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Community-Based Rehabilitation Supports for Social Inclusion and Work Participation of Young Adults with Visual Impairment in Kenya: A Case Study

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Community-Based Rehabilitation Supports for Social Inclusion and Work Participation of
Young Adults with Visual Impairment in Kenya: A Case Study.

A dissertation submitted in partial fulfillment
of the requirements for the degree of
Doctor of Philosophy in Rehabilitation

by

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Abstract

Young adults with a visual impairment (VI) experience less interaction with the community that impacts the way they relate to the world as they transition to the larger society where they face significant barriers of adjustment, exclusion, and work participation. Young adults with VI contend with cultural stigma, inequality, poor self-esteem caused by marginalization, a low quality of life (QOL), and lack of social support systems that exist beyond the home. The aim of this study was to understand the perceptions of young adults with VI in Elgeyo-Marakwet and Kisumu Counties of Kenya concerning the barriers to community inclusion and work participation that they have experienced in education, health, social, economic, and cultural settings in everyday interaction. The study sought to further understand what was perceived as barriers that young adults with VI must deal with when living with visual impairment from the perspective of a focus group composed of members of the community. This study contends that a community-based rehabilitation (CBR) strategy affords the opportunity to coordinate communities in identifying access needs and mobilize resources to address common goals within the human sociocultural environment. The concept of CBR is an effective tool in promoting social change and enabling young adults with VI to advocate for community inclusion and work participation. CBR recognizes that disability is nested in widespread poverty, unequal distribution of resources, social stigma, and unequal access to work participation. The theoretical framework of the study was based on the functional model of disability as defined by the International Classification of Functioning (ICF) that discounts the presumption that disability relegates productivity. The study utilized qualitative research case study design based on interviews, observation, document collection and photovoice; a community-based participatory research (CBPR) strategy in data collection. Photovoice is a

focus group approach utilized whereby the participants took photographs of scenes and expressed their viewpoints by telling their stories of what those photographs represent in terms of their perceptions on non-participation, exclusion, or otherwise of young adults with VI. Data was organized into themes and presented in the form of narratives and visual representation through the use of tables.

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Dedication

This dissertation is dedicated to my beloved parents, my Dad and my late Mom, and my beloved children, son-in-law Elias and Cherobon, daughter-in-law Jeddy and Kibet, daughter-in-law Irene and Kipkoech and my baby Chepchumba, you mean the world to me. Thank you Kossy for your tireless support, I cherish you.

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Chapter 1: Introduction

The chapter begins with an introduction to the research topic, followed by a discussion of the background of the study. Next is the statement of the problem while the purpose of the study comes thereafter. The section that follows contains the research question and sub-questions, followed by the significance of the study and the theoretical framework on which it is based. The next section concerns the conceptual design of the study and grounded theory (GT) on which the study is based. The salient features of grounded theory, i.e. interviews, observation and photography sessions follow and then the analysis of data collected is discussed. In addition, that chapter presents the theoretical sensitivity under the sub-headings: Personal Experience of the Researcher, Professional Experience, Knowledge of the Literature, Analytical Rigor, and the Parameters of the Study. In addition, this chapter includes a definition of terms, the chapter summary, and the organization of the dissertation.

Population of Young Adults with Visual Impairment

Young adults between the ages 18 and 24 years with disabilities form a group in transition to full adulthood when they are expected to acquire skills, mature psychologically and physically, and assume individual and social identities enabling participation (Groce, 2004). However, they are often excluded from sociocultural, economic, and educational opportunities and assumed to be incapable of attaining independence and productivity. Young adults with visual impairment (VI) are marginalized by many factors, such as their visual impairment, the severity of the disability, and cultural bias towards visual impairment and disability in general, all of which interact with such factors as gender, age, and age of onset of visual impairment (Cain, Steff, Wortmann, Beales, & Cordier, 2012).

Community-Based Rehabilitation (CBR) views participation and involvement in everyday occupations as essential for all people because it enables social inclusion and work participation. CBR is a strategy in community development aimed at equalization of opportunities, rehabilitation, poverty reduction, and social inclusion of people with disabilities in education, health, livelihood, and empowerment (Jemmi et al., 2013). Social inclusion and human development are people-centered strategies identified by the United Nations Development Program (UNDP) as being effective in addressing persistent poverty and inequality and achieving parity in resource allocation and distribution.

Juxtaposed against this backdrop, disability is a development concern in that people with disabilities are overly represented among the world's poorest, especially in developing countries, and even more so in some of the cultures and communities within those countries. The needs of the poor are relegated to last place or not addressed at all (Albert, 2006). Furthermore, the focus on the rights of persons with a disability has centered on the involvement of aid agencies and international funding warehouses. Since there is less active participation of people with disabilities in such organizations, it makes it difficult for them to gain ownership of those processes since stakeholders are not empowered and, in the long run, may result in the unsustainability of the program. CBR is a strategy that promotes collaboration among community leaders, persons with disabilities, their families, and other stakeholders in the mobilization of community resources for inclusive development and equitability (ILO, UNESCO, WHO, 2004). This approach to CBR ensures that the community is involved in the process, thus transferring resources to the target group.

The Kenya National Survey of Persons with Disabilities (KNSPWD) report of 2009 estimated that there were 4.6% people living with disabilities in Kenya with $\frac{3}{4}$ of this population

living in the rural areas (Kenya National Bureau of Statistics, 2010; KNSPWD, 2009). Overall, people with a visual impairment stood at 1.4%, as compared to those with other physical impairments at 1.6 %. The report indicated that of the total national population of school-going age, 39% dropped out of school due to lack of funding while 6% dropped out due to disability. The report revealed that more than 57 % of the school-age population was living in an institutional setting while 55% were in their homes and being assisted by family members in daily activities. The researchers found that this situation indicated a high sense of dependence.

Although there is speculation that disability is a barrier to work participation, Frank (2006) posited that disability accounts for only a small percentage of variance in the participation among unemployed people with disabilities. Frank (2006) observed that, rather than the disability itself, it is more that people with disabilities have been marginalized and excluded from access to equity in resource and opportunity distribution. Access to employment empowers individuals with disabilities since it positively impacts the quality of life for both youth with disabilities and their families (Szymansky & Parker, 2010).

Background of the Study

Over time, Kenya has improved the legal position of people with disabilities, especially since 2003 when the People with Disabilities (PWA) Act was passed (Otieno, 2009). The PWD Act of 2003 guarantees the right to non-discrimination on the grounds of disability, a right granted constitutionally for people with disabilities for the first time in Kenya (Gueorguieva, 2012). The Persons with Disabilities Act of 2003 sections 12 and 13, the Kenya Constitution, and the government of Kenya performance contract guidelines of 2010-2011 are instruments used to create equal opportunities for employment in Kenya. However, discrimination in employment is still prevalent (Tororei, 2009), possibly due to the lack of regulation that would

ensure compliance (Otieno, 2009). Therefore, there is a need to rethink disability and to conceptualize it in ways that focus on genuine inclusiveness and entitlement.

Disability and, by extension, visual impairment, has been conceptualized as a misfortune but the International Classification of Functioning (ICF) model of disability discounts this view and challenges the assumptions and perceptions that disability reduces the person's ability to be productive and to participate in the contemporary society (Frank, 2006; Pothier & Devlin, 2006). Disability is not about treatment or health, but about politics and power (less-ness) because the socially constructed biases concerning disability are based on the "able-bodied" person's interpretation of disability (Pothier & Devlin, 2006). With the negative connotations associated with disability, young adults with VI still encounter discrimination in community involvement and work participation solely based on the perceived notion of disability automatically connoting inability. The young adults with VI are sometimes not socially included in the community to participate in events and ceremonies perceived to be roles for the "able-bodied" as well as not accessed work opportunities for fear of inability, inefficiency or overprotection.

The most obvious limitation for young people with VI is that they do not have equal access to educational opportunities. Further, when they do gain access, they spend a longer period in school before entering the job market, a delay usually caused by the inaccessibility of institutions of higher learning, lack of awareness by parents and guardians, and overprotection. Once out of school and seeking employment, employer attitudes become a greater barrier (Titchkosky, 2003), since employers may be reluctant given the added cost of adapting the work environment to accommodate employees with disabilities. The current definition of disability as applied in this study is based on that of the World Health Organization (WHO) that focuses on the analysis of the relationship between capacity and performance such that if the gap between

capacities is greater than performance, the shortfall should be eased by addressing the barriers to social inclusion and work participation by identifying facilitators to bridge those barriers (Kielhofner, 2002).

There is therefore an urgent need to redefine and reconstruct disability to eliminate the social stigma and discrimination associated with disability. The binaristic approach to disability brings about “othering” and categorization that result in conceptualizing disability as a defect instead of being appreciated as one of the differences that make people unique as individuals and as persons deserving of a place in society (Priestley, 2001; Titchkosky, 2003).

Statement of the Problem

Young adults with VI face difficult choices when transitioning from school to work. They may successfully negotiate their way socially and academically in college, but the world of employment and work participation may not be ready for them due to marginalization and poor employer attitudes towards disability (Titchkosky, 2003). Majority of students with visual impairments in Kenya still attend special boarding schools or reside in institutions during the school term. When they transit to the job market, they encounter many barriers that include: cultural biases, service needs, lack of supports to enhance their transition and functionality, transportation challenges, and barriers in environmental adaptation (Ingstad & Grut, 2007).

These barriers need to be addressed because, in attaining work participation, employment, and social and community inclusion, young adults with VI may more easily avoid poverty and become active citizens. Empowering citizens irrespective of disability and fully including all people in society are the goals of a just society. This study gives voice to marginalized young adults with VI and their families by providing a first-person experiential view of the barriers and solutions that CBR could explore. This perspective could be used by

advocacy groups and local governments as a means of planning and prioritizing services for young adults with VI. The study further specifies and defines the role of CBR in creating an inclusive social environment by coordinating stakeholders and job-seeking youth, identifying resources and enabling access for the young adults with VI and, perhaps most importantly, advocating against discrimination of people with disabilities.

Purpose of the Study

This study sought to understand the barriers to social inclusion and work participation for young adults with visual impairment in the Elgeyo-Marakwet and Kisumu Counties of Kenya. The study utilized a qualitative research method to identify the gaps that exist for opportunities for work participation and productivity and to understand the level of preparedness of the young adults with VI to self-advocate in seeking to be socially included and participate in the community for individual development and independence. Also, the study examined the specific challenges within the community that are perceived as barriers to accessing community resources and employment opportunities by young adults with VI. A qualitative study approach was used because the focus of the study was on understanding the meanings that different experiences have for individual people (Ingstad & Grunt, 2007) as expressed by the young adults with VI themselves. Further, qualitative design offers a method to raise awareness concerning people's experiences, the perspectives on aspects of their lives, and how a phenomenon arises. One of qualitative research design philosophies is the conflict theory, better known in education as the critical theory. Critical theory argues that society is rooted in power relationships which should be critically analyzed (Johnson & Gray, 2010). The goal in critically analysing the power relationships (differentials) is to reduce the inequalities therein, such as gender stratification, ethnicity or race stratification, sexual identity, disability, and age discrimination.

The study addressed the following research questions by interviewing young adults with VI and then establishing focus groups involving school committee members who were members of a CBR together with young adults with VI in transition and those seeking work participation and employment. The sample population was obtained through the use of purposeful sampling to review the situation in the Rift Valley and Nyanza provinces of Kenya. The focus groups reviewed situations of participation of young adults with VI through photography and reported their stories in photo sessions. The study used a qualitative research method approach through interviews, photovoice representation, observation, (Johnson & Gray, 2010) to address the following questions:

Research Question

What are the cultural biases and social constructs of disability that discriminate against young adults with visual impairment in the transition process towards work participation in the Elgeyo-Marakwet and Kisumu Counties?

Research Sub-Questions

- What are the work-specific barriers young adults with visual impairment face in accessing equal opportunities for work participation in the Elgeyo-Marakwet and Kisumu Counties of Kenya?
- What are the inclusion-specific barriers young adults with visual impairment face in accessing equal opportunities for community inclusion in Elgeyo-Marakwet and Kisumu Counties of Kenya?

- What do young adults with visual impairments and their families believe could facilitate work participation and successful community integration in Elgeyo-Marakwet and Kisumu Counties of Kenya?

Significance of the Study

The results of this study would be of interest to scholars, researchers, and practicing rehabilitation professionals, especially those engaged in CBR targeting not only young adults with VI but those with disabilities in general. This study would be of significance to those who study CBR and would be especially useful to organizations interested in working towards the empowerment of young adults with visual impairment in work participation and community inclusion.

