

**ATTITUDES OF LEARNERS WITH DISABILITIES AND THEIR PARENTS
TOWARDS EDUCATION IN NAKURU DISTRICT**

BY

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DECLARATION

This research proposal is my original work and has not been presented for the award of degree or diploma in any university.

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RECOMMENDATION

This research proposal has been submitted for examination with my approval as University supervisor.

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ABSTRACT

Learners with disabilities face numerous social, psychological and physical challenges in accessing educational opportunities and developing their full potentials in order to attain better academic achievements. One of the major challenges has been the attitude of these children towards their own education. This study seeks to evaluate the attitude of the learners with disabilities and their parents towards education in Nakuru district, Kenya. This study will adopt an *ex post facto* research design. The target population for this study will include all 524 learners with disabilities, their parents and the head teachers in the 27 learning institutions/schools for learners with disabilities. A sample of 303 respondents which includes 222 learners, 27 head teachers and 54 parents will be used in this study. Primary data will be collected through administration of three sets of structured questionnaires, including learners, parents and head teacher, with the selected respondents. Secondary data will also be collected from documented information to supplement primary data. Data will be analyzed using descriptive and inferential statistics with the aid of a computer programme: Statistical Package for Social Sciences (SPSS). The study will hopefully help in providing information that can be useful in changing the attitudes of parents and their learners with disabilities, and facilitating access to education by those concerned including the Ministry of Education, administrators of the special institutions, learners, parents and the entire society.

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ABBREVIATIONS AND ACRONYMS

IEP:	Individualized Education Programme
SNE:	Special Needs Education
SSI:	Sight Saver International
MOEST:	Ministry of Education, Science and Technology
KIE	Kenya Institute of Education
MC:	Mentally Challenged
VI:	Visually Impaired
HI:	Hearing Impaired
PI:	Physically Impaired
EARC:	Education and Assessment Resource Centres

CHAPTER ONE: INTRODUCTION

1.1 Background of the Study

All societies in the world have existed alongside persons with disabilities. Before the eighteenth century, persons with disabilities were viewed as a burden, useless and having nothing to contribute to the welfare of the society. They were believed to be possessed by demons, to be cursed, a bad omen and a source of embarrassment to their families and society at large (Gearheart *et al.*, 1984). Until the 1970's, children with special needs in the world received little or no education because of the common belief that they were uneducable (Winzer, 1993). In most African traditional societies, persons with disabilities were less regarded and treated as a curse. The birth of a child with disability was regarded a bad omen to the family and society (Mbiti, 1969).

However, the situation is gradually and positively changing throughout the world towards accepting, integrating, caring and paying attention to persons with disabilities in order to help them in self-actualization and adjustment to life. The level to which this integration is going to take place will depend on change in attitudes and removal social and physical barriers existing in different spheres of the society. Full participation in the society is only possible if a person feels integrated and part of the same society. The self-image of persons with disabilities is affected by the reception they get and the messages they hear from the society. Most of these messages are negative and greatly impede integration (Ndurumo, 1993).

The United Nations Declaration on the rights of Disabled Persons (1981) and the 17th World Congress of Rehabilitation held in Nairobi in 1991, emphasized on the need for all governments and individuals to integrate persons with disabilities into the life of their societies and to ensure that they become economically independent. To implement this vision, various services and programmes to promote the self-actualization of persons with disabilities have been initiated in different parts of the world (UNESCO, 1981). The Kenyan government has adhered to this and introduced special needs education to take care of learners with disabilities and in some cases integrated them with their able-bodied counterparts. The government has also enacted and implemented the Education For All Handicapped Children Act (1975). The Act was later amended to Individuals with Disabilities Education Act and establishes basic principles for educating children with special needs (Hedrick, 1997).

Following the Act, there has been increased access to educational opportunities, training of specialized teachers, physical facilities and specialized schools. The Kamunge

Education Commission Report of 1988 observed that the government provides education opportunities to persons with disabilities through special needs education. Special needs education is charged with the responsibility of ensuring that the time spent in school by these special needs learners helps them to attain self-actualization and fully develop their potentials. The government has established a number of special schools in the country to cater for such children. According to Education For All (2000), enrolment in special schools at primary school level has increased from 6,115 in 1990 to 8,978 in 1998. The number of schools has also risen from 62 in 1990 to 107 in 1998.

There has also been an increase in the number of integrated programmes from 184 in 1990 to 655 in 1998. For the visually handicapped category, there are 19 programmes sponsored by Sight Savers International (SSI), with a total of 1040 blind children having been integrated into regular primary and secondary schools. Integration of the deaf is only done at the secondary school level. The integration of the physically handicapped has been done at all levels of education system. The current trend is towards more integration and less segregation of the learners with disabilities. So far 11,000 have been integrated in regular schools in the country. The specialized, regular and integrated schools for the hearing impaired, physically and visually impaired follow the same education and sit for the same national examinations. In so doing, learners with disabilities compete equally with their normal children at all levels.

At the secondary level, number of schools for the visually handicapped has not increased due to the aggressive integration programme by SSI and the low vision project by Christofel Blinden Mission (CBM). Enrolment in the secondary schools for the hearing impaired has increased from 110 in 1990 to 268 in 1998. This is attributed to the effort by welfare organizations to provide physical facilities and supply teaching staff. The educational placement for children with mental disabilities in the country depends on the severity of the retardation. Specifically, children with mild to moderate mental disability are placed in special units, whereas children with severe to profound mental disabilities are placed in residential-type segregated schools (Education For All, 2000).

The government has also increased the number of teachers trained in special education from 629 in 1990 to about 1700 in 1998. It is also committed to identification, assessment and provision of early intervention for correction and rehabilitation of learners with disabilities. Towards this end, the government has established Education and Assessment Resource Centres (EARC) in every district in the country (Education For All, 2000). There has also been an increase in government expenditure in special education over

the years. The total recurrent and development expenditure stands at Kshs 22.89 million since 1997 (Kenya Society for the Physically Handicapped, 1999).

However, despite the above government efforts to increase access to educational opportunities for learners with disabilities, the school enrollment rate is still minimal. For example, out of the 90,000 learners with disabilities who have been identified and assessed in the country, only 14,614 are enrolled in various educational programmes for learners with disabilities and an equivalent number integrated in the regular schools. This implies that majority of the learners with disabilities are either at home or integrated in regular schools with little or no specialized assistance (MOEST, 2004). The situation is not different in Nakuru District. From an estimated 1552 identified and assessed school-going age learners with disabilities, there are only 524 learners in the 27 learning institutions taking care of learners with disabilities including four special schools, ten special units, nine integrated programmes and four small homes (Provincial Director of Education Office, 2006). The low enrollment rate may be attributed to social, psychological and physical challenges facing these learners with disabilities in accessing the available educational opportunities in the country. Of major concern has been the attitude of learners with disabilities and their parents towards education. This has necessitated the need to establish the level of attitude of learners with disabilities and their parents towards education in Nakuru district.

1.2 Statement of the Problem

The government of Kenya has established special needs education and integration programme to enable learners with disabilities gain access to education. Despite these efforts, school enrolment rate is still very low. This may be attributed to a number of factors including the attitudes of the learners with disabilities and their parents towards education. However, little information exists on the actual levels of attitude of the learners with disabilities and their parents towards education. This study seeks to evaluate the attitude of the learners with disabilities and their parents towards education in Nakuru district, Kenya.

