

The copyright of this thesis rests with the University of Cape Town. No quotation from it or information derived from it is to be published without full acknowledgement of the source. The thesis is to be used for private study or non-commercial research purposes only.

UNIVERSITY OF CAPE TOWN

DEPARTMENT OF HEALTH AND REHABILITATION SCIENCES

**THE PERCEPTIONS OF RECREATION OFFICERS TOWARDS THE INCLUSION OF
VISUALLY IMPAIRED CHILDREN WITHIN THE CITY OF CAPE TOWN COME
AND PLAY PROGRAMME**

A minor dissertation submitted in partial fulfilment of the requirements for the
award of the Degree

of

MASTERS IN PHILOSOPHY: DISABILITY STUDIES

By

ARMAND BAM (BMXARM001)

SUPERVISOR: A/Prof R GALVAAN and A/Prof EM DUNCAN

February 2012

DECLARATION

I, Armand Bam, hereby declare that the work on which this thesis is based is my original work (except where acknowledgements indicate otherwise) and that neither the whole work nor any part of it has been, is being, or is to be submitted for another degree in this or any other university.

I empower the university to reproduce for the purpose of research either the whole or any portion of the contents in any manner whatsoever.

Signature:

Date: 13 February 2012

University of Cape Town

ACKNOWLEDGEMENTS

My sincerest appreciation and thanks to the following people and institutions for their support and guidance in making this study successful:

To my father and mother, Philip and Magdelene, without your support this thesis would not have materialised. I am eternally grateful for all your nurturing and support. Dad your encouragement and support will never be forgotten.

*The wise man is he who loves and reveres God. A man's merit lies in his knowledge and in his deeds, not in his color, faith, race, or descent. For remember, my friend, the **son of a shepard** who possesses knowledge is of greater worth to a nation than the heir to the throne, if he be ignorant. Knowledge is your true patent of nobility, no matter who your father or what your race may be. Khalil Gibran*

To Liezl, you have and will continue to be an inspiration to me. I thank you for your patience and endless support through this process. To my son Michael-Daniel may you oneday embrace your patent of nobility. You are forever my special boy.

To A/Prof Roshan Galvaan, I thank you for your guidance on this academic journey in the most sincere and caring way. I take courage from you sharing your experiences on your academic journey.

To A/Prof Eve Duncan I am inspired by your dedication to your craft within the academic realm. I thank you for your constant encouragement.

The National Research Foundation (NRF) thank you for the financial support I received during my studies.

To The League of Friends of the Blind (LOFOB) I am grateful for the opportunity and support you have given me to pursue these studies.

ABSTRACT

More than half a million people within South Africa are visually impaired (Statistics South Africa [StatsSA], 2005). Despite the prevalence of visual impairment, research within the sport and recreational opportunities for visually impaired children remains scant. The emergence of the social model of disability (Oliver, 1996) in the 1970s introduced a new understanding of disability and thus visual impairment and its impacts can be further understood through this model. The model draws attention to the relationships between able-bodied and persons with disabilities which generally result in the exclusion and disadvantaging of persons with disabilities (Barnes, 1998). The City of Cape Town Sport, Recreation and Amenities Department (COCT SRA) has drafted its own policy document on sport and recreation in order to align with national policy to guide efficient recreational service delivery. The COCT SRA should play a role in the development of all children within the communities it serves. The implementers of the recreational services thus play a vital role in ensuring efficient service delivery to all. The aim of the study was to explore the perceptions of recreation officers' regarding their contribution to enabling the inclusion of visually impaired children in the Come and Play Programme. Furthermore to illuminate potential barriers and facilitators to the inclusion of visually impaired children in order to facilitate policy implementation. The research was conducted using qualitative methodology and descriptive, thematic analysis of data gathered through document analysis and two semi-structured interviews with five recreation officers who were purposively sampled within the six districts of the COCT SRA. The findings yielded one central theme: *Revealing Invisibility*. This theme encapsulates two categories that of 'Othering' in which the participants shifted the responsibility for inclusion to external agencies and 'Imagined Inclusion' highlighting the tacit imaginations held by the recreation officers about promoting inclusion. Recommendations made relate to facilitating opportunities for disability conscientizing within the COCT SRA, the finalization of the policy on sport and recreation and the need for higher level involvement of recreation officers in the planning stages of Come and Play Programmes. Future research is recommended to focus on the effects of early childhood participation of children with disabilities in community recreation programmes and their activity levels as adolescents or adults.

DEFINITION OF TERMS

Barriers to inclusion: obstacles preventing one from achieving what you have set out to do (Oliver, 1996)

Blind: total loss of eye-sight (DPSA, 2000)

Disability: the social disadvantage or discrimination related to an impairment (Stone, 1999)

Impairment: an individual's condition that is either physical, sensory, intellectual or behavioural (Stone, 1999)

Low vision: moderate and severe visual impairment as defined by International Classification of Diseases – 10 (World Health Organisation - WHO, 2011)

Play: any physical activity that is fun and participatory, it is often unstructured and free of adult direction (United Nations - UN, 2003)

Recreation: more organized than play and generally entails physically active leisure activities (United Nations - UN, 2003).

Sport: more organized than recreation and involves rules or customs and sometimes competition (United Nations - UN, 2003).

Visual impairment: low vision taken together with blindness (World Health Organisation - WHO, 2011).

ACRONYMS AND ABBREVIATIONS

| | |
|-----------------|--|
| COCT | City of Cape Town |
| COCT SRA | City of Cape Town Sport, Recreation and Amenities Department |
| DOH | The National Department of Health |
| DPSA | Disabled People South Africa |
| INDS | Integrated National Disability Strategy: White Paper |
| OSDP | Office of the Status of Disabled Persons |
| PDR | Prescribed Development Plans |
| RO | Recreation officer |
| SRSA | The National Department of Sport and Recreation South Africa |
| UN | United Nations |
| UNCRPD | United Nations Convention on the Rights of Persons with Disabilities |
| UNIATF | United Nations Inter-Agency Task Force |

TABLE OF CONTENTS

| | |
|---|------|
| Plagiarism Declaration..... | ii |
| Acknowledgements..... | iv |
| Abstract..... | iv |
| Definition of Terms..... | vi |
| Acronyms and Abbreviations..... | vii |
| Table of Contents..... | viii |
| Chapter One..... | 1 |
| Contextualizing the study..... | 1 |
| 1.1 Introduction..... | 1 |
| 1.1.1 Disability in South Africa..... | 3 |
| 1.1.2 Visually impaired children and the right to participation in sport and recreation.... | 4 |
| 1.2 Background..... | 7 |
| 1.2.1 Recreation programme facilitators..... | 8 |
| 1.2.2 The Come and Play Programme..... | 9 |
| 1.3 Research Problem..... | 9 |
| 1.4 Research Question..... | 10 |
| 1.5 Research Aim..... | 10 |
| 1.6 Research Purpose..... | 10 |
| 1.7 Research Objectives..... | 10 |
| 1.8 Research Significance..... | 10 |
| 1.9 Structure of Dissertation..... | 11 |

| | |
|---|----|
| Chapter Two..... | 12 |
| Literature Review..... | 12 |
| 2.1 Introduction..... | 12 |
| 2.2 Theoretically situating disability..... | 12 |
| 2.2.1 The individual and social models of disability..... | 13 |
| for visually impaired persons within community based programmes. | |
| 2.2.2 Disability – the South African connection..... | 14 |
| 2.3 Disability exclusion as a social phenomenon..... | 15 |
| 2.4 Promoting access for all..... | 16 |
| 2.5 Visual impairment and barriers to inclusion in sport..... | 17 |
| 2.6 Trained implementers..... | 20 |
| 2.7 Benefits of participation in sport and recreation..... | 21 |
| 2.8 Sport, social cohesion and attitudes towards persons with disabilities..... | 22 |
| 2.9 Summary..... | 24 |
| Chapter 3..... | 25 |
| Methodology..... | 25 |
| 3.1 Introduction..... | 25 |
| 3.2 Research design..... | 25 |
| 3.3 Gaining access..... | 26 |
| 3.4 Population and sampling..... | 27 |
| 3.5 Sample size..... | 28 |
| 3.6 Data collection..... | 28 |
| 3.6.1 Semi-structured interview..... | 28 |
| 3.6.2 Document study as data..... | 30 |

| | |
|--|----|
| 3.7 Data analysis..... | 30 |
| 3.7.1 Document analysis..... | 32 |
| 3.8 Trustworthiness..... | 32 |
| 3.8.1 Credibility..... | 32 |
| 3.8.2 Transferability..... | 33 |
| 3.8.1 Dependability..... | 33 |
| 3.8.2 Confirmability..... | 33 |
| 3.9 Ethics..... | 33 |
| 3.9.1 Procedural ethics..... | 34 |
| 3.9.2 Ethics in practice..... | 34 |
| 3.9.2.1 Informed consent..... | 34 |
| 3.9.2.2 Autonomy..... | 35 |
| 3.9.2.3 Justice..... | 35 |
| 3.9.2.4 Beneficence..... | 35 |
| 3.10 Summary..... | 36 |
| | |
| Chapter Four..... | 37 |
| Findings..... | 37 |
| 4.1 Introduction..... | 37 |
| 4.2 Category One: Othering..... | 38 |
| 4.2.1 Structural positioning..... | 38 |
| 4.2.2 Attitudinal positioning..... | 39 |
| 4.2.3 Personal barriers..... | 40 |
| 4.2.4 Structural barriers..... | 41 |
| 4.3 Category Two: Imagining Inclusion..... | 43 |
| 4.3.1 Congruency..... | 43 |
| 4.3.2 Control..... | 45 |
| 4.3.3 Communication..... | 47 |

| | |
|--|----|
| 4.4 Theme: Revealing invisibility..... | 49 |
| 4.5 Conclusion..... | 52 |
| | |
| Chapter Five..... | 54 |
| Discussion..... | 54 |
| | |
| 5.1 Introduction..... | 54 |
| 5.2 Raising disability consciousness through transformative learning..... | 54 |
| 5.2.1 Reflection as a tool for learning..... | 54 |
| 5.2.2 Making meaning of inclusion | 56 |
| 5.2.3 Becoming agents of own learning..... | 57 |
| 5.2.4 The dynamic between reflection, making meaning and becoming agents of own learning..... | 58 |
| 5.3 Conclusion..... | 58 |
| | |
| Chapter Six..... | 60 |
| | |
| Conclusion and Recommendations..... | 60 |
| | |
| 6.1 Introduction..... | 60 |
| 6.2 Conclusions..... | 60 |
| 6.3 Limitations of the study..... | 61 |
| 6.3.1 Scope of the study..... | 61 |
| 6.3.2 Sampling and sample size..... | 61 |
| 6.3.3 Data collection strategy..... | 62 |

| | |
|---|----|
| 6.4 Recommendations..... | 62 |
| 6.4.1 Recommendations regarding policy on sport and recreation..... | 62 |
| 6.4.2 Recommendations for the Come and Play Programme..... | 62 |
| 6.4.1 Recommendations for the recreation officers..... | 63 |
| 6.4.1 Recommendations for future research..... | 64 |
| 6.5 Conclusion..... | 64 |
| References..... | 65 |
| Appendices..... | 79 |
| Appendix 1: COCT SRA Districts..... | 79 |
| Appendix 2: E-mail correspondence with the Director COCT SRA..... | 80 |
| Appendix 3: E-mail to participant..... | 81 |
| Appendix 4: Semi-structure interview..... | 84 |
| Appendix 5: Mind map..... | 85 |
| Appendix 6: Audit trail..... | 86 |
| Appendix 7: Informed consent..... | 89 |

Chapter One

Contextualizing the study

This chapter provides an introduction to perspectives on visual impairment¹ describing it within the social model of disability (Oliver, 1996). It also defines sport and recreation for people with disabilities within a South African legislative context together with discussing the delivery of inclusive sport related services by National and Local Government structures. The chapter argues that research into the inclusion of visually impaired persons and children in particular in sport is under represented in the South African literature and that further exploration into the challenges of policy implementation is indicated. The background to the study is explained followed by the research problem, question, aim, purpose and objectives. Lastly the significance and structure of the dissertation is presented.

1.1 Introduction

Visual impairment is defined as having a visual acuity of 6/18-6/60 or below (Department of Health [DOH], 2002). Visual impairment remains the most prevalent disability² within South Africa recorded at 25.6% of the total disabled population in Census 2001 (StatsSA, 2005). This figure was previously recorded at close to 46% of the disabled population in 1996 (StatsSA, 2005). The radical reduction was ascribed to the change in terminology used between the two recording periods (StatsSA, 2005). The South African Department of Health National Guideline on the Prevention of Blindness estimated for planning purposes the prevalence of childhood blindness to be 0.47 per 1000 (DOH, 2002). Despite this prevalence, research into areas of visual impairment remains limited. Inclusion into the general category of disability is useful at times for promoting the interests of disabled citizens, but has obscured the essential differences and needs of visually impaired persons when being analyzed (Rowland, 2008).

¹ Visually impaired/ impairment was the preferred terminology making direct reference to the actual sensory condition rather than the imposing discrimination that could possibly result from the impairment within society.

² Census 2001, recorded 577 000 persons with visual impairment

Disabled People South Africa (DPSA) considers visual impairment as part of a broader cluster of disabilities that includes physical disability, hearing disability, mental disability, intellectual disability, psychiatric disability, multiple disabilities, epilepsy and albinism (Disabled People South Africa [DPSA], 2000).

The disabled community is that community that shares the same kinds of problems with access and opportunity that is more commonly found among those people's who have physical, cognitive, sensory or mental impairments. The primary purpose for bringing this group of citizens into a common block is to gain for this group of citizens that which is earned by all groups organized for the purpose of collective bargaining (DPSA, 2000: 3).

As visual impairment falls within this cluster of disabilities the explanatory models addressing disability theories and politics on a whole have a direct impact on those persons who are visually impaired. Therefore these aspects are introduced below.

With the emergence of the social model of disability (Oliver, 1996) in the 1970s the understanding of disability and disability research has advanced. The social model of disability is concerned with the promotion of the equalisation of rights and opportunities for persons with disabilities (Hurst, 1999). It primarily originated out of the social disability movement within Britain that had reformulated disability as a social issue. The resultant international disability movement and the academic allies within the realm of disability studies paved the way for addressing issues of oppression and segregation in all spheres of life in developed countries such as Britain and United States of America (Thomas, 2004; Whalley Hammell, 2006). Included within this movement and the forerunners of such change were visually impaired persons most notably Colin Barnes (Oliver, 1996).

The social model of disability proposed that all problems related to disability can be resolved in a society that is just (Barnes, 1998). Both political and socially motivated, one of the values of the model is its natural origins. That is, from the people who have lived experiences of marginalisation and exclusion (Barnes, 1998; Whalley Hammell, 2006). At the core of the social model was the rejection of the individual/ medical model that located the 'dilemma' of disability within the individual and viewed the cause of the exclusion as originating from the functional limitations or psychological losses assumed to arise from the disability (Oliver, 1996).

Disability has since the early 1970's been positioned in a way that explores the social relationships that connects those that have been labelled as impaired and those who are viewed as 'normal' (Thomas, 2004). The relationships between able-bodied and persons with disabilities have generally resulted in the exclusion and disadvantaging of persons with disabilities. It is important to note that disability and impairment are inherently linked and engaging. Impairment refers to the individual's condition be that physical, sensory, intellectual or behavioural while disability in comparison refers to the discrimination and disadvantage that occurs as a result of impairment within in society (Stone, 1999). The actual impairment generates a platform for bodies to be perceived as socially abnormal and thus facilitates the basis of any social relationship shaping the level of disablism and exclusion that will persist (French, 1993; Stone, 1999; Thomas, 2004).

1.1.1 Disability in South Africa

Disability has historically been situated as a health and welfare issue and addressed from this perspective in South Africa (Howell, Chalklen and Alberts, 2006). The disability-rights movement in South Africa has however long advocated that disability issues be addressed and integrated into all aspects of planning and service delivery in all ministries of government (Matsebula, Schneider and Watermeyer, 2006). This positioning has resulted in disability being accepted as a human rights and development issue within South Africa. As disability advocacy gained momentum after the end of apartheid the need for higher level intervention was required. With this recognition, the Office of the Status of Disabled Persons (OSDP) was launched in May 1997 to ensure that government considered disability as a cross cutting agenda for social change. The office within the Presidency sought to create further awareness of the sensitivities related to disability issues and to ensure that its disability inclusion programmes were accessible to all (Howell, Chalklen & Alberts, 2006). As an institutional body the OSDP was expected to bring about change for persons with disabilities³ at the most basic level from the ground up. This has prompted the disability sector to seek a greater impact from all levels including provincial and local government (Howell, Chalklen & Alberts, 2006).

³ With South Africa becoming a signatory to the United Nations Convention on the Rights of Persons with Disabilities in 2007 it has generally been accepted to refer to all persons with impairments or disabled persons as persons with disabilities.

The elevation of the status of disabled people within society through the OSDP was meant to be further influenced through the implementation of an Integrated National Disability Strategy. The White Paper on an Integrated National Disability Strategy (INDS) was brought into effect in November 1997 with it being signed by the then Deputy President Mr Thabo Mbeki. The INDS cemented the centrality of disability as a measure of the accessibility and the equality of participation and opportunities for all persons with disabilities in South Africa. The White Paper called for the promotion of disability rights and the participation of all persons with disabilities in all spheres of life. The INDS also sought that research should not only be of academic benefit but influence the way in which society accepts persons with disabilities (Office of the Deputy President, 1997).

Special laws and policies promoting full participation and integration of children with disabilities have been in existence for decades in developed countries and advocated for by international organizations in order to improve and correct the imbalance in social relationships that exist (Pivik, McComas and Laflamme, 2002). This effort to promote participation and integration in South Africa is contained within the Disability Rights Charter of South Africa (Lawyers for Human Rights [LHR], 1992) which confirms a call for further rights for children with disabilities⁴. Article 11. of the charter (LHR, 1992) calls for disabled children to have the right to be cared for properly, protected from abuse and be afforded dignity and respect and equal opportunities to reach their full potential.

1.1.2 Visually impaired children and the right to participation in sport and recreation

The United Nations acknowledges the importance of sport and recreation in the lives of persons with disabilities through the United Nations Convention on the Rights of Persons with Disabilities - UNCRPD (United Nations [UN], 2006). Access to sport and recreation for persons with disabilities, under Article 30.5, is emphasized as a fundamental human right (UN, 2006). As a signatory to the UNCRPD, South Africa holds the responsibility for ensuring that persons with disabilities are able to participate on an equal basis with others in recreational, leisure and sporting

⁴ Children's rights in South Africa are enshrined in The Constitution of the Republic of South Africa; The United Nations Convention on the Rights of a Child; The World Summit on Children; The South African Children's Rights Charter and The African Charter on the Rights of an African Child

activities. This responsibility extends to children with disabilities (UN, 2006). The Convention on the Rights of the Child (UN, 1989) under Article 31 highlights the state's responsibilities towards children participating in recreational and leisure time activities⁵. The two documents provide an international legislative backdrop for the inclusion of children with disabilities into all sports and recreation activities.

The South African government through the National Department of Sport and Recreation - SRSA has stated its mission to improve the quality of life of all South Africans including children and persons with disabilities (SRSA, 2011). It strives to foster social cohesion and nation building through maximizing access and development at all levels of participation in sport and recreation. SRSA acknowledges its constitutional obligation (SRSA, 2011) to make sport available to citizens. SRSA further recognises that this responsibility requires national, provincial and local public service competence (Constitution of the Republic of South Africa, 1996). Added to this is the acknowledgement that the Intergovernmental Act requires that the three spheres of Government must work in a coordinated fashion to ensure that appropriate planning and delivery of services occurs in an integrated manner. Local governments thus play an important role in the implementation of the national policies (SRSA, 2011).

