features of apartheid. Carrim and Wangenge-Ouma (2012) argue that there continues to be a high level of internal inefficiencies which affect the black population the most. Some academic staff members are not willing to adjust the curriculum for incoming students from disadvantaged backgrounds. In addition, some institutions are still advantaged in terms of human and material resources (CHE, 2008). While the availability of quality human and material resources could offer better opportunities for learning, an unwillingness to adjust the

curriculum could have consequences for access, student throughput rates, student retention, and graduation rates (CHE, 2008). Students from formerly-disadvantaged backgrounds might fail to cope, fail, and ultimately drop out due to the high demands of course programmes, for which they have not been prepared.

The process of selection and admission to specific courses in higher learning in general still pose some problems, specifically for students with disabilities. Odendaal-Magwaza and Farman (1997) maintain that students with disabilities have reported being denied access to certain courses because it is believed that they will be unable to meet the course requirements due to their impairment. Howell (2006, p. 167) reports that:

Disabled students are still being told that the institution is not equipped to provide the support they require and it would be in the student's interest to seek out alternatives.

Howell's report suggests that although there has been some transformation in South African higher learning, those institutions are still not transformed to the extent that they include those with disabilities. Democracy is undermined when certain social groups are still excluded from access to specific higher learning institutions. These institutions are reproducing the structures of the past within a context that seeks transformation. As literature reveals, previously-advantaged institutions are not yet fully transformed to include all diverse students, yet there has been increased access of diverse students in South African higher learning (Carrim & Wangenge-Ouma, 2012). What this suggests is the presence of individual accommodation.

Individual Accommodation in Formerly-Advantaged Institutions

Individual accommodation involves a situation in which 'special provision' is made so those students who do not access the context with the ease that others do are also enabled to learn. This, however, is not the same as inclusion. Hibbs and Pothier (2006) argue that in some

Canadian universities, individual academic accommodation of students with disabilities is practiced to adhere to the policies of non-discrimination and human rights legislations. Since the South African Constitution prohibits discrimination and there are also other pertinent policies of non-discrimination, individual accommodation of students for whom the learning context was not designed might be inevitable. With specific reference to those with disabilities, Howell (2005) contends that accommodations provided are viewed by some stakeholders as the most 'reasonable' initiative they can provide to accommodate these students. While these help students with disabilities to also access learning, they can be viewed in light of ableism and segregation, because provisions and support provided are for specific categories and not for all students. It could be argued also that what could seem 'reasonable' to the stakeholders might not be to those students. Since the study will be carried out in a formerly-advantaged institution, there might be instances of individual accommodation, and it is important to understand how those with disabilities experience this. The discussion now turns to policy, without which this review would be limited. Policy is a framework that informs, underlies, guides and enforces specific structures and practices in specific contexts.

2.10 POLICY

Policy refers to public documents generated to represent the ideals, intentions, goals and objectives of a particular Government or organisation. It also provides guidance for addressing public concerns to achieve the best reality for all members in a society. Policy is a framework of specifications and guidelines concerning what should be done, how and by whom (Torjman, 2005). Contemporary policies, argues Hurst (1993), are aimed at widening access and improving opportunities to study for disadvantaged social groups. However, in reality, this is unfortunately not always possible because policy might not be theorised in terms of intent because it is a political practice (Fulcher, 1989). This implies that policy can

be used to serve the interests of those in power, and that it is not necessarily designed for the people. Thus, when looking at policy, not all clauses should be taken at face value, because what is happening on the ground could be different from what is stated in the documentation. The Fotim Report (2011) states that all universities in the UK are required “by law to provide services to students with disabilities” (p. 135). This is important for South Africa to emulate. Policy implementation in the UK also faced challenges in the beginning, and South Africa is certainly not alone in this respect (Tinklin et. al, 2004). Though the contexts are different, it could serve well for South Africa, to learn how the UK’s inclusive initiatives overcame challenges. Thus, the present study starts by reviewing policy in the context of the United Kingdom.

2.10.1 Policy in higher learning in the United Kingdom

In the United Kingdom, policy evolved in different times and stages. At present, all diverse students, including those with disabilities, are favourably included in higher learning. The UK has is a general policy on non-discrimination and provision for persons with disabilities, the Disability Discrimination Act of 1995 (DDA) (Hurst, 1996). It addresses specific facets of public life, including cancer and HIV. Initially, the policy did not address the education of persons with disabilities in higher learning (Riddel et al., 2005) but provisions for aspects such as transport, housing and recreation were included (Matshedisho, 2007). In 1997, the Disability Rights Task Force (DRTF) was established to look specifically into the issue of the educational needs of those with disabilities. One of the criticisms of that policy was:

What value do we place on education when a disabled person has rights against discrimination when going to a cinema, but not whilst at school or College? We have recommended a range of new legal rights against discrimination and duties on education institutions to make reasonable adjustments to allow access for disabled people. (DRTF, 1999, p.142)

As a result of such critique, value was then placed on the education of those with disabilities, and this ultimately gave rise to the enactment of the Special Education and Non-Discrimination Act of 2001 (SENDA). SENDA is very specific in terms of the provision of support for students with disabilities in higher learning. Institutions have an obligation to make 'reasonable adjustments' so that students with disabilities are included (SENDA, 2001). Such students are no longer denied entry because of disability (SENDA, 2001). Most institutions have since developed individual institutional disability policies, which specifically address admission. Since the enactment of Special Education and Non-Discrimination Act of 2001, there has been increased inclusion of students with disabilities in the context of higher learning in the UK.

Changes in policy were paralleled with adjustments to infrastructure. Knox (2002) states that retrofitting, installation of ramps at entrances, installing of lifts and widening the entrances have been done to adjust the built environment. The institutions have an obligation to do this even before students with disabilities came in (Disability Rights Commission, DRC, 2003). In essence, Universal Design has been applied to include all diverse students from the outset in terms of physical structures. The curriculum has also been adjusted to be inclusive and students with disabilities are included in teaching, learning and in examinations (SENDA, 2001).

The responsible stakeholders in UK's institutions have developed a monitoring system for the implementation of the specific policy (SENDA, 2001). They use statutory agents and civil courts to enforce the policy in society in general, and in higher learning contexts specifically. Anyone found disregarding the Act faces prosecution. Chataika (2007) argues that before such enforcement, systems and resources to make the implementation of the policy possible were put in place. It can be argued that when implementation is carried out in this way, those

responsible will not have any reason for not doing what they are required to do. Under these circumstances, enforcing compliance with the Law would be justified. Tracking how the British policies were developed and used to enforce inclusion, could be useful for South Africa as benchmark. Acknowledging that it is a process, and starting by mobilising resources, improving structures and practices, and putting helpful systems in place is a first step. Only thereafter can Law be used to enforce implementation.

2.10.2 Policy in South Africa

Of all African countries, South Africa has the most comprehensive and developed policies for inclusion (Chataika, 2007). However, policy implementation is slow (Lyner-Cleophas, Swart, Chataika & Bell, 2014). It is important to understand why it is so because without implementation, good policy might only ever be on paper. Policies have been reviewed in such a way that what is missing from one policy is discussed in another, and the review therefore does not critique individual policy limitations. The specific policies that seek to enforce transformation and inclusion in higher learning will be looked at, starting from the Constitution.

South Africa seeks to transform higher learning and include all, and this is enshrined in the Constitution. In the country's Constitution, the Bill of Rights Act 108 states that all citizens have the right to basic, adult basic and further education, and discrimination on the grounds of disability is prohibited (SA, 1996). This might have been viewed by the newly-democratic Government as a way to address issues of access, equity and to redress the imbalances of the past so that even the formerly-marginalised social groups would be included. Also outlined in the Constitution are central principles of non-equity and non-discrimination (Howell, 2005) and these translate into the pieces of national legislation such as the Employment Equity Act, No 55 of 1998 (Republic of South Africa, 1998a) and the Promotion of Equality and

Prevention of Unfair Discrimination Act, No 4 of 2000 (Republic of South Africa, 2000). The former addresses the creation of equity and equal opportunity and representation in terms of employment while the latter makes the provision that no-one is discriminated against unfairly. To reiterate, discrimination in general, and on grounds of disability specifically, is prohibited in the Constitution (SA, 1996). The legislature is applauded because access to schooling and higher learning specifically has been broadened. Importantly, the policy of equity also recognises the disadvantage in other social groups. It is by way of this policy that the inclusion of all at equal levels might be achieved in higher learning and consequently in employment.

There are also inclusive policies, which include the White Paper 6: Special Needs Education Building an Inclusive Education and Training System (DoE, 2001b). This specifically addresses inclusive education and barrier removal so that all diverse learners can access learning within the mainstream. It considers learners with disabilities to be the most vulnerable, and emphasises the need for their equitable participation in education (Howell, 2006). As has been noted by Bell (2013), the emphasis of the paper is on schooling and access into higher learning. It could be argued that that is important for the inclusive education system to start from schooling and advance to higher learning because schooling is foundational to higher learning.

For higher learning specifically, there is White paper 3: Transformation of Higher Education System Policy, which was enacted in 1997 (DoE, 1997) and the National Plan for Higher Education (DoE, 2001a). The South African Government's ideal is to use the policies as a framework to pursue the goals of transformation in higher learning (DoE, 1997) and to enable access of previously-disadvantaged social groups into higher learning. Students with disabilities are considered to have been previously-disadvantaged by apartheid in the

National Plan (DoE, 2001a). There is therefore a need for increased access so that they are included. Access, equity and success of those students are emphasised in the policies. To integrate disability into all aspects of Government functioning, there is the White Paper on Integrated National Strategy that was also enacted in 1997 (DoE, 1997). All the mentioned policies have good intentions, that is, to enforce the inclusion of all people in general and those with disabilities specifically, to enable them to access higher learning and employment in South Africa.

There is also the White Paper on Post-School Education and Training (DHET, 2013). This policy addresses the need for coordinated effort of both support staff and academics to include students with disabilities, and it also addresses the need to prepare people with disabilities for the labour market (Ndlovu & Walton, 2016). The policy emphasises an integrated approach that recognises the importance of teaching and learning, and also emphasises including HIV in the curriculum (DHET, 2013). The concern about preparation for the labour market is a worthwhile initiative that needs implementation. Professional learning and graduating into professions could be worthwhile if it enables professional employment of those with disabilities.

As I have mentioned, some institutions of higher learning have institution-specific disability policies. Matshediso (2007) argues that not all institutions have these, and he explains that those that use formal policies for all students to provide support for disability. While an institutional disability policy enables support and provision for students with disabilities, it could be viewed as perpetuating segregation and exclusion by virtue of being it meant for a specific group of students. Generating such policy could also be seen as stakeholders in institutions protecting themselves from such students, and casting them as an extra population

(Slee, 2011). The institution could hide behind policy, and state that they can only be expected to provide what is possible as stated in policy (Howell, 2005).

There is a scarcity of literature on the specific policies addressing how students with disabilities are to be included in teaching and learning in higher learning. Making provision on 'reasonable accommodations' is what is common in institutional policies of some institutions. The names of these will not be disclosed for purposes of anonymity. Since the team that visited institutions of higher learning in the UK found evidence that the needs of students with disabilities were being met as informed by policy and legislation (Fotim, 2011), the same could take place in South Africa. At national and institutional policy levels, the responsible stakeholders could learn to implement good policies and have specific ways of monitoring the implementation of policy. In this way, they would be able to include diverse students in higher learning, as they intend to. At present, while there are policies with good intentions in the South African context, they do not presently yield much with regard to improving the life conditions of persons with disabilities. This applies generally, and specifically to students with disabilities' entry into specific professional degrees and their professionalisation for specific professions. There are still numerous barriers that apply to all citizens, and particularly to those previously disadvantaged by the previous system.

2.11 CHAPTER SUMMARY

The literatures on concepts and issues that relate to the present study have been reviewed in this chapter. The chapter has provided an important understanding of the research that has already been done so that the niche in which this study is located can be justified. The conceptualisation of disability, specific models, access and inclusion in higher learning, professional degrees and professional knowledge of the specific programmes of focus, throughput, transformation and policy have all formed subsections of this review. The aim is

to have a clear understanding of the phenomena under study, which is supported by what scholars have previously addressed. The review has also sought to acknowledge the strengths, reveal the limitations, and highlight the nuances in current literature so that the present study and others can further push the boundaries of the field. The literature reviewed posits that it is possible for students with disabilities to confront obstacles and also be presented with opportunities for their inclusion in the specific professional degrees. The next chapter discusses the two theories that inform the study.

CHAPTER THREE: THEORETICAL FRAMEWORK: MAKING THE INVISIBLE VISIBLE

3 INTRODUCTION

This chapter presents Critical Disability and Decolonial Theories as the theoretical framework which informs the study. These are used conjointly and they complement each other in such a way that the shortcomings of one tend to be met by the other. Their strengths, weaknesses, contradictions, and nuances are discussed. A selection of core theoretical concepts have been extracted from both theories because they are relevant to explain access at the point of entry, professional learning, as well as completion of the specific programmes by students with disabilities at the Institution.

The theoretical framework employed in this study can be represented by the shape of a hut. Critical Theory is the roof. This means it is a meta-theory, and the broad theoretical underpinning for the study. The wall is divided into two, with Critical Disability Theory comprising one wall and Decolonial Theory the other. The two complement and balance each other. Within the walls are the selected theoretical concepts, which will inform the study and illuminate the phenomena under study. The wall below the roof is porous to show that there is interconnectedness between the two theories. The line that divides the wall is also dotted to mean that the boundary between the two theories is porous. They can inform or explain issues of disability similarly or differently, and they thereby complement each other. On the illustration, the theoretical concepts are only listed, to be discussed in later in detail.

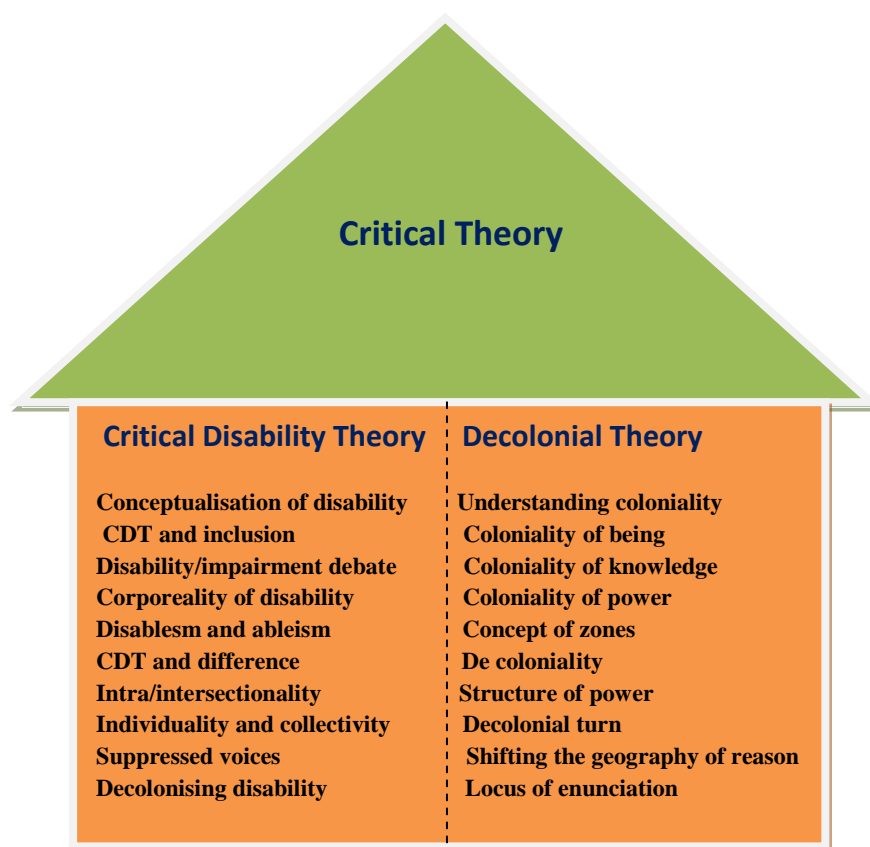


Figure 2: A theoretical framework

3.1 CRITICAL THEORY

Critical Theory is defined differently by scholars in different fields. One commonly-agreed-on tenet of the theory is that it seeks transformation and empowerment of the oppressed. According to Fay (1987), it endeavours to explain the social order while simultaneously becoming the catalyst which leads to the transformation of that order. The theory therefore generates an understanding of the social structure, as well as an awareness of the need for change. Macey (2000) describes it as a “theory that takes a critical view of society and human sciences” (p. 74). The theory not only exposes oppression, but it also critiques the existent social order and endeavours to find ways to dismantle it. It seeks the emancipation of victims of oppressive social, political and economic circumstances, by describing, interpreting and explaining the invisible issues (Blackie, 1993). Critical Theory seeks to establish an understanding among the oppressed *that* they are oppressed, *how* they are oppressed, and

why. Armed with this knowledge, people can emancipate themselves. Thus, the theory seeks to develop critical thinking which enables oppressed people to identify, to challenge, and to change an unequal society that imposes hegemonic practices and convinces them that the status quo is normal (Horkheimer, 1995). Thus, the theory seeks to give people the opportunity to disengage from oppression, and have more control of their lives. In other words, it strives for empowerment.

The Critical Theory discussed in the chapter is the version produced by the Frankfurt School. It is a meta-theory which emerged in the early 1930s and gained popularity in the 1960s. It has remained useful in explaining issues of emancipation and empowering the oppressed. The theory developed from the ideas of Marcuse (1964), Adorno (1973), and Horkheimer (1974, 1995), among others, who were reacting against the capitalist social order. The theory posits that capitalism shapes social relations, and imposes on people (without their knowledge the belief systems, values, practices and knowledges that justify and maintain political and economic inequities (Horkheimer, 1995). Furthermore, the ideological tools used to maintain a capitalist social order are present in society in general, and are even taught in institutions such as schools and universities, and are presented as the natural order. This hegemony is something people learn to take for granted, and not question (Gramsci, 1971). Critical Theory from the Frankfurt School emerged to bring social change by generating awareness of those hegemonic practices, and to attempt to liberate the oppressed. There has also been an adoption of the ‘ideology critique’ tradition (Horkheimer, 1995). This tradition provides a way to recognise and analyse unjust ideologies as embedded in everyday practices and structures. It also helps one comprehend how and why these ideologies are constituted. Thus, as informed by Critical Theory, the ideology critique is used as a tool to explain why people consent to the hegemonies, and is used for critical reflection that, it is hoped, will generate knowledge for change.

Critical Theory is a meta-theory out of which Queer, Critical-Race, Feminist, Critical Disability Theories and post-colonial critiques have grown. The listed theories are informed by Critical Theory in that they all aim to challenge and critique long-standing and hegemonic concepts, practices and structures, which are accepted as conventional. As a result, they are also understood and referred to as critical theories. However, the meta-theory Critical Theory is distinguished by capitalised first letters. Decolonial Theory is not currently understood to have come from Critical Theory *per se*, but as argued by Ndlovu-Gatsheni (2013), in terms of the political, the former extends from latter to make different meaning and create different forms of action. Decolonial Theory is connected and related with the meta-theory, and it also explains oppression and power in a different way. In the context of the present study, Critical Theory underpins the Critical Disability Theory, which consequently informs the study. It aims to generate practical solutions to promote the emancipation of the oppressed, and the creation of a world which satisfies the needs of the oppressed and empowers them (Horkheimer 1974).

3.2 CRITICAL DISABILITY THEORY

Critical Disability Theory critiques long-standing disability issues as they are conceptualised in mainstream disability studies. It has however been critiqued for its inadequacy as a theory and for providing what has been termed an inadequate understanding of disability. There are few scholars as among others Devlin and Potheir (2006) and Hosking (2008), who continue to use this theory and view it as adequate as a theory. There has been a shift to critique disability issues by employing the framework provided by Critical Disability *Studies*, because it is viewed as inclusive of a number of theoretical positions (Spagnuolo, 2016). It is contended that the Critical Disability Studies takes cognisance of other theories, and specifically of the important work they have achieved. The oppression of persons with disabilities is a broad and global issue, and the value of the work produced by those who

participate in different studies across the globe should be taken into account and drawn together (Shildrick, 2012). Thus, though the study is informed by Critical Disability Theory, it draws from Critical Disability Studies more than from the theory in itself.

The proponents of Critical Disability Studies comprise a range of post-conventionalists, post-structuralists and post-colonialists, who draw many of their ideas from the foundational work of Michel Foucault, Judith Butler and Jacques Derrida (Meekosha & Shuttleworth, 2009). They seek to build on conventional disability studies, particularly in terms of the conceptualisation of disability and the issues that spring from how it is conceptualised. They acknowledge the achievements of previous scholars as pioneers in the disability work. However, they also constructively critique and problematise specific disability issues, so as to generate new ways of understanding disability. Ultimately, their aim is to improve the living conditions of all diverse persons, including those with disabilities whom they all agree are undervalued and discriminated against (Meekosha & Shuttleworth, 2009).

Among others, Gabel and Peters (2004) do not only critique the social model, but propose resistance theories in its place. Another scholar who is particularly vocal in this regard is the post-structuralist Tremain (2002; 2005), who draws extensively from Foucauldian concepts of power and Governmentality to explain issues of power and disability, inclusion, and the debate of impairment and disability. Devlin and Potheir (2006) have also weighed in, and they discuss the theory from their background of Legal studies and base their discussion on the parameters of Law within the Canadian context. Other scholars, namely Sherry (2007), Hosking (2008), Meekosha and Shuttleworth (2009), Shildrick (2012), and Goodley (2013, 2014) critique specific disability issues such as ableism and disablism, and seek to create a new understanding of disability in the light of intra/intersectionality, suppressed voices and acknowledgement of difference. They hereby hope to build on the established dominant

discourse in conventionalist disability studies. There are also post-colonialists like Grech (2015) and Soldatic (2015), who seek to shift the understanding of disability from that of a Eurocentric Global West perspective, to include voices from the South. What this would involve is the decolonisation of disability.

The present study discusses the shifting conceptualisation of disability, intersectionality of disability, acknowledgement of difference, inclusion, the disability/impairment debate, and the critique of the social model, ableism and disablism, individual and collective experience of disability and lived experience of disability, and privileging of the suppressed voice. Those are important as they relate to and illuminate the phenomena under study.

3.2.1 Conceptualisation of Disability

In Critical Disability Studies, disability is understood as an integral part of mainstream society. This could be viewed as a move towards genuine inclusion, however deconstructing the binary of ‘disabled’ and ‘non-disabled’ could actually result in the unintended consequence of denying difference. This could further disadvantage those with disabilities, rather than including them. Vehmas and Watson (2014) contend that there are “real needs that represent real difference” (p. 647), and when society does not accept this, the result is injustice. Unlike those with identity markers premised on their race and gender, people with disabilities confront barriers in society that limit their access, participation and achievement in society. Overlooking this could result in exclusion rather than the intended inclusion. Wolf (2009) has suggested that “The parallel to race and gender is not disability but impairment” (p. 135). What it implies is that disability might be understood as generative of difference, just as race and gender are, however impairment is real and can limit individuals with disabilities.

Critical disability scholars problematise a narrow understanding of disability, and critique the dominant view in which disability is categorised as the set of afflictions which apply to persons with disabilities. This is viewed as reductionist, as it oversimplifies disability rather than understanding it in complex ways that reveal the various forms of oppression that those with disabilities are subjected to (Hosking, 2008). The scholars, who include Shildrick (2012), propose the deconstruction of binary notions of abled/disabled, because these create hierarchical differences and tend to privilege one category over the other. Critiquing the binaries, Potheir and Devlin (2006) argue that these constructs are othering, and that they are responsible for generating the categories of 'them' and the 'us'. The former are those with disabilities and the latter, those without. Dividing people into groups in this way invariably results in differential power relations, as those with disabilities are given a lower status than those without. Goodley (2011) argues that such categorisation of people is effected for political reasons, so that one group is able to dominate the other. The established and conventional understanding of disability is therefore limited, and it needs to be understood in the context of multiple identities. What would enable the understanding of multiple identities is intersectionality of disability that is discussed in the paragraph that follows.

3.2.2 Intersectionality of disability

Critical Disability scholars emphasise intra/intersectionality to foster an understanding of disability intersects with other identities. Disability should be thought of as intersecting with multiple identities as sexuality, race, gender, ethnicity and class, and should be placed in the centre of them. (Sherry, 2009) Furthermore, it should be viewed as a fluid and ever-changing entity, shared by people with and without disabilities, and not as an absolute category which is stable (Sherry, 2009). What it implies is that persons with disabilities are not to be viewed as a group on their own 'with special needs'. That categorisation overlooks the fact that

individuals who fall into the disability category could be positioned within positions of power (Goodley, 2013). Disability should be seen as a springboard: a space from which to think through a host of political and theoretical issues that apply to all identities (Goodley, 2011). There has been a shift from the view of double oppression (Crenshaw, 1989), in which disability is always viewed as the intersection of one axis of oppression with another. In Critical Disability Studies, the 'disabled' body is not only understood in the context of oppression, because persons with disabilities are intersectional subjects, and they therefore embody other positions which can be powerful and valued in an ableist culture (Goodley, 2013). By virtue of disability being multi-layered in terms of gender, race, ethnicity and class, certain 'disabled' people can occupy privileged positions over others. For example, a white female student with a disability from a high socio-economic class could be privileged over a black male student with a disability from a low socio-economic class. Given this breeding ground of inequality, Mertens (2009) argues that intersectionality can also privilege and does not always yield double oppression.

3.2.3 Critical Disability Theory and difference

Difference is acknowledged in Critical Disability Scholarship, and disability is recognised as an issue of difference and not as an autonomous category of its own kind. Vehmas and Watson (2014) state that:

CDS does not deny the reality of social groups as disabled, it asserts that such group differences are undesirable and potentially harmful. (p. 648)

In essence, Critical Disability scholars understand that people are different; however their view is that emphasising these differences could entrench inequalities. Addressing why differences should be acknowledged in relevant scholarship, Hosking (2008) states that when difference is dismissed or purported to be invisible, the rights of persons with disabilities can

be violated, and those with disabilities might not participate fully because of exclusive environments. He further asserts that when there is acknowledgement of difference, suitable adjustments can be made for persons with disabilities (Hosking, 2008). For example, a prerequisite for persons who have physical disabilities to be provided with wheelchairs and for the physical environment to be adjusted is the acknowledgement that there are such people in society. The deconstruction of the often harmful binary of ‘abled/disabled’ could be misconstrued as denying the difference that exists between people, however Critical Disability scholars do acknowledge that people are different. Bringing in a stance informed by intra/intersectionality (Goodley, 2013) could help in terms of catering for individual difference, and this could result in genuine inclusion. Thus, Critical Disability scholars do not only acknowledge difference, but endeavour to expand an understanding of it. Scholars like Vehmas and Watson (2014) view the deconstruction of the binary as a denial of difference when they argue that society without difference might not be a “realistic possibility” (p. 648), however Critical Disability scholars worry that people will be treated differently when categories are emphasised. It could be argued that the way persons respond to difference is also important if they are to be included or excluded, and this shifts the focus of the discussion to a response to difference, which is looked at next.

Positive and Negative Responses to Difference

The response to difference persons with disabilities have can be either negative or positive. Addressing their positive response to disability specifically, Shakespeare and Watson (2001) maintain that it occurs when those with disabilities view themselves as marginalised or as a minority, and they are disadvantaged by both the social and physical mechanisms designed for the mainstream. When difference is understood and acknowledged in this way, persons with disabilities can actively challenge the status quo that disadvantages them, and they can claim their rights and power, and ultimately participate in society (Vehmas & Watson, 2014).

Morris (1991) observes that a positive response to difference is liberating and empowering. Vehmas and Shakespeare's (2014) argument emphasises the nuance of balance, which would involve an acknowledgement of difference as disadvantageous, and also that it is the basis for possibilities. For example, while it is acknowledged that two persons with disabilities are different, one could have limitations and the other possibilities because they might not be equally limited.

Negative response involves individuals responding negatively to difference, and the response is informed by widely-upheld stereotypes. Examples of such notions are that disability is a harmed condition (Harris, 2001) or that disability is inability. There is then a "rational preference not to be disabled and [...] hope for perfection" (Vehmas & Shakespeare, 2014, p. 46). In this case, the person denies that she or he is different and professes the same capability and ability as others. It could be argued that such a response perpetuates oppression because individuals do not confront the reality of difference. For the present study, understanding negative and positive responses to disability is helpful to grasp how students with disabilities respond to difference. Negative response to disabilities might hinder inclusion, which provides the content of the following section.

3.2.4 Critical Disability Theory and Inclusion

Critical Disability scholars posit a genuine inclusion in which all people in their vast diversity are included, and not only those with disabilities. They envisage that when harmful categories have been deconstructed and all people are viewed in terms of embraced diversity, in which those with disabilities can engage in equal relationships with other diverse groups, and demand respect and equal opportunity in society (Sherry, 2009). Sherry further argues:

That shifts the discussion away from the ways in which disabled people are a minority group and instead focusses on the ways in which certain bodies are

constructed in the medical, legal, education and economic discourse at the same time as they are manifested materially in the body, mind and senses. (p. 76)

What Sherry (2009) asserts is that disability should be located in a context, that is, it should be understood in terms of how it is constructed by society. The focus should not be on persons with disabilities as individuals. Thus, Critical Disability scholars concern themselves with making contexts inclusive to all. They demand a total overhaul: a radical reconceptualisation of both social and physical structures to be inclusive to all. In Devlin and Pothier's (2006) words, inclusion: "demands a reconceptualisation of the nature of, and the lived relationships among, the citizens, the self and the community" (p. 20). According to Critical Disability scholarship, inclusion should involve all persons with and without disabilities transforming their view of each other, their relationship in the community, and all the socio-cultural contexts. The projected result is that all persons in their pluralities, multiplicity and differences will be able to access, participate, and achieve. It is possible that issues of normalisation, ableism, support, individual and 'reasonable' accommodation of those with disabilities in society might not be necessary in this radical kind of inclusion.

In the context of the present study, the conceptualisation of disability, intersectionality, and inclusion embraced by Critical Disability scholars, have all been important to inform a wider scope of understanding disability in terms of diversity. It should not be reduced to a specific category of those with impairments, but to a broader concept which intersects with multiple identities. Intersectionality specifically helps to understand that not all students with disabilities are equally oppressed, hence the need for a nuanced analysis of students with disabilities' inclusion in terms of entry, professional learning, and completing their programmes on time. It is also important to understand how and why the Critical Disability scholars separate disability from impairment as it is also significant to the present study.

3.2.5 The disability/impairment debate

Critical Disability scholars consider what has often been a forcefully-imposed boundary between impairment and disability as porous. According to them, both constitute the experience of disability, and they also constitute each other. The view of disability and impairment as separate entities that do not constitute each other (Oliver, 1990, 1996b) has been problematised by Tremain (2005). She critiques the paradoxical reasoning of those who see the two as separate, who seem not to consider other categories who are also excluded and stigmatised (on grounds of their skin colour or queer bodies, for example) as ‘disabled’, but only those with impairments (Tremain, 2005). Thus, drawing on Foucault’s concept of modern power repressively regulating political lives, impairments, like disability, are understood by Tremain (2005) as a social construct. That is because those with impairments meet specific requirements defined socially and politically and as such it is argued that there is a causal relationship between disability and impairment (Tremain, 2005).

Blurring the boundaries of disability and impairment could, unintentionally, entrench the disadvantages of persons with disabilities. The well-intentioned attempt to view disability in terms of multiple identities is justified because it broadens the scope of understanding intersectionalities related to disability, however this could result in not knowing what is to be done: what support and provision need to be provided to include those with disabilities. Vehmas and Watson (2014) state that the dichotomy of disabled/abled provides a basis for resistance from those who are oppressed. Thus, while I also understand disability in context of diversity, I understand the need to focus on students with disabilities specifically, in the current study. The intervention directed to the specific group might also be useful for all other diverse students at the Institution.

3.2.6 Critique of the Social Model

Critical Disability scholars broadly acknowledge the positive change the social model has effected for persons with disabilities, but they also critique the model's shortcomings. Its departure from the individual model, in which disability is viewed as tragedy, to locate disability in the social context is considered by Critical Disability scholars to have been an essential reconceptualisation. However, the model is critiqued for its emphasis on collective experience of disability rather than that of the individual; this collective view is considered to deny individual agency (Gabel & Peters, 2004). What this denial might result in is the oppression of individuals within the group and the suppression of individual views and voice. Goodley (2011), in agreement with Shildrick (2012), critiques the simplistic materialistic focus of the social model. Though it helps those with disabilities to be provided with provision, some scholars argue that that does not cater for other needs such as the psychological wellbeing of persons with disabilities. Vehmas and Watson (2014) have argued that disability-related disadvantage is intrinsically linked to economic injustices, and that material conditions might not be overlooked in society because they are the basis for the creation of disadvantage for persons with disabilities. Oliver (2013) asserts that a lack of emphasis on the material has led the British Government to cut down on provisions for persons with disabilities, resulting in the entrenchment of the oppression of persons with disabilities. While Critical Disability scholars seek to overcome this oppression, their critique of the social model can be accused of having unintended consequences, and, in some ways, being self-defeating. As already mentioned, the present study gives the traditional social model space in order to emphasise the importance of locating disability in a social context. It has its uses, one of these being that it enables an understanding of how students with disabilities experience oppression resulting from the structures and practices at the Institution. The validity of the critique that the model limits the collective voice is acknowledged,

because it is essential to give space to the individual voices of participants. What this eclectic approach will hopefully enable is a nuanced understanding, in which the opportunities confronted and obstacles presented are not generalised to all students with disabilities at the Institution.

3.2.7 Disablism and ableism

Critical Disability scholars challenge disablism and ableism. Barnes and Mercer (2003) inform us that the former is a mode of specific oppression that subordinates persons with disabilities and manifests in exclusionary practices at various levels of interpersonal, institutional and societal. Disablism emerges when those without disabilities wield relative authority and power, and impose restrictions on the activities and psycho-emotional wellbeing of those with disabilities (Thomas, 2010). One of the disablist ways to students with disabilities in learning contexts are inequalities created through competitiveness performance as influenced by assumptions of neoliberalism. The issue has already been discussed in detail in Chapter Two. Greenstein (2015) argues that competitive performance excludes rather than include learners with disabilities and those from disadvantaged social contexts. Critical Disability scholars also question competitive performance and view it as disablist (Devlin & Potheir, 2006). It is understood that way because it sets an uneven platform for competition to those with disabilities. For the present study, such disablist practices are important because they help to understand how students with disabilities are disabled at the Institution in relation to being expected to complete the specific programmes within minimum time as their non-disabled counterparts.

Ableism is essentially a preference of ability over disability. Hehir (2002) states that it involves a devaluation of disability and a preference for ability, and this result in a generally-espoused notion that able-bodiedness or ‘normalcy’ is better than disability. It results in

society believing, for example, that it is better for a child to walk than to roll, to read print than to read Braille, or to speak than to sign (Hehir, 2002). Goodley (2014) concurs that that ableism favours able-bodiedness. Within an environment in which ableism is entrenched, those without disabilities view themselves as having the responsibility to restore persons with disabilities back to a 'normal' state. It can be argued that ableism informs normalisation, rehabilitation and a medical view of disability, because those with disabilities are seen by society as having been victims of a tragedy and in need of 'fixing'. Such a response by society is vehemently critiqued by Critical Disability scholars because ableism assumes that those with disabilities want to be what societies have determined as 'normal'. An ableist mindset is that those without disabilities do not belong in the mainstream, and they can only be absorbed into it when they have been normalised. Eldridge (1997) has argued that there should be a barrier-free society, in which all people belong. In Critical Disability scholarship, both ableism and disablism are viewed as limiting genuine inclusion of those with disabilities. The former entrenches normalisation, and the latter perpetuates exclusion.

Critical disability scholars' critique of ableism and disablism is also contested. It is argued that their critique is deficient because they do not provide ways to overcome the limitations of the two, but only draw attention to their moral wrongs (Sayer, 2011). There has been a counter-critique to Sayer's (2011) provided by Spaguolo (2016) who states that, moral guidelines are problematic as they might not apply to all diversity. What we can draw from this is that it is difficult to provide ways of overcoming the limitations of ableism and disablism in a way that suits *all* diverse people. In terms of the study, an understanding of the ableism informs how understanding of the concept by the responsible stakeholders promotes or hinders the inclusion of students with disabilities at the Institution.

3.2.8 Individual and collective experience of disability

Persons with disabilities have individual and collective experience of disability. Simply explained, it means being a unique individual, and belonging with others as part of a group, respectively. Simons and Masschelein (2005) contend that individuals with disabilities collectively belong to a group and share common experiences of disability. Also, as individuals, they have unique experiences of oppression. As a group, they could be oppressed in the same way, and it could give rise to a collective response rather than an individual one. However, an individual with a disability could be oppressed differently from others, and that would require an individual rather than a collective response to oppression. While from an experience in the past, a collective response to oppression has been able to change the lives of persons with physical disabilities (UPIAS, 1976), Critical Disability scholars like Gabel and Peters (2004), emphasise that the collective experience should not deny the individual. It implies that the collective experience of disability should not obscure individual differences in people with disabilities as it could oppress individuals within the group. In essence, there is a need to strike a balance between the collective and the individual experiences of disability, to avoid homogenising persons with disabilities.

A grasp of context is important to grounding an understanding of the response from those with disabilities. Individual experience of disability and the independence of individuals are considered important in the West because self-reliance is valued (Curran & Runswick-Cole, 2013). However, scholars who have worked extensively with children with disabilities in disadvantaged communities note that within such contexts, collective experience of disability is given primacy because of close family and community networks (McLaughlin et al., 2008). A Western understanding of individual experience might not be applicable to less individualistic contexts, where the collective has a strong influence on disability. In essence, understanding of the context first is important as it could provide a basis for understanding

individual or collective experience of disability and consequently the respective responses to oppression. Thus, in Western societies, where independence of the individual is emphasised, the individual experience and response rather than the collective might not be denied. However, in the context of collectivist community, it is important to understand the importance of collective experience and responses. Understanding the importance of the influence of contexts on individual and collective experience of disability and consequently the responses, help to understand that the participants are not homogeneous, and that they have different contexts from which they understand their inclusion at the Institution. The discussion turns on lived experience of disability.

3.2.8.1 Lived experience of disability

It has been argued that one of the ways to dismantle oppression for persons with disabilities is a shift to a bottom-up approach, which gives primacy to those with lived experience of disability (Devlin & Potheir, 2006). The lived experience of disability could be understood in the context of corporeality. Corporeality refers to the role of the physical body in society. The concept of corporeality helps to inform understanding that all human beings inhabit a body, lives in it and it is a prism to reach out to the world (Campbell, 1999). However, the ‘disabled body’ has been represented as sub-human and positioned as the ‘Other’ because of ableist normative assumptions of able-bodiedness. Furthermore, bodies have been marked as essential and inessential corporeality (Campbell, 1999). Thus, it is difficult to find subjugated knowledge and voice from those with ‘disabled bodies’ because as the oppressed, they are locked in their objectified bodies (Young, 1990). Critical Disability theorists therefore seek new ways of understanding normalisation of the body and creation of a ‘disabled’ body, with the view of bringing back all bodies and casting them as valuable (Goodley, 2013). Furthermore, Campbell, (1999).argues that the presence of a ‘disabled’ body means that materiality cannot be overlooked and embodiment is constantly recalled. It implies that it is

those who inhabit a ‘disabled’ body who have a lived experience of disability. Grosz (1994) argues that experience is always embodied, corporeally constituted and located in one’s incarnation; hence it’s linked with knowledge production. It implies that knowledge about disability could be best understood from those with a ‘disabled’ body who have a lived experience. It is within that context that the proponents of the social model as Oliver (1990), who locates disability solely in the social context, are critiqued. Their position could be viewed as denying persons with disabilities a lived experience of disability. In the context of the present study, corporeality and disability helps to understand that though the interest is in the obstacles and opportunities in the social context, lived experiences of disability are also important to enable inclusion.

The Critical Disability scholars have shifted their understanding of the body as simply biological (Meekosha, 1998). They critique the essentialist understanding that an impaired body is deficient. They argue that the body needs to be brought back into the debate, but as a social entity. Goodley (2013) points out that “bodies are lived in but in the social setting that they inhabit” (p. 635). It implies that all bodies, including those with impairments, should be recast in terms of value in the social context. There is a need for the inclusivity for all bodies in all their uniqueness. In Critical Disability scholarship, all bodies matter, and as a result, the social contexts in which these bodies exist should transform to be inclusive to all. Technologies and mechanical devices could be used to enhance, and even constitute parts of bodies with impairments, so that positive identities are developed to overcome feelings of inadequacy (Meekosha & Shuttleworth, 2009). A positive view of bodies with impairments could go a long way to minimising the associated loss of self-esteem of those with disabilities.

It is noted however, that despite a concerted effort to depict the body in a more positive way, Vehmas and Watson (2014) emphasise that impairments have tangible effects on people. Hence, understanding of corporeality and the importance of lived experience are thus also crucial. However, in the context of the present study, focus will not be much on impairments and lived experience of disability, but on the extent to which the social context is transformed to include all diversities students, and those with disabilities specifically. There is also need to explore how technology is being used to enhance the learning of the students with disabilities.

3.2.9 Privileging suppressed voices

Critical disability scholars critique the idea of constructing others as voiceless and powerless. Devlin and Potheir (2006) share the view of Hosking (2008), who writes that the voice of those with disabilities should be privileged and that they need to be heard. Traditionally, disability has been viewed and understood from the able-bodied perspective (Hosking, 2008). Titchkosky (2003) observes that the voice of those with disabilities is contested, suppressed and silenced by dominant voices in the mainstream. When those with disabilities say things that those in positions of power want to hear, they are listened to, whereas when they voice something mainstream society does not want to hear, theirs is considered an inappropriate response to disability. Thus, voice of those with disabilities is subsumed by those of the able-bodied. This has led to people without disabilities speaking for those with disabilities, and this is staunchly contested in the Critical Disability scholarship. Shildrick (2012) adds that the voice of those with disabilities should be privileged, but that all who have been previously-oppressed, such as women and black persons, should be privileged too.

The issue of privileging the voice of those with disabilities could further be understood through the concept of hybridity. As understood from Grech and Soldatic (2015), hybridity

involves learning about different cultures, different experiences of disability, construction of knowledge of disability, ways of knowing about it and different ways in which disability is interpreted. Hybridity is therefore a source of multi-studies and research that are being carried out on disability. Chataika (2012) proposes for post-colonial disability studies that are also accessible to the marginalised Global South and the inclusion of persons with disability into the research. In essence, hybridity should be promoted through sharing of all disability knowledge on a common platform between the South and West. In so doing, all disability knowledge and disability experiences could be understood as scholars with and without disabilities, from both the West and South share knowledge.

In the context of the present study, hybridity helps to understand that all participants' voice should be privileged. Privileging the voice of all participants would enable understanding of the unique experiences of students with disabilities' obstacles and opportunities in accessing the specific professional degrees and their professional learning at the Institution. Thus, when informed by understanding of hybridity, all previously-suppressed voices, particularly those of persons with disabilities, could be heard.

3.3 DECOLONIAL THEORY

Decolonial Theory seeks to liberate the other from oppression. Key proponents of this theory have already been introduced in Chapter One, in Section 1.9.2. Their main objective is to unmask and expose the ills of coloniality and Western modernity, and provide methods of self-liberation for those victimised by these ills. The theory is described as a different thought, language and logic (Mignolo 2007). This means it does not bring the new, but a different understanding of long-established and hegemonic structures and practices, to make the invisible visible by bringing awareness of oppression. Ultimately, it aims to provide the means of liberation.

In context of Africa and South Africa specifically, Ndlovu-Gatsheni is one scholar who uses the theory persuasively to illuminate issues of transformation in higher learning in African countries, particularly South Africa, as well as issues of xenophobia (Ndlovu-Gatsheni, 2013). The theory is also gaining popularity with doctoral scholars. Ndlovu (2015), for example, applied the theory to inform his study within Anthropology. How he used it and why his study is of significance to the present one has been discussed in Section 1.9.2.

Decolonial Theory does not specifically address disability issues, but it does aim to illuminate issues of oppression of the ‘other’: a category which those with disabilities form a part. Rose (2004) contends that the theory does not only oppose coloniality, but it proposes ways of overcoming oppression and prejudices that are imposed. It therefore offers a method of overcoming oppression. It could be argued that it is important for this study that the theory is used alongside Critical Disability Theory, because one of the latter’s limitations is that it might only expose the setbacks in disability issues (for example in ableism and disablism) but not provide a solution (Vehmas & Watson, 2014). As Barton (2001) maintains, the field of disability studies urgently needs a theory of political analysis inspired by transformative change. In other words, disability studies require the addition of a theory of political action which would involve the generation of tactics or strategies for its implementation. Decolonial Theory, I would argue, could be that theory. Furthermore, the theory arose from the failures of postmodernism, in which postmodernist scholars sought to address among others, racially hierarchy, patriarchy, Christian-centrism and Euro-American centrism as the problems of modernity. Zeleza (2003) argues that postmodernism did open spaces for previously silenced voices as those of women but rejected “the leftovers of Enlightenment” (p. 237). That implies the understanding of the underlying cause of inequalities, injustices and oppression, which is coloniality, was reductionist. It could be argued that the present world order can be defined as

a world order of global coloniality. Since Decolonial Theory addresses the underlying cause, it can provide useful insights.

Decolonial Theory is said to stand on four legs. Dastile and Ndlovu-Gatsheni (2013) explain that there are four core concepts that build it up. They are: the coloniality of being, coloniality of knowledge, coloniality of power and coloniality of nature. Each concept seeks to unveil how the structure of coloniality oppresses the other within a specific criterion. The theory thus seeks to illuminate how the oppressed experience oppression. One of its contentions would be that they use their agency to overcome it. What this would involve is an epistemic change in oppressed people's way of thinking and doing. This would form a part of decoloniality, which is discussed in detail in the chapter in the Sections 3.3.5.1. The coloniality of nature, it has been said, is yet to be studied in detail (Dastile & Ndlovu-Gatsheni, 2013). For the present study, the concepts of coloniality of being, coloniality of knowledge, coloniality of power and decoloniality are important because they can explain a number of core issues that pertain to the phenomena under consideration.

3.3.1 Understanding coloniality

Coloniality and colonialism are different concepts. They are nevertheless often confused and used inter-changeably by people who understand the two to mean the same thing. Maldonado-Torres (2007) explains that colonialism involves the “political and economic relation in which the sovereignty of a nation or people rests on the power of another nation, making the nation of power an empire” (p. 243). Coloniality involves long patterns of colonial matrices of power, which have emerged from colonialism. These matrices of power permeate “culture, labour, intersubjectivity, relations and knowledge production” (p. 234). Coloniality is a power which continues to influence and oppress social groups, long after colonialism came to an ostensible end. The oppressed continue to live under these oppressive

powers and have accepted this state of affairs as a reality of modernity (Quijano, 2000). Maldonado-Torres (2007) observes that coloniality is another name for the ‘darker side’ of modernity. This ‘darker side’ needs to be unveiled because it sustains illegitimate means of control, domination, and exploitation while it is ‘clothed’ in the “language of salvation, progress, modernity and being universal for all” (p. 8). What is revealed here is that coloniality is a disguised structure. It needs to be unveiled and made visible if all people are to understand certain deep-seated and hidden issues of oppression. Quijano (2000) further contends that people live under coloniality, and they breathe it, and they will continue to do so as long as the oppressive structure of coloniality is sustained (Quijano, 2000). Thus, the concept of coloniality informs this project’s understanding of the continued existence of colonial forms of domination and oppression through the reproduction of colonial culture and structures (Ndlovu-Gatsheni, 2013). Coloniality can be understood as a specific power structure that makes some powerful and others powerless (Ndlovu, 2015).

Coloniality produces people who internalise oppression and become part of it. Ndlovu-Gatsheni (2013) states that people disenfranchised by coloniality hate themselves and also where they belong. They internalise Western culture, its ways of knowing, and assume that its knowledge is universal. They learn to strive every day to be what they are not, attaching value to everything that is Western (Ndlovu-Gatsheni, 2013). I now seek to understand precisely what coloniality involves, because it is the oppressive structure that Decolonial Theory seeks to expose. What it could enable is a better understanding of the extent to which I as the researcher, as well as the participants in the study, are constrained by coloniality. It is essential in order for the present study to be a transformative. Without an awareness of the effects and limitations imposed by coloniality, we wouldn’t work well as mutual partners, given that coloniality often gives rise to systemic hierarchies which, while invisible, are deeply felt. However, given that the theory seeks to expose coloniality and its effects on the

oppressed, there is a danger of it being reduced to activism. Because the theory reveals the underlying cause for human problems, that could be sensitive and it results in a risk of becoming co-opted, over-sentimentalised and understood without intellectual vigour. When the theory is applied without full understanding it might result in irrational and emotionally-charged reactions. While it does offer a method of fighting, it is important that it is not understood as a theory of fighting and one of ideas of struggle and not a saviour for all human problems.

3.3.2 Coloniality of being

Coloniality of being exposes how different identities, including the process of the categorisation of people, emerged. Quijano (2000) remarks that:

World ordering by dominant powers continue to differentiate the global population into bipolar binaries of inferior and superior, irrational and rational, the primitive and civilised, traditional and modern, the black and the white, the civilised and the uncivilised, the powerful and the marginalised, the ‘able’ and the ‘disabled’. People are categorised and given identities. (p. 343)

The theory therefore explains how the bipolar dichotomies that Critical Disability scholars seek to deconstruct came about. Coloniality of being also reveals how the notion of ‘the other’ has emerged. Ndlovu-Gatsheni (2001) maintains that through using normalcy as the standard measure, difference, plurality and multiplicity are denied. Those with disabilities, specifically, are socially constructed as ‘the other’. This is a result of the social ordering which uses a ‘normal body and mind’ as a standard, and all individuals with different bodies and minds are viewed as deviating from the norm, and are hence labelled ‘disabled’ (Quijano, 2000).

The coloniality of being exposes how equality and inequality emerge in society. As Ndlovu-Gatsheni (2001) has argued, the dominant powers use ‘normalcy’ as a yardstick to categorise

people and place them into hierarchies. It almost goes without saying that anyone falling within the margins of ‘normalcy’ occupies a superior position to those outside it. This is how inequality emerges: those labelled as inferior become unequal to those labelled superior. In a parallel construct pertinent to this study, those constructed as ‘primitive’ are inferior to the ‘civilised’, and the ‘disabled’ are inferior to the ‘abled’. By virtue of the persistence of such hierarchies, people become unequal. This is the way in which oppression is orchestrated, because those in superior positions tend to oppress ‘the other’, who occupies the lower. However this understanding requires further nuance. Referring specifically to disability, Critical Disability scholars like Goodley (2013) contend that not all individuals with disabilities are oppressed, because their identities intersect with other, more privileged ones. In addition, the nuance of socio-economic class seems not to have been considered in the conception of the hierarchies I have just discussed. It could be argued that some Blacks, for example, could be privileged more than some Whites in terms of class, but the Black is rigidly viewed as ‘other’, and therefore less privileged. This is an over-generalisation which I will bear in mind in this study.

Decolonial scholars like Grosfoguel (2007; 2011), Quijano, (2007) and Mignolo (2007) share the view that if all humanity, with all their differences in bodies, in minds, in colour, in social and economic status would be regarded as humane, there would be no hierarchical identities, no notion of ‘the other’ and no inequalities. There would be no identities premised on race and gender. There would be no categories of ‘the disabled’ and ‘non-disabled’ and, relatedly, of ‘inferior’ and ‘superior’. It would be understood that people are a human race and are equal though different. Critiquing this proposition of deconstruction of dichotomous binaries by Critical Disability scholars, Vehmas and Watson (2014) argue:

A society without group difference is not a realistic possibility [...]. It is simply unrealistic to assume that a society could exist where people would not see other people as different. (p. 648)

It could also be argued that it is unrealistic to think that people could view each other as equals when they are different from each other. The Decolonial scholars can be critiqued for their rather fanciful notion of a society that cannot exist, in which there is equality of all.

In terms of this study, exposure to coloniality and its effects, as well as the coloniality of being will inform an understanding of the self, as well as the possibility of influencing change. As the participants and I exist within coloniality, a grasp of the concept will help me to better understand who the participants are and why they are who they are. I cannot exclude myself as the researcher from this; I need to understand who I am and why I am who I am. Such understanding will pave the way for a transformative study. Furthermore, these concepts shed helpful light for a study that is being carried out in Africa and South Africa specifically. South Africa has divested itself from the clutches of apartheid relatively recently, a regime characterised by segregation and discrimination of other social groups. A conception of the coloniality of being and its effects can undergird a historically-contextualised grasp of the impact of coloniality, not only on the participants, but also on stakeholders at the Institution. That could consequently demystify why access issues and teaching are handled the way they are, and how all of this impacts students with disabilities' professional learning and completion of the specific programmes

3.3.3 Coloniality of knowledge

It should be fore grounded that knowledge theories are very broad. The study has not immersed itself deeply into all the theory about knowledge, but only discusses Decolonial scholars' arguments with regard to the coloniality of knowledge, and how this might shed light on professional degrees, which is important and relevant for the present study.

The concept of the colonality of knowledge seeks to reveal the hegemony in knowledge production. Sithole (2014) maintains that “The knowledge systems are formulated and totalised by the Euro-North America and the African subject’s is silenced and excluded” (p. 53). This means that the knowledge that Western forms of knowledge are considered to be universal and legitimate, whereas knowledge generated in the South is undermined and considered to be inferior. Institutions, like the state apparatus, are used to perpetuate that view. Dastile and Ndlovu-Gatsheni (2013) state:

Schools, churches and universities contribute towards the invention of the ‘other’ as they operate as epistemic sites as well as technologies of subjectivation that make it natural for dominant powers to be universal. (p. 111)

In retaliation, Decolonial scholars are against the censoring of knowledge to undermine some and privilege others. The argument is that all knowledges have equal value, they are all useful and should all be considered as such (Dastile & Ndlovu-Gatsheni, 2013). However, while it is not my intention to contest the Decolonial scholars’ valuing of all knowledges and epistemologies, a division of forms of knowledge espoused by this thesis is that there is ‘formal school knowledge’ and ‘informal everyday knowledge’. This distinction is premised on the understanding that formal knowledge is constituted by theoretical, abstract and scientific concepts that are generalisable, and this knowledge system is taught formally and acquired in institutions of learning. Informal everyday knowledge composes the concrete, spontaneous, contextual and everyday concepts that are locally-based and developed informally (Vygotsky, 1987). This implies that the knowledge that is generalisable is universal and legitimate, and informal knowledge is not. Maton and Moore (2010) extend this, and state that some forms of knowledge are more powerful than others, and informal everyday knowledge is context-bound, it cannot be generalised, and it is limited and fallible. This should not be understood as a critique or censoring of knowledges, and an endorsement of the classification of some forms of knowledge as inferior, but an acknowledgement that

there is powerful knowledge that possesses more explanatory power. In explaining powerful knowledge, Young and Muller (2013) also maintain that all knowledges are valuable, but they assert that the difference between specialised and non-specialised knowledge is in its structure, and not in its value. Thus, in this study, I acknowledge that the specific professional degrees comprise specialised knowledge; however, as this thesis is informed by Decolonial Theory, the personal accounts and experiences of the participants will be privileged because their knowledges are valued.

3.3.4 Coloniality of power

Coloniality of power is another core concept of Decolonial Theory that exposes the invisible ways in which power operates, and how it is used to oppress the other in specific contexts by the dominant powers. It involves hierarchies of domination, the oppression of the other, and the persistence of a colonial mentality. Castro-Gomez (2002) states that coloniality of power extends from the Foucault's (1995) concept of disciplinary power. He further argues that "the present global structure is informed by the colonial relations at the centre and periphery of European expansion" (p. 276). It implies that domination by Eurocentric powers operates invisibly, and its effects are felt by the oppressed as in the operation of disciplinary power. It gives rise to networks of exploitation, which dominate and control knowledge and authority, and affect all dimensions of social life (Quijano, 2007). This form of domination co-opts the capitalist model within global coloniality, and is "organised and articulated to suit the imperatives of global imperial designs" (Ndlovu-Gatsheni, 2013, p. 50). The coloniality of power is intrinsically linked and intertwined with capitalism, and is organised to suit dominant powers. Although Decolonial scholars (Castro-Gomez, 2002; Quijano, 2007; Ndlovu-Gatsheni, 2013) understand the concept of coloniality of power in different ways,

they share the belief that it results in differential access to power by the dominant powers and the oppressed.

3.3.4.1 Power and oppression in higher learning

Institutions of higher learning are structures of power. Dastile and Ndlovu-Gatsheni (2013) contend that these institutions, including schools and churches, operate as epistemic sites that naturalise Euro-American epistemology and therefore present it as universal. The structure of coloniality perpetuates mental oppression by hegemonising Euro-American systems of knowledge and ways of knowing. Furthermore, such structures can take the form of state apparatus which are used to facilitate state ideologies (Althusser, 1978). By virtue of being generated by the ruling state, these structures automatically have power of control, domination and universality. These institutions therefore have the capacity to be oppressive. In light of this, Grosfoguel (2011) observes that dominant universities in particular are in the zone of being, meaning that they belong in the same category as the powerful and the oppressors. These institutions could be understood as vestigial colonial structures that sustain the structure of coloniality and help to perpetuate its agenda of oppression. However, they can also be viewed as sites of resistance. When intellectuals at institutions of higher learning become aware and conscious of coloniality, they can begin to reveal its ills and spear-head resistance and transformation. For example, in resisting Eurocentric curricula, Ogot (2002) states:

Our first major task has, therefore been and still is, how to Africanise these universities without undermining their identities—ie as centres of independent thought and critical inquiry. We have tried to do this by Africanising the staff and the curricular...Almost every week we are attacked often by politicians for being foreign islands in a sea of natives. (p. 594)

The words reflect antagonism, resistance and transformative action that are taking place to transform Eurocentric ways of knowing in African universities. It could be argued therefore

that a view of institutions of higher learning as merely colonial structures of power could be reductionist, because it overlooks other roles of change the institutions play. For example, currently there are student movements in most South African higher learning institutions. Students are demanding the transformation of the Eurocentric curricula and pedagogy. They want these to be inclusive to all (Second National Higher Education Summit, 2015).