1.3 Purpose of the Study

This study seeks to evaluate the attitude of the learners with disabilities and their parents towards education in Nakuru district, Kenya. This will provide information that can be useful in changing the attitudes learners with disabilities and their parents and facilitate access to education.

1.4 Objectives of the Study

In order to achieve the purpose of this study, the following specific objectives are stated as below:

- (i) To determine the level of attitude of learners with disabilities towards education;
- (ii) To determine the level of attitude of parents of learners with disabilities towards education of their children;
- (iii) To determine whether the gender of a learner with disability influences his/her attitude of towards education;
- (iv) To determine whether the income level of the parent of a learner with disability influences his/her level of attitude towards education of their children; and
- (v) To determine whether the gender of a learner with disability influences his/her parent's attitude towards education.

1.5 Research Questions

The study seeks to address the following research questions:

- (i) What is the level of attitude of learners with disabilities towards education?
- (ii) What is the level of attitude of parents of learners with disabilities towards education of their children?
- (iii) Does the gender of a learner with disability influence his/her attitude of towards education?
- (iv) Does the income level of the parent of a learner with disability influence his/her level of attitude towards education of their children?
- (v) Does the gender of a learner with disability influence his/her parent's attitude towards education?

1.6 Significance of the Study

In order to address the challenges facing learners with disabilities in accessing educational opportunities in the country, detailed studies are needed to evaluate their attitude towards education. This is crucial in understanding the extent to which they appreciate the value of education and the challenges they face in accessing education. Such a study will hopefully help in providing information that can be useful in changing the attitudes of parents and their learners with disabilities, and facilitating access to education by those concerned including the Ministry of Education, administrators of the special institutions, learners, parents and the entire society.

1.7 Assumptions of the Study

This study will be based on the following assumptions;-

- (i) Learners with disabilities face a number of challenges in accessing education.
- (ii) The attitude of learners with disabilities and their parents plays a significant role in determining access of the children to education.

1.8 Scope and Limitations of the Study

The study will focus on evaluating the attitude of the learners with disabilities and their parents towards education in Nakuru district, Kenya. Nakuru district is chosen as a research site because of the availability of institutions taking care of learners with disabilities and also children and learners with disabilities in the area, like in all other parts in the country, face numerous social, physical, psychological and educational challenges in accessing educational opportunities. The district has 27 institutions/schools taking care of learners with disabilities (four special education schools, ten special units, nine integrated programmes and four small homes) with a population of 524 learners (296 in special education schools, 142 in special units, 25 in integrated programmes and 61 in small homes) and 68 teachers (Provincial Director of Education Office, 2006). All the 27 institutions/schools will be included in the study and a sample of learners, parents and head teachers selected.

The study is likely to encounter the following limitations which could impede answering the research questions and objectives:

- (i) Learners with disabilities are likely to have been stigmatized by the society and people around them. This might make potential learner respondents apprehensive about other people in the society, especially foreigners, and therefore affect development of a good rapport with the researcher. However, the researcher will seek for the assistance of the teachers in the institutions to assist in explaining the motive of the study and developing an amiable rapport with the respondents.
- (ii) Time, manpower and financial resource constraints will preclude a more comprehensive coverage of all learners with disabilities in the study area. However, only those children in learning institutions will be used and a sample of them will be included in this study.

1.9 Definitions of Terms

In this section, operational definitions are presented as used within the context of this study.

Disabled: A person with a physical or mental impairment that substantially limit the person in some major life activity and in effective interaction with the environment. They include physically impaired (PI), hearing impaired (HI), visually impaired (VI) and mentally challenged (MC).

Handicap: A limitation imposed on an individual by the environment and their person's capacity to cope with that limitation

Impairment: Any loss or abnormality of psychological, physiological, or anatomical structure or function.

Hearing Impairment: An individual manifesting 'hearing disability which may range in severity from mild to profound

Attitudes: Refers to positive or negative predispositions to think, feel, perceive and behave in a certain way towards a given situation.

Educational Assessment and Resource Centres: Centres where assessment and placement of learners with disabilities is done.

Individualized Education Programme (IPE): This is a programme written for each identified child with disability prior to his or her placement in special education concerning the unique educational services the child will receive.

Itinerant Teacher: A teacher who assists learners with disabilities in home based programs.

Integrated Programs: These are educational programs or schools that provide education to learners with disabilities alongside children who are normal

Segregated schools: These are special schools in which learners with disabilities learn with others who have similar difficulties like themselves.

Small homes: These are homes for the physically learners with disabilities built near schools to help them access the schools with ease.

Special Education Teachers: Teachers teaching in special institutions.

Special Unit: A class that is located in a regular school, but is set aside for educating learners with specific type of disability

Special Needs Education (SNE): This is education which provides appropriate modifications in curricular, teaching methods, medium of communication or the learning environment. This was originally referred to as special education.

CHAPTER TWO: LITERATURE REVIEW

2.1 Introduction

This chapter presents a review of the literature on disability and attitude towards education. The review discusses types of disabilities, attitude formation and societal attitude towards persons with disabilities. Also covered is parental attitude towards education of their children with disabilities, parental involvement in the education system, socio-economic characteristics of parents with learners with disabilities, attitude of learners with disabilities towards their education, and gender and education. The chapter also outlines the theoretical and conceptual frameworks to be used in guiding this study.

2.2 Types of Disabilities

Disability refers to a physical or mental impairment that substantially limit a person in some major life activity and in effective interaction with the environment. There are eight types of disabilities. These include; the hearing impaired, speech impaired, the mentally, visually, behavior disordered, physically, multiply and learning disabled (Ndurumo, 1990). The most commonly known disabilities which have been considered in this study are:

- (i) **Hearing Impaired (HI):** These are children who have problems with their sense of hearing. Some do not hear clearly while others are completely deaf.
- (ii) **Mentally Challenged (MC):** These are children with a mental disability who have sub-averaged general intellectual functioning. Such children score below average in class work and they also fail to meet standards of independency and social responsibilities expected of their age. They are classified into four categories that is, the mild, moderate, severe and profound.
- (iii) **The Physically Impaired (PI):** These are children with a broad range of disabilities. They are classified into three groups that is, the orthopedically impaired, the neurologically impaired, and the healthy impaired.
- (iv) **Visually Impaired (VI):** These are children who are either blind or have seeing (sight) problems. Some of these children wear prescribed glasses. Others whose sight cannot be improved are blind.

Children facing any of the above four kinds of disabilities can not benefit fully from regular education instructions due to a variety of reasons such as the degree of their disability, their psychological, physical, social, economic and communication, among others (Ndurumo, 1990). However, there is a wave of change towards forward-looking legislation to help persons with disabilities to secure access to improved health services, transportation, housing,

education, employment and recreational opportunities. However, there are still major barriers to such assimilation in the society including attitudes, beliefs and misconceptions about persons with disabilities (Spiegel, Podiar & Fiorito, 1981).