Drawing from the existing national policies, the White Paper on Sport and Recreation is the official policy that articulates the South African Government's approach with respect to sport and recreation within the Republic of South Africa (SRSA, 2011). The White Paper has undergone changes since its first release in 1996 culminating in the third version presented to Parliament and the Public in 2011 by the Minister of Sport and Recreation, Mr. Fikile Mbalula. The document illustrates the vision and impacts Government expects and provides directives to service providers to ensure the promotion and provision of sport and recreation in South Africa.

This revised document echoed the Government's commitment to eradicating inequalities of the past and to extend and develop opportunities for both recreational and sporting purposes with a

⁵ The UNCRPD recognizes that children with disabilities should have full enjoyment of all human rights and fundamental freedoms on an equal basis with other children and recalls all obligations to that end undertaken by State Parties to the Convention on the Right of the Child.

focus on vulnerable populations. The current Minister of Sport and Recreation highlighted the mandate of the SRSA in his foreword.

We also need to carry out our mandate in a manner that ensures that basic human rights are safeguarded and adhered to at all times. However, transformation remains a non-negotiable. (Mbalula, 2011: 9)

The previous Minister of Sport and Recreation, Mr Makhenkesi Stofile included in his foreword of the SRASA Strategic Plan 2008-2012 the following statement indicating the intentions of the South African Government and its commitment to ensuring accessible sport and recreation opportunities for all.

We continue to strive to develop and implement developmental programmes according to the needs of the communities we serve. We further strive to achieve our mandate, that of achieving the objectives of nation building through racial and cultural tolerance. Our focus will remain amongst others, to create a platform of excellence with a specific concentration on women, the youth and disabled (Stofile, 2008: 4).

Gaining an understanding of the barriers and facilitators affecting the levels of participation in sport and recreation of persons with disabilities could unlock important information to assist with developing interventions to better promote involvement and success of disabled people at a community level (Rimmer, et al., 2004; Ayvazoglu, Hyung-Kyoung and Kozug, 2006). Within a South African context improving the understanding of the barriers to the inclusion of visually impaired persons can be achieved through the further development of disability studies and research. The exploration of the social structures, environmental barriers and power relationships is therefore critical if the emancipation of disabled people in all spheres of life is to bear fruit in South Africa. It is imperative that this research agenda into disability draws from the local experiences of disability and expands in order to facilitate opportunities for a society free of oppression and marginalisation (Stone, 1999; Priestley, 1999; Lorenzo, ka Toni and Priestley, 2006).

There remains limited research on why it is that persons with disabilities do not make regular physical activity part of their lifestyles despite the evidence that is available showing the benefits of regular exercise (Ayvazoglu, Hyung-Kyoung and Kozug, 2006; Henderson, 2009). Children

with visual impairments do learn in different ways to their sighted peers but this is primarily due to their limited ability to utilize their vision as a source of information (Gray, 2005a). Irrespective of the inconsistent manner of assimilating information, children with visual impairments have shown they have the same capacity to develop motor skills and fitness and reap the benefits of being as active as sighted children. The benefits of physical activity generally include good physical health, optimal growth, improved comfort and success in movement and psychological health (Lieberman, 2002; Lieberman, Houston-Wilson and Kozub, 2002; Lieberman and MacVicar, 2003; Lieberman and Wilson, 2005; O'Connell, Lieberman and Petersen, 2006; Burns, Paterson and Watson, 2009; Trost and Loprinzi, 2008; Macbeth, 2009).

In order to become fit and healthy adults, children need to be trained in physical fitness, health, and wellness and be involved in sports and recreational activities. The general expectations held of visually impaired children by society also tends to be diminished as a result of their impairment and accompanied by inadequate training which leads to developmental delays, lower levels of fitness and lower self-concepts (Lieberman and Wilson, 2005; Shapiro et al., 2005).

1.2 Background to the study

As the South African National, Provincial and Local government continues to strive towards building strong communities, primary access to sporting opportunities remains mandated at the local municipal level (City of Cape Town Sport, Recreation and Amenities Department-COCT SRAD, 2008). The current study is located in Cape Town where the COCT SRA is the largest provider of community recreation programmes and facilities within the municipality it serves. Acknowledging the national policy on sport and recreation, the COCT SRA has drafted its own policy document on sport and recreation for the municipality in order to align with national policy intentions and guide efficient recreational service delivery.

Through the draft policy on sport and recreation, the COCT SRA assumes three roles in utilising sport and recreation to achieve the objectives of social inclusion. Firstly it assumes a leadership role through addressing and formulating policy and catering to the needs of historically disadvantaged communities, secondly it assumes a facilitative role for creating suitable environments for the development of sport and recreation and finally provides facilities and programmes to meet its constitutional obligation to all citizens in including people with disabilities

(COCT SRA, 2008). Through defining the roles and stated objectives, the COCT SRA recognizes that inherently children's play is an essential component in sports and recreation development (COCT SRA, 2008).

Play is critical for the development of visually impaired children and their social participation (Stuart, Lieberman and Hand, 2006). Engaging in physical activity and recreation provides increased opportunities for socialization and self-determination holding further benefits for visually impaired children. In situations where visually impaired children do not participate they tend to display anti-social behaviours and are generally more frustrated and quick to anger (Shapiro et al., 2005; Stuart, Lieberman, and Hand, 2006; Gray, 2005a; Holbrook et al., 2009). Significantly access to physical education, recreation and sporting programmes for visually impaired children together with their overall physical fitness levels are directly linked to the ability and capacity of programme facilitators (Rimmer, et al., 2004; Lieberman and Wilson, 2005; Ayvazoglu, Hyung-Kyoung, and Kozug, 2006).

1.2.1 Recreation programme facilitators

A key aspect in recreational programmes is personnel. Programme managers⁶ for sports, facilities and sports organisations are important for ensuring physical activity participation. These managers act as catalysts within communities, creating much needed opportunities for participation through sport and recreation for children and adults within the broader society (Henderson, 2009). Having access to suitable recreation facilities and programmes in local communities is also important in ensuring appropriate physical development for children and adolescents (Tucker, et al., 2009). Within Cape Town, sports and recreation programmes are offered by recreation officers. With the large body of knowledge explaining the benefits of physical activity (Lieberman and Wilson, 2005) and the policies (UN, 2003) on sport (SRSA, 2011) that advocate for the inclusion of all children in community sports programmes, the ROs are the key personnel that could ensure that benefits are extracted while fulfilling the policy obligations as determined by the COCT SRA. Very little is known about the perspectives of ROs on disability inclusion in sport and recreation and the needs of children with disabilities and visual impairment in particular.

⁶ Recreation officers perform similar roles to programme managers identified in literature.

1.2.2 The Come and Play Programme

The Come and Play Programme is a community based programme implemented within all six of the districts serviced by the City of Cape Town Municipality- COCT. Come and Play has been in existence for a number of years with no accurate account of its origins recorded. The programme is most active during school vacations and is geared towards ensuring children are kept off the streets and engaged in healthy play behaviours. The programme includes recreational activities such as face painting, jumping castles and other games (COCT, 2011) and should be readily available and accessible to all children (including visually impaired) within their communities since this is the mandate of the local municipality (COCT, 2008) and can be viewed as a valuable outreach programme for the department for achieving the inclusion objectives stated within the draft policy on sport and recreation (COCT, 2008). The programme relies on recreation officers (RO) as implementers to fulfil the policy objectives and thus they play a critical role in ensuring the inclusion of all children within the communities represented in each of their service districts.

The six districts of the COCT municipality are highlighted in Appendix 1. The Come and Play programme is led by a RO within each district. It is also dependent on staff as well as volunteers for implementation in the respective districts. Understanding the perspectives of RO about policy objectives will be critical in developing ways to further ensure inclusion into community programmes.

The next section of this chapter details the research problem and reason for conducting this research within the sport and recreation department of the COCT Municipality.

1.3 Research problem

There is very little known about the knowledge and experience that recreation officers have with regards to working with visually impaired persons to promote inclusion in recreational programmes. As key implementers of the draft policy on sport and recreation for the City of Cape Town this lack of information presents a potential barrier to disability inclusion in recreation programmes.

1.4 Research question

What are the recreation officers' perceptions of their contribution to facilitating the inclusion of blind and visually impaired children in the Come and Play Programme?

1.5 Research aim

The aim of the study is to explore the recreation officers' perceptions of their contribution to enabling the inclusion of visually impaired children in the Come and Play Programme.

1.6 Research purpose

To illuminate potential barriers and facilitators to the inclusion of visually impaired children in order to facilitate local government sport and recreation policy implementation.

1.7 Research objectives

The following three objectives were identified:

1. To describe what recreation officers view as their role in facilitating the inclusion of visually impaired children within the Come and Play Programme.
2. To identify what recreation officers perceive the barriers are that prevent visually impaired and blind children from participating in the Come and Play Programme.
3. To identify strategies that recreation officers think could facilitate the integration of visually impaired children.

1.8 Research significance

The study seeks to contribute to the growing body of knowledge about disabled sport and recreation at community level within the local government sector. The research is undertaken to inform the COCT SRA of the barriers and opportunities that currently exist that could facilitate equitable inclusion of visually impaired children in the Come and Play Programme as perceived by the recreation officers. The research could further reveal the state of opportunities for inclusion of visually impaired children within community programmes. The research will also inform the recreation officers of their preparedness to include visually impaired children in their programmes.

As they are the primary implementers of programmes it is assumed they will have specialised knowledge of how Come and Play Programmes operate. Few allies and advocates for inclusion of visually impaired persons exist and thus the research is critical for expanding knowledge and informing perceptions about visually impaired children and their participation opportunities in sport and recreation. The findings could inform future strategies for improving inclusionary efforts.

1.9 Structure of the dissertation

The dissertation resumes with Chapter Two in which a review of literature discusses the levels of participation of visually impaired children in sport and recreation activities, inclusionary and exclusionary mechanisms that influence the barriers and facilitators to physical activity for visually impaired persons within community based programmes as well as the impact that reflective processes can have on improving opportunities for participation. The third chapter describes the methodology used to gather data in order to interrogate the research question and achieve the study aims. Chapter Four presents the findings of the study done through a thematic analysis of the data gathered. Using literature to substantiate the findings Chapter Five focuses on the dynamics that may account for the theme and categories identified. Chapter Six discusses the main conclusions and recommendations of the research.

Chapter 2

Literature Review

2.1 Introduction

This review offers a focused description of the disability context in which the current study is positioned by addressing social inclusion, sport⁷ for visually impaired children and their barriers to participation in recreation programmes.

2.2 Theoretically situating disability

Definitions of disability have evolved quite significantly over the last four decades (Oliver, 1996). The significance of these definitions matter since it is agreed that the manner in which a person with a disability defines themselves determines how they address their challenges and influences how they accept or reject help from others (Finkelstein, 1993). It is suggested that when disability is viewed as a personal tragedy, the disabled person(s) may assume themselves to be victims and expect to be treated as such. Alternatively if disability is viewed as socially constructed through oppression then they would see themselves as experiencing the outcomes of an uncaring society and may advocate for equal opportunities and social inclusion (Oliver, 1993). Attempts to define disability can be difficult because there is an inherent tension in determining internationally shared meanings for disability. There is also tension within the power relations between those who contest the right to define disability. This power has historically been held by professionals but ultimately disabled people believe they should be the ones who define disability for themselves (Stone, 1999; Finkelstein, 1993).

⁷ All forms of physical activity that contributes to physical fitness, mental well-being and social interaction. These include play, recreation, organized, casual or competitive sport; and indigenous sports or games (UN, 2003)

2.2.1 The individual and social models of disability

The individual model has at its core two main points, firstly the location of the ‘problem’ of disability within the individual and secondly the view that the causes of the problems stem from the functional limitations or psychological losses that are assumed to arise from the disability (Oliver, 1996). In contrast to the individual model, the social model locates the problem within society and society’s failure to meet the needs of people with impairments (Stone, 1999). The articulation of the social model by persons with disabilities voiced their rejection of the fundamentals of the individual model (Oliver, 1996).

Although disability is a world-wide phenomenon, the development of disability as a social issue within developed nations has been ahead of developing nations where disability activism is still unfolding (Shakespeare, 1998). This is illustrated in the significant shift in the interpretation of disability in the 1970’s (Finkelstein, 1993) credited to the mobilization of people with physical and sensory disabilities within Britain (Barnes, 2003). The early pioneers in this shifting interpretation moved their thoughts away from their own individual characteristics and impairments and focussed on the nature and workings of society (Finkelstein, 1993). The interpretation of disability eventually led to the development of the social model of disability which in its original form was meant to act as a tool to explore disability in different ways and under various social conditions (Oliver, 1996).

According to Barnes (2003), Britain’s Union of Physically Impaired Against Segregation in their manifesto entitled *The Fundamental Principles of Disability* stated that society disabled physically impaired people. This manifesto explained that disability was imposed through the unnecessary isolation and exclusion of persons with impairments from full participation in society and that this exclusion or isolation led to their oppression. This way of thinking was consistent with the emergence of the social model of disability which brought about a fundamental shift in the way of thinking about disability labelling the problem of disability as being socially constructed. Oliver (1996) maintains that disability models and especially the social model cannot explain disability fully because it is not a social theory of disability. Each model should be used to its fullest and not abandoned when its inadequacies as exposed as a result of misuse.

The social model is not without its criticism, as it does not connect with the experience of impairment. French (1993) notes her personal experiences as a visually impaired person whereby her inability to recognise people and not being able to read their body language is something that cannot be corrected by society. Thus social restrictions result due to the effects of her impairment. Morris (1991 cited in French, 1993) expresses concern in that any denial of the personal experience of disability is tantamount to the collusion in their own oppression.

2.2.2 Disability - the South African connection

A large part of the contribution of South Africa to the social interpretation of disability has gone unrecorded (Finkelstein, 2005). It has been suggested that there is a much more salient connection between South Africa's experience of oppression under apartheid and the emergence of the social model of disability (Finkelstein, 2005). Finkelstein⁸ found himself to be a vehicle for the South African experience of oppression entering the ideological disability struggle within the UK. Thus there was a South African influence on the social interpretation of disability which emerged in the UK. Finkelstein maintained that the recognition and acknowledgement of this influence has not been adequately recognised in the South African literature (Finkelstein, 2005). The influence of oppression in South Africa found its way into the shaping of a new way of viewing disability. The influences of oppression continued to linger but the progressive view on disability found its way back into South Africa, in turn influencing the developments of the South African disability rights movement.

South Africa's disability rights movement made significant progress within its own right during the 1980's gaining momentum with the formation of Disabled People South Africa- DPSA. Through the evolution of the organisation and the transition into a new South Africa, disability inclusion was placed on the social transformation agenda. Most significantly the development of the Disability Rights Charter of South Africa came to fruition locating disability within a human rights framework. This human rights and development approach to disability recognized the fundamental needs of all and the constitutional right to have the various needs of people with disabilities met (Howell, Chalklen and Alberts, 2006).

⁸ Finkelstein was released from prison for working with the underground ANC and SACP and banned for five years and then moved to the UK in 1968 (Finkelstein, 2005)

2.3 Disability exclusion as a social phenomenon

'there exists a commonality between everyone so evident that we are both particular and universal being both the same and different while being human beings.' Sack (2000 cited in Grove and Zwi, 2006)

Persons with disabilities are generally excluded from the mainstream of social activities (Oliver, 1996). Social exclusion is a relatively new concept with its origins in France⁹ in the 1970's (Trauth and Hawcroft, 2006; Millar, 2007; Taket et al., 2009). Social exclusion can have various definitions, take various forms affecting different levels of participation in society and be manipulated by different exclusionary relationships (Abrams, Hogg, Marques, 2005; Taket et al., 2009). Room (1995 cited in Millar, 2007) proposed that five key factors are central to the definition of social exclusion: it is multidimensional requiring a range of indicators; it is dynamic; it requires an analysis of the process and factors that trigger entry or exit; it is relational making reference to social participation, lack of social integration and lack of power and finally it results in a catastrophic separation from society as a result of long term separation.

Social inclusion within society is never static and varies over time and its trajectory is dependent on various factors such as social prejudice and public policies (Trauth & Howcroft, 2006). With regards to disability as a multi-dimensional concept the dynamic interaction between structural factors affecting participation further contributes towards an individual's disability. Through the social model of disability, issues such as the environment, transportation and architectural design have been labelled as barriers and social dividers (Oliver, 1996; Stone 1999; Owens 2009). Pertinent to this study is the extent to which people with disabilities are afforded opportunities for social inclusion in and through sport and recreation.

Historically access to public open spaces has always been limited to persons with disabilities who were interested in engaging in social and recreational activities (DePauw and Gavron, 1995). People who perceive they fall outside of the societal norms as a result of their gender, race, ethnicity, disability or illness may feel alienated from the wider community (Rillota & Nettlebeck, 2007). Added to this is that participation within communities is affected by aspects such as

⁹ People who were administratively excluded by the state, it remains entrenched in the economic, political and cultural/ social functioning's of modern day society

infrastructure and the suitability of community facilities. The lack of infrastructure and facilities might affect persons with disabilities and result in some form of exclusion, but may also affect other members of their communities (Taket, et al., 2009).

2.4 Promoting access for all

In order to achieve inclusion, barriers need to be broken down and opportunities created for able-bodied persons to interact more regularly with persons with disabilities (Oliver, 1996). Access has been considered to be the link between structural and social variables and its importance manifests through its inclusion in human rights legislation and policies (Millar, 2007). Finkelstein (1993) agrees that the value of access is an important determinant in addressing exclusion and the need for justice for persons with disabilities. Access is critical in ensuring persons with disabilities material needs are met, having cultural respect and political participation and enjoying socio-spatial inclusion (Finkelstein, 1993). For example, to ensure inclusion of disabled children in recreation programmes the environment needs to be accessible through the other senses of the visually impaired child with minimal modification to the actual activity. The visually impaired child also needs to be presented with as many opportunities as possible in a formal and informal manner in order to develop their social skills through interaction (Gray, 2005b).

Exclusion may in some cases be attributed to the limited attitudes of persons who have not been properly taught to value diversity, a lack of education about disability inclusion and the implementation of poorly designed programmes (Rillota & Nettlebeck, 2007). Consequently, participation in society remains a key requirement in order to achieve social inclusion and connectedness, but fully achieving this participation remains elusive for persons with disabilities (Millar, 2007). The success of accessible, inclusive programmes is also dependent on the reciprocating and respecting individual rights and is dependent on a common interest in activities. Respect and common interests create the greatest opportunity to ensure social acceptance, improved self image and positive perceptions of persons with disabilities ultimately creating a platform for unifying people within communities (Devine, 2004).

According to Oliver (1996) exclusion can only be disassembled through a complete reorganization of an existing system of implementation. Grenier (2010) believes that the shift towards true

inclusion requires a focus on highlighting possibilities that arise rather than continuing to be limited by the current means of operating.

2.5 Visual impairment and barriers to inclusion in sport

Levels of activity amongst South Africans are varied and are directly related to the opportunities that they may have control over. As an active nation participating in sport, recreation, play and leisure time activities it is important that persons with disabilities should not be excluded from these opportunities and apparent health benefits (Desmond & Boyce, 2006).