Kenya has ratified several international human rights treaties, including the United Nations (UN) Convention on the Rights of Persons with Disabilities (CRPD) that promotes, protects, and ensures the full inclusion and enjoyment of fundamental freedoms for all persons with disabilities (Iemmi et al., 2013). In addition, Kenya adopted key International Labor Organization (ILO) conventions governing discrimination in employment remuneration and the discrimination convention (employment and occupation) (Kenya Human Rights Commission (KHRC), 2010). Therefore, the country has committed itself to inclusion and work participation by all its citizens. CBR is a strategy that utilizes such nondiscriminatory approaches in inclusion and work participation with the goal of meeting the needs of young adults with VI and their families. With laws that protect human rights, CBR is an effective strategy for advocacy that enables young adults with VI to fully participate and utilize community resources in poverty alleviation and improved quality of life (Deepak, Biggeri, Mauro, Kumar, & Griffo, 2014). Successful CBR is a process that not only initiates and enhances work participation and inclusion

but can be extended to networking and collaboration, advocacy, and sustainability of those efforts to ensure systemic inclusion and enforcement of laws and policies of protection from discrimination and exclusion of young adults with VI (ILO, 2009; WHO, 2010). CBR facilitates and fosters self-reliance, decision-making abilities and independent living, and boosts self-esteem and self-confidence through involvement and full participation in the daily workings of given programs (ILO, 2009). My study contributes to the literature by considering the utilization of CBR as a strategy in Elgeyo-Marakwet and Kisumu Counties of Kenya in the broader changes in work participation and community inclusion that CBR affords young adults with VI.

Further, this study contributes to three areas of research: (1) the role of families and their thoughts concerning the process of work participation and community inclusion; (2) understanding cultural biases and social constructs of disability in general and, in particular, those directed at young adults with VI for, in so doing, strategies can be laid down that include community stakeholders and policy makers in considering important community interests in strategies of implementation of CBR; and (3) understanding the barriers that hinder young adults with VI in overcoming systemic and societal barriers and micro-aggressions to accomplish inclusion and work participation. In so investigating, the study shifts the focus from societal, systemic, and cultural biases to examining successes in utilizing community supports to enhance inclusion, work participation, and empowerment of young adults with VI. Specifically, the study examined the view that young adults with VI should rely on external intervention for empowerment versus the belief that they themselves can seize the opportunity for empowerment.

This study is both relevant and timely in that disability is viewed as an emerging concern and that significant changes should be enacted, especially in poor communities of developing countries such as Kenya, to customize CBR services, prioritize action plans, and access

information to address issues of poverty and empowerment (Heinicke-Motsch, 2013). For example, CBR is a holistic strategy endorsed by the WHO for community development for rehabilitation, poverty reduction, and equalization of opportunity and social inclusion for persons with disabilities (Iemmi et al., 2013). CBR is holistic in the sense that its focus is on five key components of health, education, livelihood, social, and empowerment (WHO 2010). The CBR guidelines developed by WHO and launched in 2010 required CBR programs to be implemented through the combined efforts of persons with disabilities, their families, caregivers or community stakeholders, and the relevant governmental and non-governmental health, education, vocational, social, or other services (Iemmi et al., 2013). In Kenya, such a focus positions CBR to empower young adult community members with VI by addressing health concerns through the utilization of preventive primary healthcare, supporting early educational interventions, espousing social inclusion and supporting participation (Republic of Kenya, 2013) in the design of programs that will enable young adults with VI to acquire work skills required for successful employment.

Theoretical Framework

The theoretical base for this study centered on the International Classification of Functioning, Disability and Health (ICF), which defines disability as a component of health, rather than a consequence of disease nor a determinant of health or as a risk factor (McColl, Short, Boyce, & James, 2006). With this in mind, there is a need to conceptualize disability in ways that focus on genuine inclusiveness and entitlement. The ICF model of disability views functioning as an interaction of the environment, health, and personal factors with a complex relationship where an intervention in one entity, possesses the potential to modify one or more of the others (McColl et al., 2006). These interactions are not always in a predictable, one-to-one relationship, but work in two directions such that the presence of a disability may modify a

health condition. The ICF depicts the interactions according to the World Health Organization (2001), as presented in Figure 1.1.

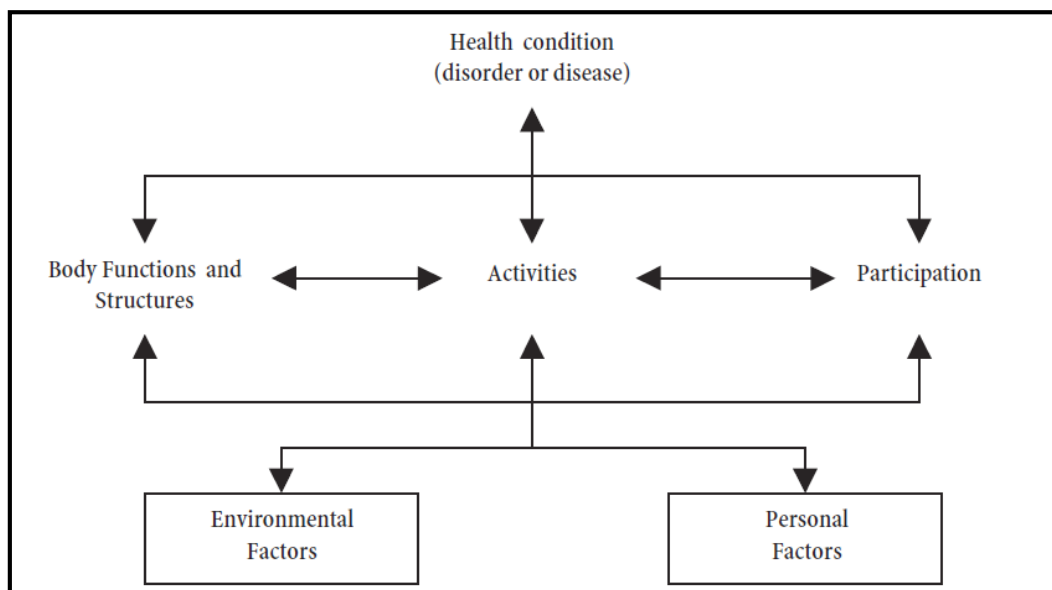


Figure 1.1. Interactions between the Components of ICF according to the World Health Organization (2001).

The functional model of disability is that an individual with a disability may possess an impairment but be free of capacity limitations and thus able to participate fully (WHO, 2002). The presence of a disease, disability, or disorder cannot be a predictor of functional outcomes. The point of view is that the disability of the individual interacts with the functions of the environment with the potential for incorporating societal prejudice and discrimination in rating disability (Smart & Smart, 2006). It moves away from the medical model of disability that views the disability of an individual as hindering the person from participating and contributing to society or needing correction or adaptation (Smart, 2005; Smart & Smart, 2006). The functional model of disability further states that an individual may have performance problems without capacity limitations so that what limit them are societal stigmatization and/or discrimination instead of the disability. This concurs with the critical disability theory that discounts the

perception that disability is about being incapable or dysfunctional and instead a characteristic of being unique in the way people function and interact (Pothier & Devlin, 2006).

The ICF model of functioning deemphasizes people's disabilities and focuses on their health levels with the assumption that, at some point in time, every human being experiences a decrement in health and thereby some disability (Stucki, Cieza, & Melvin, 2007). In this context, disability is mainstreamed and work participation is defined differently in that every individual is considered to have the potential and capacity for participation. Those whose health is impacted by intervening factors can either use assistive technology, seek medical attention, or their environment can be modified to accommodate their ease of functioning (Stucki et al., 2007).

This study views CBR as a strategy that can be utilized to provide for work participation and community inclusion for youth with VI and their families. CBR will afford active participation through economic empowerment; empower participants to take control of their individual lives in terms of personal care, individual budgets and mobility, allowing them to experience an improved quality of life (QOL) when they utilize the environmental supports CBR affords them.

Conceptual Design

The conceptual design for this study was based on the grounded theory, which is a qualitative descriptive analysis of a particular phenomenon (Guba & Lincoln, 1982). The salient features of grounded theory utilized in this study are interviews, observation, focus groups based on photovoice, documents accessed on site, and reworks as developed by the researcher in terms of snapshot notes. Just as the name implies, grounded theory aims to generate theory grounded in data relevant to the research area of study and eliminates the need for a researcher to conceive

of a hypothesis (Jones & Alony, 2011). The process of how this study was conducted is visualized in Figure 1.2 Conceptual Design Diagram.

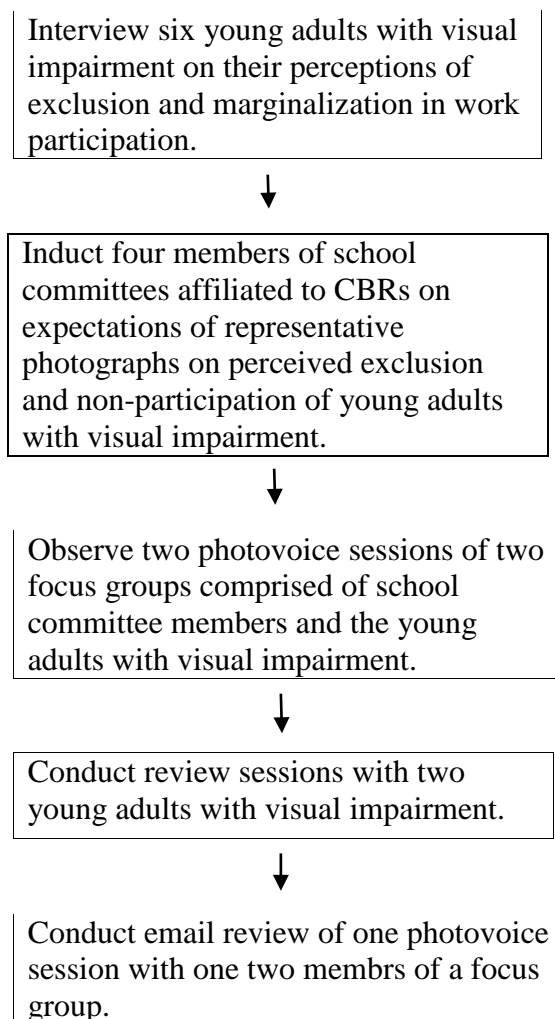


Figure 1.2. Conceptual design diagram.

Observation was done during the one-on-one individual interview sessions since observations provide insights into interactions and enable the researcher to determine if what a respondent says actually matches what they do (Hart, 1999; Kawulich, 2005; Silverman, 1998). Observation enables firsthand experience for a researcher to inductively discover how participants relate to the world they live in as well as uncover sensitive information from the setting which may not have been otherwise shared by the participant during interviews.

Observations also afford the researcher the opportunity to gain an understanding of the social behavior of participants (Creswell, 2012; Kawulich, 2005).

Essential Methods of Grounded Theory

Grounded theory is described as one that emerges from and is grounded in the data (Jones & Alony, 2011; Parry, 1998). Grounded theory is inductively derived from the study of the given phenomenon which, in the case of the present study, was to investigate the perception and experiences of young adults with VI in the process of community inclusion and work participation. Young adults with VI still experience discrimination and marginalization when attempting to access resources and opportunities for independent living, sociocultural adjustment, work participation and economic inclusion (KNSPW, 2008). The study examined the process of CBR and its role in meeting the needs of inclusion and work participation for young people with visual impairments. Grounded theory was verified through data collection process and the analysis of data in relation to the phenomenon under investigation (Strauss & Corbin, 1997) in this study. The process of grounded theory is a comparative method of analysis in which the researcher is constantly gathering data and analyzing and comparing it to facilitate validity in the research process (Silverman, 1998). Grounded theory has its basis in the objectivist tradition of qualitative approach and has four stages of analysis that involve coding by identifying anchors within the data, grouping those codes according to how similar they are to one another (conceptual), categorizing the concepts based on similarities, and generating theory by explaining the connections of the emerging categories (Bergman, 2010).

The steps in grounded theory guide the researcher towards establishing a thorough inquiry into the different aspects of the phenomenon through an in-depth investigation to

establish the extent, effects, or effectiveness of the situation, resulting in a description of what really exists (Strauss & Corbin, 1997). Once the problem was described and given meaning, methods of approach were formulated so that data was analyzed to obtain a picture of the “how” of the phenomenon. The process of grounded theory identified the data collection site, data collection process that involved interviews, observation, document collection, and memoing; coding and analysis of data and compilation of the results (Jones & Alony, 2011). Through interviews, observation, photovoice sessions, document collection, and memoing, the participants’ experiences emerged; a strong element of grounded theory. Grounded theory lent itself well to this study since its benefits include the capacity to interpret complex data and to accommodate social issues, and because it is appropriate for the study of socially constructed experiences (Clarke, 2005; Jones & Alony, 2011). The nature of qualitative research is descriptive, and grounded theory provided a framework for integrating the descriptive data, explaining its importance, and interpreting the results (Parry, 1998).

Theoretical Sensitivity

Theoretical sensitivity is normally associated with grounded theory and refers to the personal qualities of the researcher that might impact his or her insight, determining the interpretation of data, its significance, and organizing and determining what data are germane to the study and utilizing that data to answer the research study questions (Strauss & Corbin, 1997). The researcher attended to relevant literature, especially related to the phenomenon under study and also the theoretical framework on which the study was based (the ICF functional model of disability, the research process, and documentation accessed from the research sites). That type of access to emerging information sensitized the researcher to the phenomenon under study.

Yin (2010) posits that qualitative research involves the researcher as a tool in the research process and therefore it is important to examine the researcher's own knowledge and views as they pertain to their role as the primary data collection instrument. This examination was important because the existence of background knowledge could affect the study inquiry and the potential findings (Yin, 2010). Being aware of one's knowledge and views helped the researcher establish checks and balances during the research process. Thus, Yin (2010) recommended keeping a journal of introspection referred to as the "researcher's lens" and including thoughts about its possible influence on the study or findings.