2.3 Attitude Formation

Eiser (1986) defines attitude as a combination of affective, behavioral and cognitive reactions to an objective. According to this tri-component approach an attitude is:

- a) A positive, negative or mixed reactions consisting of our emotions, moods and feelings about an object or actions;
- b) A behavioral disposition or a tendency to act in a certain manner towards something; and
- c) A cognitive reaction as our evaluation of the object is based on relevant beliefs, images and memories.

Schulman (1995) as cited in Schewarts *et al* (1995), however differs with this tri-component view and instead defines attitude as simply a positive or negative evaluation of an object. When people use such words as like, dislike, love, hate, good and bad, they are usually describing their attitudes. This means that evaluation of the attitude object centers solely on its utility for the person and not on its relation to longstanding values. The importance that one attaches to a particular value largely determines whether or not it will influence attitudes. For example, one's attitude towards education of persons with disability is probably based on what he/she thinks about the importance of education to the disabled person and society. According to theories of reasoned action and planned behavior, specific attitudes combined with social factors produce behavior. Wanjohi (1990) observes that strong attitudes are rooted in our genetic makeup that is people may be predisposed by nature to hold certain attitudes. Davidson *et al*, (1985) as cited in Oyugi (1992) suggests that people tend to behave in ways that are consistent with their attitudes when they are well informed and the manner in which the information was received in the first place.

According to Bandura (1989), the learning of attitudes is an integral part of the socialization process which may occur through direct experience and interactions with others or as a product of cognitive process. Most of the attitude people hold are the product of direct experience with the attitude object. The attitude formed eventually influences an individuals' behavior. The extent of the influence is generally believed to be moderated by personal characteristics. Attitudes do not necessarily correlate with behavior but under certain conditions they may. According to Fazio (1996), attitudes should be regarded as a learned association between a given object and a given evaluation. People are assumed to

behave the way they do because of meanings they assign to their environment and events and objects within it. Different theories have been put forward to indicate how attitudes are formed. Two major theories are as follows:

(a) Mere Exposure Effect

According to this theory, the more we are exposed to an object or behavior, the higher the tendency to develop more positive feelings. Merely exposing people to a particular object repeatedly will make them develop an attitude towards it. Increased exposure to an object results in greater liking for previously neutral objects. Mita (1977) as cited in Ajzen (1988), conducted experiments to prove that mere exposure affects attitudes. Overall the significance of the mere exposure effect regarding attitude illustrates how affect can become associated with an object independent of any knowledge about it. As human beings we seem to naturally develop a liking for those things that are repeatedly presented to us. For example, exposing learners with disability to educational opportunities is likely to influence the kind of attitude one will develop towards education.

(b) Classical Conditioning

Through these methods, a previously neutral attitude object can come to evoke an attitude response simply by being paired with some other object. This is also called learning by association. When a neutral or conditioned stimulus is paired with unconditioned stimulus, it naturally produces an emotional response. Exposing learner with disability to a neutral stimulus, like educational opportunities, will result into unconditioned stimulus in form of emotional response which is the attitude. Learners with disability will then form positive or negative attitude due to the classical conditioning. Cacioppo (1992) found stronger conditioning effects suggesting that classical conditioning is a more powerful determinant of attitude formation when people possess little knowledge about the attitude object.

2.4 Societal Attitudes towards Persons with Disabilities

Historically, Frampton and Gall (1955) as cited in Mbiti (1969) have summarized the stages of development of attitudes towards the handicapped to include: First, during the pre-Christian era the handicapped persons were persecuted, neglected and mistreated. Second, during the spread of Christianity era they were protected and pitied. Third, in very recent years there has been a movement towards accepting the handicapped and integrating them into society to the fullest extent.

Early Greek and Roman civilization viewed the persons with disabilities with a mixture of superstitions and ruthlessness. For instance in Rome, Athens and Sparta, blind children were put to death in a legally approved manner, and fathers had a right to abandon their newborn infants if they were deformed. Those learners with disabilities who survived were seen as inferior and were given severe punishment as it was believed that they possessed evil spirits (Gellman, 1973). In other societies, children who exhibited disabilities were isolated from society and some were even taken to the forest and left to die. Children manifesting mental disabilities have probably been the most mistreated of all learners with disabilities. In earlier civilizations some were used as court jesters to entertain royal families simply because of their submissiveness and lack of social discernment (Ndurumo, 1990).

In India, disability is still viewed in terms of tragedy with a better dead than disabled approach, the idea being that it is not possible for persons with disabilities to be happy or enjoy a good quality life. Cultural beliefs about disability play an important role in determining the way in which the family perceives disability and the kind of measures it takes for prevention, treatment and rehabilitation. Studies report that parental expectations from their learners with disabilities are mostly negative and unrealistic. Dalal and Pande (1999) investigated cultural beliefs and attitudes towards physical disability. The results revealed fatalistic attitudes and external dependence in families with learners with disabilities. Most of the respondents felt that the disabled member in a family could not do anything and just needed help and sympathy.

In most African families, the handicapped were seen as a curse and were separated from the main stream society. In some cases even the birth of twins and triplets were seen as an event out of the ordinary. Parents are ashamed to produce a child with disability so that the child is hidden away, at home, isolated, even abused (McFerran, 2005). Some societies used to kill such children while others killed both the mother and the children (Mbiti, 1969: 117). The practice of viewing the disabled as incapable of gainful employment is embedded in the original Kiswahili term “*Wasiojiweza*” used in Eastern Africa to refer to the disabled. The literal translation of the term means “those incapable of performing”. According to Kalugula *et al* (1984), the term has a wider meaning for it was additionally used to refer to all disabled persons, including the deaf. The hearing impaired were in the past called “*Bubu*” (deaf and dumb) and later on “*Viziwi*” (deaf), but are now referred to as “*Wasiosikia*” (those who cannot hear). These are some of the stigmatizing Kiswahili terms referring to persons with disabilities. These words refer to persons with disabilities negatively, are reserved to

things and carry the third person singular and plural respectively. Thus, persons with disabilities are referred to as non-human beings (Ndurumo, 1990).

Many people in Kenya do not accept disability. Many learners with disabilities are hidden at home due to the shame that they bring to their family. They are considered “cursed and a blemish to the reputation of the family and the village”. For example, a case has been cited of a mentally child with disability in Kenya who has been tethered to a seat for years because the parents are ashamed (NjaGih, 2005). In Southwest Kenya, a father was chased out of the village for having three learners with disabilities (McFerran, 2005).

2.5 Parental Attitudes Toward Education of their Children with Disabilities

Rangaswami (1995) asserts that often parents have a negative attitude towards their learners with disabilities. The parents are plagued with feelings of pessimism, hostility, and shame. Denial, projection of blame, guilt, grief, withdrawal, rejection, and acceptance are the usual parental reactions. Some parents also experience helplessness, feelings of inadequacy, anger, shock and guilt whereas others go through periods of disbelief, depression, and self blame. These reactions lead to the formation of negative attitudes towards the learners with disabilities.