Inclusionary and exclusionary mechanisms that influence participation in sports programmes combine in order to form a complex constellation of factors that policy seeks to address. Even though democratic changes occur within governments, differences amongst social groups still exist which hinders inclusion into mainstream programmes (Elling and Claringbould, 2005). International policy and research has advanced to the point where the value of sport has been considered a tool for promoting inclusion through social action and the removal of inequalities and social disadvantage. Elling and Knoppers (2005) maintain that in order to achieve increased levels of participation in recreational activities across the population, government plays a key role in how it initiates any policy directives to ensure participation. Measures used to eradicate indicators of exclusion should address the process of exclusion if it is to promote inclusion (Elling and Knoppers, 2005). Within this legislative framework sport is considered as a site for social inclusion for persons with disabilities providing opportunities for the improvement of identities, the extension of social networks, reducing isolation and the improvement of social cohesion (UN, 2003; Bailey, 2005; Cortis, 2009). These benefits of inclusion into the mainstream will also hold benefits for disabled persons and their peers (Wong and Cumming, 2010).

South Africa has since 2007 been a signatory to the United Nations Convention on the Rights of Persons with Disabilities. Enshrined in this convention is the right to participate on an equal basis with others in recreational, sport and leisure activities. The signatories are required to promote participation to the full in mainstream activities and encourage the provision of appropriate instruction, training and resources as well as specifically ensuring that children are able to participate (UN, 2006).

As children grow up they move through different phases of life. Considering the various stages of life, visually impaired children who are inactive during their childhood and enter adolescence are more likely to experience diminished daily life and social activities due to their lack of physical activity and spend more time alone than their sighted peers (Kef and Dekovic, 2004). This tendency towards restricted social engagements also carries through to adulthood (Robinson and Lieberman, 2004; Stuart, Lieberman and Hand, 2006; Capella-McDonnell, 2007; Good, LaGrow and Alpas, 2008) and is attributable to limited physical activity and developmental delays that result from inactivity (Ayvazoglu, Hyung-Kyoung and Kozug, 2006; Wiskochil, et al., 2007). Promoting access and participation in sport is thus key. With the many social barriers that exist, it remains important to note that the actual impairment in itself does present as a barrier (French, 1993). The lack of sight inevitably restricts play and physical development causing delays in locomotion-related behaviour restricting opportunities to participate in other physical activities (Lieberman and Wilson, 2005). Although visually impaired children learn differently to their sighted peers this is attributed to the fact that they cannot effectively utilize their vision. Information drawn from other senses also has its limitations. Limited vision also restricts a child's ability to make sense of physical and bodily cues of others such as facial expressions and this too contributes negatively to facilitating and extending a child's social network (French 1993; Gray, 2005b).

Barriers are obstacles that ultimately hinder the achievement of one's goals. Social barriers tend to be more subtle and explained through the way people feel or behave (Oliver, 1996). Structural barriers are identified through the effect the environment, infrastructure, equipment, service provision policies and the relationships between these affect the quality of life of persons with disabilities (Owens, 2009). Although much research has been conducted on the constraints to participation in sport limited research is recorded on the constraints faced by children with disabilities (Burns and Graefe, 2007). Although there are many possible influences within the lives of visually impaired children that would stimulate their interest in participating in sport and recreation activities, gaining insight into the motivating factors would further assist the understanding of the barriers to inclusion and the development of opportunities for participation (Kef, Hox and Habekothe, 2000; Ayvazoglu, Hyung-Kyoung and Kozug, 2006; Wiskochil, et al., 2007).

Barriers to inclusion generate negative internal experiences for disabled people. People with visible impairments who have low self esteem and harbor feelings of stigmatization are less likely to participate in leisure activities (Devine, 2004). Studies on recreational practices and barriers for youths that are visually impaired found that there are fewer opportunities for visually impaired children in comparison to hearing and sighted children (Lieberman, 2002). The direct effect of fewer opportunities was poorer physical activity and diminished health and a greater need for fitness in order to complete their activities of daily living¹⁰ (Lieberman and MacVicar, 2003; Wiskochil, et al., 2007). The accessibility of physical education, recreation and sport programmes for visually impaired individuals is limited as a result of a number of identified barriers. These barriers vary and may include instructional limitations, community barriers, lack of opportunities and lowered expectations (Lieberman and Wilson, 2005). Macbeth (2009) researched the restrictions of activity that were experienced by partially sighted individuals accessing grassroots football opportunities. He maintained that even in cases where the effects of impairment within a specific sporting context are considered, one must not lose sight that disability can still result from the socially constructed restrictions.

With respect to norms and development the comparison between sighted and visually impaired children has drawn many criticisms related to inclusion and exclusion. Even though development occurs at similar rates visually impaired children have their own set of norms which deviate from developmental sequences already established (Gray, 2005a). Even with deviation in norms persons with disabilities and those without vary little with respect to their choice and preferences for recreational activities (Burns and Graefe, 2007).

With progress being made within the realm of disability sport, the pace at which barriers are eradicated is unhurried. Established authors on disability sport, DePauw and Gavron (1995) cited low participation by disabled people in sport activities as a result of 7 factors namely: lack of organized sport programs; the lack of informal early experiences; the lack of athletic role models; the lack of access to coaches and other training programmes; difficult economic conditions; the lack of accessible sports facilities and the lack of accessible transportation. In later studies Rimmer, et al. (2004) attempted to identify barriers and facilitators associated with inclusion in

¹⁰ ADL's refer to task such as mobility and personal care.

recreation programmes/ facilities among persons with disabilities in ten regions in the United States in 2001 and 2002. The results of the research culminated in the identification of a total of 178 barriers and 130 facilitators. Within these identified many of the earlier barriers identified by DePauw and Gavron (1995) remained. They identified 9 themes through the data collection that included (a) barriers and facilitators to the built and natural environment, (b) economic issues, (c) emotional and psychological barriers, (d) equipment barriers, (e) barriers related to the use and interpretation of guidelines, codes, regulations and laws, (f) information related barriers, (g) professional knowledge, education and training issues, (h) perceptions and attitudes of persons who are not disabled including professionals, (i) policies and procedures both at the facility and community level and the availability of resources. Burns and Graefe (2007) also identified barriers to inclusion similar to both DePauw and Gavron (1995) and Rimmer et al. (2004) and included transportation, programming problems and limited opportunities for skill development as barriers to participation.

Programme design and timing played a key role in how and when people participated in recreational programmes (Burns and Graefe, 2007). Physical accessibility should not be the only aspect to be considered when designing programmes. In cases where this did occur, it highlighted a lack of insight into the needs of persons with disabilities on the programme leaders part (Burns, Paterson and Watson, 2009). Further constraints to participation included the location of programmes, the availability of facilities, relevant skills held by programme leaders and attitudinal barriers (Burns and Graefe, 2007).

2.6 Trained implementers

Children with visual impairments in many instances remain confined to interacting with each other and in effect have limited opportunities to interact with children without disabilities (Lieberman, 2002). Where opportunities do become available for interaction it was a far more favorable experience when staff working in recreation outdoor programmes have disability specific knowledge and knew how to adapt programmes to meet the special needs associated with various impairments (Stuart, Lieberman and Hand, 2006). Knowledgeable and skilled staff members are more inclined to have more positive attitudes towards persons with disabilities and are willing to ensure inclusion (DePauw and Gavron, 1995). The training of new programme leaders continues to be an area for improvement within community recreation programmes. It is suggested that the

training should incorporate as a basic, the features that characterize visual impairment and the organization of safe playing environments that would stimulate the visually impaired child (Gray, 2005a; Stuart, Lieberman and Hand, 2006).

Implementers and programme leaders within physically inclusive settings have a major role to play in the development of visually impaired children. Most often the developmental delays experienced by these children result at times from the dispiriting approaches of the facilitators who restrict opportunities (Stuart, Lieberman and Hand, 2006). The internalised positive experiences related to physical and recreational activity for visually impaired children hinges largely on these facilitators and how ready they are to include these children. Research has shown that the positioning of facilitators towards inclusion and visually impaired children along with the barriers they perceive (whether real or imagined) further contributes to how positive the experience becomes for visually impaired children (Stevens-Ratchfors & Krause, 2004; Stuart, Lieberman and Hand, 2006).

2.7 Benefits of participation in sport and recreation programme

The physical benefits of regular exercise and the participation in recreational activities for visually impaired children are well documented to include both physical and psychological health benefits including reduced risk for heart disease, diabetes, high blood pressure, obesity, improved flexibility, strength and coordination (Lieberman, 2002; Lieberman & MacVicar, 2003; O'Connell, Lieberman and Petersen, 2006; Roemmich et al., 2006; Shapiro, et al., 2005; Stuart, Lieberman and Hand, 2006).

The more physically active the visually impaired person is the greater the benefits related to improving their quality of life. The opportunity to participate is linked to many factors and may come at a cost to families but increasing the families' awareness of the benefits would contribute to the continued engagement of such activities (Lieberman, 2002; Kantomaa, et al., 2007). With regards to supporting activities that rely on physical fitness it is critical that children make the choice and engage in regular physical activity from early on in life to promote optimal development and good health (Clark & McDonnell, 2008; Trost & Loprinzi, 2008). Early participation will not only facilitate better active lifestyles but will combat the negative health related comparisons with same aged and gendered sighted peers (Holbrook, et al., 2009).

2.8 Sport, social cohesion and attitudes towards persons with disabilities

In places where greater social cohesion exists participation in recreational activities is increased significantly (Cradock, et al., 2009). Devine (2004) considered settings where persons with and without disabilities participated in recreational activities together as inclusive and maintained that much of society's values and attitudes towards persons with disabilities are contained and expressed in sport and recreation related settings. A key aspect is the acceptance of persons with disabilities in these contexts and social acceptance should be based on a mutual and consenting understanding of equal status and position between those with and without disabilities (Devine, 2004).

Sporting activities are far reaching and impact communities in many ways. Even with this in mind opportunities for persons with disabilities are limited, resulting in self-consciousness, low levels of confidence and decreased participation (Bailey, 2005). Recreation contributes to expanding the presence and involvement of visually impaired individuals within their communities (Lieberman and MacVicar, 2003; Lieberman and Wilson, 2005). An environment promoting social acceptance is more conducive for creating a climate of inclusion and sport plays an essential part of celebrating diversity and improving social cohesion within communities. Sport within the international arena is considered to be a space for social action and considered a means to decrease the inequalities and marginalization for transcending social disadvantages. Sport can act as a catalyst for social inclusion and cohesion as it offered opportunities to broaden social networks and work against isolation (UN, 2003; Cortis, 2009).

Attitudes towards people with disabilities are inevitably negative, harmful and varied. These attitudes limit the opportunities for community involvement and access to resources for persons with disabilities as a result of these "invisible barriers". The stigmatization of persons with disabilities occurs readily and impacts mainly on the quality of life of persons with disabilities and their utilization of community resources (Hebl and Kleck, 2000; Akrami, et al., 2006; Goreczny, et al., 2011). In scenarios where people are viewed from outside existing boundaries and positioned as threats to the sense of community calling for the defining of 'who is in' and 'who is out', othering occurs. The distance between those on the 'outside' and those on the 'inside' are maintained through various ways. Even when empathy is felt towards individual or group, little is learnt about their needs allowing people to remain disconnected (Grove and Zwi, 2006).

The reality exists for blind children that stimulating opportunities are not created often enough for them to participate in such a manner that is equivalent to sighted children (Robinson and Lieberman, 2004; Lieberman, and Wilson, 2005). Even for elite athletes with visual impairments the challenges were very similar to those who merely wanted to participate for recreational purposes. The shortage of willing and suitable competition, guides, appropriate equipment and the attitudes of others affected the type of opportunities and the success for participation (Stuart, Lieberman and Hand, 2006). Research examining the perceptions of people with disabilities on social acceptance in inclusive leisure programmes found that context played a significant role in assigning meaning, maintaining relationships and decisions related to leisure. Leisure context explains much about the social structure of a community and its moral fiber and thus gaining an understanding of the context will improve the quality of life of persons with disabilities (Devine, 2004).

Research on the attitudes towards inclusion found that that mainstreaming efforts required significant administrative support, equipment and human resources, planning and disability specific knowledge (Marshall, Ralph and Palmer, 2002). Modern prejudice consists of a rejection of the existence of discrimination, the provocation towards and a begrudging of accommodation of minority groups (Akrami, et al., 2006). Prejudice towards persons with disabilities remains prevalent and evolves with time in many communities. This learned temperament focuses the individual's attention and creates parameters for behavior as they encode their experiences (Yazbeck, McVilly and Paramenter, 2004).

In situations where agents of change can act to bring about community change they require the necessary support and resources to effect change which might not necessarily be available (Yazbeck, McVilly and Paramenter, 2004). Social cohesion can be brought about through developing an understanding of the attitudes and actions that consume a community. Understanding that these attitudes are gained over time and occurs within social settings developing a biasing and cultured temperament will assist with developing future strategies to eradicate them (Hebl and Kleck, 2000). Social stereotypes based on physical characteristics often affect sports participation. With the general decreased physical activity levels and participation of

young visually impaired children (Ponchilla, Armbruster and Wiebold, 2005) community sport programmes can play a role in supporting healthy behavior.

2.9 Summary

This literature review has indicated the need for research into the factors that influence the participation of children with visual impairment in sport and recreation in South Africa. It has argued, from the literature, that the communities within which children live are considered to have a great impact on their health behaviors. Community sport programmes provide visually impaired children with an ideal opportunity to engage with others and increase social networks. The review also highlighted how the development of the Disability Rights Charter of South Africa located disability within a human rights framework that recognizes the fundamental needs of all and the right to have these needs met through socially inclusive programmes. The right to participate on an equal basis with others in recreational, sport and leisure activities is one of these rights. A review of the literature also indicated the value of the social model of disability in highlighting issues such as the environment, transportation and architectural design as barriers and social dividers. In order to bridge this divide access needs to be forthcoming. Legislation and policies state the government's stance on access and international policy has valued sport as a tool for promoting inclusion. Even with progress being made within the realm of disability sport the pace at which barriers are eradicated is unhurried. Quality inclusion must be ensured and can be achieved through reorganizing these barriers to inclusion. Research into the contribution of sport and recreation managers in promoting access will be a step towards the reform of disability inclusion in sport.

Chapter 3

Methodology

3.1 Introduction

Qualitative research provides a unique approach to discovering and understanding social processes such as the perspectives of recreation officers on the inclusion of children in sport and recreation programmes. It allows the researcher to progress through various phases of inquiry as researchers interact with participants (Patton, 2002; Creswell, 2007; Williams, Unrau & Grinell, 2008). Qualitative approaches by design are exploratory, fluid, sensitive to context and driven by data (Mason, 2002). The focus is on deducing meanings that cannot be examined experimentally as in the case of determining the perceptions of the recreation officers (Patton, 2002). Qualitative researchers commence with world views and make use of various theoretical lenses to study particular research problems (Creswell, 2007). Within the current study, the social model of disability informed the researchers view on disability and thus provided the lens of disability theory. This lens informed the inquiry into the meanings of the participant's perceptions (Flick, 2006).

3.2 Research design

Qualitative description

The use of qualitative description in this study is based on Sandelowski's (2000) interpretation of the value and methodological orthodoxy (Thorne, 1991) of qualitative description. Qualitative description as a unique method of qualitative research presents the facts of a study with the use of everyday language in contrast to other descriptions such as phenomenological and ethnographic descriptions that re-present events in other terms (Thorne, Reimer Kirkham and O'Flynn-Magee, 2004). Qualitative description is less interpretive than interpretative description in that the researcher is not required to move far from the data and may focus on the whole phenomenon, in this instance the views of recreation officers towards access and inclusion of visually impaired children, rather than focus on only particular aspects of the phenomenon for example stigmatizing language (Asbjørn Neergaard, et al., 2009). Finally qualitative description produces an end

product (Sandelowski, 2000) and is not only an entry point (Williams, Unrau & Grinell, 2008) to explore subject matter.

Qualitative description features a combination of sampling, data collection, analysis and representational techniques and tends to share a basis with naturalistic inquiry (Sandelowski, 2000). Naturalistic inquiry is geared towards studying something in its natural state (Flick, 2006; Patton, 2002). The shared tenets within this study are the opportunity to offer rich descriptions of the recreation officers perceptions of inclusion taking place in their work environment, the minimized use of preconceived theory and remaining loyal to the phenomenon under study through not altering the topic of research (Emerson, 2004). This particular study is interested in producing findings that could be used immediately to assist any inclusionary efforts; it is not primarily conducted as a precursor for the use of other methodological approaches. Qualitative description as a methodology is best suited to studies where a straight forward description of phenomena is preferred in this instance the views, opinions and perspectives of recreation officers (Sandelowski, 2000).

Within the qualitative methods literature qualitative description has not received the same level of attention as other qualitative methods even though it is one of the most frequently used (Asbjørn Neergaard, et al., 2009). Within the complexity of methodological choices (Flick, 2006; De Vos, et al., 2011) in qualitative studies the directness of approach of qualitative description holds the most value for furthering the understanding of the perceptions of recreation officers through providing straight descriptions (Sandelowski, 2000). The use of qualitative description allows the researcher who is seeking to describe an event or experience to select what they will describe and as they feature certain aspects of it this begins to transform the experience (Asbjørn Neergaard, et al., 2009).

3.3 Gaining access

Organizational consent (Gochros, 2008) was obtained prior to engaging with prospective participants. This was achieved as follows. Initially an e-mail requesting permission to discuss the study within the COCT SRA (Appendix 2) was sent to the Director of Sport, Recreation and Amenities. This email detailed the content and purpose of the study. A subsequent response was received confirming approval referring the matter to the Manager of Special Operations. This

referral was attributed to the time constraints on the Director's part and the Director noting the necessity to recues himself due to the familial relation to the researcher. Subsequently the Manager of Special Operations advised all recreation officers that Management had given organizational permission for the researcher to conduct the study at COCT and that the researcher would contact the recreation officers to request their participation. Each recreation officer was free to decline participation without prejudice¹¹. Each recreation officer was then contacted telephonically by the researcher to extend an invitation to them to participate. An e-mail containing an information letter was also sent to the prospective participants for further background information to aid in their considerations (Appendix 3).

3.4 Population and sampling

The study employed the purposive sampling method. Qualitative description is suited to use of purposeful sampling techniques as the ultimate goal is to gain information rich data for the study (Patton, 2002). In purposive sampling each participant is selected for a specific purpose which in this study was intimate knowledge about the implementation of the Come and Play Programme. In certain situations where the population group being studied is made up of small numbers the entire population may form part of the sample (Schutt, 2008). In such instances, participants should be knowledgeable about the arena or experience being studied, willing to converse and represent various viewpoints (Rubin and Rubin, 1995).

The current study population included all the City of Cape Town recreation officers working within the City of Cape Town districts (Appendix 1). However, since there are only six recreation officers, all of these recreation officers were invited to participate.

The criteria used for purposive sampling were as follows:

All the participants must:

- currently be employed by the City of Cape Town Sports, Recreation and Amenities Department;
- be employed in the position of recreation officer;

¹¹ Ethical considerations are explained in 3.9

- be able to converse in English or Afrikaans;
- also be/have been involved in the Come and Play Programme.

3.5 Sample size

The researcher initially aimed to interview all six recreation officers, but only five of the six recreation officers participated in the study. One of the recreation officers chose not to participate in the study. Although this participant agreed upon initial contact, they did not honour the appointment where consent was to be confirmed and subsequently cancelled on two occasions. Although no reason was stated for the non participation the researcher decided not to pursue the participant in keeping with the ethics of informed consent and the right of persons to withdraw or refuse participation in a study¹². The possibility of personal limitations being exposed, disturbances and disruptions in the working routine and apathy towards participation are factors that could contribute towards non participation (Gochros, 2008).