Professional Experience

The researcher has extensive practice in the area of people with visual impairment and possesses a sound background in the needs, rehabilitation strategies, and how CBR can be operationalized to address work participation and community inclusion of young adults with VI from literature and works of scholars in the area of disability. The researcher has worked with students and young adults with VI in Kenya for the past 20 years and also has experience in networking and collaborating with organizations of people with VI as well as direct service providers such as the Sight Savers International (SSI), Royal Society for the Blind (RSB), Christofell-Blindenmission (CBM), Kenya Society for the Blind (KSB), and Salus Oculi, Kenya, among others. These organizations provide services at the grassroots level, including schools and resource centers such as Kenya Integrated Programs for the Visually Impaired (KIEP), and the Educational Assessment and Resource Centers (EARCs).

My professional experiences include teaching students with visual impairments in segregated and integrated schools as well as capacity-building for teachers in special needs in education. Other roles have included facilitating itinerant services to schools and one-on-one

training and counseling in coping skills for families and their school-age students with VI between the ages of 5-21 years through community-based workshops and activities. These experiences allow me to better understand the needs of young people with VI and enabled me to better grasp their situation. My responsibilities in coordinating service delivery in the form of early intervention, assessment, school placement, and monitoring enhanced my understanding of the challenges experienced by young adults with VI. I hold a diploma in the education of students with visual impairment and a first degree in the education of the students with disabilities with a focus in the areas of visual impairment. In addition, I hold a Masters in Special Education with a focus on inclusive education.

Personal Experience

I was born of parents who lived in rural Kenya and engaged in subsistence farming. My mom was very loving and hardworking woman. She suffered an early onset of Alzheimer's disease and passed on in 2010. My dad has low vision due to the effects of the early onset of cataract. We lived with two children of our extended family who grew up with visual impairment. The elder one, who is totally blind, chose a career in teaching where he faced discrimination in employment due to his visual impairment. It was only through advocacy and raising awareness of the affirmative action provisioned in the constitution of Kenya that he finally obtained his dream job as a teacher. Therefore, I have experienced firsthand the social and cultural implications of visual impairment. The younger boy has low vision and is currently pursuing teacher education. With this background, I fully understand the limitations placed on individuals and family members of persons who have a visual impairment.

Knowledge of Literature

The presence of visual impairment implies a loss of productivity and the inability to engage productively (Schwab, Whitfield, Ross-Degnan, Steinkuller, & Swartwood, 1995). It can invite social prejudice and marginalization from society, which leads to a loss of self-esteem, lack of motivation, and feelings of helplessness for young adults with VI. Visual impairment also may generate economic deprivation, yet with adequate social support systems to provide community inclusion and work participation, young adults with VI can be fully engaged and included in society (Musoke & Geiser, 2013). By dialoguing on cultural perceptions on visual impairment, stakeholders and service providers are able to create an environment of acceptance and support for services intended to be provided and utilized by young adults with VI (Devlieger, 1995). The World Health Organization views CBR as a strategy for general community development, rehabilitation, and equalization of opportunities for people with disabilities, (Heinicke-Motsch, 2013), including young adults with visual impairment.

Parameters of Study

The parameters of the study were:

- A purposive sampling of participants who are young adults with VI, ages 18-30.
- A purposive sample population of adults who are school committee members and who participate in a local community-based organization.

Analytic Rigor

Analytic rigor is the application of appropriate tools to achieve the stated objectives of an investigation (Guba & Lincoln, 1982). It pertains to consistency, which means dealing with the research study area in a comprehensive way in regard to quality control of information, relying on relevant and valid evidence and applying it in a precise manner to answer the research

questions. This study utilized grounded theory which was inductively derived from the study of the phenomenon (visual impairment), specifically, the challenges of community inclusion and work participation needs for young people with VI. The researcher used a descriptive approach to define the problem and formulate methods of approach to data analysis so as to obtain a picture of the “how” of the phenomenon (Strauss & Corbin, 1997). This approach included understanding the phenomenon, thinking about the phenomenon, analyzing it, and explaining that the problem existed and that there was evidence to justify its existence. The researcher represented the data in integrative diagrams and descriptive narratives in reporting the findings.

Definitions of the Terms

The study extensively utilized the following terms to gain an understanding of the factors that contribute to the inequality of access to employment opportunities among young adults with VI in two Counties of Kenya, namely Elgeyo-Marakwet and Kisumu.

Community implies a sense of cohesiveness and shared common values among a group of people sharing an environment. Community has been defined by the World Health Organization as the smallest administrative area in which people live, meaning that authorities and stakeholders are part of any given community.

Community-based rehabilitation (CBR) is a strategy that seeks to further the inclusion and meaningful participation of people with disabilities in society. It has been endorsed by the WHO, which uses it to address general community development for the rehabilitation of people with disabilities, social inclusion, and access to equal opportunities for all members of any given society (WHO, 2001).

Community resources are the assets or facilities and people of a given community to which its members can turn for assistance in satisfying unmet needs, be they educational, social, economic, or recreational.

Cultural bias is the act of a culture interpreting and judging phenomena by standards inherent in a particular community. Cultural biases are acts of social exclusion that prevent a particular group within a given society from participating and benefitting from the wealth, knowledge, power, and decision-making capacities of the larger community that in turn results in the powerlessness, helplessness and vulnerability of the target group so that their legitimate interests are not protected (Mezulis, Abramson, Hyde, & Hankin, 2004).

Disability is used in accordance to the International Classification of Functioning (ICF), which is the WHO framework for measuring disability at both individual and population levels. According to ICF, disability is an umbrella term for impairments, activity limitation, and participation restrictions (WHO, 2002). The World Report on Disability (2011) defined disability as a part of the human condition that can either temporarily or permanently impair an individual with disability while for anyone who lives to old age, difficulties of functioning are experienced. Disability was discussed from a cultural perspective in order to better understand the sources of bias that relegate people with disability and specifically those with VI.

Participation is involvement in life situations and includes the ability to be both autonomous and in control of one's life.

Social inclusion is the essence of full participation in all aspects of life through the removal of barriers and ensuring that support systems are available to create a just system that educates all, cares for the health of everyone, and recognizes that youth with disabilities are

capable of claiming their rights and making decisions for their lives based on free and informed consent as well as being active members of society (Groce, Lang, & Trani, 2011).

Limitations of the Study

The study was limited to selected CBR programs and individuals with visual impairment in Elgeyo-Marakwet and Kisumu Counties of Kenya, who were identified by the researcher through purposive sampling. Participants included members of school committees of selected schools for students with visual impairment who served and young adults with VI combined in two focus groups of five members each. This was to ensure that the purpose of the study was achieved by addressing and answering the research questions.

The study findings are not generalized to the population because of the innate individual differences and experiences of the participants as well as the environmental supports that are either present or absent in the given communities within the study areas; these factors served to influence levels of adjustment and opportunities for different individuals. However, the study findings should illuminate the barriers of access to equity of opportunities for young adults with VI and inform CBR practice in work participation and social inclusion for youth with VI.

The researcher was limited since she was time-bound; however, she worked diligently to identify and carry out in-depth interviews. Case study data do not lend themselves wholly to numerical representation (Miles & Hubberman, 1994) and this may have affected the interrelationships presented in the data analysis of the study. According to Patton (2002), a case study is a readable and descriptive picture about an individual or organization that enables the reader to access information to understand the case in its uniqueness. The researcher strove to engage in rigorous data analysis and to employ the skills of reporting, descriptions, and narratives that represented the findings of the study.

Summary

Visual impairment is a development issue among young adults with VI since they face barriers of community inclusion and work participation. Young adults with VI are often excluded from sociocultural, economic, and educational opportunities, and are thus unable to attain independence and productivity. These factors affect the self-esteem and quality of life (QOL) of young adults with VI. CBR has been endorsed by the WHO as a strategy for community development that offers the opportunity for poverty reduction, social inclusion, and access to equity of opportunities for people with disabilities and their families, of whom young adults with visual impairment are a subgroup.

The purpose of the current study was to understand the challenges of community inclusion and work participation for young adults with VI and how CBR can play the role of supporting communities in the promotion and protection of the human rights of young adults with VI in terms of access to work participation and social inclusion. The study gave specific attention to the young adults with VI and focus groups composed of school committee members of schools and the young adults with VI located in Elgeyo-Marakwet and Kisumu Counties of Kenya. By examining the role of CBR in addressing the unmet needs of these young adults and applying the theoretical framework as defined by the ICF functional model of disability discussed in this chapter, the study provided new insight into the adaptation of the CBR to alleviate poverty among young adults with VI and their families, build their capacity in the decision-making process, and access available resources with support from community stakeholders and related agencies.

Organization of the Dissertation

This dissertation was organized beginning from Chapter 1 to Chapter 5. Chapter 1 comprises an introduction to the research area and the research problem. Chapter 2 contains a relevant literature review of the study and Chapter 3 discusses the methodology of collecting data and how that data is presented. Chapter 4 contains the analysis of the data from interviews, observations, data collection instruments, researcher memoing, and the photo session data. Finally, Chapter 5 provides the results of the study, conclusion(s) reached, and recommendations.

Chapter 2: Literature Review

Organization of the Dissertation

Chapter 2 begins with an introduction followed by the search strategy of literature, then followed by the introduction. Next is a discussion of visual impairment and disability and their relationship with poverty, the cultural understanding of disability in Kenya and the social stigma and discrimination. The development concerns of young adults with visual impairment, social exclusion and visual impairment and the challenges for young adults with visual impairments in Kenya is presented, followed by the development of Community-Based Rehabilitation (CBR), the cultural focus of CBR and its guidelines and matrix. The next topic is the impact of visual impairment on the family, employment policies in Kenya, and the CBR and cultural values and, lastly, a summary of the chapter.

Introduction

The purpose of a literature review is to access key information on the area of study and, according to Mertens (2014), literature review establishes the broad context of the study and outlines the scope of the investigations. This examination of the literature enables one to determine what has been accomplished and situates the researcher so as to synthesize it and bring out a new perspective (Boote & Beile, 2005; Mertens, 2014). Specifically, the purpose for this literature review is to provide a fundamental framework for understanding the challenges of social inclusion in the community and work participation for young adults with VI. The literature review provided insights into what are known to present barriers to people with visual impairment, how the situation has been handled in the past, and what is still lacking.

Search Strategy

As discussed in the first chapter, CBR is a strategy advanced by the WHO to address inclusion and work participation needs of young adults with VI. This literature review also examined CBR as a tool that fulfils the components of ICF functional model of disability and how it can be localized to meet the sociocultural health, education and economic needs of young adults with VI. The researcher utilized Google Scholar, JSTOR, Pro-Quest, Ebsco Academic Search Complete, the Carrie Buffalo data base, CIRRIE, ERIC data base, Web of Science, and the University of Arkansas library catalogue, all of which were available from the University of Arkansas Mullins Library and its interlibrary loan (ILLiad) service. Articles were also accessed through the general Google Scholar data base and other websites such as that of the World Health Organization. Journal and textbook hard copies available in the Mullins library, course textbooks in the possession of the researcher as well as those from the interlibrary loan program were used, as was material from past dissertation projects related to the area under study. The terms used in the search included disability, visual impairment, young adults with visual impairment, community-based rehabilitation, culture, employment, work participation, poverty, gendered disability, and social inclusion. Other search terms were community resources, marginalization, access and participation as well as social stigma, policy framework, community resources, discrimination, access, poverty, quality of life (QOL), and participation.

Data on the Impact of Visual Impairment on Adolescents and Young Adults

United Nations International Emergency Fund (UNICEF) classifies adolescents and young adults as those falling between the ages of 14 and 24 and less is known about them than any other group of people (Groce, 2004). Adolescents and youth are in transition to full adulthood and are expected to have acquired skills, matured psychologically and physically and are assumed to

possess the individual and social identities that will enable them participate in their communities. In a cultural context, youth or being in young adulthood may denote transfer of societal responsibilities. However, this is dependent on the context in which it is applied. According to Mwangola, (2007), a draft of the Kenya National Youth Policy as prepared by the National Youth Policy Steering Committee (NYPSC, 2003) defines youth by taking into account physical, cultural, physiological, biological and political considerations placing the age at between 15-30. Globally, the approximate number of adolescents and young people living with significant health, mental, or sensory disabilities is placed at 180 million with the vast majority, i.e., 170 million or 80%, disproportionately concentrated in low income countries and experiencing poverty and marginalization (Groce, 2004, UNESCO, 2012). Of the 170 million young people with disabilities, 163 million live in Sub-Saharan Africa. The Kenya National Survey on Persons with Disabilities of 2008 reported that 3.6% of youth between 15 and 24 had a disability, with 1.1% living with visual impairment. The survey further found that over 50% had never worked and 90% reported that their disability was a burden (KNSPWD, 2009).

At the World Conference on Youth with Disabilities held in Sri Lanka in May 2014, it was confirmed that youth with disabilities are still among the most marginalized and poorest in society, as reported by Rajapaksha and Russell-Moyle (2014). The conference noted that youth with disabilities are often excluded from social, cultural, economic, and educational opportunities and wrongly assumed to not have sexual lives, the ability to live independently and to be productive. There is little research on young people as a distinct group in developing countries and the research that does exist is focused on the context of formal education with some transition to work programs.