UNESCO (1974) expressed the view that parents of learners with disabilities tend to feel ashamed so that such children are hidden away from the rest of the society. From this statement from UNESCO, it is quite evident that this lack of concern starts with the parents of such children. The stigma from disability makes parents reluctant to send their children outside the home thus denying them education and training in vocational skills. In Bhutan in Southern Asia, 279,500 children under the age of 14 years are disabled. However, most of these learners with disabilities are still locked after at home by their families and do not attend school (Miller, 2003). Likewise, in Kenya learners with disabilities are hidden away from society. For example, a girl was kept hiding her disabilities from the rest of the world for 13 years (Oyaro, 2004). However in the recent years, people are now accepting that a child with disability is a normal child faced with some shortcomings. This new attitude that is developing is also due to the developing of modern techniques and discoveries that have shown that a child with disability can be rehabilitated into a useful member of society if provided with special skills and education.

However, some parents no longer confine learners with disabilities. They have accepted them as they are (Maingi, 2004). Some parents are now seeing learners with disabilities as a blessing and not as a curse as before (Ombara, 2003). Some parents are

positive and enthusiastic towards education of their children (Browsers, 1985). This study seeks to investigate the attitude of parents towards the education of their learners with disabilities in Nakuru District.

2.6 Parental Involvement in the Education System

Parents are expected to play a crucial role in the education of their learners with disabilities by first and foremost accepting their conditions. They have to help the child to learn to be humane, to love, to build his/her unique personality, develop his/her self concept/image and relate with and to the changing society of which he/she is born (Okot, Eron & Kutosi, 2000).

The time that the child spends at school may not be enough for his/her needs, and he/she requires a consistent programme of developmental experiences from working hours to sleeping hours. The home is to continue from where the school leaves and vice versa. Successful collaboration requires effective on-going communication between home and school. Parents are key source of vital information about their children because they have firsthand knowledge of their children's physical, social emotional and cognitive traits (Hedrick, 1997). Parental involvement is therefore indispensable to early intervention, and teachers should focus on strengthening such involvement. It is however, necessary for such link to be forged early in the child's life, possibly at pre-school age. Kachingwe (1983) argued that it is fruitless effort to rehabilitate people and plunge them in an attitudinally disabled environment where they are pitied. This is a kind of attitude that keeps persons with disabilities feeling a sense of guilt and deprived of self-esteem.

Inadequate stimulation and learning opportunities in the home can be lessened by the early involvement of parents in the education of their children (Taylor, 1981). They are involved in the preparation of an individualized education programme (IEP) in which educational goals and objectives for each individual child are set. Parents must participate in the I.E.P preparation and must agree to all decisions made regarding their child. Usually, this is an important opportunity for parents and teachers to work together in a very precise and concrete manner. Parents and teachers can share their successes and frustrations and work together to reach other goals (Okot, 2000).

2.7 Socio-Economic Status of Parents of Learners with disabilities

Learners with disabilities are in themselves a cost to their parents. These children, irrespective of age, usually need permanent attention, care and treatment. All these needs have an innate socio-economic cost to the parent and the family involved. In Russia, examinations of the socio-economic characteristics of families with learners with disabilities show that most of them are employed in less demanding jobs. When children are born or become invalids, forty percent of the mothers break their labour force participation while thirteen percent change their place of work. Mass involvement of mothers in caring for children is caused by insufficient development of the sphere of special services for people with disabilities including provision of personal services, nursing and teaching at home, special education for the disabled. Treatment, care, education and rehabilitation of learners with disabilities require direct participation of parents and much time (Elena, 2005). Learners with disabilities often make heavy demands on the family's time, resources and energy by demanding constant supervision and stimulation. McConachie (1986) in a study of six to fourteen years old severely mentally learners with disabilities, revealed that mothers spent an average of over seven hours daily on care, supervision and training of their children.

Another persistent problem for parents of learners with disabilities involves stigma, an attribute that is deeply discrediting. Parents of learners with disabilities suffer from stigmatization by society. Some parents of learners with disabilities are rejected by relatives and friends due to the fear that they too may share the stigma (Shea and Baver, 1991). The problems facing parents with learners with disabilities including poverty, are negatively affecting the decisions concerning education of the children. Parents decide to lock them after in the houses thus denying them education.

2.7. Attitude of Learners with disabilities towards their Education

The non-disabled society has a stereotype attitude towards persons with disabilities (McFerran, 2005). This makes them grow up knowing that they are unworthy and uneducable. When the learners with disabilities are considered abnormal by their non-disabled society/parents, then all their other behaviors and characteristics are colored by the label. The result of labeling leads to the development of negative self-concept of learners with disabilities. The negative self-concept leads to the formation of self-destructive ideas and attitudes that influence their daily transactions. Some children may irrationally believe that they are rotten people and they are to blame for their disabilities and they deserve to suffer thus seeing no need to receive education (Ellis, 1974).

However, some children have been helped to change these irrational beliefs and attitudes, and realized that they are capable of performing better in their education (McFerran, 2005). Those who have gone to school and disregarded the attitude of the society towards them have excelled and become successful in life even better than their able bodied counterparts. For example, in Kenya we have Dr. Ndurumo who is a senior curriculum specialist in the Kenya Institute of Education (KIE) is deaf (Ndurumo, 1990). The former M.P, Josephine Sinyo is blind. Some learners with disabilities are aspiring to become engineers. With change in the thinking about persons with disabilities, learners with disabilities are capable of becoming what they want to become and be useful members of the society.

2.8 Gender and Education

Even among persons with disabilities, discrimination has also been portrayed in terms of their gender differences. Women with disabilities suffer the most. Many women are discriminated against merely because they are women. Having a disability compounds this prejudice, particularly for women in developing countries. This double prejudice is the route cause of the inferior status of women with disabilities, making them the world's most disadvantaged group. It is the cause of hostility and negative attitudes that are often more debilitating for disabled women than the disability itself (Boylan, 1991).

In Asia, 66 percent of all women are illiterate, and in Africa, the proportion is 85 percent (Boylan, 1991). With such high rates of illiteracy among women in general in developing countries, the chances for a girl with disability getting education are slim. Research has shown that in an average Asian home, especially in rural areas, girls with disabilities are just left to exist in confined areas of the house and very few, if any have the chance to go to school. Child gender is anticipated to be associated with parental attitudes in a variety of ways that would limit education opportunities for disabled girls.

In African traditional culture, expectations for each sex were different and depended on the role one was expected to play in society. Men were expected to play economic roles while women were expected to play domestic and other feminine roles. As a result of this, when formal schooling was introduced in Africa, there was much emphasis on education of the boy because he was seen as the potential head of the family and a bread winner while the girls were prepared for feminine roles and successful marriage (Muola, 2000). This emphasis is still held by some people in Kenya. The country is faced with regional gender disparities in education especially at the primary school level. The disparities differ from region to region

with the lowest recorded in North Eastern province where 29.3 percent of girls compared to 112.2 percent in Western province (MOEST, 2004). School enrolment and retention levels for girls are still lower at upper primary, secondary and university levels (Gachiri, 2000). For example, most Maasai girls are denied a chance to attain education and forced to undergo Female Genital Mutilation (FGM) in preparation for early marriage. This is because of the parents' attitude that girls are only seen as a source of wealth (Wangulu, 2000). Such differences in attitude, treatment and expectations influence the educational participation of girls with disabilities. To address gender concerns in education, the Kenyan government is promoting gender friendly learning environment in schools with special focus to provision of water and sanitation. The gender policy is being finalized and once completed will create a framework through which partners can work together to promote the education of girls (MOEST, 2004).