3.6 Data collection

Data collection within qualitative description is directed towards discovering the who, what, and where of events and their basic nature (Sandelowski, 2000). This may include the use of semi-structured open-ended interviews as well as the examination of documents (Asbjorn Neergaard, et al., 2009). In this study, the draft policy document of the COCT SRA was examined and interviews with five recreation officers were conducted.

3.6.1 Semi-structured interviews

Interviewing is generally the most common form of data or information collection in qualitative research as they provide stories, are interactional and inherently involve description and reflection (Greef, 2005). Qualitative interviewing is versatile and invites the researcher to listen to people as they describe how they understand the world within which they live (Rubin and Rubin, 1995). Interviews can be seen to be central to how people make sense of their lives (Silverman, 2000). It is even a prevalent technique in popular media and so may hold a sense of familiarity for

¹² Ethical consideration was given around the participant's right to participate or not. Ethical considerations are discussed in section 3.9

participants. Interviews are also extremely helpful in furthering the credibility in studies with limited population sizes (Rubin and Rubin, 1995). Semi structured interviews were used allowing for specific questions to be asked but also offered flexibility with regards to how the interviewer could explore certain topics raised (Gochros, 2008).

Face to face interviews are of benefit in order to build a level of rapport with the participants and contribute to avoiding misinterpretation or distortion of the contributions of the participants (Silverman, 2000; Flick, 2002). Two semi-structured interviews were conducted with each participant. All the interviews were conducted at the offices of the recreation officers in a private room. A semi-structured interview schedule was used in the first interview (Appendix 4). The interview schedule was formulated drawing on the methods proposed by Gochros (2008). He suggested that in formulating the interview schedule the researcher should address the following (Gochros, 2008: 249):

1. What do we want to know that we don't know already?
2. How can we formulate and ask questions that will increase the probability that the interviewees from telling us what we want to know?
3. What would keep the interviewees from telling us what we want to know or would lead them to deceive us or present us with incomplete data?
4. How can we override these sources of withholding and distortions?

From a disability activist perspective much is known about how persons with disabilities perceive their inclusion and exclusion from society while the perceptions of others role players are not as well documented. The interview schedule was constructed in order to gain a better understanding of the perceptions of the 'other side'. The questions were sequenced according to Bailey (1994 cited in Gochros, 2008) in order to allow participants to feel at ease and extract the most complete data possible. The interviewer made use of probing at times to generate clarity and greater depth with responses while listening attentively to the participants (Rubin and Rubin, 1995). This consisted of repeating questions and answers, acknowledging an understanding and interest in what was being said, allowing for pauses where necessary and at times making use of neutral comments.

The second round of interviews only commenced once the first round of interviews were completed and analyzed for all five of the participants. This allowed for completeness and saturation to occur where the researcher was confident that little new information was forthcoming from the initial interview (Gochros, 2008). This also allowed the researcher to decide what areas to probe further with the second interview with each participant. In the second interviews with each participant, the researcher recapped the responses that the participants had given and asked whether there were any specific aspects of the initial interview the participants wanted clarification on or to elaborate further on any aspects they wanted. The researcher then proceeded with the interview asking for further clarification on specific answers from the first interview. With the permission of the participants, all the interviews were recorded using a digital mp3 voice recorder.

3.6.2 Document study as data

The draft policy on sport and recreation for the City of Cape Town as well as the City of Cape Town Recreation Study Report 2011 (City of Cape Town, 2011) were examined. The draft policy document was requested from the Director of Sport and Recreation and received electronically. The City of Cape Town Recreation Study Report 2011 was retrieved from the City of Cape Town website. The documents provided the researcher with an opportunity to familiarize himself with the draft policies and the state of sport and recreation services within the City of Cape Town. The documents also assisted with the formulation of the questions for the interviews. On verbal request to the Manager of Special Operations it was indicated that there were no records or statistics specifically pertaining to the implementation of the Come and Play programme.

3.7 Data analysis

Qualitative content analysis was utilized as it is not limited to any theoretical background and suited to the analysis of subjective viewpoints that are collected through interviews (Flick, 2006). The primary purpose of the analysis was to understand the perceptions of the participants through their communication through the interviews (Rubin and Rubin, 1995). Through the process of qualitative analysis the original research problem was addressed allowing the researcher to transform the data into findings (Coleman and Unrau, 2008; Schurink, Fouche and De Vos, 2011).

The data analysis followed the six step framework proposed by Coleman and Unrau (2008).

The steps used were:

The first step was to prepare the data by transcribing the interviews verbatim into written text. The researcher completed the transcription himself as this allowed for him to gain more familiarity with the data prior to analysis. The researcher had started the process by transcribing the interviews into Microsoft Word documents. Once the QSR Nvivo 9 software was obtained, interview data was transcribed directly into the programme. Ethical issues of confidentiality were respected by removing personal information that could lead to the identification of individuals. Transcribing data prior to the coding and interpretation thereof ensured the researcher's familiarity with the entire data set. It also allowed for meaning to emerge from the data rather than prescribing meaning.

The second step involved the reviewing of the data. The researcher read each interview twice and made a note of points of interest. These points of interest were then used to create a mind map to keep track of thoughts related to the transcribed data.

The next two steps involved two levels of coding. Initially this was done manually utilizing the cut and paste method (in MsWord). The first three interviews were done in this way. Thereafter all information was transferred into QSR Nvivo9.

The first level coding identified a combination of meaning units or codes. The coding originated through identifying similarities and differences between the meaning units. The codes were then reorganized where necessary. Constant comparison was made and those meaning units that were similar in description were put in the same categories.

The second level coding was focused on identifying the similarities and differences between categories through comparison in order to detect any relationships that might exist.

After organizing the data the fifth step involved the interpretation of the data through developing conceptual classification systems in order to determine relationships between any major themes. After this was concluded the themes were presented. Data analysis also continued throughout the refining of 9 drafts of the findings.

The final step involves issues of trustworthiness as explained in section 3.8 below.

3.7.1 Document analysis

The researcher undertook to examine the draft policy document. Mind mapping was utilized as a means for drawing out the significant policies related to inclusion (Appendix 5). The objectives of the policies were placed into categories and then compared to international and national legislation promoting the inclusion of persons with disabilities. The categories also informed the questions that were contained in the second round of interviews.

The COCT recreation study report 2011 was examined, primarily drawing out the information related to the Come and Play programme and the participation of persons with disabilities in the recreation programmes.

3.8 Trustworthiness

Established frameworks to ensure rigour within qualitative methodology exists (Shenton, 2004). Guba's (1981) constructs seek to satisfy four criteria to ensure trustworthiness: credibility, transferability, dependability and confirmability (Lincoln and Guba, 1985).

3.8.1 Credibility

Williams, Unrau and Grinnell. (1998) consider credibility to be the interpretivist version of internal validity and seeks to answer whether the findings of a study can be considered truthful.

The researcher has worked in the field of visual impairment and sport for 7 years and is familiar with the department through interfacing with the services from an NGO perspective. To manage the potential influences these prior experiences may have had, the researcher made use of debriefing sessions with research supervisors (Flick, 2002). The debriefing sessions alerted the researcher to strategies to avoid biases and allowed the researcher to review data collection and data analysis methods.

Upon entering the research the researcher developed a level of familiarity with the local department of sport and recreation through studying the draft policy on sport and recreation in order to gain a more informed understanding of the culture of the COCT SRAD. Member checks occurred after the initial interviews checking the accuracy of the information collected from the first interview.

3.8.2 Transferability

Transferability in qualitative inquiry places the subjective meanings of the study as the central experience and the researcher acknowledges that no single correct or 'true' interpretation working within a naturalist paradigm is possible (Tobin and Begley, 2004). The researcher collected the data first hand and kept an accurate record of the interviews, recordings and transcriptions electronically (Gochros, 2008). The researcher had contact with the participants not only through the interviews but also through telephonic and E-mail correspondence adding to the context of the study. The researcher provided a detailed description of the phenomenon in question allowing for a comparison to be made with other similar studies of which there are very few.

3.8.3 Dependability

Dependability is closely related to the credibility issues within the study. Dependability focuses on the consistency and congruency of the findings (Gochros, 2008). An audit trail (Appendix 6) of the data collection procedures was maintained as well as conducting member checks and establishing the accuracy of the information gained in the initial interview (Flick, 2002).

3.8.4 Confirmability

Confirmability refers to a degree of neutrality or the degree to which the findings are shaped by the participants and not researcher bias (Lincoln and Guba, 1985). Triangulation is used to name a combination of methods used to deal with a phenomenon (Flick, 2002).

In order to reduce researcher bias the triangulation of methods was employed which entailed interviews, document analysis and literature to support findings. Regular consultations with research supervisors allowed for the confirmation of the coherence of the findings (Silverman, 2000, Gochros, 2008).

3.9 Ethics

Ethical concerns are associated with all types of research. Essentially the starting point has been based on ethical principles formulated for biomedical research but since the 1960's ethics within qualitative social research has developed (Orb, Eisenhauer and Wynaden, 2001). There are a minimum of two dimensions of ethics found within qualitative research. Procedural ethics refers to the process of seeking approval from the relevant ethics committee in order to commence with

research involving humans. Ethics within practice refers to the ethical issues that are considered during the course of research (Homan, 1991).

3.9.1 Procedural ethics

Research involving human subjects requires the completion of an application from a research ethics committee. The purpose of the application is to explain the methodology of the research to be conducted and address any potential concerns for the research to be conducted (Guilleman and Gillam, 2004). Approval for the study (Appendix 7) was sought and received from the Research Ethics Committee of the Faculty of Health Sciences, University of Cape Town (Ethics Number: REC REF 124/2010). Although ethical review boards issue the approval for conducting studies, the responsibility to protect the participants who engage in research resides with the researcher (Orb, Eisenhauer and Wynaden, 2000).

3.9.2 Ethics within practice

3.9.2.1 Informed consent:

Informed consent includes at least three elements: full information, comprehension and voluntarism (Belmont Report, 1973; Homan, 1991; Flick, 2006). The potential participants were all made aware of the study and what would be required in order to participate. This was discussed telephonically after which an E-mail containing an information letter was sent to the participants. The information letter contained the research title, aims, methodology and an explanation that the participation was voluntary. This allowed the participants to be in a position where they understood the information that the researcher had provided them with and they were capable of making a decision based on their understanding without any influence from another party. An informed consent form (Appendix 8) was discussed prior to commencing with the interviews. The informed consent forms contained details confirming that the participants had received and understood the information regarding the research study. The participants were aware that aspects of the interviews might be included in the study and that they could decide to participate and withdraw from the study if they felt it necessary to do so without any prejudice. The participants were also informed of the methodology and how information would be captured and stored. After this the participants were free to decide to participate or not.

In addition to informed consent, the researcher ensured at all times that the main ethical principles of autonomy/ respect, beneficence, and justice were maintained (Sieber, 1992; Orb, Eisenhauer and Wynaden, 2000; Denzin and Lincoln, 1994).

3.9.2.2 Autonomy

Autonomy referred to the respect given to participants' to effect their right to decide how they would participate in the research as well as when they cease to be part of the research (Orb, Eisenhauer and Wynaden, 2000). The participants were given all the information about the research as well as the consent form and were explained the processes with regards to the research. The participants were not coerced into participation and were allowed the opportunity to decide on their own whether or not to participate in the study. In this regard only five of the participants were willing to engage in the interviews and remained part of the study to the end (Ivanoff, Blythe and Walters, 2008). The participant who remained unavailable was not pursued for participation.

3.9.2.3 Justice

Justice refers to the fairness in distribution or what is deserved and who receives the benefit of research and bears the burdens thereof (Ivanoff, Blythe and Walters, 2008). It was maintained through ensuring that the participants were able to engage in the study without any burden on them and could do so at the most convenient place for them (Orb, Eisenhauer and Wynaden, 2000). The risks and costs associated with participation were minimised in this way. The participants were also advised that they would have access to the study and its findings in order to further assist with their work on completion of the study.

3.9.2.4 Beneficence

Beneficence relates to the notion of doing no harm and maximising the possible benefits and decreasing any possibility of harm (Ivanoff, Blythe and Walters, 2008). This was applied through ensuring the participant's confidentiality was maintained throughout the study by removing the names of participants from all transcriptions and participants were able to access the researcher at any point to gain clarification or seek any information pertaining to the study. The research also ensured that all transcriptions and recordings were stored in a safe place that no one else had access to (Flick, 2006). With the ongoing relationship with the participants the researcher

confirmed his availability to assist with any further requests around gaining an understanding of visually impaired persons needs thus ensuring further benefits to the participants. In the following chapter the findings that emerged from the analysis of the data will be presented.

3.10 Summary

This chapter detailed the research methodology. It provided justification for the use of qualitative description as the primary approach best suited for gathering the recreation officers' perceptions on the inclusion of visually impaired children in the Come and Play programme. It described the value of naturalist tenets within this study and argued that they allowed for rich descriptions of the recreation officers perceptions of inclusion. Concurrently it minimized imposing theory onto the data, remaining loyal to the participants' perspectives instead. The chapter concluded with a justification of the ethical stance adopted by the researcher and of the steps taken to ensure the trustworthiness of the findings which are presented in the next section of the thesis.

University of Cape Town

Chapter Four

Findings

4.1 Introduction

In this chapter the findings are presented as the outcome of a descriptive qualitative analysis which revealed one central theme: *Revealing Invisibility*. This theme encapsulates two categories. Firstly, an embedded ideology of difference was confirmed through the process of ‘*Othering*’ in which the participants shifted the responsibility for inclusion. Based on their positioning as implementers of the Come and Play Programme who followed directives from ‘others’, they faced personal and structural barriers in realizing the inclusive intentions of the draft policy. Secondly, the findings highlighted the tacit imaginations held by the recreation officers about promoting inclusion as a juxtaposed experience of their positioning in the Come and Play Programme. As they ‘*Imagined Inclusion*’ during the research interviews, they began to envision greater congruency, control and communication within the programme.

The sub categories, categories and theme that emerged during analysis are tabulated below.

| THEME | CATEGORY | SUB CATEGORY |
|-------------------------------|----------------------------|-------------------------|
| Revealing invisibility | Othering | Structural Positioning |
| | | Attitudinal Positioning |
| | | Personal Barriers |
| | | Structural Barriers |
| | Imagining Inclusion | Congruency |
| | | Control |
| | | Communication |

In the category of “Othering” the recreation officers described how their structural and attitudinal positioning towards visually impaired children generated a level of invisibility of visually impaired children in the Come and Play Programme and how personal and structural barriers added to this

invisibility. The second category, “Imagining Inclusion” identified the three areas for strategic improvement that would minimize the created invisibility: congruency, control and communication.

4.2 Category one: Othering

In this category the participants’ views of their roles and the factors that influenced their approach to inclusion revealed how they shifted the responsibility for inclusion onto others. Through “othering” the responsibility for implementing the inclusive tenets of the draft policy, they alluded to the structural and attitudinal dimensions of their positions in the Come and Play Programme. Four sub-categories of othering emerged during data analysis: their structural positioning towards the inclusion of visually impaired children in the Come and Play Programme; their attitudinal positioning towards children with visual impairments; personal barriers with respect to their approaches in making it possible for visually impaired children to participate and the structural barriers they deemed to be in existence within the policy and service communities.

4.2.1 Structural positioning

Structural positioning was highlighted through two key aspects affecting how the recreation officers positioned themselves in relation to the inclusion of visually impaired children in the Come and Play Programme. Firstly the directives received from their head office and management structures left them feeling that they were only following directives rather than taking personal control of the programme. Following structural directives meant that the resultant exclusion of visually impaired children was out of their control.

We get guided by a what we call a PDR which is set up by our head office and we’ve got to follow what this PDR tells us to do..... we are not just free to do whatever we think we should be doing.

Participants reported that the prescribed departmental plans issued by their superiors inherently restricted their role in facilitating inclusion. These plans made limited or no provision for the inclusion of visually impaired children. The COCT SRA structure placed the participants under the direct control of District Managers with their own interpretations of how to implement the

departmental plans. These managers were known to have their own preferences for programmes which did not necessarily consider visually impaired children.

And we operate under district managers with their own view points

The inability to veer from the departmental plans presented the participants with limited opportunities to engage with visually impaired children through their programmes. The departmental plans did not specify the inclusion of visually impaired children and as such the recruitment process was random and left the inclusion of visually impaired children to chance.

It's normally just by accident that we, that we find as a blind person or a visually impaired person

4.2.2 Attitudinal positioning

The participants' attitudes toward inclusion was highlighted in the sub-category, attitudinal positioning. As no active recruitment of children with visual impairments occurred the lack of participation resulted from an unconscious level of 'othering'. The language that the participants frequently used not only showed their attitudes towards visually impaired children but reinforced the distance between themselves and those perceived to be different to them.

The constant references to visually impaired children as away from the 'norm' were common amongst the participants, while the responsibility for inclusion was shifted towards their superior's and the community. Visual impairment fell outside the 'norm' of what the officers considered disability to be. Their attitudinal positioning matched the stereotype of disability as an obvious physical problem. This deviation from the 'norm' created a false paradigm of the humanness of visually impaired children.

the last time I said was that the person looks normal, there's no physical disability for us that we can say hey this person has got vision

Participants distanced themselves from visually impaired persons. Notions of otherness were conveyed through phrases such as "Look at them", "that blind guy", "that can be able to handle those kind of people". Distancing words such as "them", "they" and "those kind" reinforced the

participants attitudinal positioning of ‘othering’. The frequency of use of oppositional and othering terms such as ‘able bodied’ also cemented the distancing that took place.

we'll have a normal ag (oh) I mean an able bodied walking with a visual impaired and they can share and interact and have a sponsor kind of thing for that day and build that into other activities and when you begin to partner with the visually impaired and the able bodied

The participants’ attitudes towards inclusion were influenced by the perceived invisibility of visually impaired children within their communities. Their rationalization that no visually impaired children existed within their communities further highlighted the lack of exposure to disability sensitization. This lack of disability awareness influenced the attitudes adopted when implementing programmes.

if you don't see them they probably don't exist

I once again said it's this exclusive you always exclude, exclude, exclude and in this day and age I don't foresee us doing those kind of things again.

Some participants clearly felt that the programmes were already fully inclusive since they were considered to be open to everyone.

No not at all because our programme is for everybody... most of the time those guys are not available to be part of the programme.

Significantly the conflict in the understanding of the existence of barriers to inclusion as well as the assumption that visually impaired children were not available highlighted the oppositional attitudes that were present amongst participants.

4.2.3 Personal barriers

Participant’s perceptions of their personal barriers and limitations also affected the inclusion of visually impaired children. Two contributing factors were felt to have created the personal barriers to facilitating inclusion amongst the participants: a knowledge vacuum and role ambiguity. The participants’ limited disability knowledge, training in facilitating inclusion and skills resulted in

participants relying only on their recreation knowledge when recruiting participants and implementing programmes without having a clear understanding of their roles. This left them not feeling in control.

I think the difficulty for us with the visually impaired, we are not tuned in to identify...the reason why we never or not included or had a specific programme for the visually impaired because we as the implementers are not equipped to identify we not trained.