Kenya has Educational Assessment and Resource Centers (EARCs) that conduct early identification, assessment and school placement for children between ages 0-16. The Kenya Integrated Program for the Visually Impaired (KIEP) is a project under the Ministry of Education that is charged with the integration and inclusion of students with visual impairment into mainstream primary, secondary and tertiary education (Kiarie, 2004). What lacks are adequate transition programs that ensure that young adults with VI access smooth transition from school to work or skill training and development for appropriate work placement.

Disability: Its Relationship with Poverty

Disability and poverty are intricately linked, with empirical studies showing that people with disabilities attain lower educational levels, have higher unemployment rates and more frequently live in poverty (Mitra, Posarac, & Vick, 2013). Mitra et al. acknowledges that measuring disability and poverty is difficult because of the multiple deprivations that exist among people with disabilities and the multidimensional nature of poverty. The Kenya National Survey for Persons with Disabilities (KNSPD) reported that Kenya has a poverty prevalence rate of 5.3% among working-age people with disabilities between the ages of 18 and 65. Disability among women was double that of men, standing at 6.8% compared to 3.7%, which especially affects mobility among women with a visual impairment (KNSPD, 2008).

In a study carried out in Kenya, Williams (2013) reported that women with disabilities often had unmet social support needs that predisposed them to lower levels of mental health, in effect, increasing their susceptibility to mental illness and a poor quality of life resulting from visual impairment as the primary disability. Williams also observed that women with disabilities who were in a non-governmental organization in the same region in Kenya and were offered employment, health, education, and organizational training were more skilled, had leadership

abilities, and had stable social relationships developed through their reliance on one another within the group.

In exploring the attainment of millennium development goals (MDGs), a research study done in Kenya, the Philippines, and Bangladesh among older people with visual impairment from cataracts, Kuper et al. (2008) established a direct link between disability and poverty. The researchers observed that people affected by visual impairment experienced poor nutrition due to lack of food, occupied substandard housing, had limited access to health care, clean water, and experienced poor sanitation. Ingstad and Grut (2007) pointed out that poverty and disability have a bi-directional relationship, with disability often leading to poverty and poverty often leading to disability. Neither is the cause of the other but research has shown that there is a strong relationship between them (Eide & Ingstad, 2011; Eide, Ingstad, & Eide, 2013; Loeb, Eide, Jelsma, Toni, & Maart, 2008).

Cultural Understanding of Disability in Kenya

Culture plays a large role in defining a community and its perceptions concerning cultural issues. Culture assigns meaning to the disability status of an individual as a way of defining the apparent differences among individuals (Braathen & Ingstad, 2006). Culture also defines the roles, functions, and environment in which individuals exist. The perception of disability and assigned status impact issues such as the participation and community inclusion of people with disabilities. Forming friendships and attending cultural activities or social gatherings are impacted because of the stigma associated with disability; in social settings, more attention is paid to the disability and its cause than to the person with the disability (Devlieger, 1995). Thus, to be able to implement CBR, it is important to understand the contributions of local culture in terms of beliefs, practices, and role assignments (Ingstad & Whyte, 1995). This is crucial to

avoiding the potential for incorporating societal prejudice and discrimination in rating disability as defined within the functional model of disability (Devlieger, 1995).

Some communities in Kenya perceive an individual who is unable to bear children as having “no eyes” since they have not propagated and thus have no offspring to both continue their lineage and take care of them in old age. Being blind therefore has much more meaning than merely eyesight or the ability to see; the situation is interpreted as a consequence of sins committed by the individual who is “afflicted” (Ingstad & Grut, 2007). By dialoguing on cultural perceptions on disability, stakeholders and service providers are able to create an environment of acceptance and support for services intended to be provided and utilized (Devlieger, 1995). These cultural elements must be taken into account in any approach dealing with the issues associated with disability.

Social Stigma and Discrimination

Acts of social exclusion that prevent other groups from participating in and benefiting from the wealth, power, knowledge, and decision-making capacities of the larger community are engrained in the culture of communities (Eide & Ingstad, 2011). This results in hopelessness and vulnerability of the discriminated group since legitimate interests may not be protected. There are 42 ethnic communities in Kenya and each ethnic group has their own social construct of disability. Overall, disability is explained as either a curse visited on the families because of unfulfilled promises, a sin involving social atrocities committed by family members, or witchcraft visited on the people due to jealousy or competition among family or community members (Talk, 1995; Tororei, 2009).

Cultural definitions and views of disability hamper access to equitable distribution of work opportunities for youth with disabilities in Kenya (KNSPD, 2011). These views continue

to influence attitudes towards people with disabilities among various ethnic communities and define their status long after school. Further, despite the advances in science and scientific explanations of disabilities, cultural biases still pervade society, thus marginalizing young adults with VI in their quest for participation and development (Carroll & Rosenblum, 2000; Monk & Wee, 2008). In its position paper, the WHO posited that the social consequences of the way in which societal positions create disequilibrium through social stratification and the assignment of different positions to that society's members expose young adults with VI to unfair competition. This in turn engenders differential exposure and vulnerability in health, education, culture and material resources (WHO, 2010).

The needs for belonging and love are hard to fulfil for young adults with VI since the community considers those with disabilities to be inferior (Gueorguieva, 2012). Such negative social attitudes affect self-esteem of the young adults with VI. Citing an experience in a public transport vehicle, a female with visual impairment reported that when she sat in close proximity to someone on the bus, the individual would move away because they believed blindness to be contagious (African Union for the Blind (AFUB), 2007). Such behavior affects the way young adults with VI view themselves; they also feel disrespected. Reporting on discrimination and inequality in Kenya based on disability, it was found that when people who are blind visited government offices with close family members as guides, the sighted guide was often asked to explain their needs instead of the individual who is visually impaired (Gueorguieva, 2012). That attitude suggests that communities perceive people having visual impairments to be less intelligent and unable to effectively express themselves, both of which affect their dignity and self-image. The report on inequality and discrimination further observed that young adults with VI face barriers in both transport and communication; the public transport operators found it a

waste of time to stop and ferry people with visual impairments because they took more time to board the bus.

A recent report by the KNSPWD (2009) observed that barriers of attitude and environment impact people with disabilities more than the medical conditions with which they contend. The report stated that people living and interacting with people with disabilities treat them differently in relation to their disability; hence, those individuals do not actively participate in family, social, educational, and economic activities due to stigma and socio-cultural and economic prejudice. Further, prejudice based on disability extends to family and for some, caused their parents to prevent them from going to school.

According to Umeasiegbu (2013), education is important for community participation, economic empowerment, and independent living, all of which lead to good QOL. Further, Umeasiegbu (2013) observed that community integration is affected by psychosocial aspects of disability, environmental, and personal factors that should be considered in service delivery. The ICF functional model of disability is therefore important in planning CBR (Stucki et al., 2007; Umeasiegbu, 2013).

To draw a parallel, at one time, Western culture had both moral and medical model explanations of disability (Shapiro, 1994). According to the moral model, disability was shameful and people with disabilities were isolated in the community. Professionals advised parents to commit their children to mental institutions or to segregate them in any other form of institutions (Shapiro, 1994). In adherence to the medical model, people with disabilities were castrated to stop the spread of bad genes with the goal of ridding society of disability in the future (Vaughn, 2003). Thus, the past treatment of people with disabilities denied them opportunities for equal representation and treatment, regardless of the model used to explain

those disabilities. Although there still exist discrimination of young people with disabilities, policies, laws and acts have been put in place that protect against marginalization in work participation in the western world. Opportunities for restitution are available where acts of discrimination in employment based on disability are experienced (Chan, Cardoso, & Chronister, 2009). Further, there is active enforcement and awareness of those particular protections as engrained in legal statutes. Given the disparities that exist in service delivery, young adults are better represented and accessed opportunities for social inclusion and work participation in high income countries as compared to the same population in low income countries (WHO, 2011).

Development Concerns of Young Adults with Visual Impairment

In a study that encompassed 39 countries located in six regions of the world, Pascolini and Marriotti (2011) reported that visual impairment is a major health concern afflicting over 285 million people worldwide. The report indicated that the age bracket of 15-49, into which young adults with VI fall, comprised approximately 37.5 million. The report noted that there is an urgent need for systems to address chronic eye disease, including rehabilitation, education and social support systems. CBR is one such support system focused on community inclusion and work participation as recommended by the World Health Organization (WHO), International Labor Organization (ILO) and United Nations Education and Scientific Organization (UNICEF), among other organizations. The Persons with Disabilities Act (PWD) of 2003, Section 32, in Kenya created a National Fund to benefit people with disabilities (AFUB, 2007). That fund contributes to organizations of people with disabilities including the Kenya Society for the Blind. As provisioned by the act, CBR targeting economic empowerment activities can access this fund

at the community level for use in training young adults with VI as well as those who are involved with their care.

According to Mason and McCall (2013), transition for young adults with VI is a social process comprising four main steps that are influenced by the unique socioeconomic, ethnic and gender characteristics of the individual, namely:

- Personal autonomy and independence from parental control
- Economic sufficiency, usually through employment
- New roles and relationships within and beyond the family
- Participation in community life as citizens with legal rights, responsibilities and access to resources. (p. 116)

However, for young adults with VI, access to information is a challenge. Since they rely on tactual and auditory methods and low vision devices to gain information, it becomes difficult to compete equally in the job market and to attain personal autonomy. Young adults with VI require support in order to complete their education, develop work skills, access information to prevent secondary disabilities, treatment, and rehabilitation. Further, they require support services, assistive technology, training, and rehabilitation to maintain a QOL (Republic of Kenya, 2013).

Social Exclusion and Visual Impairment

The social exclusion of young adults with VI stems from a lack of understanding that the impact of visual loss does not include or limit personal independence for the person with visual impairment (Cimarolli, Reinhardt, & Horowitz, 2006). Further, society has internalized negative stereotypes of the helplessness of young adults with VI. Young adults with VI are restricted in activity and mobility, pigeon-holed with low expectations, and made victim to an underestimated

capacity in excessive praise for minimal accomplishments (Bambara et al., 2009; Cimarolli et al., 2006). Such negative social supports lead to the social undermining of young adults with VI. For example, independent mobility may mean the use of a white cane for a person with a visual impairment but excessive help may hinder this goal if a sighted person insists on guiding and leading. The young adult with VI may experience less optimal well-being which compromises their QOL (Gilbert & Miles, 2000).

Young adults with VI experience criticism, put-downs, and a perceived lower social rank (Gilbert & Miles, 2000). These experiences may result in psychopathological variances such as social anxiety, shame and depression. The young people can internalize social rejection and blame themselves, limiting their ability to achieve personal competency and experiencing a loss of self-identity that results from unfavorable social comparison (Bambara et al., 2009; Gilbert & Miles, 2000). CBR is based on the premise that a person can only empower themselves by developing their own ability. By involving the community to work in solidarity for social change, CBR provides the opportunity for processes of inclusive education, work participation in terms of skill development, medical interventions such as eye surgery and low vision devices, access to mobility equipment, and other assistive technology devices for communication (Heinicke-Motsch, 2013).

Challenges for Young Adults with Visual Impairment in Kenya

Transition to employment is a challenge that young adults with VI in Kenya still face due to structural and policy limitations that do not fully support their holistic training and preparation. Mamboleo, Kampfe, and Smith (2011), Monk and Wee (2008), and Omolo (2012) agreed that Kenya has appropriate legislation in place to support access to work participation and an inclusive community; what are missing are the social and legal structures to enforce

implementation. Indeed, Kenya has ratified the United Nations Convention on the rights of people with disabilities regarding their integration in service delivery and promotes their rights through supportive environments (Monk & Wee, 2008). Given that disability and poverty are intertwined (Frank, 2006), young adults with VI are doomed to continue the vicious cycle and lack the ability to improve their status if not accorded equity of opportunities. According to some research, poverty has been known to cause disability; it can be the cause of malnutrition, poor living conditions, and inaccessibility to primary healthcare, which can result in secondary conditions increasing the impact of the primary disability (Eide & Ingstad, 2011; Opini, 2010; Shakespeare & Officer, 2011).

Perhaps the most outstanding limitation for young adults with VI is that they do not have equal access to educational opportunities. In cases in which they do gain that access, they remain in school longer before entering the job market, usually due to the inaccessibility of institutions of higher learning, a lack of awareness by parents and guardians, and overprotection. Then, once schooling is ended and they seek employment, employer attitudes are a greater barrier for young adults with VI (Gueorguieva, 2012). Marginalization and discrimination arise from the fact that employers do not want the added cost of adapting the work environment to accommodate them. Further, the notion that young adults with VI would be less productive and effective in the workplace adds to their marginalization in a society where profits and optimum productivity of employees are tied (Murugami, 2010; Opini, 2010).

Murugami (2009) and Kampfe, Wadsworth, Mamboleo, and Schonbrun (2008) identified the attitudinal barriers faced by the youth with disabilities in Kenya as well as people with disabilities in general. The researchers found that 74% were denied the right to decision-making on issues affecting their own lives; 86% received unequal treatment by their own families and

society; 80% experienced segregation, isolation and lacked support structures to improve their own status as youth with disabilities; and 72% faced abuse and discrimination that stemmed from negative attitudes towards them associated with disability. In the presence of such barriers, transition to society, work participation, and social inclusion become hard to achieve.