2.9 Theoretical Framework

This study will be grounded in the humanistic theory of Carl Rogers and the learning theory of attitude formation.

2.9.1 Person Centered Theory

Person centered approach is an example of humanistic theory profounded by Carl Rogers. The theory postulates that human beings have the tendency to develop in a positive and constructive manner if a climate of respect and trust is established. Rogers has consistently maintained that there are conditions for realizing a growth- promoting climate in which individuals can move forward and become what they are capable of becoming. These conditions will include: genuineness or realness, acceptance or caring and deep understanding. Relating this theory to this study implies that learners with disabilities can become what they are capable of becoming if genuineness, acceptance and deep understanding is cultivated and communicated to them by those who help them. The helpers should communicate a deep and genuine caring to them as persons. The caring should be unconditional, that is they should love and care for the children the way they are. The helpers should also communicate empathic understanding (Rogers, 1961). This means that the helpers should personally identify themselves with the persons with disabilities. If these attitudes are communicated by the helpers, then learners with disabilities can excel in life and become useful members of the society.

2.9.2 Social Learning Theory of Attitude Formation

Attitudes are learned rather than being innate. According to (Regoli & Hewitt, 1994), the learning of attitudes is an integral part of the socialization process which may occur through direct experience and/or interactions with others or as a product of cognitive process. Most of the attitude people hold are the product of direct experience with the attitude object. The attitude formed eventually influences an individuals' behavior. The extent of the influence is generally believed to be moderated by personal characteristics. Attitudes do not necessarily correlate with behavior but under certain conditions they may. According to Frazoi (1996), attitudes should be regarded as a learned association between a given object and a given evaluation. People are assumed to behave the way they do because of meanings they assign to their environment and events and objects within it.

Oyugi (1992) points out that attitudes are learned in the same way as any other motor or behavioural skill such as riding a bicycle or operating a computer is acquired. This learning is by observing and imitating others. Children observe and imitate their parents and other powerful models in society (Bandura, 1989). If the models have a negative attitude towards the disabled, the children will internalize, retrieve the learnt attitude for use at their appropriate time or when they became adults. This is how parental attitude is formed in the wider society and then transferred to the home of the child with disability. So when a child with disability is rejected or accepted by the parent, the parents are just doing what is normal to them. This theory therefore explains the acceptance/rejection of learners with disabilities.

2.10 Conceptual Framework

Seidenberg & Alvin (1976) postulate that attitude toward a given concept is consistent with beliefs about that concept. In general, a concept that is seen as leading to positive consequences/benefits and preventing negative consequences is likely to be valued positively. Conversely, if an individual believes that the attitude object blocks the attainment of positively valued goals and leads to negative consequences, the attitude object will be evaluated negatively. Learners with disabilities and their parents have positive or negative attitudes towards the education depending on the set of beliefs and values they attach to these children. This study conceptualizes that the attitude of the learners with disabilities and their parents towards education (independent variables) will determine the access of the child with disability to educational opportunities (dependent variable). This means that the kind of attitude (positive and/or negative) developed by a child with disability and his/her parents towards education will determine whether this child will gain access to education or not. However, the eventual access to education or lack of it will in turn depend on the societal values, beliefs and attitudes (extraneous/intervening variables) towards persons with disabilities and their education. The societal beliefs, values and attitudes might either concur or be at variance with the attitude of the child with disability and his/her parents and therefore influence access to education. The above interrelationships can be summarized in Figure 1 below which will guide this study.

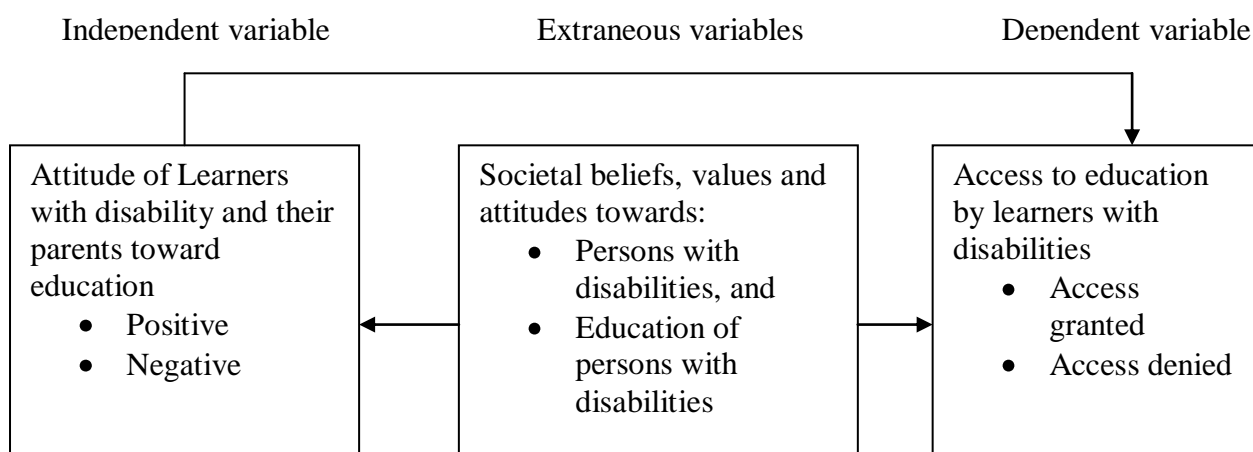


Figure 1 Relationship between Attitude and Access to Education

CHAPTER THREE: RESEARCH METHODOLOGY

3.1 Introduction

This chapter discusses the methodological procedures to be used in data collection and analysis. The discussion covers the research design, location of the study, population of the study, sampling procedure and sample size, instrumentation, data collection, and data analysis.

3.2 Research Design

This study will adopt an *ex post facto* research design. This is a research design which teases out possible antecedents of events that have already occurred and therefore cannot be manipulated. This means that the researcher investigates possible cause-and-effect relationships by observing an existing condition or state of affairs and searching back in time for the plausible causal factors (Kerlinger, 1973). In this study, the independent variable (attitude of children with their disabilities and their parents towards education) has already been formed and the research starts with the observation of the dependent variable (access to education). The researcher will proceed to study the independent variable in retrospect for their possible relationship to, and effects on, the dependent variable.

3.3 Location of the Study

The study will be conducted in Nakuru District of Rift Valley province. The district is also the headquarters Rift Valley province of Kenya. Nakuru district is chosen as a research site because of the availability of institutions taking care of learners with disabilities and also learners with disabilities in the area, like in all other parts in the country, face numerous social, physical, psychological and educational challenges in accessing education.

3.4 Population of the Study

The target population for this study will include all learners with disabilities, their parents, and the head teachers of the learning institutions catering for these learners. The district has 27 institutions/schools taking care of learners with disabilities (four special education schools, ten special units, nine integrated programmes and four small homes) with a population of 524 learners (296 in special education schools, 142 in special units, 25 in integrated programmes and 61 in small homes) and 68 teachers (Provincial Director of Education Office, 2006). Table 1 summarizes the categories of schools and population of the students by gender.