The lack of participation of visually impaired children was also attributed to the lack of personal barriers to 'researching' inclusive programme needs. Participants experienced personal barriers in accessing opportunities to be proactive within their communities.

you know information hasn't been forwarded to us and we haven't researched programmes on people who are visually impaired

They were therefore unable to recruit potential visually impaired participants in the Come & Play programmes.

4.2.4 Structural barriers

According to the participants structural barriers also prevented the inclusion of visually impaired children and fell short of the obligation noted in the sport and recreation policy document for the City of Cape Town. Significantly the City of Cape Town has a disability specific transport system that could be utilized by persons with disabilities but this too was considered to be inefficient and a barrier to inclusion.

with the service providers we are using are not there towards the visually impaired or physically uhmm disabled for that matter and even our Dial a Ride service apparently doesn't have or doesn't make provision for the for the visually impaired

The participants used the poor standard of existing facilities to shift the responsibility with respect to ensuring inclusion away from them. The facilities were felt to be inadequate as a result of the poor planning and structural design prior to building the sport and recreation facilities.

Once again it's going to come back to facilities mainly and then as you know it's not developed in such a way to accommodate them, visually impaired athlete

The participants expressed concern about not having the correct equipment to facilitate inclusion as this was felt to be necessary to achieve fully inclusive programmes.

I think the second thing is that, that the equipment that we use, is not equipped to, we don't have equipment we can work with for blind people

The limited number of staff available to implement programmes created another significant barrier. Even with the reliance on a volunteer system the human resources remained vulnerable through attrition. This restricted the recreation officer's ability to effectively influence the inclusion process and highlighted the value of all implementers being trained to implement fully inclusive programmes in order to reduce the burden on one specific person.

we have limited staff

and

our volunteers come and go

Another significant barrier experienced was that participants were not 'encountering' visually impaired children in the local mainstream schools and not noticing them in the communities. This resulted in the participants assuming the non-existence of visually impaired children.

I think the barriers are probably the fact that blind or visually impaired children are segregated at school level already

The lack of visibility on the part of visually impaired children within their communities effectively became a barrier to any future participation in the programme.

In summary, the findings in this category illustrated that the specialized knowledge of disability and inclusion required to facilitate inclusive programmes was lacking amongst all the recreation officers while social segregation at schools and within communities contributed towards the perceived invisibility and 'non-existence' of visually impaired recruits to the Come and Play Programme. The findings also highlighted the outcast position visually impaired children had to endure as they were 'othered'. The use of 'othering' language and the superficial understanding of visual impairment resulted in the visually impaired children's inclusion being cast as a responsibility to be addressed through the departmental plans or through the directives received

from district managers. Significantly the difficulty experienced in accessing appropriate equipment, the provision of safe reliable transport and adequate recreation facilities and human resources were also labeled as barriers to the inclusion of visually impaired children.

4.3 Category two: Imagining inclusion

The second category focused on the recreation officer's perceptions of what was deemed necessary to facilitate inclusion in the Come and Play Programme. It highlighted the acknowledgement that inclusion was possible but key factors needed to be addressed. Three sub categories were noted; congruency which related to delivering promised services; control of how inclusion could take place; and communication with all stakeholders.

4.3.1 Congruency

The findings suggested that the participants felt that a greater level of congruency was required with regards to the espoused values of the Come and Play Programme, policies of the department and the actual implementation of the Come and Play Programme.

when the Mayor or the Directors gets up saying we as the City of Cape Town provide activities for the all of Cape Town then we need to be true to what we are saying

Similarly, the draft policy espoused that the role as service provider was that of:

"Meeting its constitutional obligation in the provision of Sport and Recreation." (City of Cape Town, 2008: 6)

This acknowledgement would require an alignment of policy and implementation. Participants felt they did not fulfill their mandate with respect to ensuring the Come and Play Programme was fully inclusive. This shortcoming contributed further to the increased alienation of visually impaired children and stood in opposition to the stated social benefit claimed within the draft sport and recreation policy of the City of Cape Town.

"Community Sport and Recreation reduces alienation and antisocial behaviors." (City of Cape Town, 2008: 4)

It was felt that inclusion was possible provided that a methodical and structured programme was planned and produced by the sport and recreation department to guide future implementation strategies.

Uhhh I think it's going to have to be an intense planning, I think it's going to have to be a structured programme

This planned programme would directly link to of the objectives stated within the draft policy on sport and recreation. This would include the need to ensure effective communication, the provision of equitable services, the utilization of sport as a development tool and the promotion of effective partnerships.

1. *“To develop and formalize channels of communication with the wide range of Sport and Recreation stakeholders.”*
2. *“To provide and manage facilities which promote equitable access in a sustainable manner.”*
3. *“To optimise Sport and Recreation as a developmental tool towards the social well being of the City.”*
4. *“To develop and promote effective partnerships with all role players in the delivery of Sport and Recreation services for the people of Cape Town.”* (City of Cape Town, 2008: 8).

The participants also felt that the skills that they required in order to implement inclusive programmes should be part of their departmental training. Although the real risk of volunteer attrition was explained this did not deter the participant's views that further training should include all implementers of programmes. Participants also felt that a 'disability awareness drive' was essential for all stakeholders in the Come and Play Programme as there was a lack of congruency with respect to what was espoused values within the COCT draft policy on sport and recreation and what occurred within the COCT sport and recreation department as no awareness was created around the inclusion of visually impaired children.

I think it's the whole awareness drive, I think not just within our communities but within our own department as well

Certain participants acknowledged that a proactive approach to assuming responsibility was necessary in their role as implementers as the responsibility ‘ultimately lies with them’ as recreation officers because ‘if they don’t do it no one else would’. The opportunity to further build on the objectives of the COCT SRAD draft policy on sport and recreation and promote inclusion was acknowledged to rest on the way in which the participants lived out these objectives.

Ja if we not going to do it nobody is going to do it hell. Ja I realise the responsibility will ultimately lies with me as recreation officer.

We just need to think outside the box and come and be creative

The participant’s gave further insight into how they felt they could influence the inclusion of visually impaired children in the Come and Play Programme. This could take place through improving their understanding of visual impairment and dedicating time to further education within their communities once they have understood inclusion for themselves.

we probably need to for one day put aside for the disabled sector for this day the focus will be for the visually impaired because we need to educate also the other participants and as soon as we know how to deal with the visually impaired ourselves...

4.3.2 Control

Considering the need to take action, the participants acknowledged that various possibilities to include visually impaired children were already available. The control mechanisms were in place but needed higher level intervention by management for example by ensuring that their initial budgetary plans factor in the needs of visually impaired persons.

If at that level they can take that responsibility to ensure that they are also accommodated in our programmes which means even the budgeting can also be made available so that some resources as well as the facilities are created for them to be part of the programme.

The findings in this category highlighted the importance of a controlled, creative, focused and sequential approach to inclusion of visually impaired persons. Exposure to visually impaired persons had previously occurred through other programmes and no further expansion on this knowledge materialized due to a lack of control over implementation. The lack of follow through

with respect to previous training further disadvantaged the visually impaired children and their opportunities to be part of programmes. This is significant considering that this opportunity was made available from within the disability sector inviting the recreation officers to participate. The effort thus to promote the upskilling of the recreation officers came from outside of the sport and recreation department and thus asks the question of what other approaches are required.

Uhhh some of us have been sent on a futsal¹³ for the blind through LOFOB but we haven't really I must admit that we haven't haven't moved since then

The sustainability of Come and Play Programmes relied mainly on informally transferring knowledge between implementers, volunteers and participants. No formal training programmes related to disability were offered within the department and so a knowledge gap was in existence. In so much that when and if any opportunities would be available the recreation officers felt they could share the information directly with their volunteers and other implementers.

it will be a matter of whatever you teach us we will be able to teach our volunteers once again that then forms part of the legacy of the Come and Play Programme

As the participants noted the communication, links between being capacitated, being able to identify visually impaired children, the transfer of knowledge and the levels of participation of visually impaired children in the Come and Play Programme needed to be improved in order to fulfill the espoused values of the Come and Play Programme. Together with the need for better understanding, skills and awareness the participants' recognized the need for a coordinated and planned approach over which they influenced control.

If we want to include if it's the blind or any other grouping there should be a centralized concerted effort to say this is what we are going to be doing.....

The participants suggested that inclusion needed to be prioritized by their superiors within their planning and that more could be achieved with a constant effort from all stakeholders to promote inclusion. The participants also felt that the implementation of any inclusionary efforts should be

¹³ 5 A-side football: blind futsal

administered and coordinated from a centralized place within the department of sport and recreation.

Significantly the centralized office was suggested as a common place for sharing ideas and the development with a common communication strategy to replace the current individualistic and random approach. While the suggestion of a central coordinator reinforced a position of possibly isolating or separating disabled people from others within the programmes, it was felt to be a requirement for progress. It was a shared perception that implementing a monitoring and evaluation system, based 'on a weekly or monthly basis' communication, would ensure compliance by the participants and further contribute to taking more responsibility for the inclusion efforts.

4.3.3 Communication

It was suggested that constructive dialogue needs to occur in order to improve the participants understanding of the disability sector which was felt to be difficult to approach. The participants also proposed that the lack of input and communication from the disability sector influenced the recreation officers understanding of the requirements for inclusion of visually impaired children.

Input from the disabled sector and that's the one that always keeps on lacking....

The poor communication between disability sector and the recreation officers also created a scenario where when there was communication about programmes it was not taken further or built on. The result was that on a yearly basis the same requests for assistance would be received by the disabled community.

I mean we work very much hand in hand with those people but they always have a once a year programme but I'm always saying to them guys we don't want these once a year programmes lets have programmes that can run throughout the year

Notably working with established organizations 'fighting the cause' along with conducting a 'needs assessment' of visually impaired children to adequately plan for their inclusion was considered invaluable by the participants. The lack of communication with the disabled community had a direct impact in terms of how the recreation officers have shown a lack of

consideration with respect to their programme design. Communication was viewed as lacking and thus programmes were not designed to accommodate the needs of visually impaired children.

but obviously once we start talking with the sector the disabled visually impaired person obviously we will be able to design a programme that specifically speaks to their needs.

The need for knowledge sharing and dialogue was not limited to including the disability sector but was directed internally within the department. The participants felt that as a result of not being held accountable they were not compelled to focus on inclusion. It was evident that they had not received any message requiring them to focus their attentions on either inclusion of persons with disabilities nor that specifically of visually impaired children.

we don't have anybody breathing down our necks telling us listen you have got to see that there are visually impaired

The need to have clear communication from superiors with respect to including visually impaired children required more than instructions. The need for instructions to be accompanied by a process of monitoring highlighted a need for greater accountability. The lack of communication and an accompanying monitoring process further explained the lack of inclusion as what was felt to be captured within the policy document was not translated into action to the detriment of persons with disabilities.

even though we work for the city we ourselves can be monitored to say look at here ,this is what you need to do ,this is how it needs to be done and then monitored the process

And also there is no monitoring process to ensure what is generally on the policy is actually zoomed down into the actual thing that needs to be done especially for the disabled.

In summary the findings in this category show the participants' acknowledgement that solutions to ensuring inclusion should be explored. Altering their approaches to how they implement programmes in line with policies was highlighted as an important consideration. The lack of congruency between thought/ policies and actions and the low level of control assumed by the recreation officers played into creating further barriers to inclusion. Although there was at times communication with the disability sector this was not geared towards ensuring sustainable or

inclusive programmes. The need to create awareness within the COCT SRA as well as the communities about visually impaired persons was considered a key step towards ensuring inclusion. Finally the participants felt a central unit to drive the process across all the districts along with a system of monitoring in order to increasing the levels of accountability to act for inclusion was imperative.

4.4 Theme: Revealing invisibility

The theme revealing invisibility captures the continuum between the pervasive mindset of difference that was manifested through the language used by participants and their implementation of programmes and current lack of attention to inclusion. Through exploring the lack of inclusion the recreation officers' tacit stance towards inclusion of visually impaired children in the Come and Play Programme were revealed.

The positions that the participants had originally assumed had contributed to the invisibility of visually impaired children as the participants focused on the differences as captured within the category of "Othering". The participants through this continued to distance themselves from visually impaired persons and thus created a lasting experience of invisibility for the recreation officers. The participants had not considered inclusion as an essential part of their programmes. The participants had focused primarily on providing programmes for those who were 'normal'. Significantly in determining who was normal and fell within this category the participants were drawn to using bodily differences as a criterion. Initially the participant's fixation on physically determining disability exacerbated the stereotyping that exists that if no impairment is visible it did not exist. In essence the early perceptions of the participants were that persons with disabilities were not normal and that everyone should be or wanted to be the 'same normal'.

The deaf is a person that wants to be seen as normal.

It was clear that the participant's responses to the inclusion of visually impaired children in their programmes were influenced by the limited parameters with which they understood visual impairment. This limited understanding of persons with visual impairments was further highlighted through the views that they were to be kept away from the rest of society making them less visible and highlighting any physical difference.

It's normally what we call Albino's it's just that we want to keep them away.....with disability as well we want to alienate we want to keep them away from us.....

As the participants continued to engage with the researcher and reveal their perspectives, shifts emerged. A dynamic developed whereby they began to articulate their views in a more succinct way that did not only focus on the differences that they saw in visually impaired persons. The view that '*they actually not different to us*' emerged as the participants started to recognize that VIP and their needs could be more obvious to them. This revealed the participants' capacities to consider contributing more actively to including visually impaired children in the Come and Play Programme.

Continued reflection on their views through participating in the study drew the participant's attention to the need for greater congruency between policy and implementation, something that had not concerned them significantly prior to engaging in the research. They voiced a need to reduce the invisibility of visually impaired children within the programme. The participants also acknowledged that there was greater possibility of this materializing through utilizing more methodical and structured programmes.

So then for me it would empowering us on working with the visually impaired, putting a structured training programme in place so that we are equipped so that we can almost speak on the same language and the structured detailed programme of what it is we can do and how it is.

As the participants continued to engage in the research process, they were drawn to assess how the current policies were contradicted by the lack of adequate implementation strategies to foster inclusion.

"To develop, promote and provide Sport and Recreation programmes in accordance with the strategic objectives of the City" (City of Cape Town, 2008: 8).

I can see that very little is being done especially from our side. The only time we get to work with them is when there is a event just that event that time you have to quickly organise check if there is anyone that qualifies for the event check and bring them in

Their insights led them to questioning how they, as recreation officers could reduce the invisibility of visually impaired children within the programme and their communities. During engaging in the research interview, they were able to highlight the incongruence between policies and implementation of ideas. As the participants proceeded to share their solutions and illuminating the pervading invisibility of visually impaired children ideas, possibilities arose through reflecting on.

Initially the participants had not considered inclusion and had shown their personal and structural barriers to the inclusion of visually impaired children to be too great to overcome. The participants had shown that their focus was on able bodied persons as they were more visible and vociferous about what their needs were.

at the moment the focus is on the abled, because the pressure is there because those guys they know exactly what they want, they are knocking at the door all the time

The participants changing views were then highlighted that the necessary changes to make the programme inclusive would only require a minimal effort. Three key areas of emphasis to break down the personal and structural barriers were then identified in order to increase the visibility of visually impaired children within their programmes: personal creativity, adaptation of activities, equipment, facilities and seeking additional support through funding.

A key area of inquiry had been the knowledge that the participants had about visually impaired children and sport. Significantly the participants placed an emphasis on the need to improve their knowledge and skills and alter their prevailing mindset of difference. The mindset that had created ideological challenges for the participants through wanting to be monitored in order to promote inclusion was being replaced with the want to improve knowledge and take greater control of inclusion. The diminished need for ensuring an inclusive programme that was not the result of being monitored started to make its way through the thoughts expressed. The re-imagining of visual impairment and the opportunities for inclusion and the role the participants played further contributed to breaking down the invisibility of visually impaired children.

Visually impaired children remained inconspicuous to the participants as their existing knowledge base and focus was limited as the participants had difficulty recognizing visually impaired children within their communities. The need to reduce the invisibility of visually impaired children was

also suggested through improving the awareness of programmes and developing an informative campaign.

but also creating awareness within our communities because we might have kids coming on our programmes but they might have a brother a sister a mother that's blind that's maybe you know their vision is not 100% but we are not aware of that .

In summary the participant's initial positioning suggested a clear distancing of visually impaired children from the programme and themselves and ensured they remained invisible to the programme and within their communities. It was evident that the exclusion remained as a result of unfair and untested assumptions of the participants. These views started to fade as the participants grew in insight and their understanding of what might be required to ensure the inclusion of visually impaired children dispelling the darkness with respect to recognizing the possibilities for transformative visibility to occur.

this excuse ag I don't have a school in my district but obviously there are kids living in this area that are visually impaired and then we can have a day, firstly we can see how we do it, activities on a smaller scale with them

if you bring that to the front and we have a open day and we have people like you guys come in and chat about people that are visually impaired, the awareness of the people that are visually impaired they actually not different to us

4.5 Conclusion

In presenting the findings, this chapter has illustrated that barriers to inclusion of visually impaired children in the Come and Play Programme are multifactorial. A major influence with respect to the inclusion resides with the approach and attitudes that are assumed by the recreation officers. Their lack of understanding of disability and how to adapt programmes for inclusion resulted in the othering of visually impaired children. With the lack of a planned and monitored approach to inclusion, participants were not compelled to act outside of what they deemed the instructions of their superiors to be. The constant focus on the visibility of an impairment and the manner of addressing these issues further raised concerns about the sensitization of the participants towards visually impaired children. It was also clear that irrespective of the physical and environmental

barriers identified by the participants, engaging in the interviews brought about the opportunity to reflect on the current state of inclusion not only within the Come and Play Programme but also other programmes the recreation officers were involved with. This opportunity for interaction created a platform for re-imagining the possibilities and for reducing the invisibility of visually impaired children in their programmes. In the next chapter a discussion of the findings will be presented utilizing the relevant literature to substantiate the transitions in perspectives that occurred during the study.

University of Cape Town

Chapter Five

Discussion

5.1 Introduction

This chapter elaborates on key issues that emerged in the findings (Chapter Four). Using literature to substantiate the findings, the discussion focuses on the value of reflection and dialogue as shown in the theme, Revealing invisibility. It explores how shifts from embedded ideologies focused on difference, occurred towards mindsets of the inclusion of visually impaired children within the Come and Play Programme.

5.2 Raising disability consciousness through transformative learning

Transformative learning (Mezirow, 1997) refers to the process of effecting change in one's frame of reference. Frames of reference consist of two dimensions, habits of mind and point of view. Habits of mind refer to the broad, habitual ways of thinking, feeling and acting. Points of view are the complex feelings, beliefs, judgments and attitudes towards specific groups. In ideal circumstances transformative learners are able to move towards more inclusive, self-reflective and integrative frames of reference (Mezirow, 1997).

Transformative learning may be used as a model of explaining the dynamic seen between the categories of othering and imagining inclusion. Transformative learning is a process in which three key descriptors are present (Baglieri, 2008). The three key descriptors of transformational learning are: reflection, making meaning and being agents of learning. Each descriptor acts as a catalyst for the next one and will be discussed sequentially below.

5.2.1 Reflection as a tool for learning

As the recreation officers participated in the research process it became apparent that they were engaging in the process of reflection. Reflection is embedded in different learning theories and is therefore expected to carry various meanings and significance across theories (Jordi, 2011). When reflecting during the interviews, the recreation officers synchronized their previously held beliefs with what they had experienced during the interview. In this way they formed a more stable view

of the world (Baglieri, 2008) and made sense of what had previously occurred. It was evident that they were not only learning something about the nature of the study, but also of themselves and the programmes they run (Control: 46).