The Development of Community-Based Rehabilitation

The concept of CBR was introduced in the early 1980s as a strategy for rehabilitation, social inclusion, equalization of opportunities, and poverty reduction among people with disabilities through community participation to enhance QOL (ILO, UNESCO, & WHO, 2004; Musoke & Geiser, 2013). The ILO, UNESCO and WHO CBR Joint Position Paper of 2004 established a common approach to promote CBR for the development of people with disabilities. Over the years, CBR has evolved, with a major emphasis placed on human rights and a call for poverty reduction. The major objectives of CBR are:

1. To ensure that people with disabilities are able to maximize their physical and mental abilities, to access regular services and opportunities and to become active contributors to the community and society at large.
2. To activate communities to promote and protect the human rights of people with disabilities through changes within the community, for example, by removing barriers to participation. (ILO et al., 2004, p. 2)

The primary aim of CBR is to provide services for people with disabilities in the environments where they live for purposes of inclusion, work participation and independent living in the society (Crishna, 1999). This is based on the premise that rehabilitation of people with

disabilities should be part of the overall development of the community, not a separate process for people with disabilities alone.

The Central Focus of Community-Based Rehabilitation

Community-Based Rehabilitation (CBR) is an evidence-based practice that focuses on enhancing the quality of life (QOL) for people with disabilities and their families as well as ensuring that their basic needs are met and that inclusion and participation are realized (Mpofu, Jelsman, & Opoz, 2007; WHO & SHIA, 2002). According to the WHO, CBR is a development strategy that seeks to reduce poverty, equalize opportunities, and promote the social inclusion of people with disabilities. Its strategy is to be cognizant of the fact that disability is a state and not an identity. Occupations may suit anyone with skills and CBR does not attribute certain occupations or experiences only to persons who are able-bodied (Heinicke-Motsch, 2013).

CBR strategy is based on the premise of functioning, which is a shift that deemphasizes people's disabilities and focuses on abilities and health levels against the backdrop that every person at one point or another experiences decreased health and functioning, i.e., some disability (WHO, 2010a). In this context, disability is mainstreamed and work participation is defined differently because every individual is considered to have the capacity for participation. For those who are not easily able to participate and those whose health has been impacted by intervening factors, assistive technology, medical attention, or structural modification of their environment is undertaken to accommodate participation (Musoke & Geiser, 2013). Young adults with VI can benefit from all three forms of intervention in accessing their environment and available resources, being socially included and in participating.

The Guidelines of Community-Based Rehabilitation

In 2003, a meeting on CBR was held in Helsinki, Finland where four key guidelines were identified for the development and strengthening of CBR as a strategy for community development involving people with disabilities, their families, and community stakeholders (WHO, 2010). Those guidelines are a roadmap to meeting basic needs and improving QOL of people with disabilities and their families. The CBR guidelines, developed as a collaborative work by the International Labor Organization (ILO), UNESCO, and the World Health Organization (WHO), are the latest and the most pragmatic operating tools in CBR that represent a global shift in the way disability is perceived (MOTSCH, 2008). Those guidelines include guidance on how to develop and strengthen CBR programs, promote CBR as a strategy for community-based development involving people with disabilities, support stakeholders to meet the basic needs and enhance QOL of people with disabilities and their families, and encourage empowerment of people with disabilities and their families (WHO, 2010).

CBR is responsible for defining the needs of young adults with VI within the perspective of community development and clearly laying down the goals relevant to the situation (Heinicke-Motsch, 2013). The aim of CBR is to build the capacities of young adults with disabilities for genuine participation of inclusive, community-based development by building capacities to:

- Manage their own programs and projects;
- Set up and strengthen organizations to serve as vehicles for collective actions
- Identify and develop leaders from their ranks;
- Develop plans to meet their myriad needs in partnership with other rights-holders and duty-bearers;

- Evaluate their efforts, not only to determine performance and gauge impact, but to continually improve their work, and
- Research and document their local initiatives and good practices so that other communities can learn from them. (p. 8)

CBR is also seen as a rehabilitation process that addresses functional limitations of visual loss that interfere with the life goals of finances, self-care, work and social relationships (Boerner & Cimarolli, 2005a). A particularly successful CBR program of inclusion for students with VI in Kenya is that of the Oriang Cheshire supported by Leonard Cheshire International. The program has influenced inclusive education and community inclusion through accessibility to schools, attitude change towards disability, and environmental adaptation for ease of access (Chavuta, Kimuli, & Ogot, 2006). Oriang Cheshire program recognizes that attitudes toward visual impairment and young adults with VI affect their self-esteem, creativity, and the motivation to self-advocate. Murugami (2010) found a correlation between guidance and counseling and career counseling in preparing youth in career decision-making skills, an aspect she found lacking for young adults with VI.

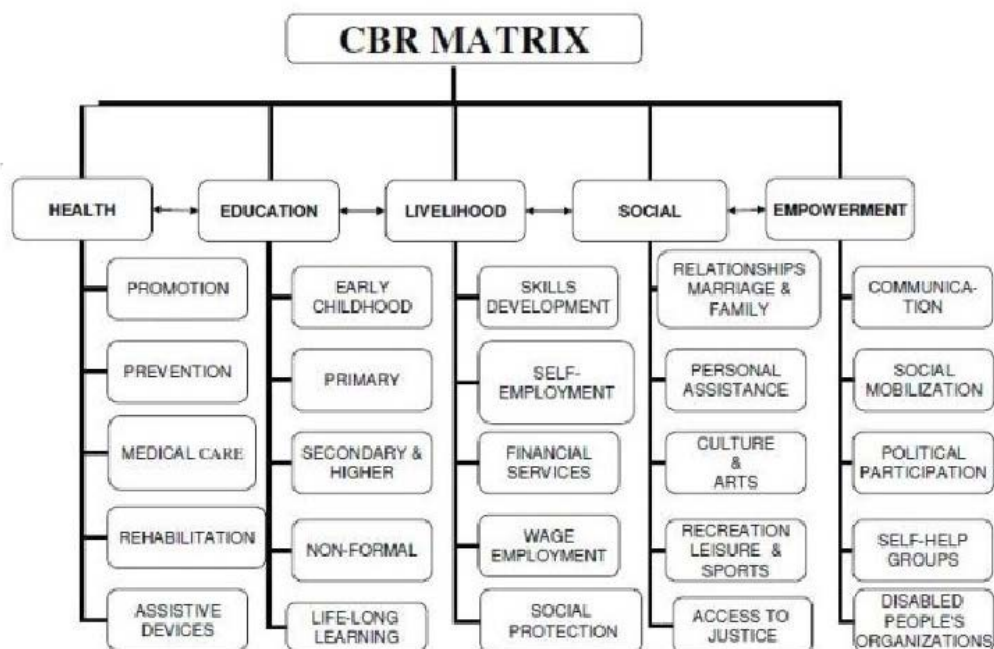
CBR is seen as the strategy and a voice for the rights of people with disabilities and their families in the community (WHO, 2004). ILO, WHO, and UNESCO view CBR as a multi-sectorial approach to address the concerns of people with disabilities and their families in inclusion and work participation since it fosters collaboration among relevant government and non-government (NGO) agencies through education, health, vocational, social, and other services (WHO, 2004). The guidelines for CBR as articulated by the WHO promote CBR as a strategy for community-based development involving people with disabilities that is intended to support stakeholders to meet the basic needs and enhance QOL of people with disabilities and

their families and encourage empowerment of people with disabilities and their families (MOTSCH, 2008; WHO, 2010). Community is influenced in the way it relates via perceptions of culture that create social structure; by targeting the community, families of young adults with VI, and the stakeholders, CBR is tailored to understand the social structures and the way that society functions in order to create a good environment for inclusion and equity.

The CBR Matrix

The main strategy for CBR is the promotion of community inclusion; in order to be effective, projects should be tailored towards the unique needs of the specific group (Deepak et al., 2014). The CBR matrix was developed to address life domains in which people seek to overcome issues in areas such as interpersonal interaction, domestic life, mobility, participation limitations, communication, and general activity restrictions (ILO et al., 2004). The five broad areas of participation are aimed at poverty reduction, equalization of opportunities, and social inclusion as health, education, livelihood, social, and empowerment (ILO et al., 2004; Olusanya, 2005). The WHO developed a matrix that represents the five areas to be a guideline in tailoring CBR to address the specific needs of given groups so as to recognize the heterogeneity of people with disabilities, available resources and the objectives to be addressed. The CBR focus is to reduce poverty and facilitate the fulfilment of basic needs as housing, healthcare and food and work towards achieving inclusion and participation (Motsch, 2008). The CBR matrix was therefore developed to provide a framework to field-level activities in increasing and sustaining autonomy of people with disabilities. Table 1.1 below is the CBR matrix that provides an illustration of the framework.

Table 1.1

The CBR Matrix

Note: Adapted from The World Health Organization (2001).

Despite the consensus regarding CBR as a major step towards maximizing the full potential and abilities of young adults with VI in their natural environments, i.e., among their families and communities, Kenya is yet to reap its benefits by critically examining and utilizing the potentialities of the CBR matrix to facilitate work participation and community inclusion (Gueorguieva, 2012). Since the concept of disability has shifted from a focus on the pathology of the disability within the person to the socio-ecological person-environment fit (P.E fit) that views disability on the basis of interactions between the person and environmental factors (Chan et al., 2009), exploring relationships in function and modifying the environment to accommodate

young adults with VI will facilitate their transition to work participation and community inclusion.

Impact of Visual Impairment on the Family

There is considerable emotional and functional adjustment to visual loss necessary for both the young adult with VI and the family (Bambara et al., 2009). Immediate family members are more intimately involved in the loss than are friends and community since they have firsthand experience of the effects of the visual impairment of their family member. Due to the visual impairment, the family unit is distressed and once an initial diagnosis is obtained, reactions such as denial, shock, blame and mourning take precedence. As they occur, each reaction will affect the family's self-esteem and its adjustment to the implications of the visual loss of the family member (Boerner & Cimarolli, 2005a). Further, the families of young adults with VI experience economic deprivation due to the need to assist their family member with health-related needs, acquisition of low vision devices, caregiving and mobility needs and equipment as well as meeting their own needs as a functional family (Stucki et al., 2007). These cause constraints in family relationships and impact QOL for all family members, including the young adult with disability (Bambara et al., 2009).

Community-Based Rehabilitation and Cultural Values

According to Bickenbach (2009), many of these concepts emerge from social construction of relationships and meanings of given institutions. Community bias not only target visually impaired young adults or those with other disabilities who are the primary clients but also their families. Cultural sensitivity and responsiveness are imperative to initiate community-based programs because the success of such programs depends on community stakeholders, resources available and cultural diversity in the social constructs associated with disability

inherent in particular communities. CBR needs to be initiated by encouraging the local community to participate in the development of positive social supports such as income-generating activities, self-care, managing personal budgets, assistive technology, and accessing rides to work, thus facilitating an understanding of disability and enabling the implementation of sustainable initiatives (Bickenbach, 2009; Cimarolli & Boerner, 2005b). The traditional work participation practices should be recognized and, where appropriate and demonstrably safe, should be incorporated as complementary or alternative forms of inclusion in introducing and implementing CBR.

Employment Policies in Kenya

Kenya has enacted laws and legislation for the protection of individual rights and to provide equal opportunities for all its citizens but enforcement is still lacking due to the absence of structures and support systems (Omollo, 2012). Until recently, the history of Kenya has been marked by growing inequality and division, not only in areas affecting young people with disabilities but also sexuality, women and youth in general (Gueorguieva, 2012). Historically, cultural, social, and religious attitudes have contributed to the marginalization of women, sexual inequality and discrimination against people with disabilities and have translated into oppression through discriminatory laws that permeated both the state and the private sector (Gueorguieva, 2012). However, in recent years, there has been a significant shift towards equality and social inclusion that inspired the adoption of a new constitution in 2010. Thus, Kenya has moved towards the creation of disability-related legislation; however, those laws are yet to be implemented and enforced effectively (Kenya Action Aid 2011).

Kenya enacted the Persons with Disability Act in 2003 aimed at restoring citizenship and humanity as well as addressing discrimination issues, equal opportunity disparity, and neglect

(Kampfe et al., 2008; Kuzma, Yen & Oestreicher, 2009; Myors et al., 2008). This was a great leap forward in trying to empower and ensure equal access to all citizens that specifically addressed disparities of people with disabilities in terms of access. The legislation also barred discrimination and defined legal obligations to persons with disabilities and procedures for redress whenever such discrimination occurred.

Kenya has educational assessment and resource centers (EARCs) that advocate for the integration and inclusion of children with disabilities in primary and, to a lesser extent, secondary education. The main objective of the EARCs is to equalize opportunities for children with special needs (SEN) in education; to facilitate their inclusion into community schools; and to provide assessments for children with disabilities between 1-16 years. Assessments are focused on identifying children with disabilities as early as possible so that they may participate in early intervention activities. Other services include appropriate school placement, guidance for parents of children with disabilities in coping skills, parent support groups, and peripatetic services to enable integration and access to appropriate teaching and learning materials (Kristensen, 1987; Rouse & Kang'ethe, 2003). Kenya has the Kenya Integrated Program for the Visually Impaired (KIEP), a project under the auspice of Ministry of Education that is charged with the integration and inclusion of students with visual impairment into mainstream education (Kiarie, 2004). However, advocacy or successful lobbying for the inclusion of the young adults with VI into mainstream society and full employment is yet to be achieved.