Power in institutions of higher learning is hierarchically organised. Grosfoguel (2007) observes that such an organisation enables oppression. Mertens (2010) agrees that such an organisation results in differential access to power and privilege. It could be contended that oppression is inevitable for persons in the lower echelons of the hierarchy when power organised in this way. However, Foucault (2001) suggests that power vested in political institutions should not be wielded in a linear fashion from the top to bottom. Not every power structure organises power hierarchically, and power should not always be understood in light of oppression. With this necessary qualification, it is important to understand how specific power structures operate and function before making generalised conclusions about power and oppression. It would be unethical just to simply assume that students with disabilities are oppressed at institutions of higher learning without understanding how power works, how it is organised, how oppression is constituted and how institutions are used by the structure of coloniality to perpetuate the oppression of the other, and how institutions of higher learning are also sites of resistance and change. The nuances highlighted could inform a clear understanding of how power operates at the Institution, and enable a careful analysis of structures and practices as they are experienced by students with disabilities.

3.3.4.2. The concept of zones

The concept of zones furthers the understanding of coloniality of power. Santos (2007) posits zones as spaces in which humanity is categorised and placed through Western “abyssal

thinking” (p. 45), viewed in the light of an ‘abyssal line’. It is a line that is imagined (invisible) which divides the world into two social realities (Euro-America and Africa and non-Western countries), hence the two zones, and power is distributed differentially, according to which side of the line one falls on (Dastile & Ndlovu-Gatsheni, 2013). On one side of the line is the zone of being which is the metropolitan zone occupied by the West. The other side of the line is referred to as the zone of non-being and is occupied by the ‘other’ (Santos, 2007).

By employing the understanding of zoning, central concepts like ‘Being’ and the ‘other’ are explained. Grosfoguel (2011) argues that in the zone of being, there are superior beings who are the ‘I’ (the being). The oppressors exist in that zone. Legitimated and ostensibly universal knowledge is said to be produced in that zone. It is where the dominant universities are located. Equality and freedom are considered to be the rights of those in this zone, and conflicts are mediated through treaties, negotiation and law (Grosfoguel, 2011). Describing the zone of non-being, Grosfoguel (2011) states that people who occupy the space are the inferior beings who are constructed as the ‘other’. These are the oppressed, and their humanity is not respected. It is not deemed possible that credible and useful knowledge could be produced in this zone. Thus, critical scholars and thinkers from the zone are not taken seriously, and the knowledge and theories they produce are discredited. Conflict and human relations take the form of violence (Ndlovu-Gatsheni, 2013).

The two zones are not fixed, and not neatly formed and permanent categories. Grosfoguel (2011) explains that the division of the zones is not to be understood as simply the North and the South. Western knowledge informs how education is carried out, and it results in the mental colonising of the ‘other’ in the zone of non-being. Those relegated to that zone are taught to think and speak like the oppressor (the elite). Thus, the Western-educated elite

confined in the zone of non-being could reproduce coloniality by thinking and acting as the oppressor in the zone of being. Grosfoguel's (2011) argument is echoed by Ndlovu (2015), who also contends that there are colonial subjects located on the oppressed side of the abyssal line who view the world from the perspective of the oppressor. Understanding the flexibility of zones is important so that the issue of zones are not reduced to rigid categories of being and non-being, and oppressor and oppressed.

3.3.4.3. Social and epistemic location

An understanding of social and epistemic positions further illuminates the concept of zones. Social location is the occupation of space by an individual in a specific zone within the context of coloniality. It is the actual position in which the individual is placed by the social ordering determined by the dominant powers (Quijano, 2000). For example, by virtue of the difference of body and mind, 'the other', much like 'the disabled', is socially located with oppressed persons in the zone of non-being.

Epistemic location provides a way of thinking about coloniality. Ndlovu-Gatsheni (2001) observes that when an individual has been socialised by a modern Western Education, he or she becomes colonised into Western ways of thinking, ways of knowing. As a result, the individual's epistemic location becomes Western. Critiquing this form of mental colonisation, Hall (1990) argues that "It is one thing to position subjects as the other in a dominant discourse, it is quite another to subject them to that knowledge (p. 225). Hall implies that a more severe form of mental coloniality takes place when an individual is subjected to a particular dominant knowledge than when he or she is othered. The colonial subjects could be produced from the kind of subjectification. They are the ones who become epistemically located on the side of dominant power, even though they are an oppressed other, and have no share in that power. And as Ndlovu (2015) contends, those are the subjects who are socially

located on the oppressed side of colonial difference, but epistemically, they think and speak as their oppressors do. An understanding of the two locations is important social location and epistemic location are not confused with one another. The latter is important because it accounts for one's mental position in the light of oppression.

When invisible zones are made visible by Decolonial scholars, it presents a threat to oppressors. They might not want the division to be recognised by the oppressed. As a result, they could hijack the theory, hide behind it and use it in such a way that an oppressed people turn on one another. It means oppressors could pretend to be fighting oppression while they are actually perpetuating it. To counteract that, Ndlovu-Gatsheni (2013) asserts that whoever is using the theory or critiquing it should declare the position from which he or she is arguing. It will establish the authenticity of his or her voice. For example, 'I am saying this as a black woman with a disability or a privileged gay man from the South'. The locus of enunciation is important when using the theory to engage in issues of oppression. It is discussed in detail in the section that follows.

3.3.4.4 The concept of locus of enunciation

Key to dismantling oppression is an understanding of the position from which one speaks. Having established that there are two zones, it should be clear from which epistemic position an individual is speaking from. In Decolonial Theory, this is understood as the 'locus of enunciation'. Dastile and Ndlovu-Gatsheni (2013) define this as "A reference to a particular location from which a human being speaks within a power structure" (p. 114). Ndlovu-Gatsheni (2013) argues that there has to be transparency in terms of locus of enunciation. An individual should declare the position from which he or she speaks about oppression in order to avoid hypocrisy, or indeed an oppressor speaking against oppression. Ndlovu-Gatsheni (2013) contends that it is more authentic when a person speaks about oppression from

within rather than from without. For example, the persons with the most favourable locus of enunciation to speak on oppression in the context of disability are those with disabilities. There might not be any hypocrisy because they are the oppressed persons and would be speaking from lived experience.

The concepts of zoning and locations, along with their nuances, inform my understanding of whether or not the participants and I understand our space within the broader context of coloniality. If we are in the zone of non-being but think and talk as the oppressor, it would be difficult for this kind of study to effect meaningful change. Thus, both the social and epistemic locations of all of those involved in the study need to be understood and not taken for granted. Without such an understanding, we could unconsciously perpetuate the very oppressive structures we seek to reveal. For example, I, the researcher, might not represent the participants' recommendations adequately if I am epistemically located with the oppressor. The locus of enunciation of each of us is also important if there is to be transparency and privileging of the voice of participants. One drawback of using an individual's epistemic location as the basis to understand their position in relation to oppression is that it runs the risk of being reductionist. This is because the location is not permanent, and individuals can change epistemically; a colonial subject could change to be a liberated individual. Rorty (2007) echoes the sentiment when he writes that "An awareness of self has no stable content [...] at every moment it brings a different self to light" (p. 34). Thus, determining whether or not a locus of enunciation is authentic might be difficult through declaration alone, because what one says and what one thinks could be different.

3.3.5 Decoloniality

Decoloniality is a 'method of fighting' which is used to dismantle oppression. Describing it, Maldonado-Torres (2007) remarks that it is not a single theoretical school of thought, but a

family of diverse positions that share the view that coloniality is a problem of modernity. It therefore departs from merely problematising coloniality and its effects, and posits ways of overcoming it. Ndlovu-Gatsheni (2015) informs us that it is not only the long-standing epistemological stances that people need to be liberated from; a particular way of thinking, knowing and doing requires dismantling and revision. Decoloniality seeks liberation from the hegemony as informed by coloniality. It is meant to dismantle the relations of power and the hierarchies that came into being and find powerful forms of expression in the practices and structures of the modern world. Dastile and Ndlovu-Gatsheni (2013) view the decolonial epistemic perspective as a way of thinking and doing that could be applied to oppression in order to yield a different way of being.

Decoloniality challenges universality and Grosfoguel (2011) critiques the idea that there is one epistemic site from which all truth and universality derive. Thus, Decoloniality seeks to explain that there is no single truth about everything. Diversity should be embraced, and all persons in all their diversities need to have a space in the world in which their knowledges, cultures, language and being are embraced. No one should dominate another because no one has a legitimate claim to superiority over another. Citing Mignolo (2007) Ndlovu-Gatsheni (2013) concludes that Decoloniality is a “pluri-versal, a redemptive and liberatory epistemology that seeks to delink from the tyranny of abstract universals” (p. 13). In short, it embraces the inclusion of all.

The issue of Decoloniality also involves awareness, consciousness and liberation. When the oppressed are not aware and conscious of their own oppression, they are not equipped to dismantle it. Ndlovu (2015) maintains that consciousness is developed and liberation attained when the oppressed understand their actual location in society: that they are constructed as ‘the other’. Further, they need to grasp why they are treated differently from other people,

and then epistemically locate themselves where they belong. They are not required to understand this in abstract terms, as in ‘zones’ (Santos, 2007), but understanding who they are could yield powerful awareness and consciousness of oppression. Being ‘colonised’ by a Western education is the reason why some ‘others’ are not aware they are oppressed. Ndlovu (2015) writes that when the ‘other’ in the zone of non-being embraces colonial ways of knowing, they speak the language of the oppressor and think and speak like them. As a result of the epistemic colonisation described here, some ‘others’ do not view themselves as oppressed. In this case, it might be impossible to “outmanoeuvre the constraints placed upon the oppressed by coloniality and [dismantle] the snares of the colonial matrices of power” (Ndlovu, 2015, p. 14). It could be argued that it might be difficult for people who are part of their own oppression to overcome it. Ndlovu (2015) asks “How then does change occur in a system such as that of coloniality?” (p. 10). In answer to his own question, he argues that first, it is important to understand whether or not the social agents, such as the ‘other’, are aware of how they are influenced by coloniality within the context they inhabit. It could be argued that if they think from the position and talk like the oppressor; they might work against themselves in any attempt to achieve freedom from oppression. In other words, without awareness and consciousness, the oppressed might not overcome oppression but could perpetuate it. Thus, awareness and consciousness are the first step towards emancipation and consequently liberation. Mignolo (2011) has distinguished between emancipation and liberation; the former, according to him, is “just a process inside the colonial mechanism of western rational episteme” (p. 7), and the latter is the same as decolonisation. It involves a struggle of unblocking thoughts that have been blocked, to see those things that are invisible at the surface. Thus, emancipation could be viewed as a process towards liberation, and it is the liberated that might dismantle oppression because that involves decolonisation of thought. To reiterate, it is the hope of this study to be

transformative, and my intention is to use this information to gauge the levels of awareness, consciousness and liberation of both the participants and myself as the researcher. Without understanding these, we could unwittingly perpetuate oppression when we seek to overcome it. Understanding what emancipation and liberation means could also inform introspection on my part. It will also help me determine where the participants are in terms of these two, to establish whether or not we can work in mutual partnership to make change.

3.3.5.1. Decoloniality and agency

Agency involves deliberate actions in varying degrees of resistance by the oppressed, to influence change. With specific reference to women as subalterns, Spivak (1988) argues that agency is speaking out. Thus, agency involves both action and speaking out against oppression. In the context of decoloniality, agency is all about actions and voice against oppression and bringing about change.

Agency has been viewed as a binary inseparable with structure. Sahlins (1985) argues that the two cannot be seen as exclusive alternatives because there is no radical binary contrast. It means that the binaries of agency and structure are not oppositional and as a result they produce each other in action. The inseparability of the two is further explained in the light of culture and history. It is argued that culture (structure) is historically ordered and history (agency) is culturally ordered (Sahlins, 1995). It implies the structure constructs agency and a structure is constructed through agency. However, Sahlins' view of structure and agency is reductionist because it depicts the subjects as passive and complacent within a context of oppression. It makes it appear as if subjects might not do any action of change without the influence of the structure.

Agency and structure are also explained as separate entities. Giddens (1982) argues that it is reductionist to “reduce structure to everything and social agency to nothing” (Giddens, 1982,

p. 534-535). It implies that it is not always the structure that influences agency. Despite the constraints imposed by the structure, agency is possible. Giddens (1982) further argues that the social actors are capable of resisting the determining power of the structure through their “knowledgeability” (p. 534-535) and their capacity to evaluate their actions in relationship to the constraints of the structure. In essence, when the oppressed are aware and conscious of oppression, they can use their agency to sidestep oppression imposed by the structure. Torfing (1999) agrees to that when he says social actors are strategically thinkers who have the epistemic capacities to out-manoeuvre the constraints or limit set by the structure of the social system. It implies that when informed and conscious, agency is possible.

Different structures influence agency differently. Torfing (1999) identifies performative and prescriptive structures and explains how they influence agency in different ways. The performative assimilate itself to contingent circumstances. It means that people in power within those structures are flexible and make rules and change them depending on the circumstances of the time. In terms of change, the performative structure allows the oppressed to use their agency to bring about change (Ndlovu, 2015). In essence, the oppressed might not meet with opposition as they take action against practices or structures that oppress them. .

The prescriptive structure assimilates circumstances to itself (Sahlins, 1985). It means within the structure there are strict, rigid rules in which operations are clearly defined: who does what, how and with whom; is clearly laid out. The prescriptive is not open to change and it reproduces itself even when the environment has changed. Such a structure could be viewed as oppressive and restrictive to change. Those existing within such a structure could be restricted in using their agency for change by such a structure.

Agency can dismantle oppression within coloniality. Ndlovu (2015) asks a question which he also answers. “If the structure and agency are so intertwined, how then does change occur in a system such as that of coloniality?” (p. 10). In answering his question, he argues that the first important thing is whether or not the social agents as the ‘other’ are aware of how they are influenced by coloniality in the specific structure within which they exist. Ndlovu (2015) further explains that if those who seek change “think from the position and talk like the oppressor, they work against themselves to achieve freedom from the colonial matrices of power” (p. 14), and in that way agency becomes difficult. Thus, without awareness of the oppressive structure of coloniality, ‘the other’ might not be able to outmanoeuvre the constraints placed on them by a specific structure (Ndlovu, 2015).

For the present study, the concepts of agency and structure are useful to understand the kind of the structure the specific Institution is (performative or prescriptive) and consequently, whether it allows or restricts agency by students with disabilities. Secondly, As Ndlovu (2015) argues that awareness is prime for the oppressed to bring about change; agency and structure help to inform an understanding of how the students with disabilities as ‘the other’ conceive themselves at the Institution. Thirdly, the concept of agency in particular is useful to inform an understanding of how students with disability use theirs to dismantle oppressive practices and structures at the Institution, to bring about change.

3.3.5.2. Transformation and inclusion in Decoloniality

Decolonial scholars acknowledge that there have been attempts to effect transformation, but doubt that transformational efforts have so far yielded total inclusion. Ndlovu-Gatsheni (2012) explains that there has been an importation of democracy and human rights discourses from the West which started at the beginning of the 21st century. As a result there has been a shift to embrace transformation and inclusion of all worldwide generally and in the

democratic South Africa in particular (Dastile & Ndlovu-Gatsheni, 2013). In essence, the principles of democracy and related discourses are being embraced hence the efforts of transformation and consequently, inclusion. Ndlovu-Gatsheni (2013) further argues that in the South African context specifically, the driving force behind transformation is equal access and greater participation by all. He states that in all Government sectors including higher learning, the purpose of transformation is to “depart from the Apartheid legacy to assert the values...and principles of constitutional democracy” (Ndlovu-Gatsheni, 2013, p. 183). Thus, as informed by democracy, transformation in the South African context does not only seek the participation and inclusion of previously disadvantaged social groups but all persons. In the context of higher learning, it suggests a total institutional transformation in which all diverse students are totally included, hence the enablement of access, participation and achievement.

Decolonial scholars further argue that though there could be efforts of transformation, total inclusion in which all people are included, is an illusion in the context of modernity. Dastile and Ndlovu-Gatsheni (2013) maintain that as long as the global imperial designs which shape and inform the character of the oppressive modern world systems and colonial matrices of powers are still in place, inclusion is only illusionary. They emphasise that democracy is an “unfinished agenda” (Dastile & Ndlovu-Gatsheni, 2013, p. 113), and that total inclusion cannot be expected within a context of incomplete democracy. Ndlovu (2013) also observes that world order may change, but world systems do not change. He further explains that world orders have changed since the advent of modernity, but the hierarchical character of coloniality has always remained the same. He states that post-colonialism only marked the birth of a different world order, but it does not mean a change in the covert operations of an oppressive modern world (Ndlovu, 2015). Grosfoguel (2007, p. 219) concludes: “We continue to live under the same colonial power matrix [...]. We moved from a period of

‘global colonialism’ to the current period of global coloniality”. Thus, the Decolonial scholars’ view is that though there could be efforts towards transformation, specific contexts do not yet have the conditions in which total inclusion is a possibility. Understanding the concepts of transformation and inclusion in the context of Decolonial Theory is useful to illuminate the level of institutional transformation and inclusion at the Institution.

3.4. Coordination of the study by the researcher

As the researcher, I have taken time to understand theoretical concepts and how they apply to the study, namely the concept of structure and agency (Giddens, 1982). As all my schooling took the form of British colonial Education, I could have been mentally colonised and unconsciously thinking like an oppressor. However, first I understand that by virtue of being a black female African, with a history of social disadvantage and hailing from a patriarchal society, there is collective belonging I share with the participants (both with and without disabilities) as we share a past of disadvantage.

I also need to be mindful of the assertion that non-disabled people should not be doing disability research. I would argue that non-disabled persons, who are disadvantaged, such as myself, can successfully conduct a disability study because we belong together with those with disabilities in terms of oppression. I however do not gloss over intersectionality, and the imperative that I understand that there could be others who are privileged within our group and that my position is also one of privilege, given that I am a doctoral student. I should also not overlook the nuances and over-generalise the experiences relating to the phenomena under study. And my own biases in the study could be counteracted through rigorous self-reflection.

The participants might also need to use their agency. They could have been also colonised by Western education by virtue of being students and graduates with disabilities studying at

university level, and DU members who also might have gone through the apartheid education system. However, there is no way to establish whether or not the participants are colonial subjects or not. Thus, the study will embrace the notion of the benefit of doubt, based on Torfing's (1999) argument that some social actors are conscious and strategic thinkers who are able to move outside the limits set by the structure of coloniality. It is hoped that the research partnership is with conscious participants who are aware of oppression and can reflect on its presence in the structures and practices at the institution and at the site of work for integrated learning. Before I end the chapter, it is important to reflect on post-colonial and decolonial thinking with regards to disability. How their convergence and divergence is of value, and how they complement each other to inform the present study.

3.5 Postcolonial and decolonial thinking

Postcolonial and Decolonial thinking have common characteristics but also differ in some specific ways. The two converge and diverge in specific ways (Ndlovu-Gatsheni, 2013). Their convergence is in explaining oppression and domination of the Global South by the West. Both post-colonial and decolonial scholars include the colonial experience in their scholarship of explaining oppression and domination. Though postcolonialists use the term *post*, their scholarship includes colonialism. Lomba (2001) explains that the term *post* does not refer to the period after colonialism but to new ways of contesting its oppression and domination and its legacies. The inclusion of colonial encounter is important for understanding the influence of colonialism on culture and construction of disability and how they have been shaped in specific contexts (Grech, 2015). For the study, dealing with the colonial experience from both theoretical perspective, helps to understand the need for dismantling those oppressive historical influences.

The two theoretical thoughts also converge in having the same aim of emancipating the oppressed from oppressors. They propose that all knowledge epistemologies from South and West be valued. Ndlovu-Gatsheni (2013) in agreement with Chataika (2012), argue for a common platform in which all knowledges, including indigenous knowledge from the South, are brought into conversation. They view bringing together all knowledges as a way to build a community of trust by researchers in both spaces. Thus, in both the perspective, scholars seek to bridge gap between Global North and South, in order to understand that all knowledge is valuable. For the present study, understanding that all knowledge is valuable is helpful to inform the need to privilege the voice of all the participants.

Postcolonial and Decolonial thinking diverge in the theoretical concepts they emphasise on. Ndlovu-Gatsheni (2013) argues that post-colonialists emphasise on “dismantling of meta-narratives” (p. 491). The meta-narrative to be dismantled include among others voicelessness, stereotyping, ‘them-us’ binaries, and also challenges of neo-colonialism and post-colonialism (Chataika, 2012). She views the conversation between the South and the West in terms of disability research and development, as going to help dismantle the specific meta-narratives. Thus, dismantling meta-narratives might be the way in which post-colonialists think the oppressed could be emancipated from oppression. Dismantling the binary of ‘them-us’ particularly is important because it speaks to dismantling the ‘disabled-abled’ dichotomy. When informed by the need to dismantle binaries in disability, the focus of the present study would be on all diverse students, and not on students with disabilities as a group of their own.

In Decolonial Theory, the emphasis is on unmasking the hidden global structure of coloniality and its falsity. Decolonial scholars unmask the structure by making a clear distinction between colonialism and coloniality. Grosfoguel (2011) argues that colonialism said to be a historical event that ended, is continuing as a hidden structure of coloniality.

There has only been a movement from a period of global colonialism to global coloniality, which is why matrices of power continue to exist and are still exerting on the South by the West (Grosfoguel, 2011). It is further explained how coloniality influences normative assumptions that results in hierarchies and all differences in society, consequently yielding to oppression, domination and subjugation experienced in the global South (Ndlovu-Gatsheni, 2012). What coloniality entails is discussed in detail in Chapter Three under Section 3.3.1.

Postcolonialists are limited in terms of exposing the structure of coloniality. They are said to reproduce a coloniality of knowledge and power within their domain of thought and practice (Grosfoguel, 2011). It implies that they are limited in exposing the universality of the Western worldview and its falsity. Thus, though postcolonialists seek emancipation from Western epistemologies as decolonial scholars, the former are still caught up in the canon of the West by reproducing what they are fighting against. Decolonial Theory has thus, a more explanatory power in terms of exposing coloniality. The exposure of the invisible structure of coloniality is important for the present study, to understand how disability is constructed in the hidden structure. Though the Decolonial Theory does not specifically refer to disability, it helps to understand how the 'other' in which disability is part, continues to be created in coloniality through the normative assumption of able-bodiedness. How people are categorised and 'othered' using a 'normal' body as the standard measure and how 'othering' consequently creates disability is discussed in detail in the Theory Chapter in Section 3.3.2.

Theoretical concepts from both Decolonial and Postcolonial thinking are important in the present study. The weaknesses of one theory are complemented in the strength of the other. The strength of both, work together to inform a better understanding of oppression, domination, and inform the need to privilege voice of all participants in the present study.

Thus, the theoretical concepts as explained by postcolonial and decolonial scholars have been used together for complementarity

3.6 CHAPTER SUMMARY

Critical Disability and Decolonial Theories can complement each to inform the study and where one theory is limited, the other one can be used to illuminate the phenomena under study. Critical Disability Theory explains the disability/impairment debate and provides a strong understanding of it in the present context. Decolonial Theory, on the other hand, is not a disability theory and therefore does not specifically explain issues of impairments and disability. What this theory helps to illuminate is how disability intersects with multiple identities, which adds the necessary nuance that not all persons with disabilities are equally oppressed because of the intersection with other identities of privilege. If Decolonial Theory is used alone, this nuance could be overlooked as the broadly-held view is that all those categorised as ‘the other’ are oppressed and unequal. Thus, using the theories together is helpful when one is attempting to comprehensively understand the phenomena under study. Understanding issues broadly, as well as in terms of finer details, helps the researcher to avoid making over-generalisations, and to consider nuances that could otherwise be overlooked.

Decolonial Theory will be invaluable to this study. This is because it could inform a clearer understanding of the participants, as well as myself as the researcher, in terms of consciousness of oppression, level of liberation, and social and epistemic locations. The lens of this theory could clarify whether we are working together with mutual understanding, with the ultimate aim of positive change as expected in the transformative paradigm. As has been argued by Rose (2004) the theory offers a method of fighting, and it can thus inform methods of resistance. The theory will help me ascertain whether or not participants are fighting to

resist oppression in the study. It might not be achieved through using Critical Disability Theory alone, as Vehmas and Watson (2014) have noted. Critical Disability Theory does not offer resolutions but only problematises specific disability issues.

In conclusion, it is argued that a combination of the ideas of Critical Disability and Decolonial scholars can enable a better understanding, and influence change for all diverse people who are oppressed, specifically those with disabilities. Oliver and Barnes (2012) contend that the “oppression of disabled people will only end when the oppression of all is overcome and that will happen with major economic, political and cultural transformation as well as resistance” (p. 176). Therefore, oppression will not be dismantled by merely one oppressed group resisting or fighting, but when there has been a total overhaul of the structure of coloniality by the struggle of all diverse people who are oppressed. Ultimately, my hope is for a world in which all people are included. What will help in this regard is the collation of different scholars’ ideas from the two theoretical perspectives, as well as from both the North and South; brought together to explain and illuminate phenomena from different angles, with the shared aim to overcome oppression. The next chapter is the methodology chapter, and it describes how the study is carried out.

CHAPTER FOUR: METHODOLOGICAL CONSIDERATIONS

4 INTRODUCTION

The chapter presents the methodological considerations that have undergirded this study. Methodology is about how the research is carried out with respect to paradigms, theories, and how these relate specifically to the problems and aims of the study (Blackie, 1993). A concerted effort was made to ensure that the study carried out was credible and legitimate, and achieved the aims, purpose, and answers the research questions. The ontological and epistemological position that informs the study, the research design, the methods chosen to collect data (as well as how they were employed), and how data was analysed and legitimised, are all described in the sections that follow.

4.1 EXPLORATORY GROUNDWORK AND FIRST CONTACTS

This kind of study could not be carried out without careful preparation. What this involved was establishing contacts, getting baseline information to work with, building relationships, and last but not least, honing my focus and determining the direction I wanted the study to take. The first contact was made with Disability Unit staff at the Institution, to get disability data and make decisions with regard to who the participants would be. This falls in line with what Mertens (2010) recommends, which is that the researcher works with the participants from the beginning to the end.

The data initially obtained was the history of the Disability Unit. This included when it was established, how the staff members assist the entry of students with disabilities into the university generally, and into the professional degrees under consideration in particular. In addition, I gathered information with regard to the specific access arrangements they provide to students with different categories of disabilities (for example, extra time for examinations, etc.), what each member does individually to support students with disabilities, and the

support that is provided to the academic staff in terms of teaching students with disabilities. Finally, I obtained the enrolment data of different categories of students with disabilities for different programmes, and ascertained that the university has an institutional disability policy. What this provided was a general idea of access and inclusion of the students with disabilities at the Institution from the onset.

The second stage of establishing contacts involved attending the first workshop of the Centre for Critical Research on Race and Identity (CCRRI). CCRRI is a research centre at the University of KwaZulu Natal that has been commissioned by of the Department of Higher Education and Training to direct and co-ordinate a national research project entitled *Education and Emancipation*. The theme is ‘graduating into professions’, and it focusses on South African higher learning institutions not adequately yielding the desired throughput rates for specific professional degrees. It is said that this has resulted in an imbalance between higher learning output and the national availability of skills in terms of specific professions (Department of Higher Education and Training, 2011). All of these circumstances were clarified for the researchers who were to participate in the project. It was also explained that the target group is formerly-disadvantaged social groups, specifically Black people and women. However, there was awareness that persons with disabilities were not included as a group on their own. Though some persons with disabilities also fall into the categories of Black people and/or women, there was a risk that their specific needs could be subsumed within the broader social contexts of those specific groups. The present study addresses this gap in part, and focusses on students with disabilities specifically.

Another aspect of the preparation for this study was establishing an acquaintance with existent literature, in order to get direction from other scholars who have worked in the field. Previous studies on access and inclusion in higher learning were reviewed to determine the

niche the present study could fit into. Issues such as the conception of disability, professional degrees, policy and transformation in South African higher learning were reviewed. This was done to establish a broad conception of inclusionary and exclusionary structures and practices. It was also to understand the critical issues and debates in the field of disability both in the South African context and internationally. Such understanding was imperative before the study could be embarked on. Part of the reason for this is that it has been my experience that what is said about access and inclusion of those with disabilities and what happens on the ground do not usually match. For example, in South Africa, exclusion of those with disabilities in the context of higher learning is not necessarily expected to be a historically-entrenched obstacle, given that previous segregation was primarily on racial lines (CHE, 2000). In schooling, on the other hand segregation did occur on the grounds of disability, evidenced by the system having special schools for those with disabilities and mainstream ones for those without (Howell, 2006). There are comprehensive policies espousing access and inclusion for students with disabilities, but policy might not always imply inclusion. Scholars like Matshediso (2007) have found that students with disabilities are still excluded. Gathering this information was important for providing me with an orientation before embarking on the study. I needed to grasp that there are complex and contradictory issues that are not to be taken lightly. Furthermore, the preliminary review enabled me to decide that a transformative kind of research would be most suitable (Mertens, Sullivan & Stace, 2013) for a study that sought change through working in mutual partnership with the participants, and in which their voice would be privileged.

4.2 THE CASE OF STUDY

A case study approach was employed in the exploration of the phenomena. This approach is useful when the researcher wants to uncover contextual conditions relevant to the phenomena under study (Yin, 2003). As a method or methodology (Hyett, Kenny & Dickson-Swift,

2014), what a case study enables is the potential for generalisability, but, specifically, an understanding of the specific context under study. As Neuman (1994) observes, the approach's data collecting methods are often qualitative. In terms of its philosophic foundation, the case study approach is premised on the same paradigm which underpins the qualitative design, which is discussed in detail later in the chapter.

A single case was used in this study. What this narrow focus enabled was a deep understanding of the phenomena under study within the specific context. In this, I was influenced by Yin (2003, p. 1) who argues that a case study “investigates a contemporary phenomenon within its real-life context”. It can also yield generalisability, and other similar contexts can benefit from the findings because it is an “intensive study of a single case where the purpose of that study is – at least in part – to shed light on a larger class of cases” (Gerring, 2007, p. 20). The results and findings of this study apply to the specific Institution, yet they can also apply to other contexts of similar histories and geographies.

4.2.1 Selection of the case of study

A single institution was selected from a possible 23 institutions of higher learning, excluding technikons in South Africa. A purposive sampling strategy was used, which is recommended by Thomas (2011), who advocates purpose and peculiarity in the process. The institution selected would need a long history of inclusion of students with disabilities, as this would help in understanding transformation issues that pertain to this study. A second criterion was choosing an institution that had a Disability Unit to support those with disabilities. 17 institutions, both historically-advantaged and disadvantaged, all had Disability Units (Fotim Report 2011). Though the historically-disadvantaged institutions also had the facility, they were all discarded because students with disabilities were only included after apartheid. From the formerly-advantaged ones, there were only two that had DUs, as well as a long history of

inclusion of students with disabilities (Matshediso, 2007). Of the two, the date of establishment of the facilities was the final criterion used to make the selection. As Thomas (2011) argues, the peculiarity of the institution from others needs to be ascertained, and so other exceptionalities were also considered. Thus, overall, the selected Institution is considered to have “particular features or characteristic[s] which would enable detailed exploration and understanding of the central puzzles” (Ritchie, 2003, p. 69).

4.2.3 Binding the case study and the unit of analysis

For a study to remain within a researchable scope, the case needs to be bound. Baxter and Jack (2004) explain that ‘binding’ involves indicating clearly, what will be and will not be focussed on. Binding the case is important in terms of understanding what the unit of analysis is. Miles and Huberman (1994) describe the unit as a “phenomenon of some sort occurring in a bounded context” (p. 25). In the present study, the unit of analysis is students with disabilities’ access into specific professional degrees, their professional learning and completion of the programmes within minimum time. The four paragraphs below set up the argument why the specific bounded instance is a case of study. It is so as to make understanding of the context. Caution has been taken not to reveal sources that could identify the Institution because ethics clearance was granted on conditions of anonymity.

The history of the Institution in terms of disability support presents the peculiarity that sets up students with disabilities’ access into professional degrees, their learning and completion of the programmes within minimum time, as the case. From the source that cannot be cited for reasons of anonymity, the Institution had disability support as far back as the Apartheid era. The Disability Unit structure is one of the oldest in the country. The presence of the DU at the Institution during Apartheid suggests that there were students with disabilities who were supported by the staff. Basing upon McKinney and Swartz’s (2016) argument that during

Apartheid, special classes were also divided according to race, with white special schools receiving better education, it suggests that it is students with disabilities from white special schools who could access a historically advantaged Institution. During the present post-Apartheid era, 'non-traditional students' have access into formerly advantaged institutions of higher learning (National plan for Higher Education, DoE, 2001a). The bounded instance of the phenomena becomes a case of study, to analyse the extent of transformation to include all diverse students. Furthermore, as a case of study could be generalised to other similar contexts (Yin, 1993), the findings about the present case could also be generalised to other students with disabilities' access and professional learning in other historically advantaged institutions.

The case is also set up in terms of provision of support through the Disability Unit structure presently. As reported in a source that cannot be cited because of its identifying information, the DU structure at the Institution supports nine categories of disabilities. They are: physical disabilities, visual impairments, hearing impairments, learning disabilities, psychological disabilities (severe anxiety or depression, attention deficit, chronic illness, epilepsy and painful conditions (back injuries, scoliosis and fibromyalgia). Matshedisho (2008) argues that other institutions support mainly visual and hearing impairments, and physical disabilities. The reason for supporting few disabilities is due to lack of adequate funding (Matshedisho, 2008). It is peculiar for the Institution to support nine categories of disabilities when other institutions support very few disabilities. The bounded instance of the phenomena is a case of study because it could help to understand whether or not students with the all the nine categories enter into professional degrees at the Institution. As training of the academic staff to teach students with disabilities is optional (Matshedisho, 2008), the case could further help to understand how students with various categories of disabilities are included in professional learning at the Institution. Furthermore, a case of study could make understanding of whether

or not; students with specific categories of disabilities complete their programmes within minimum time as expected of all other students.

The bounded instance of the phenomena at the Institution is a case in terms of policy. The Institution has an admission policy which enables access for all diverse students. It also has an institutional disability policy specifically for students with disabilities. Most institutions of higher learning in South Africa do not have institutional disability policies because they take long to be approved (Fotim Report, 2011). Broadly, South Africa has good and comprehensive policies of inclusion, but the implementation is slow (Lyner-Cleophas, Swart, Chataika & Bell, 2014). It implies having policy does not mean it is automatically implemented. Besides, Ball (2008) argued that policy does not always do what it says. From the limitations of policy as highlighted, students with disabilities' access into professional degrees, their professional learning and completion of the specific programmes is a case of study that could enable understanding of how the Institution implements its admission and institutional disability policies differently.

The bounded phenomenon is also a case of study in terms of structure of the Institution. Drawing from the online source that cannot be identified, the Institution has a number of faculties and schools, which are separate. There is one accessible bus for students with disabilities, which is the only means of transport that circulates amongst all schools, including the schools of Medicine, Law and Education. The Institution provides students of Medicine with a bus to the hospitals for field-practice. The bus provided is an ordinary bus that is not designed for students who use wheelchairs and who have visual impairments. There are also two DU structures at two different campuses from which students with disabilities get support from. Cory, White and Stuckey (2010) viewed the organisation of structures and programmes in such a way as distant and unconnected. They critiqued such an

organisation, arguing that it reveals issues of power and powerless between authorities in an institution and students with disabilities (White et. al, 2010). It implies that university authorities plan, design and organise the specific structures, without consulting students with disabilities, who have a lived experience of disability. With separate DU structures, separate schools and one bus transport at the Institution, students with disabilities' access, professional learning and completing the specific programmes with minimum time, is captured as a case. The specific situation could enable understanding of how students with disabilities access their respective Campuses to learn and also to get support from the DUs in two different campuses. Furthermore, the case would help to understand how those in Law and Education, who are not provided transport, access workplaces for fieldwork. The case could also help to understand how students with disabilities' completion of their programmes within minimum time, is impacted by structures that are far apart and one accessible bus.

4.2.4 The limitations of the case study

The case study has three main limitations. It could be limited in terms of scientific generalisation, and runs the risk of producing microscopic studies (Yin, 1993). It could also lack rigour because of researchers' biases, and as it has been observed by Yin (2003), could be confused with long ethnographic studies. Limited time to enable in-depth study is the main constraint for using the case study. The possible lack of scope of case studies has been pointed out by Creswell (2007), who remarks that that gathering enough information for an in-depth picture could be constrained by time, events or processes. In the present study, this limitation presents a constraint, and has been taken into consideration. However, an attempt to mitigate this involved the researcher being pre-informed of relevant information. In addition, a data collection matrix was established in which a number of research activities would be undertaken, in order to make maximum use of the limited time available to conduct

the research. That is in line with what Tellis (1997) recommends: that time could be optimised by setting parameters and goals.

4.3 SELECTION OF PROFESSIONAL DEGREES OF FOCUS

As the Department of Higher Education and Training reports an imbalance between higher learning output of specific professions and national skills, it is important for the present study to focus on Medicine, Law and Education degree programmes. It will help to understand whether or not diverse students, including those with disabilities, enter the specific programmes, they are adequately professionalised or not and whether or not they complete the specific programmes within minimum time allocated for each programme. It could illuminate why there is an imbalance of output and national skills reported by DHET (2011).

The three professional degree programmes are also selected for their different entry level requirements. By virtue of having different points and subjects for entry requirements, it suggests they have varied demands, both at entry and in professional learning. Being different in terms of demand could yield varied opportunities and obstacles for students with disabilities. It will help not to homogenise and universalise the obstacles and opportunities confronted by students with disabilities at the Institution to all the three professional degrees.

The three programmes have different branches and specialisations. These specificities are not described in detail because they could reveal the identity of the Institution, as well as the specific students with disabilities studying at this Institution. For example, it might be generally known that a specific branch of a particular programme or a specific specialisation is offered at the Institution. Thus, at undergraduate levels, the focus is on the six-year MbBch for Medicine, on the four-year LLB with the humanities foundation of a Bachelor of Arts (BA) General for Law. LLB stands for *Legum Baccalaureus* which means Bachelor of Laws in Latin. In Education the focus was on the Bachelor of Education (BEd) in primary and

secondary schooling. When the study included post-graduates, any specialisation was accepted as long as the student had studied within the three programmes.

Table 3 below, provides the number of final year students with disabilities who were registered in 2012 and studied the selected professional programmes. Across the three programmes, all eight who are under-graduates were expected to complete the respective programmes in 2014 and graduate in 2015. That also applied to the two post-graduate students in Education and one in Medicine, respectively. One in Education did not know when he would complete his study. Keeping track of those students was important so as to understand whether or not they completed their respective studies and graduated in 2015, as expected. All 21 final-year and 11 post-graduate students with disabilities in the three programmes were invited to participate. However, only eight final-year and four post-graduate students volunteered. The table shows the number of students who were invited to participate and declined, and those who agreed to participate. It also shows the number of students who were expected to complete in 2014, and who were tracked to understand the complexities affecting their completion of the specific programmes at the Institution.

Table 3: Students per programme, participants and completion of study

School	Medicine	Law	Education	Year expected to complete
Students registered with DU	9	24	32	
Postgraduate	3	3	5	
Agreed to participate	1	0	3	3 expected in 2014
Final year	3	9	9	
Agreed to participate	1	4	3	All 8 expected in 2014
Total number of participants	2	4	6	

Source: Statistical record for students with disability at Disability Unit Centre (2012-2014)

4.4 SAMPLING

Sampling is a process of selecting participants or events from a larger population. Those selected will be the ones from which the researcher gathers data and draws conclusions (Blackstone, 2012). Explaining what underpins selection, de Vaus (1996) states that only those who have the characteristics of the population, whose responses would represent those of the group, and those who fit the purpose, aims and objectives should be sampled. This is understood as purposive sampling, and, as noted by Babbie (1973), it makes the study possible, which it simply would not be with the total population.

4.4.1 Selection of the sample

For the present study, sampling was also purposive. It targeted participants who were could provide rich data on the phenomena under study. These were final-year and postgraduate students with disabilities, who had studied one of the three professional degrees, and the DU staff members who support these students at the institution. This selection falls in line with what Ritchie (2003) advises: that the sample units should have particular features that will enable detailed exploration. When a group of interest was difficult to conscript, the first few participants were requested to identify potential participants they knew. De Vaus (1996) proposes what is known as snowballing as a way of using other participants to get other relevant participants. Three final-year students in Education, two post-graduate students in Law, and one final-year student in Medicine were invited by this means; however none of them agreed to participate.

4.4.2 Description of the sampled and non-sampled participants

Describing the sample is a requirement within the transformative paradigm. Sweetman, Badiie and Creswell (2010) argued that the researcher should label the participants appropriately and explicate why they are sampled or not. The sample and non-sample described below follows the specific proposition.

The Disability Unit Staff

They were sampled as a result of their involvement with students with disabilities' access to the Institution generally, and to professional degrees in particular, overseeing to the general welfare of those students during the course of their study, and keeping their records, even after they had completed their respective programmes. There are nine of them, including the Head of the Unit, and are all permanent staff. The sample cut across gender, age, race and work experience. That followed Mertens (2007) who emphasises the importance of diversity.

Final-Year Students with Disabilities in Medicine, Law and Education

They were sampled because of their lived experiences of entering the specific degree programmes, and professional learning. In addition, they could have a valuable voice for change and improvement, as a historically-disadvantaged group. They comprise eight final-year students across the three professional degrees. They are also diverse in terms of age, gender, race, schooling background of mainstream and special education and disability category.

Postgraduate Students in Medicine, Law and Education

These were sampled because they have entered the specific professional degrees, completed these programmes, and graduated into a specific profession. Thus, they have a lived experience of entry into a specific programme, of professional learning while in that

programme, and of completing the programme at the Institution. There are three postgraduate students in Education and one in Medicine who agreed to participate. Two of them are working full-time and studying part-time, and the other two are studying full-time. They are diverse in terms gender, race, and history of schooling and disability categories. The specific post-graduate levels of study and the students' specialisations have not been described because this could identify the students.

4.4.3 Non-Sample

Lecturers Teaching the Three Professional Degrees

Lecturers play a role in the process of professionalisation of students with disabilities at the Institution. However, they were not sampled because they are not directly involved at the point of entry into the Institution. Although they teach students with disabilities, they do not have the lived experiences of obstacles and opportunities faced by these students in professional learning. Not selecting them was also influenced by time constraints. Blackstone (2012) concedes that the researcher might not be able to gather data from every single person of interest.

Professional Bodies Representatives

These accredit professional degrees and regulate professions, and their roles are described in detail in Chapter Two. However, they were not sampled because it was thought that they might not have rich data pertaining specifically to obstacles and opportunities specifically for students with disabilities. Moreover, the time factor and resources presented an obstacle to sampling them.

Transformation committee members at the specific Institution

These individuals have relevant experiences with regard to transformation issues, and the inclusion of diverse students, including the ‘traditional students’ in a formerly-advantaged institution. However, they were not sampled because they were not in a superior position to the participants to provide rich data in terms of the phenomena under study.

All students at Entry

It is important to understand obstacles confronted and opportunities presented at entry for all diverse students at the Institution. However, not all students at the point of entry were sampled because the main interest of the study was those with disabilities who were entering specific professional degrees.

4.4.4 Negotiating access

Systematic methods were used when negotiating access, and measures were taken to ensure that these were ethical. Mason (1996) reminds us that operating within moral parameters of research practice by acting in a principled way in gaining access to the setting is of paramount importance. Permission to conduct the study was first sought from the responsible authority, who is the academic registrar at the Institution, as well as the Head of the DU. Permission was granted in both cases (see letter of permission appended). This opened the way to invite and seek the consent of other staff members (see Appendix A4), and all of them gave their consent. The invitation letters and the consent forms were also sent to all fourth-year and post-graduate students with disabilities in the programmes of focus (See Appendix A2). This was done in collaboration with one DU member, who was requested to assist by the Head of the Unit. All distribution of requests for participation was possible by responsible authorities, who acted as gatekeepers.

4.4.5 Representativity of the sample

Representativity refers to the extent to which the substantive interest of the study is represented in the sample. According to Babbie (1973), the important characteristics of substantive interest need to be adequately represented. What this implies is that the sample should have participants who are key, and sources of rich data. In the present study, the sample included students with disabilities and DU members, all of whom could provide rich data on the phenomena of interest to the study. The sample cut across varieties of race, age, gender, disability categories, work experiences, positions of authority, as well as two levels of study, namely under-graduate and post-graduate. The specific variables were considered to be valuable in balancing the representation. Tables 4a and 4b present a summary of the demographic information of the participants. Their impairments are not included, because these were not considered to be important to the study, given that the focus was on the broad oppression of persons with disability in the context.

Table 4a: Demographic Information of Students with Disabilities

Characteristics		Number
Sex	Male	6
	Female	6
Race	Black	7
	White	5
Age	21-25	6
	26-30	4
	31-40	0
	41 and above	2
Schooling	Special Education	4

Background	Mainstream	8
Year of study	4 th years	7
	6 th years	1
	Post-graduate	4
Onset of disability	At birth	10
	Before entry into school	2
Programme	Law	4
	Medicine	2
	Education	6

Table 4b: Demographic Information of DU Staff Members

Characteristics		Number
Sex	Male	4
	Female	5
Race	Black	6
	White	3
Position in the Disability Unit	Head of Unit	1
	Adaptive technician	1
	Administrators	5
	Sign language Interpreter	1
	Learning disability coordinator	1
Work Experience	0-5 years	3
	6-10years	2
	11-20years	3
	21-30years	1

4.5 THE RESEARCHER'S ROLE IN THE STUDY

The researcher's position is informed by the traditional social model, which is discussed in Chapters Two and Three. Within this framework, disability is considered to be a difference, and not a limitation. Therefore, my focus is on oppression imposed on those with disabilities by the social context. My role is to explore and understand those external (environmental) factors which either impede or promote the students' entry into the specific professional degrees, their professional learning, and whether or not they complete the programmes within minimum time and graduate into the specific professions.

4.5.1 Language Use

As a non-disabled researcher working with some participants with disabilities, there should be sensitivity in my use of language and terms. Slee (2011) states that language has the potential to frame and mobilise change, and furthermore words are instruments of power. The words used to refer to disability reveal the way it is viewed (Oliver & Barnes, 1998). This means that the manner in which language is used could dehumanise and denote a negative attitude, because words are powerful. In the context of the study, it would be improper to use exclusive or offensive terms when working in partnership with those with disabilities, and seeking their just inclusion. Thus, the language used in this study is in line with the social model, and specific descriptors are selected from conventional and post-conventional disability studies, and used in the same way as they are used in that scholarship.

Person-first language is preferred in referring to those with disabilities. This emphasises that persons with disabilities are people first, and their disability is a secondary feature. There have been contestations of this by some scholars, like Delvin and Potheir (2006) and Titchkosky (2001), who argue that this language separates disability from the individual. They ask, for example, why persons are not described in terms of gender and race as a

‘person with a gender’ or a ‘person with a race’. Despite these reservations, person-first language is viewed as enhancing the dignity of the individual. Lahey (1999) observes that such language results in persons who are different obtaining full equality because they are considered as all other citizens with equal rights. ‘Students with disabilities’ is a term used in this study to reflect the value of inclusion and respect for human diversity (Swart & Pettipher, 2011).

The term ‘special’ is contentious in the inclusive context. Vehmas (2010) argues that it is based on the individualistic understanding of disability, in which problems are explained in the light of an individual being defective. Thus, the term ‘diverse needs’ is preferred to ‘special needs’. Furthermore, to avoid the use of the term ‘special arrangements’, ‘equalisation of opportunity’ is preferred. The latter is a term that is widely used in Disability Studies to refer to wider access issues, especially for people with disabilities. It is derived from the UN’s (1993) Standard Rules for the Equalisation of Opportunities for Persons with Disabilities.

In addition the terms ‘support’ and ‘accommodation’ are understood to have negative connotations when used in the context of disability. While the terms superficially concern services and consideration for those with disabilities in an environment that is designed without them in mind, they also denote dependency and helplessness. Referring to those with hearing impairments specifically, Saur (1992) argues that the term ‘support’ depicts individuals with hearing impairments as passive and dependent, receiving from the all-knowing service-providers. ‘Accommodation’ carries the connotation that those who do not belong by right are also catered for (Walton & Lloyd, 2011). Given this, the terms ‘provision’ and ‘inclusion’ are preferred. Inclusive terms are selected from within the discourse of the disability field and preferred over the exclusive ones. Table 4 provides specific exclusive

terms, and the preferred inclusive ones, which provide examples of disability-friendly language. It should be emphasised however that language and terms are not static. They continue to change and those that are preferred presently may not always be.

Table 5: Exclusive and inclusive Terms

Term	Preferred
Disabled students	Students with disabilities
Support	Provision
Accommodation	Inclusion
Special needs	Diverse/ unique needs
Special arrangements	Equalisation of opportunities

4.6 THE TRANSFORMATIVE PARADIGM

The transformative paradigm has the professed goal of transformation and change. It emphasises agency of oppressed persons through working together with researchers within specific social contexts (Mertens, 2015). It is believed that those who are oppressed should play an active role in research that pertains to them, and the researcher is not an expert but works in equal relationship with the participants for the common goal of change. The paradigm addresses issues of power and privilege, which sustains oppression (Mertens, 2009). What this emphasis hopefully results in is that the oppressed voice is also privileged, and that the researcher does not perpetuate oppression by speaking for the oppressed. In this way, the paradigm could also “capture disability and the relationship between persons with disabilities and their social contexts” (Mertens, Sullivan & Stace, 2013, p. 482). Multiple realities as constructed by those with lived experience of disability could be obtained when the study is informed by this paradigm.

The paradigm arose during the 1980s and 1990s, and was popularised by Donna Mertens. It emerged due to dissatisfaction with the dominant research paradigms that in existence at the time (Mertens, 2005). A shortcoming of existent paradigms was that many of the sociological and psychological theories which informed them “had been developed from the white, able-bodied male perspective and [were] based on the study of male subjects” (Mertens, 2005, p. 17).

The emancipatory paradigm, which also has transformative goals and specifically intends to ameliorate the oppression of persons with disabilities, has had unintended outcomes. Research conducted within the paradigm has ended up benefitting able-bodied researchers (Oliver, 1997) rather than persons with disabilities. It has sought the empowerment of people with disabilities by putting them in charge of disability research so as to challenge their oppression. However, as noted by Booth and Booth (1996) a challenge to this approach that was overlooked was the difficulty faced by persons who are inarticulate, have learning disabilities or psychiatric impediments, and how they might be additionally burdened by being expected to be in charge. As a result, those people found themselves being ‘researched’ and not part of the process. Hence, the control of the research remained with non-disabled researchers. It will not be overlooked that the same is true of the present study.

The present study is also informed by the transformative paradigm, because one of its goals is transformation. My desire is that those who are oppressed have their agency respected, and are empowered to effect change for themselves through their own voice. Being premised on this specific paradigm, the study could address the issue of power and privilege. In addition, being informed by Decolonial Theory, the study can possibly go some way to liberating persons with disabilities from oppression.

4.6.1 Philosophical foundation for the transformative paradigm

The transformative paradigm has four assumptions it is grounded upon. Those are described by Guba & Lincoln (1994) as the ontological, epistemological, axiological and methodological assumptions. The ontological and epistemological ones fall under the umbrella of the philosophic foundations that anchor the whole study, and this will be discussed in Section 4.8. The sections that follow present and discuss how the axiological and methodological assumptions inform the study.

The axiological assumption

The axiological assumption involves the ethics and the cultural values in a specific context. Mertens (2012) explains that the potential for social justice to be an objective of research, the researcher has to understand and respect the culture and norms in a specific context. This is indispensable because the transformative tradition requires that the researcher works closely with an oppressed group in a particular social context. Participants might not co-operate if the researcher defies their culture and does not respect their values. In the present study, the focus was not social justice broadly, but I was required to work in a respectful way with the participants to generate data for policy makers on the phenomena under study. Since in my learning at tertiary level I had interacted with different students from multi-lingual, multi-racial and multi-cultural backgrounds, I am familiar with the cultural values of the participants and a cordial relationship was established without difficulty. All ethical procedures required to conduct a study with vulnerable persons were adhered to.

The methodological assumption

The methodological assumption has to do with the researcher deciding on the suitable methods of exploration. Mertens (2007) identifies three main recommendations to inform this. First, there should be a qualitative dimension in the study, because it enables dialogue

between researchers and participants. Secondly, there has to be careful development of partnership with the participants in order to obtain valid results. Thirdly, the mixed method approach is to be used as a way of collecting data. For this particular study, all the three recommendations were adhered to (Mertens, 2007). As highlighted in Section 4.1, partnership and mutual trust were first established with the DU staff members, even before the study commenced, to enable us to make decisions together. Thereafter, a relationship was developed with the students with disabilities. The mixed method approach was adopted and the qualitative dimension was given priority.

4.7 SPECIFIC TENETS OF THE TRANSFORMATIVE PARADIGM

There are specific tenets that distinguish the transformative paradigm from other research traditions. Addressing issues of power between the researcher and the participants, locating the study in a social context, and reflexivity, underpin conducting a transformative research. In the section that follows, these tenets are discussed, and in addition, I discuss how I attempt to incorporate them in the present study.

4.7.1 Addressing power

In the transformative paradigm, issues of power and privilege between the researcher and the participants are emphasised. Mertens (2009) argues that addressing this potential for inequality is most important in the research tradition. It could be argued that as one of the flaws in the emancipatory tradition was that, people without disabilities unwittingly found themselves having more control of the research than those with disabilities. According to the transformative research tradition, none should be privileged over another in terms of power, and thus it is important that a delicate balance is devised. However, in practical terms, it is not possible that an entirely equal power relation can exist between the researcher and the participants, or that the study can be given over to those with disabilities to control

completely. In the present study, the researcher coordinated and steered it towards its aims and objectives. The participants also had power in terms of being given opportunity to make suggestions for change (Mertens, 2007). Thus, their voice was given primacy and ultimately, power.

4.7.2 The transformative paradigm and the social model

The transformative paradigm is premised on the social disability model. This is in line with the suggestion of Mertens et al. (2013), who argue that disability is to be captured as a complex embodied relationship between people with impairments and their natural and social environments. Disability is located in the social environment and both the researcher and participants should work together to identify oppressive structures and practices therein. In the context of the study, the quantitative design was used to source broad opinions on those oppressive structures and practices, and qualitative data provided the details on how these were experienced by students with disabilities at the institution and work settings for integrated learning.

4.7.3 Transformative paradigm and reflexivity

Reflexivity is paramount in a transformative study. The researcher represents the lived experiences of the participants and their voice for change (Mertens, 2007), and in this regard, it is important that the researchers reflect on their biases and how they are addressed, and their positionality, so that the study is carried out in a credible, trustworthy and transparent manner.

Reflexivity is a broad issue that is understood differently in different fields. It would constitute a chapter on its own if dealt with exhaustively. It is understood by Pillow (2003) and Creswell (2003) as a deeply complex issue. The complexity hinges on the fact that there

is uncertainty as to whether it a skill or a method. There is also the matter of who the researchers should be reflexive about: themselves or the other (Pillow, 2003). However, in the context of the present study, Payne and Payne's (2004) understanding of the concept has been adopted: that it is about awareness of beliefs, values, attitudes and personal effects that the researcher brings into the study. This implies that the researcher should reflect on himself or herself, given that human nature and bias could have a negative impact on the study.

Given the required reflexivity, I must disclose that I have a vested emotional interest in the study. I have been teaching learners with visual limitations in the Zimbabwean context. The educational system there is still more 'special' than inclusive. Both learners and their teachers, who are specialists, are separated and placed in special schools. Teaching and learning therefore happens in an exclusive context, outside the mainstream. By virtue of being excluded, I identify strongly with those with disabilities. In my understanding, we are similar in that we are all subject to segregation and are discriminated against. Having this lived experience, there was a possibility that, as I conducted the interviews, I could be more attuned to experiences of exclusion than to those of inclusion. Unfortunately, perfect neutrality and objectivity are simply not possible, given the human element of such study. Berger (2013) observes that knowledge production cannot be value-free, as it cannot be independent of the researcher producing it. Thus, I could not avoid or discount my own subjectivity.

4.7.4 Contestation of the paradigm

While the paradigm requires that participants are involved throughout the study, in some cases this is impossible. In the present study, there were constraints of time that did not allow for this degree of involvement by the participants. This experience has been shared by Frank (2000), who notes that total involvement is not easy to ensure. It is also not possible to

involve the participants in analysing data. Priestley, Waddington and Bessozi (2010) argue that this degree of participant involvement could jeopardise and devalue the methodological and the theoretical credibility of the researcher. Given this, in Mackenzie, Mji and Gcaza's (2014) study, persons with disabilities were only involved in some aspects, at some stages and varying levels and not throughout the entire process. This addresses the issue of giving overall control of the study to the participants as equal partners, because this is not practically possible. Thus, in the present study, participants were also involved to a similar degree to the participants in the study of Mackenzie et al. (2014). All participants who participated in the survey also did in the interviews, and this was considered a realistic maximum participation level that the researcher could offer within the time limits of the study.

4.8 PHILOSOPHIC FOUNDATIONS OF THE STUDY

The philosophic foundations of the study involve the researchers' underlying ontological and epistemological assumptions, and how these influence his or her position in the research. For example, these assumptions influence the researcher's choice of methodology to carry out the study. The section that follows discusses my specific assumptions, so as to justify the way in which the study was carried out, and how data was analysed.