The process of engaging in the interviews and the ensuing dialogue was an opportunity for freedom of expression and reflection taken by the recreation officers in a space where no judgment was held. The ability to express their views confidentially on a topic such as the congruency between implementation practices and policy allowed the recreation officers to create a platform to reflect on their previously held beliefs (Congruency: 45) and voice their understanding of diversity issues relating to disability. According to Rappaport (1995) creating spaces for listening to stories and reflection can act as an empowerment tool to effect change within community orientated organizations. The space for listening and reflection also generates the opportunity for a renewal of group identities (Rossing and Glowacki-Dudka, 2001). The recreation officers showed that as their views were listened to their narratives took on a more empowering and positive tone stating the possibilities for inclusion.

Burbules (1993 cited in Boys, 1999) contends that dialogue entails partners rather than adversaries. Three critical requirements for dialogue are required to effect positive change: participation, commitment and reciprocity. The recreation officers unintentionally embraced these requirements when engaging in the interviews. According to Nagda & Zuniga (2003 cited in Nagda, 2006) greater value can be attained from engaging in dialogue when participants value the process. It brings about improved views of their own identities as well as stimulating a greater want to overcome differences. The recreation officers grew in confidence and created a more assertive identity (Control: 46) through the dialogue and reflection. The recreation officers engaged voluntarily in the process as sensitive issues were raised while they exposed their feelings and motivations for action and inaction and future action. They also showed through engaging with the subject matter that they had come to an understanding and a sincere concern for the current state of affairs regarding the lack of inclusion.

The findings confirmed that a level of consciousness of broader disability issues was required in order to build more constructive relationships with visually impaired children and the community organizations serving them (Communication: 48). This required the recreation officers to see the

opportunities and create more avenues to promote social interaction with visually impaired children (Pivik, McComas and Laflamme, 2002). It is clear that relationships and understanding not only with others in the community but also between the participants could be built on through entering a process of dialogue as experienced through the research process.

Although benefit can be gained from engaging in the reflective process Page & Meerabeau (2000) noted that the process could bring about unexpected and counterproductive outcomes. The action meant to follow reflection should contain aspects of planning, managing and evaluating the impact of any change that occurs. Moreover if the reflector feels helpless within their position in an organization to effect change apathy may occur and the supposed learning would not come to fruition. The current situation places the recreation officers as subordinate to the plans of their managers and other superiors and they have no influence on the plans they should implement (Structural positioning: 38). They also consider that the reflector would have to confront challenges and their deeply held beliefs or have to confront colleagues as their views change. In order for the recreation officers to make a more meaningful contribution they would have to speak out about their need for greater control (Page & Meerabeau, 2000).

5.2.2 Making meaning of inclusion

When the recreation officers participated in the research process their focus shifted to considering how they could better facilitate inclusion. In the case of the understanding social and cultural models of disability and inclusion, the reflection during the process made the shifts in understanding come to light. Baglieri (2008) contends that meaning making occurs through drawing on personal experiences, identities and background knowledge. As the recreation officers were able to make better meaning of inclusion they placed themselves in a position to further influence the social and cultural understanding of disability within their organization. In order for cultural change to occur in organizations there needs to be encouragement for individuals to act for change. The recreation officers showed that they could engage in self- enquiry in order to make better sense of disability. This can be an intimidating process but holds valuable lessons and the new understandings could shape the learning that takes place throughout the organization. Individual reflection and meaning making that is shared in collective settings through story telling can serve to reduce the fears of individuals and shape a new consciousness (Terhune, 2006).

Wenger et al. (2002) proposes that communities of learning should be established within organizations to take advantage of the learning that occurs. This may result in either informal or formalized structures or groups but it is critical that they explore ideas, share common issues and act as sounding boards in order to understand what it is they are engaging with. In order for these communities to be successful they would need to contain reflective partners and people acting as sounding boards to make meaning and stimulate new thinking (Wenger et al., 2002). Sound leadership would be a prerequisite for knowledge development occurring through the process of community involvement (Murphy and Timmins, 2008).

5.2.3 Becoming agents of own learning

An individual becomes an agent of learning when they engage in experiences that cause them to alter their approaches and ways of thinking (Baglieri, 2008). As the recreation officers used their opportunity for reflection as they participated in the research process they started to explore voice and even change their views regarding the possibilities for inclusion of visually impaired children. The need to be active participants in planning, managing and the evaluation of their programmes could be further supported through the acceptance of their role as agents in their own learning.

The recreation officers structural positioning inadvertently cultured certain prejudices over time within the department as they rigidly followed organizational practices with no questioning of the appropriateness of the level of exclusion that existed (Structural positioning: 38). While recreation officers started to engage their thinking in a more autonomous manner they increasingly assumed responsibility for their contribution to inclusion and their learning (Mezirow, 1997). As a result of their perceptions that held more responsibility they appeared to realize that if they were not going to effect change it would not occur. (Congruency: 44). The recreation officers eventually became aware of a gap in their thinking and the need to manage the lack of inclusion as they acknowledged a level of personal responsibility. (Mezirow, 1997).

According to Boud, et al. (2006 cited in Murphy and Timmins, 2008) informal learning that takes place within the workplace has not yet received the adequate attention it requires with respect to the value it contributes to furthering the success of organizations. Individuals that act as agents of their own learning can contribute to the growth of the broader organization by being given the opportunity to engage in critical reflection and reflexivity. The opportunity could be reconstructed

to achieve similar outcomes with respect to understanding inclusion in different settings. Creating such opportunities through becoming agents of learning could generate new ways of thinking with regards to how the Come and Play Programme is run.

Calhoun (1995) considers that knowledge can be gained where people explore their social contexts by engaging and reflecting on their experiences. As personal learning takes place it is critical that knowledge is shared with others in order for any benefit to be attributed to the greater community. The recreation officers showed that as the theme of revealing invisibility came to the fore, they had started to learn more about their views and what they thought could be possible. Boud, et al. (2006 cited in Murphy and Timmins, 2008) stresses the importance that the emphasis on learning does not only reside within the individual but rather shared with the organization as a whole.

5.2.4 The dynamic between reflection, making meaning and being agents of learning

The three key descriptors informing transformative learning interact in a dynamic way with the potential to bring about change. According to Kolb (1984 cited in Baglieri, 2008) learning happens through a process of engaging in experiences in the world with the purpose of making meaning of these experiences. Reflection is the process of taking unrefined information and experiences and engaging in order to make sense of it (Mezirow, 1997). When an individual enters into this process of reflection and meaning making they then become their own change agent altering through their own assimilation and interpretation of events or experiences. This transformative learning that occurred did not only occur in relation to participants' engagement with the interview process but also on reflection of the policies that are in place. As they gained a better understanding of their views on inclusion they were able to review the policies with a disability lens in place. Grenier (2010) believes that the shift towards true inclusion requires a focus on highlighting possibilities that arise rather than continuing to be limited by the current means of operating.

5.3 Conclusion

Embracing transformative learning could further assist the objective of ensuring inclusive and accommodating sport and recreation programmes. It is not possible to implement inclusive policies without gaining sufficient understanding of disability issues. The recreation officers showed through their willingness to engage and their ability to imagine inclusion that they had the capacity to promote inclusion. There was no specific question asked that had prompted the

transformation that occurred but originated rather through the process of thinking about disability inclusion. Although the recreation officers showed the capacity to understand aspects of disability issues the current sport and recreation policy speaks very narrowly about the inclusion of persons with disabilities. It is critical then that the recreation officers and the COCT SRA gain a deeper understanding of disability in general as this could influence and promote the expansion of these narrow policies and objectives.

There was no specific question. The process of thinking about disability inclusion highlighted the transformation that

University of Cape Town

Chapter Six

Conclusion and Recommendations

6.1 Introduction

This final chapter presents the main conclusions of the research together with the recommendations.

6.2 Conclusion

The research sought to gain an understanding of the recreation officers' perceptions of their contribution to facilitating the inclusion of visually impaired children in the Come and Play Programme. It also sought to describe their perspective of the barriers to inclusion and identify their views on what could be done to facilitate the integration of visually impaired children into their programmes. The five recreation officers who participated in the study were based within five separate districts. The findings revealed one theme of "Revealing invisibility" made up of two categories, 'Othering' and 'Imagining inclusion'.

The study showed that disability conscientization has not yet reached a level of saturation within the COCT SRA. The recreation officers' limited extent of awareness and understanding of disability issues was evident throughout the interview process. The need to further capacitate the recreation officers' through improving their consciousness about disability issues was highlighted. Further to this, it is emphasized that conscientization¹⁴ should extend throughout the COCT SRA as inclusion should not be the sole responsibility of the recreation officers as implementers, but also those that direct them and plan the programmes for implementation.

However, since the recreation officers play a critical role in ensuring that programmes are delivered efficiently, having an in-depth understanding of disability should allow them to be more comfortable with the prospects of developing and implementing inclusive programmes. Through

¹⁴ Conscientization has been described by Paulo Freire as the process of developing critical awareness of one's social reality through reflection and action.

being conscientized the recreation officers should see that visual impairment does not have to be a barrier to participation. The recreation officers remain the key persons directly engaged in the delivery of programmes yet they are not sufficiently involved in the planning regarding programme content at a higher level. The cross district engagement of recreation officers has been limited and has led to different understandings of the purpose of the Come and Play Programme and has not been utilized to promote inclusion effectively.

The policies promoting inclusion have not truly fulfilled the expectations of ensuring inclusion. They cannot therefore be as meaningful as they are meant to be. The Come and Play Programme as a programme is meant to be an effective tool to promote inclusion of all children yet lacks the participation of children with disabilities. At the point of interpretation and implementation of these policies a disability lens/ perspective is lacking and has resulted in the continued exclusion of visually impaired children. The department has developed policies with good intentions but a limited understanding of the broader disability specific issues.

Knowledge generated within the organization will provide a greater sense of ownership and sincerity with respect to fostering inclusion and can easily be accessed and retrieved.

6.3 Limitations of the study

6.3.1. Scope of the study

The participants in this study were limited to only the Municipality of the City of Cape Town. The views expressed were thus not representative of other implementers of programmes or other recreation officers in neighboring municipalities (Flick, 2002). Thus the findings would be limited to the specific municipality.

6.3.2 Sampling and sample size

The inaccessibility of one of the participants was a direct limitation to the study that was dependent on such a small sample group (Gochros, 2008). An expansion into other municipalities might have required a broadening of the scope of the study but could have brought greater insight into the inclusion of visually impaired children into community recreation programmes. Nonetheless the study paves the way for future studies looking at the promotion of inclusion and participation of persons with disabilities in community sport and recreation programmes. The

findings, conclusions and recommendations can also be utilized by the COCT SRA to re-evaluate their current operations.

6.3.3 Data collection strategy

The face to face interviews required that an appointment be scheduled at the most convenient time for the participants. Cancellations and no shows result in a time consuming exercise for the researcher with no immediate benefit.

6.4 Recommendations

The recommendations are based on the conclusions that have been presented and will now be discussed.

6.4.1 Recommendations regarding policy on sport and recreation

The City of Cape Town Sports, Recreation and Amenities Department must consider firstly finalizing the draft sports and recreation policy in order to better guide those who work within the department on the objectives of the ensuring sport and recreation opportunities for all. Further input with respect to the disability sector should be sought to guide the input related to persons with disability.

6.4.2 Recommendations for the Come and Play Programme

The most critical intervention recommended is that related to the planning and implementation of the Come and Play Programme. The recreation officers should be more actively involved in the decisions related to what programmes they implement in order to allow for a greater sense of ownership and accountability. Disability specific training relating to adaptation and the procurement of specialized equipment is essential to promote inclusion. Improving the awareness of all staff within the department is a necessity.

The establishment of informal or formal opportunities for dialogue and reflection should be considered. The value of this was highlighted through the opportunity of engaging in the research where the value of the recreation officer's insights as they shared their understandings and perceptions allowed them to discover possible solutions for fostering inclusion.

Findings from this research have shown that the recreation officers felt they were in a position where they could only implement what programmes they were given and for various reasons were restricted to the implementation plans of which they were not the owners of. Allowing for greater input into the programme designs by the recreation officers would promote future opportunities for inclusion.

As no dedicated funding is available for adapted equipment this needs to be reviewed and the acquisition of specialized equipment must be considered within the districts. The need to engage with the disability sector is quite apparent as this would be another opportunity to get information about the needs of visually impaired persons within their communities.

Finally the recruitment of visually impaired volunteers, play leaders and staff should be considered in order to further promote inclusion through all levels within the COCT SRA.

6.4.3 Recommendations to the recreation officers

As the main implementers of programmes the recreation officers play a key role in ensuring that sport and recreation services are rendered to all. The need to be more proactive was identified with respect to taking control and responsibility for the implementation of programmes that are inclusive. Within the confines of the plans that are already drawn up, the need to adapt activities to include must be considered as crucial.

It is critical that the recreation officers share their views about issues such as disability and the implementation of specific programmes. The sharing of this knowledge will not only test their existing assumptions but will also contribute to the learning of others.

The active recruitment of persons with disabilities should be a priority with respect to community programmes and not only limited to special disability commemorative days. Drawing people to programmes cannot only be the responsibility of a policy document or a directive received. Improving relations with organisations that serve persons with disabilities should be considered.

Finally the recreation officers should lobby within their department for greater awareness programmes as well as the need for disability specific training as this should allay fears and misunderstandings currently held about inclusion of visually impaired children in the programmes.

6.4.4 Recommendations for future research

Currently the production of knowledge with regards to disability and sport within a South African context is limited. Within a disability context studies around visual impairment is even more limited. The early participation of children with disabilities in regular sports and recreation activities needs to be promoted and further research with respect to the constraints and possibilities needs to be explored. Stemming from this research, further investigation into the activity levels of visually impaired children could be considered through addressing the following areas/ questions:

What is the relationship between adolescent or adult activity levels of visually impaired children who have participated in a community sports and recreation programme like Come and Play?

What would the effect be of cross district planning and disability conscientizing on the participation levels of visually impaired children in community sports and recreation programmes?

What are the actions and learning outcomes that stem from further disability specific training within COCT SRA?

6.5 Conclusion

In this chapter, the main conclusions the researcher highlighted were explored as well as the recommendations made to the COCT SRAD, the recreation officers and for future research.

REFERENCES

- Abrams, D., Hogg, M. A. and Marques, J. M. 2005. A social psychological framework for understanding social inclusion and exclusion. (In Abrams, D., Hogg, M. A. and Marques, J. M. (eds.). *The social psychology of inclusion and exclusion*. New York: Psychology Press. p. 1-23.
- Akrami, N., Ekehammar, B., Claesson, M. and Sonnander, K. 2006. Classical and modern prejudice: Attitudes toward people with intellectual disabilities. *Research in Developmental Disabilities*, 27, 605-617.
- Asbjorn Neergaard, M., Olesen, F., Sand Andersen, R. and Sondegaard, J. 2009. Qualitative description, the poor cousin of health research? *BMC Medical Research Methodology*, 9 (52), 1-5.
- Ayvazoglu, N. R., Hyung-Kyoung, O. and Kozug, F. 2006. Explaining physical activity in children with visual impairments: a family approach. *Exceptional Children*, 2, 235-248.
- Baglieri, S. 2008. 'I connected': reflection and biography in teacher learning toward inclusion. *International Journal of Inclusive Education*, 12 (5-6), September-November, 585-604.
- Bailey, R. 2005. Evaluating the relationship between physical education, sport and social inclusion. *Educational Review*, 57 (1), 71-90.
- Barnes, C. 1998. The social model of disability: a sociological phenomenon ignored by sociologists. (In Shakespeare, T. (ed.). *The disability reader: social science perspectives*. Continuum International Publishing Group. p. 65-78.
- Barnes, C. 2003. 'Effecting change; disability, culture and art'? *Proceedings of the Finding the Spotlight Conference*, Liverpool Institute for the Performing Arts, 28-31 May, unit 2:1 - unit 2:21.
- Boys, M. 1999. Engaged pedagogy dialogue and critical reflection. *Teaching Theology and Religion*, 2 (3), 129-136.

Burns, N., Paterson, K. and Watson, N. 2009. An inclusive outdoors? disabled people's experiences of countryside leisure services. *Leisure Studies*, 28, (4), October, 403-417.

Burnes, R. C. and Graefe, A. R. 2007. Constraints to outdoor recreation: exploring the effects of disabilities on perceptions and participation. *Journal of Leisure Research*, 39 (1), 156-181.

Calhoun, C., 1995. *Critical Social Theory*. Blackwell: Oxford.

Capella-McDonnall, M. 2007. The need for health promotion for adults who are visually impaired. *Journal of Visual Impairment & Blindness*, March, 133-145.

City of Cape Town. *Sport and Recreation Policy*, 2008.

City of Cape Town. *Recreation Study, City of Cape Town, Research Report, January 2011*.

Clark, C. and McDonnell, A. P. 2008. Teaching choice making to children with visual impairments and multiple disabilities in preschool and kindergarten classrooms. *Journal of Visual Impairments & Blindness*, July, 397-409.

Cradock, A. L., Kawachi, I., Colditz, G. A., Gortmaker, S. L. and Buka, S. L. 2009. Neighbourhood social cohesion and youth participation in physical activity in Chicago. *Social Science & Medicine*, 68, 427-435.

Creswell, J.W. 2007. *Qualitative Inquiry & Research Design/ Choosing Among Five Approaches*. 2nd ed. California: Sage Publications.

Coleman, H. and Unrau, Y. A. 2008. Qualitative data analysis. (In Grinell. R. M. and Unrau, Y. A. (eds.), *Social Work Research and Evaluation: Foundations of Evidence-Based Practice*. Oxford: Oxford Press. p. 388-405.

Cortis, N. 2009. Social inclusion and sport: culturally diverse women's perspectives. *Australian Journal of Social Issues*, 44 (1), Autumn, 91-106.

Department of Health. 2002. *National guideline: prevention of blindness in South Africa*. Pretoria: Department of Health.

Department of Sport and Recreation. *The White Paper on Sport and Recreation: 2008*. Accessed from <http://www.info.gov.za/whitepapers/1998/sports.htm> [2009, August 14].

Department of Sport and Recreation. *The White Paper on Sport and Recreation: Final Draft June 2011*. Accessed from: <http://www.info.gov.za/view/DownloadFileAction?id=147261> [2011, October 19].

Disabled People South Africa. 2000. *Pocket guide on disability equity: an empowerment tool in support of the African decade of disabled persons 1st of January 1999 – 31st December 2009*. 1st Edition. Cape Town: DPSA Parliamentary Office.

Denzin, N. K. and Lincoln, Y. 1994. *Handbook of qualitative research*. Thousand Oaks: Sage Publications, Inc.

DePauw, K. P. and Gavron, S. J. 1995, *Disability and Sport*, Champaign, IL: Human Kinetics.

Desmond, C. and Boyce, G. 2006. A healthy attitude? (In Pillay, U., Roberts, B. and Rule, S. (eds.). *South African social attitudes: changing times, diverse voices*. Cape Town, HSRC Press. p. 200-224.

Devine, M. A. 2004. "Being a 'doer' instead of a 'viewer'": the role of inclusive leisure contexts in determining social acceptance for people with disabilities. *Journal of Leisure Research*, 30 (2), 137-159.

De Vos, A. S., Strydom, H., Fouche, C. B. & Delport, C. S. L. 2011. *Research at grass roots for the social sciences and human services professions*, 4th ed. Pretoria. Van Schaik.