The current constitution provides for adherence to Article 27 of the United Nations Convention of the Rights of Persons with Disabilities of 5% employment opportunities for people with disabilities in public and private sectors. Unfortunately, there are no fundamental enforcement rules in place to ensure that employers and stakeholders observe this provision.

Therefore, it is hoped that CBR would be well-positioned to play an active role in planning and implementing the constitutional provision.

Summary

Young adults with VI face restrictions in participation and social inclusion associated with outdoor mobility, employment and community activities upon their transition to the community. This is attributed to a lack of social supports and enforcement of legal structures that facilitate holistic training and preparation of young adults with VI to enable ease of access to community life, employment, and independence. Despite the presence of programs like EARC and KIEP at the school level, social support transition programs from institutions of learning are still lacking. The relationship between poverty and disability is clear and a challenge globally for young people with disabilities that impact their education, economic empowerment, social inclusion, and health. The cultural perception of disability and the status it is assigned in terms of beliefs, practices, and roles by society affect the development issues of young adults with VI as well as young people with disabilities in general, compartmentalizing them as a vulnerable population whose needs are either relegated or ignored completely.

CBR is an inclusive human development framework that has been widely adopted in the global context. As a tool for human development, CBR addresses the support needs of vulnerable populations, like young adults with VI. ILO, WHO, and UNESCO view CBR as a multi-sectorial approach to addressing the concerns of people with disabilities and their families in inclusion and work participation since it fosters collaboration among relevant government and non-government (NGO) agencies through education, health, vocational, social, and other services. Part of the process is to provide people with the resources, opportunities, knowledge, and skills needed to increase their capacity so that they can determine their own futures. Such an

approach will facilitate full inclusion in community life and work participation, taking into account the culture relevance.

Chapter 3: Research Design

Chapter 3 begins with an introduction followed by a discussion of the focus of the study and the research question and sub-questions that guided the study in the course of obtaining information from the participants and sites. This is followed by the research design and the timeline of the study, site and sample selection, the theory on which the study was based, criteria, participants, and then the depth versus breadth or scope of the study. The next section of this chapter covers data collection, interviews, observations, and document collection; the researcher's role management in the study; and managing and recording of data. Next is trustworthiness, including the issues of prolonged engagement, persistent engagement, triangulation, peer debriefing, member checks, and the audit trail. The chapter concludes with evidentiary inadequacies, and the relationship of data with grounded theory.

Introduction

This study was guided by the literature review and the theoretical framework with the goal of understanding the barriers that socially exclude young adults with VI and hinder them from attaining equity in work participation opportunities as well as access to community resources. The researcher interviewed participants concerning their individual experiences as young adults with VI, asking them how they perceived themselves to be marginalized and/or excluded in their daily lives and their thoughts on ways this could be ameliorated. The study examined how CBR could be utilized in bridging the employment gap, work participation, access to community resources for young adults with VI, and social inclusion. In the first part of the study, the researcher interviewed six (6) young adults with VI in regard to their individual experiences; in the second part, the researcher established two focus groups comprised of the six young adults with VI and four school committee members drawn from two schools affiliated

with CBR programs. The focus groups participated in photo sessions to capture scenes they perceived as depicting social exclusion or otherwise of young adults with VI and discussed their stories about those photographs in focus group photovoice sessions.

Focus of the Study

This study sought to gain an understanding of the challenges of young adults with VI in seeking equal access to resources and opportunities. Through interviewing, observation, photovoice sessions, memoing, and document collection, the researcher's intent was to develop an in-depth understanding of the marginalization issues raised by participants, at both the individual and focus group levels.

Musoke and Geiser (2013) observed that CBR is a strategy underlying a cross-sectorial approach to inclusive development that subsequently enhances the quality of life for people with disabilities; this makes its use very appropriate for engaging young adults with VI in accessing community resources and work participation. The study utilized a qualitative research approach to examine the gaps that existed in work participation, productivity, social inclusion, and the preparedness of young adults with VI to self-advocate for individual development and independence within the community. The need for collective bargaining among people with disabilities, irrespective of type, is imperative so that they can have a greater voice, numbers and influence in the areas of equal opportunities for work participation and social inclusion, all of which are important aspects of CBR (WHO & SHIA, 2002).

As stated, qualitative study approach was utilized in the study. According to Ingstad and Grunt (2007), a qualitative approach is a likely choice when the focus of a study involves understanding the meanings different experiences have for different people. Further, qualitative design offers a method of clarifying people's experiences, perspectives on certain aspects of their

lives, and how a phenomenon arises. The philosophy underpinning the qualitative research design in this study is conflict theory, better known in education as critical theory, that argues that society is rooted in power relationships which should be critically analyzed (Johnson & Gray, 2010). The goal in critically analyzing power relationships or differentials is to reduce the inequalities therein, such as gender, disability, ethnicity or race stratification and discrimination based on sexual identity, disability and age. This study addressed the following research questions through the use of focus groups and interviews with young adults with VI who are in transition and/or are actively seeking employment.

Research Question

What are the cultural biases and social constructs of disability that discriminate against young adults with visual impairment in the transition process towards work participation in the Elgeyo-Marakwet and Kisumu Counties of Kenya?

Research Sub-Questions

- What are the specific barriers young adults with visual impairment face in accessing equal opportunities for work participation in the Elgeyo-Marakwet and Kisumu Counties in Kenya?
- What are the specific barriers young adults with visual impairment face in accessing equal opportunities for community inclusion in Elgeyo-Marakwet and Kisumu Counties in Kenya?
- What do young adults with visual impairments and their families think could facilitate work participation and successful community integration in Elgeyo-Marakwet and Kisumu Counties in Kenya?

Research Design and Timeline

Purposeful sampling was used to identify six young adults (ages 18-24) with VI and four school committee members whose schools are hosts to CBR to participate in the study. The first part of the research study involved interviewing the six participants who are young adults with VI. In the second part of the study, those participants, as well as the school committee members, were separated into two focus groups with each focus group supplied with a disposable camera for needs assessment photovoice sessions. An interview guide composed of open-ended items using probes and follow-up questions was utilized to identify barriers faced by the respondents who have visual impairments. Photovoice is an approach centered on community-based participatory research (CBPR); a method that has been applied in health-related and disability research to promote and enhance community change (Teti, Murray, Johnson, & Binson, 2012).

The researcher based the protocol from which both the questions emerged on information gleaned from the literature review and the research questions posed in the study. Observation techniques were utilized in photovoice presentation sessions during which participants explained the photographs and messages of the challenges they perceived to be experienced by the young adults with VI under their management. This study acknowledges that standardization is important in multi-site qualitative research (Ritchie, Lewis, Nicholls, & Ormston, 2013). The researcher adhered to guidelines that facilitate the collection of comparable data in both locations of the study in Kenya. In this study, grounded theory was applied to address and achieve the research objectives.

The university's institutional review board (IRB) was contacted, given the topic of study, the letter of consent for participants, and interview questions for review and thereafter gave their permission to complete the study. All interview and focus group participants signed an informed

consent form and understood that their participation was completely voluntary and that the information accessed would be treated with confidentiality. All interview questions are located in Appendix A. The informed consent form is located in Appendix B. The approval forms from the IRB are located in Appendices C and D.

Study Sites

The research study was carried out in the selected sites of Elgeyo-Marakwet and Kisumu Counties. Elgeyo-Marakwet and Kisumu Counties are among the 47 counties of the newly devolved system of government in Kenya. Previously, the two counties were in the larger provinces of Rift Valley and Nyanza; Elgeyo-Marakwet County was formerly comprised of the two main districts of Keiyo and Marakwet in the Rift Valley, which was administratively subdivided into 14 counties at the onset of the devolved government system. The devolution occurred immediately following the national elections in Kenya in 2013. Elgeyo-Marakwet County is mainly occupied by three ethnic communities of the larger Kalenjin group of culturally and linguistically related people. However, there are members of other communities who have either settled in the area or who are employees of different portfolios in the county setting. The largest town in Elgeyo-Marakwet County is Iten, which serves as the capital center. Iten is 329 kilometers from Nairobi, the capital city of Kenya. Kisumu Town is the headquarters of Kisumu County and the participants are located 150 miles away from that city. The nearest town was approximately five miles away. Kisumu County is 338 kilometers from the capital city of Kenya Nairobi and in the western part of the country. Kisumu County has a population of 968,909, according to the Kenya Bureau of Statistics from the 2009 census (KNBS, 2010). The region is predominantly occupied by the Luo-speaking community, though the towns are cosmopolitan, a feature that is reflected in most towns of Kenya.

Sample Selection

This study focused on young adults of ages 18-30 with VI who have completed primary, high school, or college and who are actively seeking work placement or are in transition from school to community. It also involved non-disabled community members who are members of school committees for students who have VI that are affiliated with two CBR programs in ElgeyoMarakwet and Kisumu Counties in Kenya. The sample population was obtained through purposeful sampling to identify six young adults with VI and four members of school committees affiliated to CBRs to participate in the study. The question to ask when choosing a sampling method to obtain a population is whether that population has the answers to the questions the researcher intends to ask (Tongco, 2007). Creswell (2012) posited that in order to effectively carry out purposeful sampling, a researcher should identify a sampling strategy and be in a position to defend the use of the strategy selected. The site and sample population identified provided rich information that enabled the researcher to address the research questions. Samples serve to give information about the characteristics of the particular population sampled; this study utilized the purposeful sampling procedure wherein the researcher intentionally selects participants and the sites where they intend to study the central phenomenon (Creswell, 2002). The aim of purposeful sampling is not to generalize to the population but to generate an in-depth understanding of the presenting phenomena. Purposeful sampling may result in information that enables individuals to learn about or understand phenomena as well as give a voice to an underrepresented group who may not otherwise have the capacity to self-advocate (Onwuegbuzie & Leech, 2007).

The goal of the researcher was to understand the challenges faced by the young adults with VI in their setting and their perception of how CBR can be utilized to address their needs.

The question to bear in mind is whether the target population is rich in the information desired or is able to provide information that effectively answers the research questions (Creswell, 2012).

This study sampled the six young adults with VI and four school committee members serving institutions for students with visual impairments who are expected to have experienced the phenomenon of disability and, by extension, social exclusion from community and work participation. The sampling strategy in this study was homogeneous in that the participants shared common characteristics, a strategy that is appropriate for use in an in-depth study of a small group (Hatch, 2002).

Depth vs. Breadth

This study utilized the qualitative research method, which is used to answer the “whys” and “hows” of human behavior (Creswell, 2002; Silverman, 2010). The study used a case study focus in qualitative research to collect data with the goal of answering research questions concerning barriers to work participation and social inclusion that face young adults with VI in Elgeyo-Marakwet and Kisumu Counties in Kenya. The case study focus was important to this study since it was intended to center on a small group of young adults with VI, six to be precise, in this specific context and to provide an in-depth examination of the barriers to work participation and social inclusion that they face.

The case study method does not seek to find a cause-effect relationship but rather to describe and explore behavior to arrive at a better understanding of the research questions (Hart, 1999). Further, case studies are said to be a detailed examination of an aspect of an historical episode to develop or test historical explanations generalizable to other events (Barnartt, 2001). Disability has been a subject of discrimination and marginalization for a long time (Lichtman,

2012); therefore, this study sought an understanding of the social construct associated with visual impairment and how such bias has contributed to the discrimination of young adults with VI.

The researcher employed in-depth interviews so as to achieve broad and deep coverage of key issues of the phenomenon under study. The researcher employed content mapping and content mining questions to achieve thorough coverage of the key issues identified in the research questions (Ritchie et al., 2013). Legard, Keegan, and Ward (2003) underscored the importance of personal accounts because of the power of language to illuminate meaning and because interviews are often viewed as a form of conversation with the purpose of constructing knowledge in the interactive process. The objective of content mining is to identify issues specific to an interview while content mapping is aimed at generating an in-depth understanding from the participant's point of view. A probing and follow-up questioning technique was used to gather more information, descriptions, and explanations while leading questions were avoided (Ritchie et al., 2013). The technique of observation was used concurrently with the interviews. There were some relevant documents pertaining to the phenomenon from the participants that were accessed by the researcher during the sessions, which provided background information that added to an understanding of the participants and CBR. Photographs were collected from the photovoice sessions of the study as presented by the focus groups to provide insights into their understanding of aspects of marginalization and social exclusion of young adults with VI.

Data Collection

Data collection methods included the use of one-on-one interviews, observations, document collection, and photovoice focus groups. The first part of the research study employed the interview and observation techniques of qualitative research approach with six youth with VI. In the second part, the six young adults with VI and the four school committee members were

incorporated into two focus groups. Each focus group was provided with a disposable camera for needs assessment photovoice sessions.

Interviews

Single face-face interviews with each of the six participants were conducted. The researcher made note of the importance of being authentic, relaxed, and conversational in order to capture the required information. This was particularly important as the time available for contact with participants was limited considering the researcher's time constraints. The question items sought factual information about the participants' circumstances, their experiences, and opinions on predetermined themes that were contained in the research question and the sub-research questions. Each interviewee was given an opportunity to reflect on their personal experiences in a relaxed and familiar environment and in a conversational state. The questions were based on the WHO International Classification Model of Functioning (ICF) as well as queries that emerged from the literature review. Further, the open-ended interview protocol was based on the premise that CBR affords young adults with VI the opportunity for social inclusion and work participation as spelt out in the Joint Position Paper of the WHO, UNESCO, and ILO of 2004. This is in line with the roadmap towards the achievement of the Millennium Development Goals (MDGs) of 2000 (ILO, UNESCO, & WHO, 2004).