4.8.1 Ontological assumptions

Ontology concerns the nature of reality. According to Blackie (1993), it refers to "The claims about what exists, what it looks like, what units make it up and how the units interact with each other" (p. 6). What this means for the research at hand is that it is important that the researcher is aware of and able to make explicit how they make meaning of what reality is. In the present study, reality is considered to comprise the subjective interpretations and meaning of the phenomena under study as articulated by social actors. Mertens (2009) contends that differentiated access to power influences which version of reality is privileged. In other

words, power dynamics determine whose version of reality is privileged. In this study however, all versions were privileged, because all voices need to be heard. Furthermore, taking the values espoused by Mertens (2009) into account, diversity and intersectionality were not overlooked. It was also taken into consideration that among those with disabilities, there were issues of race, gender and class which also informed how individuals within the collective constructed their social reality. The same applies to those without disabilities, since they also composed the sample. Ndlovu's (2015) perspective is that speaking out is tantamount to agency, and the personal experiences of all individual participants were therefore considered and allowed to emerge. In this, I was influenced by Denzin and Lincoln (2013), who argue that researchers should have sufficient understanding of dimensions of diversity to "combat racism, prejudices, bias and oppression in all forms if they are to save as agents of change" (p. 485).

4.8.2 Epistemological assumptions

Epistemology refers to means of knowledge construction and ways of acquiring knowledge. It has to do not only with its construction but also its dissemination. Blackie (1993) asserts that it involves:

The claims or assumptions made about the ways in which it is possible to gain knowledge of the reality, whatever it is understood to be, claims about how what exists may be known. (p. 6-7)

In the present study, which is unavoidably influenced by its ontological position, knowledge claims involved the social reality as constructed by the participants. This knowledge was obtained through privileging their voice and personal experiences. Epistemologically, knowledge is considered to be the multiple social constructions of reality by the participants, and personal experiences were considered as knowledge that is of value. This epistemological

stance is underpinned by Decoloniality, which is opposed to censoring knowledges, and in which all knowledges are considered valuable and useful (Dastile & Ndlovu-Gatsheni, 2013).

4.9 THE MIXED METHOD

The mixed method approach is a “class of research where the researcher mixes or combines quantitative and qualitative research techniques, methods, approaches, concepts or language in a single study” (Johnson & Onwuegbuzie, 2004, p. 17), a method in which designs of collecting and analysing data are combined to better understand a research problem (Clark, Creswell, Green & Shope, 2008). In essence, it is a design that brings the two designs together with the view of enabling a deeper grasp of the unit of study.

4.9.1 Philosophic assumption and mixed method

Ontologically, the underlying belief espoused by the researcher is that there is an objective reality constructed from people’s perception of the world (Barnes, 2012). Epistemologically, that is, in order to construct knowledge, the researcher brings together the subjective from the qualitative data, and the objective from the quantitative data, and he or she becomes inter-subjective (Greene, 2008). What this allows for is that the researcher might not be completely objective or subjective. It could even be argued that the objective and subjective interpretations of reality could provide a richer conception of the phenomena under study. Morgan (2007) notes that pragmatic researchers prefer a mixed method approach because it allows for that inter-space in which they capitalise on the best of what both methods of data collection have to offer. In the context of the present study, a pragmatic approach was used in relation to mixed method tactics. This was to guide “workability” (Morgan, 2007, p. 6) answering the research questions. Johnson and Onwuegbuzie (2007) argue that this way of employing a mixed method approach is important for “empirical and practical consequences”

(p. 17) and ensuring the approach is suitable to match the research design and the research questions (Snape & Spencer, 2003)

4.9.2 Adoption of the mixed method

The mixed method was adopted as a result of the transformative paradigm. Bearing the stance of Mertens (2009) in mind, it was considered to be the most relevant design, where the researcher's philosophical orientation fits with the specific paradigm. The method was adopted to capture the lived experiences of the participants, and to answer the research questions of the study. In this, I was influenced by Plewis and Mason (2005), who argue that the method offers the opportunity to understand the questions of 'how much' as well as 'what' and 'why', providing rich data in the process. Biesta (2010) has also stated that "the choice of mixed approach is seen as one that should be driven by the very research questions that research seeks to answer" (p. 96). Tashakkori and Teddlie (2010) are also proponents of the method, and assert that the research questions could be best answered through the mixed method.

The method was also adopted for complementarity. Influenced in this regard by Johnson and Onwuegbuzie (2004), I acknowledge that it incorporates the strengths of both research methods in a single study and the two complement each other. For example, the quantitative is scientific, objective and free from bias and subjectivity (Denzin & Lincoln, 2013), while the strength of the qualitative is found in the relationship of the researcher and the participants, and opportunities of capturing the subjective perspectives of the latter (Creswell, 2003). Atkinson and Delamont (2006) observe that when mixed methods research is conducted in a robust and rigorous way, these strengths combine to contribute to useful knowledge. Thus, both methods worked together to gather data that couldn't have been obtained through the use of only one of them.

4.9.3 The mixed method designs

Designs in the specific research design concerned the specific ways in which the two methods are mixed. The manner in which methods are mixed is the most important aspect, and has to be done well if the approach is to be successful. Barnes (2012) draws our attention to the sequential explanatory, sequential exploratory, concurrent triangulation and concurrent nested designs. In the former two, the emphasis is on how the sequence begins, quantitatively or qualitatively (Creswell & Clark, 2011). The next section presents and discusses the first one, as it was found to be appropriate for the study.

The sequential explanatory design

The sequential explanatory design was adopted for the study. Describing it, Barnes (2012) writes that the quantitative technique is first used to source broad ideas and opinions, and that those are then further explored in-depth using the qualitative technique. The researcher uses the design when he or she wants to understand trends broadly and also explain reasons for these in-depth. In the present study, data was first collected quantitatively, the responses of the participants analysed and the results used as baseline to inform the collection of qualitative data. The results of the former method were useful to give a foundation to the qualitative aspect of the study. Although the qualitative results were prioritised at the interpretation stage, they illuminated the quantitative ones, and both the sets of results confirmed one another at the end. This specific design was adopted because there was none more suitable and relevant for this study.

4.9.4 Contestations of mixed method

A major contestation of mixed method is in the simple combination of quantitative and qualitative methods in a single study. Teddlie and Tashakkori (2003), for example, in agreement with Greene (2008), maintain that the quantitative is positivist and the qualitative

interpretivist, and that these are underpinned by incompatible philosophic assumptions, and they might not be reconciled in a single study. Morse and Niehaus (2009) further warn that the simple mixing of methods could pose a serious threat to validity of a study. However, in response, Johnson and Onwuegbuzie (2007) argue that if the method helps to offer new possibilities, to answer important research questions and to test new ideas, it could be embraced. Sharing the same view, Barnes (2012) asserts that the contestation is unhelpful because pragmatic approaches emerge, and the incommensurability of the two methods has been deconstructed. Given these responses to the criticisms, the study was then conducted with an open mind and not constrained by issues of incompatibilities, as a pragmatic approach was employed. What I did bear in mind however was the care that needed to be taken when combining the methods. Green and Hall (2010) argue that the meaningful outcome is in how the two methods are integrated.

4.9.5 The quantitative and qualitative research designs

As has already been stated, the mixed method combines both the quantitative and qualitative designs in a single study. Bryman (2001) states, simply, that research design are frameworks for collecting and analysing data. The section below discusses the designs' philosophic foundations, their merits and demerits and how they were used in study.

The quantitative design

Researchers who use the quantitative method believe that there are patterns and regularities in the world, and that their task is to provide explanations for those by exploring them using rigid, structured and well-guided methods. Mouly (1978) contends that the method has clear, concise and unambiguous research problems and research questions. Adding to this, Rose and Sullivan (1996) state that theories are used to understand those elements of reality which are

of concern to researchers. The method can be understood as conducted within well-defined research parameters, with the aim of revealing complexities of the physical and social worlds.

The philosophic assumptions in the quantitative design

The quantitative design is rooted in positivism. Barnes (2012) posits that the belief is that there is an objective reality, sets of true concepts and causal relationships that exist in the world. Those could be observed objectively by quantitative measure or statistical methods. Neuman (1997) further explains that if the research is on human behaviour, organised methods and precise empirical observation are applied to discover and confirm causal laws and general patterns. In order to do this, rigid instruments of measurements and precise methods are used. Denzin and Lincoln (2013) argue that the research design is impersonal, that it works with mathematic, scientific and statistical models, and is written in third person prose. This means the researcher becomes an objective outsider who seeks to understand an aspect of reality objectively. In the context of the present study, the quantitative method was useful to help me obtain the views and opinions of the participants numerically. This could enhance the validity and generalisability of my findings to similar contexts, as numbers have universal applicability because of (a degree of) certainty in mathematics (Femia, 1981). Significantly, the qualitative questions were then founded on a reliable base which had been derived from objective results which are generalisable and which do not have the ‘researcher-effects’ (Bryman, 2001), as my subjectivity could not influence the survey results.

The strength of the quantitative design

The strength of the quantitative design is in its objectivity. Positivists like Denzin and Lincoln (2013) contend that the method helps in the conducting of quality scientific research that is value free, free of individual bias and subjectivity. In addition, Hartley and Muhit (2003) state that using the design could identify universalities, and is useful in making

statistical generalisations, as well as in determining correlations between measurable phenomena. It can be used in large-scale research that involves statistical analysis and interpretations for a specific research purpose. These strengths make it a research design which could be used to inform policy, specific decisions, planning or service provision in given contexts, on the basis that these contexts are large-scale (Hartley & Muhiit, 2003).

The limitation of the quantitative design

A major limitation of the quantitative method has to do with the lack of interaction with the participants, and the inability of the researcher to understand and learn about them on complex personal and social levels. In this respect, meaning, perceptions and interpretations that could be obtained from face-to-face interactions with the participants are not part of quantitative data collection. However, despite this limitation, for the current study, numerical representations were very useful to extract the broad opinions of the participants. It enabled me to obtain baseline data for the qualitative method, which is more interactive.

The qualitative design

The qualitative research design is commonly undertaken to explore, describe or explain other persons' experiences on particular phenomena, as well as their behaviours and their interactions within specific social contexts (Fossey, Harvey, McDermott & Davidson, 2002, p. 717). Creswell (2003) states that the method is undertaken with the aim of exploring, discovering and developing an understanding, then the researcher describes and reports on particular phenomena. The design therefore calls for interpretive analysis. Something that can often be observed in the descriptions of both Fossey et al. (2002) and Creswell (2003) is that there are no statistical procedures involved in the analysis. The design can be also viewed as holistic, since data is gathered from different sources. Thus, the method is most suitable for

researchers who seek to understand the participants' perspectives about the phenomena under investigation.

The qualitative design and its philosophic foundation

The qualitative design in the study is informed by the transformative paradigm. Creswell (2014) explains that social constructivism often combines with interpretivism, and there has been a paradigm shift in which the two are subsumed within the transformative paradigm. This is because there has been an increasing need to situate research for social justice (Mertens, 2015). However, in this study, a constructivist approach to knowledge construction was adopted so that the participants' construction of their reality as knowledge could be privileged. A constructivist researcher tends to rely upon the "participants' views of the situation being studied" (Creswell, 2003, p. 8). And as Albrecht, Seelman and Bury (2001) argue, the questions, "Who are disabled people, and who should speak for them?" (p. 2) are often asked in the field. The constructive approach would not only allow those with disabilities to have the opportunity to construct their own reality, but also to speak for themselves rather than having the researcher speak for them. Thus, while I also interpreted and theorised data, the voice of the participants was not stifled.

The merits of the qualitative design

The design provides the opportunity to access the meanings of the social reality as constructed and interpreted by social actors. Creswell (2003) maintains that the design is suitable to understand human action and purpose, because knowledge claims are derived from varied subjective constructions and interpretations of the participants. This is the merit of the design that most appealed to me as the researcher, because it could provide the means to understand the phenomena under study from the participants' perspectives. It is important to note however that as data is gathered for policy makers, the quantitative method alone

might not suffice to provide an adequate knowledge base. Thus, the qualitative method could complement the quantitative to provide a more complete picture.

The qualitative design prioritised over the quantitative

Priority and power is given to the qualitative design over the quantitative in the present study.

The merits of the qualitative discussed influenced the orientation. In addition, Weiss' (1968) argument that "qualitative data are apt to be superior to quantitative data in density of information, vividness and clarity of meaning" (p. 344-345) was one I found most convincing.

The design is also prioritised because it is informed by the traditional social model. Stone and Priestly (1996) observe that research in disability has been predominately conducted in more scientific ways, which have the unfortunate tendency to 'medicalise' disability, and reinforce the marginalisation of persons with disabilities. By virtue of allowing the participants' voice to be heard within a setting to which they have become accustomed, they were gently sensitised to their socio-cultural contexts, and this, in turn, provided a basis for an understanding of their social existence, their exclusion, and their oppression.

The Limitation of the Qualitative Design

A criticism often levelled at qualitative design is that it usually focusses on small samples, and these are taken as representative of big populations. Johnson and Joslyn (1995) argue that it can lead to misrepresentation and falsification. In the study, the sample was small; however it is my contention that this does not impact the validity of my findings, because the participants in the survey were the same people who participated in the interview. By virtue, a degree of consistency, and verifiability (as I have mentioned the results from both research designs provided confirmation of one another) was established. Another of the design's limitations is that its methods cannot overcome researcher subjectivity. As already explored

in this chapter, subjectivity is inevitable because I was co-constructing knowledge with the participants, there was no way I could detach myself and be entirely objective.

4.10 THE FIELDWORK

My fieldwork involved first collecting the quantitative data using the survey method, as informed by the requirements of the sequential explanatory design (Creswell & Clark, 2011). This was followed by collecting qualitative data. The quantitative design determined the scope of the study, or its breadth (given that it yielded patterns that illuminated the units of study). Thereafter, depth was added to this breadth in in-depth interviews.

4.10.1 The survey method

The survey method is used to collect quantitative data. Blackstone (2012) describes it as a method where the researcher poses predetermined questions to the entire group or a sample, to quickly gain some detail from a large group of people, in preparation for a more focussed in-depth study using an intensive method. In this study, the method was used to harness breadth, and the predetermined questions were posed to a sample.

Types of surveys

There are longitudinal and cross-sectional surveys. Frey, Botan and Kreper, (1999) have described both, explaining that the former is conducted over a long period of time and at several points in time, while the latter is once-off. The longitudinal one is more reliable because changes and trends are taken note of at several points. In this study, the survey was cross-sectional because it was conducted at one point only, given time constraints.

Merits of the survey method

The survey method has merits that distinguish it from other methods of collecting data. It is cost effective, because data can be collected from many people at once (Johnson & Joslyn,

1995). It is reliable when questions are well designed and standardised (Schutt, 2011), and it also yields generalisable results when the questions are not conducted to understand the sample, but the larger population from which it has been drawn (de Vaus, 1996). The method is also versatile (Blackstone, 2012), in that it can be used by different people in different professions for different purposes. For example, it can be employed to evaluate projects in institutions, it can be used by politicians to source opinions of people and their needs, and business people can use it to market products and gather people's opinions about them.

In the present study, the participants were asked different questions which pertained to specific professional degrees. For example, students of Law with disabilities were asked about Law, and those in Education were asked about Education. The versatility of the survey method was useful to source data related to disability from the DU members. The merit of generalisability might also apply to this research because the perspectives of individual participants, could be generalised to other similar contexts.

Limitations of the survey method

The survey method is not able to capture why participants think or behave in the way they do. This is a result of the method's inability to gather a nuanced sense of the context (De Vaus, 1986). When taken out of context, the participants' opinions, actions or behaviours could be misunderstood. It is also restrictive because it relies heavily on structured questions. This prevents the participants from elaborating on their opinions as they stick within the bounds provided by the researcher. Also, the method could have errors of measurement (Schutt, 2011) when questions are not well designed. This means they could measure something they are not designed to. To avoid this, de Vaus (1986) suggests that the researcher should evaluate each question to check for redundancy, reliability and validity. In this study, all counter-measures proposed were followed and an open-ended question was provided with

adequate space for participants to include whatever they felt was important in relation to the phenomena. The method was followed up with in-depth interviews, where context was taken into account.

The design of survey questionnaires and the questions

Specific principles were carefully adhered to when designing the questionnaire itself, and individual questions. In this regard, I was influenced by de Vaus (1986) who states that good questionnaires do not just happen. He explains the design for questionnaires should involve “careful thinking, numerous drafts, thorough evaluation and extensive testing” (p. 81). Each of these steps is essential to establish reliability (Fowler, 1988).

The design of questions was guided by the three sub-research questions, and they helped to keep the questions focussed. The research aim was also used to inform what to include and what not to include in the questions (Schutt, 2011). Thus, every question in the questionnaire served a clear purpose related to the research question and research aim. Double-barrelled, leading, lengthy and wordy questions and phrases that could have been ambiguous were avoided (Blackstone, 2012). There was precision and specificity in the questions, in order to elicit the information that was desired. Following Dillman’s (2007) lead, the questions did not begin with the main issues. There was consciousness that such structuring could demotivate the participants, thus simple questions about their demographic information began the questionnaires (See the questionnaires for DU staff members and students in Appendices B1 and B2).

The question design followed the Likert scale. Such a scale is commonly used to measure attitudes, views or opinions of participants. Jamieson (2004) argues that the Likert scale provides a range of responses to given questions or statements that are ranked, usually from

five (strongly agree) to one (strongly disagree) (Jamieson, 2004). Thus, they provide ordinal data which is ranked in ordered categories. However, the magnitude of difference between the ordered categories cannot be determined (McMillan, 2012). For example, the intensity of feeling between ‘strongly agree’ and ‘agree’ is not quantifiable, and hence, categories are only measured in terms of order.

The Likert scale design requires that the participant provides a judgement or opinion on every statement provided. This is done to determine the extent or level to which the phenomenon is agreed with by the participants. The statements provided were measured according to a weighting scale which consisted of four levels. The rating term was ‘agree’ and the rankings were: Strongly agree = 4, Agree = 3, Disagree = 2, and Strongly Disagree = 1. De Vaus (1986) has argued that participants should not be forced to offer opinions, however the scales in the present study did not have a neutral response. That was purposely done because as participants’ voice was sought, neutrality was not a desirable response.

Specific principles used to design the questionnaires in the study. They were designed with adequate and neat spacing (See attached appendices B1, B2). This is recommended by de Vaus (1986), who contends that refining the appearance of the questionnaire itself makes it appeal to the participants, and they are more likely to complete it. The general instructions on the purpose of the questionnaire and why respondents were invited to participate were provided at the beginning. There were eighteen closed questions for students with disabilities and the DU staff members. This was deliberately done because the sample size was small and many questions could help in legitimization.

Piloting the questionnaire

Piloting is a way to test the questions and evaluate them before the formal survey is carried out. A pilot involves pretesting of the questionnaire to establish whether the questions are

clearly understood by the participants (Schutt, 2011). It also ensures that there is no ambiguity and room for varied interpretation (Dillman, 2007). In the present study, the questionnaires were piloted. There are various approaches, however expert piloting was found relevant to this study. Presser and Blair (1994) argue that experts are able to identify a number of problems in questions and the questionnaire itself. Given that expertise was required for this form of piloting, the questionnaires were given to two lecturers with disabilities at the Institution, and one member of DU. The individuals are specialists in the field of disability, and they helped with both the content of questions and the structure of the questionnaire itself. After this, the issues they raised were addressed and questionnaires were finalised, and printed as hard copies.

Administration of the questionnaires

The questionnaires were physically distributed to 21 participants, who indicated their willingness to participate. Physical distribution was possible because they were few: they included all the Disability Unit staff (N=9) and students with disabilities (N=12) from across the three professional programmes. The questionnaires could be completed within twenty minutes, and the arrangement was that the researcher would then collect the completed questionnaires. All of them were completed and returned (100% response). Fowler (1988) notes that a higher response rate produces better results, even from few participants, than when there is non-response from a larger sample.

4.10.2 Interviews

Interviews are a method of data collection extensively used to collect qualitative data. Tuffy, Rothery and Grinnel (1996) describe them as a conversation that is conducted with a specific purpose in mind. What this implies is that they involve two-way communication on a specific phenomenon. When they are being conducted, the researcher also has access to non-verbal

communication, gestures, tone, language and facial expressions. Holloway and Jefferson (2000) consider this to be helpful in that it yields additional information with regard to how participants understand and feel about the phenomena. Mueke (1997) believes that the method has the capacity to document what could be overlooked, or under-estimated, which may nevertheless have a great bearing on the phenomena under study. Thus, other data could also be captured informally through observing the behaviour of the participants. However, Silverman (2001) cautions that interviewers should ask themselves whether or not the interview helps to answer the research questions, and whether relevant questions are being asked in an interview. There are different types of in-depth interviews, and these include a structured interview, a semi-structured one, and an unstructured interview. In the present study, a semi-structured interview was employed for further clarification of the survey results and findings. This is discussed in detail in the section that follows.

Semi-Structured interview and why it is used

The semi-structured interview seeks depth and clarification from the participants with regard to elements under study that need to be understood further. Robson (2002, p. 270) describes it as “having pre-determined questions, which can be modified, reworded, explained to the interviewee or omitted if situation deems necessary”. This description tells us that there is flexibility in this kind of interview, and the questions can be easily manipulated as deemed fit by the interviewer.

This kind of interview was selected over other types because it enables the capturing of participants’ perspectives in a detailed way. Mertens (2007) observes that a researcher cannot afford not to source qualitative data that he or she needs when this method is used. There is liberty to probe further when the researcher still needs more data on the phenomena. In turn, the researcher is able to source depth, which yields rich data. Participants also have the

opportunity to raise other issues which are not asked about, but that may be pertinent to the study. This is important, especially in a transformative study where the participants' power is in their voicing. Rubin and Rubin (1995) argue that this form of interview gives interviewees voice, and provides space for subjective and interpretive meaning.

The semi-structured interview allows for a free interaction between the researcher and participants. Legard (2003) observes that they “permit interviewer-interviewee interaction that has great potential to generate new revealing data on the subject” (p. 142). Besides generating more useful data, there is also the development of trust through interaction. This is central within a transformative paradigm (Mertens, 2009), because it can enable the researcher and participants to work in partnership. In the present study, a relationship was developed through the interviews because communication has continued even after some participants have graduated.

The limitation of the in-depth interview

A major limitation of the in-depth interview is that the researcher may ask leading instead of guiding questions. This could compromise the legitimacy and quality of research. Overcoming the limitation could be difficult, because the researcher is co-constructing the knowledge with the participants in the process of the interview. Bourdieu (1990) confirms that it is virtually impossible for the researcher to be neutral and entirely objective. Subjectivity cannot be completely sidestepped, and this was borne in mind throughout the process.

Problematization of focus group interview

The focus group interview could have been used to source rich data from the participants. This type of interview involves a group of participants being interviewed at the same time to get their different views on the phenomena under investigation. Wilkinson (2004) considers

this kind of interview to have merit. According to him, it enables the collecting of data relatively quickly from a large number of participants, and providing a relatively natural everyday conversation while debating key issues. Despite these benefits, this type of interview was not adopted. The participants were a vulnerable group, and discussing disability issues openly in a group was not deemed to be an appropriate tactic. Other scholars, like Frith (2000), argue that participants tend to talk more freely on sensitive issues in focus groups than in one-to-one interviews. However, in this case, because I am able-bodied, it was not deemed appropriate to bring students and DU members with disabilities and those without disabilities together, to discuss disability issues. A focus group ran the risk of creating a melting pot of personal experience, and inadvertently privileging some experiences over others. In other words, biases from both the participants and the researcher could have dominated the process.

Intersectionality, namely the interplay of race, gender and class, had the potential to skew the results of the focus group interview. Kitzinger (1994) observes that participants in focus groups do not always agree, they misunderstand one another, question one another and try to persuade others to their point of view. It would be difficult to manage a group of participants who were each oppressed or privileged differently, because they would have contradicting views which were difficult to reconcile. An unavoidable result would be the inadvertent advantaging or disadvantaging of different groups or individuals. In addition, different disability categories and their respective severity, as well as different educational backgrounds (special education and mainstream), would yield varied experiences, obstacles and opportunities in relation to the phenomena under discussion. Further variables would be the experiences of DU staff members with disabilities as opposed to those without. Thus, disagreements of the nature described by Kitzinger (1994) were highly likely. While these disagreements could yield illuminating complexity, as Wilkinson (2004) has noted, they

could, by virtue of some voices being louder than others, result in bias towards one category of disability over another or towards individuals or collective groups. The researcher could also inadvertently infringe on some ethical obligations when trying to moderate discussions. Given all of this, the in-depth interview was found most suitable because it could enable the collection of data without these problems, which could have negatively affected the study.

Design of the interview guide

The in-depth interviews were conducted through open-ended questions. The principles of designing the questions were taken from Schutt (2011). Double-barrelled, long and ambiguous questions, for example, were avoided. The questions for the interview were developed from the survey, and the closed questions of the questionnaire were opened up in the interview. The questions of the survey corresponded with the interview ones, so that both forms of data collection could corroborate. The in-depth interview questions were designed to seek depth, employing how and why questions. For example, the generally-held opinion is that upon entry into the specific professional degrees, there are both obstacles and opportunities for students with disabilities. The interview questions sought depth with regard to this by asking how these were confronted and why. I allowed participants to explain in-depth, and give finer details (See appendices C1, C2). The Table 5 shows a sample of how the interview questions for DU staff members were designed from the survey. Those of students with disabilities had the same form.

Table 6: Design of Open-Ended Interview Questions from the Survey

1. Question from the survey

Please indicate the extent to which you agree or disagree with this statement: **Entry requirements allow students with disabilities' entry into the listed professional degrees at the institution.**

ENTRY INTO THE PROGRAMMES	Strongly agree	Agree	Disagree	Strongly disagree
Entry requirements for Law				
Entry requirements for Education				
Entry requirement for Medicine				
1. Question for the interview: a. How do students with disabilities confront obstacles in entry into Law, Education, and Medicine at the Institution? b. Why do you think they confront those obstacles?				

The interview process

While in the survey, all nine DU staff members participated; in the interview only seven took part. The interviews were conducted with all willing participants (N=19), of which 12 were students with disabilities and seven DU staff members, who voluntarily participated. The interviews were conducted over a period of three months from July to September 2014. They lasted between an hour to two hours each. One interview with a Medical student with disabilities went for three hours. The student was sharing valuable data in relation to the programme, and the interview was therefore not cut short. It involved open-ended discussions. All participants were interviewed in English, and interpreters were not used. Mackenzie, McDowell & Pittaway (2007) caution against using interpreters, arguing that their presence could bring:

...a relationship of a complex mix of power based on ethnicity, class and race, incurring the risk of transgressing political, social or economic fault lines of which the researcher may not be aware. (p. 304)

The participants could therefore be negatively affected by the presence of interpreters, and this could affect data collection. Thus, not having interpreters in the interview process worked in the researcher's favour.

Digital recording

All interviews were recorded using a digital recorder. Breakwell, Hammond and Fife-Shaw (1995) observe that the use of mechanical methods reduces researcher bias. My own bias involving an emotional attachment to those with disabilities, resulting from past experiences described in Section 4.7.3, could have a negative bearing on the data. However, when the interviews are recorded, they can be transcribed verbatim. Recording the interviews was therefore done to reduce insider effects in the particular study.

4.11 METHOD OF DATA ANALYSIS

The analysis of data was underpinned by its focus and purpose. Cohen, Manion and Morrison (2007, p. 461) argue that “fitness for purpose” is a major consideration when establishing the approach whereby one will analyse data. The approach comprised two phases: the quantitative data was first analysed and the qualitative followed, after all the interviews have been conducted.

4.11.1 Quantitative analysis

Descriptive statistics was used for analysing quantitative data. Mouly (1978) explains that this form of analysis “serves to synthesize data in order to describe a given phenomenon” (p. 108). It therefore helps to describe the data meaningfully. MacMillan (2012) argues that it “transforms a set of numbers into indices that summarises characteristics of a sample” (p. 121). Therefore, this kind of statistical analysis helps to better understand the meanings of numbers which represent verbal statements. In the present study, the interest was in the

indices that summarised the opinions of the sample. This kind of descriptive statistics was only used to lay a foundation for the qualitative aspect that was ultimately given priority.

In the actual process of analysis, the computer-assisted data analysis software called SPSS statistical package was used. It is software that aids the organisation, manipulation and analysis of quantitative data. The programme was chosen because it is user friendly, and helps the researcher to avoid making errors in calculations. There was no missing data in the responses, as all questionnaires were fully completed. Consistency in the data was checked and in two instances, students had provided two responses for a single question. They were phoned because they could be reached by telephone, and their responses were clarified. This is how the data was 'cleaned', then coded and assigned labels. Assigning labels is a process in which words are numbered and coded so they are picked up as numbers by the software. For example, 'female' could be labelled as 1 and 'male' as 2. When the statistical analysis is done, the numbers will be picked to represent specific gender.

There was a need to abide by some statistical conventions in the analysis, so that the quantitative results could be much more significant. Jamieson (2004) states that using the wrong statistical technique increases the chances of coming to wrong conclusions about the data. To mitigate this, data was entered straight onto the computer in which the software had been installed and the results in frequencies and percentages were produced mechanically by SPSS and I printed them for analysis.

Broad opinions as findings for the survey

The quantitative data was analysed at three levels. At the first level, distributions for the DU staff members and students with disabilities were presented in frequency and percentage tables, which according to Mouly (1978), is a useful way to present data. The sub-research questions of the study were used to group together related data on the specific tables, in order

to generate meaning. The approach was informed by that of Macmillan (2012), who advises researchers to “look at the more basic descriptive data to derive meaning from the results” (p. 268). As the sub-research questions relate to entry into the specific professional degrees, professional learning at the institution, and the recommendations for change and improvement, all related to these were collated and grouped together. The second level of analysis involved analysing for a trend of frequencies in terms of the participants’ responses to see where higher or lower percentages clustered. When higher percentages clustered around agree/disagree responses, this meant there were both opportunities and obstacles to the specific phenomena. When higher percentages clustered on the extremes; that suggested the extent to which those opportunities and obstacles existed in relation to the specific phenomena. The extremes suggested nuances which needed to be further explored in-depth. Thus, whether higher or lower frequencies and percentages clustered in the extremes (strongly agree/strongly disagree), this could not be overlooked because it suggested there was a lot of nuance to be understood. The analyses of the responses of the participants in frequencies and percentages for each specific theme, namely entry, professional learning, and recommendations, are provided in detail in the analyses in Chapters Five, Six and Seven. Three broad opinions were drawn from the specific analyses. And the sample of quantitative results was compiled and appendix (See appendix, D1).

The unstructured question on the questionnaire, which was deliberately left open to any comment that the participants found relevant, was also not overlooked. Seven participants out of 21 commented on specific issues and 14 left this section blank. One comment was on negative attitudes in the field, three were on the inaccessibility of the built environment at the Institution, two were on schooling limiting the entry of students with disabilities into specific professional degrees at the Institution, and one commented on students with disabilities not

completing their programmes. The specific comments were subsumed under related questions for the interviews to be further explored.

Statistical significance of the quantitative results

It was not necessary to find a measure of central tendency or testing significance, because the sample (N=21) was very small for such complex statistical analysis processes. The results of this attempt would be statistically insignificant. Thus, only broad opinions about the phenomena were drawn on, to be used as baseline for the qualitative process. Sweetman, Badiie and Creswell (2010) influenced my approach here, and they contend that such integration connects the results from the preliminary analysis to the data collection of the follow-up procedure.

4.11.2 Qualitative analysis

The qualitative data analysis was carried out in two phases. The first aimed at deciphering themes relating to obstacles and opportunities confronted by students upon entry into the three professional degrees, and in preparation for the specific professions. The second aimed to allow the voices of the participants to be heard (Mertens, 2010). Thus, the analysis looked at the recommendations the participants provided for change and improvement.

4.11.3 Thematic analysis

The thematic approach is one of the methods that is used to analyse qualitative data. It involves identifying themes in the data for further analysis (Leedy, 1997). Importantly, the approach allows themes to emerge organically from data. Among other scholars, Maxwell (1996) understands themes to involve the patterns, ideas, concepts, behaviours, interactions, incidents, terminology or phrases that are further organised into coherent categories to

summarise data and give it meaning. Creswell (2008) describes themes as similar codes aggregated together to form a major idea in the database.

The merit of thematic data analysis

Thematic data analysis is not an overly-complex method. Its simplicity, according to Wilkinson (2000), enables researchers to not be unnecessarily distracted by particular language use or the fine-grained functionality of talk as in content or discourse analysis. In thematic analysis, the language used by the participants is not as important as it is in other data analysis methods. Braun and Clarke (2006) conclude that this data analysis method can be successfully used by novice researchers.

The thematic data analysis is not informed by any philosophic assumptions. Braun and Clarke (2006) argue that it is flexible, and not wedded to any of the pre-existing paradigms. For this reason, it can be used across a range of varied studies. It is flexible enough to be premised on a paradigm of the researcher's choice. This enables the researcher to select the values on which he or she can premise the method, to guide the analysis (Braun & Clarke, 2006). The simplicity of this form of analysis makes it is easy to use by inexperienced researchers. I am still learning, and I therefore found this approach empowering.

The method of analysis has clear and simple steps that can easily be followed for first-time users. Braun and Clarke (2006) provide six steps that researchers can follow when applying the analysis to their data. These proceed logically, starting with looking for patterns of meaning in the data, and work up to the development of abstract concepts such as major themes. With clearly laid out steps which can be followed throughout, the method is a guide in itself in the process of data analysis.

The limitation of the thematic analysis

Thematic data analysis has been questioned as a method, as all others have been. Its critics, like Ryan and Bernard (2000), contend that there is no clear connection between what it is and how researchers apply its specific form of analysis to the data. Other methods take pains to foreground this connection, for example grounded theory analysis, and discourse or content analysis. They further argue that it can be subsumed within other major methods as grounded theories, and not as a method in its own right (Ryan & Bernard, 2000).

The fact that the method lacks a specific philosophic foundation is considered to be a limitation by Attride-Stirling (2001), who has argued that there could be resultant misunderstandings between researchers and readers in terms of evaluation of the study. Furthermore, researchers who employ this method could have limited interpretive power beyond mere description as they could lack a foundational base on which to lay their analytical claims (Attride-Stirling, 2001). Braun and Clarke (2006) provide a counterpoint to this, and state that without any assumptions, “anything goes” (p. 42). This means that there is not a legitimate basis to say the interpretation is right or wrong.

Despite the limitations here identified, the present study uses the method in its analysis of qualitative data. Braun and Clarke’s (2006) opinion is that it can be used alone as a method and it is sufficiently detailed and rich. In terms of a philosophic orientation in order to guide the analysis, it is informed by social constructivism because the study seeks to privilege the voice of the participants. In the actual analysis, the six steps as laid out by Braun and Clarke (2006) will be used until abstract themes emerge from data.

Problematizing other methods of qualitative data analysis

There are other methods of analysing qualitative data that also search for themes and patterns in the data. Wilkinson (2004) identifies and explains ethnographic, content analysis and

conversation analysis, among others, as methods of qualitative data analysis. Braun and Clarke (2006) identify grounded theory, discourse and narrative analysis. Content analysis could have been considered because it also focuses on recurrent instances. Wilkinson (2004) informs us that it involves the “inspection of the data for recurrent instances of some kind” (p. 184), and conducts counts of these. The researcher also makes claims about language use and fine grains of talk (Braun & Clarke, 2006). Thus, data is inspected for recurrent patterns, as it is in the thematic analysis; however this approach is different because it is the researcher who pre-determines the themes (Wilkinson, 2004). This method of analysis was therefore considered unsuitable for my purposes, because in the present study, it was important that recurrent themes emerge from data and not to be pre-determined. Pre-determining themes would be tantamount to speaking for the participants.

4.12 MANUAL AND COMPUTER-ASSISTED DATA ANALYSIS

There are computer-assisted data analysis software packages for analysing qualitative data, which include NVivo, ATLAS:ti and MAXQDA. As Basit (2003) observes, analysing qualitative data is tedious and frustrating work, and for this reason, a computer-assisted software package can be helpful in terms of organising data more efficiently. It can also help to ensure the accuracy and transparency of the process of data analysis, and ensure rigour and trustworthy analysis (Mason, 1996). The NVivo, specifically, could have been useful for analysing mixed method data because it has the capacity to analyse both qualitative and quantitative data (Hesser-Biber, 2011), and can even analyse data from interview transcripts (Welsh, 2002). However, despite those advantages, Jones (2007) cautions that while the packages can numerate the facts; they do not interpret them, and may distract the researchers from their purpose. Coffey and Atkinson (1996) also advise that these packages should only be seen as tools to facilitate efficient and effective analysis, and that they cannot replace what the researcher has to do. In addition, Bourdon (2002) has cautioned that this software

sometimes distances the researcher from their data, and actually provides a buffer between the two. In light of these concerns, computer-assisted data analysis was not used. Welsh (2002) argues that for themes to emerge in fluid and creative ways, there needs to be manual rigour to manage them. This informed my decision to opt for manual analysis. It was understood that it is the responsibility of the researchers to do the analytic work, and this enables them to have a deeper understanding of data. Besides, manual analysis allows for coding of data and deciding which codes link with the broader objectives, aims and the research questions. It also provides an opportunity for the meaningful (and not automated) labelling and categorisation of data. Repeated manual scouring of data is necessary in order to interrogate it thoroughly, and to understand it broadly. A significant factor in the present study was that the qualitative data was obtained from a relatively small sample. There were few participants and only 19 interview transcripts. It was therefore possible to work through those over and over again.

4.13 DATA TRANSCRIPTION, CODING AND INTERPRETATION

Data was transcribed and coded. To illuminate what this involves Byrne (2001) uses the metaphor for sorting mixed buttons of different sizes, types, shapes, of different holes and colours from a bottle, depending on what the buttons are to be used for. In this study, the coding and categorisation of data was also informed by the specific way in which I intended to use the data. The sub-research questions guided the process of inferring meaning from the data. The first level of analysis was inferential, following the approach of Ramazanoglu and Holland (2002), who argue that data cannot speak for itself, it only constitutes ideas and evidence. Thus, as I read the data, specific obstacles and opportunities emerged. For example, the participants' words: "The lifts here break a lot", was coded as an obstacle, and was underlined in red in the text and labelled outside the margins of the transcript. The words: "The DU gave me this wheelchair, it helps me I don't get to class late" was underlined in

blue and coded as an instance of an ‘opportunity’. At the end of the process, all inferential codes were underlined in red and blue in all transcripts. Instances of these codes were grouped together on separate sheets of paper. Creswell (2008) advises that when similar codes are aggregated, they form a major idea in the database. The transcripts were not cut, but put aside to continue referring to them for context. Burnard (1991) argues that every instance of verbatim speech in an interview has a context in which it is said, and this is not to be lost (See sample of coded transcript, appendix D2).

The second level was the search for recurring patterns from data, and a process of legitimisation informed this. Miles (1979) states that if the bank of qualitative data are not analysed through well-formulated methods, there are few guidelines that would protect the researcher against self-delusion, and the presentation of unreliable, invalid results and conclusions. Patterns of recurrence emerged as data was re-read. For example, the issue of lifts not working and taking too long to be repaired was mentioned 11 times by students with disabilities. I required ten or more instances of codes, as well as no less than ten participants out of the 19 mentioning the same thing, to develop a legitimate category. Numbers were used to mark recurring patterns, and instances of the same thing being mentioned were collated and grouped together. It was in those groups that the minor themes emerged.

The third level of analysis involved abstraction of minor themes to major or conceptual themes. Abstraction amounts to deducing what the specific minor themes mean in relation to the phenomena that are being studied (Braun & Clarke, 2006). Creswell (2008) contends that it is a categorisation process in which minor themes are subsumed into more abstract concepts. For example, the essence of provision of funding, transport, access arrangement, and assistive devices at the institution could all be abstracted into the major theme of individual accommodation. The same was done with the recommendations provided. To

confirm the appropriateness of the deductions being made in this respect, minor themes were sent in batches to an academic peer who is researching disability in a different university. I had attempted to infer the essence of minor themes and use this to establish major abstract or conceptual themes. The conceptual themes matched those reached by the other researcher.

The whole process of analysis was therefore layered by organising themes into layers: from basic to sophisticated (Creswell, 2008). The layering took the form of an interconnecting of levels from one to three. This structure was informed by the recommendations of Denzin and Lincoln (2013), who observe that when data is analysed in layers, segments of conversation may have “multiple lyrics that comment on the talk” (p. 536). This suggests that the multiple realities, or the social constructions of the participants, can be understood better in layered data. Thus, there is rigour in such an analysis as multiple comments on the segments of conversation can be made in different layers. The report of the analysis was then summarised and presented in tables (see Appendix D3).

4.14 INTEGRATION OF QUANTITATIVE AND QUALITATIVE RESULTS

The debate of the incompatibility of the two methods can be (somewhat) resolved by an observation of how well the results are integrated in the case of this study. The design of the mixed method and what the researcher intends to achieve inform how the methods are integrated. Sweetman, Badiie and Creswell (2010) state that in the concurrent design, both the quantitative and qualitative results are integrated simultaneously to provide an overall understanding of the research problem. In sequential designs, the results from one method are used to inform the manner of data collection by the other method, or the results of the one method are used to explain those of the other (Onwuegbuzie & Turner, 2007).

In the present study, the integration also considered the mixed method design that was adopted in the study and what needed to be achieved. As has been established, the

quantitative results laid a foundation for the qualitative stage of data collection. The quantitative results were obtained first, and then used to inform the design of the interview questions. As the qualitative method was prioritised, the results were theorised to draw the findings and conclusions, and the study was ultimately more qualitative than mixed. The integration was done this way because it was particularly useful to enrich the understanding of the phenomena (Barnes, 2012).

The manner in which integration has been carried out legitimises, and validates, the results of study. Morse & Niehaus (2009), who are critics of mixed method research, argue that ad hoc mixing of methods can be a serious threat to validity, and that this can be overcome at integration. Greene, Caracelli and Graham (1989) identify five specific criteria that determine legitimacy. These include addressing triangulation in terms of convergence and corroboration of the findings from the two methods, complementarity in which the strengths of each method complement another, development in which the findings of the one method inform the other, initiation, which has to do with contradictions that result in reframing of the research questions, and expansion, in which the scope of inquiry is expanded by using the two methods.

The present study met four out of five of the criteria of legitimacy posited by Greene et al. (1989). There was development when the quantitative results were used to inform the collection of qualitative data. The results amounted to corroboration of the quantitative and qualitative results. For example, the broad opinion extracted from the survey was that there were obstacles and opportunities for students with disabilities' entry into the Institution. Qualitatively, the DU members' perception was that there were opportunities of entry in terms of policy of non-discrimination. However, higher entry requirements, special schools and specific impairments were viewed by both DU members and students with disabilities as

obstacles to entry. Thus, the presence of both obstacles and opportunities, as drawn from the quantitative results, was confirmed by the qualitative results. The designs complemented each other and the scope was expanded in breadth and depth by use of both methods and the results from both designs. There were no paradoxes that presented a need to change the research questions because there was consistency in terms of results and findings from the two designs.

4.15 THEORISATION OF THE RESULTS

The qualitative results were theorised by Critical Disability Theory and Decolonial Theory, which both comprise the theoretical framework of the study. These two theories were discussed in detail in Chapter Three. The former emphasises empowerment, and takes the form of a bottom-up theory (Devlin & Potheir, 2006). One of its aims is that opportunity is provided for the voice of the oppressed to be heard. The latter theory is reactive to oppression, and presents radical alternatives to it (Rose, 2004). Thus, the theories complement each other in terms of illuminating the phenomena under study.

4.16 ETHICS

Ethics in transformative research is all about the “furtherance of human rights, the pursuit of social justice and the importance of cultural respect” (Mertens, et al., 2013, p. 484). This means there has to be respect for the rights of participants and their culture, because the ultimate aim of the study is social justice. The participants were therefore given an opportunity to voice their opinions of oppressive practices and structures, and their rights were respected. David and Daniel (1991) argue that the ethical stance taken by a study needs to be declared openly. Given this, the section that follows describes and justifies the universal ethical processes that were adhered to so as to conduct the study ethically.

Universal ethical obligation for human subjects

There was a need to comply with the universal ethical principles to respect the participants' freedom and rights throughout their participation. The forms this took were informed consent, confidentiality, anonymity and voluntary participation and the right to withdraw.

Informed consent

Informed consent involves is underpinned by the researcher's openness and frankness about the study. Helsinki (2009) says that research should be based as much as possible on freely-given information on what potential participants need to understand before they consent to take part. He does state that, very occasionally, covert means can be used, especially where a study concerns data that might be difficult to get (Helsinki, 2009). When covert means are resorted to, there should be caution in reporting data so that there is no harm done to the participants. The present study did not require covert methods, and complied with specific ethical obligations as required. All who were invited to participate were informed extensively about the study in their invitation forms. The information they were provided with included how the study will be carried out, and what their part would entail. It was imperative not to overlook that the some of the participants were vulnerable persons because they have disabilities. I was therefore cautious and invited skilled professionals from Careers and Counselling Development Unit (CCDU) to intervene should the participants be negatively affected by the questions asked. This measure was also made known to the participants. Those who consented completed and signed the consent forms (Appendix A5). Consent needs to be written, because behaviour or oral consent could be misinterpreted as consent when it is not (Helsinki, 2009).

Voluntary participation and the right to withdraw

People must be free to decide whether to participate in a study or not, and should be made aware that they have a right to withdraw from participating (Gostin, 1991). All participants were therefore informed that participation in the study was voluntary. They were told that they could withdraw at any time. This information was disseminated through the invitation forms (See the invitation letters, appendices, A2, A3 and A4).

Confidentiality

Confidentiality involves ensuring security in terms of the information the participants will provide. The invitation forms stipulated that transcripts and audio-tapes will be locked away, and destroyed after 3-5 years. Also, potential participants were assured that in the process of writing up the study, and in all subsequent publications, individual privacy would be maintained. Thus, participants were made aware that data was and will only be used for scholarly purposes during the study, and possibly at some later stage, but their privacy will be protected.

Permission for to digitally record interviews was also sought from all participants. Babbie and Mouton (2001, p. 523) warn that “subjects can be harmed by the analysis and reporting of data”. Thus, permission for audio-recording has to be sought and granted. What this in turn enables is the accurate transcription of interviews, and results that are true to what participants share in these contexts.

Anonymity

Anonymity involves keeping the personal information of the participants confidential and secure (Helsinki, 2009). The participants were made aware that even though their voices will need to be heard by policy makers, no identifying information and real names will be used. Guaranteeing total anonymity is difficult, especially when dealing with participants with

identifiable positions in an institution. In attempting to guard against that, the researcher was cautious not to identify the specific institution.

Reciprocity and transparency

Reciprocity involves giving back to the persons who have provided data. There should be a degree of “reciprocity in the researcher-participant relation” (Mertens, et al., 2013, p. 484). In other words, participants need to benefit from their participation (Mertens, 2015). Sieber (1998) suggests material benefits such as money and gifts. In the present study however, participants were that there would not be material benefit in exchange for their participation. A more modest form of reciprocity was used, in which participants were made privy to all details of the study. They were requested to view their contributions after the interviews had been transcribed to confirm what they had stated. During transcription, grammatical mistakes were corrected where necessary during data analysis. However, the sense of what was said was not changed because that could compromise the accounts and the voice of the individuals. It was thought that grammatically-correct language would support an accurate representation to policy makers when the time comes for them to review the results of the study. Transcriptions were also sent to the participants via email so they could view their contributions and make changes and amendments they deemed necessary. They were made to understand that the alterations in language were for clarity. This transparency enabled a fairly well-balanced power relationship. To clarify, only four participants responded and approved the work, and there were no amendments made. The findings would be reported to CCRRI, who would further make representation of the participants’ voice to what policy makers are ultimately made privy to.

4.17 LEGITIMATION

Legitimation is another term for validity that is used in the context of the mixed method approach. It allows one to use “bilingual nomenclature” acceptable to both quantitative and qualitative research (Teddlie & Tashakkori, 2003, p.48). This implies it describes the trustworthiness of findings for both the methods combined. Onwuegbuzie and Johnson (2006) argue that it used to refer to the extent to which quality inference is determined. That means that specific criteria need to be met for findings to qualify as legitimate. Nine ways in which strong legitimation could be determined are identified by Teddlie and Tashakkori (2003). This study addresses five of them, namely, paradigmatic mixing, sample integration, weakness minimisation, typology conversion legitimation and inside-out legitimation. An audit trail with specific reference to keeping notes on analysis was also done to ensure the trustworthiness of the study.

Paradigmatic mixing

Paradigmatic mixing is the “extent to which the researchers’ epistemological, ontologically and methodological beliefs that underlie the quantitative and qualitative approaches and are successfully combined and blended into a usable package” (Onwuegbuzie & Johnson, 2006, p. 57). There is a threat to the specific legitimation measure when paradigmatic assumptions that undergird the study are not made explicit, and the researcher does not conduct the study according to stated assumptions (Ihantola & Kihn, 2011). Also when paradigmatic assumptions are not compatible, this could pose a threat to the credibility of the research. The present study is mainly premised on the transformative paradigm. It is the paradigm that is most suitable in a study that uses the mixed method to collect data. Mertens (2007) argues that “the underlying assumptions of the transformative paradigm reveal the strength of combining the qualitative and quantitative methods” (p.212). Bearing the stance of Mertens (2007) in mind, the paradigm thus

informs the results from both the methods combined and consequently legitimises the findings.

Competing dualism was avoided as the assumptions were chosen specifically because of their complementarity. The multiple realities as constructed by the participants and researcher subjectivity were acknowledged because there was co-construction of knowledge, hence value-bound (Ihantola & Kihn, 2011). Thus, the study was informed by the specific assumptions and the participants' voice was privileged in all phases.

Sample integration legitimisation

Sample integration refers to the extent to which the relationship between the quantitative and qualitative sample yields quality meta-inferences (Onwuegbuzie & Johnson, 2006). That means there should be a corroboration of data in the samples that yield quantitative and qualitative results respectively. This can be threatened when the individuals who participate in the quantitative part of the study are different from those who take part in the qualitative one. In this study, the same sample participated in the survey to provide quantitative data and also in the interviews to give the qualitative data. In addition, the sample was small, there was no statistical generalisability which could compromise internal validity. The voices of final-year and post-graduate students with disabilities, as well as those of Disability Unit staff were integrated in both methods. This ensured that participants' voices were adequately represented. Barnes (2012) views this as crucial within the transformative paradigm.

Weakness minimisation

Weakness minimisation refers to the extent to which the weakness of one approach is compensated for by the strength of the other (Onwuegbuzie & Johnson, 2006). To counteract the weakness of the qualitative method, in which a large group of participants could not be reached at one time to get their broad views, a survey was administered to all the participants

who were willing to participate at one time. To minimise the weakness of the quantitative method in terms of being non-interactive, with the exception of the two DU members who did not participate in the interview, all participants who undertook the survey then participated in an in-depth interview and that allowed for deeper interaction.

Use of mixed methods

The use of the mixed method approach minimised the weakness of each method by the strength of the other. The two methods provide a “between-methods triangulation” (Denzin, 1978, p. 302). Denzin (1978) views this as a way of legitimisation, and states the following:

Utilising mixed method, the bias inherent in any particular data source...and particular method will be cancelled when used in other data sources [...] and methods and the result will converge upon the truth about some social phenomena. (p.14)

Thus, the use of mixed method, together in a single study did not only result in strong legitimisation, but also counteracted the biases inherent in any particular method, as well as the bias of the researcher.

Typology conversion legitimisation

Typology conversion legitimisation refers to the “extent to which quantitising and qualitisising yields quality inference” (Onwuegbuzie & Johnson, 2006, p. 57). There is a threat to a study’s validity when the quantifying in both the quantitative and qualitative design does not produce trustworthy findings. An example is when a researcher refers to quantities as ‘few’, ‘many’ or ‘some’ without explaining precisely what these refer to. In the context of this study, numbers were used to quantify both quantitative and qualitative results. There was minimal use of vague terms like ‘few’ and ‘many’ where data couldn’t be quantified in number. Also, to avoid misleading results, percentages were avoided to quantify the results from a small sample as in the present study.

Inside-Outside Legitimation

The inside-outside legitimation is a way of checking the extent to which the researcher accurately presents and utilises the insider's views and his or her own (Onwuegbuzie & Johnson, 2006). In other words, it is a check of the extent to which the results are well interpreted. Two different theories were used to illuminate the results, and evidence was provided for the findings. As the participants' voice was privileged in the study, the researchers' interpretations were minimal, so as to avoid distortion of the insider view. Curral and Towler (2003) observe that this kind of legitimation has an emic and etic structure. This involves how accurately data is interpreted by both the insider and the objective outsider, to check the researcher's transcription, analysis, interpretation and conclusion (Onwuegbuzie & Johnson, 2006). For the inside (emic), all participants who had participated were requested to view both the survey results and the transcripts of interviews. This was to give them an opportunity to legitimise their responses in the survey and interviews, and check whether or not transcription was accurate. Transcriptions were confirmed as accurate, though a few changes and additions were made. Final work was also given to them for verification. The work was also sent to academic peers in the field of disability. Five suggestions made by peers for improvement on the whole work were incorporated into the study.

Audit trail

An audit trail involves a transparent description of the research path taken in a study from its development to its findings, and keeping notes on specific aspects, like the research design, methods of collecting data, and data analysis. This is important so that it can later be tracked how the study was carried, to ensure trustworthiness. There are specific categories that can be used to conduct an audit. They include reporting on raw data, collection of data, processing notes, reporting on materials and instruments used, as well as including the schedules and

observation formats (Lincoln & Guba, 1985). In the context of this study, notes on the quantitative and qualitative data analysis have been kept throughout the process.

4.18 CHAPTER SUMMARY

The chapter presents and describes the methodology, and a detailed description of how the study was carried out to achieve its aim, objectives and answer its research questions. The study used the transformative paradigm, social constructivist approaches and was pragmativist. This combination was selected for complementarity, because the paradigms do not have competing dualisms. Importantly, each paradigm privileges the voice of the oppressed group within a specific institution, so that it can be heard. Before the study commenced, preliminary and explorative groundwork was carried out to make decisions together with participants. A previously-advantaged institution of higher learning was selected for its peculiarity as a case study. Students with disabilities who have lived experiences of oppressive structures and practices at the Institution were sampled, as well as DU staff members who are responsible for their support. The tools used to collect data were a quantitative survey and qualitative interviews, and a thematic approach was used to analyse the data. Forms of validation specific to mixed method research were used to legitimise the findings. As informed by the principles of transformative research, I worked together with the participants at different stages of the study and I coordinated the study throughout. The next chapter presents the analyses and discussion of obstacles and opportunities when entering three specific professional degrees at the Institution. Importantly, it will yield empirical evidence that contributes to the field.

CHAPTER FIVE: ENTRY INTO THE PROFESSIONAL DEGREES: OBSTACLES AND OPPORTUNITIES

5 INTRODUCTION

This chapter presents and discusses the obstacles and opportunities confronted by students with disabilities upon entry into Medicine, Law and Education degrees at an institution of higher learning in South Africa. First, the quantitative data analysis and the findings from the survey are presented, and this is followed by the qualitative data analysis. For the latter, the descriptive accounts of the participants are first presented and the results evaluated and theorised, giving the analyses an emic and etic structure. Bazeley (2009) states that researchers must not only rely on presenting key themes and supporting them with quotes, but should move to a deeper level of analysis and evidence. The names of the participants are not used to protect their identities.

5.1 QUANTITATIVE RESULTS AND FINDINGS

There are 19 statements on the survey questionnaire which have been analysed using SPSS software, and the results are provided in percentages and frequencies, which can be viewed in Appendix D1. Two statements that relate to entry requirements and policy are drawn from the questionnaires, collated, and the responses related to these used to analyse the perception of both the DU members and students with disabilities on entry into the three professional degrees at the Institution. The responses from the nine DU staff members and 12 students with disabilities are analysed separately but brought together to get a broad opinion from both. Though the responses are also in the form of percentages, that representation is avoided from Ihantola and Kihn's (2011) cautioning that it misleads when describing small samples.

If there is need to see the percentages they could be viewed in Appendix D1. What follows are the respective statements and the participants' responses in frequencies.

5.1.1 Perceptions on entry into the three professional degrees

Entry requirements at the Institution allow entry into Law, Medicine and Education

Seven DU members strongly agreed and two disagreed to this statement for all three degrees. Both students of Medicine strongly disagreed. Two students in Law disagreed, and the other two strongly disagreed. Four students in Education agreed and two disagreed. This distribution suggests that DU staff members' perception is that for the most part, the Institution's entry requirements allow entry into the three programmes. The responses of the Medicine and Law students suggest that they think entry to the respective programmes is limited by the requirements, and students in Education have varied opinions with regard to this.

Policy enables students with disabilities' entry into the three programmes

Eight DU members strongly agree, and one agrees with this statement. Both students in Medicine strongly agree. Two Law students agree, one disagrees and another strongly disagrees. Two students in Education strongly agree and four disagree. The distribution suggests that the perception of DU members and the two students in Medicine is that policy enables entry into the Institution. Law and Education students have varied opinions.

The broad opinion drawn from the responses is that there are both obstacles and opportunities at entry, which require further exploration. Because there are varying levels of agreement and disagreement to the two statements, it is clear that participants have mixed opinions. There are also both strongly positive and strongly negative opinions, signified when participants

strongly agreed or disagreed to the statements. This suggests there are nuances that need further understanding.

5.2 QUALITATIVE RESULTS

Tensions with regard to equality and inequality, disability and impairments and a history and geography of exclusion emerged from the interviews. These will be theorised and analysed. The thesis in this chapter is that students with disabilities have an equal opportunity of access at entry as other students, because of the Institution's policy of non-discrimination, and the fact that entry requirements are the same, and are not affected by disability. However, there are inequitable practices and structures that are confronted by students with disabilities as obstacles, and these limit their entry into the three programmes at the Institution.