Table 1 Categories of schools and student Population by Gender

Category	Name	Population by gender		
		Boys	Girls	Total
Special schools	Hills (M/H)	88	40	128
	Ngala (H/I)	60	59	119
	Njoro (M/H)	11	10	21
	Venessa grant (M/H)	16	12	28
Special unit/class for mentally challenged	North Karathe	6	4	10
	Mugwathi	9	8	17
	Tumaini	10	5	15
	Our lady of Fatima	11	11	22
	Muririgua	7	4	11
	Our lady of Mercy	9	2	11
	Mmriundu	6	6	12
	Gilgil township	13	11	24
	Our lady of Victories	3	3	6
	Pangani	6	8	14
Integrated programme for visually impaired	Kilimo	1	0	1
	Naishi	2	2	4
	St. Francis Bahati	0	1	1
	Njoro township	0	0	0
	Ruiru	4	0	4
	Kendurumo	4	4	8
	Kabazi	1	0	1
	Tumaini	2	1	3
	New creation	2	1	3
Small homes for physically impaired	Our lady of Victories	9	28	37
	Kariri Karua	1	3	4
	Tumaini	1	4	5
	Menengai	8	7	15
Total		290	234	524

3.5 Sampling Procedure and Sample

Ideally, it will be preferable to collect data from the whole population. However, because of time, manpower and financial constraints, sampling will be inevitable. In order to determine the sample size of learners with disabilities to be drawn from the targeted population, this study will adopt a formula by Kathuri and Pals (1993) for estimating a sample size, n, from a known population size, N.

$$n = \frac{\chi^2 NP(-p)}{d^2(N-1) + \chi^2 P(-p)}$$

Where:

n = required sample size

N = the given population size, 524 in this case

P = Population proportion, assumed to be 0.50

d^2 = the degree of accuracy whose value is 0.05

χ^2 = Table value of chi-square for one degree of freedom, which is 3.841

Substituting these values in the equation, estimated sample size (n) will be:

$$n = \frac{3.841 \times 524 \times 0.50 (1 - 0.5)}{(0.05)^2 (524 - 1) + 3.841 \times 0.5 \times (1 - 0.5)}$$

n = 222

Both non-probability and probability sampling procedures will be used in selecting the required sample of learners, parents and head teachers for this study. The two types of sampling will be used hand in hand at different stages. Probability sampling will be used in selecting the sample of 222 learners. First, 222 learners will be selected from the 524 in the four categories of schools (special education schools, special units, integrated programmes and small homes). Proportionate stratified sampling will be used (Table 2). This is so as to ensure that the sample is proportionately and adequately distributed according to the population of each category of schools. A proportionate sample of learners will be selected from each category of schools by dividing the total number of learners in that category by the total number of learners in all the categories and then multiply it by 222. For example, from the special schools, it will be 296 divided by 524 and then multiplied by 222 which results into 125 learners. For the rest, there shall 60 learners from special units, 11 from the integrated programme and 26 from the small homes.

Second, a proportionate sample of learners will be selected from every school in each category. Proportionate stratified sampling will also be used (Table 2). For example, from Hills school, to get the number of learners to be selected will involve dividing 128 by 296 and then multiplied by 125 which results into 54 learners. Third, a proportionate sample of boys and girls learners will be selected from the sampled population in each school using proportionate stratified sampling. For example, from the same Hills school, to get the number of boys learners to be selected will involve dividing 88 by 128 and then multiplied by 54 which results into 37 learners (Table 2).

Table 2 Sample distribution by Gender

Category	Name	Sampled population		
		Boys	Girls	Total
Special schools	Hills (M/H)	37	17	54
	Ngala (H/I)	25	25	50
	Njoro (M/H)	5	4	9
	Venessa grant (M/H)	7	5	12
Special unit/class for the mentally challenged	North Karathe	3	1	4
	Mugwathi	4	3	7
	Tumaini	4	2	6
	Our lady of Fatima	4	5	9
	Muririgua	3	2	5
	Our lady of Mercy	4	1	5
	Mmriundu	2	3	5
	Gilgil township	6	4	10
	Our lady of Victories	1	2	3
	Pangani	2	4	6
Integrated programme for visually impaired	Kilimo	1	0	1
	Naishi	1	1	2
	St. Francis Bahati	0	1	1
	Njoro township	0	0	0
	Ruiru	1	0	1
	Kendurumo	1	1	2
	Kabazi	1	0	1
	Tumaini	1	1	2
	New creation	1	0	1
Small homes for physically impaired	Our lady of Victories	5	11	16
	Kariri Karua	1	1	2
	Tumaini	1	1	2
	Menengai	3	3	6
Total		124	98	222

Purposive sampling will then be used to select the specific number of learners of each gender to be included in the sample from each school. This is so as to take care of the ability of the learners to comprehend the questions and communicate. Purposive sampling will also be used in this study to select two parents of learners with disabilities and the head teacher from each of the 27 institutions. The parent and head teacher will be targeted for specific information about education of learners/learners with disabilities.

From the above sampling procedures, the 222 learners, 27 head teachers and 54 parents will form the sample size for this study. Therefore a sample size of 303 respondents will be selected and included in the study. Such a sample size for a survey research is considered a fair representation of the total population in the study area.

3.7 Instrumentation

Primary data will be collected through administration of three sets of structured interviews/questionnaires (learners; head teacher and parent) to the selected respondents. Each instrument will aim at collecting specific information from the targeted respondents. The learner questionnaire will elicit information on their family background and their attitude towards education. The head teacher questionnaire will seek information on the number of learners with disabilities in their school/institution, and the challenges they face in educating these children. The parent questionnaire will seek information on their family socio-economic status, kind of disability of his/her child, attitude towards the child, attitude towards the education of the child, and challenges in raising such a child.

The research instruments will be validated in two ways. The first method will involve the researcher going through the instruments in relationship with the set objectives and make sure that they contain all the information that can enable answer these objectives. The second method will involve consulting and seeking for the opinion of the experts from the Department of Psychology, Counselling and Education Foundations. The instrument will then be taken for piloting on a population that is similar to the target population, four special learning institutions within Rift Valley province. The four schools will include Esagari (HI), St. Patricks Shimoni (PI), Emining (VI) and Maji Mazuri (MC). The piloting will include five learners, two parents and head teacher from each school. The objective of piloting is to allow for modifications of various questions in order to rephrase, clarify and clear up any ambiguities in the questionnaire. Piloting will also assist in testing the reliability of the instruments. A reliability coefficient of 0.7 or over will be assumed to reflect the internal reliability of the instruments (Seltiz, Wrightsman and Cook, 1976).

Secondary data will also be collected to supplement the primary data. These data will be collected from documented information on persons with disabilities and education of learners with disabilities. Sources of this information will include government offices and libraries (books, journals, theses, periodicals, and other publications).

3.9 Data Collection Procedures

The researcher will proceed to collect data from the selected respondents after receiving permission from the University; Department of Psychology, Counselling and Education Foundations; and District education office in Nakuru district. Permission will also be sought from the head teachers of the selected schools/institutions. Data will then be collected through administration of the three sets of questionnaires.

3.10 Data Analysis

Data collected will be processed and analyzed to facilitate answering the research objectives and questions. This will be done using both descriptive and inferential statistics. The descriptive analyses, including frequencies, percentages, tables and cross-tabulations, will be used to summarize and organize data and to describe the characteristics of the sample population. Inferential statistics using chi square and correlation analysis will be used in making deductions and generalizations about the whole population. This will be done with the aid of a computer programme - Statistical Package for Social Sciences (SPSS). A summary of the data analysis procedures for each research question is contained in the table below.