Elling, A. and Claringbould, I. 2005, Mechanisms of inclusion and exclusion in the Dutch sports landscape: who can and wants to belong? *Sociology of Sport Journal*, 22, 498-515.

Elling, A. and Knoppers, A. 2005, Sport, gender and ethnicity: practices of symbolic inclusion/exclusion. *Journal of Youth and Adolescence*, 34 (3), 257-268.

Emerson, R. M. 2004. Working with 'key indicators'. (In Seale, C., Gobo, G., Gubrium, J. F. and Silverman, D. (eds.). *Qualitative research practice: concise paperback edition*. London: Sage Publications. p. 427-442.

Finkelstein, V. 1993. Disability: a social challenge or an administrative responsibility. (In Swain, J., Finkelstein, V., French, S. & Oliver, M. (eds.). *Disabling Barriers- Enabling Environments*. London: Sage Publications, Ltd. p. 34-59.

Finkelstein, V. 2005. Reflections on the social model of disability: The South African connection. Accessed from <http://www.leeds.ac.uk/disability-studies/archiveuk/finkelstein/Reflections%20on%20the%20Social%20Model%20of%20Disability.pdf> [2011, November, 25].

Flick, U. 2002. *An Introduction to Qualitative Research*, London: Sage Publications.

Flick, U. 2006. *An introduction to qualitative research*. 3rd ed. London: Sage Publications, Inc.

French, S. 1993. Disability, impairment or something in between? (In Swain, J., Finkelstein, V., French, S. & Oliver, M. (eds.). *Disabling Barriers- Enabling Environments*. London: Sage Publications, Ltd. p. 17-25.

Greef, M. 2005. Information collection: interviewing. (In De Vos, A. S., Strydom, H., Fouche, C. B. & Delport, C. S. L. (eds.). *Research at grass roots for the social sciences and human services professions*, 3rd ed. Pretoria. Van Schaik.

Gochoros, H. 2008. Qualitative Interviewing. (In Grinell Jr. R. M and Unrau, Y. A (eds.), *Social Work Research and Evaluation: Foundations of Evidence-Based Practice*. Oxford: Oxford Press. p. 239-264.

Good, G. A., LaGrow, S. and Alpass, F. 2008. An age cohort-study of older adults with and without visual impairments: activity, independence, and life satisfaction. *Journal of Visual Impairment & Blindness*, September, 517-527.

Goreczny, A. J., Bender E. E., Caruso G. and Feinstein C. S. 2011. Attitudes toward individuals with disabilities: Results of a recent survey and implications of those results. *Research in Developmental Disabilities*, 32, 1596-1609.

Gray C. 2005a. Training and the early years professional: understanding visual impairment. *International Journal of Early Years Education*, 13 (1), March, 1-12.

Gray C. 2005b. Inclusion, impact and need: young children with visual impairment. *Child Care in Practice*, 11 (2), April, 179-190.

Grenier, M. 2010. Moving to inclusion: a socio-cultural analysis of practice. *International Journal of Inclusive Education*, 14 (4), 387-400.

Grove, N. J. and Zwi, A.B. 2006. Our health and theirs: forced migration. othering, and public health. *Social Science & Medicine*, 62, 1931-1942.

Hebl, M. R. and Kleck, R. E. 2000. The social consequences of physical disability. (In Hetherington, T. F., Kleck, R. E., Hebl, M. R. And Hull, J. G. (eds.). *The Social Psychology of Stigma*. New York: The Guilford Press. p. 419-439.

Henderson, K. A. 2009. A paradox of sport management and physical activity interventions. *Sport Management Review*, 12, 57-65.

Holbrook, E. A., Caputo, J. L., Perry, T. L., Fuller, D. K. and Morgan, D. W. 2009. Physical activity, body composition, and perceived quality of life of adults with visual impairments. *Journal of Visual Impairment & Blindness*, January, 17-29.

Homan, R. 1991. *The Ethics of Social Research*. London: Longman.

Howell, C., Chalklen, S. and Alberts, T. 2006. A history of the disability rights movement in South Africa. (In Watermeyer, B., Swartz, L., Lorenzo, T., Schneider, M. and Priestley, M. (eds.). *Disability and Social Change*. Cape Town, HSRC Press. p. 45-84.

Hurst, R. 1999. Disabled people's organisations and development. (In Stone, E. (ed.). *Disability and development: learning from action and research on disability in the majority world*. Leeds: The Disability Press. p. 25-35.

Ivanoff, A., Blythe, B. and Walters, B. 2008. The Ethical Conduct of Research. (In Grinell Jr. R. M and Unrau, Y. A (eds.), *Social Work Research and Evaluation: Foundations of Evidence-Based Practice*. Oxford: Oxford Press. p. 29-59.

Jordi, R. 2011. Reframing the concept of reflection: consciousness, experiential learning, and reflective learning practices. *American Association for Adult and Continuing Education*, 61 (2), 181-197.

Kantomaa, M. T., Tammelin, T. H., Nayha, S. and Taanila, A. M. 2007. Adolescents' physical activity in relation to family income and parents' education. *Preventive Medicine*, 44, 410-415.

Kef, S. and Dekovic, M. 2004. The role of parental and peer support in adolescent's well-being: a comparison of adolescents with and without a visual impairment. *Journal of Adolescence*, 27, 453-466.

Kef, S., Hox, J. J. and Habekothé, H. T. 2000. Social networks of visually impaired and blind adolescents. Structure and effect on well-being. *Social Networks*, 22, 73-91.

LHR. (Lawyers for Human Rights). (1992). *Disability Rights Charter of South Africa*. Johannesburg. LHR.

Lieberman, L. 2002. Fitness for individuals who are visually impaired or deafblind. *Re: view*, 34 (1), 13-23.

Lieberman, L. J., Houston-Wilson, C. and Kozub, F. 2002. Perceived barriers to including students with visual impairments and blindness in physical education. *Adapted Physical Quarterly*, 19, 364-377.

Lieberman L. J. and MacVicar J. M. 2003. Play and recreational habits of youths who are deaf-blind. *Journal of Visual Impairment & Blindness*, December, 755-768.

Lieberman, L.J and Wilson, S. 2005. Effects of a sports camp practicum on attitudes towards children with visual impairments and deafblindness. *Re: view*, 36 (4), 141-153.

Lincoln, Y. S. and Guba, E. G. 1985. *Naturalistic inquiry*. Thousand Oaks, California: Sage.

Lorenzo, T., ka Toni, M. and Priestley, M. 2006. Developing a disability studies programme: engaging activism and academia for social change. (In Watermeyer, B., Swartz, L., Lorenzo, T., Schneider, M. and Priestley, M. (eds.). *Disability and Social Change*. Cape Town, HSRC Press. p. 179-191.

Mbalula, F. 2011. Foreword in, *The National Department of Sport and Recreation Sport and Recreation South Africa Strategic Plan 2008-2012*. Accessed from <http://www.srsa.gov.za/ClientFiles/SRSA%20Strategic%20Plan%202008-2012%2012%20May%2008.pdf> [2011, November 25].

Macbeth, J. L. 2009. Restrictions of activity in partially sighted football: experiences of grassroots players. *Leisure Studies*, 28 (4), October, 455-467.

Marshall, J., Ralph, S. and Palmer, S. 2002. 'I wasn't trained to work with them': mainstream teacher's attitudes to children with speech and language difficulties. *International Journal of Inclusive Education*, 6, (3), 199-215.

Mason, J. 2002. *Qualitative researching*, 2nd ed. London: Sage.

Matsebula, S., Schneider, M. and Watermeyer, B. 2006 (In Watermeyer, B., Swartz, L., Lorenzo, T., Schneider, M. and Priestley, M. (eds.). *Disability and social change*. Cape Town, HSRC Press. p. 84-92.

Mezirow, J. 1997. Transformative learning: theory to practice. *New Directions for Adult and Continuing Education*, 74, Summer, 5-12.

Millar, J. 2007. Social exclusion and social policy research: defining exclusion. (In Abrams, D., Christian, J and Gordon, D. (eds.). *Multidisciplinary handbook of social exclusion research*. West Sussex: John Wiley & Sons, Ltd. p.1-15.

Murphy, F., Timmins, F., Experience based learning (EBL): exploring professional teaching through critical reflection and reflexivity, *Nurse Educ. Pract.* (2008), doi:10.1016/j.nepr.2008.05.002.

Nagda, B. A. 2006. Breaking barriers, crossing borders, building bridges: communication processes in intergroup dialogues. *Journal of Social Issues*, 62 (3), 553-576.

O'Connell, M., Lieberman, L. J. and Petersen, S. 2006. The use of tactile modelling and physical guidance as instructional strategies in physical activity for children who are blind. *Journal of Visual Impairment and Blindness*. August, 71-477.

Office of the Deputy President, 1997, *The White Paper on an Integrated National Disability Strategy*. Western Cape: Rustica Press.

Oliver, M. 1993. Re-defining disability: a challenge to research. (In Swain, J., Finkelstein, V., French, S. & Oliver, M. (eds.). *Disabling Barriers- Enabling Environments*. London: Sage Publications, Ltd. p. 61-68.

Oliver, M. 1996. *Understanding Disability: From Theory to Practice*. London: MacMillan Press Ltd.

Orb, A. Eisenhauer, L. and Wynaden, D. Ethics in Qualitative Research, *Journal of Nursing Scholarship*, 33 (1), 93-96.

Owens, J. 2009. The influence of 'access' on social exclusion and social connectedness for people with disabilities. (In Taket, A., Crisp, B. R., Nevill, A., Lamaor, G., Graham, M. and Barter-Godfrey, S. (eds.). *Theorising Social Exclusion*. London: Routledge. p.78-86.

Page, S. and Meerabeau, L. 2000. Achieving change through reflective practice: closing the loop. *Nurse Education Today*, 20, 365-372.

Patton, Q. M. 2002. *Qualitative Research & Evaluation Methods*. 3rd ed. California: Sage Publications.

Pivik, J., McComas, J. and Laflamme, M. 2002, Barriers and facilitators to inclusive education. *Exceptional Children*, 69, 97-107.

Ponchillia, P. E., Armbruster, J. and Wiebold, J. 2005. The national sports education camps project: introducing sports skills to students with visual impairments through short-term specialized instruction. *Journal of Visual Impairments & Blindness*, November, 685-695.

Priestley, M. 1999. *Disability and Politics and Community Care*. London: Jessica Kingsley Publishers.

Rappaport, J. (1995). Empowerment meets narrative: Listening to stories and creating settings. *American Journal of Community Psychology*, 23(5), 795-807.

Republic of South Africa, 1996, Constitution of the Republic of South Africa, Pretoria, Government Press.

Rillotta, F. and Nettlebeck, T. 2007. Effects of an awareness program on attitudes of students without an intellectual disability towards persons with an intellectual disability. *Journal of Intellectual & Developmental Disability*, 31 (1), 19-27.

Rimmer, J. H., Riley, B., Wang, E., Rauworth, A. and Jurkowski, J. 2004. Physical activity participation among persons with disabilities barriers and facilitators. *American Journal of Preventive Medicine*, 26 (5), 419-425.

Robinson, B. L. and Lieberman, L. J. 2004. Effects of visual impairment, gender, and age on self-determination. *Journal of Visual Impairment & Blindness*, June, 351-366.

Roemmich, J. N., Epstein, L. H., Raja, S., Yin, L., Robinson, J. and Winiewicz, D. 2006. Association of access to parks and recreational facilities with the physical activity of young children. *Preventive Medicine*, 43, 437-441.

Rossing, B. and Glowacki-Dudka, M. Inclusive community in a diverse world: pursuing and elusive goal through narrative-based dialogue. *Journal of Community Psychology*, 29 (6), 729-743.

Rowland, W. 2008. Blindness, poverty and development [Paper], World Blind Union.

Rubin, H. J. and Rubin, I. S. 1995. *Qualitative interviewing the art of hearing data*, Thousand Oaks: Sage Publications.

Sandelowski, M. 2000. Whatever happened to qualitative description? *Research in Nursing & Health*, 23, 334-340.

Schurink, W., Fouche, C. B. and De Vos, A. S. 2011. Qualitative data analysis and interpretation. (In De Vos, A. S., Strydom, H., Fouche, C. B. & Delport, C. S. L. (eds.). *Research at grass roots for the social sciences and human services professions*, 4th ed. Pretoria. Van Schaik. p.397-423.

Schutt, R. K. 2008. Sampling. (In Grinell, R. M. and Unrau, Y. A. (eds.), *Social Work Research and Evaluation: Foundations of Evidence-Based Practice*. Oxford: Oxford Press. p. 135-156.

Shakespeare, T, (ed), 1998. *The Disability Reader*. London: Cassell.

Shapiro, D. R., Moffett, A., Lieberman, L. and Dummer, G. M. 2005. Perceived competence of children with visual impairments. *Journal of Visual Impairment & Blindness*, January, 15-25.

Shenton, A. K. 2004. Strategies for ensuring trustworthiness in qualitative research projects. *Education for Information*, 22, 63-75.

Sieber, J. E. 1992. *Planning Ethically Responsible Research: A Guide for Students and Internal Review Boards*. California: Sage Publications, Inc.

Silverman, D. 2000. *Doing Qualitative research: A Practical Handbook*. London: Sage Publications, Ltd.

Stone, E. 1999. Disability and Development in the Majority World. (In Stone. E. (ed.), *Disability and Development: Learning from action and research on disability in the majority world*. Leeds. p. 1-18.

Statistics South Africa. 2005. *Prevalence of disability in South Africa Census 2001*. Pretoria: Statistics South Africa.

Stevens-Ratchfors, R. and Kraus, A. 2004. Visually impaired older adults and home-based leisure activities: the facts of person-environment congruence. *Journal of Visual Impairment & Blindness*, January, 14-27.

Stofile, M. 2008. Foreword in *The National Department of Sport and Recreation Sport and Recreation South Africa Strategic Plan 2008-2012*. Accessed from <http://www.srsa.gov.za/ClientFiles/SRSA%20Strategic%20Plan%202008-2012%202012%20May%2008.pdf> [2009, August 14].

Stuart, M. E., Lieberman, L. J. and Hand, K. E. 2006. Beliefs about physical activity among children who are visually impaired and their parents. *Journal of Visual Impairment & Blindness*, 223-234.

Taket, et al., 2009. The individual's experience. (In Taket, A., Crisp, B. R., Nevill, A., Lamaor, G., Graham, M. and Barter-Godfrey, S. (eds.). *Theorising social exclusion*. London: Routledge. p. 12-22.

Terhune, C. P. 2006. "Can we talk" using critical self-reflection and dialogue to build diversity and change organizational culture in nursing schools. *Journal of Cultural Diversity*, 13 (3), 141-145.

The Belmont Report. Ethical Principles and Guidelines for the Protection of Human Subjects of Research. The National Commission for the Protection of Human Subjects of Biomedical and Behavioral Research. April 18, 1979.

Thomas, C. 2004. Developing the social relational in the social model of disability: a theoretical agenda. (In Barnes, C and Mercer, G. (eds.). *Implementing the social model of disability: Theory and research*. Leeds: The Disability Press. p. 32-47.

Thorne, S. 1991. Methodological orthodoxy in qualitative nursing research: analysis of the issues. *Qualitative Health Research*, 1, 178-179.

Thorne, S., Kirkham, S. R. and O'Flynn-Magee. 2004. The analytic challenge in interpretative description. *International Journal of Qualitative Methods*, 3 (1), 1-21.

Tobin, G. A. and Begley, C. M. 2004. Methodological rigour within a qualitative framework. *Methodological Issues in Nursing Research*, 388-396.

Trauth, E. M. and Howcroft, D. 2006. Social inclusion and the information systems field: why now? (In Trauth, E., Howcroft, D., Butler, T., Fitzgerald, D. and De Gross, J. I. (eds.). *Social inclusion and organizational implications for information systems*. New York: Springer. p. 3-12.

Trost, S. G. and Loprizini, P. D. 2008. Exercise- promoting healthy lifestyles in children and adolescents. *Journal of Clinical Lipology*, 2, 162-168.

Tucker, P., Irwin, J. D., Gilliland, J., He, M., Larsen, K. and Hess, P. 2009. Environmental influences on physical activity levels in youth. *Health & Place*, 15, 357-363.

United Nations, 1989. Convention on the Rights of the Child. Geneva: United Nations.

United Nations, 2003. *Sport for Development and Peace: Towards Achieving the Millennium Development Goals. Report from the United Nations Inter-Agency Task Force on Sport Development and Peace*. Geneva: United Nations.

United Nations, 2006. The Convention on the Rights of Persons with Disabilities. Geneva: United Nations.

Whalley Hammell, K. 2006. *Perspectives on disability & rehabilitation*. Churchill Livingstone: Elsevier.

Wenger, E., McDermott, R., and Synder, W.M., 2002. *A guide to managing knowledge cultivating communities of practice*. Harvard Business School Press, Boston Massachusetts.

Williams, M., Unrau, Y. A. and Grinell, R. M. 2008. The qualitative research approach. (In Grinell, R. M and Unrau, Y. A (eds.), *Social Work Research and Evaluation: Foundations of Evidence-Based Practice*. Oxford: Oxford Press. p. 83-101.

Wiskochil, B., Lieberman, L. J., Houston-Wilson, C. and Petersen, S. 2007. The effects of trained peer tutors on the physical education of children who are visually impaired. *Journal of Visual Impairment and Blindness*, 339-350.

World Health Organisation, 2011. Fact Sheet, Visual impairment and blindness. Accessed from <http://www.who.int/mediacentre/factsheets/fs282/en/> [2011, November, 19]

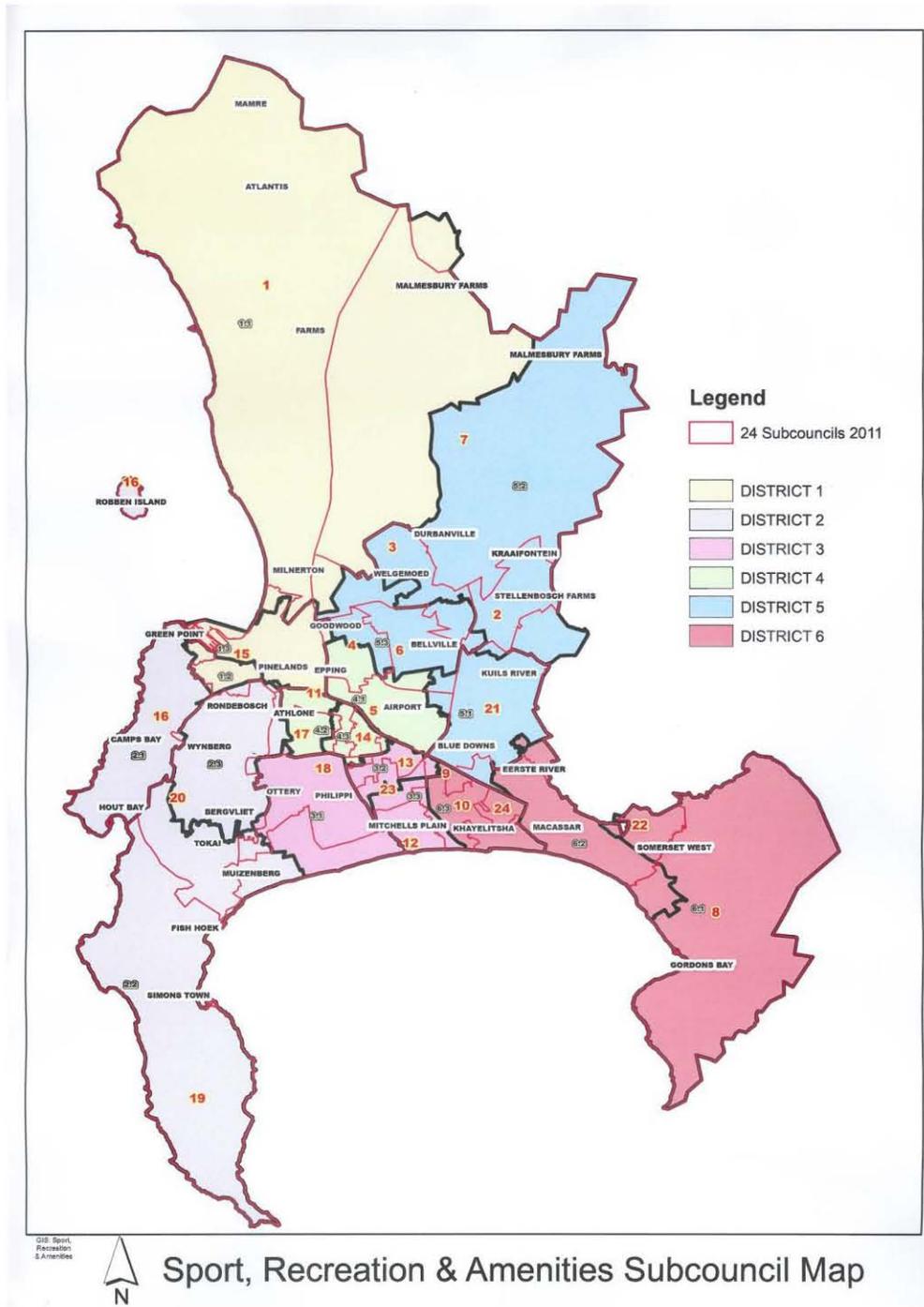
Wong, S. and Cumming, T. 2010. Family day care is for normal kids: facilitators and barriers to the inclusion of children with disabilities in family day care. *Australian Journal of Early Childhood*, 35 (3), 4-12.