5.3 THE PARTICIPANTS' ACCOUNTS AT ENTRY

The accounts presented here are from 12 students with disabilities and seven DU staff members. They are based on the participants' personal experiences of entering the three professional degrees at the Institution. The participants use terms that are viewed as exclusionary in the context of inclusion. While I am aware of how problematic these terms are, I used the language employed by the participants for the purposes of representing their exact statements, and not altering their intended meaning.

5.3.1 Non discrimination at entry

The DU staff members' perception is that students with disabilities are not discriminated against with respect to their access the specific professional degrees at the institution. All seven of them said that policy does not allow discrimination on the grounds of disability. They stated that those with disabilities have the same opportunity of entry into the three professional degrees as that of any other student. One of them stated:

Since I have been here for sixteen years to be precise, I have never had an experience of a student who is discriminated against because he has a disability.

The words speak to the issue of non-discrimination and inclusion policies in South African higher learning. The country has very comprehensive policies of inclusion which could enhance the opportunities of access of students with disabilities. However, as observed by scholars like Lyner-Cleophas, Swart, Chataika and Bell (2014), the “implementation of the inclusion policies is slow” (p. 2). Since all the seven DU staff members view the policy as having a positive impact on access at entry, the Institution’s policies with regard to disability appear to be implemented to the extent that there is equal opportunity of entry for students with disabilities.

The DU members’ perception is that academic merit enhances the opportunities for access for all students. All of the seven DU staff members concurred that the entry level requirements are the same for all students. As a result, students with disabilities who have the required entry points and requisite subjects have the same opportunity of entry as all other students.

One of the DU staff members said:

Everybody has to meet entry requirements as the rule of the university. If you start to allow students based on their disability, without the necessary entry requirements, the trouble is going to be bigger for those students to cope. So we are very careful never to mix up disability with intellectual ability

Another one stated:

If you see a disabled student studying Law, Medicine or Education, it’s because he had met the requirements in terms of points and subjects needed in that particular degree. You only enter when you qualify. That’s one thing that this institution does not bend in.

The statements seem to suggest that though there is no discrimination on the basis of disability, entry into the three programmes is based on meeting the entry requirements. This raises the broad issue of inclusion of formerly-disadvantaged social groups in formerly-

advantaged institutions of higher learning in South Africa. One of several transformational agendas of the democratic government is to redress the inequalities of the past (DoE, 1997; Badat, 2010). One way in which they might do this is by providing access to higher learning to those who were previously disadvantaged. However, the statements of the DU members suggest that though there is such an agenda, the Institution does not compromise its standards to provide access to those who do not qualify on the basis of their academic merit to enter the specific professional degrees. Howell (2006), quoting Wolfendale (1996) argues that eligibility for higher learning is not for all because there are clearly-defined processes that screen those who qualify from those who do not. It could be argued therefore that though the DU staff's view is that there is equal opportunity of access to all students (with and without disabilities) at the Institution, a greater opportunity for entry is available to those students who excel academically.

Students with disabilities' perception is that academic merit is what enables entry into the three programmes at the institution. All 12 students with disabilities across the three programmes agreed with DU members that academic merit is the primary criterion for access. They stated that all students have to meet the entry requirements in order to enter. They shared the view of the DU staff members that this policy affords them an equal opportunity of entry as students without disabilities. One of them said:

I did not experience any problems myself to enter into Education because I had the entry requirements they needed. I did not struggle to get in. I had all the subjects and the points and so it was easy for me to enter.

Another one also mentioned: "I was not treated like a disabled student. I met the academic requirements so that I could get into Law". The statements seem to suggest that these students' perception is that they entered because they qualified academically, and not because they have disabilities. This raises the broad issue that disability is not inability, as it was

conceptualised in the past. In the South African context, those with disabilities were segregated and provided special education in special schools. They were thought of as incapable and unlike their able-bodied counterparts in the mainstream (Howell, 2006). The students' statements suggest that students with disabilities are as academically able as other students; they also meet the entry level requirements, which make access possible without difficulties. All seven DU staff members stated that policy enables entry to all because it does not allow for discrimination on grounds of disability. There is an institutional disability policy with specific clauses on non-discrimination of those with disabilities, and the members kept referring to it.

Students with disabilities perceive that entry into the specific programmes in terms of academic merit for all students is fair. In this respect, all 12 students with disabilities consider themselves to have been treated in the same way as others in terms of entry level requirements. One of the students stated:

It would be unfair for me not to enter Medicine because I don't hear. I passed very well Maths and Science and I have high points in Matric. For me there were no special considerations to come in and do Medicine.

According to this statement, students view themselves as equal to others, and believe that they should also enter based on merit. What this draws attention to is the issue of equality in higher learning in general. In Riddel et al. (2005) understanding, this involves treating everyone in the same way. The student's words seem to suggest that he or she views equality in terms of being treated the same way as other students. The data reveals that this is the way equality is understood by both students and DU staff members. All seven DU staff members stated that the authorities at the Institution do not bend in terms of entry requirements. They stated that all 12 students with disabilities who are studying the specific professional degrees have met the same requirements as all other students, and have not been admitted because

they have a disability. They also view non-consideration of disability to enter the specific programmes as fair.

The DU members' shared perception is that students with disabilities are not denied entry to their programme of choice on grounds of disability at the Institution. All seven members confirmed this belief. They further explained that all students, regardless of their impairment, are allowed to enter Law, Medicine or Education. They are only advised with regard to the difficulties they might confront to study a particular programme. They are informed about the demands of the programme, and this is put in context of the severity of the student's impairment. A DU member stated:

We don't deny individual choices. We all sit around the table, we all discuss, what is possible and what is not possible.

Another member also added:

There is one student at the Medical school that we went out of our way to accommodate him. We spoke to him. They [the stakeholders responsible for selecting students for the specific programmes] got in a blind person.

The statements of the DU members seem to suggest that they go out of their way to ensure that students with disabilities are assisted in entering a suitable programme. This reveals this important role of DU staff members in institutions of higher learning in South Africa. The Fotim Report (2011) stated that one of these roles is to advise on 'reasonable accommodation' with regard to students with disabilities' academic programmes. DU members view themselves as having a moral obligation to see to it that students with disabilities enter their desired professional degree programmes, and that during their learning they will not be hindered.

Advising students with disabilities on which programme to enter at the institution is said to have another purpose. Howell (2006) explains that this advice is given to protect the responsible stakeholders at institutions of higher learning from being seen as discriminative,

because the Constitution itself and non-discriminatory policies prohibit discrimination. At the level of programmes, responsible stakeholders can influence students' decision to enter or not but are careful to not openly deny the students entry (Howell, 2006). A more insidious form of exclusion takes place, which involves 'persuading' those students that they would not cope with the demands of the particular programme (Howell, 2006). When the students with disabilities have been persuaded, they then make an 'independent' decision not to enter the particular programme they initially chose. That then casts the institution as non-discriminative since the student has 'independently' made a 'reasonable' decision (Howell, 2006). It could be argued therefore that advising students with disabilities upon their entry into a specific programme could have a dual purpose: that of assisting the students and also protecting the institution. However, the DU members at the Institution would disagree with Howell as they stated that advice is given to help the students with disabilities to make the right choices.

Some students with disabilities view this advice in a negative light. Five out of the 12 of those students viewed this advice as tantamount to denying them entry into specific programmes of their choice at the Institution. A student with visual limitations in Medicine, who had first entered a comparable programme at a university in Cuba, stated that had he started at the Institution, he would not have entered into his programme of choice. The student stated:

Here in South Africa, I don't think I would have managed to study Medicine. These people, the occupational therapists who guide you which career to take if you have impairments would have advised me otherwise. I would have done a different career.

The statement seems to suggest that the student views the advice he has been offered in this setting as not helping students with disabilities to enter the programme of their choice. What the broad issue brings to mind is that of those without disabilities patronising and speaking

for those with disabilities (Hosking 2008). The student says he would have been advised to take a programme that is not of his choice had he first applied to this Institution. He seems not to view the nature of the profession as the one that should have made the programme exclude him, and he contests the advice that misdirects him from his choice.

5.3.2 Equalisation of opportunities at entry

Students with disabilities' perception is that the responsible stakeholders at the Institution do not equalise opportunities of access at entry. How the term equalisation of opportunity has been adopted and used in this study is explained in detail in Chapter Four under Section 4.5.1. In their accounts, the participants use the terms 'special arrangements' or 'considerations' to refer to those kinds of opportunities of access. However, I prefer to use the term 'equalisation of opportunity'

All 12 students across the three programmes concurred that there is no equalisation of opportunity of access for them to enter the three professional degrees at the Institution. Nine of these stated that without such equalisation, it is difficult for them to enter the specific programmes. They said that, unlike able-bodied students, they are already disadvantaged from the level schooling. A student in Education said:

I want them to make special consideration in entry requirements and admissions because you can't pretend you don't have a disability.

The Medical student also stated that:

I don't think disabled students from disadvantaged schools manage to enter into Medicine at this university. When they become too strict with Medicine, only students from elite schools will enter.

A Law student said:

For Law, if it is 35 points, they should say ok, 33 points for students with disabilities. It's all about empowerment because disabled students do not enter Law because of disability.

The statements suggest that students with disabilities feel that they are unequal to other students, and their opportunities are not equal at entry. Equality, as I have discussed previously, as a controversial issue. As it implies treating all people in the same way, (Riddel et al., 2005), it becomes a complex issue when an 'equal' approach to everyone gives rise to discrimination of people who are already disadvantaged. Equality can only be possible in a totally transformed and inclusive environment, where all people in their diversities can access what they need at the time that they need it, and are able to fully participate (Simons & Masschelein, 2005). The students with disabilities' statements imply that they think there could be better opportunities for their entry into the three specific programmes if they could be considered differently, and their limitations taken into account at the point of entry.

The DU members have different views from those of the students in terms of equalisation of opportunities at entry. All seven DU staff members stated, for example, that the institution has already equalised opportunity of access at entry for students with hearing impairments. The members explained that this has been done to cater for the language and communication limitations experienced by that particular category of students. They said that since two languages are a prerequisite to enter the three programmes, there is a provision made to give equal opportunity of access even to students with hearing impairments. The student's home language is prioritised, and a second language is compulsory. The DU members further explained that that equalisation of opportunity at entry is made with motivation from them. One of the members remarked:

The entry requirements require that they have two languages and English is compulsory but for the deaf without another language, we accommodate that student, we take that into account.

Thus, the statement of the DU reiterates the issue of specific arrangements to enable access of those with hearing impairments. It suggests that the responsible stakeholders at the Institution

consider students with hearing impairments as a group whose access into the specific professional degrees needs to be assisted. Although all 12 students stated that the responsible stakeholders at the Institution do not equalise opportunities at the point of entry, evidence from data shows that they do. Importantly, this is not the case for all students with disabilities, but for a specific category. Out of the 12 students with disabilities, the eight with other categories of disabilities might have not known about this equalisation of opportunity since it does not include them. The four with hearing impairments might also not have known about it, because none of them have total hearing loss, and therefore did not require the equalisation.

There is a contradiction in the views of the students. On one hand, they view themselves as capable of gaining entry to the Institution on merit like other students, but on the other, they view the equalisation of opportunity of access as a necessity at the point of entry. When this contradiction is considered in terms of Critical Disability Theory, it could be understood in the light of the tension of positive (Shakespeare & Watson, 2001) and negative response to difference (Vehmas & Shakespeare, 2014). This has already been given detailed attention in Chapter Three. In the context of the study, students with disabilities are confronted with a situation in which they understand that the issue of the same entry requirements limits them because they are already disadvantaged from the level of schooling. However, they also refuse to accept that they are limited, and say that they are also capable and can meet the same requirements as other students. Evidence of this apparently irreconcilable tension can be seen in the data. A negative response to disability is revealed when all 12 students first stated that consideration for entry in terms of academic merit is fair as it allows them to show their capabilities like all other students. They also stated that they do not have any difficulties at entry because they have the required entry level requirements, which is why they are studying the specific programmes. However, a positive response to disability is later

articulated when eight of those same students across all the three programmes say they are disadvantaged because the stakeholders at the Institution do not take their difference into consideration. The students suggest that the equalising of opportunities should be made available to them so that they, and others like them, can also enter the specific programmes.

5.3.3 Schooling as an obstacle to entry

The participants' view is that schooling is an obstacle when attempting to gain entry to Medicine and Law at the institution. Both DU staff members and students have this perception. What follows are their accounts with regard to this.

Obstacles to entering Medicine

All seven DU staff members stated that special and disadvantaged schools hinder entry into Medicine. They stated that the Matric subjects required to enter Medicine are Maths and Science. Students with and without disabilities from both these types of schools are disadvantaged because they tend not to have competent teachers to teach those challenging subjects. They added that those teaching in special schools have low expectations of students with disabilities, and believe that they cannot master these specific subjects. The members of DU staff further stated that some schools for the deaf specifically do not offer the subjects at all, resulting in students with hearing impairments being prevented from entering Medicine. One of the members said:

From my experience, students with disabilities from special schools are the ones who struggle very much to get into those professional degrees at this institution.

This statement brings to light that though disadvantaged schools also limit entry into Medicine, it is students with disabilities from the special schools specifically that are most

disadvantaged. The two students with disabilities in Medicine share the perception that these specific schools hinder entry into the programme. One of them stated:

Special schools and disadvantaged schools have no prospect of bringing disabled students who qualify to do Medicine at this University. So the barrier can be the school that you come from.

This student observes that students from the two types of schools might not enter Medicine at the Institution. What this reveals is an unwitting reproduction of a past understanding of disability: that those with disabilities would not enter higher learning in general.

Obstacles to entering Law

The four students of Law share the view that special schools also limited entry into Law. One student in Law stated: “If I had gone to a special school my points would have not sufficed for me to enter Law here”. Both the statements of the DU members and students with disabilities about schooling limiting entry into the two specific programmes alert us to the challenges of basic education in South Africa as the system that feeds into higher learning. To reiterate, Howell (2006) notes that, schooling in this country was previously segregated along disability lines, with abled-bodied learners educated in mainstream schools, and those with disabilities in special schools. Even though there is inclusive education, those schools are still disadvantaged in a variety of ways. Consequently, their students are disadvantaged, and are more likely to be denied entry into Medicine and Law specifically at the Institution.

There is a difference of opinion among the 12 students with disabilities in terms of special schools limiting their entry into the professional degrees, and into Medicine and Law specifically. Three of them stated that in their personal experience, some special schools have competent Maths and Science teachers. They themselves did these subjects, and mastered them sufficiently to gain entry to their programmes of choice at the Institution. The students

explain that these schools differ vastly from one to the other in terms of the subjects they offer to their students. One of these students stated:

I did every subject that was offered in the mainstream. And my school, the one that I matriculated from, it was strictly Science and Commercial subjects.

This student reminds us that we should not over-generalise that not all special schools limit students with disabilities' entry into the specific professional degrees at the Institution. What this draws our attention to more broadly is the issue of adjustments in the curriculum in specific schools. Referring specifically to schools for the Deaf, Peel (2005) explains that after apartheid, some of these schools transformed to offer the same subjects as mainstream schools, and others chose to limit their curricula to subjects they deemed appropriate for learners with hearing impairments to learn. The student's statement suggests that he has been to a school in which the same subjects offered to students in the mainstream are also chosen for students with disabilities.

5.3.4 High entry requirements

The DU members' general perception is that the entry requirements in terms of points and required subjects for professional degrees are higher than those of other programmes offered at the Institution. They acknowledge that this is a challenge for the access of students with disabilities. All seven DU staff members shared this view. One of them stated: "Professional degrees are much more advanced than other degree programmes. Only high academic oriented students with disabilities can enter those". Another stated:

Professional degrees are unlike BA general, they are not easy to enter in terms of requirements. That's where obstacles come up for students with disabilities.

The DU members' statement speaks to the broad issue of professional degrees in higher learning. They are unique from others programmes because of the high demands they place

on their potential graduates, both in terms of theory and practical application, and this poses obstacles for students with disabilities (Ndlovu & Walton, 2016). The DU member essentially states that students with disabilities find those programmes challenging, even at entry.

While the DU members view high entry level points and challenging prerequisite subjects to limit entry across all the professional degrees at the Institution, the students with disabilities have a different view. Six out of the 12 students with disabilities believe that this applies mostly to Medicine and Law. One of the students of Law said:

The obstacle is that Law points are high here and for those who went to special schools; they are disadvantaged because they do not usual have those points.

A medical student also stated:

I went to mainstream schools. For Medicine entry requirements are high, the requirements are real high at this university. Even for me, if it wasn't for the Cuban programme, I don't know, maybe I wouldn't have managed to enter.

Another medical student also stated:

I went to an ordinary school. Medicine is such a very competitive field; it requires one to be smart. Medicine requires Maths and Science and high points at Matric.

These statements illustrate that the students' perception is that there are professional programmes that are more competitive than others, with higher entry requirements. This harkens back to the previously discussed issue of classification of professional programmes and professions respectively. In terms of the latter, Haralambos and Holborn (1991) argue that there are high- and low-level professions. In the same vein, Young and Muller (2014) describe some as professions and others as semi-professions. What this means is that there are also high- and low-level professional degrees. Medicine and Law fall into the category of high-level professions (Haralambos & Holborn, 1991). As highlighted in Chapter Four, what this categorisation is informed by is the notion of what constitutes 'powerful knowledge'

(Young & Muller, 2013). The students with disabilities' statements seem to suggest that had they not gone to mainstream schools, they would not have entered the two specific programmes at the institution.

5.3.5 Specific impairments at entry

The DU staff members' perception is that all academically capable students, regardless of impairment, can enter into Law and Education, respectively, at the Institution. All seven DU staff members share this view. They stated that every student with whatever disability can enter into Law because the programme is theoretical. One of them stated:

We have never had a student with disability who has failed to enter Law at this institution because of impairment. We have had lawyers who are physically disabled, who are deaf, who are blind, there is no barrier!

Speaking about entry into Education, those DU staff members also stated that they have practical experiences of students with a variety of impairments entering the programme. One of them said:

We are presently having three students who are blind doing Education. There is a deaf student who graduated. He is actual a teacher. He did Education!

The statements of the DU speak to the broad issue of the specific professional degrees including or excluding persons with disabilities. Odendaal-Magwaza and Farman (1997) argue that some programmes have courses that involve field practice off-campus, use particular types of equipment, or require extensive interaction with the public. In the specific contexts of higher learning in South Africa, students with disabilities are denied access into these programmes because they are believed to be unable to meet their course demands due to their impairments (Odendaal-Magwaza & Farman, 1997). The statements of the DU members intimate that the design of the Law and Education programmes and their course demands do not hinder any students with whatever category of impairment to enter them.

Eight students out of the 12, who study either Law or Education, have a different view from the DU members. Four students in Law stated that from their lived experience in field practice, a student in the programme is required to be articulate clear in communication, so as to represent clients well. The four students out of six in Education also have specific reasons why they believe those with speech impairments, for example, cannot enter the programme. One of the students' comments was:

People who have language problems, who cannot communicate well cannot be selected into teaching. Teaching requires that you talk clearly to learners for them to understand what you are teaching. You write reports, you write letters to parents and you fill in forms. That will be difficult for someone who has problems in reading, writing or speaking.

Thus, the students view limitations in communication as hindering entry into the respective programmes. The students in Law also view physical impairment as a hindrance to entry of the specific programme. They stated that there is a corporate code of dress which might not be suitable to those with the kind of impairment. One of them stated:

Law is appearance is driven, you have to dress in a certain manner, you can't come with a leg brace over your jeans and you can't afford not to wear suits and stuff.

The students' statements show that in Law and Education degrees, students with specific impairments are excluded. Specific impairments are also viewed as hindering entry into Medicine by students with disabilities. Two students out of the 12, who study Medicine, stated that hearing impairments and visual impairments are a hindrance. A student with hearing impairments stated:

How am I supposed to use a stethoscope, how I am supposed to interview patients, it kept ringing in my mind, a doctor has to hear, hear, hear, I can't be a doctor.

A student with a low level of vision also described how his impairment is a limitation. He stated that: "I cannot operate on a patient with this vision. I cannot do procedures that really

need good sight”. The students are discussing their limitations from the perspective of lived experience. Again, this links to a previously discussed issue of separating disability and impairment. The critics of the traditional social model, like Corker and Shakespeare (2002), contend that not all of the oppression of persons with disabilities is a result of the environment. Separating disability from impairment deprives persons with disabilities of the legitimacy of their experiences of impairments and their effects. It could be argued however that emphasising the limitations of impairments is also problematic, as Oliver (1990) cautions, and as discussed in detail in Chapter Two.

Five DU staff members out of the seven agreed with the medical student on visual impairment limiting entry into Medicine. A DU member said:

I don't think a person with visual impairment can become a doctor. Being a doctor is about people's lives. If you cannot see, you can give somebody a wrong injection, you know!

Another stated:

When you can't see and you are talking about Medicine, you need to operate on people, there is going to be a problem.

It seems the participants' perception is that the students with specific impairments might not meet the demands of a particular programme. Both the DU staff members and students with disabilities seem not to realise however that it is nature of the specific professions that excludes students with certain impairments.

A contradiction arose in the responses of the students. Seven students who first stated that specific impairments hinder entry into specific programmes, later stated that this is not so. One of them said: “The best I can say is that disability cannot prevent anyone from doing Medicine or any programme of his choice”. Another one stated: “Given the right support and opportunity, disabled students can enter whatever programme, with whatever disability”.

When this contradiction is viewed through Critical Disability Theory, it can also be explained in terms of the tension between positive (Shakespeare & Watson, 2001) and negative responses to difference (Vehmas & Shakespeare, 2014), already discussed in Section 5.3.2. In the present study, a positive response to disability is revealed when students with disabilities acknowledge that they are limited by impairments, and a negative response manifests when they later state that they can enter any programme with whatever impairment. It could be argued that it is the nature of a profession that can hinder or promote entry.

An interesting phenomenon arose in interviews, in which students with disabilities commented on other students' impairments hindering entry into the specific programmes. Of the 12, eight students with one impairment imagined how other students with different ones are hindered when attempting to enter one of the professional degree programmes. For example, a student with physical disabilities in the programme of Law spoke about how a visual impairment might hinder entry into Medicine. One of them said:

I can imagine a blind doctor; I think it's much harder to enter Medicine when you are blind. I am just thinking of blindness within the context of the medical field.

A medical student with visual impairments also imagined:

If a person can't hear, the basics of medicine require that you get the information from the patient and you process that information so that you can be able to diagnose. So now if you can't hear, you can't do that.

A student with physical disabilities in Education also stated: "I don't understand, I have seen someone who is deaf here and I said wow, how is he going to teach?" The statements reveal that students with disabilities also speak on behalf of each other. That raises the broad issue of oppression of the 'other' by the 'other'. When the able-bodied speak on behalf of those with disabilities, it is understood as oppression and suppression of their voice (Hosking, 2008). Likewise, when those with disabilities do the same, it could also be contended that

they are oppressing each other. Vernon (1998) would concur with this, and states that there are “very few pure oppressors and pure victims” (p. 203), because the oppressed themselves can also unconsciously or consciously oppress one another. There is evidence of this in the data; across all the three professional degrees, genders, races and ages, eight students out of 12 also imagined the impairments of others limiting their entry.

5.3.6 Physical structures exclusive at entry

Students with disabilities view the inaccessible built environment at the Institution as a hindrance at the point of entry. Four out of the six students with disabilities in Education had experiences in which they were almost prevented from entering into the programme altogether because of physical structures at the specific university school. They stated that even if a student with disabilities has the required entry requirements, with an inaccessible physical environment, his or her movements can be restricted. Students with disabilities in Medicine and Law were silent about the physical structures limiting entry at their schools.

One statement was:

When I was offered space to come and study Education, I thought it was because I had specified that I am on wheelchair and since they responded, the environment was conducive. To my biggest surprise I found that the campus was almost inaccessible.

Another one also stated:

When I came to submit my letter of acceptance, I found that counters were up there, administrators could not see me and I was alone in that space.

The statements prove that the students had different expectations of the built environment they would encounter at the specific campus. That speaks to the broad issue of the physical inaccessibility in South African higher learning, which is a direct result of segregation of the

past. Historically, basic education schooling was segregated as already highlighted in Section 5.3.3, and disability was viewed as inability (Howell, 2006). It could be argued that the physical structures in higher learning were not originally constructed with disability in mind, because those with disabilities were not expected to get there.

5.4 OBSTACLES AND OPPORTUNITIES AT ENTRY

The presumption at the surface is that there is equal opportunity of access at the Institution. However, the present study reveals that there are inequitable practices and structures that limit students with disabilities' entry into the three professional degrees. The next section presents and discusses those practices and structures as they emerged from the qualitative data. They are theorised and discussed in the light of how obstacles are confronted and opportunities are presented to students with disabilities to enter specific professional degrees at the Institution and evidence provided.

5.4.1 Limited access by students with disabilities at entry

The present study reveals that students with disabilities have limited access to enter into the specific professions at the Institution. The limitation arises from the issue of the same entry requirements for all students. Students with disabilities are excluded because they are already disadvantaged from schooling and being required to meet the same entry criteria as other students exacerbate their disadvantage. Through the lens of Decolonial Theory, students with disabilities' limited access into the specific programmes could be understood in the light of lack of total institutional transformation to include all diverse students at entry.. Ndlovu-Gatsheni (2013) argues that efforts of transformation in higher learning are being made. The transformation is aimed at including all students. In the present study, efforts of enabling opportunity of access into specific professional degrees by all students have been made but still some students with disabilities are still excluded at entry. Data is reflecting as evidence

that the Institution is making effort to enable access of all diverse students into the specific programmes. However, students with disabilities still confront exclusion at entry level. The Institution has the same entry level requirements for all students so that diverse students have an equal opportunity of entry. The DU members state that the Institution does not have different entry requirements level requirements for students with disabilities because it could be tantamount to discrimination and undermining the students' intellectual capabilities. An effort of transformation to include all diverse students is also made through policy. All the seven Disability Unit staff also indicates that the Institution adheres to non-discrimination policy, in which no student is discriminated against when it comes to opportunity of entry into the respective programmes. However, the same entry requirements disadvantage students with disabilities because they may be already disadvantaged from schooling. The evidence that they are already disadvantaged by special schools specifically shows when students with disabilities find it difficult to enter into programmes of Medicine and Law, which have high entry level requirements. Six students who had entered the specific programmes stated that they had managed to enter because they attended mainstream schools. Students state that had they not gone to those schools, their points would not have sufficed for entry. Nine out of 12 students with disabilities across all the three programmes want equalisation of opportunities of access at the point of entry. It shows that there is a realisation that students with disabilities are excluded at entry by having the same entry requirements. Thus, when all the efforts of equal access are made for all diverse students at entry but students with disabilities still have limited access into the specific programmes, it suggests that the Institution has not yet fully transformed to include all diverse students at entry.

5.4.2 The tension between impairment and disability

The present study has revealed that there is a tension between impairment and disability in entering the three professional degrees. They are presented as tensions because of the way they are perceived by the participants. It is illustrated in the contradictory views about specific impairments hindering entry, and others not hindering entry. Critical Disability scholars would problematise separating disability and impairments (Crow, 1992). The debate of impairment and disability has been discussed in detail in Chapter Three. In the interviews, neither the DU staff members nor the students with disabilities had a clear opinion about whether the limitation at entry is imposed by impairments or the nature of the specific professions. Ten students with disabilities and five DU members' perception was that specific impairments hinder entry into specific programmes. Examples given were that visual impairment hinders entry into Medicine and communication difficulties block access to both Law and Education. More contradiction arises when seven students with disabilities across the three professional degrees initially state that specific impairments hinder entry, but later say impairment cannot hinder entry into any programme of choice. It reflects an uncertain understanding as to whether limitations to entry are posed by disability, a social context, impairments, or the interaction of individual and the nature of the oppression.

Critical Disability Theory can help us understand the students' uncertainty. It could be viewed in the light of a grappling between the individual or social models of disability. Critical Disability scholars, such as Tremain (2005), argue that disability and impairment should not be viewed as separate to adequately explain the experience of disability. In other words, both models are important if the oppression of persons with disabilities is to be adequately understood. It could be argued that in the context of the present study, neither the individual nor the social model is sufficient to explain the experience of disability at the

Institution. Oliver (1990) has contended that the use of the individual model specifically can result in society not being obligated to transform the context, and become inclusive to all diversities.

5.4.3 The impact of histories and geographies of exclusion on access

This study reveals that the geographies and histories of exclusion limit opportunities of access into Education, specifically at the Institution. This limited access comes about as a result of outmoded conceptions of disability, and the built environment. Decolonial Theory would point out the general organisation of structures in society using ‘normalcy’ as the standard (Quijano, 2000). This has already been discussed in Chapter Three. As a result of this organisation, both social and physical structures are constructed and developed for what has been constructed as the ‘normal’ person. In the context of the present study, physical structures are often inaccessible to students with disabilities because it might not have been imagined that students with physical disabilities from special schools could come to university in order to be professionalised as educators. It could be argued that our history of segregation has impacted the geography, or physical landscape, of the Institution, specifically a portion of the campus in which the Education programme is conducted. Evidence of this is reflected in the following student’s statement:

I understood because that campus, you know, with the field of Education in the country, it has never happened that a person on a wheelchair qualifies, so it was specifically for the able-bodied.

The statement seems to suggest that the student is aware of how a negative approach to disability could impact on structures, and result in the physical inaccessibility at a particular school at the institution. Another said:

This campus was actually built during the apartheid era and no person with disabilities, no black person, no blacks were allowed into this campus ever!

The students' statements reveal that they are aware of the impact of apartheid on the access of specific groups of people to a particular school at the Institution. There is however a conflation in the student's statement that "no persons with disabilities, no black persons were allowed ever". The student conflates discrimination against Black people and also levels it at persons with disabilities. However, the DU at the Institution was established in 1985, during the apartheid era, and this means that there were students with disabilities during that time. Also the specific institution was not segregative in terms of race but covertly excluded those from disadvantaged economic backgrounds. However despite that error, there is still a reflection of a history and geography of exclusion. As evidence to that, four out of the six students with disabilities in the programme stated that they had indicated in their application that they have visual loss and physical disabilities respectively, but still found the campus inaccessible in terms of built environment. That means though there is retrofitting of old buildings and construction of new ones with diversity in mind as is presently happening, the particular school is still exclusionary because of the extent of its inaccessibility that arise from the history of Education in South Africa. The construction work to improve the built environment at the institution started at that school, suggesting there is urgent need for that to improve the campus so that it could be accessible to all students in their diversities, those with disabilities included. Thus, the history and geography of exclusion could be understood as having resulted in an inequitable structure that limited entry into Education by students with disabilities.

5.5 ENTRY AND THE PROBLEM OF THE STUDY

The study has shown that limitations begin right at entry. Because specific practices and structures are inequitable, students with disabilities are hindered entry across all three

programmes. The students experience exclusion in terms of high entry requirements, specifically in Medicine and Law, they struggle to access the built environments, which limits Education students in particular from using wheelchairs, as well as those with total visual loss and the same entry requirements which they find difficult to meet because they are already disadvantaged in schooling. Given that exclusion begins at entry, the number of those who ultimately graduate could be low. It should be taken into consideration however that the sample across the three programmes was very small, and unequivocal conclusions that the limitation is at entry cannot be drawn.

An idea proposed by the students themselves, that their required entry points could be lowered because they are already disadvantaged from schooling, could be a way in which the inequitable structures and practices are overcome. It would result in the widening of the opportunities of entry for such students. However, though it seems like a good idea, its practical implementation at the Institution presents challenges. DU members remarked that it is unlikely that the Institution will lower the entry requirements and compromise its standards to include those with disabilities at entry into the three professional degrees.

Since the built environment featured repeatedly in terms of how it limits entry into Education, stakeholders could push to hasten a massive project that has been started in the school so that more students using wheelchairs and with low vision specifically might not be hindered. Increasing opportunities at entry alone might not suffice for the equitable representation desired. It is also important that all diverse students, including those with disabilities, graduate into the professions within minimum stipulated time. Overall, the privileging of the voice of the students with disabilities is important (Hosking, 2008) because they speak from lived experiences (Devlin & Potheir, 2006). Their perspectives provide useful information as to what they need at entry to be included in the three professional degrees.

5.6 CHAPTER SUMMARY

While at surface level it could be presumed that all diverse students have equal opportunities to enter the three professional degrees at the Institution as a result of policies of non-discrimination and the same entry requirements, there are nevertheless inequitable practices and structures at entry. The same entry level requirements for all students, schooling backgrounds, particularly in special schools, higher entry requirements for Medicine and Law, the demands and nature of the professions, and the built environment, all compound to present hindrances to these students. These aspects are confronted by students with disabilities as obstacles that limit their entry into the three professional degrees. As discussed in Section 5.4, reduced entrance requirements for students with disabilities might improve their levels of entry at the Institution.

The next chapter presents and discusses the obstacles and opportunities present in professional learning, that is, the process undertaken to complete the programmes and graduate into the professions of Medicine, Law and Education at the Institution. It is important to understand what happens *after* students with disabilities have gained access to the specific professional degrees, in terms of professionalisation and the timely completion of their programmes.

CHAPTER SIX: PREPARATION TO GRADUATE INTO PROFESSIONS: OBSTACLES AND OPPORTUNITIES

6 INTRODUCTION

This chapter presents and discusses the obstacles and opportunities present in the preparation of students with disabilities to graduate into the professions of Medicine, Law and Education at the Institution. Their preparation involves professional learning and is ultimately a process of professionalisation. While professionalisation is a lifelong process, the focus for the present study is on the part of it that takes place at the Institution prior to graduation. The theory students are expected to familiarise themselves with, as well as the ability to apply it, are analysed as they are both central aspects of professional learning. The analysis is therefore focussed on professional learning as it takes place at the Institution and at the work setting for integrated learning. It includes the completion of the programmes by meeting their requirements within the stipulated time, to graduate into the specific professions. The quantitative analysis and the findings are first presented, followed by the qualitative results, in which the accounts of the participants are relayed, and this is followed by an evaluative and theoretical analysis. What this provides is an emic and etic structure, as in the previous chapter.

It must be understood that while each of the professional degrees has its own unique professional knowledge, there are common aspects that apply across all three. For example, the expertise to draw from theoretical knowledge to inform practice (Winch, 2014) and the use of professional judgement in practice (Shalem, 2014), are discussed by scholars in the context of Education, However, these also apply to Law and Medicine and are integral to all professional field practice. In addition, the application of abstract knowledge differently from one case to another as discussed by Abbott (1988) is present in all professions. This is what distinguishes a professional from a technician. It is important to bear in mind that there are

some overlaps between the specific programmes, and professional learning need not be narrowly understood within the confines of a specific professional degree. My reason for prefacing this aspect of my analysis in this way is to emphasise that all diverse students studying the professional degrees could be presented with similar opportunities and obstacles that enable or hinder their access to professional learning.

The terms ‘schools’, ‘hospitals’, ‘law firms’ and ‘field’ are used to avoid tiresome repetition of the term ‘work setting for integrated learning’ explained in the introductory chapter. However, the participants did use the term ‘workplace’ in their statements and in cases where they are quoted directly, their phrasing is not altered. The term ‘field practice’ is also used to distinguish the practice by the students as part of professional learning from the practice of qualified graduates.

6.1 QUANTITATIVE RESULTS AND FINDINGS

Twelve statements that speak to professional learning and completion of the specific programmes at the Institution were selected from the 19 that the questionnaires provided. They were collated, and analysed in terms of the participants’ responses to them. The finding, which is the broadly-espoused opinion, was then drawn from the analysis. Percentages have been avoided because, as stated in the previous chapter, they can be misleading when used with a small sample. The actual percentage and frequency tables can be viewed in Appendix D1. Table 6 presents the specific statements, the responses, and inference of the participants’ perceptions of the specific phenomena.

Table 7: Perceptions of participants on professional learning at the Institution

	STATEMENT	PARTICIPANTS’ RESPONSE AND ANALYSIS
1	<i>Teaching caters for unique learning needs</i>	Both students of Medicine strongly agree. Two students of Law strongly disagree and the other two disagree. Four students of Education strongly disagree and the other two disagree. Seven

		members of DU agree and two disagree. The distribution suggests that the medical student's perception is that teaching caters for unique learning. In Education and Law respectively the view is that it does not. DU members have varied opinions with regard to this.
2	<i>Available assistive devices assist learning</i>	Both medical students agree. Two students of Law strongly agree and the other two agree. Four in Education strongly agree and two agree. Seven DU members strongly agree and two agree. All participants share the view is that assistive devices assist learning.
3	<i>Support at the DU helps learning</i>	Both Medical students strongly agree. Two Law students agree and the other two disagree. Four students in Education strongly agree and two disagree. Seven DU members strongly agree and the other two agree. The medical students concur with the DU members that support at the DU assists learning. In Law and Education, students have varied opinions in this regard.
4	<i>Available funding is adequate to assist learning</i>	Both the students in Medicine strongly disagree. All four students in Law strongly disagree. Four students in Education strongly disagree and two disagree. Six DU members strongly agree and three agree. Across all programmes, students' perception is that funding is inadequate to assist learning, whereas the DU members think it is.
5	<i>Extra time in exams assists in assessment</i>	Both medical students strongly agree. Two in Law agree and two disagree. In Education, all six agreed. Six members of the DU strongly agree and three agree. The participants' view is that extra time helps with the assessment of students with disabilities. There are also students in Law who disagree.
6	<i>Attitudes at the institution are positive</i>	Both medical students strongly agree. In Law, three strongly agree and one disagrees. In Education, four strongly agree and the other two agree. Seven DU members strongly agree and two agree. The distribution suggests that the participants' perception is that attitudes are positive at the Institution. However, there is one student who does not agree.
7	<i>Built environment at the institution is accessible</i>	Both students in Medicine strongly agree. All four Law students disagree. Five Education students strongly disagree and one disagrees. Five DU members agree and four disagree. There are varied opinions about the accessibility of the built environment at the Institution.
8	<i>Transport to the field is accessible</i>	One student in Medicine strongly agrees, and the other agrees. All four students of Law disagree. Three in Education strongly disagree and the other three disagree. Two DU members strongly agree and seven agree. The medical students and DU members' perception is that transport to the field is accessible, and in Law and Education the view is different.
9	<i>Built environment in</i>	Both medical students disagree. Three in Law strongly disagree and one disagrees. Four in Education strongly disagree and two disagree.

	<i>the field is accessible</i>	Five members of the DU strongly disagree and four disagree. All participants think that the built environment in the field is not accessible.
10	<i>Attitudes in the field are positive</i>	One student in Medicine agrees and the other disagrees. All in Law disagree. Four in Education strongly disagree and two disagree. Five DU members strongly disagree, and four disagree. The overwhelming response is that attitudes are negative in the field but there is an exceptional case who thinks they are positive.
11	<i>Support in the field assists field practice</i>	One student in Medicine strongly agrees. The other agrees. All four in Law strongly disagree. Three in Education agree. Two disagree and one strongly disagrees. Two DU members agree. Five disagree and two strongly disagree. The medical students' perception is that support in the field assists their field practice. Law students do not have a similar experience. The DU members and students in Education have varied feeling.
12	<i>The degree (Law, Medicine, Education) is completed in time</i>	Both students in Medicine strongly agree. All four in Law strongly disagree. Two in Education strongly disagree and the other four disagree. Two members strongly disagree and seven disagree. The distribution suggests that the Medical students' view is that students with disabilities complete the programme within minimum time. Law and Education students do not agree and neither do DU members.

The broad opinion from the survey is that students with disabilities are presented with opportunities, but they are also confronted with obstacles in their professional learning and in the completion of their programmes within stipulated time at the Institution. Participants have varied opinions about the specific issues relating to professional learning of students with disabilities and the completion of the specific programmes. Given that there are high frequencies of 'strongly agree' and 'strongly disagree', these should not be overlooked, but be further explored. From the qualitative interviews, the following aspects emerged: tensions of equality and inequality, impairment versus disabilities, and histories and geographies of exclusion. The participants' accounts are presented and the specific results are theorised and discussed to generate findings for this chapter.

The thesis for the chapter is that while there is transformation at the Institution, it has not been implemented to the extent that all students are totally included. As a result, students with disabilities are individually accommodated so that they can access the same professional learning as other students at the Institution. However, the ‘accommodations’ and ‘support’ at the Institution do not extend to the work settings for integrated learning. Since professional learning is an interactive process which takes place at both the Institution and in work settings, a lack of support in the latter, limit the professionalisation of students with disabilities. While at surface level, DU members presume that there is equal access to professional learning for all diverse students at the Institution; there are specific inequitable practices and structures which make it difficult for them to fully participate and achieve and it results in students with disabilities delaying to complete the specific programmes.

6.2 THE PARTICIPANTS’ ACCOUNTS OF PROFESSIONAL LEARNING

The next sections present the descriptive accounts provided by the participants in the in-depth interviews. These specifically involve access to professional learning at the Institution and at the site of work for integrated learning. Responses are from the seven DU staff members, and 12 students with disabilities. Three DU members stated from the outset however that although they are involved with students with disabilities at the Institution, they are not directly involved with their learning. One of them said: “Well when you talk about professional degrees, the preparation is from the academic side of things”. However, their accounts are presented nevertheless because they provide ‘support’ for those students’ learning. The participants used terms which may be regarded as exclusionary, for example ‘support’, ‘special’ and ‘accommodation’. Though these are not preferred in the inclusive field, they are however used for the sake of representing the participants’ statements as they were uttered. They are however quoted with single quotation marks throughout the study to show that they are terms I do not prefer even if I also use them.

6.2.1 Professional learning in Medicine

Students with disabilities' perception is that they are included in professional learning in the programme of Medicine. The two students observed that lecturers cater for their unique needs and they had full access to professional learning. They said that special provisions and access arrangements were made for them, and this enabled them to learn alongside as other medical students. They further stated that their lecturers provide them with instructional assistance and they were also assisted in terms of assessment. Describing their learning, the student with a visual impairment stated:

The Department considers me in learning because I told them of my problem before the start of the block. In every examination I write I have an extra time of thirty minutes, thirty minutes of every hour. They also print the exam on large print and give me my room to write from. This helps me a lot in terms of my eyesight.

The other student with hearing impairments said:

A disabled student has other issues of access to overcome. When my lecturers got to know that I can't hear, they made sure I got all the important stuff for my learning. They gave me notes prior to the semester and they told me I had no choice but to gather up myself and do my work. They do not give me special treatment but they assist me to access the medical information.

What one can draw from these statements is that when it is known that a student has a specific limitation, there is an intervention that enables overcoming of the unique limitation. It seems that the access arrangements for examination help the student who has visual limitations, and the provision of notes in advance enables the student with hearing impairment to access the medical knowledge. Thus, each student's perception is that he is catered for in a way that helps his learning.

The two students with disabilities' perception is that they are included at the site of work for integrated learning, which is a significant part of in the programme of Medicine. They stated

that they do their field practice alongside other medical students, and their unique needs are also catered for in this setting. They stated that they are given extra time to complete tasks, for example. The students said what helps them most is that their lecturers always explain to them what they can expect to find in hospitals, and what tactics have worked for other students with disabilities. This enables them to prepare themselves so that they have solutions for the problems they encounter at the hospitals. Describing their practical learning, one of them stated that:

It's actually a connected kind of a thing. When you go to practise in the hospital you are already exposed to the conditions that are very similar to what you have been learning. I am able to use that knowledge and that information myself in the field because in Medicine you learn as you practise. The Medical school is doing so well in preparing us for the profession. Honestly I don't see how they can improve. We are taught the medical skills as all other students.

The other student also stated:

We are taught like all other students, when taught the medical skills and everything. There is special attention when we do those things of extra time. We do practise well in hospitals and all the stuff.

These extracts reflect the interrelatedness of the professional learning that takes place at the institutions and the professional learning that takes place in hospitals in Medicine. Learning to apply the knowledge, according to these participants, starts at the institution. Both students appear to share the perception that their ability to apply their knowledge at the hospitals is a result of the fact that they are prepared for the conditions of field practice by the Institution. This preparation makes them practise well.

6.2.2 Professional learning of Law

Students with disabilities' perception is that they are excluded from learning in Law programmes, though there are pockets of individual accommodation. Though they did not specify the numbers, all four Law students stated that at the Institution there are only a few

lecturers who are willing to make an effort to include them, and many are not. The students stated that there are isolated incidents in which the willing lecturers show concern for students with disabilities and make efforts to include them in their teaching. One of the students said:

I heard one lecturer mentioning people with sight issues when she was putting an overhead projector. She offered help and said such students should come to her office. I realised that there is someone who understands!

From the statement, some lecturers take into consideration that students with visual limitations are excluded by the medium employed to convey knowledge in the teaching process. Those lecturers make arrangements to help such students access learning. A link can be made between this statement and the issue of individual accommodation. Speaking from within the context of universities in Canada, Hibbs and Potheir (2006) argue that students with disabilities are individually accommodated there, because policy does not allow for discrimination. Though the DU staff members' perception is that policy is being implemented at the Institution specifically, I argue that policy might not be effectively implemented to include students with disabilities in teaching. The fact that there are lecturers who are said to be simply unwilling to include students with disabilities proves it. Whether willingly or unwillingly, excluding students with disabilities would not be an option if policy is being implemented. What the students describe suggests that it is left to the discretion of individual academic staff whether or not to include those with disabilities. Thus, only a few accommodate those students.

The students with disabilities who study Law further said that the unwilling lecturers do not consider their unique learning needs with regard to teaching instruction and assessment. They stated that they are limited in their learning by materials that are used in teaching that are inaccessible to them. The students stated that the lecturers use overhead transparencies most

of the time, and do not make large-font printouts available to them. In addition, the font in the course packs is also inaccessible and their reading materials are distorted when converted to Braille. They stated that the cumulative effect of all of this is that they are excluded. This exclusion affects both those with total visual loss and those with low vision. One of the students said:

They will tell you we have a lot of work to do. As lecturers we are expected to be studying, we are expected to mark; we are expected to do this and that. So what you are asking for might be a lot too much!

According to this student, lecturers are not willing to include students with disabilities in their teaching because they have other work that is expected from them. A link can be drawn between this and Universal Design (Centre for Universal Design, 1997, 2002), both with regard to teaching and higher learning. The argument made in the Fotim Report (2011) is that in lecturing and learning, very little attention is paid to the principles of Universal Design. Consequently, the practice of Law in the field is also not universally designed, in that it is not designed to include all students in their diversities from the outset. What this oversight creates is an exclusive teaching and learning environment, and Law students with disabilities might, as a result, be excluded from adequate professional learning.

In addition, the students with disabilities in Law view the conditions of their field practice at the work setting for integrated learning to be inadequate. All the four of them stated that they are taught a lot of theoretical knowledge at the Institution, but have very little time to apply it to field practice. One of them stated:

There is a lot of theory without knowing to apply it. When you are just a student in class and you are just taught the principles, you struggle to see how those principles apply in court scenes.

Another said:

We are not prepared to deal with people but to deal with papers. Law is greater than theory. Yes they just give us theory.

Although students have adequate professional learning at the Institution in terms of theoretical knowledge, they perceive themselves as not adequately prepared to apply Law principles appropriately when they graduate, by virtue of inadequate field practice. Letsika (2002) reports that a long-standing complaint in the legal professions in both the United States of America and South Africa is that institutions of higher learning do not expose students of Law to adequate practice in order for them to acquire necessary lawyering skills. Focussing on the context of South African higher learning specifically, Nicholson (2004), in agreement with Motala (1996), states that at schools of Law, learning involves students going to class and taking lecture notes from volumes of content knowledge that consist of statutes, cases, legal rules and principles, which they are then required to learn and reproduce in tests and examinations. According to Motala (1996), this approach simply fails to integrate the theoretical and practical components of legal education. There have been attempts to overcome this by introducing clinical legal education, which emphasises practical learning, and the Institution is among those who have incorporated this in its law curriculum (Letsika, 2002). However, the participants' perception that professional learning in Law is still limited, because they feel that they cannot apply the principles they are taught in practice. While this could negatively affect all students (including those without disabilities) studying Law, it might have grave consequences for those with disabilities. Participants stated that what negatively affects other students is compounded for them. One student said:

Law for a student with a disability is not real enticing here. There are many, many challenges that even a normal student faces and when it comes to you it's 10 times even worse because all these things that makes you different are not taken into account.

Law students with disabilities perceive the academic staff to place more value on teaching theory at the Institution than allowing them opportunity to apply the principles of Law in field practice. Three out of the four students stated that their lecturers do not understand law in practical ways. One of them stated:

My professor, who is teaching me evidence, was like you get paid for your knowledge and not how you apply it. That's what they are teaching us, just concentrate on acquiring knowledge so that you are able to regurgitate it!

Another stated:

They are teaching us that the practical aspect is irrelevant, whether people are experiencing social or legal problems in society, that's not important. That's not Law in its practical sense!

According to these students' responses, their lecturers do not place as much emphasis on the practical aspect of Law. What this calls into question is the programme design of Law. In the South African context, it is compulsory that all undergraduate students in a four year LLB programme do articles of clerkship after graduation (Attorney's Act no 53 of 1979). Law students therefore do not enter the profession and practise as qualified lawyers without meeting this requirement. Lecturers might justify their disproportionate focus on theoretical learning at the Institution because they believe that there is still an opportunity for further professional learning and practice after graduation, to hone students' practical abilities. Although the view of students with disabilities is different, the approach of academic staff could be seen as legitimate, in that they ensure that they teach the specialised knowledge of the profession before graduation. What this would arguably result in is a strong foundation of specialised knowledge, which according to Abbott (1988) is the basis of every profession.

6.2.3 Professional learning of Education

Students with disabilities' perception is that they are excluded from professional learning in Education at the Institution. However, as is the case with Law, there seem to be pockets of

individual accommodation, which enable the students' professionalisation to a certain extent. Three postgraduate students in Education, for example, have fulfilled the requirements of the programme theoretically and practically. They have completed the undergraduate programme and graduated into the profession from the Institution. The other three are in their fourth year of study. They have been learning at the Institution and have been participating in field practice since their first year, both at special and mainstream schools, as part of their Teaching Experience. What this illustrates is that these students have access to professional learning, they have completed required professional tasks, and they have passed. It could be argued that individual accommodations have enabled this.

However, despite the opportunities provided by individual accommodations, the Education students cited specific obstacles that limit their professional learning, both at the Institution and in schools. They also stated that few lecturers include them in their teaching, and many exclude them entirely. Three undergraduate students with disabilities in their fourth year of study explained that some lecturers do not send their learning materials for conversion in time. Conversion is the process of changing materials to an accessible format for students with visual impairments. For an example, converting print to Braille or large print. As a result, the students are given their assignment topics late, they then submit them late, and receive feedback late. Another obstacle is that the process of converting print to Braille often results in distortions and omissions. Lecturers also use overhead transparencies and power-point when teaching, and that way of teaching exclude students with total visual loss. One of the students stated:

The lecturers forget us. They would say sorry I forgot to send your notes and all stuff. Even when they are teaching, they forget us, even in tests and in assignments.

The student's perception is that those with disabilities are marginalised by academic staff, and this result in limited access to professional learning at the Institution. As the students in Education describe similar inaccessibility in terms of teaching and learning materials as students of Law, this could allude broadly to the issue of the Universal Design, already discussed in Section 6.2.2.

The unwillingness of some members of academic staff to include students with disabilities in Law and Education is consistent with Fuller et al.'s (2004) and Madriaga's (2010) findings. These studies found that in the British context of higher learning, certain lecturers were also unwilling to go out of their way to include students with disabilities. This is therefore an obstacle not only in South African higher learning, but also in that of the UK. At the Institution however, students report that a few lecturers are willing to help, and this results in individual accommodation that sees students with disabilities also accessing professional learning.

In formerly-advantaged institutions in South Africa, the unwillingness referred to here does not only affect students with disabilities, but includes students from other previously-disadvantaged groups. The Council of Higher Education (2008) views this as one of the internal inefficiencies which impacts negatively on transformation.

All seven DU staff members share a different view on the unwillingness of some academics to include students with disabilities in their teaching at the Institution. They stated that the reason for this exclusion could be that the academics in question might not know that there are students with disabilities in class, as some of those students do not disclose their disabilities. The DU members also stated that lecturers do not have time to devote to individual students with disabilities, because they are overloaded with the responsibility of catering for many such students. They stated that in some cases, the problem of exclusion is

with students themselves, because some of them came from disadvantaged schooling contexts and have language obstacles which inhibit their ability to communicate effectively with their lecturers. These students, according to DU members, cannot not cope because lecturers are diverse and have different accents. Above all, the standard at the Institution is very high, and this affects students both with and without disabilities. The different views on exclusion of students with disabilities in teaching at the Institution guide our focus to compounding disabling barriers, such as those resulting from inaccessible materials, as well as physical and social environments confronted by persons with disabilities (Swain, French, Barnes & Thomas, 2014). Swain et al. (2014) argue that those with disabilities are confronted by disabling barriers as they interact with the world, which is designed for the functioning of those without disabilities. Thus, though it is certainly relevant that some academics could be either unwilling or willing to include those students in their teaching, there are other disabling barriers in the context that limit how students with disabilities access professional learning at the Institution.

The DU staff members view the students with hearing impairments specifically as most limited in terms of accessing professional learning at the institution. Five of the seven of them stated that there are inadequate language interpreters. One of them stated:

It is very expensive especially to support the deaf, where you need interpreters. One interpreter costs more than R150-00 per hour and we don't have enough money for that.

In terms of practical learning at the Education work settings for students with hearing impairments, five DU staff members stated that schools for the deaf, including some mainstream schools, have some interpreters. Two postgraduate students in Education with partial hearing loss, who are identified as Deaf, viewed the issue of interpreters similarly to the five DU members. They concurred that interpreters are expensive. They revealed that

interpreters as human resources are not always waiting on them for their learning at the Institution. They reported the possibility that these interpreters could be sick, exhausted and also take leave while they are needed to interpret for students with hearing impairments. The students stated that when interpreters are unavailable, they miss lectures because making backup plans for interpretation at short notice is difficult. They also stated that interpreters who are not educationists often mistranslate what is taught, and students with hearing impairments therefore write meaningless (and ultimately useless) lecture notes. The two students, who are now both teaching, stated that when they did their undergraduate studies, their field practice was in both special and mainstream schools. They said that schools for the deaf provided interpreters, and they also had access to oral communication in mainstream schools because they are not totally hearing impaired. One student said:

Interpreting is a high cost item because for an interpreter to interpret for an education student, he should be someone who understands the educational language, content, terms, concepts, reading and all stuff that is educational.

What it reveals is that the issue of interpretation is complex, because it does not only require expertise with regard to interpreting the language, but competency in the specific field. In her study, Bell (2013) finds that existing support is not adequate for such students. The Fotim Report (2011) also states that DUs do not cope with providing interpreters because of high costs and the limited availability of those qualified to interpret. We therefore see that while students with disabilities' perception is that they are excluded in professional learning in Education, this exclusion is felt more acutely by those with hearing impairments.

Education students with disabilities do their field practice at two types of schools, namely special and mainstream schools. All the six of them stated that where they feel most included in terms of professional learning is in special and in some accommodative mainstream schools. The students stated that the special schools include them in terms of material

resources, physical accessibility, attitudes, and accessible teaching methods. One of them stated:

I was accommodated, it was a special school. I was like other teachers. They treated me like one of them. So I asked the TE office that they place me at a Special School for third and fourth year.

Students with disabilities experience better treatment in special schools and this provides them with better field practice. They therefore often prefer these schools for their Teaching Experience deployment. Students with disabilities who were interviewed by Chaitaika (2007) in the Zimbabwean higher learning context stated that they felt a sense of belonging in special schools. From this, she concludes that with special schools still functioning, there is a threat to inclusive education in the mainstream (Chaitaika, 2007). The perception of students with disabilities is that special schools are inclusive to them and offer them opportunities for better field practice. A potential result of this is the perpetuation of special education in segregated institutions, because needs of those with disabilities are (often) met within these contexts. Students with disabilities prefer to do their practical learning in special schools because they find them inclusive, and they might be prepared to become ‘specialist teachers’ for learners with ‘special needs’ in special schools, as was the case in the past (Howell, 2006). Evidence of this inclination surfaced in these words:

I will eventually want to go to Special Needs Teaching myself. I am a Special Needs sort of a student

Another stated: “And I realised that ok, I can’t teach in the mainstream”. Thus, while special schools were inclusive and allowed students with disabilities to do their field practice well, their positive experience could inadvertently result in the perpetuation of segregation on the grounds of disability, defeating the whole idea of inclusive education in mainstream settings as proposed in the policy (DoE, 2001b) and the agenda of transformation (CHE, 2008).

Students with disabilities' in Education perceive that some mainstream schools are accommodative. They said they have the opportunity to complete their field practice optimally in these schools. Four out of the six students who also had the experience of doing their field practice in the mainstream stated that they were accommodated. One student stated: "There was no time, where I felt you know what; I had a disability because the infrastructure had always been conducive for me". Another also added:

The school had a lot of teaching materials; I had no problems with preparing for the lessons and the mainstream teachers were accommodative; I gained a lot of content and teaching methods.

Five out of the seven DU staff members shared same view of these four students with disabilities, in that there are some mainstream schools that are also accessible and accommodative. One DU staff member said:

It's not a big deal, even students with hearing impairments can go to mainstream schools because some of them have interpreters.

Another one mentioned:

Our postgraduate went to do his practicals in mainstream schools and was accommodated to teach because the schools did not have structural problems.

These comments speak to the broad issue of inclusive education in schooling in South Africa. Bell (2013) argues that inclusive education started in schooling and rolled into to higher learning. Given this, there are some recognisable advancement in terms of transformation in these particular mainstream schools.