Table 3 Summary of Data Analysis

Research Question	Independent Variable	Dependent Variable	Statistic technique
What is the attitude of learners with disabilities towards education?	Attitude	Education	Frequencies and percentages
What is the level of attitude of parents of learners with disabilities towards education of their children?	Attitude	Education	Frequencies and percentages
Does the gender of a learner with disability influence his/her attitude of towards education?	Gender	Attitude	Frequencies, percentages and Chi Square
Does the income level of the parent of a learner with disability influence his/her level of attitude towards education of their children?	Income level	Attitude	Correlation and Chi Square
Does the gender of a learner with disability influence his/her parent's attitude towards education?	Gender	Attitude	Frequencies, Percentages and Chi Square

WORK PLAN

	July, 05	Aug., 05	Feb., 06	Mar., 06	Apr., 06	May., 06	June., 06	July., 06	Aug., 06	Sep., 06
Proposal writing										
Proposal presentation										
Proposal correction										
Piloting										
Data collection										
Data analysis										
Project writing										
Project submission										
Project defence										

BUDGET

Items	Amount (Kshs)
Proposal preparation	
Travelling Expenses	5,000
Stationary-	2,000
Printing copies of research proposal	4,500
Binding	300
Piloting	
Travelling expenses	1,000
Photocopies questionnaires	300
Actual data collection	
Photocopies 303 questionnaires	3000
Travelling expenses	10,000
Data processing and analysis	5,000
Binding costs	
a) Proposal	3,000
b) Project	6,000
Sub total	40100
Contingencies 10 %	4000
GRAND TOTAL	44100

Source of funds: self

REFERENCES

- Ajzen, I. (1988). *Attitude, Personality and behavior*. Chicago, U.S: Dorsey
- Ayieko, O. (2004, November 24). *My dream to become an engineer*. Daily Nation, pp4
- Bandura, A. (1989). Social cognition Theory. In R. Vasta (Ed), *Annals of child development: six theories of child development* (vol. 6). Greenwich, TAI Press.
- Boylan, E. (1991). *Women and Disability*. London and New Jersey: Zed Books Limited.
- Browsers, T., (1985). *The Management and special education schools*. Great Britain: Croom Helm Limited.
- Cacioppo, J.T. (1996) *Rudimentary determinants of Attitudes*. Journal of Experimental Social Psychology
- Dalal, A.K. & Pande, N. (1999). Cultural Beliefs and family care of the children with disabilities. *Journal of psychology and developing societies*; 11:55-75.
- Education for All (2000). *Special education*. <http://www2.unesco.org/wef/country/reports/Kenya/rapport-2.html>.
- Eiser, J.R. (1986). *Social Psychology, Attitude, cognition And Social behavior* Cambridge University Press.
- Elena, K. (2005). *Employment of parents with learners with disabilities in Russia*. <http://www.aea.fed.eco.org.html>.
- Ellis, A. (1974). *Reason and emotion in psychotherapy* New York: Lyles Stuart
- Ezewu, O. (1983). *Sociology of Education*. Lagos: Longman
- Fraznoi, L. S. (1996) *Social Psychology*. (2nd edition). McGraw Hill Companies.
- Gachiri, E.W.I. (2000). *Female circumcision*. Nairobi, Kenya: Kolbe Press.
- Gearheart, B.R. and Wishann, W.W. (1984). *The Exceptional student in Regular Classroom* (3rd Edition) Times Mirrow/Mosby College
- Gellman, W. (1973). *Reliability practices with the physically disabled*. New York: Columbia University Press.
- Government of Kenya (1988). *Report of the presidential working party on education manpower training for the next decade and beyond*. Kamunge Report. Nairobi: Government printers.
- Hedrick, J. (1997). *Parents and professional working together. An introduction to early childhood special education*. Boston: Allyn and Bacon.
- Kachingwe, E.W. (1983). Rehabilitation of persons with disabilities. *In the African rehabilitation Journal*. NOSCOH Zimbabwe PP.13.

- Kalugula, C. *et al.* (1984). *Development of special education in Tanzania*, Dar-es-Salaam: Institute of Education.
- Kathuri, M. J. and Pals D.A (1993). *Introduction to educational reseach*. Njoro: Educational Media Centre, Egerton University.
- Kenya society for physically handicapped (1999). *A violation of Human Right for people with disability*. Nairobi: Nairobi University Press.
- Kerlinger, F. N. (1973). *Foundations of Behavioural Research* (2nd edition). New York: Holt Rinehart and Wilson, Inc.
- Maingi, R. (2004, April 7). *Valuable lesson from a special child*. Daily Nation, pp2.
- Mbiti, J. S. (1969). *African Religion and Philosophy*, London, Morrison and Gibb Limited.
- McConachie, H. (1986). *Parents and young mentally handicapped children*. London: Croom Helm.
- McFerran, A. (2005). *Accursed and forgotten, African's learners with disabilities*. <http://www.timesonline.co.uk/article.html>.
- Miller, E. (2003). *Learners with disabilities in Bhutan and access to basic education*. http://www.unicef.org/infobycountry/Bhutan_328.html.
- MOEST, (2004). *Development of education in Kenya*. <http://www.ibe.unesco.org/international/ICE47/English/Natreps/reports/kenya.pdf>.
- Muola, J.M., (2000). *A study of the self-concept of children with physical handicapped in integrated and special schools in Kenya*. Unpublished PhD thesis, Egerton University.
- Nachmias, D. and Frankfort-Nachmias, C. (1996). *Research Methods in the Social Sciences*. 5th ed. London: ARNOLD
- Ndurumo, M. M. (1993). *Exceptional Children – Developmental Consequences and Intervention*. Nairobi: Longman Kenya.
- Ndurumo, M.M. (1990). *Special education*. Kenya University of Nairobi.
- NjaGih, M. (2005, January 29). *Doctors rescue man tied to a seat for years*. The standard, PP 4.
- Okot, M., Eron. L. & Kutosi, G., W., (2000). *Special needs education, module 1*. Kenya institute of special education, Nairobi.
- Ombara, O. (2003, January 15). *Bringing up learners with disabilities*. Daily Nation, pp 21, 23.
- Oyaro, K. (2004, April 14). *Our daughter our secret*. Daily Nation, pp2.
- Oyugi, E.O., (1992). *Attitudes and motivation*. University of Nairobi