Yazbeck, M., McVilly, K. and Parmenter, T. R. 2004. Attitudes toward people with intellectual disabilities: an Australian perspective. *Journal of Disability Policy Studies*, 15, (2), 97-111.

University of Cape Town

APPENDICES

Appendix 1: COCT SRA DISTRICTS



Appendix 2:

Email correspondence with COCT Director Sport, Recreation and Amenities

Dear Armand

My time is extremely tight these days and in this period in particular. I am going to ask Donny to have an interview with you. I am doing this for two reasons (1) I am a relative of yours and a neutral person giving the departmental position or lack thereof would be much more palatable for me and (b) my time is limited during official working hours and I do not want to delay you in this process.

Donny please can you check on your availability for this.

Regards

Gert Bam

Director : Sport Recreation and Amenities

From: Armand Bam [<mailto:armand@lofob.org.za>]

Sent: Friday, March 12, 2010 10:20 AM

To: Gert Bam

Subject: Master's Thesis

Dear Sir

I am a Master's student at the University of Cape Town intending to conduct a research thesis in fulfillment of the requirements towards the degree MPhil Disability Studies.

The proposed thesis is titled:

“The perceptions of recreation officers towards the inclusion of visually impaired children within the Come and Play Programme of the City of Cape Town”

The study will explore the perceptions of the recreation officers facilitating the Come and Play Programme through two interviews. The overarching purpose is to extract the voices of the recreation officers to highlight the barriers to inclusion and the opportunities that exist with relation to visually impaired and blind children within the Come and Play Programme. It will also explore the recommendations that the recreation officers might have with regards to fostering inclusion. The significance of the study is that it will provide further insight to the barriers to inclusion within community sport and recreation programmes for visually impaired children.

Your participation in this study is of utmost importance and I therefore request an opportunity to discuss this matter further with you. The study will go towards furthering the body of knowledge regarding inclusion in community sport and recreation programmes for persons with disabilities. I would truly appreciate if you or a representative from your department would be open to discussing this matter further with me. I am available to meet at your earliest convenience.

Kind regards,

Armand Bam

Appendix 3:
Email to participant

Dear.....,

Just to confirm our appointment after our telephonic conversation this morning, I have attached an information letter containing details of the study. Please let me know if you have any queries. We will discuss the informed consent form when we meet.

Kind regards,

Armand Bam

Attached interview information letter:

University of Cape Town

Attached to E-mail: Interview Information Letter

Dear Participant

This letter serves as an invitation for your participation in a study that I, Armand Bam am conducting in fulfilment of a degree, Masters in Philosophy: Disability Studies through the department of Health and rehabilitation Sciences at the University of Cape Town. Ethical approval to conduct this study has been obtained from the Research Ethics Committee of the Faculty of Health Sciences, University of Cape Town (REC REF 124/2010).

Research Title

“The perceptions of recreation officers toward the inclusion of visually impaired children within the Come and Play Programme of the City of Cape Town”

Research Aims

The research aims to capture the perceptions of recreation officers of their contributions to including visually impaired and blind children in the Come and Play programme in order to inform the City of Cape Town Sport and Recreation Department of possible interventions to facilitate the inclusion of blind and visually impaired children in the programme.

The research findings will be made available to the COCT SRA Department to support with efforts to further the inclusion of blind and visually impaired children in mainstream community programmes.

Methodology

The study will take the form of two separate interviews with you that will be conducted at your district office. Each interview will require at least one hour of your time. The interviews will be recorded on a portable digital audio recorder. The interviews will be saved in an audio format and stored on an external hard drive. Your participation is voluntary and no remuneration will be awarded for participating in this study. All information gathered through the study will be treated as confidential and not disclosed without your consent. No inherent risks are associated with participating in this study. The information gained through the study will be available to all

participants and the COCT SRA Department to assist further with the inclusion of visually impaired children with the sport and recreation programmes.

Note that

Participation in the study is voluntary and you may at any point opt to withdraw from the study if you so wish without any prejudice against you. All information gathered and provided by you will be confidential and the study has no known risks. All identities of the participants will remain anonymous. No sensitive information will be published without your prior consent.

If you require further clarification, please feel free to contact me at any point. The interview will take place for an hour and I may require additional time to gather more information at a later stage.

Thank you in advance for considering to participate in this study and I look forward to further engaging you on your acceptance.

Yours sincerely,

Armand Bam

Tel: [REDACTED]; Fax: [REDACTED]

Mobile: [REDACTED]; Email: armand@lofob.org.za

Supervisor: Mrs. Roshan Galvaan

Tel: [REDACTED]

E-mail: Roshan.Galvaan@uct.ac.za

Appendix 4

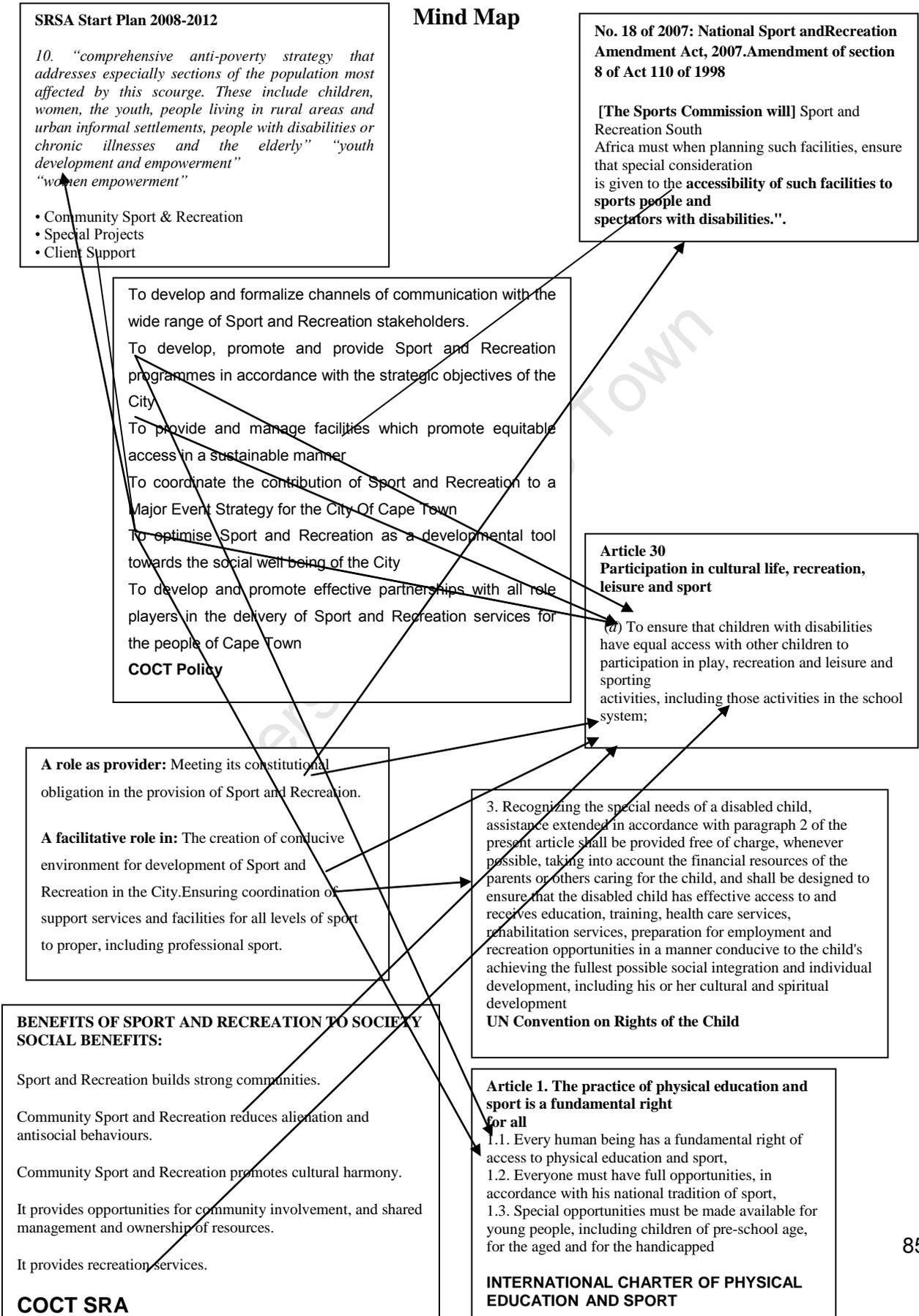
Semi-structured interview

Interview Questions

1. For how long have you been a recreation officer involved with the Come and Play Programme?
2. What can you tell me about the participation of visually impaired and blind children in the current Come and Play Programme?
3. What do you consider the barriers to including visually impaired and blind children to be within the Come and Play Programme and describe them?
4. How do you think blind and visually impaired children could be suitably accommodated in the Come and Play Programme?
5. What initiatives or policies are you aware of any that are in existence that are meant to ensure the participation of visually impaired and blind children in any recreation programmes?
6. What could the City of Cape Town Sport and Recreation Department do to further promote inclusion of blind and visually impaired children in their programmes?
7. What could visually impaired and blind children and their care-givers do to ensure that they too can participate in the community based programmes?
8. What do you see as your role in facilitating the inclusion of visually impaired children into sport and recreation programmes?

Appendix Five

Mind Map



SRSA Start Plan 2008-2012

10. "comprehensive anti-poverty strategy that addresses especially sections of the population most affected by this scourge. These include children, women, the youth, people living in rural areas and urban informal settlements, people with disabilities or chronic illnesses and the elderly" "youth development and empowerment" "women empowerment"

- Community Sport & Recreation
- Special Projects
- Client Support

No. 18 of 2007: National Sport and Recreation Amendment Act, 2007. Amendment of section 8 of Act 110 of 1998

[The Sports Commission will] Sport and Recreation South Africa must when planning such facilities, ensure that special consideration is given to the **accessibility of such facilities to sports people and spectators with disabilities.**"

To develop and formalize channels of communication with the wide range of Sport and Recreation stakeholders.

To develop, promote and provide Sport and Recreation programmes in accordance with the strategic objectives of the City

To provide and manage facilities which promote equitable access in a sustainable manner

To coordinate the contribution of Sport and Recreation to a Major Event Strategy for the City Of Cape Town

To optimise Sport and Recreation as a developmental tool towards the social well being of the City

To develop and promote effective partnerships with all role players in the delivery of Sport and Recreation services for the people of Cape Town

COCT Polity

Article 30 Participation in cultural life, recreation, leisure and sport

(a) To ensure that children with disabilities have equal access with other children to participation in play, recreation and leisure and sporting activities, including those activities in the school system;

A role as provider: Meeting its constitutional obligation in the provision of Sport and Recreation.

A facilitative role in: The creation of conducive environment for development of Sport and Recreation in the City. Ensuring coordination of support services and facilities for all levels of sport to proper, including professional sport.

3. Recognizing the special needs of a disabled child, assistance extended in accordance with paragraph 2 of the present article shall be provided free of charge, whenever possible, taking into account the financial resources of the parents or others caring for the child, and shall be designed to ensure that the disabled child has effective access to and receives education, training, health care services, rehabilitation services, preparation for employment and recreation opportunities in a manner conducive to the child's achieving the fullest possible social integration and individual development

UN Convention on Rights of the Child

BENEFITS OF SPORT AND RECREATION TO SOCIETY SOCIAL BENEFITS:

Sport and Recreation builds strong communities.

Community Sport and Recreation reduces alienation and antisocial behaviours.

Community Sport and Recreation promotes cultural harmony.

It provides opportunities for community involvement, and shared management and ownership of resources.

It provides recreation services.

COCT SRA

Article 1. The practice of physical education and sport is a fundamental right for all

1.1. Every human being has a fundamental right of access to physical education and sport,

1.2. Everyone must have full opportunities, in accordance with his national tradition of sport,

1.3. Special opportunities must be made available for young people, including children of pre-school age, for the aged and for the handicapped

INTERNATIONAL CHARTER OF PHYSICAL EDUCATION AND SPORT

Appendix Six

Audit Trail

COCT SRA

5/08/2009: E-mail Director SRA: preliminary investigation asking if there is a sport and recreation policy. No immediate response

11/08/2009: Follow E-mail requesting information about policy document - no response received.

12/08/2009: Received E-mail and policy document attached from PA to Director

13/08/2009: Telephone call to Manager Special Operations query about the status of policy discussed-policy not finalised still working document.

12/03/2010: E-mail Director SRA: requesting opportunity to meet and discuss study. No response

17/03/ 2010: E-mail follow up requesting opportunity to meet and conduct the study. No response

19/03/2010: E-mail follow up as no response received

19/03/2010: E-mail received, referring that the matter had been referred to the Manager Special Operations to assist further with study.

22/03/2010: Meeting with Manager Special Operations. Discuss the details of study and the way forward.

25/03/2010: E-mail from Manager Special Operations to all recreation departments indicating that a study will take place. Forwarding initial E-mail indicating the study details.

25/03/2010: 4 E-mail responses received on day indicating they would be willing to engage further

25/03/2010: Responded to E-mails requesting opportunity to meet and discuss further participation. First appointment scheduled for 09/04/2010

12/04/2010: Appointment rescheduled. Sent information letter via E-mail to participants prior to meeting. Informed consent to be discussed and signed prior to commencing with interviews if they are willing to continue.

Interviews

13/04/2010: First interviewee: Meeting in boardroom (will be no disturbance). Introduce self. Discussed the information letter, study, why the topic. Time to respond to any questions. Explain informed consent and that interviews to be recorded digitally. Participant consents. Start interview. Follow interview guide. Conclude interview with thanks and any further questions. Download interview and save electronically.

29/04/2010: Second interviewee: Meeting in office. Introduce self. Discussed the information letter, study, why the topic. Time to respond to any questions. Explain informed consent and that interviews to be recorded digitally. Participant consents. Start interview. Follow interview guide. Conclude interview with thanks and any further questions. Download interview and save electronically.

29/04/2010: Telephone other recreation officers, informed that not all have working E-mail.

06/05/2010: Third interviewee: Meeting in office. Introduce self. Discussed the information letter, study, why the topic. Discussed past blind cricket tournament. Answered questions. Explain informed consent and that interviews to be recorded digitally. Participant consents. Start interview. Follow interview guide. Conclude interview with thanks and any further questions. Download interview and save electronically.

11/05/2010: Fourth interviewee: Meeting in office. Introduce self. Discussed the information letter, study, why the topic. Time to respond to any questions. Explain informed consent and that interviews to be recorded digitally. Participant consents. Start interview. Follow interview guide. Conclude interview with thanks and any further questions. Download interview and save electronically. Receive call from participant, discussed next interview after collection of all others and then will be contacted.

12/05/2010: Fifth interviewee: Meeting in office. Introduce self. Discussed the information letter, study, why the topic. Time to respond to any questions. Explain informed consent and that

interviews to be recorded digitally. Participant consents. Start interview. Follow interview guide. Conclude interview with thanks and any further questions. Download interview and save electronically. Participant informs that will be difficult to meet soon as soccer World Cup will have them occupied for a while. Researcher confirms that will be a while till data transcribed and need for second interviews.

09/06/2010: Interview for final participant scheduled but cancelled.

Second interviews

26/10/2010: First interviewee: Meeting in boardroom again. Ask for clarification about what was previously said in interview respond to questions raised. Check that previous recording was accurate. Discuss specific points highlighted in interview. Conclude interview with thanks and any further questions. Download interview and save electronically.

2/11/2010: Third interviewee: Meeting in office. Ask for clarification about what was previously said in interview respond to questions raised. Check that previous recording was accurate. Discuss specific points highlighted in interview. Conclude interview with thanks and any further questions. Download interview and save electronically.

Fifth interviewee: Meeting in office. Ask for clarification about what was previously said in interview respond to questions raised. Check that previous recording was accurate. Discuss specific points highlighted in interview. Conclude interview with thanks and any further questions. Download interview and save electronically.

3/11/2010: Second interviewee: Meeting in boardroom again. Ask for clarification about what was previously said in interview respond to questions raised. Check that recording was accurate. Discuss specific points highlighted in interview. Conclude interview with thanks and any further questions. Download interview and save electronically.

Fourth interviewee: Meeting in boardroom again. Ask for clarification about what was previously said in interview respond to questions raised. Check that recording was accurate. Discuss specific points highlighted in interview. Conclude interview with thanks and any further questions. Download interview and save electronically.

Appendix 7

Informed Consent

I have received the letter of information and understand the information about the study being conducted by Armand Bam in fulfilment of the requirements of the degree Master in Philosophy: Disability Studies at the University of Cape Town.

I am aware that parts of the interviews may be included in the research. I have been informed of the fact that I may at anytime withdraw my consent to participate. I have been informed that my participation is voluntary and may withdraw from the study at anytime I wish without any prejudice. I have been informed that all information will be confidential and the study has no known risks. I am aware that the raw data collected will be stored safely for six months thereafter destroyed. No sensitive information will be published without my permission. All participants' identities will remain anonymous.

I have been informed that I am free to contact the researcher to seek any clarification with regards to the study if I deem it necessary.

With full knowledge and understanding of all above, I agree to participate in this study by my own free will.

Participant Name: _____ (Please print)

Signature confirming participation: _____

Date: _____

Researcher contact details: Armand Bam Tel: [REDACTED] fax: [REDACTED] Mobile: [REDACTED]

Email: armand@lofob.org.za

Research Supervisor: Mrs. Roshan Galvaan Tel: [REDACTED] E-mail: Roshan.Galvaan@uct.ac.za

Research Ethics Committee of Faculty of Health Sciences, University of Cape Town: Chairperson
PG Committee: Tel: 0214066638