Other students with disabilities in Education stated that they confront obstacles in mainstream schools that exclude them. They report that their professional learning within these contexts is limited. Five out of six of the students remarked that such schools are inaccessible to them

in terms of their built environment, resources, teaching methods and negative attitudes from other teachers. They recalled that their field practice in those schools was difficult. One of the students said:

The focus is still on the mainstream by the mainstream, I mean the able-bodied. They will talk about chalkboards, charts and so forth. I cannot write on the chalkboard, I cannot design a chart because of my disability. Does that mean I cannot teach?

Despite advocacy for inclusive education in schooling, there are still mainstream schools that exclude those with disabilities. This student's statement shows that although he has the capacity to teach like other students, by virtue of the specific context and its lack of accommodations, he was excluded. What such a school needs to be made aware of is the government's agenda of transformation and inclusion in South Africa (Carrim & Wangenge-Ouma, 2012). The present study reveals that despite the transformation agenda and policies of inclusion, certain work settings for integrated learning are still not transformed to enable all students to access practical learning in all their diversities.

6.3 ACCESS ARRANGEMENTS AT THE INSTITUTION

From the participants' accounts, it can be deduced that the Institution has access arrangements to enable those with disabilities to access professional learning in the three programmes. Among others, there are assistive devices and extra time for examinations. This section presents the accounts and discusses how those are provided.

Individual students with disabilities of different genders and races, across the three professional degrees, are provided with relevant assistive devices at the Institution. Ten students with disabilities out of the 12 confirmed that they have been provided with a device to assist their learning. Those students confirmed what each of the seven DU staff members stated, which was that those assistive devices are provided through Disabled Students

Allowance fund (DSA). The devices include kindles, eye trackers, special magnifying classes, hearing loops and motorised wheelchairs. A kindle is a small device to which books are uploaded so that the students with physical disabilities do not carry heavy books around. An eye tracker is for students with severe physical disabilities who cannot use their limbs; the device enables such students to control the mouse of the computer using their eyes. The DU members reported that the device sells for R65 000-00 and the Institution is among the first to have it. JAWS software is installed in the computers of students with visual impairments to assist their reading. It is a name of software that when installed into a computer it enables a voice to read the materials to such students. DU staff members said that students with disabilities are trained at the Disability Unit with regard to how to use these to access learning. Five of the seven DU members observed that when students are provided with assistive devices that are different from those they are accustomed to using at the Institution, this presents a challenge. According to them, no one helps to train the students to use unfamiliar devices they might encounter in the field.

According to both DU staff members and students with disabilities, extra time in examinations is provided to students with disabilities across all the three programmes. They agree that the purpose of this is to ensure that those students are assessed fairly. Eight out of 12 students with disabilities said that they are granted extra time and that they use it. They stated that there are specific procedures to follow to be granted this extra time. Five DU members said that when a student has followed all the procedures, they issue them a letter and the student writes their examinations at the DU. Two students with disabilities in Law were not provided with this extra time because they did not adhere to these procedures. They said that they write their exams in the hall with other students, and not at the DU. One of them said:

They will tell you, if you want extra time, go and see an occupational therapist, optician and three[...]three different doctors! Someone is at the Education Campus, someone is at [...] you just get bored by the process. As for me I went to register for extra time but I never got over the process because the whole thing just turns you off. And for albinism, eyesight is not something you can fake and say I can't see clearly. I have never used extra time.

This student does not see the need to jump through procedural hoops in order to be granted extra time. What this student is drawing our attention to is the perpetuation of an individual model of disability, in which professionals have the power to make decisions on behalf of persons with disabilities. Oliver (1990) observes that this is patronising and invasive of a persons' privacy. The student was opposed to the idea of students with disabilities having to see a number of professionals in order for extra time to be granted. He seems to think it should simply be understood that he has eyesight problems.

6.4 PROVISIONS AT THE INSTITUTION AND AT THE SITES OF WORK

According to the participants, there are special provisions at the Institution, specifically for students with disabilities. All seven DU staff members shared the opinion of nine out of 12 students with disabilities, that there are provisions with regard to both funding and transport. There was a measure of contention with regard to funding, specifically with regards to the assistance of students with disabilities when accessing field practice at the site of work for integrated learning. The section that follows presents and discusses how students with disabilities are provided with such.

6.4.1 Provision of funding at the Institution

The participants stated that at the Institution, funding is available to all students who qualify for it. One bursary in particular is available to those with disabilities. The seven DU staff members and the nine students with disabilities said that there is government funding available, for example the National Student Financial Aid Scheme (NSFAS), Funza Lushaka

for students in Education, National Research Foundation (NRF), and the Postgraduate Merit Award (PMA) Scholarship. There is also external funding from private companies. The DU staff members explained that the fund specifically for students with disabilities is a bursary which is part of NSFAS. Unlike what NSFAS provides to other students however, the grant provided to students with disabilities is not a loan, but a bursary. Students with disabilities are assisted to access this particular source of funding at the Institution by the Disability Unit staff. Importantly, this fund includes Disabled Student Allowance (DSA), which caters for assistive devices. Ten out of the 12 students with disabilities have this funding. Six are funded through the NSFAS bursary. One in Education has Funza Lushaka, and the other two had private company funding, one was a staff member who was not paying tuition, and one said he did not have any funding and was self-funding.

While nine students with disabilities out of the 12 view their funding to be insufficient, all seven DU staff members insist that it is sufficient. A student stated: “To say funding is adequate does not make sense because some students living with a disability have been excluded for financial reasons”. One of the DU staff members said:

I don't understand why they say funding is not enough because if they don't have, we look around for any bursary that caters for them and give them information. I think they are just greedy!

Another DU member said:

Bring any kind of disability[...]I am waiting for that student who says funding is not enough to tell us exactly what he needs that he cannot get.

The statements of both the DU staff members and students with disabilities reveal the complexity of funding support for students with disabilities in higher learning in general. Morris (1989), concurring with Hurst (1993), argues that students with disabilities need more funding because they incur additional costs that other students do not. The NSFAS bursary

for students with disabilities includes transport costs, food, accommodation and tuition (NSFAS, 2013). However, given that nine students with disabilities across the three programmes still view this as inadequate; that could mean that students with disabilities need more funding than others for their additional needs, which are explored in some depth in studies conducted by Morris (1989) and Hurst (1993).

Critical Disability Theory can, I would contend, shed some light on contradictory views on funding. DU members are speaking on behalf of students with disabilities, and it might be possible that they are not fully aware of the additional needs of these students. Devlin and Potheir (2006) state that those with the lived experience of disability know exactly what they need. Hosking (2008) also maintains that the voice of those with disabilities that should be heard and those without disabilities should not speak for them. In the present study, DU members might not know the cost of students with disabilities studying the three professional degrees at the Institution, given their unique financial needs, yet they speak for them. Le Grange (2014) contends that studying professional degrees (she focusses on Architecture) is expensive, and that students from disadvantaged contexts such as Black people and students with disabilities cannot afford to study these. Within the scope of this study, Medical students with disabilities mentioned that Medicine is prohibitively expensive. All of this might have been overlooked by the DU staff members.

6.4.2 Provision of transport at the Institution

Both DU staff members and students with disabilities remarked that accessible bus transport is provided at the Institution. Ten students stated that the bus enables them to access learning venues. Buses are the means of transport within campuses for all students. However, though the bus has been designed specifically for students with disabilities, four students with physical disabilities and two with visual impairments said that they have only partial access

to the bus. They stated that the bus door is not wide enough for their wheelchairs, and that it lacks an announcement facility to alert those with visual impairments as to where they are. The students stated that the timetable of the bus is another obstacle that restricts their options. They said that they get to lectures late because if they miss that bus, they have to wait for its return an hour later. They further stated that they would be destitute if they were to miss the bus when going to write examinations. They are also not provided with alternatives if the bus breaks down or goes for a service. A student stated:

I would come there and find that I am five minutes late and the bus has already left. Other students will have the options of saying, if I miss the half past one, I will catch the quarter to two one.

Another student mentioned, “If a lecture starts at eight it starts at eight. I oversleep one minute, my whole day is ruined”. The statements of the students suggest that despite the efforts made by the university to provide them with their own transport, they still experience problems to do with the bus-timetable. The Institution has therefore not yet achieved a total transformation of its contexts to include persons with disabilities in. Shakespeare (2010) observes that while environments and services can be adapted where possible, no amount of environmental change can entirely eliminate barriers for those with disabilities. In the context of the present study, despite the efforts made by university authorities to provide buses to students with disabilities so that they also access professional learning as other students, there are still barriers limiting students using wheelchairs and those with total visual loss. In addition, the timetable does not suit the students, and they continue to arrive late at lectures. It is admittedly difficult to overcome the obstacles of each individual with different categories of disabilities and with unique needs to the satisfaction of all. When confronted with the barrier of transport specifically, Finkelstein (1994) remarks that people with disabilities are ‘socially dead’. That could imply that when persons with disabilities are limited in terms of transport, it is as good as they do not exist because they cannot reach out

to socialise with others. The statements of the students with disabilities prove that although provided with their own transport, they are still not totally included, and this has a negative impact on their learning.

Provision of a single accessible bus to students with disabilities is viewed as one of the ways in which they are accommodated at the Institution. All the seven DU staff members stated that this is a 'reasonable accommodation'. They stated that the university cannot afford many buses which are accessible to students with disabilities because there are so few of them, and the Institution has a much larger student body to cater for. A DU member stated:

That's why they call it 'reasonable accommodation', why would you spend million Rands to provide transport for that one student?

This reveals the oppression on ground of 'reasonable accommodation' confronted by students with disabilities in institutions of higher learning. Dastile and Ndlovu-Gatsheni (2013) argue that universities are colonial power structures that perpetuate the oppression of the 'other'. Despite the reasons given by DU staff for the provision of a single bus for students with disabilities, the limitations these students encounter nevertheless could be seen as tantamount to their oppression by the authorities in power at the Institution. What might be understood as a 'reasonable accommodation' by stakeholders might not be seen or more importantly, experienced in the same way by students with disabilities. The data shows that what the seven DU members view as 'reasonable accommodation' in terms of transport, nine students consider inadequate. One student in Education stated:

I am completely against the notion of reasonable accommodation because of the consequences it has on the particular person with disabilities who is being reasonably accommodated. I have spoken to the bus people to say why we can't have all these buses accessible [...]

This student is opposed to the use of the term 'reasonable accommodation' to justify the provision of only one bus to students with disabilities. He wants all buses to be accessible,

which would include all students in their diversities in terms of transport. Thus, the use of the term ‘reasonable accommodation’ could be viewed as an imposition meant to deprive students with disabilities of regular transport that is provided to other students.

6.5 INFRASTRUCTURE

Infrastructure featured repeatedly in the participants’ accounts as a factor that could promote or hinder their learning, both at the Institution and the setting for work for integrated learning. The section below presents data related to the built environment and transport to the field, and how they impact students with disabilities’ professional learning

6.5.1 Built environment at the Institution

The participants’ perception is that the built environment at the Institution has improved. All seven DU staff members stated this. They said that there has been restructuring to enable all students to access learning venues. They further remarked that there has been significant retrofitting and renovations of old buildings, in addition to the construction of new structures which consider diverse students’ needs from the outset. The members stated that the construction is ongoing, which started at one of the schools, and the ultimate plan is that the whole Institution will be renovated.

There is marked appreciation of the improvement to the built environment by the participants. All seven DU members and ten students with disabilities out of the 12 stated that they appreciate and acknowledge what has been done to the built environment at the Institution. One DU member stated: “The University has tried to a certain degree because there are lifts and ramps in most buildings. One of the students with disabilities said: “The university to a certain degree has done its best but it’s never enough really and will never be”. Institutional transformation in terms of physical structures in higher learning in South Africa still has a long way to go. Fitchett (2015) states that universities have started to review their facilities to

respond to the increasing number of students and staff with disabilities. The statements of the student with disabilities suggest that though they are aware of the improvements and appreciate them, the facilities are not yet satisfactorily accessible.

Despite improvement, the students' perception is that they are still not fully included by the Institution's built environment. Four out of six students with physical disabilities and visual limitations in Education stated that they still confront inaccessibility in the old built environment. They said that although there are lifts in most buildings, they break a lot and when they break, they take long to be repaired. Some lifts have taken as long as six months to be repaired, which amounts to an entire semester's worth of study. Students stated that when lifts are broken, they have difficulty accessing upstairs learning venues, and this limits their access to professional learning at the Institution. All four students with disabilities in Law stated that they too are limited by buildings that are still inaccessible. They said that although there are lifts installed in the buildings, they do not reach all floors at the School of Law. While others proceed to other floors by stairs, students using wheelchairs cannot do so. They either miss lectures or arrive late because of time lost as they negotiate access.

Students of Law said there is a Law Clinic at the Institution in which students do their Practical Learning Study in their fourth year. This is also where some do articles of clerkship after graduation. This Clinic, which because of its proximity to the Law school has the potential to make professional learning more accessible, also presents challenges of access. Two out of four students with disabilities, who did their field practice there, stated that the building is four storeys high. Professional learning takes place on the first floor, but clients' files are kept in the fourth floor. There is only one lift in the building, and it only reaches the second floor. This particular lift is also not always working, like all other lifts at the School of Law. One student stated:

That building is not accessible at all, but it's where we do our practice, how do students on wheelchairs get there, how will they do their practicals?

The inaccessible built environment at the Institution clearly limits full access to professional learning to those Law students with disabilities who also do their Practical Legal Study within the Institution. Those students who use wheelchairs are particularly disadvantaged. The new structures at the Institution seem to be informed by Universal Design principles. This means they are built with diversity in mind. However, the participants feel that they are still only partially accessible. Although the students with disabilities can access new learning venues, they still cannot comfortably access professional learning inside those buildings. Seven students with disabilities from both Law and Education stated that the tables and chairs in the new buildings are on stairs, and those using wheelchairs can only position themselves comfortably in a few select spots. They added that tables and chairs are also connected, and there is a big space between them. This limits students with physical disabilities to sit comfortably and use the tables. The students stated that the distances between the sitting area, the podiums and the boards in the new venues are so big that those with partial sight cannot see what's written on the board and those with hearing limitations cannot hear what the lecturers are saying because they stand far off. The seven students further stated that the podiums are also high above the heads of students using wheelchairs. One student stated:

The screen for knowledge is above, up there, tell me will you be able to keep looking up for the next one and half hours?

Another also stated:

For me access is not about entering a venue. Access means entering the room and be able to use it for learning.

All the students' statements on inaccessibility and partially accessibility at the Institution speak to the broad issues of access to the built environment and inclusion of students with

disabilities to learn in higher learning. Barnes (2003) remarks that access and inclusion are more than gaining access into physical structures, or being able to use assistive devices or technologies, but they involve those with disabilities having equal access and being included to learn and participate alongside others, and not as a separate group. The two statements of students with disabilities suggest that though the new venues are partly accessible, they still experience barriers to learning within those venues. The students understand that this does not amount to access and inclusion for them.

The partial inaccessibility of the built environment at the Institution is consistent with what Engelbrecht and de Beer's (2014) study unearthed. They found that most higher learning institutions in South Africa are still inaccessible to students with physical disabilities because they were not originally designed with disability in mind. In the present study, students with disabilities, particularly those using wheelchairs and those with total visual loss, still find themselves limited in their access to learning venues and consequently to full access to professional learning at the Institution.

6.5.2 Built environment in and transport to the work settings

Students with disabilities perceive that there are still infrastructural obstacles at work settings for integrated learning. Four out of six students with physical disabilities and visual limitations (of different genders and races) in Education, reported that the built environment in some mainstream schools is inaccessible, and that this limits their field practice. One student said:

The physical layout of many schools is not accommodating. It's so hard to jump up from one gutter to the other and from one level to the other when you are using crutches.

Two out of the four students with disabilities in Law who did the Practical Legal Study in the Law firms outside the Institution also remarked that the built environment is inaccessible.

These students stated that most buildings do not have lifts, and those that did had no announcement function to help alert those with total visual loss of the floor they have reached. The buildings also do not have rails and ramps. One student recalled:

It's all stairs, no lifts whatsoever. You will have to find your own way. There is still that mentality that people do not understand what access is. For me access is bigger than a ramp and a lift.

The two students of Medicine were not limited by the built environment at the hospitals because of the category of their disabilities. They did say however that there are some hospitals that are inaccessible to students with physical disabilities and visual impairments. One of them stated:

You get to a hospital; you find there is no lift. When you are using a wheelchair, you find you are not even able to use it there.

These statements reveal that those with disabilities are still hindered by the inaccessibly-built environment at work settings for integrated learning. The students' perception is that in both the Institution and the field, people do not understand what access for those with disabilities is supposed to look like. That raises the broad issue of Universal Design in terms of physical structures (Centre for Universal Design, 1997). While the diversity of all people, including those with disabilities, continues to be predominantly disregarded from the outset, those with disabilities might continue to be limited in terms of the built environment. In the South African context, Swart and Schneider (2006) report that although there is retrofitting taking place in the existing built environment, it may be a long time before the physical structures can include all persons in all their diversities. The simple reason for this is that it is expensive. In the present study, students with disabilities' field practice could be negatively affected by an inaccessible built environment, specifically those using wheelchairs or crutches and those with total visual loss. It is my contention that students with these

categories of disability are more limited in professional learning as they are more disadvantaged both at the Institution and in the field.

Students with disabilities have both positive and negative experiences in terms of transport to the field. The two students in Medicine stated that they are provided with buses to take them to hospitals by the university. However, only one student uses that bus as the other uses his own car. Eight students out of the 12 in both Education and Law use public transport. The university does not provide them with transport for their field practice. These students stated that the kind of transport they use is inaccessible to those using wheelchairs and to those with total visual loss. In his study, Khuzwayo (2011) finds that public transport excludes people with those categories of disabilities, especially in rural areas. With regard to the present study, students with disabilities' field practice could also be limited by inaccessible public transport. This applies particularly to the Law and Education students, whose professional learning could consequently be limited.

6.6 ATTITUDES AT THE INSTITUTION AND AT THE SITES OF WORK

The data on attitudes is difficult to analyse because an attitude can be perceived and understood differently by different people in different contexts. Observers might disagree on what constitutes a negative or a positive attitude, for example. To complicate matters, there is a conceptual and an operational understanding of what an attitude is (Mouly, 1978). However in the context of this study, attitude is understood in generic terms: it is a predisposition to respond favourably or unfavourably towards a person (Mouly, 1978).

The participants' perception is that students with disabilities confront negative attitudes at work settings for integrated learning. Across the three professional degrees, 11 students out of the 12 stated that at the university they feel welcome and accepted, but they feel less so when they are out for field practice. The students said that some people at work settings for

integrated learning still hold the view that these students are not as competitive as those without disabilities in terms of professional learning. In addition, some people are just not comfortable having them around. They stated that some perceive students with disabilities to be a financial burden. A student of Law remarked:

It goes back to people's mindsets. They never think a disabled student is equally intelligent, is equally a hard worker. They expect that a disabled student always complains and would want sick leave.

A student of Medicine added:

You have this fear when you go there, how are they going to treat me? Are the patients gonna accept me. The University system is inclusive but when you go outside into hospitals, there is none of that sort!

A student of Education stated:

At the end of the day, it's a hell lot of lonely existence and that is proof of the pudding that society is not real inclusive. They talk; it's all inclusive but look at the level of loneliness and isolation of people with disabilities. That tells you the real truth.

There are clearly persistent negative stereotypes about disability, and these result in people without disabilities having low expectations with regard to the capabilities of those with disabilities. Students also seem to distrust society's professed value of inclusion. They remain uncertain as to whether they will be accepted when they go for field practice.

Four out of the seven DU members agreed that there are negative attitudes at settings for work for integrated learning. Like the students, they view the university environment as inclusive. They have observed that students with disabilities feel excluded in terms of the attitudes of those they encounter in work settings, because they are used to the university environment that is secure and comfortable. A DU member said:

Comfort zone! Comfort zone! We treat them with soft hands here. How will they feel when they go to the workplace? It's cruel out there! If it's cruel for

somebody with sight, what more to those without sight! What more for somebody with a disability, it's very cruel!

The remark confirms that the conditions at work settings for integrated learning are difficult for all people, and worse for people with disabilities. Wolf (2009) observes that “The parallel to race and gender is not disability but impairment” (p. 135). What Wolf means is that the disability category does exist outside race and gender and people with disabilities are indeed disadvantaged. In the present study, students with disabilities have felt particularly excluded in terms of attitudes in the field because they are more disadvantaged than other students without disabilities.

The issue of attitudes in the field being negative to students with disabilities is consistent with the findings in a study conducted by Wiggert-Barnard and Swart (2012). They report that in many settings for integrated learning, negative attitudes towards those with disabilities are still prominent. They observe that attitudes are less negative when those at work settings have worked with persons with disabilities before (Wiggert-Barnard & Swart, 2012). While there has been some level of transformation, the issue of negative attitudes at work settings has clearly not yet been overcome. This lack of transformation could be understood to be an effect of the dominance of the individual model, in which the able-bodied are considered to be ‘normal’. People in the field probably rarely encounter the limitations or deficits seen in students with disabilities, and probably view them negatively as a result. All the statements of the 11 students and four DU staff members suggest that the Institution has made significant transformation in terms of attitudes towards disability, while work settings for integrated learning are still not welcoming. Even the student of Medicine who had earlier said they are included at the hospitals, later stated that he felt uneasy when going to do his field practice.

Members of the DU believe that students’ experience of negative attitudes at the work settings for integrated learning is a result of a lack of necessary ‘support’. Three members of

the seven stated that this lack of support arises because DU staff does not support students during their field practice. One of them stated:

Our mandate is to give students with disabilities who are registered with us support. There is that gap when they go to workplace. We don't follow them up. We should get into that gap.

This DU staff member's perception is that it is still their responsibility to support students with disabilities when they go for field practice. This raises the issue of continued support for students with disabilities within work settings for integrated learning. Botham and Nicholson (2014) contend that senior university managing stakeholders are in the best position to assist students with disabilities at work settings for integrated learning. The DU therefore could support students with disabilities if they were given the means to do so by the authorities at the Institution. It could be argued that in the present study, the students with disabilities might feel isolated and excluded in the field because the support they receive at the Institution is not yet extended to their field practice.

6.7 COLLECTIVE AND INDIVIDUAL EXPERIENCE OF DISABILITY

The present study reveals that across the three programmes, students with disabilities confront the same obstacles that affect them as a group, and they also encounter specific obstacles as individuals, that result from their specific disabilities. It is in that respect that their professional learning is negatively affected as a group and individually. When illuminated by Critical Disability Theory, professional learning by students with disabilities could be explained in terms of collective and individual experience of disability (Simons & Masschelein, 2005). The two issues are discussed in detail in Chapter Three in Section 3.2.8. Collective experience of disability is shown when, across the three programmes, students with disabilities confront the same obstacles. Nine out of 12 students with disabilities of different races and genders, ages and categories of disability are affected in the same way in

their professional learning by inadequate funding and the resulting delays. All the nine were unable to buy materials for their field practice. Individual experience of disability is illustrated when students with specific categories of disabilities encounter obstacles in their professional learning which are not experienced by the whole group. Three students with visual loss in Law and Education confront the obstacle of inaccessible learning materials, and are therefore excluded differently from others in their learning. The two with total visual loss are further limited by a lack of an announcement facility in lifts in buildings, as well as in the bus at the Institution, and in public transport when they go for field practice. Again, four students with physical disabilities in the same programmes confront the obstacles presented by the inaccessible built environment and transport, both at the Institution and work settings for integrated learning. Thus, out of the 12 students with disabilities, nine are further limited in their professionalisation because of specific impairments. Individual experience of disability is further illuminate when students with the same category of disability are not limited in the same way. There are four students with partial hearing impairments who participated in the study. Two in Education are limited in their professional learning because of the shortage of language interpreters and that those who are available are not educationists. One in Medicine and one in Law are not limited in this particular way, although they have the same impairment. It is not in the interest of the study to discuss the impairments of the students, but individual experience of disability came out strongly in the data with regard to specific categories of disabilities. Thus, students with physical disabilities, partial and total visual loss, and hearing impairments, could be more limited in their professional learning, hence delay in completing their programmes of study. Evidence to that shows in data when all the four with physical disabilities and the other three with visual impairments, did not complete their programmes of study within minimum time. For those with hearing impairments, it is only one out of the four who completed his programme of study within

minimum time. It is important that collective and individual experiences of disability are understood, so that obstacles and opportunities in professional learning are not homogenised.

6.8 OPPORTUNITIES AND OBSTACLES IN PROFESSIONAL LEARNING

According to the participants' accounts, the results show that both at the Institution and the work setting for integrated learning, students with disabilities' professional learning is promoted on one hand, and on the other hindered. The section below discusses institutional transformation and individual accommodation in the light of how they present opportunities on one hand and on the other, confronted as obstacles by those students with disabilities in their professional at the Institution. These are further theorised with the use of Critical Disability Theory and Decolonial Theory, to yield findings of the study and evidence provided.

6.8.1 Institutional transformation

The present study reveals that there has been some level of transformation at the Institution. It incorporates attempts to include diverse students with and without disabilities to access professional learning. Institutional transformation is a response to the ideals of inclusion, as the Institution exists within a context broadly informed by democracy. Efforts on the part of the Institution towards transformation show in data. The extent to which the built environment has improved suggests that a concerted effort is being made to enable all students to access learning venues. Though there are still some instances of inaccessibility to the built environment particularly in old buildings, and partial accessibility in new ones, in large part, the principles of Universal Design have been used in the construction of new structures. Such is an indication that the inclusion of diverse students is considered from the outset. Both the DU members and students with disabilities acknowledge and appreciate that there has been great improvement in terms of access to the built environment at the

Institution. In addition, the extent to which the attitudes of stakeholders have changed to accept and welcome students with disabilities reflects a shift in their view of disability. Positive attitudes could suggest that all diverse students are accepted and diversity is embraced. Across the three programmes 11 students with disabilities acknowledge that attitudes at the Institution are welcoming, and they feel included. In addition, the two medical students with disabilities' perception is that the teaching practice in Medicine caters for their individual needs and includes them. Students with disabilities in Law and Education state that there are lecturers who make effort to accommodate them. It could be seen as consideration of all diverse students. All of the positives illustrates the payoff of the focus on institutional transformation, and could be seen as evidence of the Institution conforming to the ideals of transformation.

However, despite a degree of institutional transformation, the study also reveals that not all diverse students' unique learning needs are catered for, and students with disabilities are therefore unable to access adequate professional learning in the minimum time. This emerges again and again in the data. Certain practices and structures at the Institution remain that do not include diverse students. Among the three professional degrees, only the two students in Medicine believe that students with disabilities' unique learning needs are fully catered for in the teaching they have been exposed to. Those in Law and Education stated that only a few lecturers 'accommodate' them in their teaching, and that many exclude them. While 'few' and 'many' could be critiqued for not quantifying precisely, I take it as simply stated by the participants that those who are willing are less than those who are not. Evidence to that, are isolated incidents of the unique needs of those with disabilities being catered for as stated by students of Law. I argue, this does not amount to total institutional transformation in which teaching is totally inclusive to all students. The physical structures are also partially accessible, as detailed in the accounts in Section 6.5.1. There is also minimal transformation

at work settings for integrated learning, as shown in students' accounts across the three professions. Students with disabilities are therefore limited in their professional learning at the field. While the two students in Medicine have a different perspective, it could be that they have already achieved as one was in the sixth year and the other is a post-graduate. Students with disabilities from the first year to the fifth year of study were not interviewed, and this includes those who might have dropped out before they got to the final year. Though there is some level of institutional transformation, students with disabilities could still be limited in terms of the interactive process of professionalisation.

6.8.2 Individual accommodation

The issues of access arrangements, such as assistive devices, extra time for examination, and provisions of funding and transport, specifically for students with disabilities to learn like other students at the institution, all allude to the issue of individual accommodation. The present study shows that individual accommodations in the form of provisions are an attempt to meet policy obligations of non-discrimination. All seven DU staff members stated that the Institution abides by policy. The evidence of individual accommodation at the Institution is the presence of a DU as a separate structure for supporting students with disabilities. By virtue of it being a separate structure, we can conclude that there is not yet total transformation in which all diverse students are included. The separate structure supports those with disabilities, for whom the context was not originally designed. In addition, the fact that there are a few lecturers willing to accommodate students with disabilities shows that there is individual accommodation at the Institution.

The present study also reveals that individual accommodation for students with disabilities, which aims to enable them to learn, is not extended to the setting for work for integrated learning by the stakeholders at the Institution. In a British study which puts forward a way in

which ‘support’ could be extended, it was observed that the stakeholders from both contexts worked together, through a predetermined procedure (Botham & Nicholson, 2014). The study shows that this collaboration assisted students with disabilities’ professional learning in the field. In the present study, it was discovered that supervision of students in field practice is done by the academics. A student of medicine said that: “I get all the guidance in practice that is related to the medical degree. Our lecturers are also doctors”. However, there is no continued support for students with disabilities from the Institution provided by the DU staff members. Five DU members stated that students with visual loss who used JAWS at the Institution were limited in their field practice when they were expected to use Braille. The members stated that no one trains them to use Braille when they are in the field. Four DU members stated that it is not their responsibility, neither is it the responsibility of the university, to follow up with students with disabilities and give them support when they are doing field practice. One of them said:

I don’t see it as part of Disability Unit. It’s also not part of the University. We support them here but we cannot say we will do that until they get work!

Three members stated that they see it as their responsibility to work with the stakeholders at the site of work for integrated learning to assist students with disabilities’ practical learning, but that there are no funds allocated for this additional support. Without individual accommodation to enable students to access adequate professional learning in the field, the time they require to complete the specific programmes could be increased, as the student might take longer to meet the practical requirement of the specific programmes.

When individual accommodation is viewed through the lens of Decolonial Theory, it could be explained in the light of structures and practices that are not originally designed for all people in their pluralities and differences. Due to categorisation of people and using normalcy as the standard, society at large and specific social contexts have been designed for ‘normal

people' (Quijano, 2000). However, due to goals of inclusivity and policies of non-discrimination, the Institution is accessible to all diverse students who qualify academically. Eligible students with disabilities have also come into the Institution but the structures and practices that are designed for 'normal' students, hence exclude them in professional learning. Hence, for students with disabilities to be able to access professional learning alongside other students, the stakeholders at the Institution have specific support and provisions they make for those students to be accommodated also as a group and individuals. The evidence of structures and practices that are exclusive to students with disabilities, resulting in them individual accommodated in professional learning, are shown in Chapter Six. While individual accommodation affords students with disabilities to also access professional learning, it could be seen as problematic because the focus is on students with disability as a separate group and not all diverse students. The teaching practice should be fully transformed to include all students in their diversities.

6.9 ACCESS TO PROFESSIONALISATION AND COMPLETION

Professionalisation is a process, and should not be rigidly understood as one that ends at graduation, but as a life-long process in an individual professional career, because it continues even after one graduate into a profession. Before graduation, it involves teaching and professional learning, both at an institution of higher learning, and at a site of work for integrated learning, where theoretical knowledge is applied in practice.

The overall statistics of the completion of the programmes is understood in terms of throughput. However, this term has not been used in the context of the study because it is a broad concept which is understood and defined in different ways in different contexts. In the present study however the concept is used in the context of simply meeting all the requirements of specific professional programmes and completing them within the minimum

set time limit. Though it can be considered reductive to use this complex concept that way, its comprehensive meanings would make the study veer off from what the study intends to bring out. Thus, the phrasing ‘completion of the programme timeously’ is preferred. The issue of professionalisation, which implies the same as socialisation into professions is discussed in detail in Chapter Two, under Sections 2.7

The present study reveals that the professionalisation of students with disabilities in the three programmes is not adequate to prepare them to graduate into professions within the minimum stipulated time for each programme. It is as a result of inequitable practices which limit students with disabilities’ professional learning, both at the Institution and at work settings for integrated learning. However, the presumption is that students with disabilities have equal opportunities of professionalisation to complete the specific programmes in a timely fashion at the Institution. The data revealed this repeatedly. All the seven DU staff members said there is no discrimination on the grounds of disability at the Institution because policy does not allow this. Their view is different from that of the students. The students cite instances of unwillingness of lecturers to include them, for example. DU staff stated that when students with disabilities disclose their disabilities, academic staff accommodates them in their teaching. They also view the funding for students with disabilities as adequate to enable them professional learning. The members also justify the provision of a single bus as a ‘reasonable accommodation’, because numbers of students with disabilities are limited. This suggests that they think students with disabilities do access learning because they are adequately provided for at the Institution.

6.9.1 Graduation into Medicine

The study reveals that students with disabilities in the programme of Medicine believe they have adequate access to professionalisation at the Institution and at the site of work for

integrated learning. They also think that they can complete the programme within minimum time, and graduate into the profession. Both such students, whose disabilities fell into separate categories, and who studied at different levels, share the view that they are included in professional learning. Their conception is that they apply their knowledge well in the field because the Institution exposes them to conditions similar to those in hospitals. In addition, the students easily access the hospitals for field practice because they are provided with a bus by the university. Though they mentioned that the built environment is inaccessible at the work settings for integrated learning, these specific two are not negatively affected because of their disability categories.

In terms of completion time, both students' perspective is that they will complete the programme within the set time. The under-graduate said: "I know I have to finish next year, I have to graduate." The post-graduate stated:

The University has not put a barrier for me to complete the programme. In the Medical field, this university has enough support for students with disabilities to go through in time and the most important thing in Medicine is management of time.

When the two students' completion time was followed up on by the researcher, the under-graduate did not respond but the post-graduate responded that:

Yes, I graduated in June last year [2015] with a distinction. I moved from [Name of university provided] and I am now doing my PhD at the University of [Name provided]. The move was based on a project and not because I like the university.

The student completed his programme within minimum time as he had predicted. However, while the medical students' view is that they have an equal access to professionalisation their perspective might not be conclusive. Only two students were interviewed, and this is not a

representative sample. It could be argued that since one was in their final year and the other a post-graduate, they are already at a higher level of achievement and who could be exceptional. The post-graduate had previously completed the under-graduate study within the minimum time of six years for Medicine, and had passed well with a final mark of 74%. The student also passed his post-graduate study within the minimum time, and obtained a distinction. All of this is evidence that this particular student is exceptional. Both the students interviewed are also not limited in terms of built environment. It could be argued that although they have a different perception of their learning from those of the Education and Law students, their opinions might not be representative of the study of Medicine as experienced by students with disability, as other disability categories are not represented. Thus, while their perception on completing in time is positive, definitive conclusions cannot be drawn from such a small sample.

6.9.2 Graduating into Law

The study revealed that students with disabilities in the programme of Law have limited access to professionalisation and tend not to graduate into the profession within the minimum time. They confront obstacles that interfere with their professional learning, both at the Institution and at work settings for integrated learning, and this contributes to them failing other courses, carrying them over to subsequent years, and becoming overloaded. Evidence for this is provided in the accounts of the participants in section 6.2.2. In terms of graduating into the profession, students with disabilities take longer. All the four students who studied Law, for example, stated that their completion time is delayed. One of them said: “A lot of us are failing and we end up staying here even longer than other students”. When I followed up, none of the fourth year students who should have graduated in 2015 had graduated yet. Thus, though students with disabilities can complete the Law programme, they take longer than

others. Some of them do not complete at all, but drop out of the programme. Evidence for this can be found in the following statement:

It's extremely difficult for you to pass, it's exceptionally hard, you will have many courses left over again for the next year and then the next year and then the next year, so you end up being here for years and you drop out because struggling will discourage you.

6.9.3 Graduating into the Teaching profession

The present study reveals that students with disabilities in Education are also limited in their professionalisation. Reasons for this are exclusionary practices and exclusionary media of teaching, the inaccessible built environment at their university schools, and some work settings, in which inequitable practices persist and inhibit students' professional learning. These students also take longer to complete the programme. The students' perspective is that they are limited both at the Institution and at work settings for integrated learning. The obstacles they confront in learning have already been shown in the participants' accounts under Sections 6.2.3 and 6.5. However, it should not be overlooked that three post-graduate students passed and completed previous programmes (under-graduate, Honours and Master's) at the Institution, and another three have reached the fourth year of their study. Their success could be a result of individual accommodations at the Institution. According to the students, a few lecturers are willing to include them in their teaching. In addition, better field work practice in special and accommodative mainstream schools also helps. However, while these can be considered to be providing opportunities for professionalisation, these opportunities remain minimal. Only students who had already reached a relatively advanced level of their studies were interviewed. Though students said that a few lecturers are willing to accommodate them, this was only reported by Law students, who cited isolated incidents of such accommodation. It may not apply to students of Education. Willingness to accommodate and actual accommodation are not the same. Thus, as is the case in the other two

programmes, it can be concluded that professionalisation to graduate into the profession in a timely manner is limited in Education. Four out of six students stated that they completed the programme later than other students. One stated: “All those things lead you not completing the degree or completing in five years when it is four years”. A post-graduate student with disabilities also confirmed:

It took me five years to do my BEd degree. Yaa it took me five years when the programme was actually four years.

When I followed up the three fourth year students who were supposed to have completed their studies in 2014 and graduate in 2015, two of the three had not yet graduated in the beginning of 2016. One of them stated:

I finished my degree last year [2015]. I had health issues. I fell three times and broke my arm and I also lost my mother who had cancer for four years. I am graduating at the end of the month [2016].

The statement reflects that students with disabilities, like other students, confront other obstacles that are personal and social, and these compounds to delay their completion of a specific course of study.

Decolonial Theory help us to understand the limited access to professionalisation and the delay in completing the programmes within stipulated timeframe in Education and Law. These phenomena could be explained in terms of lack of total inclusion, in which all students’ unique learning needs are fully catered for. Ndlovu-Gatsheni (2013) argued that though there are efforts of transformation, total inclusion of all is presently not yet achieved. Indeed the present study did not encounter total inclusion, both at the Institution of higher learning and work settings for integrated learning. It is illustrated by the persistence of inequitable practices of teaching and learning, the inaccessible built environment, and

negative attitudes in the field. In their own statements, eight students with disabilities out of ten in Education and Law programmes reported that they completed the programmes later than other students as a result of instances of their unique learning needs not being catered for in professional learning. The statements are not repeated because they have been cited under Sections 6.6.2 and 6.6.2.3. In attempts to meet the unique learning needs of students with disabilities in an environment that is not totally transformed, there are access arrangements and provisions at the Institution for students with disabilities. The aim is for them to access professional learning as other students. If the Institution was total inclusive, there would not be a need for individual academic accommodations. Though the Medical students with disabilities perceive that their unique individual needs are catered for, this is not definitive proof of total inclusion. When one of them stated that he feels uncertain about how he would be accepted in the field because of negative attitudes, it reveals there hasn't been total inclusion even in integrated settings. Thus, across all three programmes, it could be argued, professionalisation is limited, and this results in students with disabilities taking longer to graduate into the respective professions at the Institution.

6.10 ADDRESSING THE PROBLEM OF THE STUDY

There are limitations imposed on the professional learning of students with disabilities at the Institution. From the students with disabilities' own accounts, we can see that there are still inequitable practices and structures across the three specific programmes that hinder their adequate professionalisation, and delay their completion of the specific programmes. There is therefore a low completion rate of the specific programmes, and this could be the reason for the imbalance between national skills and higher education output.

At the Institution, students with disabilities confront obstacles in their learning that result from inaccessible built environments and teaching that does not cater for their unique

learning needs, specifically in Law and Education. However, the students are individually accommodated to learn like other students through the support of funding, assistive devices and accessible transport within the Institution. These ‘accommodations’ and ‘supports’ are however not extended to work settings for integrated learning. Professional learning is an interactive process that requires the application of theory to practice, and the students’ professional learning in the field is therefore limited. This also impacts their completion time. It must be restated however that students who participated in the study in the three professional programmes are few; hence conclusive findings cannot be drawn.

6.11 CHAPTER SUMMARY

The Institution of higher has not transformed adequately, in that it does not yet provide *all* students with adequate access to professional learning. Also, while students with disabilities are individually accommodated, there are obstacles they encounter related to persistent exclusionary practices and structures. Thus, though the presumption by the DU members is that students with disabilities in the three programmes have the equal opportunities of professionalisation at the Institution, this is not always the case. It is also presumed that they are given the opportunity to graduate into the specific programmes within minimum time, and they do not. It can be concluded therefore that the inequitable structures and practices limit students with disabilities, and contribute to the delay in their completion of the specific programmes. The students with disabilities who have a different view are those who have already achieved and succeeded, and their perception might not be representative.

Total institutional transformation, and radical inclusion, in which the unique learning needs of all students are considered, both at the Institution and at work settings for integrated learning, are required. In the next chapter, the recommendations of the participants for change and improvement are presented and discussed. This is of particular importance, because

participants' voice is privileged in the study, and policy makers should use it as the basis of their interventions.

CHAPTER SEVEN: PARTICIPANTS' VOICE FOR CHANGE AND IMPROVEMENT

7 INTRODUCTION

This chapter presents and discusses recommendations for improving entry into the specific professional degrees, preparation for graduation into the respective professions, and completion of the programmes by students with disabilities at the Institution. The aim of this study is to provide scholarship based on participants' voice with which policy-makers can build their interventions in higher learning. The quantitative results and findings from the survey are presented first, followed by the qualitative research. As in the previous two chapters, the analyses assumes both an emic and etic structure, in which the results are first presented and then theorised through the dual lenses of Critical Disability and Decolonial Theories, and evidence is hereby provided for the findings of the study.

7.1 QUANTITATIVE RESULTS AND FINDINGS

Four statements that relate to change in terms of entry, professional learning at the institution and completion of the programmes are collated and analysed in relation to the participants' responses to them. Table 7 presents a summary of the specific statements and the participants' responses. My analyses are also presented.

Table 8: Perceptions of Participants on the Need for Change

	STATEMENT	PARTICIPANTS' RESPONSE AND ANALYSIS
1	<i>Entry requirements should change to improve students with disabilities' entry</i>	Seven DU staff members strongly disagree and two disagree with the statement. Both students of Medicine agreed. Three Law students strongly agreed and one agreed. Four students in Education strongly agreed and two agreed. The distribution suggests that across all the three programmes, the students' perception is that the entry requirements should change to improve their entry. The DU staff members however have varied opinions on this.
2	<i>Teaching at the institution should change to improve students with</i>	Four DU staff members agree and five disagree. One medical student strongly disagrees and another disagrees. Three Law students strongly agree and one agrees. One student in Education strongly agrees and five agree. Both students of Medicine do not think teaching should

	<i>disabilities' learning</i>	change to improve their learning at the Institutions. The DU members have varied opinions about changing teaching and students in Law and Education think it should change.
3	<i>There should be change in the field to improve students with disabilities' learning</i>	Six DU members strongly agree and three agree. All four students of Law strongly agree. Four students of Education strongly agree and two agree. Both students in Medicine disagree. Except for the two medical students, all other participants' perception is that there should be change in the field for students to do their field practice well.
4	<i>There should be change in students with disabilities' learning at the Institution to complete the specific programmes in time.</i>	Seven DU staff members strongly agree and two members agree. All four in Law strongly agree. In Education four strongly agree and two agree and in Medicine both disagree. All DU staff members and students across the three programmes think that there should be change at the institution for students with disabilities to complete their programmes of study within minimum time.

The broad opinion is that there is need for change to improve entry, professional learning and completion of the programmes. Though there are both negative and positive cases, the results lean towards a need for change, with an overwhelmingly positive response for this need in the disciplines of Education and Law. The nuances in the negative cases will be further explored. Since most respondents agree that there is a need for change, they were asked to provide recommendations, because it is their voice that needs to be heard by policymakers. Systemic transformation, partnership and self-advocacy emerged as specific recommendations from participants. These comprise the qualitative findings that are presented and discussed in this chapter.

The thesis of the chapter is that the voice provided by the participants and the recommendations they make are likely to contribute to improving students with disabilities' access into the specific professional degrees at the point of entry, professional learning and completing the specific programmes within the minimum time stipulated. It is because the participants speak from lived experience. However, caution has to be exercised at

intervention because recommendations also have specific limitations that could have negative implications on change. The specific limitations will be outlined at the end of the chapter.

7.2 SYSTEMIC TRANSFORMATION

The participants recommend systemic transformation as a process for improvement and change. The systems to be transformed are high schools, the Institution, and work settings for integrated learning. It could be argued that the three are interactive and that they influence each other and their boundaries are porous and permeable. All three thus need to be transformed if there is to be change and improvement. The issue of systematic transformation is discussed in detail in Chapter Two.

7.2.1 Transformation in schools

Nine students with disabilities concurred with all seven DU staff members that the primary obstacle to their entry into the specific professional degrees is in their schooling. Sixteen out of 19 participants recommend that transformation starts in high schools, where learners with disabilities are educated. There was however silence in terms of how the transformation should be facilitated. All seven DU staff members stated that the way disability is understood by teachers in special schools is one of the reasons for limitations at entry. The members then suggested that they should go to high schools together with some students with disabilities who are studying the specific professional degrees at the Institution, to speak to the teachers. One of them stated: “We need to talk to teachers seriously, so to say, ‘these children can achieve far beyond what you think they can’”. The statement of the DU member speaks to the broad issue of the perceptions of disability in South African schooling. Howell (2006) argues that there has been a significant change in terms of attitudes towards learners with disabilities, resulting in an increase in the number of such learners who access higher learning. While there is evidence of change, there is still a challenge. As Maguvhe’s (2015)

study reveals, teachers do not “understand the transformational and human value of inclusive education” (p. 1). The research suggests that it might be difficult for teachers to implement inclusive education when they do not understand its value. The statement of the DU staff member suggests that there is a need for further transformation because teachers still have to understand that learners with disabilities can achieve more than they expect them to. DU staff members view working together with schools as their responsibility, and one could argue that they should therefore initiate such alliances so as to ensure that learners with disabilities in schooling meet the requisite entry requirements of institutions of higher learning in general and at the Institution particularly.

7.2.2 Transformation at the Institution

The participants agree that teaching at the Institution requires improvement for students with disabilities to access professional learning. Out of the 12 students with disabilities, nine in Law and Education recommend that the practices in these programmes be transformed. They said that lecturers do not fully include students with disabilities and that they view them as burdensome. The students stated that they should fight for inclusion because it is part of the academic staff’s work to teach them. They further stated as students with disabilities, they should demand that management sets a standard of teaching that is inclusive to all students and establish measures that ensure the unwilling academic staff abides by established regulations. A student in Law stated:

If you are going to say the institution is inclusive and allow the person to work here, set the requirements for that person so that he practises inclusion! When you are lecturer with a disabled student in class, this and that is expected of you [...]

Another said:

Demand those things from that person because he is going to get a pay-cheque. He should be here to do work and it should not be a thing that we negotiate with him, it should be part of his job. A foot should just be put down!

A student in Education offered the following:

If we have that power we can change the mind-set of people. When it is not transformed students with disabilities will still experience problems that would lead them to drop out before they finish the degree.

Across all three statements, the common trend is that inclusion of students with disabilities in teaching should be demanded and not negotiated, because without this, they might not complete their studies. The students' perception is that the university authorities should see to it that the academic staff includes students with disabilities and that they themselves should fight for this right. Such active engagement is an issue of self-advocacy. In Swart and Greyling's (2011) study, students with disabilities are reported to view such self-advocacy as another way in which inclusion could be demanded from those who should provide it. In the present study, too, students with disabilities have expressed the need to demand change in the practice of teaching so that it is more inclusive. Their view is different from those described in Swart and Greyling's scholarship, because they think involving the university authorities as an institutional power could also help.

Seven students with disabilities out of the nine do not view the exclusion they face as deliberate on the part of lecturers, but resulting from ignorance. They recommend open discussions with the lecturers who are ignorant about their unique teaching needs. The students stated that it is they who should initiate these conversations and tell the particular lecturers of their disabilities. They stated that this could make these lecturers aware of their needs, which would improve their way of teaching. One student remarked:

We should just get to a point where we actual start discussing it, we discuss the realities of the students living with a disability at the institution and lecturers are expected to understand and partake in such discussions.

The students want to meet the lecturers halfway, because they realise their exclusion is unintentional. Accordingly, creating awareness through talk is seen as a way to drive change. It also seems that the students' view is that it should be those with disabilities who initiate the talks. I would argue that this desire should be viewed in the light of persons with disabilities speaking out to be heard. Hosking (2008) contends that the voice of those with disabilities is traditionally suppressed and marginalised, particularly when they speak on their potentials and roles in society. The statement by the participant suggests that students with disabilities have realised that they should spearhead and initiate discussion, and be heard on the issues of teaching that negatively affect their learning. Awareness alone might not result in inclusion however, but it is hoped that a change could be brought about if lecturers know how to cater for students with disabilities' unique needs in teaching.

Participants also feel that improving the built environment will improve the professional learning by students with disabilities at the Institution. Sixteen out of 19 participants, who include seven DU staff members and nine students with disabilities across the three professional degrees, recommend further improvement of the buildings that are still only partially accessible for those with disabilities. The DU staff members stated that more rails should be fitted in front of the buildings so that students with physical disabilities have a choice of entry and do not lose time in lectures negotiating access from the back of buildings. They said that those students should be able to take the same routes as other students. The staff members further stated that all lifts in all buildings should have announcement facilities for students with visual limitations, so that they are able to locate their learning venues. The students with disabilities added that this kind of improvement could be possible if more funds at the Institution could be directed to the needs of people with disabilities. In the words of one respondent:

The funds should not be directed on one person who would be there at a particular time. Improving infrastructure would benefit even other students with disabilities who would come later.

The student is clearly aware that provision directed to an individual does not help all diverse students, but a total transformation of the built environment could. It is understood as an issue of individual accommodation versus more radical institutional transformation. Oliver (1990) makes the point that persons with disabilities do not need to be ‘accommodated’; rather, it should be the social contexts that should be totally transformed so that all people, including those with disabilities, have access, participate and succeed.

Students with disabilities have ideas on how seating inside the new learning venues could be improved. All four students with disabilities in Law and five in Education, which comprises nine out of 12, recommend that tables and chairs that are connected to each other, be disconnected. They stated that this would enable students with physical disabilities to move the chairs and tables and ensure their own comfort. They also recommend the improvement of the seating arrangements available for students using wheelchairs, who are currently limited by furniture because tables and chairs are on stairs. One student in Education stated that:

Something that could act as a table should be clipped on the side of the wheelchair. The student can then sit on his or her wheelchair and use that kind of a thing to write on anywhere.

The student is cognisant of the fact that persons with disabilities know how seating arrangements could be made inclusive of them. They are intimately acquainted with this because of their lived experiences of disability (Devlin & Potheir, 2006) and for that reason, the voice of those with disabilities should be listened to (Hosking, 2008). It is they who

know exactly how their unique needs should be catered for, and they should thus be involved in all that concerns them. In the present study, the specific ways in which students with disabilities describe how the barriers in the new built environment could be rectified suggests that they are in the best position from the outset to say what form the construction of new buildings should take in order to guarantee their full access.

Three students with disabilities out of 12, in Education and Medicine, have a different view from the rest in terms of improving the built environment at the Institution. The students recommend that instead of directing funding to improving buildings, it should be directed to meet the unique needs of individual students with disabilities, so that they can also access professional learning. They stated that not all students with disabilities' learning is limited by the built environment. Some are hindered by their specific impairments, and improving buildings might not help all of them. One student with physical disabilities stated she watched helplessly as renovations took place on old buildings in her school because they did not help her get to the lecture venue to learn. She stated:

While I was grounded with my broken wheelchair, I was asking myself, how is this construction going on here helping me to go and learn? Maybe they should have started by repairing my wheelchair!

Another one said:

I think everyone who is disabled has specific needs; improving lecture-theatres will not help us. We need things that are more direct to us.

Both statements imply that other students with disabilities view the provisions directed to individuals as important, because they meet their unique needs. When the difference in students' view is placed within the framework of existing Critical Disability Theory, it points to the debate around disability and impairment, discussed in detail in Chapter Three.

Proponents of the traditional social model, such as Oliver (1990, 1996), view the entities as separate and argues that an impairment is not cause for disability, but oppression in the social context. Critics of the model, like Crow (1996), argue that disability and impairment are interactive, and they contend that this conception results in the suppression of persons with disabilities' experiences of barriers. They also note that not all such impairments exist outside their bodies. The two students' statements suggests that some view disability as oppression imposed on them by their context, and want the physical environment transformed to be inclusive of all forms of diversity. Others understand it to be caused by the impairments they have, and they therefore require an intervention that is individual. Disability is a complex issue, and the ways in which barriers are overcome might not suit all persons with different disability categories. Thus, though the emphasis should be on disability as caused by social contexts so that there is total transformation to include all diversities, the effects of impairments should not be overlooked, because they result in exclusion within an ostensibly transformed social environment. Shakespeare (2010) contends that the realities of impairments are not to be ignored because no amount of environmental transformation can totally overcome the challenges faced by persons with disabilities.

7.2.3 Transformation at the sites of work for integrated learning

Students with disabilities across the three programmes believe that transforming the built environment at the site of work for integrated learning could improve their field practice. Ten out of 12 students in Education and Law recommend improving the schools and the Law Clinic at the Institution respectively. And though they are not personally affected, the two students of Medicine also stated that hospitals need to be improved for better field practice for students with visual and physical disabilities. Common among all the 12 students' views is the belief that the built environment at the specific work settings limits mobility because of

a lack of rails and ramps. They further point to the following factors: the lifts are not always working and do not get to all floors, ground gradients are too steep and there are pot holes that make it difficult for those in wheelchairs and on crutches to get from one point to another. According to one of the students:

I use a wheelchair and you give me money, will that money help me to get to second floor, but then if they put a lift, will it not help me?

The statement reiterates the issue of individual accommodation and transformation of the context, already discussed in Section 7.2.2. Though other students seem to want intervention directed at them, it seems this particular student thinks that even at work settings for integrated learning, it is the built environment that should be transformed rather than the provision of funding for individuals.

Nine students with disabilities out of the 12 across the three professional degrees view the inaccessible built environment at the site of work for integrated learning as the responsibility of the authorities and government. They stated that it is those stakeholders who are to improve the built environment as it hinders students from doing their field practice well. One of the students of Law stated:

Corporate firms are not wheelchair friendly; you can't get in those buildings. There is a lot that needs to be done by Government and the people responsible so that students with disabilities are accommodated for their practice.

A medical student also said:

The Government and other stakeholders, the hospitals, the schools should all work together to make buildings accessible. They should do something about the structures, not the institution.

The students' statements speak to the broad issue of transformation in terms of the built environment at the sites of work for integrated learning in South Africa. Swartz and Schneider (2006) suggest that retro-fitting existing buildings, so that they are accessible to

all, is challenging, expensive and it amounts to a pipedream. The students seem to understand that the government agenda of transformation also includes transforming physical structures at work settings for integrated learning. It is the state's and other applicable authorities' responsibility to transform the built environment. This specific recommendation could yield change, though there might be delays. The stakeholders in government have a steering and coordinating role, and are responsible and accountable for restructuring (National Council of Higher Education, 1996). As a result, when called upon to do what they are responsible for, there is an obligation to comply. However, in terms of implementation, that might take a long time because there could be bureaucracies involved at those levels and navigating them could be time consuming.

The recommendations to improve the built environment at the Institution and at the site of work for integrated learning respectively are consistent with the findings of previous scholars (Maritz, 2008; Fitchett, 2015). These specific scholars reported that the issue of inaccessibility at work settings has been a long-standing problem in South Africa and, unlike in higher learning, that problem could also take time to be overcome because there are regulations that are to be followed in terms of retrofitting public and private buildings (National Buildings Regulation, 2008). The specific literature on this matter is reviewed in detail in Chapter Two. What my work reveals is that when students with disabilities are involved in construction from the outset, they can contribute to the construction of accessible buildings because they know exactly what they need.

In terms of the recommendation for transformation of the three systems (schooling, institutions of higher learning, and work setting for integrated learning) participants understand that these systems are influenced by each other. For improved entry for students with disabilities into the three professional degrees, their professional learning and the

completion of the programmes within the minimum timeframe, all three systems should interact and be transformed in specific ways. This would be in line with an understanding that it is the social contexts that need to be transformed and made inclusive (Oliver, 1990), and not persons with disabilities who need to change in order to be included. We can see this when 16 out of 19 participants, both the DU and the students with disabilities, recommend transformation in all three systems. The seven DU staff members proffer ways in which that transformation could be achieved. Also the recommendations for improvement in teaching at the Institution and support for field practice at the work setting for integrated learning shows that there is an understanding that both are important for professional learning. It seems that the participants also understand that the process is interactive. Even if the Institution transforms, if the work settings do not do the same, students with disabilities will still be limited in their professional learning and might not complete the specific programmes in time. Nevertheless, transformation of the three systems might not be easily achieved. The Second National Higher Education Summit (2015) reports specific limitations in the system of higher learning as outlined in Chapter Two in Section 2.5.2, and concludes that “very little systemic work has been done at national level to transform university institutional cultures” (p. 12). By implication, schooling and work settings have also not adequately transformed, and these other systems are intertwined and interlinked with higher learning centres.

When the recommendation of systemic transformation is viewed through the lens of Decolonial Theory, it could be seen in light of efforts and initiatives that are being undertaken as informed by goals of transformation and inclusion, and that are already taking place in South Africa. The inequalities of the past and segregative tendencies are being addressed at different levels, but these measures are more pronounced in higher learning (Ndlovu-Gatsheni, 2013). Evidence of this point can be gleaned at the Institution, where there has been improvement in the built environment, with construction of new buildings which take diverse

access needs into consideration. Students with disabilities in Education also stated that some mainstream schools are accommodative to them when they do their field practice for integrated learning.

Efforts of transformation taking place are consistent with relevant literature. At work settings for integrated learning, the government's policy of restructuring is already being carried out through the DHET 2011-2014/15 plans (Department of Higher Education and Training, 2011). Similarly, in schooling, there has been a degree of transformation which has led to learners with disabilities being able to access higher learning (Howell, 2006). While efforts of transformation should be acknowledged, the specific systems are not yet totally transformed at present. Since efforts are being undertaken to make education more inclusive, the participants' recommendations emphasise the urgent need for this work to continue.