- Rangaswami, K. (1995). Parental attitude towards mentally retarded children. *Journal of clinical Psychology*. 22:20-23.
- Regoli, R.M. and Hewitt, J.D. (1994). *Delinquency in Society. A Child Centered Approach* (2nd Ed.). New York: McGraw – Hill Inc.
- Rogers, C. (1961). *On becoming a person*. Boston: Houghton Millflin
- Schewarts, B., and Robbins, S.J (1995). *Psychology of Learning and Behavior*. New York USA W.W Norton and company.
- Seidenberg. B.& Alvin, S. (1976). *Social psychology*. London. Collier Macmillan Inc.
- Selltiz, C. Wrightsman, L.S., Cook, S.K. (1976). *Research Methods in Social Relations*. New York: Holt,Riverhart & Winston.
- Shea, M.T. & Baver, M.A. (1991). *Parents and teachers of children with exceptionalities*. Boston: Allyn and Bacon.
- Speigel, A. D., Podiar, S. M. A., and Fiorito, S. M. S. W. (1981). *Rehabilitating Persons with Disabilities into Mainstream of Society*. New York. *Noyes Medical publication*.
- Taylor, H.S. (1981). *Helping parents to become partners in the education of their handicapped child. In prospects, Educating Handicapped children and youth* UNESCO, Paris.
- UNESCO (1974). *Cases studies in special education. Cuba, Japan, Kenya & Sweden*. Paris: UNESCO Press.
- Wangulu, E. (2000). *Female Genital Mutilation blamed for school drop out*. [http://www.web.net/incaf/human rights/kenyainfo/kenya octoo.html](http://www.web.net/incaf/human%20rights/kenyainfo/kenya%20octoo.html).
- Wanjohi, K. (1990). *A study to investigate perceptions of the role of the counsellors in Secondary Schools in Nyeri, Nairobi – Unpublished M. E. D. Thesis* Kenyatta University.
- Winzer, G. (1993). *Parental satisfaction with special Education*. <http://www.classuoft.edu/CLAS/Jur/0012/paper/paper-childs.html>.

APPENDICES

APPENDIX A: CHILDREN QUESTIONNAIRE

My names are Mokeira Mary Adogo, a student at Egerton University undertaking a Masters degree in Guidance and Counselling. As part of the requirements of the course, I am required to undertake a research project in my area of study. My research topic is on “the attitude of disabled children and their parents towards education in Nakuru district”. You have been selected as one of my respondent in this project. Your sincere and correct answers will be important in attaining this goal. All information will be treated with utmost confidentiality.

Section A: Background Information

1. Name of the school/unit/integrated/home _____
2. Kind of institution
 - Special schools
 - Integrated programme/school
 - Special unit
 - Small home
3. Age _____
4. Gender Male Female
5. Class _____
6. Kind of disability
 - Visually disabled
 - Hearing impaired
 - Physically disabled
 - Mentally disabled
7. How many brothers and sisters do you have at home? _____
8. What is your birth order in your family? (first, second borne) _____
9. Do you have any of your brother or sister with the same condition of disability as yours?
 - Yes No
10. Are all your parents alive?
 - Yes No
11. If yes in 10, do you live with all of them?
 - Yes No

12. If no in 10, who do you live with? _____
13. Is any of your parents having the same condition of disability as yours?
 Yes No
14. Is any of your parents working?
 Yes No
15. Are they able to provide for the family shelter, clothing, food and educational needs?
 Yes No
16. In your family, who do you regard as being close/friendly to you?
 Brother
 Sister
 Mother
 Father
17. A part from your family members, do you have any other friend at home?
 Yes No
18. When did you join this school/institution? _____
19. Who brought you to this school/institution?
 Parents
 Relative
 Government
 Brother/sister
 Any other (specify) _____
20. What would you like to be in future after finishing school? _____

Section B: Attitude towards Education

Please indicate whether you Strongly Disagree (SD), Disagree (D), are Undecided (U), Agree (A), or Strongly Agree (SA) with each of the following statements. Circle one answer only for each statement.

Statement	SA	A	U	D	SD
I like being in school					
I am working very hard at school					
I do not have many friends in this school					
Teachers in this school love and care for me					
Education is not important to me and in my life					
My parents were happy to see me join the school					
My other siblings do not wish me well in school					
I am not capable of performing as any other learner					
People laugh at me in school					
I would like to continue with education beyond this school					
My parents are always afraid to see me in public					
Teachers encourage us to work very hard in school					

APPENDIX B: PARENT QUESTIONNAIRE

SECTION A: Background Information

1. Age _____
2. Gender Male Female
3. Marital status
 Married
 Single
 Widow/widower
 Divorce/separated
4. Education level
 None
 Primary
 Secondary
 Tertiary (excluding university)
 University
5. Employment status
 Not employed
 Self-employed
 Salaried employed
6. If employed (self or salaried), what is average income per month? _____
7. Given this income level plus your other sources of earnings, are you able to provide for your family needs including food, shelter, clothing and education?
 Yes No
8. How many children have you been blessed with? _____
9. How many of them have disabilities? _____
10. What is the gender of your disabled child/children? *(if more than one give the number per each gender)*
 Male Female
11. What is the kind of disability of your child/children?
 Visually disabled
 Hearing impaired
 Physically disabled
 Mentally disabled

12. What motivated you to take the child/children to school?

- I consider him/her as the same as any other child
- He/she is capable of performing like any other child
- Forced by my relatives
- Forced by the government
- Sponsorship from well-wishers
- Forced by civil society/NGOs
- Any other (specify) _____

13. When did your child join this institution? _____

Section B: Attitude towards Education of Learners with disabilities

Please indicate whether you Strongly Disagree (SD), Disagree (D), are Undecided (U), Agree (A), or Strongly Agree (SA) with each of the following statements. Circle one answer only for each statement.

Statement	SA	A	U	D	SD
It is the responsibility of the parents to take their child with disability to school					
Education of a child with disability prepares him/her for future independence					
Learners with disabilities can not perform well in school like other able children					
I am not happy to see my child with disability go to school					
Education has enabled my child develop good self-esteem					
Learners with disability can not cope with school work					
Other people in the community laugh at learners with disabilities attending school					
Educated persons with disability can secure good employment opportunity					
Educating a child with disability is unnecessary expense to a parent					
More schools and other learning institutions should be developed for learners with disability					

APPENDIX C: HEAD TEACHER QUESTIONNAIRE

Section A: Background Information

1. Name of the school/unit/integrated/home _____
2. Kind of institution
 - Special schools
 - Integrated programme/school
 - Special unit
 - Small home
3. Age _____
4. Gender Male Female
5. Marital status
 - Married
 - Single
 - Widow/widower
 - Divorce/separated
6. Education level
 - Tertiary (excluding university)
 - University
7. What are your professional qualifications?
 - P1
 - S1
 - Diploma teacher (general)
 - Bachelors of education
 - Masters degree
8. Teaching experience? (in years) _____
9. Do you have any professional training in special needs education?
 - Yes No
10. If yes, state your level of training in special needs education?
 - Certificate in special needs education
 - In-service training
 - Diploma in special needs
 - Bachelors Degree in special needs education
 - Post graduate Degree in special needs education
 - Any other (specify) _____

11. Kind of learners with disability in this institution?

- Visually disabled
- Hearing impaired
- Physically disabled
- Mentally disabled

12. Number of years of experience in such institutions? _____

13. How many learners do you have in this institution with such disabilities?

- Boys _____
- Girls _____

14. How many teachers in this institution are handling these learners? _____

15. Do the teachers cooperate well in handling these learners?

- Yes
- No

16. If No, why? _____

17. Do the parents of these learners cooperate well in the education of their children?

- Yes
- No

18. If No, why? _____

19. Do the learners cooperate well in their education?

- Yes
- No

20. If No, why? _____

21. What challenges do you face in handling learners with disabilities as compared to their able-bodied counterparts? _____