The researcher developed a protocol for the purpose of structuring interviews to serve as a guide of the questions to be asked in the order desired. The choice of a face-to-face interview protocol was based on the fact that disability and work participation are an emotive issue among youth with VI who have completed high school or college by overcoming the odds of poverty and the lack of appropriate accommodations to navigate their social and academic environments, and yet still face discrimination and marginalization when seeking and obtaining work with the

goal of becoming independent and productive members of society (Tororei, 2009). Interviews are utilized in qualitative research for purposes of contributing to conceptual and theoretical knowledge derived from the meanings of participants' life experiences in a given study (DiCicco-Bloom & Crabtree, 2006). An interview approach that uses open-ended questions elicits an authentic account of subjective experiences and reality of the social world of the person being interviewed (Silverman, 1998). This researcher's interview approach involved the use of open-ended questions to identify barriers that were faced by the respondents with visual impairments and who had perceived social discrimination, especially those attitudes that they experienced as a result of their disability status. Interviewing was appropriate for this study since it is a technique that seeks to generate empirical data about the social world by asking people to talk about their social lives and interactions (Silverman, 2010).

Photovoice

Photovoice approach was based on Community-Based Participatory Research (CBPR), a method that has been applied in health-related and disability research to promote and enhance community change (Hergenrather, Rhodes, Cowan, Bardhoshi, & Pula, 2009). The concept of photovoice centers on understanding the nature of community concerns and strengths through photography so that in defining the images represented, a community can influence policy makers (Hergenrather et al., 2009). Photovoice does not require participants to be able to read or write and was therefore effective with some of the community school representatives who had only a basic understanding of the English language; thus the researcher allowed them to express their views in a medium of communication that was comfortable for all groups. There was no requirement for an interpreter since the researcher was conversant with the medium of communication.

Observations

The researcher engaged in an observation strategy during the research study and was cognizant of the fact that there is a danger of being intrusive in relation to the level of involvement. In this respect, the researcher was an observer as well as a participant since I engaged in interviews, prompts, and posed follow-up questions to clarify and understand participant responses. The researcher was keen to avoid influencing the natural flow of events in the given context (Hatch, 2002). Hatch (2002) posited that observation need not be all or nothing; finding a balance as the study progresses is a good strategy in the event that roles shift in the course of rapport building, a process that was evident and recurred during the interactions between the researcher and the participants.

Observation gives the researcher a better understanding of a routine activity in a setting natural for a youth with VI. It provides insights into interactions, illustrations of the whole picture of a given situation or experience (Hart, 1999; Kawulich, 2005; Silverman, 1998). Observation has been said to permit firsthand experience that enables a researcher to discover inductively how participants are relating to the world they live in as well as gain sensitive information from the setting which may not have been otherwise shared by the participant during interviews. Further, essential facets of observation must be present on site, and what participants do or say must be carefully recorded with the aim of understanding their social behavior.

Document Collection

Documents are an important source of information for a researcher who is conducting qualitative research since they are obtained at the site in the language and words of the participant to which thoughtful attention has been paid (Creswell, 2012). Documents include

private and public records that are either available online, in hard copies, journals, school committee minutes, health records, or other sources that carry information desired by a researcher to answer the research questions (DaRos-Voseles, Collins, Onwuegbuzie, & Jiao, 2008). The researcher was able to view documentation that contained background information of participants and also accessed bylaws that governed the CBOs. These documents served to shed light on the role of the CBOs in supporting young adults with VI and school-going students in social inclusion and work participation.

The researcher made brief notes on the information obtained from the documentation accessed on site, the most important being the individual and institutional records, especially those pertaining to young adults with VI. That information also included government policies on the rights of people with visual impairment to work participation and inclusion. Photovoice focus groups are another interview option that are unstructured; photographs can motivate participants to discuss and reveal their knowledge and opinions with little intervention from the researcher observing intergroup interactions, perceptions, and can capture additional information that can be beneficial to the research study (DaRos-Voseles et al., 2008). Photographs portray insights deemed meaningful from the participants' points of view but that represent the researcher's key concepts of interest (Collins, 2010). This study employed photovoice in data collection from focus groups who took photographs of scenes and expressed their viewpoints by telling their clear, vivid stories about what represents their perceptions of non-participation, social exclusion, or otherwise of young adults with VI in work participation and community inclusion. The intent of these groups was to focus critically on the phenomenon under study (Darbyshire, MacDougall, & Schiller, 2005). The researcher held two sessions of approximately one and half hours each for the two focus groups. The first session involved information such as

the dissemination of the expectations of the researcher and input from the group members concerning their own thoughts and interpretations of their role in photographing scenes and making mental pictures of what happens on the ground. The second session included discussions of the photographs and information gathering and lasted approximately two hours. These were information-rich sessions and the photographs elicited many reactions from the participants, who noted that they were critically looking at their environment for the first time. Some photographs from the photo sessions were used in the data analysis stage.

Researcher's Role in Data Collection

The researcher took an impartial stance in seeking to understand the perceptions of the sample population, i.e., young adults with VI, on experiences of exclusion from work participation and community activities as well as the representations from the photovoice sessions of the focus groups. The researcher was the instrument with which data was collected and interpreted (Hoepfl, 1997; Yin, 2010). Strauss and Corbin (1997) posited that researchers should evaluate their skills and readiness in initiating qualitative inquiry, otherwise referred to as theoretical sensitivity. Theoretical sensitivity is normally associated with grounded theory and refers to personal qualities of the researcher that include insight, the ability to understand, give meaning to and sort out the data into that which answers the research study questions as well as what is pertinent to the study (Corbin & Strauss, 2008).

The researcher should pay close attention to the literature, especially that which pertains to the phenomenon under study and the theoretical framework on which the study is based: the research process, memoing of events and documentation accessed from the research site (Mitra et al., 2013). This access to information will sensitize the researcher to the goings-on of the phenomenon under study; it is therefore important to examine one's own knowledge and views

pertaining to the researcher's role as a primary data collection instrument because, as posited by Yin (2010), the existence of background knowledge can affect the study inquiry and the potential findings. Being self-aware enables the researcher to establish checks and balances; therefore Yin recommends keeping a journal of introspection as the researcher's lens of viewing things and including it in the final study report to disclose any possible influences on the study or findings.

Yin (2010) observed that to manage fieldwork in an interview-based study and determine the location in which to conduct the interviews, the researcher needs to recruit participants and locate premises that would be convenient to those participants. Depending on the nature of the study, the participant's home is typically a venue of choice so that their needs are placed first. As observed, there are challenges with the management of field research; therefore personal qualities and competencies such as good listening skills, perseverance, sound questioning skills, and knowledge of the topic are important in managing my role as the researcher (Yin, 2010). The researcher located interviews in places where the participants had indicated they were comfortable. Some individual one-on-one interviews were conducted in close proximity to the homes of the participants while the rest were conducted at the CBR office grounds.

Managing and Recording Data

Managing and recording data is the process of collecting, storing, processing, and analyzing data to facilitate efficient use of the information accessed through interviews, observation, photography, and documents or other methods as the researcher deems appropriate for their research approach (Hergenrather et al., 2009). The qualitative data collected in the field came in the form of audio recorded verbatim using an audio-recording device. The researcher organized audio material in order of scenes and jotted down observation notes during the one-on-one interviews, discussions, and photovoice presentations from the focus groups. The data

analysis is presented in Chapter 4 in the form of a detailed descriptive analysis. Data analysis is a continuous, iterative process that involves bringing order, structure and interpretive formats to the data collected in the process of managing information collected during the fieldwork (Marshall & Rossman, 2010). The data is present in the form of explanations and descriptions that account for the experiences as reported by participants and was organized immediately following the interview and photovoice sessions to keep up with the information received.

The procedure of managing and recording data is important in that the researcher has large amounts of information that are intertwined and thus need to be deciphered so that the data become useful and address the research questions of the study. The process requires sorting and reducing the data to a manageable size by generating themes and concepts (DiCicco-Bloom & Crabtree, 2006; Ritchie et al., 2013). Ritchie et al. (2013) noted that without data management, it becomes impossible to understand the material collected or to make use of it. The skills demanded of me as the researcher included rigor, creativity and clarity not only in presenting data, but also in conceptual thinking to present it in a logical manner. Further, the management of data depends on the tools used in its ordering and categorizing into themes and concepts. I manually transcribed the data, listening carefully to each audio-recorded session. However, in some cases, while I could understand all speakers, translation into English was occasionally difficult though the meaning was never lost.

Trustworthiness

Trustworthiness, also referred to as the goodness of qualitative research, is one of the general criteria for establishing rigor in qualitative research (Marshall & Rossman, 2010; Krefting, 1990). According to Krefting (1990), its worth is established by discovering the human experiences as lived and perceived by the participants in a study. That trust is the value

of the claims that a research study makes based on credibility, dependability, confirmability, and transferability of its results (Guba & Lincoln, 1982; Marshall & Rossman, 2010). The trustworthiness of the data collected was established through detailed descriptions, explanations, narratives, and audit trails, as noted by Guba and Lincoln (1982).

Guba and Lincoln (1982) observed that trustworthiness is a value of a naturalistic inquiry in which the inquiry is carried out in a natural setting and uses a case study approach. Further, that naturalistic inquiry is driven by theory grounded on the data and takes advantage of the fact that the researcher has less power to influence the outcome of an inquiry since they themselves function as a research tool. Trustworthiness therefore is the value that establishes the results to be credible based on the multiple sites accessed during the interviews, observations, and document collection unique to participants (Guba & Lincoln, 1982; Morse et al., 2008).

Prolonged Engagement

Prolonged engagement at the site modifies distortions that may occur due to the inquirer's presence (Guba & Lincoln, 1982). Their presence provides the opportunity to build rapport and create trust in that researcher by the participants, enabling the researcher to understand the more salient features of the context of the problem. The researcher conducted interviews of approximately an hour to an hour and a half in length as well as scheduled sessions in environments in which participants were able to relax and, hopefully, not be intimidated by my presence. For some participants, interview sessions were conducted in their homes and for others, at the offices of the CBOs where they were affiliated. This bred familiarity of the site for the participants and enabled ease of communication in a relaxed environment. The researcher did not play an overly significant role to allow the participants feel part and parcel of the process.

Persistent Engagement

Persistent engagement ensured that I spent a reasonable amount of time in the field to be able to understand those salient features that were not expressed verbally by participants. I understood the challenges of time and schedules by participants that did not allow revisits but adequately utilized the time available. Persistence is characterized by dedication, vigor, and absorption in a given activity (Schaufeli & Bakker, 2004). I believed that I exhibited all three factors. Persistent engagement within this context; during the one-on-one interview and focus group photovoice-based sessions allowed the researcher to gain in-depth, relevant knowledge necessary for trustworthy results from the interviews. In my case, my goal to produce authentic and trustworthy data within the limited time was met. In addition, I worked to find all relevant data, not just the data that seemed to make sense.

Triangulation

Quality matters in qualitative research and this is enhanced when researchers employ a set of techniques in a pluralistic method to access different facets of the same social phenomena (Neff & Olsen, 2007). Data triangulation involves the use of three or more sources to establish factual accuracy. Creswell (2012) recommended that, for consistency, a researcher compare different sources through differently phrased questions to arrive at the same fact. I employed triangulation during my field research through observing behavior of the participants and what they said as well as document collection, memoing and photovoice focus groups.

Triangulation also involves the observation of solitary behavior with constraint by the presence of others, that is, non-verbal versus verbal and volunteered responses when asked for answers (Crow, Levine, & Nager, 1992). In establishing the facts for my study, I ensured rigor

by looking at studies done on the role of CBR in addressing poverty issues in developing countries and what participants in this particular study thought could be appropriate in their situation. The concept of triangulation carries the aspect of method where it is applied in obtaining information in assessing the same situation (Hatch, 2002). Hatch (2002) observed that references from documents such as school committee minutes, internal communication, and newspaper accounts can be triangulated with data from focus groups or interviewees because they comprise individuals who represent different aspects of community perspectives.

Peer Debriefing

Peer debriefing is another process aimed at enhancing credibility in qualitative research. The researcher meets with one or two of their colleagues who are not associated with the research study in order to critically review the methodological concerns of data collection and the data analysis process (Spillett, 2003). This enables the researcher to look back and fill in areas needed for completeness in the research study, to address the research questions, and to come up with critical data that will produce warranted answers (Teddlie & Tashakkori, 2009).

The researcher involved some graduate school peers who were members of her cohort to review the methodological section. This was very important since peer debriefing is about assuring quality and trustworthiness of a research study. The researcher was responsible for the purposive sampling of participants, played the lead role in the interviews, both individually and in the focus groups, carried out the observations, recorded the interview sessions accurately, and also did the follow-ups. This was a big responsibility that required adequate preparedness in terms of knowledge and skills in the research methodology and ensured that truth value was enhanced through impartial external peer debriefing (Yin, 2010). Peer debriefing looked at the interview items to ensure that they were free of bias and addressed the research questions, the

conceptual framework, and capacity in the theoretical framework. The group of graduate students also looked at the data, and being researchers in their own right, this scrutiny was very important. The researcher was able to see aspects and themes that may not have been attended to, thus enhancing the quality of the research findings.