7.3 PARTNERSHIP RECOMMENDED

Partnership is viewed as an approach that could improve entry into the specific programmes, professional learning and completion of the programmes within minimum timeframes by students with disabilities. Such forms of collaboration are recommended for specific stakeholders within the Institution, between the specific DU stakeholders at the Institution and those in high schools, within the Institution, at the work setting for integrated learning and for stakeholders in the Department of Higher Education. Partnership might have been recommended by the participants because of the inextricable connectivity of the three systems. An example of an effective partnership between higher learning and work settings for integrated learning is discussed in detail in Chapter Two.

7.3.1 Partnership between the Institution and high schools

Partnerships between the DU members as stakeholders from Institution and teachers at specific high schools where learners with disabilities learn could improve entry into the

professional degrees by those learners. All seven DU staff members recommend that there should be such partnership because it will help to improve the learners' grasp of the required subjects, as well as points to gain entry to the respective degrees. They stated that members of the DU should go to these schools to assist and they should speak to teachers about how to prepare learners with disabilities in Maths and Science subjects at Matric levels. They stated that they should also make learners with disabilities aware of the entry requirements and admission procedures into the specific programmes. One of their statements was:

The University has to work with high schools because we cannot change the entry requirements for students with disabilities. It's not fair for other students. We should work with teachers to strive to help their students get the necessary qualifications.

Another stated: "We need to tell the disabled students that life gets better by getting into programmes like Law, Medicine and Education at the University". The statements raise the issue of transition from high school to higher learning by learners with disabilities, and university readiness in South Africa. Regarding the former, Howell (2006) points out that there are low expectations of learners with disabilities in schooling, and they are therefore not appropriately advised on choices of subjects that would enable their access to higher education. In terms of the transition from high school to higher learning, there is inadequate preparation of the learners to participate and succeed at university levels (DoE, 2001a). The DU statements suggest that they view partnership as a tool for closing this gap between high schools and higher learning, since they undertake to work with both teachers and learners.

7.3.2 Partnership among the specific stakeholders within the Institution

Partnership between specific stakeholders at the Institution was seen by participants as improving the professional learning of students with disabilities. Eight students with disabilities out of the 12, across the three programmes, recommended that the DU staff

members, lecturers and themselves (who have a lived experience of disability), partner at the Institution. All the eight of them stated that they should be included in the partnership so that they could voice how they want to be taught and learn. The students further stated that the partnership should also include the university authorities who should support the DU staff in its training of academic staff. A student with disabilities stated: “The university authorities must be aware of the support systems so that they work together to enforce them”. This statement implies that power is viewed as authoritarian; a repressive thing possessed by particular social groups, classes or authorities in an institution, who “reign it over and down upon others” (Tremain 2005, p. 9). The student’s statement reveals that students with disabilities understand power in this way, and that the university authorities could use it to enforce compliance to partnership by the specific stakeholders. While power is understood this way, it might not yield the expected results because it works best when exercised to enable subjects and not to constrain them (Foucault, 1982). In other words, it can work effectively when used persuasively and not coercively.

All seven DU members also felt that partnership between themselves and academic staff would advance the teaching of students with disabilities at the Institution. Detailing what form the partnership should take, all seven DU staff members stated that they should train the lecturers with regard to how to teach students with different disabilities. Three members out of the seven noted that this training is already happening at the Institution in the form of workshops which they conduct with new members of staff on how to educate such students. One of the members stated:

We do offer workshops four times a year on how to teach students with disabilities. Usually we get two or three lecturers who are interested. There isn’t a lot of interest from the academic staff.

The statement speaks to the challenges of training of academic staff members in the teaching of students with disabilities in the South African context of higher learning. Matshedisho (2007) argues that because workshops offered by DU staff are not compulsory, very few lecturers attend them. The words of the DU staff member could imply that the academic staff at the Institution might not be interested in attending the workshops. I would argue that while it is probable that the partnership recommended could yield positive results, the cooperation of the all parties is not guaranteed. Poor attendance of the workshops organised by DU staff for lecturers at the Institution illustrates it. Lorenzo, kaToni and Priestley (2006) observe that there are many obstacles to partnership because of such forms of resistance.

7.3.3 Partnership between the university and the workplace stakeholders

Partnership between the DU members as university stakeholders and individuals at work settings for integrated learning is viewed as a way to increase the capacity for professional learning by students with disabilities in the field. All seven DU staff members recommend such partnering. The DU members specified that their role in these partnerships should be continued support, not supervision. They stated that there is a dearth of this kind of support in the field and it could be developed by them partnering with the staff members in these settings. Five out of seven members of the DU stated that they should help the particular stakeholders to understand the assistive devices the students with disabilities use at the Institution, given that these devices enable specialised ways of communicating. There should also be negotiation with regard to specific accommodations that students with disabilities might need for their field practice. Four of the seven DU members noted that this kind of partnership should start before the students are deployed to specific sites of work. In this way, they felt, interaction and the building of relationships could be facilitated so that when the students get there, they can assimilate quickly. One of them stated:

There should be some kind of working together, some coordination of some kind between the University and the workplace because when disabled students get there, they are alone!

What is being pointed out here is that support provided to students with disabilities at the Institution is not extended to the field; hence, students are by themselves when they get there. This isolation relates to the issue of the transition from higher learning to the field by students with disabilities. In Botham and Nicholson's (2014) study, they observed continued support of students with disabilities at the field from the stakeholders from the university, because the stakeholders who included tutors from the university, staff at the site of work for integrated learning, and students with disabilities themselves, partnered through a predetermined plan (referred to as a procedure), which they used to "document those students' placement needs, their support and progress in terms of practice" (Botham & Nicholson, 2014, p. 5). These findings suggest that such a procedure helps to guide how the partnership proceeds and ensures the commitment of all parties. Similarly, the DU member's statement reveals that they also view working together as beneficial in terms of continued support to the field. However, in the present study, all seven DU staff members do not recommend any specific plan for such partnering. It is argued that while a partnership could yield change and improvement, there could be limitations in terms of the continued implementation of that support. As specifications on how to establish partnerships are not provided, accountability and responsibility could be minimal. Also, the DU members did not recommend that continued support be integrated into policy. Without any kind of instrument of enforcement, the well-intended idea of partnership to enable the improvement of students with disabilities' professional learning in the field can only be in the form of word and not in practice (Holloway, 2001).

7.3.4 Partnership between the Institution and the Government

DU staff members view partnership between the stakeholders at the Institution and those at the Department of Higher Education (DHET), such as government representatives, as a sensible step for ensuring the improvement of professional learning for students with disabilities. Five out of the seven DU staff members said that a lack of continued ‘support’ for students with disabilities in the field is due to a lack of fund allocation for this purpose. One member stated: “Students with disabilities come here; we support them, when they leave the University to the field, that’s all”. They stated that they are not able to follow up with those students when they go to do their field practice at work settings for integrated learning because funds are not available. They recommend the responsible stakeholders work together to raise funds for these ends. According to one such participant:

As a university we should work together with the Government because even if the University might wish to help in that there is no budget for that. There should be a budget from the Department of Higher Education specifically for that transition.

The statement speaks to the broad issue of funding ‘support’ for students with disabilities in higher learning in South Africa. Though there is a specific bursary for students with disabilities (NSFAS, 2013), it does not cover costs for field practice for those studying professional degrees, nor is there any fund allocation for continued support by the DU staff members in the field. By contrast, in the UK, higher learning has Disability Living Allowance and Employment and Support Allowance (Fotim Report, 2011) for students with disabilities. I would argue, therefore, that the lack of funding to ‘support’ field practice could impact negatively on professional learning in the field (which is a necessary part of professionalisation). The DU member statement suggests the University should work with the DHET in order to fund the ‘support’ for field practice of students with disabilities at the Institution.

According to Critical Disability Theory, the recommendation of all the partnerships presented here can be explained in terms of collective rather than individual response to improving entry into the specific degrees, access to professional learning and completion of the specific programmes in time. The issue of collective and individual response is broad, but in this study, it is understood in the following terms: while people with and without disabilities are individuals, they also belong with others as members of the society (Simon & Masschelein, 2005). In other words, humans have common ground and organise themselves in groups in which they need each other to work together to solve problems, and there is often a need for a collective response (Simon & Masschelein, 2005). In the present study, partnership has been recommended because there is need to respond collectively to the problem of exclusion of students with disabilities. The evidence that participants' recommendation of that partnership is informed by this collective understanding is shown in the data. Sixteen out of 19 participants recommend partnership in schooling, at the Institution and at work settings for integrated learning. The participants include both DU members and students with disabilities. The available data suggests that the participants understand that combined efforts by specific stakeholders with a common goal could result in change and improvements. Both DU members and students further recommend how these partnerships can be established, with the students stating that the authorities at the university are to enforce them. They deem it necessary, in other words, for those in authority to enforce a policy of working together because they believe that will advance students with disabilities' professional learning.

7.4 SELF-ADVOCACY BY STUDENTS WITH DISABILITIES

Students with disabilities view self-advocacy as a way to change and improve access to professional learning in Law and Education. Self-advocacy is recommended by all 12 students and they state that students should speak out and make their needs known so that they can be included in teaching. The issue of self-advocacy through negotiation is

recommended by students with disabilities at the Institution and at the sites of work for integrated learning. Self advocacy through negotiation is consistent with Swart and Greyling's (2011) findings in their study. Students with disabilities in that study also argued that negotiation is one way in which 'support' could be elicited from those whose responsibility it is to provide it. They further stated that students should challenge, negotiate and demand inclusion, because no one will overcome oppression for them except themselves. In the present study, all the students with disabilities recommend self-advocacy, in which students with disabilities take the initiative to negotiate with those involved with their learning both at the Institution and in the field, for their learning needs to be catered for, to lead to better access to professional learning.

7.4.1 Improvement in terms of access to “entitlements”

While the Institution provides a single accessible bus to students with disabilities, they argue that more buses would go some way to improving their professionalisation. Nine students with disabilities out of the 12, across the three professional degrees, recommended that they should be provided with other accessible buses of their own, within the university and that these buses should also transport them to work settings for integrated learning. One student puts it: “It appears as if I am rude but I am fighting for what I should get as any other student”. The statement speaks to the broad issue of demanding access to “entitlements” by students with disabilities in higher learning. I put the term in quotes because the DU members do not view provision of accessible buses as such but as reasonable accommodation while students with disabilities view it as an entitlement. Speaking specifically of students with disabilities in the context Zimbabwean higher learning, Chataika (2007) views such issues as ways of self-advocating that students could use to order for them to get what they are entitled to. The statement by the student confirms that he is determined to get what he views as an

entitlement. Students with disabilities further stated that the kind of transport they require would ensure that they get to lectures early, and access professional learning as easily as those without disabilities do. They said students with physical disabilities are disadvantaged by the steep terrain between schools at the Institution, and they therefore require their own transport with voice activation. Also, they pointed out that these buses would enable students with visual limitations specifically to get to work settings for integrated learning more easily. In addition, they stated that they do not want other students without disabilities to have access to the buses to which they are entitled: “We should have special access cards because able-bodied students could also crowd those buses”. The student’s statement above speaks to the broad issue of disablism, which is a specific form of oppression that subordinates persons with disabilities and manifests in exclusionary practices at various levels, for example interpersonal, institutional and societal relations (Barnes & Mercer, 2003). Thomas (2010) sees disablism as something that emerges when those without disabilities wield relative authority and power and impose restrictions on the life activities and psycho-emotional wellbeing on those with disabilities. The students with disabilities’ fear that even if they were provided with their own special buses, those without disabilities could also board, and the buses would become crowded, could be informed by the disablism of students at the Institution.

All seven DU staff members have a different view from that of students with disabilities in terms of the provision of more buses to the students with disabilities. They stated, firstly, that providing such buses would be tantamount to discrimination on grounds of disability. Other students without disabilities in the same programmes are not provided with transport to work settings for integrated learning except the Medical students. Secondly, the members stated that the students have transport costs covered in their bursary, while others do not have that provision. They believe that not providing students with disabilities with their own ‘special’

transport to the field prepares them for the specific professions because when they graduate, they will not be given such provisions at the workplace. One of them stated:

When disabled students have been given money for transport, what more should the University do? It's a problem because they don't gain independence they need for workplace.

The statements speak to issue of public transport in South Africa. As argued by Khuzwayo (2011), these forms of transport are inaccessible to those with disabilities, particularly those with physical disabilities using wheelchairs and those with total visual loss. This issue is discussed in detail in Chapter Two. The DU member's statement seems to suggest that when students with disabilities have been provided with money for transport, they are able to access the work settings for field practice. There seems to be an oversight here as for those students it is not only about having provision such as funds, but also that the modes of transport are accessible. Students with disabilities could be seen as conscious and aware that they are entitled to accessible transport of their own because public transport excludes them.

The difference in the views the DU staff members and students, according to Critical Disability theory, has to do with the voice of the disabled (Hosking, 2008). This voice is not listened to. This matter is discussed in detail in Chapter Three. Titchkosky (2003) explains that when persons with disabilities say what the able-bodied want to hear, they are listened to, but when they say what those without disabilities do not want to hear, their voice is interpreted as an inappropriate response to disability. In the present study, the issue of DU staff members being opposed to what students with disabilities are saying in terms of transport could be understood in this light. The evidence for this emerges in the data. All seven DU members disagree with students with disabilities, who have the lived experience of disability, about the kind of transport they require. They speak on behalf of students with disabilities, and argue that the lack of such transport prepares these students for the

workplace when they graduate. Notably, they only raised the issue of discrimination when students spoke on transport but did not do so with other demands the students made. It is against such background that Hosking (2008) argues that it is high time that the voice of those with disabilities is also heard and valued.

When illuminated by decolonial theory, self advocacy recommended by the students with disabilities could be understood as being informed by agency. Agency has been discussed in detail in Chapter Three. As agency involves both speaking out (Spivak, 1988) and action, in the present study students recommend both. They not only recommend change but also speak out, demand and fight to bring it. The students understand that such agency could bring about change in specific practices and structures that oppress them at the Institution. They are familiar with the kind of action that could help them to be included, both at the Institution and at the site of work for integrated learning, so as to improve professional learning. In one reflection on agency a student states the following:

If somewhere and somehow the University is meeting you short, you take up arms and fight for yourself. If the lift is not working, either the lecture stops totally or it changes to another venue. Otherwise things won't change.

Agency is said to start from being aware and conscious of oppression (Ndlovu, 2015). Students with disabilities' awareness and consciousness are revealed when they contest provision of one accessible bus to them, which the responsible authorities justify as providing reasonable accommodation. Across all the three programmes, the students speak against the meaning of reasonable accommodation and express a differing view. Some of their statements are:

I am completely against the notion of reasonable accommodation because of the consequences it has on the particular person with disabilities who is being reasonably accommodated. I have spoken to the bus people to say why we can't have all these buses accessible [...]

Another one stated:

I understand the issue of reasonable accommodation. However, I am completely against it at the same time because it limits me as a person. I need my flexibility. I am not going to be timed. It's almost like you are a rod. You don't have a decisive power

They do not only speak out against the notion of reasonable accommodation but also demand their own bus system that would enable them to access professional learning both at the Institution and work settings for integrated learning.

As further evidence of agency, some changes had already taken place at the Institution. The bus timetable that had been an inconvenience and delayed students' arrival at lectures has been made flexible because they demanded change. When lifts break down, teaching is moved to downstairs venues to include those students with physical disabilities who have difficulty climbing stairs. It started happening when those students refused being carried up to venues on upper levels of the Institution by other students when lifts malfunctioned. A satellite DU facility has been opened at one university school because students with disabilities have demanded this kind of structure. In the light of that, a student states:

The Disability Unit wasn't there before. I am the one who made it to be there! I did a lot of politicking and all that type of thing. And now subsequent to my failures, there is some individual support, only now. Now the support is good, not great but good, in general terms.

Besides changes that have already taken place, students are still speaking out and demanding change on specific practices they view as oppressive. They are demanding that lecturers include them in their teaching. In their statements provided in section 7.2.2 above, students with disabilities are recommending transformation in terms of the way they are taught. They state that the university authorities should compel lecturers to include them because it's part of work for which lecturers are paid. They even state that it is not a case of negotiation, lecturers should just do that. Thus, there is evidence from data that self-advocacy

recommended by the participants is influenced by agency from the students with disabilities, to dismantle oppression.

7.5 INTERVENTION TO COMPLETE PROGRAMMES

The participants do not share a single opinion in terms of changing and improving the time taken to complete the specific programmes. The seven DU staff members recommend three different ways in which programmes could be completed within the minimum specified timeframe. Two out of seven members recommend that the first year in the specific programmes should be a bridging course so that students with disabilities are oriented to the high standard of learning at the Institution. Three of them recommend that the specific programmes be extended because those students who have impairment-specific disadvantages. Another two members proffer that those delays in completing the specific programmes are individualistic, and therefore require intervention that suits the individual students' needs. According to one DU member:

University learning for disabled students is not like school where they are with the teacher the whole day and they are five in class. So their problems for not completing the programmes in time start in schooling. So for them to complete their study, their programme should be extended for a year or two.

When illuminated by Critical Disability Theory, expecting all diverse students to compete the specific programme at the same minimum time could be viewed as disablist to students with disabilities. Disablism is discussed in detail in Chapter Three. The core assumptions of neoliberalism that influence competitive performance by all students are questioned and viewed as disablist to students with disabilities (Devlin & Potheir, 2006). The recommendations provided by the DU staff members in terms of providing bridging courses before the beginning of the programmes and the extension of time for each programme, specifically for those with disabilities, could be seen as useful in terms of reducing inequalities for students with disabilities. Evidence of inequitable practices and structures has

been revealed in the present study. In Chapter six it is shown how students with disabilities are limited in their professional learning. Students with physical and visual impairments confront obstacles of inaccessible built environment and inadequate bus transport at the Institution. They are further limited in field-practice by inaccessible buildings and public transport at work settings for integrated learning. In Law and Education specifically, students with visual impairments are excluded in learning through use of inaccessible media in teaching. Support for students with disabilities provided at the Institution is not extended and continued in field-practice. Compounded together, students with disabilities confront specific obstacles which are not confronted by able-bodied students, hence the delay in their completion time. Thus, when a flexible completion time for students with disabilities is recommended by DU members, it could be seen as an inclusive measure. Students with disabilities could also complete the specific programmes, though later than other students.

12 students across the three specific programmes have varying recommendations for ensuring programmes are completed timeously. The two students in Medicine have different recommendations. One of them recommends disability disclosure to lecturers as a way to ensure better professional learning at the Institution and the completion of the programmes in good record time. The other suggests that emotional support could make a change because there are a lot of stressors which students with disabilities confront in the programme. Ten students in Law and Education also have varied suggestions for improving timely completion of programmes. Four students in Law and Education also recommend individual-specific interventions. They argue that the problem of students not completing the programme in a timely manner depends on the category of their disability, and on diversities within those specific categories. Two students with hearing impairments out of the four stated that there should be some training of new lecturers by the DU staff members on how to teach them specifically,

because of their diverse and individual needs. Five students out of the ten in Education and Law, recommend change in the way lecturers teach, as they feel it excludes them. One student out of the 12 recommends improvements to the built environment because he feels that the inaccessibility of the learning venues significantly interferes with learning and one's ability to complete the programme in the allotted time. A student in Education explains that the diversity of recommendations is a function of the diversity of the students themselves. According to him:

When you interact with other disabled students, they will tell you it's never enough. Whatever the institution does is never enough for us; it can only meet us halfway. It's because of our individualistic needs, which are different and unique. What I may find enough, the next person with the same disability as mine might find it not enough. When I say this is quite fine for me, the other person with the same disability will say not for me. So there is no best universal system that can apply to everybody who is disabled. It's not a one size fit all kind of a thing.

The student's statement speaks to the issue of group and individual differences within disability. Young (1990) explains that it is reductionist to view subjects as a unit and to value commonness and sameness over difference. Social injustices and oppression arise when differences are overlooked. Despite disability being appropriated as a collective identity, individuals with disabilities have unique needs. The statement of the student suggests that improving the time for completing the specific programmes might not be universalised to all students with disabilities. The students are not homogeneous because they have different needs, which explain the different interventions recommended.

When illuminated by Critical Disability Theory the varied recommendation provided by students with disabilities could be explained in the light of intersectionality of disability. The concepts of intersectionality and positionalities of oppression and privilege are discussed in detail in Chapter Three. In the present study, disability intersection is revealed more strongly

in terms of class. The students with disabilities have personal circumstances of oppression from low-socioeconomic class that negatively impact on their professional learning and consequently completing the programme of study within minimum time. Thus, in terms of disability intersecting with class, it yields double oppression (Crenshaw, 1989) for a specific group of students with disabilities. Thus in terms of recommendations for improvement provided by the specific students could have been influenced by intersection of disability with a class that is not privileged. The evidence of disability intersecting with class as an axis of oppression shows in data. Five out of ten students of the different gender, in Education and Law respectively, recommend change in the way lecturers teach because they feel they are excluded. All the five students had been in disadvantaged special and mainstream schools. The recommendation could have been informed by the same experience of disadvantage because of schooling background. Again, two students of different gender, with partial hearing impairments stated that there should be some training of new lecturers by the DU staff members on how to teach them specifically. The two students state that they do not access learning because they cannot afford the expensive hearing gadgets. One student with hearing impairments who can afford a lapel microphone has a different recommendation that disabilities should be disclosed to lecturers. The same recommendation by students who cannot afford assistive devices and a different one by a student who affords suggest that two are limited in the same way because of class. Thus, the intersection of disability with class and consequently the positionality of oppression plays out in different recommendations provided by students with disabilities, to improve completion of the programmes within minimum time.

7.6 SPEAKING TO THE PROBLEM OF THE STUDY

The participants' voice could have both a positive and negative impact on change and improvement and consequently on the balance of the Institution's output and the nation's

need for specific skills. That could be so because the recommendations have their pros and cons.

The three specific recommendations were provided by 12 students who have the experiences of living with different disabilities. Four of the seven DU staff members are also persons living with a disability, and their voice should also be considered as those of people who are talking from the lived experience. And, as argued by Devlin and Potheir (2006), a bottom-up approach and a voice emerging from lived experience could result in change. Thus, such a voice should be utilised in order to create change and improvement in students' circumstances. It could be argued, however, that while this is so, there could be a limitation again because students with disabilities also speak for each other. Evidence for this emerges when students of Medicine recommend improvement on the built environment at the site of work for integrated learning on behalf of their colleagues with disabilities that they do not have themselves. In Chapter Five, we observed students speaking of others' impairments hindering entry into specific professional degrees. In this way, individual experience of disability might be compromised.

The participants' voice is not collective. Barnes (2007) argues against an approach based on voice and the individual. Instead, he advocates an approach that values collective positions. As noted in data collected about persons with physical disabilities in the early 1970s, the collective voice was powerful and resulted in change and improvement of conditions of the oppressed (UPIAS, 1976). However, it is clear from this study that participants do not have one collective voice. The DU members have different views from those of students with disabilities in terms of the provision of special transport at the Institution. There are different opinions about the obstacles to completing the specific programmes in a timely fashion, and varied recommendations for improving this. It is possible that when voice is provided at

individual levels, it can become difficult for policy makers to determine whose voice to listen to, and which opinion to use for intervention. However, Gabel and Peters (2004) argue that collectivity oppresses individuals in the group from within because there are those who do not accept the “party line” (p. 596) but nevertheless have valid perspectives that can liberate and free persons with disabilities. What their work points out is that within a group, some individuals could differ in their opinions from the rest, but their voice is only suppressed when they are made to succumb to the collective one. So, while collective positioning has been proven to lead to change, the individual also needs to be listened to because the validity of his or her perspective cannot be underestimated. Thus, whether the voice is collective or individual must be taken into account.

The participants might not have self-representation (ODP, 1997) that is recognised by the responsible authorities at the Institution, at the site of work for integrated learning, or by the relevant government departments. Students with disabilities are not actively engaged in student leadership that could represent their voice. Of the 12 students interviewed, only one is a member of the Student Representative Council. One of the students described the social life of students with disabilities as routine. She explains that they go to the lectures, to the DU, to buy food and to the residences. Such isolation could invariably minimise representation, even if both the DU staff members and the students had a collective voice.

The voice of the participants reflects a limited understanding of transformation and inclusion. Scholars in the Critical Disability field view disability in terms of diversity (Goodley, 2013). Participants seemed to overlook diversity and their voice is only concerned with the change and improvement specifically for students with disabilities. For example, the transformation of the three systems is not thought of in light of including all diverse students, inclusive of those with disabilities. While this is perhaps understandable, given that the focus of the study

is specifically on obstacles and opportunities for students with disabilities, the recommendations for transformation and inclusion are understood narrowly, and as meant for those with disabilities only. For this reason, policy makers might find it difficult to intervene based on the recommendations of a specific group because, for them, transformation and inclusion are for all persons with and without disabilities.

The recommendation by the DU staff members that students with disabilities' first year of study should be a bridging course between schooling and higher learning and that their programmes should be extended, could be seen as exacerbating the delay that students experience when they attempt to complete the specific programmes. Though the recommendation does not completion, extension of time specifically could alleviate the pressure of the work and possibly enable completion. However, those students could still take more time than others because their studies would have been officially increased and extended. While a flexible completion time is undoubtedly an inclusive measure for students with disabilities, delayed graduation however has limitations that cannot be overlooked. Steele and Wolanin (2004) observe that the longer students with disabilities take to complete their studies, the higher the cost of higher education to them. Delayed graduation does not only become costly to the students, but to their families, to the Institution and the state more broadly. The families might incur extra costs to keep the student at the Institution. The Institution and the state also incur additional costs in terms of funding and providing assistive devices to the same students for an extended time. Thus, though it is argued that the most effective 'support' that can be given to students with disabilities to complete their studies is more time (Steele & Wolanin, 2004), it has cost implications that have become a concern in South African higher learning.

The participants do not make any recommendation to improve fieldwork at the work place settings. Out of all the 19 participants, none recommended improvement of professional learning at the site of work for integrated learning. While improvement to the built environment and continued support by the DU staff members are proposed, it is noteworthy that the other important component of professional learning by students with disabilities, the improvement of the ability to apply the knowledge, are not recommended. It suggests limitations in access to adequate professional learning, which could have implications for the completion of the specific programmes in the minimum required time.

The participants' recommendations are based on personal experiences. Gable (2014) observes that students in particular do not necessarily see beyond their own experiential grasp of matters. Gable's work suggests their views might lack scholarly qualification, especially for those who might have not yet have developed analytical skills. Their recommendations are, as a result, often too over privileged and over sentimentalised for meaningful scholarship (Barnes, 2007). It could therefore be difficult for the policy makers to work with their claims. However, Morris (1991) views this personal bias positively, because he argues that the personal is political. This implies that personal experiences could be used to develop appropriate political responses. Furthermore, in the present study, personal experiences are privileged. As underpinned by Decolonial Theory, all knowledge is valuable (Dastile & Ndlovu-Gatsheni, 2013). Thus, one form of knowledge is not legitimised while others are rendered insignificant. Thus, though I acknowledge that professional knowledges are specialised, I take personal experiences to be valuable in their own right. For that reason, the personal voice can also be a site for change and improvement. Thus, even if they have their limitations, personal experiences should not just be discarded but do need to be treated with caution. The limitations discussed are not meant to say change and improvement might not

happen as a result of the participants' voice, but it does mean that policy makers should be aware of specific limitations, and therefore be cautious in their interventions.

7.7 CHAPTER SUMMARY

As their voice, the participants recommend the following: systematic transformation, partnership between specific stakeholders from the institution and in specific high schools and at the work setting for integrated learning, as well as self-advocacy by students with disabilities. They believe these things could change and improve entry into the specific professional degrees, professionalisation and completion of the programmes within the allotted time. However, caution needs to be exercised by policy makers because of the specific limitations in the voice itself.

The next chapter explicates the thesis and it is also the concluding chapter of this study. It discusses how the work has attempted to achieve its aim and answer its research questions. It provides the argument of the whole study and makes an argument for the originality of the work, indicating how the findings could contribute to and push the knowledge boundaries of scholarship in the field of inclusive education. The chapter also provides the limitations of the study and makes propositions for further research.

CHAPTER EIGHT: CONCLUSION: SO WHAT?

8 INTRODUCTION

The study has set out to explore the obstacles and opportunities for entry into Medicine, Law and Education for students with disabilities. Its focus has been on how these the obstacles are confronted and opportunities presented to these students at entry, in professional learning and whether or not, they complete the particular programmes timeously in the context of a specific Institution of higher learning in South Africa, so as to graduate into the respective professions. This concluding chapter describes how the study has attempted to achieve its aim, and provides a summary of the findings (these relate to the research questions outlined in the Introductory Chapter) and their implications for professional skills output. It also illustrates the originality of the research. Finally, the limitations of the study and recommendation for further research are provided.

The aim of this scholarship has been to work together with the participants to generate data which the policy makers can use to make interventions for change and improvement of existing policy. Accordingly, the voices of the participants have been privileged throughout the study so that their points of view are more meaningfully considered. The approach has been bottom-up from those with the lived experienced because, as Devlin and Potheir (2006) have argued, this kind of method can result in change. It has to be reiterated that change is not guaranteed (see Introductory Chapter). Such change is dependent on the decision making of those who should intervene. Also, the limitations of a praxis that foregrounds voice are provided in Chapter Seven. It is worth adding that the findings of this thesis will be presented to the Centre of Critical Research in Race and Identity at the University of KwaZulu Natal, where the coordinators at the Centre will further present the findings to policy makers.

8.1 SUMMARY OF THE FINDINGS

Entrance to higher learning is difficult because of obstacles that originate in schooling. Students with disabilities often do not have the prerequisite subjects and entry level points required to enter into Medicine and Law specifically. The tensions between equality and inequality then emerge because the university authorities have the same entry requirements for all students who enter the three specific programmes. There is also the obstacle of the inaccessible built environment that specifically hinders students using wheelchairs and those with total visual loss from entering into Education. Furthermore, the nature of the specific professions excludes students with specific impairments. While, on the one hand, there is, formally speaking, equal opportunity of entry to all students because those with disabilities are also intellectually capable and policy does not allow for discrimination on grounds of disability, on the other, the same entry requirements exacerbate limitations because, unlike other students, they are already disadvantaged from schooling. Thus, students with disabilities confront the specific inequitable practices and structures which limit their entry into the three specific programmes at the Institution.

Students with disabilities should have the same opportunities to access professional learning as other students, because they are individually accommodated at the Institution. Funding, access arrangements in terms of extra time in examination, and one accessible bus transport, are provided to assist those students' learning. However, the practice of teaching, which is integral to the process of professionalisation, does not cater for students with disabilities' unique learning needs. In Law and Education specifically, inaccessible teaching methods, such as the use of overhead transparencies and power point, are common. There are delays in sending learning materials for conversion into an accessible format, and there are also distortions and omissions introduced during the process. Moreover, there are too few

interpreters for those with hearing impairments in Education, and some of them do not have adequate knowledge of the field and misinterpret lectures for the students as a result. Students confront another obstacle at the work setting for integrated learning, as there is limited support for field practice. The built environment is inaccessible, attitudes are negative, and the support at the Institution is not extrapolated to the work settings. This results in limited professional learning, because it takes place both at the Institution and in the field. Consequently, students with disabilities take longer to complete the specific programmes and graduate into the respective professions.

The finding of this study is that some level of transformation at the Institution has provided all diverse students with access to the professional degrees and professional learning. The institutional transformation is, however, not yet at the level necessary for all students to be totally included, hence the limitations at entry confronted by students with disabilities. Individual accommodations therefore remain necessary so that students with disabilities can access learning. There are still inequitable practices and structures that limit students with disabilities' entry into the three professional degrees, their professional learning, and on-time completion of the programmes so they can graduate into the respective professions.

In terms of addressing the research questions, the finding is that students with disabilities confront obstacles in terms of inequitable practices and structures, which limit their entry and professionalisation, and delay their completion of the degrees. There is the presumption, however, that there is equal opportunity of access into the three professional degrees and that preparation to graduate into the profession within minimum time for all students is available. The participants' voice indicates that there should be systemic transformation that includes changing the high schools in which learners with disabilities study, the specific Institution of higher learning, and the work settings for integrated learning. They view these three as

interdependent, interrelated, and influencing each other in such a way that all the three should be transformed, if there is to be a sustainable improvement. Partnership between stakeholders within those systems is also recommended. This is so because the boundaries of the systems are porous, and the collaboration of those involved in each context is viewed as an important factor for change. In addition, self-advocacy by students with disabilities is also recommended as an approach that could transform the practice of teaching, as well as negative attitudes in the field, and the need to demand what one should be entitled to.

8.2 IMPLICATIONS OF THE FINDINGS FOR PROFESSIONAL SKILLS OUTPUT

It was fore grounded in the introductory chapter that the present study is not focussed on the problem of imbalance between national skills and higher learning output, because another study is currently looking into this matter. It should be understood that my research is only making a contribution from within the ambit of its specific findings. The findings reveal that the gap between the national skills and the specific Institution's output in terms of the three professions could take some time to close, because students with disabilities who are also expected to contribute to the national skilled workforce face obstacles that prevent their entry into the three programmes. Even those who do enter take longer to complete the programmes and graduate into the respective professions. I must add that the specific finding may not be conclusive because the students who participated across the three programmes are few, so does the DU staff members.

As highlighted in the introductory chapter, South Africa seeks to produce a skilled workforce that can compete globally (Carrim & Ouma-Wangenge, 2012). But, the findings of the present study imply that those with disabilities who could participate in that labour force particularly in the disciplines of Medicine, Law and Teaching might be few because they take longer than students without disabilities to graduate into the respective professions. It should

be reiterated that they are limited right at entry, in professional learning and also in terms of completing the specific programmes timeously. It should also be noted, however, that those who eventually graduate can be absorbed into the labour force because of non-discrimination and equity policies.

A study carried out between 2009 and 2010 by Ramutloa (2010) revealed that only 3809 people with disabilities are qualified as professionals and are professionally employed in South Africa. As revealed by the findings of the present study, this problem might take a substantial amount of time to be solved. As previously mentioned, this conclusion cannot be exhaustively verified by this study because the sample used is very small.

8.3 THE THESIS FOR THE STUDY

Students with disabilities are supposed to have equal opportunity for entry into the three professional degrees because of policies of non-discrimination and the same entry requirements at the Institution. The same applies to professional learning as individual accommodation could enable them the opportunity to graduate into the specific professions within minimum time. However, there is a lack of radical transformation both at the Institution and at work settings for integrated learning, hence all diverse students (with and without disabilities) are not equally included. As a result, students with disabilities are limited at entry and in professionalisation due to inequitable structures and practices, resulting in them taking longer to complete the specific programmes. They recommend change and improvement so that they can have equal opportunities of entry and professionalisation.

8.4 ORIGINALITY AND CONTRIBUTION TO EXISTING KNOWLEDGE

The originality of the study is in its combination of the two theories: Critical Disability and Decolonial Theories. While both theories have been previously used by other scholars, as

discussed in the introductory chapter, I have integrated them in order to better understand the oppressions of persons with disabilities from different perspectives. The uniqueness is specifically in the application of Decolonial Theory to disability, and the different understanding that this yields to disability scholarship. While disability is already understood as a social construct, and it is established that those with disabilities are oppressed by dominant societal structures, Decolonial Theory further illuminates how disability relate to zones of being and non-being, and the invisible abyssal line that divides the two zones. Such an understanding makes the invisible reason why those with disabilities are located in the zone of non-being visible. The theory also sheds light on the underlying reason why they are the oppressed together with the ‘others’ who are also located in that zone. Furthermore, the theory adds the understanding of the social and epistemic location of the subject, which contributes to our grasp of why persons with disabilities, constructed as the ‘other’, think like their oppressors and speak their language. The explanation helps us to understand why dismantling oppression becomes difficult when the oppressed themselves are not aware of their oppression and their role in perpetuating it, albeit unconsciously.

The voice of those with disabilities and their lived experiences are understood to be important in disability scholarship. Decoloniality provides the underlying reason for privileging the suppressed voice: personal experiences should also be considered valuable knowledge (Dastile & Ndlovu-Gatsheni, 2013). For this reason, the interweaving of these two theories contributed to an understanding of the reason belying privileging the voices of the ‘other’ as those with disabilities.

The theory also provides a ‘method of fighting’. It unmask the ills and effects of coloniality, helps to understand the oppression of the ‘other’, in this case, those with disabilities. Further to this, the concept of decoloniality provides ways in which oppression can be dismantled by

the oppressed. Agency particularly contributes to an understanding of how students with disabilities can overcome oppressive structures and practices. While resistance and fighting though self-advocacy is proposed in the disability field, in the context of the present study, Decolonial theory has added agency as another way in which the oppression of persons with disabilities can be overcome. Thus, in the present study, Decolonial Theory makes a unique contribution to disability scholarship by making the invisible underlying causes for that which is already known visible.

Another contribution to existent scholarship is in the empirical findings of the study. As was shown in the introductory chapters, a lot of research has been carried out on access and inclusion of students with disabilities in higher learning. The present study has however, focussed on entry into specific professional degrees, as well as preparation for respective professions. Thus, the study contributes in terms of disability and professional learning within a specific area of higher learning. It reveals that while there has been some level of transformation and individual accommodation at the specific Institution, students with disabilities are still limited from entering the specific professional degrees and being adequately professionalised to graduate into the respective professions within the minimum stipulated time. This is because there are inequitable practices and structures that work against the opportunities presented to such students. The same entry requirements for all students limit entry and the practice of teaching excludes students with disabilities. At work settings for integrated learning, there is limited support for field practice and the built environment is inaccessible. Professionalisation is an interactive process that happens both at the Institution and at the work settings for integrated learning. It is therefore limited when the work setting is not conducive to access. All these factors result in the fact that students with disabilities are limited by inequitable practices and structures at entry, in professional learning, and they tend to complete the specific programmes later than minimum timeframe. .

8.5 THE LIMITATIONS OF THE STUDY

Like all studies, this one has specific limitations that could impact negatively on its results and findings. The study is limited in terms of the research tradition it adopted, which is transformative. Entry into professional degrees and professional learning could be better captured by a longitudinal study which could start with the same learners with disabilities from school, trace their entry into professional degrees, and their professional learning at the Institution, follow them to field work, and back to in higher learning, up to their completion. Time constraints have prevented such a detailed PhD study. Though I also managed to source data on schooling and work settings for integrated learning, which was useful for the results and findings of the present study, a longitudinal study which would focus on the three systems specifically is recommended in terms of further research.

The study has another limitation in terms of methodology. While the aim of the study is to allow the voice of those with disabilities to be heard, the sampling also includes people without disabilities. Of the seven DU staff members who were interviewed, three of them had no disabilities. Their experiences of disability, exclusion and the oppression of those with disabilities are not lived but experiential and imagined. While those were also considered in the analyses, this practice is not in line with the one proposed by scholars such as Devlin and Potheir (2006), who argue that it is only those who live with disability, who can legitimately share those experiences.

The study also contradicts specific central tenets of the Decolonial theory that informs it. The work that is used and cited for methodology is by the Western scholars in the Global North. The universality of Western knowledge is critiqued in Decoloniality (Dastile & Ndlovu-Gatsheni, 2013), and it could be argued that the methodologies, methods and language for the Global North might not apply appropriately to the context in the South. This repudiation of

Western epistemologies is echoed in the South African context by Meekosha (2004), who identifies South Africa as one of the countries that requires analyses of disability to reflect its own histories. However, while my recourse to theories originating in the Global North can be seen as a limitation, it is an over-generalisation that might not have a significant negative impact on the results and findings because, as highlighted in the study, all knowledge is valuable. The underlying factor is in the value of the knowledge, whether it is from the West or South, which is why even personal and lived experiences are considered of worth.

Observation as a research technique to collect data was another limitation to the present study. Goffman (1989) argued that details of the participants' actions can be captured in detail through that method. It could have been more useful to collect data that relates to professional learning of students with disabilities in classrooms in three programmes of focus. The type of observation that could have been relevant for the present study would be of ethnographic genre. Ethnography is described as participation and observation in which data is collected in the actual setting over an extended period of time (Atkinson, Coffey, Delamont, Lofland & Lofland, 2001). When using the method, I would have immersed myself into the life world of classrooms teaching and learning for a longer time, to observe how they take place within the conditions and in the context of the Institution. It would enable the gathering of rich data as lecturers being central in professionalisation, would have the opportunity to explain their practices, beliefs and experiences of teaching students with disabilities. However, given the minimum time given for a Phd programme, including the processes involved in getting consent from lecturers and students, observation was not a possible technique for the present study.

A final limitation of this study is in the literature review. Inclusion and policy in the United Kingdom was reviewed as a kind of benchmark against which the case in South Africa might

be assessed. Decolonial Theory views the West as the oppressor, and the South as the oppressed, in the context of coloniality (Shahjahan & Morgan, 2016). One might therefore argue that using the West as benchmark contradicts the liberation that is being sought through decoloniality. However, though my use of UK standards of inclusion could be viewed as a limitation, it might not have implications on the study because the benchmark is employed to improve the inclusion of the students with disabilities at the Institution, not to oppress them.

8.6 RECOMMENDATIONS AND FURTHER RESEARCH

Radical inclusion could enable students with disabilities to have full access to enter all the three programmes, and be professionalised adequately to meet the requirements for the specific programmes within the minimum stipulated time. Such inclusion refutes thinking of inclusion in the light of access and accommodations, but it demands a radical transformation of social contexts, so that all students, with and without disabilities, are totally included. In the context of this study, these contexts are schooling, the Institution and work settings. These integrated sites of knowledge production should totally transform their practices, social and physical structures so that they include all students, including those with disabilities. It could be argued that the ‘support’ and ‘accommodations’ which responsible stakeholders view as inclusion at the Institution superficially patch students onto the system in the form of ‘accommodations’, but there is a need for a total overhaul in thinking about inclusion to understand that it should involve total transformation of all the systems necessary for professionalisation. Students with disabilities, specifically, seem to be conscious and have already self-advocated and changed the bus timetable and access to learning venues at the Institution, which suggests that they are rethinking inclusion and there could be total transformation if all responsible stakeholders in the three systems could change their thinking too.

As one of the limitations of the present study is that I only focussed on the Institution among the three systems, I reiterate that a longitudinal study, in which obstacles and opportunities for students with disabilities' entry and professional learning are explored right from schooling through to higher learning and at work settings, is recommended as further research. I would suggest that such a study would capture in full how, when, where, and why students with disabilities in the three systems are limited from accessing the three programmes and completing their professional learning timeously. A further study that specifically explores ways of improving completion of the specific programmes is also recommended. As argued by Steele and Wolanin (2004), delayed graduation by students with disabilities has cost implications for their families, for higher learning institutions and for the state. Such a study could be useful to South Africa, which has overstretched resources and funding, all of which compounds the difficulties of total transformation. This simply results in the ongoing justification of individual accommodations.

As the study has revealed that there has been a measure of transformation at the Institution, it suggests a further step towards the inclusion of all students. I conclude the study by calling for strong partnerships among the responsible stakeholders in schooling, at the Institution and work settings; I recommend that they work together to totally transform all the interactive systems so that all students could be included at entry and in professionalisation. When all three systems are totally transformed, all students could be able to complete the programmes within the allotted time, because the context would be inclusive to all. I also call for the stakeholders in government to partner with the three systems, to fund the systemic transformation so that there could be a total overhaul of structures and practices informed by new ways of thinking about inclusion. The end result of this process could be a total transformation of all the systems so that radical inclusion could be made possible.

REFERENCES

- Aaill-Jilek, L. M. (1965). Epilepsy in the Wapongo Tribe in Tanganyika. *Acta Psychiatrica Scandinavica*, 14, 57-86.
- Abbott, A. (1988). *The Systems of Professions: An Essay on the Division of Expert Labour*. London: The University of Chicago Press.
- Akoojee, S. & Nkomo, M. (2007). Access and Quality in South African Higher Education: The Twin Challenges of Transformation. *South African Journal of Higher education*, 21(3), 385-399.
- Albrecht, G. L., Seelman, K.D. & Bury, M. (2001). Introduction: The Formation of Disability Studies. In G.L. Albrecht, K.D. Seelman & M. Bury (Eds.), *Handbook of Disability Studies*. Thousand Oaks, CA: Sage Publications.
- Alvesson, M. (2001). Knowledge Work: Ambiguity, Image and Identity. *Human Relations*, 54(7), 85-99.
- Alvesson, M. & Wilmott, H. (2002). Identity Regulation as Organisational Control: Producing the Appropriate Individual. *Journal of Management Studies*, 39(5), 619-644.
- Althusser, L. (1978). *Lenin and Philosophy* (Trans. By Ben Brewster). New York: Monthly Review Press.
- Ainscow, M.; Booth, T.; Dyson, A.; Farrel, P.; Frankham, J.; Gallannaugh, F.; Howes, A. & Smith, R. (2006). *Improving Schools, Developing Inclusion*. London: Routledge.
- Armstrong, P. L. (2015). *Teachers in the South African Education System: An Economic Perspective*. Unpublished Phd Thesis. Stellenbosch University.
- Anastasiou, D. & Kauffman, J. (2011). A Social Construction Approach to Disability: Implications for Special Education. *Exceptional Children*, 77 (3), 367-384.
- Adorno. T. W. (1973). *Negative Dialectics*. New York: Seabury Press.
- Atkinson, P.; Coffey, A.; Delamont, S.; Lofland, J. & Lofland, L. (2001). *Handbook of Ethnography*. London: Thousand Oaks, Calif: Sage.
- Atkinson, P. & Delamont, S. (2006). Rescuing Narrative from Qualitative Research. *Narrative Inquiry*, 16(1), 164-172.
- Atkinson, R. (2013). Medicine and Law as Model Professions. The Heart of the Matter (And how we Missed it). *Health Matrix: The Journal of Law-Medicine*, 22(2), 345-422.
- Attorney's Act no 53 of 1979: Retrieved April 2016 at: <http://www.lawlibrary.co.za/upload/files/ATTONEYS%20ACT.pdf>.
- Attride-Stirling, J. (2001). Thematic Networks: An Analytic Tool for Qualitative Research. *Qualitative Research*, 1(3), 385-405.

Babbie, E. Mouton, J. & Prozesky, B. (2001). *The Practice of Social Research*. Cape Town: Oxford University.

Babbie, E. R. (1973). *Survey Research Methods*. Belmont, Calif: Wadsworth.

Babbie, E and Mouton, J. (2001) 'The Ethics and Politics of Social Research.' In E. Babbie, and J. Mouton, *The Practice of Social Research*. (South African edition). Cape Town: Oxford University Press.

Badat, S. (2010). *The Challenges of Transformation in Higher Education and Training Institutions in South Africa*. DBSA: Development Bank of Southern Africa.

Badat, S. (2015). Deciphering the Meanings and Explaining the South African Higher Education Students Protests of 2015-16. *Pax Academica African Journal of Academic Freedom*, 1& 2, 71-106.

Badge, J. (2014). *Teacher Assessment on Performance Standard 1: Professional Knowledge*. Georgia Department of Education

Ball, S. (2008). *The Education Debate*. Bristol: Policy Press.

Barnes, C. (1991). *Disabled People in United Kingdom and Discrimination: A Case for Anti-Discrimination Legislation*, Hurst and Co in Association with the British Council of Organisation of Disabled People. London.

Barnes, C, Mercer, G & Shakespear, T. (2000). *Exploring Disability: A Sociological Introduction*. Cambridge: Polity Press.

Barnes, C. (2003). What a Difference a Decade Makes: Reflections on Doing 'Emancipatory' Disability Research. *Disability and Society*, 18(1), 3-17.

Barnes, C. & Mercer, G. (2003). *Disability: Key Concepts*. Cambridge: Polity Press.

Barnes, C. & Mercer, G. (2004). Theorising and Researching Disability from a Social Model Perspective. In C. Barnes & G. Mercer (Eds.), *Implementing the Social Model of Disability: Theory and Research* (pp. 7-17), Leeds: The Disability Press.

Barnes, C & Mercer, G. (2005). *The Social Model of Disability: Europe and the Majority World*. Leeds: The Disability Press.

Barnes, C. (2007). Disability, Higher Education and the Inclusive Society. *British Journal of Sociology of Education*. 28 (1), 135-145.

Barnes, C; Oliver, M & Barton, L. (2008). *Disability Studies Today*. Cambridge: Polity Press.

Barnes, C. & Mercer, G. (2010). *Exploring Disability: A Sociological Introduction*. Polity Press: Cambridge.

Barnes, B.R. (2012). Using Mixed Methods in South African Psychological Research. *South African Journal of Psychology*, 42(4), 463-475.

Barnhizer, D. (1990). The University Ideal and Clinical Legal Education. *New York Law School. Law Review*, 87.

- Barton, L. (2001). *Disability, Politics and the Struggle for change*. London: David Fulton.
- Basit, T.N. (2003). Manual or Electronic: The Role of Coding in Qualitative Data Analysis. *Educational Research*, 45(2), 143-154.
- Bauman, Z. (2009). Identity in a Globalising World. In A. Elliot & P. du Gay (Eds.), *Identity in Question*. London: Sage.
- Baxter, P. & Jack, S. (2008). Qualitative Case Study Methodology: Study Design and Implementation for Novice Researchers. *The Qualitative Report*, 13(4), 544-559.
- Bazeley, P. (2009). Analysing Qualitative Data: More than Identifying Themes. *The Malaysian Journal of Qualitative Research*, 2(2), 1-17.
- Bell, D. (2013). *Investigating Teaching and Learning Support for Students with Hearing Impairment at a University in the Western Cape*. Unpublished PhD Thesis. The School of Education: University of Stellenbosch. Cape Town.
- Berger, R. (2013). 'Now I see it, now I don't: Researcher's Position and Reflexivity in Qualitative Research. *Qualitative Research*, 0(0), 1-16.
- Bernstein, B. (1999). Vertical and Horizontal Discourse: An Essay. *British Journal of Sociology of Education*, 20, 157-173.
- Bernstein, B. (2000). *Pedagogy, Symbolic Control, and Identity*. New York: Rowman & Littlefield Publishers.
- Biesta, G. (2010). Pragmatism and the Philosophical Foundations of Mixed Methods Research. In A. Tashakkori & C. Teddlie (Eds.), *Handbook for Mixed Methods in Social and Behavioural Research*, (pp. 95-118). Thousands, Oaks, CA: SAGE.
- Bigge, M.L. & Shermis, S.S. (1992). *Learning Theories for Teachers*. New York: Harper Collins Publishers.
- Blackstone, A. (2012). *Sociological Inquiry Principles: Qualitative and Quantitative Methods*. USA: Centre for Open Learning.
- Blaikie, N. (1993). *Approaches to Social Inquiry*. Cambridge: Polity Press.
- Bloor, M. (2004). Addressing Social Problems through Qualitative Research. In D. Silverman (Ed.), *Qualitative Research: Theory, Method and Practice* (pp.305-324), London: Sage.
- Boone, R. & Higgins, K. (2007). New Directions in Research: The Role of Instructional Design in Assistive Technology Research and Development. *Reading Research Quarterly*, 42(1), 135-140.
- Booth, T. & Booth, W. (1996). Sounds of Silence: Narrative Research with Inarticulate Subjects. *Disability & Society*, 11(1), 55-69.
- Botham, K.A. & Nicholson, J. (2014). Supporting the Transition of Disabled Students from University to Practice Placements. *Disability & Society*, 29(3), 460-476.

- Bourdieu, P. (1990). *In Other Words: Towards a Reflexive Sociology*. California: Stanford University Press.
- Bourdon, S. (2002). The integration of Qualitative Data Analysis Software in Research Strategies. *Resistance and Possibilities*, 3(2), 1-10.
- Braun, V. & Clarke, V. (2006). Using Thematic Analysis in Psychology. *Qualitative Research in Psychology*, 3(2), 77-101.
- Breakwell, G., Hammond, S & Fife-Shaw, C. (1995). *Research Methods in Psychology*. Sage Publication: Thousand Oaks: London.
- Brisenden, S. (1986). Independent Living and the Medical Model of Disability. *Disability, Handicap & Society*. 1(2), 173-178.
- Brookfield, S.D. (2005). *The Power of Critical Theory: Liberating Adult Learning and Teaching*. San Francisco: Jossey-Bass.
- Bryman, A. (2001). *Social Research Methods*. Oxford: Oxford University Press.
- Burgstahler, S. (2001), A Collaborative Model to Promote Career Success for Students with Disabilities. *Journal of Vocational Rehabilitation*, 16(2001), 209-215.
- Burnard, P. (1991). A Method of Analysing Interview Transcripts in Qualitative Research. *Nurse Education Today*, 11(6), 461-466.
- Byrne, M.M. (2001). Linking Philosophy, Methodology and Methods in Qualitative Research. *AORN Journal*, 73(1), 207-210.
- Campbell, F. A. (1999). 'Refleshingly Disabled': Interrogations into the Corporeality of 'Disablised' Bodies. *Australian Feminist Law Journal*, 12(1), 57-80.
- Carlson, S. (2002). *The Missing Link in Educational Technology: Trained Teachers*. Techknologia.October/December. <http://www.techknowlogia.org/TKL-Articles/PDF/435.pdf> Retrieved August 2015.
- Carrim, N & Wangenge-Ouma, G. (2012). *Higher Education in South Africa: A Report of Higher Education of South Africa*. British Council of South Africa.
- Carrim, N. (2002). Inclusion in South Africa, *Education Institute of Development Studies*, Discussion paper, No 2.
- Castro-Gomez, S. (2002). The Social Sciences, Epistemic Violence, and the Problems of the 'Invention of the other'. *Nepantla: Views from the South*, 3(2), 269-285.
- Centre for Universal Design, (1997). *The Principles of Universal Design* (Version, 2.0). Raleigh: North Carolina University.
- Center for Universal Learning, (2002). *Definition of Universal Design*. Retrieved: August 2013. From <http://www.design.nesu.edu/cud>

Chataika, T. (2007). *Inclusion of Disabled Students in Higher Education in Zimbabwe: From idealism to Reality: A Social Ecosystem Perspective*. Unpublished PhD Thesis, The School of Education: University of Sheffield, Sheffield.

Chataika, T. (2012). Disability, Development and Postcolonialism. In D. Goodley, D. Hughes & L. Davis (Eds.), *Disability and Social Theory: New Development and Directions* (pp. 252-269), London: Palgrave Macmillan.

Chiodo, J.J. & Brown, T.D. (2007). Students' Perceptions of Teaching: Assessing their Mental Images of Teaching Social Studies. *Journal of Social Studies*, 3(1), 12-26.

Chipkin, C. (1993). *Johannesburg Style, Architecture and Society*. 1880-1960s. Cape Town: David Philip.

Clack I.L.P., Creswell, J.W., Green, D.O. & Shope, R.J. (2008). Mixing Quantitative and Qualitative Approaches: An Introduction to Emergent Mixed Research. In S.N Hesser-Biber & P. Leavy (Eds.), *Handbook of Emergent Methods* (pp. 363-388), New York: Guilford.

Clikeman, P.M & Henning, L.S. (2000). The Socialisation of Undergraduate Accounting Students. *Issues in Accounting Education*, 15(1), 117.

Clarke, L. & Winch. C. (2004). Apprenticeship and Applied Theoretical Knowledge. *Educational Philosophy and Theory*, 36, 509–21.

Coate, A.Y. (2014). *Searching for Inclusion: The Impact of Environmental Barriers on People with Physical Disabilities*. Unpublished Masters Project. San Bernardino: California State University.

Cobley, A.G. (2015). *Professions, African in: Colonial*. Available at: <http://www.worldhistory.biz/sundries/44193-professions-africans-in-colonial.html>

Coffey, A. & Atkinson, P. (1996). *Narratives and Stories. In making Sense of Qualitative Data: Complimentary Research Strategies*. Thousand Oaks, CA: Sage Publications.

Cohen, L.; Manion, L. & Morrison, K. (2007). *Research Methods in Education* (6th Ed.), London: Routledge.

Collier, R. (1995). *Masculinity, Law and Personal Life: Towards a New Framework for Understanding Men, Law and Gender*. London: Routledge.

Corker, M. & Shakespeare, T. (2002). *Embodying Disability Theory: Disability Postmodernism*. London, NY: Continuum.

Cornbleth, C. (2008). *Diversity and the New Teacher: Learning from Experience in Urban Schools*. New York: Teachers College Press.

Cory, R. White, J. & Stuckey, Z. (2010). Using Disability Studies Theory to Change Disability Services: A Case Study in Student Activism. *Journal of Post Secondary Education and Disability*, 23(1), 28-37.

Cooper-Thomas, H. & Anderson, N. (2002). Newcomer Adjustment: The Relationship between Organisational Socialisation Tactics, Information Acquisition and Attitudes. *Journal of Occupational and Organisational Psychology*, 75(4), 423-437.

Council for Higher Education, (2000). *Towards a new Higher Education Landscape: Meeting the Equity, Quality and Social Development Imperatives of South Africa in the 21st Century*. Pretoria: CHE.

Council of Higher Education (CHE), (2007). *Review of Higher Education in South Africa: Selected Themes*. Pretoria: CHE.

Council of Higher Education (CHE), (2008). *The Report on Transformation in the Higher Education Sector in South Africa* (Soudien Report). Pretoria: DoE.

Council of Higher Education (CHE), (2010). *Higher Education Monitor: Access and Throughput in South African Higher Education: Three Case Studies*. Pretoria: Council on Higher Education.

Council of Higher Education (CHE), (2013). *Higher Education Participation 2011*. Pretoria: CHE.

Crenshaw, K. (1989). *Demarginalising the Intersection of Race and Sex: A Black Feminist Critique of Antidiscrimination, Feminist Theory and Antiracist Politics*. University of Chicago: Legal Forum.

Creswell, J.W. (2003). *Research Design: Qualitative, Quantitative and Mixed Method Approaches* (2nd Ed). Thousand Oaks: Sage.

Creswell, J.W. (2007). *Qualitative Inquiry and Research Design: Choosing Among five Approaches* (2nd Edition). London: Sage.

Creswell, J. (2008). *Educational research: Planning, conducting and evaluating quantitative And qualitative research*. Upper Saddle River: NJ, Prentice Hall.

Creswell, J.W. & Clarke, P.L.V. (2011). *Designing and Conducting Mixed Method Research*. Thousand Oaks, CA: Sage.

Cresswell, J.W. (2014). *Research Design: Qualitative, Quantitative, and Mixed Methods Approaches* (4th Ed), London: SAGE.

Crow, L. (1992).Renewing the Social Model of Disability. *Coalition*, July, 5-9.

Crow, L. (1996). Including all our lives: Renewing the Social Model of Disability. In C, Barnes & G, Mercer (Eds.), *Exploring the Divide: Illness and Disability*. Leeds: The Disability Press.

Cross, M.; Shalem, Y.; Backhouse, J. Adam, F.; & Baloyi, H. (2010). Wits Gives you the Edge: How Students Negotiate the Pressures of Undergraduate Study. In Council of Higher Education (CHE). *Higher Education Monitor: Access and Throughput in South African Higher Education: Three Case Studies* (pp. 54-94,) Pretoria: Council of Higher Education.

Curral, S.C. & Towler, A.J. (2003). Research Methods in Management and Organisational Research: Towards Integration of Qualitative and Quantitative Techniques. In A. Tashakkori & C. Teddlie (Eds.), *Handbook of Mixed Methods in Social and Behavioural Research* (pp. 513-526), Thousand Oaks CA: Sage.

Curran, T. & Runswick-Cole, K. (2013). *Disabled Children's Childhood Studies: Critical Approaches in Global Context*. London: Palgrave MacMillan.

Darling-Hammond, L. (1996). The Quiet Revolution: Rethinking Teacher Development. *Educational Leadership*, 53 (6), 4-10.

Dastile, P.N. & Ndlovu-Gatsheni, S.J. (2013). Power, Knowledge and Being: Decolonial Combative Discourse as a Survival Kit for Pan Africanists in the 21st Century. *Alternation*, 20(1), 105-134.

David, D. & Daniel, S. (1991). Transformative Research: In Search of Definition. *International Council for Adult Education*, 24(3), 9-15.

Demirkasimoglu, N. (2010). Defining "Teacher Professionalism" from Different Perspectives. *Procedia Social and Behavioural Sciences*, 9(2010), 2047-2051.

Denzin, N.K. (1978). *The Research Act: A Theoretical Introduction to Sociological Methods*. New York: Praeger.

Denzin, N.K. & Lincoln, Y.S. (2013). *The Landscape of Qualitative Research*. Thousand Oaks: SAGE Publications.

Department of Education. (1997). *White Paper on an Integrated National Strategy*. Pretoria: Department of Education.

Department of Education. (2000). *Curriculum Research and Development: Review 2000*. Pretoria: National Centre for Curriculum Research and Development.

Department of Education. (2001a). *National Plan for Higher Education*. Pretoria: Department of Education.

Department of Education. (2001b). *Education White Paper 6: Special Needs Education: Building an Inclusive Education and Training System*. Pretoria: Department of Education.

Department of Education. (1997) *Education White 3: The transformation of the Higher Education System*. Pretoria: Government Press.

Department of Higher Education & Training (2011). *2010/2011-2014/2015 Strategic Plan of the Department of Higher Education and Training*. Pretoria: Government Press.

Department of Higher Education and Training (DHET) (2013). *White Paper on Post-School Education and Training*. Pretoria: Department of Education.

Department of Higher Education and Training (2015). *Revised Policy on the Minimum Requirements for Teacher Education Qualification*. Pretoria: Government Gazette.

De Vaus, D.A. (1986). *Surveys in Social Research*. London: Unwin Ltd.

Devlieger, P.J. (1998). Physical “Disability” in Bantu Languages: Understanding the Relativity of Classification and Meaning. *International Journal of Rehabilitation Res*, 21, 51-62.

Devlin, R. & Pothier, D. (2006). *Critical Disability Theory: Essays in Philosophy, Politics and Law*. Vancouver-Toronto: UBC Press.

Dickson, B. (2007). Defining and Interpreting Professional Knowledge in an Age of Performativity: A Scottish Case Study. *Australian Journal of Teacher Education*, 32(4), 14-28.

Dillman, D. (2007). *Mail and Internet Surveys: The Tailored Design Method*. New York: Wiley.

Disability Rights Commission (2004). *The Web: Access and Inclusion for Disabled People: A formal Investigation*. The Stationery Office.

Disability Rights Task Force (1999). *From Exclusion to Inclusion: A Report of the Disability Taskforce on Civil Rights for Disabled People*. Disability Rights Task Force: Department of Education and Employment.

Doran, G. (1993). Scientism vs Humanism in Medical Education. *Social Science and Medicine*, 17(23), 1831-1835.

Dudley-Marling, C. (2004). The Social Construction of Learning Disabilities. *Journal of Learning Disabilities*, 37, 482-490.

Du Plessis, M.A. (2015). Clinical Legal Education Models: Recommended Assessment Regimes. *PER47 Law Journal*, 18(7), 2778-2802.

Earlie, N. (2008). *Social Work in Social Change: The professions and Education of Social Workers in South Africa*. Cape Town: HRSC Press.

Eagleton, M. (2008). *Universal Design for Learning*. Research Starters: EBSCO Publishing Incl.

Eldridge, A.G. (1997). *British Columbia*. 3. SCR.624

Erlanger, H. S. & Klegon, D.A. (1979). Socialisation Effects of Professional. *School. Law & Society*, 13, 11-13.

Engelbrecht, L. & de Beer, J.J. (2014). Access Constraints Experienced by Physically Disabled Students at a South African Higher Learning Institution. *Africa Education Review*, 11(4), 544-562.

Erasmus, Y. (2013). *Graduating into Professions: Obstacles to the Supply and Diversity of Entrants into Professions through the Higher Education and Training in South Africa*. Literature Search Report. South Africa: University of KwaZulu-Natal.

Eraut, M. (1997). Perspective on Defining ‘The Learning Society’. *Journal of Education Policy*, 12(2), 127-139.

Eraut, M. (2000). Non-Formal Learning and Tacit Knowledge in Professional Work. *British Journal of Education Psychology*, 10, 113-136.

Eraut, M. (2005). *Professional Knowledge in Medical Practice*. La Profession Medica: La Retos Del Milenio, Monografias humanitas, Fundacion Medicihana y humanides Medicas, Barcelona.

Fay, B. (1987). *Critical Social Science: Liberation and its Limits*. Ithaca, NY: Cornell University Press.

Femia, J.V. (1981). *Gramsci's Political Thought*. New York: Oxford University Press.

Ferguson, D.L. (1996). Is it Inclusion yet? Bursting the Bubbles. In M.S. Berres, D. L. Ferguson, P. Kroblick & C. Woods (Eds.), *Creating Tomorrow's Schools Today: Stories of Inclusion and Renewal* (pp. 16-37), New York: Teachers College Press.

Fincher, R.M.E. (2004). The Road less Travelled-Attracting Students to Primary Care. *N Eng Med*. 351, 630-632.

Finkelstein, V. (1980). *Attitudes and Disabled People*. New York: World Rehabilitation.

Finkelstein, V. (1981). Disability and the Helper/Helped Relationship. *A Historical View. Handicap in a Social World*. In A. Brechin, P. Liddiard & J. Swain (Eds.), *Handicap in a Social World* (pp. 58-65), Milton Keynes: Open University Press.

Finkelstein, V. & French, S. (1993). Towards a Psychology of Disability. In J, Swain (Ed.), *Disabling Barriers-Enabling Environment*. London: Sage.

Finkelstein, V. (1994). Getting There: Non-disabling Transport. *Paper presented in liberating a Disabling Society: Citizens on the Move*. Beckfoot School: Bingley. Available at: <http://www.leeds.ac.uk/disability-studies/archiveuk/>

Finkelstein, V. (2004). Representing Disability. In J. Swain; S. French; C. Barnes & C. Thomas (Eds.), *Disabling Barriers-Enabling Environments* (pp. 13-20), London: Sage.

Fitchett, A. (2015). Exploring Adaptive Co-management as a Means to Improving Accessibility for People with Reduced Mobility at the University of Witwatersrand. In E. Walton and S. Moonsamy (Eds.), *Making Education Inclusive*. Cambridge Scholars Publishing.

Fossey, E., Harvey, C., McDermott, F. & Davidson, L. (2002). Understanding and Evaluating Qualitative Research. *Australian and New Zealand Journal of Psychiatry*, 36(6), 717-732.

Fotim Project Report (2011). *Disability in Higher Education*. Green Paper: Foundation of Tertiary Institutions of the Northern Metropolis.

Foucault, M. (1982). The Subject and Power. In H. L. Dreyfus & P. Rabinow (Eds.), *Appended to Michael Foucault: Beyond Structuralism and Hermeneutics*, Chicago: University of Chicago Press.

Foucault, M. (1995). *Discipline and Punish: The birth of the Prison*. (Trans by Allan Sheridan), New York: Vintage.

- Foucault, M. (2001). Power/Knowledge. In S. Siedman & J.C. Alexander (Eds.), *The Social Theory Reader*. London: Routledge.
- Fowler, F.J. (1988). *Survey Research Method: Applied Social Research Methods*. Thousand Oaks: Sage Publications.
- Frank, A. W. (2000). The Standpoint of the Storyteller. *Qualitative Health Research*, 10(3), 354-365.
- Freidson, E. (1986). *Professional Powers: A Study of the Institutionalisation of Formal Knowledge*. Chicago: University of Chicago Press.
- Freidson, E. (2001). *Professionalism: The Third Logic*. Chicago: The University of Chicago.
- Frey, L., Botan, C. & Kreps, G. (1999). *Investigating Communication: An Introduction to Research Methods*. Boston: Allyn & Bacon.
- Frith, H. (2000). Focus on Sex: Using Focus Group in Sex Research. *Sexualities*, 3(3), 257-297.
- Fulcher, G. (1988). Integration: Inclusion or Exclusion? In R. Slee, (Ed.), *Discipline and Schools: A Curriculum Perspective*. Melbourne: Macmillan.
- Fulcher, G. (1989). *Disabling policies? A Comparative Approach to Education Policy and Disability*. Lewis: Falmer Press.
- Fuller, M; Healey, M.; Bradley, A & Hall, T. (2004). Barriers to Learning: A Systematic Study of the Experiences of Disabled Students in One University. *Studies in Higher Education*. 29 (3), 305-318.
- Gabbard, D. & Atkinson, T. (2007). Stossel in America: A Case Study of Neoliberal/Neoconservative Assault on Public Schools and Teachers. *Teacher Education Quarterly*, 32(2), 85-110.
- Gabel, S. & Peters, S. (2004). Presage of a Paradigm Shift? Beyond the Social Model of Disability toward Resistance Theories of Disability. *Disability & Society*, 19(6), 585-600.
- Gable, S. (2014). Disability Theorising and Real-World Educational Practice: A Framework for Understanding. *Disability & Society*, 29(1), 86-100.
- Gallagher, D.J.; Connor, D. J. & Ferri, B.A. (2014). Beyond the Far too Incessant Schism: Special Education and the Social Model of Disability. *International Journal of Inclusive Education*, 18(11), 1120-1142.
- Gershick, T.D. & Miller, A. S. (1997). Gender Identities at the Crossroads of Masculinity and Physical Disabilities. In M.M. Gergen & S.N. Davis, (Eds.), *Towards a New Psychology of Gender: A Reader* (pp. 455-475), New York: Routledge.
- Gerring, J. (2007). *Case Study Research: Principles and Practices*. Cambridge: Cambridge University Press.
- Getzel, E.E. & Thoma, C.A. (2008). Experiences of College Students with disabilities and the Importance of Self-determination in Higher Education Setting. *Career Development for*

Exceptional Individuals, 31(2), 77-96.

Gill, C.J. (1995). *A Brief History: Attitudes and Treatment of Persons with Disabilities*. European Cultural Heritage.

Giroux, H. A. (2014). *Neoliberalism: War on Higher Learning*. Chicago: Haymarket Books.

Giverver, D., Baker, B. & McDevitt, J. (1995). Learning through Work: An Empirical Study Of Legal Internship. *Journal of Legal Education*, 45, 1-4.

Goffman, E. (1989). On Fieldwork. *Journal of Contemporary Ethnography*, 18, 123-132.

Goode, J. (2007). Managing Disability: Early Experiences of University Students with Disability. *Disability & Society*, 22(1), 35-48.

Goodley, D. (2011). *Disability Studies: An Interdisciplinary Introduction*. London: SAGE Publication Ltd.

Goodley, D. (2013). Dis/entangling Critical Disability Studies. *Disability & Society*, 28(5), 631-644.

Goodley, D. (2014). *Dis/ability Studies: Theorising Disablism and Ableism*. London: Routledge.

Gostin, L.O. (1991). Ethical Principles for the Conduct of Human Subject Research: Population-Based Research and Ethics. *19L.Med & Healthcare*, 19(3-4), 191-201.

Grosz, E. (1994), *Volatile Bodies: Towards a Corporeal Feminism*. St Leonard: Allen & Unwin.

Gramsci, A. (1971). *The Prison Notebook*. (Q. Hoare & G. N. Smith Translations). London: Lawrence and Wishart.

Grant, V. (2002). Making Room for Medical Humanities. *Journal of Medical Ethics and Medical Humanities*, 28, 45-48.

Gray, D.E. (2009). *Doing Research in the Real World*. London: Sage.

Greenstein, A. (2014). Is this Inclusion? Lesson from a very Special Unit. *International Journal of Inclusive Education*, 18(4), 371-391.

Greenstein, A. (2015). *Radical Inclusive Education: Disability, Teaching and Struggles for Liberation*. London: Taylor and Francis Ltd.

Grech, S. (2015). Decolonising Eurocentric Disability Studies: Why Colonialism Matters in Disability and Global South Debate. *Social Identities*, 21(1), 6-12.

Grech, S. & Soldatic, K. (2015). Disability and Colonialism: (dis)encounters and Anxious Intersectionalities. *Social Identities*, 21(1-3), 1-5.

Greene, J.C. (2008). Is Mixed Methods Social Enquiry a Distinctive Methodology? *Journal of Mixed Method Research*, 2, 7-22.

Greene, J.C., Caracellin, V.J. & Graham, W.F. (1989). Toward a Theoretical framework for Mixed-Method Evaluation Design. *Educational Evaluation and Policy Analysis*, 11, 255-274.

Greene, J.C. & Hall, J.N. (2010). Dialectics and Pragmatism: Being of Consequences. In A. Tashakkori & C. Teddlie (Eds), *Mixed Methods in Social & Behavioural Research* (pp. 144-199). California: Thousand Oaks.

Grosfoguel, R. (2007). The Epistemic Decolonial Turn: Beyond Political Economy Paradigms. *Cultural Studies*, 21 (2-3), 211-223.

Grosfoguel, R. (2011). Decolonising Post-Colonial Studies and Paradigms of Political Economy: Transmodernity, Decolonial Thinking and Coloniality. *Journal of Peripheral Cultural Production of the Luso-Hispanic World*, 1(1), 1-5).

Guba, E. & Lincoln, Y.S. (1994). Competing Paradigms in Qualitative Research. In N.K. Denzin & Y.S. Lincoln (Eds.), *Handbook of Qualitative Research* (pp. 105-117), London: Sage.

Hall, S. (1990). Cultural Identity and Diaspora. *Identity: Community Culture Difference*, 2, 222-237.

Hall, P. (2005). Interprofessional Teamwork: Professional Cultures as Barriers. *Journal of Interprofessional care*, 1, 188-196.

Hall, L.M. & Belch, H.A. (2000) Setting the Context: Reconsidering the Principles of Full Participation and Meaningful Access for Students with Disabilities. *New Directions for Student Services*, 2000(91), 5-17.

Hall, J. & Tinklin, T. (2002). *Disabled Students in Higher Learning*. Scottish Council for Research in Education: SHEFC.

Haralambos, M. & Holborn, M. (1991). *Sociology: Themes and Perspectives* (3rd edition). London: Collins Educational.

Hargreaves, A. (2000). Four Ages of Professionalism and Professional Learning. *Teachers and Teaching: History and Practice*, 6(2), 151-182.

Harris, J. (2001). One Principle and Three Fallacies of Disability Studies. *Journal of Medical Ethics*, 27(6), 383-387.

Harris, A. (2000). Gender, Violence, Race and Criminal Justice. *Stanford Law Review*, 52, 777-793.

Harvey, D. (2005). *A Short History of Neoliberalism*. London: Oxford University Press.

Hartley, S. & Muhit, M. (2003). Using Qualitative Research for Disability Research in Majority World Countries. *Asia Pacific Disability Rehabilitation Journal*, 14(2), 103-115.

Harvey, L.; Mason, S. & Ward, R. (1995). *The Role of Professional Bodies in Higher Education Quality Monitoring*. Birmingham: QHE.

Hehir, T. (2002). Eliminating Ableism in Education. *Harvard Educational Review*, 72 (1), 1-33.

Helsinki (2009). *Ethical Principles in the Humanities and Social and Behavioural Sciences and Proposal for Ethical Review*. National Advisory Board on Research Ethics.

Hesser-Biber, S. (2011). *Handbook of Emergent Technologies in Social Research*. New York: Oxford University Press.

Hewitt, J.; Thomas, P. & Wilson, J. (2007). Professionalism in British Management: Bogus Claim or Reality? *A Paper Presented in the 7th European Critical Accounting Studies Conference*. Glasgow, 2007.

Hibbs, T. & Potheir, D. (2006). Post-Secondary Education and Disabled Students: Mining a Level Playing Field or Playing in a Minefield? In, D. Potheir & R. Devlin, (Eds.), *Critical Disability Theory: Essays in Philosophy, Politics, Policy and Law* (pp. 198-219), Vancouver-Toronto: UBC Press.

Higgs, J. (1993). Physiotherapy, Professionalism and Self-directed Learning. *Journal of the Singapore Physiotherapy Association*, 14, 8-11.

Higgs-Kleyn, N & Kapelianis, D. (1999). The Role of Professional Codes in Regulating Ethical Conduct. *Journal of Business Ethics*, 19(4), 363-374.

Hoffman, H.T. (1994). Clinical Scholarship and Skills Training. *Clinical Law Review*, 93.

Holloway, W. & Jefferson, T. (2000). *Doing Qualitative Research Differently: Narrative and the Interview Method*. London: Sage.

Holloway, S. (2001). The Experience of Higher Education from the Perspective of Disabled Students. *Disability & Society*, 16 (4), 597-615.

Horkheimer M. (1972). *Critical Theory*. New York: The Seabury Press.

Horkheimer, M. (1995). Materialism and Morality. In M. Horkheimer (Ed.), *Between Philosophy and Social Science, Selected Early Writing*. Massachusetts, USA: Massachusetts Institute of Technology Press.

Hosking, D.L. (2008). Critical Disability Theory. *Disability Studies*, 2(4), 7.

Howell, C. (2005). *Higher Education Monitor: South African Higher Education Responses to Students with Disabilities: Equity of Access and Opportunity*. Western Cape, South Africa: The Council of Higher Education.

Howell, C. (2006). Disabled Students and Higher Education in South Africa. In B. Watermeyer, L. Swartz, T. Lorenzo, M. Schneider and M. Priestley (Eds.), *Disability and Social Change: A South African Agenda*: (pp. 164-178), Cape Town: HSRC.

- Howell, C., Chalklen, S. & Alberts, T. (2006). A History of the Disability Rights Movement In South Africa. In B. Watermeyer, L. Swartz, T. Lorenzo, M. Schneider and M. Priestley (Eds.), *Disability and Social Change: A South African Agenda* (pp. 46–84), Cape Town: HSRC.
- Holye, E. & Wallace, M. (2005). *Educational Leadership: Ambiguity: Professional and Managerialism*. London: Sage.
- Hughes, E. (1971). *The Sociological Eye: Selected Papers on Institution and Race (Part 1) and Self and the Study of Society (Part 11)*. Chicago: Aldine Atherton.
- Hugo, A. J. (2012). The Response of Higher Education Institutions in Namibia to the Needs of Students with Disabilities. *Africa Education Review*, 9(2), 308-326.
- Hurst, A. (1993). *Steps toward Graduation: Access to Higher Education for People with Disabilities*. Aldershot: Avebury.
- Hurst, A. (1996). Reflection on Research, Disability and Higher Education. In L. Barton (Ed.), *Emerging Issues and Sights: Disability and Society*, New York: Longman.
- Hyett, N., Kenny, A. & Dickson-Swift, V. (2014). Methodology or Methods? A Critical Review of Qualitative Case Study Reports. *International Journal of Qualitative Studies on Health and Wellbeing*, 9, 1-12.
- Ihantola, E. & Kihn, L. (2011). Threats to Validity and Reliability in Mixed Methods Accounting Research. *Qualitative Research in Accounting and Management*, 8(1), 39-58.
- Ibarra, H. (1999). Provisional Self: Experimenting with Image and Identity in Professional Adaptation. *Administrative Science Quarterly*, 44(1), 764-791.
- Jackson, J. (2015). Professions, Power, Privilege and Legal Liability. *Peter Taylor Memorial Lecture to Professional Negligence Bar Association*. Judiciary of England.
- Jamal, K & Bowie, N.E (1995). Theoretical Consideration for a meaningful Code of Professional Ethics. *Journal of Business Ethics*, 14(9), 703-714.
- Jamieson, S. (2004). Likert Scales: How to (ab)use them. *Medical Education*. 38, 1217-1218.
- Jick, T.D. (1979). Mixing Qualitative and Quantitative Research: Triangulation in Action. *Administrative Science Quarterly*, 24(4), 602-611.
- Johnson, J.B. & Joslyn, R.A. (1995). *Political Science Research Methods*. Washington, D.C: Congressional Quarterly Inc.
- Johnson, R.B & Onwuegbuzie, A.J. (2004). Mixed Method Research: A Research Paradigm Whose Time has come. *Educational Research*, 33 (7), 14-26.
- Johnson, R.B. & Onwuegbuzie, A.J & Turner, L.A. (2007). Towards a Definition of Mixed Methods Research. *Journal of Mixed Methods Research*, 1 (2), 112-133.
- Jones, M.L. (2007). Using Software to Analyse Qualitative Data. *Malaysian Journal of Qualitative Research*, 1(1), 64-76.

- Kathryn, J. (1995). *Opening Universities to Students with Disabilities*. University of Cape Town: South Africa.
- Karreman, D. & Alvesson, M. (2009). Resisting Resistance: Counter-Resistance, Consent and Compliance in Consulting Firm. *Human Relations*, 62(8), 1115-1144.
- Kennedy, D. (1990). The Liberal Administrative Style, *Syracuse Law Review*, 801.
- Kent, A. & De Villiers, M.R. (2007). Medical Education in South Africa-Exciting Times. *Medical Teacher*, 29(9), 906-908.
- Khuzwayo, Z. (2011). Providing Accessible Transport for People with Disabilities in the EThekweni Municipal Area: Unpacking the Options. *Paper presented at the Southern African Transport Conference*, 11-14 July 2011. Pretoria: South Africa.
- Kisanji, J. (1995). Growing Up Disabled. In P. Zinkin & H. McConachie (Eds.), *Disabled Children in Developing Countries*. London: MacKeith Press.
- Kitzinger, J. (1994). The Methodology of Focus Groups: The Importance of Interaction between Research Participants. *Sociology of Health and Illness*, 18, 103-121.
- Knowles, J.G.; Cole, A. & Pressmead, G.S. (1994). *Through the Pre-service Teachers' Eyes*. New York: MacMillan College Publishing Company.
- Knox, M. (2002). *Widening Participation in Higher Education*. London: Routledge.
- Kraak, A. (2005). The Challenge of the "Second Economy" in South Africa: The Contribution of Skills Development. *Journal of Vocational Education and Training*, 57(4), 429-452.
- Kuenzel, E. & Welscher, H. (2009). *Managing Collaboration-Management for Successful Collaboration in the Public Sector*. German: InWent.
- Ladva, P. (2012). Disability and Socialisation of Accounting Professionals. *Social and Environmental Accountability Journal*, 32(2), 113-114.
- Lahey, K. (1999). *Are we "persons" yet? Law and Sexuality in Canada*. Toronto: University of Toronto Press.
- Lai, P.K & Lim, P.H. (2012). Concept of Professional Socialisation in Nursing. *LeJSME*, 6(1), 85-99.
- Lalvani, P. & Douglas, L.P. (2013). Historical Perspectives on Studying Families with Disabilities: A Case for Critical Research. *Disability Studies Quarterly*, 33(3), 1.
- Lamdin, R.J. (2006). *The Professional Socialisation of Medical Students through the Preclinical and Clinical Transition*. Unpublished Phd Thesis: The University of Auckland.
- Lampert, M. (2010). Learning and Teaching in, from and for Practice: What do we mean? *Journal of Teacher Education*, 61(1-2), 21-34.

Lave, J. & Wenger, E. (2002). *Situated Learning: Legitimate Peripheral Participation*. New York: Cambridge University Press.

Lawler, S. (2008). *Identity: Sociological Perspectives*. Cambridge: Polity Press.

Leedy, P.D. (1997). *Practical Research: Planning and Design*. (6th Ed). Columbus, Ohio: Prentice Hall.

Leedy, P. D. & Ormrod, J.E. (2013). *Practical Research: Planning and Design*. Boston: Pearson.

Legard, R. (2003). In-depth Interviews. In J. Ritchie & J. Lewis, (Eds.), *Qualitative Research Practice: A Guide for Social Science Students and Researchers*. London: SAGE Publication.

Le Grange, S. (2014). Archischools in Crisis: Reflections on Architectural Education in Contemporary South Africa with Specific Reference to Transformation and Good Design Teaching. *Unpublished Paper, Presented at the Architectural Symposium, WITS, 24 January 2014*.

Leicester, M. & Lovel, T. (1997). Disability Voice: Educational Experience and Disability. *Disability & Society*, 12(1), 111-118.

Leonard, A. & Grobler, A. F. (2005). Exploring Challenges to Transformational Leadership Communication about Employment Equity: Managing Organisational Change in South Africa. *Journal of Communication Management*, 10(4), 390-406.

Letsika, Q. A. (2002). *The Future of Clinical Legal Education in Lesotho: A Study of the National University of Lesotho's Legal Education and its Relevance to the Needs of the Administration of Justice in Lesotho*. Unpublished Masters Dissertation. University of Natal: Durban.

Lincoln, Y.S. & Guba, E.G. (1985). *Naturalistic Inquiry*. Newsbury Park, CA: Sage Publications.

Linda, E. (2008). Professionalism, Professionalism and the Development of Educational Professionals. *British Journal of Education Studies*, 56(1), 20-38.

Lipanya, K.J. (2014). Disability and Masculinity in South African Autosomatography. *Journal of Disability*, 3(1), 85-89.

Lloyd, C. (2008). Removing Barriers to Achievement: A Strategy for Inclusion or Exclusion. *International Journal of Inclusive*, 12(2), 221-236.

Loomba, A. (2001). *Colonialism/Post Colonialism*. London: Routledge.

Lorenzo, T., KaToni, M. & Priestley, M. (2006). Developing a Disability Studies Programmes: Engaging Activism and Academia. In B. Watermeyer, L. Swartz, T. Lorenzo, M. Schneider and M. Priestley (Eds.), *Disability and Social Change: A South African Agenda*, (pp. 179-191), Cape Town: HSRC.

Loughran, J.J. (2006). *Developing a Pedagogy of Teacher Education: Understanding Teaching and Learning about Teaching*. London: Routledge.

Lyner-Cleophas, M., Swart, E., Chataika, T. & Bell, D. (2014) Increasing Access into Higher Learning: Insights from the 2011 African Network on Evidence-to-Action on Disability Symposium-Education Commission. *African Journal of Disability*. 3(2), 1-3.

Macdonald, K.M. (1995). *The Sociology of the Professions*. London: SAGE Publications.

Maldonado-Torres, N. (2007). On the Coloniality of Being: Contributions to the Development of a Concept. *Cultural Studies*, 21 (2-3), 240-270.

Maldonado-Torres, N (2011). Thinking Through the Decolonial Turn: Post-Continental Intervention in Theory, Philosophy and Critique-An Introduction. *Transmodernity*, Fall, 1-25.

Mace, R. (1988). Universal Design in Housing. *Assistive Technology*, 10(1), 18-21.

Macey, D. (2000). *The Penguin Dictionary of Critical Theory*. England: Penguin Group.

Mackenzie, C., MacDowell, C & Pittaway, E. (2007). Beyond 'Do no Harm': The Challenge of Constructing Ethical Relationships in Refuge Research. *Journal of Refugees Studies*, 20(2), 299-318.

Mackenzie, J., Mji, G. & Gcaza, S. (2014). With or Without Us? An Audit of Disability Research in the Southern African Region. *African Journal of Disability*, 3(2), 1-6.

Madden, C.A. & Mitchell, V.A. (1993). *Profession, Standards and Competence: A Survey of Continuing Education for the Professions*. University of Bristol: Depart of Continuing Education.

Madriaga, M. (2010). Enduring Disablism: Students with Dyslexia and Their Pathways into UK Higher Education and Beyond. *Disability & Society*, 22(4), 399-412.

Maguvhe, M. (2015). Inclusive Education: A Transformation and Human Rights Agenda under Spotlight in South Africa. *African Journal of Disability*, 4(1), 1-7.

Mamdani, M. (27 May-2 June 2011). *Africa's Post-Colonial Scourge*. Mail and Garden: Getting ahead.

Marcuse, C. (1964). *One Dimensional Man: Studies in the Ideology of Advanced Industrial Society*. Boston: Beacon Press.

Maritz, D. (2008). *Determining the Extent of Compliance in the Built Environment Regarding Accessibility for Physically Disabled Persons*. Unpublished Masters Dissertation. Tshwane University of Technology. Pretoria

Mascatelli, M.J. (2008). *The Socialisation Process of the Student Teacher during Student-Teaching Experience: Continuous Negotiation between Student Teacher and Mentor*. Unpublished Phd Thesis. Washington State University.

- Mason, J. (1996). *Qualitative Researching*. London. Sage: Publication.
- Mathopha, M. H. (2007). *An Investigation of the Management of Inclusion in the Free State Primary Schools*. Unpublished Masters Dissertation: University of South Africa.
- Maton, K & Moore, R. (2010). Introduction. In K, Maton & R, Moore (Eds.), *Social Realism, Knowledge and the Sociology of Education: Coalition of the Mind*, (pp.1-13), London: Continuum.
- Matshedisho, K.J. (2007). Access to Higher Education for Disabled Students in South Africa: A Contradictory Conjunction of Benevolence, Rights and the Social Model of Disability. *Disability and Society*, 22(7), 685-699.
- Maxwell, J.A. (1996). Designing a Qualitative Study. In L. Bickman & D. J. Reg (Eds.), *Handbook of Applied Social Science Research Methods*. Thousand Oaks, CA: Sage.
- McKinney, E. & Swartz, L. (2016). Life in Special Schools in South Africa: Voices of Former Students. *International Journal of Disability, Development and Education*, 63(3), 309-321.
- McLaughlin, J.; Goodley, D.; Clavering, E. & Fisher, P. (2008). *Families Raising Disabled Children: Enabling Care and Social Justice*. New York: Palgrave Macmillan.
- McMillan, J.H. (2012). *Educational Research: Fundamentals for the Consumer* (6th Ed). Pearson Education: Boston, MA.
- McNamara, M & Fealy, G. (2014). Knowledge Matters in Nursing. In Young & J. Muller (Eds.), *Knowledge, expertise and the professions* (pp. 157-170), London: Taylor & Francis.
- Meekosha, H. (1998). Body Battles: Bodies, Gender and Disability. In T. Shakespeare (Ed.), *The Disability Reader: The Social Science Perspective*. London: Cassell.
- Meekosha, H. (2004). Drifting Down the Gulf Stream: Navigating the Cultures of Disability Studies. *Disability and Society*, 19(7), 721-734.
- Meekosha, H. & Shuttleworth, R. (2009). What's so critical about Critical Disability Studies? *Australian Journal of Human Rights*, 15(1), 47-76.
- Meeks, L.M.; Bisagno, J. Jain. N. & Herzer, K. (2015). Support Students with Disabilities in Medicine and Health Care. *Disability Compliance in Higher Learning*, 21(3), 1-5.
- Mertens, D.M. (2003). Mixed Methods and the Politics of Human Research: The Transformative Emancipatory Perspective: In A, Tashakkori & C, Teddlie (Eds.), *Handbook for Mixed Methods in Social and Behavioural Research*, (pp.135-164), Thousands, Oaks, CA: Sage.
- Mertens, D.M. (2005). *Research and Evaluation in Education and Psychology: Integrating Diversity with Quantitative, Qualitative and Mixed Methods* (2nd Ed). Sage: Boston.
- Mertens, D.M. (2007). Transformative Paradigm: Mixed Methods and Social Justice. *Journal of Mixed Methods Research*, 1, 212-225.

- Mertens, D.M. (2009). *Transformative Research and Evaluation*. London: The Guilford Press.
- Mertens, D.M. (2010). *Research and Evaluation in Education and Psychology: Integrating Diversity with Quantitative, Qualitative, and Mixed Methods*, (3rd ed.), Thousand Oaks, CA: Sage.
- Mertens, D.M, (2012). Transformative Mixed Methods. *American Behavioural Scientist*, xx(x), 1-12.
- Mertens, D.M; Sullivan, M & Stace, H. (2013). Disability Communities: Transformative Research for Social Change. In N.K, Denzin & Y.S, Lincoln (Eds.), *The Landscape of Qualitative Research* (pp. 475-505), London: SAGE.
- Mertens, D. (2015). *Research and Evaluation in Education and Psychology: Integrating Diversity with Quantitative, Qualitative and Mixed Methods* (4th Ed). Thousand Oaks: Sage Publication.
- Mignolo, W.D. (1995). *The Darker Side of Renaissance: Literacy, Territory, and Colonisation*. Ann Arbo, MI: University of Michigan Press.
- Mignolo, W.D. (2000). *Local Histories/Global Designs: Coloniality, Subaltern Knowledges and Border Thinking*. Princeton N.J: Princeton University Press.
- Mignolo, W.D. (2007). Introduction: Coloniality of Power and De-Colonial Thinking. *Cultural Studies*, 21 (2-3), 240-270.
- Mignolo, W.D. (2008). The Geopolitics of Knowledge and the Colonial Difference. In M. Morana, E. Dussel & C. A. Jauregui (Eds.), *Coloniality at Large: Latin America and the Postcolonial Debate* (pp. 225-258), Durhan, NG: Duke University Press.
- Mignolo, W.D. (2009). Epistemic Disobedience, Independent Thought and Decolonial Freedom. *Theory, Culture & Society*, 26 (7-8), 1-23.
- Mignolo, W.D. (2011). *The darker side of Western Modernity: Global Futures, Decolonial options*. Durham and London: Duke University Press.
- Mikkelson, B. (1995). *Methods for Development Work and Research: A Guide for Practitioners*. London: SAGE Publications.
- Miller, M.C. (1995). *The High Priest of American Politics: The Role of Lawyers in American Political Institutions*. Knoxville: The University of Tennessee Press.
- Miles, M. (1979). Qualitative Data as an Attractive Nuisance: The Problem of Analysis. *Administrative Science Quarterly*, 24(3), 590-601.
- Miles, A. & Huberman, M. (1994). *Qualitative Data Analysis: An expanded Sourcebook* (2nd Ed). Thousand Oaks, CA: Sage.
- Miles, S. & Singal, N. (2010). The Education for All and Inclusive Education Debate: Conflict, Contradiction or Opportunity? *International Journal of Inclusive Education*, 14(1), 1-15.

- Moll, R.W. (1990). *The Lure of the Law*. New York: Penguin Books
- Morgan, D. (2007). Paradigms Lost and Pragmatism Regained: Methodological Implications of Combining Qualitative and Quantitative Methods. *Journal of Mixed Methods*, 1, 48-76.
- Morris, J. (1989). *Able lives: Women's experiences of Paralysis*. London: The Women's Press.
- Morris, J. (1991). *Pride against Prejudice*. London: The Women's Press.
- Morse, J.M. & Niehaus, L. (2009). *Mixed Method Design: Principles and Procedures*. Walnut Creek, CA: Left Coast Press, Incl.
- Motala, Z. (1996). Legal Education in South Africa: Moving Beyond the Couchpotato Model towards a Lawyeringskills Approach-A Case for a Comprehensive Course on Legal Research, Analysis and Writing. *South African Law Journal*, 113, 695.
- Mouly, G.H. (1978). *Educational Research: Art and Science of Investigation*. Boston: Allyn & Bacon.
- Mueke, M.D. (1997). Policy as Forethought in Qualitative Research: A Paradigm from a Developing Country Scientist. In J. Morse (Ed.), *Completing a Qualitative Project*. London: Sage Publication.
- Murphy, R.F. (1990). *The Body Silent*. New York: W.W. Norton.
- Naiker, S. (2005). Inclusive Education in South Africa: An Emerging Pedagogy of Possibility. In D. Mitchell (Ed.), *Contextualising Inclusive Education* (pp. 230-252), Milton Park, UK: Routledge.
- National Buildings Regulations (NBR), (2008). *National Building Regulations and Building Standards Act No 103 of 1977*. Pretoria: Government Printers.
- National Council of Higher Education, (1996). *An overview of a New Policy Framework for Higher Education Transformation*. 22 August 1996, Pretoria.
- National Student Financial Aid Scheme, (2013). *Guidelines for Students with Disabilities for the Department of Higher Education and Training Bursary Programme*, NSFAS.
- Nayyar, D. (2008). Globalisation: What does it mean for Higher Education? In E.L. Weber & J.J. Duderstadt (Eds.), *The Globalisation of Higher Learning*. London: Economica Ltd.
- Ndlovu, M. (2013). Mobilising History for Nation-Building in South Africa: A Decolonial Perspective. *Yesterday and Today*, 9, 1-13.
- Ndlovu, M. (2015). *Cultural Villages in Post-apartheid South Africa: A Decolonial Perspective*. Unpublished PhD Thesis. Department of Anthropology: Monash University.
- Ndlovu, S. & Walton, E. (2016). Preparation of Students with Disabilities to Graduate into Professions in the South African Context of Higher Learning: Obstacles and Opportunities. *African Journal of disability*, 4(1), 1-8.

Ndlovu-Gatsheni, S.J. (2001). Imperial Hypocrisy, Settler Colonial Double Standards and Denial of Human Rights to Africans in Colonial Zimbabwe. In N, Bhebe and T, Ranger (Eds.), *The Historical Dimensions of Democracy and Human Rights in Zimbabwe: Volume One: Precolonial and Colonial Legacies*. Harare: University of Zimbabwe Publications.

Ndlovu-Gatsheni, S.J. (2012). *The African Neo-Colonised World*. Dakar: CODESRIA Books.

Ndlovu-Gatsheni, S.J. (2013). *Empire, Global Coloniality and Subjectivity*. New York and Oxford: Berghahn Books.

Ndlovu-Gatsheni, S.J. (2013). Why Decoloniality in the 21st Century? *The Thinker*, 48, 10-15.

Ndlovu-Gatsheni, S.J. (2015). Decoloniality as the Future of Africa. *History Compass*, 13(10), 485-496.

Neuman, L.W. (1994). *Social Research Method: Qualitative and Quantitative Approaches*. London: Allyn and Bacon.

Neuman, W.L. (1997). *Social Research Methods: Quantitative and Qualitative Approaches*. Boston: Ally and Bacon.

Nicholson, C. (2004). Same Game, New Name? The more Things Change in Legal Education, The More they Stay the Same? *Professorial Inaugural Address Delivered at Pretoria University*, Pretoria, 11 May 2004.

Odendaal-Magwaza, M, & Farman, R. (1997). Unpublished Submission by the University of Natal to Education Portfolio Committee at the public hearing on Draft White Paper 3. *A Programme for Higher Education Transformation at the National Assembly*. Parliament, Cape Town.

ODP, Office of Deputy President, (1997). *White Paper on an Integrated National Disability Strategy*. Pretoria: Office of the Deputy President.

Oliver, M. (1990). *The politics of disablement: Critical Texts in Social Work and the Social Work and the Welfare State*. Basingstoke: Macmillan.

Oliver, M. (1992). Changing the Social Relations of Research Production. *Disability, Handicap and Society*, 7(2), 101-114.

Oliver, M. (1996a). Defining Impairment and Disability. In C, Barnes & G, Mercer (Eds.), *Exploring the Divide: Illness and Disability*. Leeds: The Disability Press.

Oliver, M. (1996b). *Understanding Disability: From Theory to Practice*. New York: Palgrave Macmillan.

Oliver, M. (1997). Emancipatory Research: Realistic Goal or Impossible Dream? In C. Barnes, & G. Mercer, (Eds.), *Doing Disability Research*, Leeds: The Disability Press.

Oliver, M. & Barnes, C. (1998). *Disabled People and Social Policy: From Exclusion to Inclusion*. Addison Wesley Longman: Harlow.

Oliver, M. & Barnes, C. (2012). *The New Politics of Disablement*. Hampshire: Palgrave Macmillan.

Oliver, M. (2013). The Social Model on Disability: Thirty Year On. *Disability & Society*, 28(7), 1024-1026.

Ogot, B.A. (2002). The Role of a University in Development of National Unity and Consciousness. In T. Falola & A. Odhiambo (Eds.), *Essays of Bethwell Allan Ogot: The Challenges of History and Leadership in Africa* (pp. 593-598), Trenton, NJ: Africa World Press.

Onwegbu, O.L. (1977). *The Nigerian Culture: Its perception and Treatment of Learners with Disabilities*. Oyo, Nigeria: Federal Advanced Teachers' College.

Onwuegbuzie, A.J. & Johnson, R.B. (2006). The Validity Issue in Mixed Research. *Research in Schools*. 13, 48-63.

Parliamentary Monitoring Group (2013). *Disabled People South Africa: Briefing on Education, Employment and Accessibility Challenges*, Available at: <http://www.pmg.org.za>. Accessed on the 17 May 2014.

Patel, V.L., Evans, D.A. & Groen, G.J. (1989). Biomedical Knowledge and Clinical Reasoning. In D.A. Evans & V.L. Patel (Eds.), *Cognitive Science in Medicine: Biomedical Modelling* (pp.49-108), Cambridge, MA: MIT Press.

Patel, V.L. & Kaufman, D.R. (2000). Clinical Reasoning and Biomedical Knowledge: Implications for Teaching. In J. Higgs & M. Jones (Eds.), *Clinical Reasoning in the Health Profession* (pp. 33-44), Oxford: Butterworth-Heinemann.

Paterson, M.; Higgs, J.; Wilcox, S & Villenure, M. (2002). Clinical Reasoning and Self-directed Learning: Key Dimensions in Professional Education and Professional Socialisation. *Focus on Health Professional Education*, 4(2), 5-21.

Payne, G. & Payne, J. (2004). *Key Concepts in Social Research*. London: Sage publications.

Phasha, N. & Moichela, K.Z. (2011). Inclusive Education in South Africa. In A.B. Nsamenang & T.M.S. Tchombe (Eds.), *Handbook of African Educational Theories and Practices: A Generative Teacher Education Curriculum* (pp. 373-383), Cameroon: Human Development Resource Centre.

Peel, E.L. (2005). Inclusive Practice in South Africa. A Deaf Education Perspective. *Inclusive and Supportive Education Congress. International Special Education Conference. Inclusion: Celebrating Diversity?* 1st-4th August 2005. Glasgow. Scotland.

Phiri, N. L. (1979). *Problems of the Handicapped: An Assessment of Attitudes towards the Disabled and Implication for Rehabilitation in Zambia*. Lusaka: Institute for African Studies.

Pickett, G. (2010). *The LLB Curriculum Research Report*. A Research Report Produced for the Advice and Monitoring Directorate of the Council on Higher Education: CHE.

Pillow, W. (2003). Confession, Catharsis or Cure? Rethinking Uses of Reflexivity as Methodology Power in Qualitative Research. *Qualitative Studies in Education*, 16(2), 175-196.

Plewis, I. & Mason, P. (2005). What Works and Why: Combining Quantitative and Qualitative Approaches in Larger-Scale Evaluations. *International Journal of Social Research Methodology*, 8 (3), 185-194.

Pliner, S.M. & Johnson, J. R. (2004). Historical, Theoretical and Foundational Principles of Universal Instructional Design in Higher Education. *Equity and Excellence in Education*, 37, 105-113.

Portwood, D. & Fielding, C. (1981). Privilege and the Profession. *The Sociological Review*, 29(4), 749-770.

Presser, J. & Blair, J. (1994). Survey Pretesting: Do different Methods produce different results. In P.V. Marsden (Ed.), *Sociological Methodology*. Washington, DC: American Sociological Association.

Priestly, M., Waddington, L. & Bessozi, C. (2010). Towards an Agenda for Disability Research in Europe: Learning for Disabled People's Organisations. *Disability and Society*, 25, 731-746.

Provine, D.M. (1986). *Judging Credentials: Nonlawyer Judges and the Politics of Professionalism*. Chicago: University of Chicago.

Quijano, A. (2000). Coloniality of Power, Ethnocentrism, and Latin America. *Nepantla*, 1, 533-580.

Quijano, A. (2007). Coloniality of Modernity/Rationality. *Cultural Studies*, 21(2-3), 168-178.

Quijano, A. (2011). Decolonising Post-Colonial Studies and Paradigms of Political Economy: Transmodernity, Decolonial Thinking, and Global Coloniality. *Transmodernity: Journal of Peripheral Cultural Production of the Luso-Hispanic World*, 1 (1), 1-35.

Ramachandran, S.; Rao, S.V. & Gole, T. (2005). Information Security on Four Professions: A Comparative Study. *Proceeding of the 41st International Conference of System Services*.

Ramazanoglu, C. & Holland, J. (2002). *Feminist Methodology*. Thousand Oaks, CA: Sage.

Ramutloa, L. (2010). *Commission for Employment Equity Report 2009-2010: Part 2*. South African Department of labour.

Available from: <http://www.labour.gov.za/documents/annualreport/Commission%20for%20Employment%20Equity%20Report/2009-2010/commission-for-employment-equity-report-2009-2010>

Ratele, K. (2008b). Studying Men in Africa Critically. In E. Uchenda (Ed.), *Masculinity in Contemporary Africa* (pp. 18-33), Dakar: Council for the Development of Social Science Research in Africa:

Reich, C; Price, J.; Rubin, E.; & Steiner, M. (2010). *Inclusion, Disabilities and Informal Science Learning*. A CAISE Inquiry Group Report, Washington, D.C: Centre for Advancement of Informal Science Education (CAISE).

Republic of South Africa, (1996). Constitution of South Africa. Available at: <http://www.info.gov.za/documents.constitution/1996> Accessed on 17 May 2013.

Republic of South Africa (1988a). *Employment Equity Act, No 55*. Government Gazette, No 19370, Government Printers: Pretoria.

Republic of South Africa (1998a) *Employment Equity Act, No 55*. Government Gazette, No 19370. Government Printers: Pretoria.

Republic of South Africa (2000). *Promotion and Prevention of Unfair Discrimination Act, No 4 of 2000*. Available at: [http:// www.polity.org.za/govdocs/legislation](http://www.polity.org.za/govdocs/legislation) Accessed on 17 May 2013.

Riddel, S. (1998). Chipping Away at the Mountain: Disabled Students' Experience of Higher Education. *International Studies in Sociology of Education*, 8, 203-222.

Riddel, S., Tinklin, T. & Wilson, A. (2005). *Disabled Students in Higher Education: Perspectives in Widening Access and Changing Policies*. Abingdon: Routledge.

Ritchie, J. (2003). The Application of Qualitative Methods to Social Research. In J. Ritchie & J. Lewis, (Eds.), *Qualitative Research Practice: A Guide for Social Science Students and Researchers*. London: SAGE Publication.

Robson, C. (2002). *Real World Research* (2nd Ed). Oxford: Blackwell Publishing.

Rorty, A. O. (2007). The Vanishing Subject: The many Faces of Subjectivity. In J. Biehler, B. Good & A. Kleinman (Eds.), *Subjectivity, Ethnographic Investigations* (pp. 31-51), Berkeley, CA: University of California Press.

Rose, D & Sullivan, O. (1996). *Introducing Data Analysis for Social Scientists*. Philadelphia: PA Open University Press.

Rose, D.H. & Meyer, A. (2000). Universal Design for Learning. *Journal of Special Education Technology*, 15(1), 1-12.

Rose, D.B. (2004). *Reports from a Wild Country: Ethics for Decolonisation*. Sydney: University of South Wales Press.

Rubin, H. J. & Rubin, I.S. (1995). *Qualitative Interviewing: The Art of Hearing Data*. London: SAGE Publication.

Russel, M. & Malhotra, R. (2009). Capitalism and Disability. *Socialist Register*, 38(38), 211-228.

Rusznyak, L. (2015). Knowledge Selection in Initial Teacher Education Programmes and its Implication for Curricular Coherence. *Journal of Education*, 60, 7-29

Ryan, G.W. & Bernard, H.R. (2000). Data Management and Analysis Methods. In N.K. Denzin & Y.S. Lincoln (Eds.), *Handbook of Qualitative Research* (pp. 769-802), Thousand Oaks, CA: Sage.

Sahlin, M. (1985). *Islands of History*. London: The University of Chicago Press.

Santos, B. (2007). Beyond Abyssal Thinking: From Global Lines to Ecologies of Knowledges. *Review*, 30(1), 45-89.

Saur, R.E. (1992). Resources for deaf Students in the mainstream Classroom. In S.B. Foster & G.G. Walter (Eds.), *Deaf Students in Post-Secondary Education* (pp. 96-117), New York: Routledge, Chapman and Hall, Incl.

Sayer, A. (2011). *Why Things Matter to People*. Cambridge: Cambridge University Press.

Schaap, P.K. & Luwes, M. (2013). Learning Potential and Academic Literacy Tests as a Predictors of Academic Performance for Engineering Students. *Acta Academia*, 45(3), 181-214.

Schleef, D. (2001). Thinking like a Lawyer. Gender Difference in the Production of Professional Knowledge. *Gender Issues*, 19 (2), 69-87.

Schutt, R. K. (2011). *Investigating the Social World: The Process and Practice of Research*. Thousand Oaks: Sage Publication.

Scott, I.; Yeld, N. & Hendry, J. (2007). *Higher Education Monitor 6: A Case for Improving Teaching and Learning in South African Higher Education*. Pretoria: Council on Higher Education.

Second National Higher Education Summit (2015). Reflections on Higher Education Transformation. *Discussion Paper Prepared for the Second National Higher Education Transformation Summit*. University of South Africa, 15-17 October.

Shahjahan, R.A. & Morgan, C. (2016). Global Competition, Coloniality and Geopolitics of Knowledge of Higher Education. *British Journal of Sociology of Education*, 37(1), 92-100.

Shakespeare, T. & Watson, N. (1997). Defending the Social Model. *Disability and Society*, 12(2), 293-300.

Shakespeare, T. (2006). *Disability Rights and Wrongs*. London: Routledge.

Shakespeare, T. & Watson, N. (2001). The Social Model of Disability: An Outdated Ideology? *Research in Social Science and Disability*, 2, 9-28.

Shakespeare, T. (2010). The Social Model of Disability. In L. J. David (Ed.), *The Disability Studies Reader* (pp. 266-273), London: Routledge.

Shalem, Y. (2014). What binds professional judgement? The case of Teaching. In M. Young & J. Muller (Eds.), *Knowledge, expertise and the professions* (pp. 93-105), London:

Routledge.

Shapiro, J. (1993). *No Pity: People with Disabilities, a New Civil Rights Movement*. New York: Times Books.

Shay, S. (2013). Conceptualizing Curriculum Differentiation in Higher Education: A Sociology of Knowledge Point of View. *British Journal of Sociology of Education*, 34(4), 563-582.

Sherry, M. (2007). (Post)colonising Disability. *Wagata: A Journal of Transnational and Women's Studies*, 4, 10-23.

Sherry, M. (2009). *Disability and Diversity: A Sociological Perspective*. New York: Nova Science Publishers, Incl.

Shevlin, M.; Kenny, M. & McNeela, E. (2004). Participation in Higher Education for Students with Disabilities: An Irish Perspective. *Disability & Society*, 19(1), 15-30.

Shildrick, M. (2012). Critical Disability Studies: Rethinking the Conventions for the Age of Postmodernity. In N. Watson, A. Roulstone & C. Thomas (Eds.), *Routledge Handbook of Disability Studies* (pp. 30-41), London: Routledge.

Shulman, L. (1986). Those who Understand Knowledge Growth in Teaching. *Educational Researcher*, 15(2), 4-14).

Sullivan, W.M.; Colby, A.; Wegner, J.W.; Bond, L. & Shulman, L.S. (2007). *Educating Lawyers: Preparation for the Profession of Law*. The Carnegie Foundation for the Advancement of Teachers.

Sieber, J. E. (1998). Planning Ethically Responsible Research: In L. Bickman & D.L. Roy (Eds.), *Handbook of Applied Social Research Methods* (pp. 127-156), Thousand Oaks, CA: Sage.

Silverman, D. (2001). *Interpreting Qualitative Data, Methods for Analysing Talk, Text and Interaction*. London: Sage.

Simons, M. & Masschelein, J. (2005). Inclusive Education for Inclusive Pupils: A Critical Analysis of the Government of the Exceptional. In S. Tremain (Ed.), *Foucault and the Government of Disability* (pp.192-207), United States of America: The University of Michigan Press.

Sithole, T. (2014). *Achille Mbembe: Subject, Subjection and Subjectivity*. Unpublished Doctoral Thesis. University of South Africa.

Slee, R. (2004). Inclusive Education: A Framework for Reform? In V. Heung & A. Ainscow (Eds.), *Inclusive Education: A Framework for Reform?* Hong Kong: Kong Institute of Education.

Slee, R. & Allan, J. (2008). *Doing Inclusive Education Research*. London: Routledge Taylor & Francis Group.

Slee, R. (2011). *The Irregular School: Exclusion, Schooling and Inclusive Education*. London: Routledge Taylor & Francis Group.

Slee, R. (2013). Meeting some Challenges of Inclusive Education in an Age of Exclusion. *Asian Journal Inclusive Education*, 1(2), 3-17.

Slevin, M.; Kenny, M. & McNeela, E. (2004). Participation in Higher Education for Students with Disabilities: An Irish Perspective. *Disability and Society*, 19(1), 15-30.

Snape, D. & Spencer, L. (2003). The Foundation of Qualitative Research. In J. Ritchie & J. Lewis (Eds.), *Qualitative Research Practice: A guide for Social Science Students and Researchers*. London: Sage Publication.

Soldatic, K. & Moekosha, H. (2012). Disability and Neoliberal State Formation. In N. Watson, C. Thomas & A. Roulstone (Eds.), *Routledge Handbook of Disability Studies* (pp. 195-210), Abington: Routledge.

Soldatic, K. (2015). Postcolonial Reproductions: Disability, Indigeneity and the Formation of the White Masculine Settler of Australia. *Social Identities*, 21(1), 53-68.

South African National Standard (SANS) (2011). *The Application of the National Building Regulations Part S: Facilities for Persons with Disabilities*. Pretoria: SABS Standard Division.

Spagnuolo, N. (2016). Political Affinities and Complex Identities: Critical Approaches to Disability Organising. *Canadian Journal of Disability Studies*, 5(2), 73-97.

Special Educational Needs and Disability Act (2001). Available at: [Http://www.legislation.gov.uk/ukpga/2001/10/contents](http://www.legislation.gov.uk/ukpga/2001/10/contents)

Spindler, G. D. & Hammond, L. (2000). The use of Anthropological Methods in Educational Research: Two perspectives. *Harvard educational review*, 70, (1), 39-47.

Spivak, G.C. (1988). Can the Subaltern Speak? In Nelson, C. Grossberg, L. (Eds.), *Marxism and Interpretation of Culture*. Urbana, IL & Chicago, IL: University of Chicago Press.

Stake, R. (1995). *The Art of Case Study Research*. Thousand Oaks, CA: Sage.

Steele, P.E. & Wolanin, T.R. (2004). *Higher Education for Students with Disabilities: A Primer for Policymakers*. USA: Institute for Higher Education Policy.

Stone, D. (1984). *The Disabled State*. Philadelphia: Temple University Press.

Stone, E. & Priestly, M. (1996). Parasites, Pawns and Partners: Disability Research and the Role of Non-Disabled Researchers. *British Journal of Sociology*. 47(4), 699-716.

Story, M.F.; Mueller, J.L. & Mace, R.L. (1998). *The Universal Design File: Designing for People of all Ages and Abilities*. Raleigh, NC: The Center for Universal Design.

Strong, F.M. (1998). Maximising Usability: The Principles of Universal Design. *The Official Journal of RESNA*, (10)1, 4-12.

Swain, J. & French, S. (2010). Towards an Affirmation Model of Disability. *Disability and Society*, (15) 4, 569-582.

Swain, J.; French, S.; Barnes, C. & Thomas, C. (2014). *Disabling Barriers-Enabling Environments* (3rd Ed), London: SAGE.

Swart, E. & Pettipher, R. (2011). Perspectives in Inclusive Education. In E. Landsberg, D. Kruger & E. Swart (Eds.), *Addressing Barriers to Learning* (pp. 1-27), Pretoria: Van Shaick.

Swart, E. & Greyling, E. (2011). Participation in Higher Education: Experiences of Students With Disabilities. *Acta Academia*, 43(2), 81-110.

Swartz, L. & Schneider, M. (2006). Tough Choices: Disability and Social Security in South Africa. In B. Watermeyer, L. Swartz, T. Lorenzo, M. Schneider and M. Priestley (Eds.), *Disability and Social Change: A South African Agenda* (pp. 234-243), Cape Town: HSRC.

Sweetman, D., Badiie, M. & Cresswell, J. W. (2010). Use of Transformative Framework in Mixed Methods Studies. *Qualitative Inquiry*, 16(6), 441-454.

Tashakkori, C. & Teddlie, C. (2010). *Sage Handbook of Mixed Methods in Social & Behavioural Research*. Thousand Oaks: SAGE.

Taylor, G. & Runt'e, R. (1995). *Thinking about Teaching: An Introduction*. Toronto: Harcourt Brace.

Taylor, N. (2010). What's wrong with South African Schools? *Paper Presented at the JET Education Service Conference: What's working in School Development?* Boksburg, 28-29 February 2010.

Teddlie, C. & Tashakkori, C. (2003). Major Issues and Controversies in the Use of Mixed Methods in the Social and Behavioural Sciences. In A.Tashakkori & C. Teddlie (Eds.), *Sage Handbook of Mixed Methods in Social and Behavioural Research* (pp. 3-50). Thousand Oaks, CA: Sage.

Tellis, W. (1997). Introduction to Case Study. *Qualitative Report*, 3(2), [Online serial]. Available: <http://www.nova.edu/ssss/QR/QR3-2/TELLIS.1.htm/> Accessed 13 April 2014.

Test, D.W., Foulmer, C.H., Wood, W.M., Brewer, D.M. & Eddy, S. (2005). *A Conceptual Theory*. London: Continuum.

Thomas, C. (2002). Disability Theory: Key Ideas, Issues and Thinkers. In C. Barnes, M. Oliver & L. Barton (Eds.), *Disability Studies*, Cambridge: Polity.

Thomas, C. (2004). How is Disability Understood? An Examination of Sociological Approaches. *Disability & Society*, 19(6), 569-583.

Thomas, C. (2010). Medical Sociology and Disability Theory. In G. Scambler & S. Scambler (Eds.), *New Directions in the Sociology of Chronic and Disabling Conditions: Assaults on The Lifeworld*. Basingstoke, UK: Palgrave Macmillan.

Thomas, G. (2011). A Typology for the Case Study in Social Science Following a Review of Definition, Discourse and Structure. *Qualitative Inquiry*, 17(6), 511-521.

Tinklin, T.; Riddel, S. & Wilson, A. (2004). Policy and Provision for Disabled Students in Higher Education in Scotland and England: The Current State of Play. *Studies in Higher Education*, 29(5), 637-657.

Titchkosky, T. (2001). Disability: A Rose by Any Other Name? "People-First" Language in Canadian Society. *Canadian Review of Sociology/Revue Canadienne de Sociologie*, 38(2), 125-140.

Titchkosky, T. (2003). *Disability, Self and Society*. Toronto: University of Toronto Press.

Torjan, S. (2005). *What is Policy?* Canada: Caledon Institute of Social Policy.

Torfin, J. (1999). *New Theories of Discourse: Laclau, Mouffe and Zizek*. Oxford: Blackwell Inc.

Trede, F.; Madelin, R & Bridges, D. (2012). Professional Identity Development: A Review of the Higher Education Literature. *Studies in Higher Education*, 37(3), 365-384.

Tremain, S. (2002). On the subject of impairment. In M. Corker & T. Shakespeare (Eds.), *Disability/Postmodernity: Embodying Political Theory*. London: Continuum Press.

Tremain, S. (2005). *Foucault and the Government of Disability*. United States of America: The University of Michigan Press.

Tutty, L. M., Rothery, M. & Grinnel, R. M. (1996). *Qualitative Research for Social Workers, Phases, Steps and Tasks*. London: Allyn & Bacon.

Turner, C. & Hodge, M.N. (1970). Occupation and Professions. In J.A. Jackson (Ed.), *Professions and Professionalisation*. Cambridge: Cambridge University Press.

UNESCO. (1994). *The Salamanca Statement and Framework for Action on Special Needs Education*. Paris: UNESCO.

UNICEF. (2008). *It's About Ability: An Explanation of the Convention on the Rights of Persons with Disabilities*. New York: UNICEF.

United Nations. (1993). *Standard Rules on the Equalisation of Opportunities for Persons With Disabilities*. New York: United Nations General Assembly.

United Nations. (2006). *Convention of the rights of persons with disabilities and optional Protocol*.

UPIAS (1976). *Fundamental Principles of Disability*. London: Union of Physically Impaired Against Segregation.

- Utley-Smith, Q.; Phillips, B. & Turner, K. (2007). Avoiding Socialisation Pitfalls in Accelerated Second-Degree Nursing Education: The Return-to-School Syndrome Model: *Journal of Nursing Education*, 46(9), 423-426.
- Van Bogaert, K. & Ogubango, G. A. (2010). Values and Cultural Relativism. *SA FAM Pract*, 52(6), 1-4.
- Vawda, Y.A. (2004). Learning from Experience: The Art and Science of Clinical Law. *Journal of Juridical Science*, 29(1), 116-134.
- Vehmas, S. (2004). Dimension of Disability. *Cambridge Quarterly of Healthcare Ethics*, 12(1), 34-40.
- Vehmas, S (2010). *Special Needs: A Philosophical Analysis*. International Journal of Inclusive Education, 14(1), 87-96.
- Vehmas, S. & Watson, N. (2014). Moral Wrongs, Disadvantages and Disability: A Critique of Critical Disability Studies. *Disability & Society*, 29(4), 638-650.
- Vernon, A. (1998). Multiple Oppression and the Disabled People's Movement. In T. Shakespeare, (Ed.), *The Disability Reader*, (201-210), London: Cassell.
- Vidich, A. J. & Shapiro, G. (1955). A Comparison of Participant Observation and Survey Data. *American Sociological Review*, 20, 28-33.
- Vygotsky, L. S. (1987). *The Collected Works of L.S. Vygotsky: Problems of General Psychology*. New York: Plenum.
- Walton, E. (2002). *The Role of Education Managers in Implementing a Policy of Inclusion in Independent Christian Schools*. Unpublished Med Research Report. University of South Africa: Pretoria.
- Walton, E., Nel, N., Hugo, A. & Muller, H. (2009). The Extent and Practice of Inclusion in Independent Schooling in South Africa. *South African Journal of Education*, 29, 105-126.
- Walton, E. & Lloyd, G. (2011). Metaphors Matter: An Analysis of Metaphors in Inclusive Education in South Africa. *Acta Academica*, 43(3), 1-31.
- Walton, E. & Nel, B. (2012). What Counts as Inclusion? *Africa Education Review*, 9(1), 1-26.
- Walton, E. (2016). *The Language of Inclusive Education: Exploring Speaking, Listening, Reading and Writing*. London & New York: Routledge.
- Watermeyer, B. & Swartz, L. (2006). Introduction and Overview. In B. Watermeyer, L. Swartz, T. Lorenzo, M. Schneider and M. Priestley (Eds.), *Disability and Social Change: A South African Agenda*, (pp 1–6), Cape Town: HSRC.
- Weare, K. (2002). Don't Shoot the Piano Player: Why we need to do more to promote the Mental Health and Social Competence of Teachers, *Health Education*, 106(6), 269-270.
- Webb, S.A. (2015). *Professional Identity and Social Work*. Scotland: Glasgow.

- Weiss, R.S. (1968). Issues in Holistic Research. In H.S. Berker; B, Geer; D. Riesman & R. Weiss (Eds.), *Institutions and Persons* (pp. 342-350), Chicago: Aldine.
- West, C. & Chur-Hansen, A. (2014). Ethical Enculturation: The Informal and Hidden Ethics Curricular at an Australian Medical School. *Focus on Health Professional Education*, 6(1), 85-99.
- Welch, T. (2002). Teacher Education in South Africa before, during and after Apartheid: An Overview. In J. Adler & Y, Reed (Eds), *Challenges of Teacher Development: An Investigation of Take-Up in South Africa* (pp. 17-35), Pretoria: Van Schaik.
- Welsh, E. (2002). Dealing with Data: Using NVIVO in Qualitative Data Analysis Process. *Qualitative Social Research*, 3(2), 1-7.
- WHO. (1980). *The International Classification of Impairment, Disabilities and Handicaps (ICIDH)*. Geneva: World Health Organisation.
- WHO. (2014). *ICD-10-CM Official Guidelines for Coding and Reporting (10 Ed.)*. Geneva: World.
- Wice, P. (1991). *Judges and Lawyers: The Human Side of Justice*. New York: HarperCollins.
- Wiggert-Barnard, C. & Swartz, L. (2012). What facilitates the entry of persons with disabilities into South African Companies? *Disability and Rehabilitation*, 34 (12), 1016-1023.
- Wilkinson, S. (2000). Women with Breast Cancer Talking Causes: Comparing Content, Bibliographical and Discursive Analyses. *Feminism & Psychology*, 10(4), 431-460.
- Wilkinson, S. (2004). Focus Group Research. In D. Silverman (Ed.), *Qualitative Research: Theory, Method and Practice* (pp. 177-199). Thousand Oaks, CA: Sage.
- Winch, C. (2014). Know-how and knowledge in the professional curriculum. In M. Young & J. Muller (Eds.), *Knowledge, expertise and the professions* (pp. 47–60), London: Routledge.
- Wolff, J. (2009). Disability among Equals. In K. Brawnlee & A. Cureton (Eds.), *Disability And Disadvantage* (pp. 112-137), Oxford: University Press
- Wolpe, H. (1991), Education and Social Transformation: Problems and Dilemmas. In E. Unterhalter, H. Wolpe & T. Botha (Eds.), *Education in a Future South Africa*. Policy Issues for Transformation. London: Heinemann.
- Yin, R.K. (1994). *Case Study Research: Design and Methods* London: SAGE Publications.
- Yin, R.K. (2003). *Application of Case Study Research*. Thousand Oaks, CA: Sage.
- Young, I. M. (1990). *Justice and the Politics of Differences*. Princeton: Princeton University Press.
- Young, M. & Muller, J. (2013). On the Powers of Powerful Knowledge. *Review of Education*, 1(3), 229-250.

Young, M. & Muller, J. (2014). From the Sociology of Professions to the Sociology of Professional Knowledge. In Young & J. Muller (Eds.), *Knowledge, expertise and the professions* (pp. 3-17), London: Taylor & Francis

Zeicher, K. (1986). The Practicum as an Occasion for Learning to Teach. *South Pacific Journal of Teacher Education*, 14(2), 11-28.

Zezeza, P.T. (2003). *Rethinking Africa's Globalisation, Vol1: The Intellectual Challenges*. Trenton, NJ: Africa World Press.

LETTER OF PERMISSION TO CONDUCT THE STUDY

Deputy Registrar: Academic

9 December 2013


TO WHOM IT MAY CONCERN

"Obstacles and opportunities for students with disabilities in entry and completion of professional degrees and in preparation to graduate into professions in higher learning: The case of a university in South Africa"

It is hereby confirmed that the enclosed research material has been distributed in accordance with the University's approval procedures for such a project. Please be advised that it is your right to withdraw from participating in the process if you find the contents intrusive, too time-consuming, or inappropriate. The necessary ethical clearance has been obtained.

Should the University's internal mailing system be the mechanism whereby this questionnaire has been distributed, this notice serves as proof that permission to use it has been granted.

Students conducting surveys must seek permission in advance from Heads of Schools or individual academics concerned should surveys be conducted during teaching time.



Vita Lawton-Misra
Deputy Registrar: Academic

ETHICS CLEARANCE LETTER

Student Number:
320583

Protocol Number:
2013ECE106D

12 November 2013

Dear Sibonokuhle Ndlovu

Application for Ethics Clearance: Doctor of Philosophy

Thank you very much for your ethics application. The Ethics Committee in Education of the Faculty of Humanities, acting on behalf of the Senate has considered your application for ethics clearance for your proposal entitled:

Obstacles and opportunities for students with disabilities in entry and completion of professional degrees and in preparation to graduate into professions in higher learning: The case of a university in South Africa.

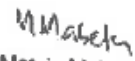
The committee recently met and I am pleased to inform you that clearance was granted.

Please use the above protocol number in all correspondence to the relevant research parties (schools, parents, learners etc.) and include it in your research report or project on the title page.

The Protocol Number above should be submitted to the Graduate Studies in Education Committee upon submission of your final research report.

All the best with your research project.

Yours sincerely


Mabeta Mabeta

CC Supervisor: Dr. E Walton

APPENDIX A1

LETTER TO THE ACADEMIC REGISTRAR

August, 2013

To the Academic registrar

My name is Sibonokuhle Ndlovu. I am a PhD student in the School of Education at the University of the Witwatersrand.

I am doing research on *obstacles and opportunities for students with disabilities in entering professional degrees and in preparation to graduate into professions in higher learning: The case of a university in South Africa*.

My study involves exploring obstacles and opportunities that confront students with disabilities in entry into Medicine, Law and Education professional degrees and in preparation to graduate into the specific professions at the institution. It also further explores whether or not students with disabilities complete the specific programmes within minimum time at the institution. The study has the transformative agenda of change by generating data for policy makers to address the issue for throughput: that, students with disabilities are helped to complete the specific professional degrees and that higher learning successfully prepares them for employment in specific professions.

The reason why I have chosen your university as the case of study is because it has particular features and characteristics which will enable detailed exploration and understanding of the central puzzles which I wish to study. It is a historically advantaged institution, with support for disability that dates far back more than all other institutions of higher learning in South Africa. The institution was given an award for having the best Disability Unit in South Africa in 2012. Being a historically advantaged institution, that has a long history of support for students with disabilities and presently having the best Disability Unit in the whole country, I hope that the institution's historical background and its outstanding disability support through its Disability Unit might have a significant impact on students with disabilities' entry, completion of professional degrees they study and in preparation for employment in the professions they study for at the institution.

I am requesting you to allow me to conduct the study in the institution. Your permission for me to explore obstacles and opportunities in entering and completing the professional degrees

studied by students with disabilities and in preparation for employment in the professions they are studying for at your institution will be greatly appreciated.

The research participants in the study will be students, graduates with disabilities and the Disability Unit staff members. I have selected students with disabilities to participate in the study because their experiences as university students living with a disability make them well positioned to contribute to my study. I have selected graduates with disabilities because their experiences as graduates living with a disability, from the specific institution of higher learning and their reflections back, make them also well positioned to contribute to my study. The Disability Unit staff experiences in supporting students with disabilities at the institution also makes them well positioned to also contribute to my study. I have also chosen students, graduates with disabilities and the Disability Unit staff members to participate in the study because I would like their voices to be heard on what changes they would like to see in terms of entry and completion of the specific professional degrees by students with disabilities and preparation for employment at the institution.

The research participants will not be advantaged or disadvantaged in any way. Participating in the study will be voluntary and should they consent to participation, they will be assured that they can withdraw their permission at any time during the study without any penalty. The participants will not be paid for this study.

Since participants in the study will be students, graduates and other staff members with disabilities from the Disability Unit who are considered vulnerable persons, psychological risks will be expected of such participants. I will minimize the risk by making an arrangement for a referral possibility with the Counseling and Careers Development Unit (CCDU) at the institution. As I invite them for participation in the study, I will also make it known to them about the referral possibility arrangement I have made with Counseling and Careers Development Unit (CCDU). In case any should experience discomfort as stress and anxiety during participation in the study, I will refer him or her for counseling services.

Should students, graduates and other staff members with disabilities at the Disability Unit give their consent to participate in the study; their names will be kept confidential at all times and in all academic writing about the study. I will maintain participants' individual privacy in all published and written data resulting from the study. I will lock away transcripts and audio-tapes in a lockable cabinet in a lockable office at Wits School of Education and, I will shred paper and delete electronic data within 3-5 years of completing the study.

I will only use the findings of the study for scholarly purposes. I will report the study as a PhD thesis at Wits University and also publish the findings in scholarly journals, book chapters and present them in academic conferences during and after the study.

Should the participants give their consent; the study will be of no immediate benefit to them. However, it might benefit other students with disabilities at a later stage, through their voices contributing to change and resulting in intervention by policy-makers.

Please let me know if you require any further information. I will follow up through email to find out whether you have allowed me to conduct the study in the institution.

Thank you

SIGNATURE: *Sndlovu*

NAME : Sibonokuhle Ndlovu

ADDRESS : Unit 65 Flamingo Villas, Vermooteng Street, Grobblerspark; Roodepoort, 1724

EMAIL : Sibonokuhle.Ndlovu@students.wits.ac.za

TELEPHONE NUMBER: 0820924583 (Mobile)

APPENDIX A2

INVITATION FOR STUDENTS WITH DISABILITIES

Final year and post graduate in Medicine, Law & Education

August 2013

Dear Student,

My name is Sibonokuhle Ndlovu and I am a Phd student in the School of Education at the University of the Witwatersrand.

I am doing a research on *obstacles and opportunities for students with disabilities in entering professional degrees and in preparation to graduate into professions in higher learning: The case of a university in South Africa.*

My research study involves exploring obstacles and opportunities that confront students with disabilities in entry and completion of medicine, law and education professional degrees. It also explores the obstacles and opportunities that confront them in preparation to graduate into the specific professions they are studying for at the institution. It further explores whether or not students with disabilities complete the specific programmes within minimum time at the institution. The study has a transformative agenda of change by generating data for policy makers to address the issue of throughput: that, students with disabilities are helped to complete the specific professional degrees they study and that they are successfully prepared for employment in the specific professions they study for in higher learning.

I am inviting you to participate in this research study. You are receiving the invitation to participate in this study because your experiences as a university student living with a disability makes you well positioned to contribute to my study. You are also receiving this invitation because I would like you to share your experiences on obstacles and opportunities in entering and completing the specific professional degree programmes by students with disabilities and in their professional learning and completing the degrees to graduate into the respective professions in time at the institution. I also want to make your voice heard on what changes you might like to see to improve that process.

Should you give consent to participation, I would request that you respond to a one-time 30minutes survey questionnaire which I will give to you. The survey is meant to solicit broad opinions of the participants on obstacles and opportunities that confront students with disabilities to enter and complete specific professional degrees at the institution. The survey is also meant to obtain participants' broad opinions on obstacles and opportunities in preparation for employment in the specific professions at the institution and their opinions on changes they might want to see.

Should you choose to participate, I would again request that you also respond to a one-time interview which is planned to last not more than an hour which will follow approximately four months after the survey, at the place, time and date convenient to you. I will be conducting the interviews after the surveys to give an opportunity to the participants to expand on issues raised in the survey. Thus, interviews are meant to give participants space for detailed accounts of their opinions in the survey. I will also be conducting the interviews after the survey for further exploring participants' opinions on the obstacles and opportunities that confront students with disabilities to enter and complete the professional degrees they study and in preparation for employment in the professions they study for at the institution. Interviews will also be meant to give opportunity for participants to raise other issues of importance to them which might not have been raised in the survey. I will also conduct the interviews to give opportunity to the participants for their voices to be heard on changes they might want to see, so that these will be offered to policy-makers to intervene for change. I will conduct the interviews during the period, May to November 2014. I would also request for your permission to audio-record the interviews for accurate data capturing and transcription later.

Should you choose to participate, I would request to work in partnership with you to generate data for policy makers to make positive changes for throughput in the specific professional degrees and in preparation for employment for students with disabilities in higher learning. I would also request that should you participate, air your views freely so that your voice will contribute to change envisioned in the study. When I have collected data, analysed it and generated the findings of the study, I will give those who will participate, the opportunity through email to view their contribution in the study, so that they will make any amendments they might think necessary, before I summarise them into comprehensive recommendations I will offer to policy-makers.

Participation in this research study will be voluntary. If after agreeing you decide at any stage that you want to withdraw from the study that will be completely your choice and will not affect you negatively in any way. You can stop the interview at any time and you will not have to answer questions that you will not feel comfortable with. Also, should you participate or not, you will not risk any institutional sanction. I will be asking questions about personal experiences but not questions that invade privacy. However if you might participate and feel that you have been disadvantaged in anyway, you will be free to contact me on my mobile below. If you might also be negatively affected by some questions in the survey questionnaire or in the interview, I have made a referral possibility with Careers Development Unit (CCDU) on the number below and I will make arrangements for counseling services.

Should you participate, I will not be using your own name but I will make one up so that no one can identify you. I will keep your name confidential in all my writing about the study and I will maintain your individual privacy in all published and written data resulting from the study. I will lock away all transcripts and audio-tapes in a lockable cabinet in a lockable office at Wits School of Education and I will shred paper and delete all electronic data within 3-5 years of completion of the study.

I will use the findings of the study only for scholarly purposes. I will report the study as a PhD thesis at Wits University and I will publish the findings in scholarly journals, book chapters and present them in academic conferences during and after the study.

Should you participate; the study will be of no immediate benefit to you. However, it might benefit other students with disabilities at a later stage, through your voice contributing to change and resulting in intervention by policy-makers.

If you would be willing to participate in the survey and also, willing to be interviewed, I would request that you please complete and sign the attached consent form below. I will arrange to collect it from you at a time convenient or alternatively, if it is possible, you can scan and send the signed form to my email address below. I look forward to working with you.

Please you will have to feel free to contact me if you might have any questions.

Thank you

SIGNATURE: *Indlovu*

NAME : Sibonokuhle Ndlovu

ADDRESS : Unit 65 Flamingo Villas, Vermooteng Street, Grobblerspark; Roodepoort, 1724

EMAIL : Sibonokuhle.Ndlovu@students.wits.ac.za

ELEPHONE NUMBER: 0820924583 (Mobile)

Counseling Services (CCDU)

TELEPHONE NUMBER : 27 11 717-9140/32

APPENDIX A3

INVITATION FOR HEAD OF DISABILITY UNIT

August 2013

To the Head of DU

My name is Sibonokuhle Ndlovu and I am a Phd student in the School of Education at the University of the Witwatersrand.

I am doing a research on *obstacles and opportunities for students with disabilities in entering professional degrees and in preparation to graduate into professions in higher learning: The case of a university in South Africa.*

My research study involves exploring obstacles and opportunities that confront students with disabilities in entry and completion of Medicine, Law and Education professional degrees. It also explores the obstacles and opportunities that confront them in preparation to graduate into the specific professions they are studying for at the institution. It also further explores whether or not students with disabilities complete the specific programmes within minimum time at the institution. The study has a transformative agenda of change by generating data for policy makers to address the issue of throughput: that, students with disabilities are helped to complete the specific professional degrees they study and that they are successfully prepared for employment in the specific professions they study for in higher learning.

I am inviting you to participate in this research study. Why I am inviting you to participate in this study is because your experiences as the Head of the Disability Unit at the institution makes you well positioned to contribute to my study. You are also receiving this invitation because I would like you to share your experiences on obstacles and opportunities in entering and completing the specific professional degree programmes by students with disabilities and in their professional learning and completing the degrees to graduate into the respective professions in time at the institution. I also want to make your voice heard on what changes you might like to see to improve that process.

Should you give consent to participation, I would request that you respond to a one-time 30minutes survey questionnaire which I will give to you. The survey is meant to solicit broad opinions of the participants on obstacles and opportunities that confront students with

disabilities to enter and complete specific professional degrees at the institution. The survey is also meant to obtain participants' broad opinions on obstacles and opportunities in preparation for employment in the specific professions at the institution and their opinions on changes they might want to see.

Should you choose to participate, I would again request that you also respond to a one-time interview which is planned to last not more than an hour which will follow approximately four months after the survey, at the place, time and date convenient to you. I will be conducting the interviews after the surveys to give an opportunity to the participants to expand on issues raised in the survey. Interviews are meant to give participants space for detailed accounts of their opinions in the survey. Thus, I will also be conducting the interviews for further exploring participants' opinions on the obstacles and opportunities that confront students with disabilities to enter and complete the professional degrees they study and in preparation for employment in the professions they study for at the institution. Interviews will also be meant to give opportunity for participants to raise other issues of importance to them which might not have been raised in the survey. I will also conduct the interviews to give opportunity to the participants for their voices to be heard on changes they might want to see, so that these will be offered to policy-makers to intervene for change. I will conduct the interviews during the period, May to November 2014. I would also request for your permission to audio-record the interviews for accurate data capturing and transcription later.

Should you choose to participate, I would request to work in partnership with you to generate data for policy makers to make positive changes for throughput in the specific professional degrees and in preparation for employment for students with disabilities in higher learning. I would also request that should you participate, air your views freely so that your voice will contribute to change envisioned in the study. When I have collected data, analysed it and generated the findings of the study, I will give those who will participate, the opportunity through email to view their contribution in the study so that they will make any amendments they might think necessary, before I summarise them into comprehensive recommendations I will offer to policy-makers.

Participation in this research study will be voluntary. If after agreeing you decide at any stage that you prefer to stop participating, that will be completely your choice and will not affect you negatively in any way. You can stop the interview at any time and you will not have to

answer questions that you will not feel comfortable with. You will not be advantaged or disadvantaged in any way by participating in the study. Should you participate or not, there are no foreseeable risks as institutional sanctions. I will be asking questions about personal experiences but not questions that invade privacy. However if you might participate and feel that you have been disadvantaged in anyway, you will be free to contact me on my mobile below.

Should you choose to participate, I will keep your name confidential at all times and in all academic writing about the study. I will maintain your individual privacy in all published and written data resulting from the study. I will lock away all transcripts and audio-tape in a lockable cabinet in a lockable office at Wits School of Education and I will shred paper and delete electronic data within 3-5 years of completing the study.

I will use the findings of the study only for scholarly purposes. I will report the study as a PhD thesis at Wits University and I will also publish the findings in scholarly journals, book chapters and present them in academic conferences during and after the study.

Should you participate; the study will be of no immediate benefit to you. However, it might benefit other students with disabilities at a later stage, through your voice contributing to change and resulting in intervention by policy-makers.

If you would be willing to participate in the survey and also, willing to be interviewed, I would request that you please complete and sign the attached consent form below. I will arrange to collect it from you at a time convenient or alternatively, if it is possible, you can scan and send the signed form to my email address below. I look forward to working with you.

Please you will have to feel free to contact me if you might have any questions.

Thank you

SIGNATURE: *Sndlovu*

NAME : Sibonokuhle Ndlovu

ADDRESS : Unit 65 Flamingo Villas, Vermooteng Street, Grobllerpark; Roodepoort, 1724

EMAIL : Sibonokuhle.Ndlovu@students.wits.ac.za

TELEPHONE NUMBER : 0820924583 (Mobile)

APPENDIX A4

INVITATION FOR ALL DISABILITY UNIT STAFF

August 2013

To the Disability Unit staff member

My name is Sibonokuhle Ndlovu and I am a Phd student in the School of Education at the University of the Witwatersrand.

I am doing research on *obstacles and opportunities for students with disabilities in entering and completing professional degrees and in preparation to graduate into professions in higher learning: The case of a university in South Africa.*

My research study involves exploring obstacles and opportunities that confront students with disabilities in entry and completion of medicine, law and architecture professional degrees. It also explores the obstacles and opportunities that confront them in preparation to graduate into the specific professions they are studying for at the institution. It further explores whether or not students with disabilities complete the specific programmes within minimum time at the institution. The study has a transformative agenda of change by generating data for policy makers to address the issue of throughput: that, students with disabilities are helped to complete the specific professional degrees they study and that they are successfully prepared for employment in the specific professions they study for in higher learning.

I am inviting you to participate in this research study. Why I am inviting you to participate in this study is because your experiences as the staff member at the Disability Unit in the institution makes you well positioned to contribute to my study. You are also receiving this invitation because I would like your voice to be heard on what changes you would like to see in terms of entering and completing the specific professional degree programmes by students with disabilities and in preparation for employment in the profession they are studying for, at the institution.

Should you give consent to participation, I would request that you respond to a one-time 30minutes survey questionnaire which I will give to you. The survey is meant to solicit broad opinions of the participants on obstacles and opportunities that confront students with disabilities to enter and complete specific professional degrees at the institution. The survey

is also meant to obtain participants' broad opinions on obstacles and opportunities in preparation for employment in the specific professions at the institution and their opinions on changes they might want to see.

I am inviting you to further participate in a one-time interview which is planned to last not more than an hour which will follow approximately four months after the survey, at the place, time and date convenient to you. Why I am requesting you to further participate in the interview is because I consider you as key and information-rich personnel at the Disability Unit in the institution. Your experiences as the key staff member and information-rich personnel at the Disability Unit in the institution makes you well positioned to contribute to the depth I need for my study. You are also receiving this invitation because I would like you to share your experiences on obstacles and opportunities in entering and completing the specific professional degree programmes by students with disabilities and in their professional learning and completing the degrees to graduate into the respective professions in time at the institution. I also want to make your voice heard on what changes you might like to see to improve that process.

I will be conducting the interviews after the surveys to give an opportunity to the participants to expand on issues raised in the survey. Interviews are meant to give participants space for detailed accounts of their opinions in the survey. Thus, I will also be conducting the interviews after the survey for further exploring participants' opinions on the obstacles and opportunities that confront students with disabilities to enter and complete the professional degrees they study and in preparation for employment in the professions they study for at the institution. Interviews will also be meant to give opportunity for participants to raise other issues of importance to them which might not have been raised in the survey. I will also conduct the interviews to give opportunity to the participants for their voices to be heard on changes they might want to see, so that these will be offered to policy-makers to intervene for change. I will conduct the interviews during the period, May to November 2014. I would also request for your permission to audio-record the interviews for accurate data capturing and transcription later.

Should you choose to participate, I would request to work in partnership with you to generate data for policy makers to make positive changes for throughput in the specific professional

degrees and in preparation for employment for students with disabilities in higher learning. I would also request that should you participate, air your views freely so that your voice will contribute to change envisioned in the study. When I have collected data, analysed it and generated the findings of the study, I will give those who will participate, the opportunity through email to view their contribution in the study so that they will make any amendments they might think necessary, before I summarise them into comprehensive recommendations I will offer to policy-makers.

Participation in this research study will be voluntary. If after agreeing you decide at any stage that you prefer to stop participating, that will be completely your choice and will not affect you negatively in any way. You will not be advantaged or disadvantaged in any way by participating in the study. Should you participate or not, there are no foreseeable risks as institutional sanctions. I will be asking questions about personal experiences but not questions that invade privacy. However if you might participate and feel that you have been disadvantaged in anyway, you will be free to contact me on my mobile below. If you might also be negatively affected by some questions in the survey questionnaire, I have made a referral possibility with Careers Development Unit (CCDU) on the number below and I will make arrangements for counseling services.

Should you participate, I will keep your name confidential at all times and in all academic writing about the study. I will also maintain your individual privacy in all published and written data resulting from the study. I will lock away transcripts and audio-tapes in a lockable cabinet in a lockable office at Wits School of Education. I will shred paper and delete electronic data within 3-5 years after completion of the study.

I will use the findings of the study only for scholarly purposes. I will report the study as a PhD thesis at Wits University and I will also publish the findings in scholarly journals, book chapters and present them in academic conferences during and after the study.

Should you participate; the study will be of no immediate benefit to you. However, it might benefit other students with disabilities at a later stage, through your voice contributing to change and resulting in intervention by policy-makers.

If you would be willing to participate in the survey, I would request that you please complete and sign the attached consent form below. I will arrange to collect it from you at a time

convenient or alternatively, if it is possible, you can scan and send the signed form to my email address below. I look forward to working with you.

Please you will have to feel free to contact me if you might have any questions.

Thank you

SIGNATURE: *Sndlovu*

NAME : Sibonokuhle Ndlovu

ADDRESS : Unit 65 Flamingo Villas, Vermooteng Street, Grobblerspark; Roodepoort, 1724

EMAIL : Sibonokuhle.Ndlovu@students.wits.ac.za

TELEPHONE NUMBER : 0820924583 (Mobile)

Counseling Services (CCDU)

TELEPHONE NUMBER : 27 11 717-9140/32

APPENDIX A5

PARTICIPANTS' CONSENT FORM

Please fill in the reply slip below if you agree to participate in my study called:

Obstacles and opportunities for students with disabilities in entering and completing professional degrees and in preparation to graduate into professions in higher learning: The case of a university in South Africa.

PERMISSION FOR A SURVEY		
I agree to complete a one-time 30minute survey questionnaire for this study at the time, and place convenient to me	YES	NO
PERMISSION FOR AN INTERVIEW		
I would like to give consent to a one-time interview of not more than an hour, at the time, date and place convenient to me	YES	NO
I know that I can stop the interview at any time and don't have to answer all the questions asked.	YES	NO
I know that participation in this study will be voluntary and my information will be kept confidential and safe	YES	NO
I know that I do not have to answer every question and can withdraw from the study at any time.	YES	NO
I know that my name will not be revealed; instead a pseudonym will be used in place of my real name.	YES	NO
I know that all the data collected during this study will be destroyed within 3-5 years after completion of the study.	YES	NO
PERMISSION TO BE AUDIO-RECORDED		
I agree to be audio-recorded during the interview.	YES	NO
I know that the audio-recording will be used for this study only	YES	NO
I know that I can ask not to be audio-recorded.	YES	NO

Name.....

Signature.....

Date.....

APPENDIX B1

SURVEY QUESTIONNAIRE FOR HEAD AND DISABILITY UNIT STAFF

INTRODUCTION

This survey is the initial stage of the study that seeks to understand the obstacles and opportunities that confront students with disabilities to enter and complete the degree programmes of Education, Medicine and Law at this institution. The study also seeks to understand the obstacles and opportunities that confront students with disabilities in preparation to graduate into the specific professions, and whether or not they complete the programmes timely at the institution.

I have invited you to participate in this survey because your experiences as the staff member at the Disability Unit at the institution makes you well positioned to contribute to the study. It is also in my interest to work in partnership with you to generate data for policy makers to make positive changes in entry into the specific professional degrees and to improve preparation for the specific profession for students with disabilities at this particular institution. The study therefore offers an opportunity for your voice be heard to the policy makers: for them to intervene to improve entry of students with disabilities in the professional degrees of education, law and medicine they study at this institution and in preparation for the relevant professions.

In the questionnaire, you will find that questions have been generalised to all students with disabilities and you might feel that the answers to such questions would depend on the specific disability category. It is for theoretical and practical reasons not to categorise disabilities. You might as well find that some questions can be best answered by other stakeholders at the institution. Please do not have issues on how to respond to such questions. I request that you answer such questions and share your views and opinions from your own perspective as a Disability Unit staff member supporting students with disabilities at this institution. Please feel very much free to share your views and experiences and contribute to change and transformation that the study seeks to do.

The survey starts by asking for demographic information. **Please mark with an X for all your answers in the boxes provided**

i. What is your gender?

Female ☐

Male ☐

ii. What is your race?

Black

☐

White

☐

Coloured

☐

Indian

☐

Asian

☐

iii. What is your position in the Disability Unit?

iv. For how many years have you been working with the Disability Unit?

0 to 5	6 to 10	11 to 20	21 to 30	31 to 35	35 and above
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

1. Please indicate the extent to which you agree or disagree with this statement: **Entry requirements allow students with disabilities' entry into the listed professional degrees at the institution.**

	Strongly agree	Agree	Disagree	Strongly disagree
Entry requirements for Law	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Entry requirements for Education	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Entry requirement for Medicine	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

2. Please indicate the extent to which you agree or disagree with this statement: **Policy enables entry into the three programmes by students with disabilities**

Strongly agree	Agree	Disagree	Strongly disagree
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

3. Please indicate the extent to which you agree or disagree with this statement: **Individual needs are catered for in teaching of students with disabilities at the institution**

Strongly agree	Agree	Disagree	Strongly disagree
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

4. To what extent do you agree or disagree that the **available assistive devices assist learning of students with disabilities at the institution?**

Strongly agree	Agree	Disagree	Strongly disagree
----------------	-------	----------	-------------------

5. Please indicate the extent to which you agree or disagree with this statement: **Support for students with disabilities at the Disability Unit enables their learning**

Strongly agree	Agree	Disagree	Strongly disagree
----------------	-------	----------	-------------------

6. To what extent do you agree that that **funding available is enough to support students with disabilities' learning at the institution?**

Strongly agree	Agree	Disagree	Strongly disagree
----------------	-------	----------	-------------------

7. **Built environment at the institution is accessible to students with disabilities at the institution**

Strongly agree		Agree		Disagree		Strongly disagree	
----------------	--	-------	--	----------	--	-------------------	--

8. To what extent do you agree or disagree that **transport at the institution is accessible to students with disabilities?**

Strongly agree		Agree		Disagree		Strongly disagree	
----------------	--	-------	--	----------	--	-------------------	--

9. To what extent do you agree or disagree that **students with disabilities experience positive attitudes at the institution?**

Strongly agree	Agree	Disagree	Strongly disagree
----------------	-------	----------	-------------------

10. Extra time provided to students with disabilities in examinations helps their assessment	Strongly agree	Agree	Disagree	Strongly disagree
---	----------------	-------	----------	-------------------

11. Please indicate the extent to which you agree or disagree with this statement: **Transport to the field is accessible to students with disabilities**

Strongly agree	Agree	Disagree	Strongly disagree
----------------	-------	----------	-------------------

12. **Built environment is accessible to students with disabilities at the work setting**

Strongly agree		Agree		Disagree		Strongly disagree	
----------------	--	-------	--	----------	--	-------------------	--

13. To what extent do you agree or disagree that **students with disabilities experience positive attitudes at the work setting**

Strongly agree		Agree		Disagree		Strongly disagree	
----------------	--	-------	--	----------	--	-------------------	--

14. Please indicate the extent to which you agree or disagree with this statement: **Continued support at the work setting to help students with disabilities to practise well**

Strongly agree		Agree		Disagree		Strongly disagree	
----------------	--	-------	--	----------	--	-------------------	--

15. Students with disabilities complete the following programme in time at the institution	Strongly agree	Agree	Disagree	Strongly disagree
Law				
Education				
Medicine				

16. Please indicate the extent to which you agree or disagree with this statement: **Teaching of students with disabilities at the institution should change to improve their learning**

Strongly agree		Agree		Disagree		Strongly disagree	
----------------	--	-------	--	----------	--	-------------------	--

17. There should be change in the field to improve students with disabilities practice	Strongly agree	Agree	Disagree	Strongly disagree
--	----------------	-------	----------	-------------------

18. Students with disabilities complete the following programmes in time at the institution	Strongly agree	Agree	Disagree	Strongly disagree
Law				
Education				
Medicine				

Please share any additional information you might think its important which has not been included in the questionnaire.

.....

.....

.....

.....

.....

Thank you very much for completing this survey, sharing your thoughts, opinions and feelings with me.

APPENDIX B2

SURVEY QUESTIONNAIRE FOR STUDENTS WITH DISABILITIES

INTRODUCTION

This survey is the initial stage of the study that seeks to understand the obstacles and opportunities that confront students with disabilities to enter and complete the degree programmes of Education, Medicine and Law at this institution. The study also seeks to understand the obstacles and opportunities that confront students with disabilities in preparation to graduate into the specific professions, and whether they complete the programmes timely at the institution.

I have invited you to participate in this survey because your experiences as a university student living with a disability and studying one of the professional degrees at this institution, makes you well positioned to contribute to the study. It is also in my interest that I work in partnership with you to generate data for policy makers to make positive changes in entry into the specific professional degrees and in preparation to graduate into the specific professions for students with disabilities at this particular institution.

The study therefore offers an opportunity for your voice be heard to the policy makers, to intervene for the entry into the professional degrees of education, law and medicine they study at this institution and in preparation for relevant professions. Thus, as a student living with a disability, who is studying law at this institution, please feel very much free to air your views and experiences and contribute to change and transformation that the study seeks to do.

The survey starts by asking for demographic information. **Please mark with an X for all your answers against in the boxes provided for that.**

i. What is your gender?

Female ☐

Male ☐

ii. What is your race?

Black

☐

White

☐

Coloured

☐

Indian

☐

Asian

☐

iii. What is your age?

15to 20	21 to 25	26 to 30	31 to 35	36 to 40	41and above

iv. What is your secondary educational background?

Special education		Mainstream	

v. What is your year of study?

3 rd year		4 th year		5 th year		6 th year		Post Graduate	

vi. When was the onset of your impairment?

At birth	
Before I entered school	
During schooling	
Recently at the institution	

vii. When did you enter the programme you are studying?

2004	2005	2006	2007	2008	2009

viii. When do you expect to complete it?

2014	2015	2016	2017	2018	2019 or beyond

Please mark with an X for all your answers against the programme you are studying

1. The entry requirement allowed you to enter the degrees programme you are studying at this institution	Strongly agree	Agree	Disagree	Strongly disagree
Law				
Education				
Medicine				

2. Policy enabled you to enter the programme you are studying at this institution	Strongly agree	Agree	Disagree	Strongly disagree
Law				
Education				
Medicine				

3. Your individual needs are catered for in teaching by lecturers in the programme you are studying	Strongly agree	Agree	Disagree	Strongly disagree
Law				
Education				
Medicine				

4. The available assistive devices assist your learning at the institution?	Strongly agree	Agree	Disagree	Strongly disagree
Law				
Education				
Medicine				

5. The support you get from the Disability Unit helps your learning	Strongly agree	Agree	Disagree	Strongly disagree
Law				
Education				
Medicine				

6. Funding available is enough to support your learning at the institution?	Strongly agree	Agree	Disagree	Strongly disagree
Law				
Education				
Medicine				

7. Built environment at the institution is accessible to you at the institution	Strongly agree	Agree	Disagree	Strongly disagree
Law				
Education				
Medicine				

8. Transport at the institution enables you to access learning	Strongly agree	Agree	Disagree	Strongly disagree
Law				
Education				
Medicine				

9. You experience positive attitudes at the institution	Strongly agree	Agree	Disagree	Strongly disagree
Law				
Education				
Medicine				

10. You are provided extra time in examination at the institution	Strongly agree	Agree	Disagree	Strongly disagree
Law				
Education				
Medicine				

11. Transport to the field is accessible to you	Strongly agree	Agree	Disagree	Strongly disagree
Law				
Education				
Medicine				

12. Built environment is accessible to you at the field	Strongly agree	Agree	Disagree	Strongly disagree
Law				
Education				
Medicine				

13. You experience positive attitudes in the field when you practise	Strongly agree	Agree	Disagree	Strongly disagree
Law				
Education				
Medicine				

14. There is continued support by DU members in the field to help you practise well	Strongly agree	Agree	Disagree	Strongly disagree
Law				
Education				
Medicine				

15. There are barriers in the field that hinder you to complete your study in time	Strongly agree	Agree	Disagree	Strongly disagree
Law				
Education				
Medicine				

16. Entry requirements should change to improve entry into:	Strongly agree	Agree	Disagree	Strongly disagree
Law				
Education				
Medicine				

17. Teaching should change to improve your learning in the programme you are studying	Strongly agree	Agree	Disagree	Strongly disagree
Law				
Education				
Medicine				

18. Your programme of study is completed in time at the institution	Strongly agree	Agree	Disagree	Strongly disagree
Law				
Education				
Medicine				

Please share any additional information you might think its important which has not been included in the questionnaire.

.....

.....

.....

.....

.....

.....

Thank you very much for completing this survey, sharing your thoughts, opinions and feelings with me.

APPENDIX C1

GUIDING INTERVIEW QUESTIONS FOR DU STAFF MEMBERS

INTRODUCTION

ENTRY INTO THE SPECIFIC PROFESSIONAL DEGREES

Entry requirements

How do students with disabilities experience obstacles in entering Medicine, Education and Law at this institution?

Why do you think entry requirements do not allow entry into these professional degrees by students with disabilities at this institution? Let's look at them one by one, Law? Education? Medicine?

Why do you think they confront those obstacles?

How are the challenges in entering the professional degrees different from entering other degrees for students with disabilities at this institution? Why do you think the challenges are different?

How are you, as Disability Unit staff member assisting students with disabilities to enter the professional degrees at this institution, to be specific Law? Medicine? Education?

Policy: How do think policy influence entry of students with disabilities into the three programmes at this institution?

How do you think entry into the three professional degrees can be improved at this institution?

PROFESSIONAL LEARNING

How are students with disabilities' unique learning needs catered for in teaching at the institution?

How are the students with disabilities supported at this institution to complete those professional degrees? Law? Medicine? Education?

Why do you think there are opportunities for students with disabilities to complete these professional degrees in time at this institution?

Why do you think there are barriers for students with disabilities to complete those professional degrees at this institution?

How are the barriers hindering students with disabilities to complete Law, Education? Medicine?

How are you as Disability Unit staff member supporting students with disabilities to complete those professional degrees? Law? Education? Medicine?

If you could be asked as Disability Unit staff member to assist students with disabilities to complete their study of the professional degrees at this institution, how will you assist those studying Law? Medicine? Education?

Why do think there are opportunities in preparing students with disabilities for the profession of law at the institution and at workplace? Education? Medicine?

Why do you think there are obstacles in preparing students with disabilities for the profession of Law at the institution and at workplace? Education? Medicine?

How does the institution prepare students with disabilities for the profession of Law, Medicine? Education?

What changes should made in preparing students with disabilities for the professions of Law, Medicine and Education at the institution and workplace when they go for practice?

If you might be asked as Disability Unit member to assist with preparing students with disabilities to prepare to graduate into profession, how will you assist students studying Law? Education? Medicine?

OTHER IMPORTANT ASPECTS TO ENTRY AND PROFESSIONAL LEARNING

Training of academic staff

How do you train the teaching staff on teaching students with disabilities at this institution?

Why do you think it is important for you to do such training?

How do you think such training could be improved?

Attitudes: How are attitudes towards students with disabilities at this institution?

How do you think negative attitudes could be changed at the institution?

How are the attitudes to students with disabilities in the field?

How do you think they can be improved?

Funding: How are for students with disabilities funded at this institution?

How is funding adequate for all disability categories at this institution?

How do you help students with disabilities access information on funding at this institution?

And how do you help them apply for it?

If given more funding by the Government for disability support which area do you think you would direct the funds and why?

Infrastructure: How is the infrastructure for students with disabilities at this institution?

If you could be given funds for further improve infrastructure and facilities at this institution, how are you going to use them and why?

How do you think funds should be used to improve infrastructure in the field?

Disability Support: How do you support students with disabilities to learn at this institution?

Which areas of disability support do you think needs improvement and why?

How do you think those areas could be improved?

Thank you very much for taking your time to contribute your views, opinions and suggestions for improvement and change in entry and in preparing students with disabilities for the professions of Law, Medicine and Education at this institution. When the results have been analysed you will be given opportunity to view your contributions and confirm them.

APPENDIX C2

GUIDING INTERVIEW QUESTIONS FOR STUDENTS WITH DISABILITIES

The interview I am holding with you today is meant to make follow up on the survey which you participated in sometime through responding to a questionnaire. The questions I will ask are drawn from the broad opinions that came from the survey, some comments that you gave yourself and questions pertaining to your study of programme and how you are being prepared for the profession at this institution. Please feel very free because this interview gives you opportunity to freely share your views in depth on entering, completing the degree programme you are studying and preparation for the profession you are studying for at this institution.

INTRODUCTION

Firstly I request to hear your own story, your personal background, your educational history and how you found yourself studying the programme at this university? Why did you choose this university and the programme you are studying specifically? What are your impairment needs and how are they catered for at this institution?

1. ENTRY INTO THE SPECIFIC PROFESSIONAL DEGREES

Entry requirements

- a How were you presented with opportunities to enter the programme you are studying?
- b. How did you experience obstacles to enter the programme you are studying?
- c. Why do you think you are presented with opportunities?
- d. Why do you think you experience those obstacles?
- e. How do you think entry into your degree programme could be improved for students with disabilities?

Policy: How did policy influence your entry into the programme you are studying?

PROFESSIONAL LEARNING

Teaching and Learning: How are you accommodated by the teaching staff in lectures?

How were you accommodated in the field for you to do your practice?

How do you think your learning could be improved at the institution?

How do you think your practice in the field could be improved?

Completion: How are you being supported at this institution to complete the programme you are studying at the institution?

b. How are you experiencing obstacles to learn in the programme you are studying?

c. Why do you think you are experiencing those obstacles at this institution?

d. How did you experience obstacles did you meet in the field when you were doing your practice?

e. How do you think improvements could be done to improve learning at this institution? at place of work for your practice

IMPORTANT ISSUES TO ENTRY AND PROFESSIONAL LEARNING

Attitudes: How are attitudes towards students with disabilities at this institution?

How were the attitudes at the field when you went out for your practice?

How do you think negative attitudes could be changed at the institution?

And in the field?

Funding: How are you funding your study at the university?

How do you get information on funding at this institution?

And how are you helped you to apply for it?

Why do you think funding is adequate or not adequate to support your learning at the institution?

As adequacy of funding might also depend on disability category, how do you think funding is adequate or inadequate for other disability categories at this institution?

If given more funding by the Government for disability support which area do you think you would direct the funds at the institution and why?

In the field and why?

Infrastructure: How is the infrastructure for you at this institution?

If you could be given funds for further improve infrastructure and facilities at this institution, how are you going to use them and why?

How do you think funds should be used to improve infrastructure in the field?

Disability Support: How does the DU support you to learn at this institution?

Which areas of disability support do you think needs improvement and why?

How do you think those areas could be improved?

Thank you very much for taking your time to contribute your views, opinions and suggestions for improvement and change in entry and preparing students with disabilities for the professions of law, medicine and education at this institution. When the results have been analysed you will be given opportunity to view your contributions and confirm them.

[illegible]

Statement 9	<i>Built environment in the field is accessible</i>												
	SA	A	Fq	D	SD	Freq		SA	A	Freq	D	SD	Freq
	00.0	00.0	0	87.5	12.5	4		00.0	00.0	0	55.6	44.4	9
Law	00.0	00.0	0	87.5	12.5	4							
Medicine	00.0	00.0	0	100.	00.0	2							
Education	00.0	00.0	0	66.7	33.3	6							
Statement 10	<i>Attitudes in the field are positive</i>												
	SA	A	Fq	D	SD	Freq		SA	A	Freq	D	SD	Freq
	00.0	00.0	0	100.	00.0	4		00.0	00.0	0	44.4	55.6	9
Law	00.0	00.0	0	100.	00.0	4							
Medicine	00.0	50.0	1	50.0	00.0	1							
Education	00.0	00.0	0	33.3	66.7	6							
Statement 11	<i>Support in the field assists field practice</i>												
	SA	A	Fq	D	SD	Freq		SA	A	Freq	D	SD	Freq
	00.0	00.0	0	00.0	100.	4		00.0	22.2	2	55.6	22,2	7
Law	00.0	00	0	00.0	100.	4							
Medicine	50.0	50.0	2	00.0	00.0	0							
Education	00.0	50.0	3	33.3	16.7	3							
Statement 12	<i>The degree (Law, Medicine, Education) is completed in time</i>												
	SA	A	Fq	D	SD	Freq		SA	A	Freq	D	SD	Freq
	00.0	00.0	0	00.0	100.	4		00.0	00.0	0	77.8	22.2	9
Law	00.0	00.0	0	00.0	100.	4							
Medicine	100.	00.0	2	00.0	00.0	0							
Education	00.0	00.0	0	66.7	33.3	6							

The distribution suggests that the participants have mixed opinions about the specific issues relating to professional learning of students with disabilities and completion of the specific programmes. They strongly agree and disagree to the statements. They are also negative and positive cases of strongly agree and disagree respectively suggesting the nuisances that have to be explored further.

3. NEED FOR CHANGE AND IMPROVEMENT

Perception on need for change and improvement

	Distribution of responses in frequencies and percentages												
	Students with disabilities (N=12)						DU staff members (N=9)						
	Positive responses			Negative responses			Positive responses				Negative responses		
Statement 1	Entry requirements should change to improve entry into:												
	SA	A	Fq	D	SD	Freq		SA	A	Freq	D	SD	Freq
								00.0	00.0	0	22.2	77.8	9

Law	87.5	12.5	4	00.0	00.0	0							
Medicine	100.	00.0	2	00.0	00.0	0							
Education	66.7	33.3	6	00.0	00.0	0							
Statement 2	Teaching should change to improve learning												
	SA	A	Fq	D	SD	Freq		SA	A	Freq	D	SD	Freq
								00.0	44.5	4	55.6	00.0	5
Law	87.5	12.5	4	00.0	00.0	0							
Medicine	00.0	00.0	0	50.0	50.0	2							
Education	11.1	88.9	6	00.0	00.0	0							
Statement 3	Field practice should change to improve learning												
	SA	A	Fq	D	SD	Freq		SA	A	Freq	D	SD	Freq
								66.7	33.3	9	00.0	00.0	0
Law	100.	00.0	4	00.0	00.0	0							
Medicine	00.0	00.0	0	100.	00.0	2							
Education	66.7	33.3	6	00.0	00.0	0							
Statement 4	There should be change in learning at the institution to complete the programmes in time												
	SA	A	Fq	D	SD	Freq		SA	A	Freq	D	SD	Freq
								22.2	77.8	9	00.0	00.0	0
Law	100.	00.0	4	00.0	00.0	0							
Medicine	00.0	00.0	0	100.	00.0	2							
Education	66.7	33.3	6	00.0	00.0	0							

The distribution suggests that the DU members' perception is that there shouldn't be change to entry requirement. They have mixed feeling about the teaching learning changing. And they feel that field practice and completion time of the programmes should. The overwhelming from response from students across the three programmes is that there should be change to entry requirements, professional learning and period of completing the programmes at the institution.

APPENDIX D2

SAMPLE OF A CODED INTERVIEW TRANSCRIPT

8

Sibo: So then how do you think entry into the programme of Education by students with disabilities could be improved at this institution

Interviewee 16: The improvements that could be done could be in the infrastructure so that as many disability categories as possible could be accommodated. For example, even if the person has the rightful qualifications in terms of entry requirements, when the infrastructure would not accommodate his disability, he might still not enter the programme of Education.

But other than, because Education is such a very intense kind of field which involves many, a lot of things, as alluded to eehh; that for example, many schools are quite inaccessible, so it should start at the grassroots, if we motivate the students with disabilities to come and do Education, we need to ensure that the society as schools will be able to accommodate them, because they will work in the society, in schools specifically. For example like your engineering, they work in companies, so it's an issue of the company accommodating. It's the same thing with education, the school is a piece of society, the school, the education fraternity on its own, as broad as it is, should be able to accommodate people with disabilities in terms of structures, physical environment and resources, so that they are able to teach.

Sibo: The other broad opinion in the survey is in the completion of the programme of Education by students with disabilities at this institution. It came out strongly that there are obstacles; there are opportunities at this institution regarding completion. Why do you think there are those obstacles, why do you think there are those opportunities?

Interviewee 16: It boils down to the same thing; that is infrastructure and accessibility. If I don't feel included and integrated into a system and I am disadvantaged with the independence of moving around, that becomes a problem because that ends up impacting or influencing my self-esteem as a person, and makes me question my being there. And it becomes a challenge, and I will be forced to leave, you understand. Some people, depending on your destination, your drive and yourself motivation, it also questions; how strong are you, can you bear with this, if you can, how far? For example at the Education Campus there had been a few students with disabilities, some of them who encountered the disabilities while they were studying, some of them who came with the disabilities, quite a few, like the recent case, in 2008, or 2007 thereabout, I think, there was a student with disability who and a physical disability and also visually impaired. She had multiple disabilities, because of the inaccessibility of the campus she had to be carried up the stairs by peer students, which is what I encountered as well, because as I said, there were times when did not work, even now they sometimes do not work, and I will left to the mercy of other students, to carry me up the stairs, of which its dangerous in itself, what if anything happens and I fall, who will then be

② opportunity
rightful
entry require
① opportunity
entry
obstacle
infrastructure

② Improve
with
place
③ Workplace
should also
be accessible

10 obstacle
infrastructure
exclusion

8 obstacle
negative
impact
of
inaccessibility
infrastructure

11 obstacle
category
impaired
infrastructure

7 obstacle
if it
works

① Improve
infrastructure

1 obstacle
at entry
in access
infrastructure

2 obstacle
disability
from
schooling

④ Recommend
Systematic
transformation

3 obstacle
to learning

4 obstacle
to completion

9 obstacle
few
students

5 obstacle
at completion

inaccessible
infrastructure

6 obstacle
danger
to students

APPENDIX D3

Table 5: Sample of summarised report of qualitative results on entry

	First tier level	Second tier level	Third tier level
Interview excerpt	Code	Recurring patterns/minor themes	Abstract/ Conceptual theme
<p>... and they give us opportunity to enter like any other students</p> <p>Since I have been here for sixteen years to be precise, I have never experienced a situation where a student is discriminated against because of disability</p> <p>Special schools and disadvantaged schools have no prospect of bringing disabled who qualify to do Medicine at this university</p>	<p>Opportunity in entry</p> <p>Obstacle in entry</p>	<ul style="list-style-type: none"> • Policy of non-discrimination • Same entry requirements • Same admission procedures • Mainstream background • Arrangement for access at entry only for hearing impairment • Special school hindering entry into Medicine • High level entry requirement in Law and Medicine 	<p>Tension of equality and inequality</p> <p>and</p> <p>Tension of disability and impairment</p>

Table 6: Sample of summarised report of analysis on professional learning

Interview excerpt	Code	Recurring patterns/minor themes	Major theme/ Conceptual theme
<p>There is still that mentality that people do not understand what access is. For me access is bigger than a ramp and a lift</p> <p>Even though resources are on reasonable accommodation, let them be used flexibly.</p>	Professional learning	<ul style="list-style-type: none"> • Inaccessibility of built environment (at the institution and at the workplace) • Reasonable accommodation of students with disabilities 	<p>Institutional transformation</p> <p>and</p> <p>Individual accommodation</p>

Table 7: Sample of summarised report of analysis on recommendations

Interview excerpt	Code	Recurring patterns/minor themes	Major theme/ Conceptual theme
<p>We need to go to schools and talk to teachers on what is needed and what subjects are required</p> <p>I think universities have to work with schools.</p> <p>There should partnership between Government, institutions and other stakeholders</p> <p>Change should begin with us. We must initiate discussions</p>	<p>Recommendations for change and improvement</p>	<ul style="list-style-type: none"> • Change in schools • University to work with schools • Working together of stakeholders and institutions 	<p>Systemic transformation</p> <p>Partnership (between stakeholders and institutions)</p> <p>Self advocacy</p>