In particular, the researcher had a personal stake in this research study, having worked with students and youth with visual impairment for over twenty years. She was not unmindful of the fact that she brought a combination of subjective knowledge and skills into the study, as observed by Spillet (2003). This perspective could bias the study and acknowledgement of it is necessary to be safe; however, the researcher also brought unique characteristics to the study and peer debriefing enhanced the researcher's awareness of what qualities or biases were brought into the study that, in fact, made her an effective research tool.

Member Checks

Member checking is a strategy of data collection and analysis wherein the researcher ensures that the findings and interpretations of a research study are true to the account as recorded (Creswell, 2012). Research loses its utility and credibility if there is not adequate rigor since the goal is to find plausible evidence so that the outcome explains the phenomenon under study (Morse et al., 2008). The researcher cross-checked with the participants on the accuracy of data recorded during the interview and photovoice sessions. Creswell (2012) observed that the process of member checking involves taking back the findings through writing or interviews about the accuracy of the report. The researcher visited two participants and replayed interview sessions for each individual to get their feedback on the authenticity of the tapes. The researcher selected two more members who read excerpts of their contributions to get their views and feedback on whether the descriptions, themes, and interpretations were representative of the

information discussed and recorded during the face-face sessions. Due diligence to confidentiality was adhered to and observed.

Audit Trail Notation

Audit trail, also known as a confirmability audit, is the process of establishing credibility and rigor in qualitative research (Guba & Lincoln, 1982; Koch, 2006; Wolf, 2003). The researcher maintained a clear audit trail by transcribing the text or data information into themes from interviews, observation notes, document analysis, journals, photographs, and other important information on the experiences of the participants in the study. The researcher was aware of the responsibility of ensuring the in-depth understanding of the experiences of the phenomena under study by describing the steps of the process of data collection, data analysis and reporting of results, as observed by Wolf (2003). Every piece of data (interviews, document collection, photovoice focus groups, observation notes, and researcher's journal) was labeled so that each item could be tracked and connected to each participant. All data were considered confidential and kept in a secure location to ensure the privacy of the participants.

Evidentiary Inadequacies

The researcher addressed evidentiary inadequacies to identify any existing gaps in justifying the phenomenon under study. According to Creswell (2012), deficiency in evidence refers to the fact that there exists some deficiency in the existing literature or practice or that the practical experiences of the researcher do not serve to address the study effectively. It may also mean that either there is a need for further research to study and understand the phenomenon for purposes of effective intervention or that the evidence collected was inadequate (Yin, 2010). Young adults with VI face challenges of social inclusion and work participation. However, is

this phenomenon because there is a lack of adequate resources, are there barriers to those resources such as lack of voice, lack of enforcement of protective legislation, or is it the existence of a hostile environment in terms of adaptation? CBR is an effective strategy to address poverty and the challenges of social inclusion and work participation for young adults with VI, but has it been effectively utilized? These are some of the questions I considered during the interview, observation, compilation of researcher notes, and photovoice sessions in seeking answers from the research study. By addressing each level of trustworthiness, any “holes” in the data were filled during the additional time in the field occurring during the two visits the researcher made to the participants, first during the interviews and again during the focus group sessions. Later, the researcher sent the transcribed interviews two participants for their verification and confirmation that the data were a true transcription of what had been discussed.

Data in Relation to Grounded Theory

This qualitative analysis report presented what the participants in the case study group identified as the most important issues, meaning those that they perceived to be significant in their transition to independence, social inclusion and work participation in the community and society. Based on the grounded theory design that interviews can be viewed as unfolding stories (Creswell, 2012), the researcher gave a narrative of the transcribed interviews of the participants. Concepts that emerged from the data analysis process were categorized according to how similar or different they were. The narrative consisted of explanations and discussions of meanings presented by the participants in the study, focusing on the workability of the grounded theory and the relevance of open coding, axial coding and selective coding processes of grounded theory. According to Strauss and Corbin (1997), grounded theory enables the researcher to explain the feelings of the participants in the study as they experience the phenomena. The process enables

the researcher to answer the research and research sub-questions through the narratives presented in the presentation of open coding, axial coding and selective coding. Coding is the analytic process where concepts and properties of the data, as well as dimensions therein are identified to facilitate the researcher's process of developing relationships among the categories (Walker & Myrick, 2006). Strauss and Corbin (1990), state that the importance of constant comparison of the data within the coding process is aimed at answering the research questions and achieving the purpose of the study.

The researcher engaged in the process of open coding which according to Corbin and Strauss (1990) begins once a site and participants have been identified, and a phenomenon based on incidents, events, experiences and conditions, barriers, or interactions expressed that prevent actions, and in this particular study, experiences that hinder social inclusion and work participation are expressed. The researcher engaged in open coding by going through the data and marking (highlighting, circling, writing down words and phrases) that described the experiences and behavior of the participants. The next step was axial coding that involved the development of themes and categories represented in the data. Axial coding enabled the researcher to make connections between categories identified against the data. The theory grounded in the data is deductively and inductively at but has to hold up when compared to the data (Strauss & Corbin, 1990); Walker & Myrick, 2006). Selective coding is the process by which all categories identified are unified around the core category and filling in all categories with descriptive detail as posited by Strauss and Corbin (1990). The core categories obtained by the researcher queried the interactions, actions, and experiences of the participants in the study so that the core categories represent the central phenomena of the study.

The data were classified into categories and themes that emerged from the axial coding, after which the central phenomena was selected to place and relate to all other categories that fell under that particular category. This is the point at which the theory emerged from the data (Strauss & Corbin, 1990). The researcher proceeded to narrate, explain and describe the data based on the categories as represented in the axial codes. There emerged six axial codes which were, in essence, the theories based on the research and sub-research questions. The axial codes were: culture and community implications, mobility and travel experience, financial constraints associated with lack of source of income, access to equal opportunities for school and education, social supports for young adults with visual impairment and access to equal opportunities for work.

Summary

In this chapter, the researcher has discussed the systematic research process that provided data to answer the research questions of the study. The focus was to understand the challenges young adults with visual impairment experience in seeking inclusion and work participation to be independent and productive citizens. Through purposive sampling, the researcher provided a sample population that was information rich to adequately address the concerns of the inquiry. Qualitative research was an effective design that provided an in-depth understanding of human behavior and experiences of participants. Thus, the researcher's in-depth interviewing, unobtrusive observation, collection of documents and photovoice sessions achieved a broad coverage of key issues concerning the research study. The researcher was sensitive and conscious of herself so as not to be affected by her own bias. This was illustrated by the theoretical sensitivity utilized to ensure the quality, trustworthiness, and credibility of the data collection and analysis process.

CHAPTER 4: Presentation of Data

Chapter 4 begins with an introduction followed by an explanation of transcription protocol of the audio-recorded interviews, then a discussion of the transcribed interviews, analysis, characteristics of the study population; age and gender distribution, and the degree of visual impairment family composition, financial income and marital status of the study group. Next are the audit trail notations, the descriptive matrix, and findings reported in the form of axial codes outlined under culture and the community. This discussion is followed by implications and then summary of the axial codes with additional summaries of the issues of mobility and travel experience, financial constraints associated with a lack of source of income, its summary, access to equal opportunities for school and education, social supports for young adults with visual impairment and access to equal opportunities for work participation.

Introduction

As observed in the background section of this study, Kenya has enacted laws and legislation for the protection of individual rights and to provide equal opportunities for all its citizens (Omollo, 2012). Over time, Kenya has improved the legal position of people with disabilities, especially since 2003 when the People with Disabilities (PWA) Act was passed (Otieno, 2009). The PWD Act of 2003 guarantees the right to non-discrimination on the grounds of disability, a right granted constitutionally for people with disabilities for the first time in Kenya (Gueorguieva, 2012). The Persons with Disabilities Act of 2003 sections 12 and 13, the Kenya constitution, and the government of Kenya performance contract guidelines of 2010-2011 are instruments used to create equal opportunities for employment in Kenya. However, discrimination in employment is still prevalent (Tororei, 2009), possibly due to the lack of regulation that would ensure compliance (Otieno, 2009).

The concept of CBR was introduced in the early 1980s as a strategy for rehabilitation, social inclusion, equalization of opportunities, and poverty reduction among people with disabilities through community participation to enhance QOL (ILO, UNESCO, & WHO, 2004; Musoke & Geiser, 2013). The WHO and its development partners envisioned that CBR would be particularly useful to addressing the needs of people with disabilities and their families in developing countries where resources are scarce (Musoke & Geiser, 2013). Kenya is one such developing country experiencing a skewed distribution of resources where people with disabilities have experienced poverty and marginalization despite sound policies and legislation.

Transcription Protocol

Transcription is the process of reproducing spoken words such as those from audio-taped interviews into written text (Halcomb & Davidson, 2006). I conducted one-on-one interviews with six young adults who had visual impairment and two focus groups of five members each composed of the three young adults with VI and two members of school committees whose schools are affiliated to CBRs within their communities. The participants in the focus groups took part in photovoice sessions during which they used photography to express their perceptions of social inclusion and work participation for young adults with VI. I transcribed the audio-recorded interviews word by word, phrase by phrase and sentence by sentence. These transcriptions facilitated the process of developing an audit trail by my supervisors for quality control and assurance, trustworthiness of my data and the assessment of the significance of the research study as well as conformability, as suggested by Hoepfl (1997).

I crosschecked the transcribed data by returning to the audio-recorded interviews several times to ensure that I correctly interpreted the responses of participants as discussed during the

interview sessions in order to avoid transcriber errors (Patton, 2002). I supported the transcription process with the researcher notes I jotted down during the field trips. Observations were made during the interview sessions as part of the data collection technique and that data was reported. This transcription therefore is the recreation of the verbal and non-verbal material of the data collection process and the peer debriefing session held with some of my graduate student colleagues.

Analysis

Since the qualitative research approach was based on the grounded theory, the first step in the data analysis was open-coding of the data to bring meaning to the data collected (Miles & Huberman, 1994) and separate what was pertinent to the inquiry. The next step was axial coding to establish links between the themes that emerged during the open-coding. The researcher explored the data presented that revolved around the social functioning of the individuals, coping skills, and their physical wellbeing in regard to their visual impairment. There were continued and comparative analyses of participant responses to individual items, which created new themes.

The researcher compiled these emerging themes reported verbatim that represented the participants' description of their real world. Finally, the analysis progressed to the third stage, which was to find the core category in the data through selective coding. The process of selective coding involves integrating the data around a central theme that will have emerged (Walker & Myrick, 2006) or, according to Strauss and Corbin (1990), the process of integrating and refining theory. These findings are drawn from the six young adults with VI and the two focus groups from both sites of the study: the Elgeyo-Marakwet and Kisumu Counties of Kenya.

Characteristics of the Participants

The first phase of the data collection process was comprised of the audio-recorded interviews conducted among the six participants who were young adults with visual impairment, of whom four were totally blind and two reported low vision. The young adults with VI (five males and one female) reported that they were able to perceive light but did not move independently and required a sighted guide. All the six participants utilized braille as a medium for communication. The next group of participants consisted of four members of school committees affiliated with schools serving students and youth with visual impairment. Two of the CBR member participants were male and two were female. All the members of the CBRs had vision. The two groups were interviewed in two phases, with the first group consisting of the six youth with VI individually interviewed and audio-recorded in the first phase.

The next phase of the interview process consisted of the four school committee members and the six youth with VI combined and then split into two focus groups of five members each located in each of the sites selected. The focus groups' interview protocol was based on photovoice whereby they took photographs of the environment where they serve young adults with VI and reported their perceptions, referencing the photographs captured. The first step in the focus group photovoice sessions was an information dissemination session during which the researcher discussed expectations and what the members were going to look for as regards their perceptions of social and community inclusion or otherwise of young adults with VI.

The young adults with VI reported their educational, professional, and independent living skills as having been limited due to their disability. All individual participants ($N=6$) in the first phase of the one-on-one interview sessions reported that they acquired their visual impairments as a result of disease in early and late childhood (between ages 6 and 14) and that visual

impairment impacted their educational advancement. Of the six, one participant completed primary education; one dropped out of secondary school after experiencing visual impairment and illness; two completed high school after dropping from school for an extended period of time due to blindness; and one participant had completed teacher training education but did not have a job. Only one was still pursuing teacher training education. Of those who had completed high school, one was a volunteer with the CBR. One participant had not undertaken any form of training because she was still seeking admission to colleges of interest, preferably a teacher training college.

Age and Gender Distribution

The participants consisted of six young adults with visual impairment and four committee members of CBRs affiliated with schools serving students and young people with visual impairment. The four committee members were adults who were sighted; they were combined to form two focus groups that used photovoice approach to express their perceptions of inclusion and work participation of the young adults with visual impairment within their organization.

Table 4.1 represents the age and gender distribution of the case study group.

Table 4.1.

Age and Gender Distribution of the Case Study Group.

Age	No. of Participants	Gender	
		Female	Male
20-25	3	1	2
26-30	3	0	3
31-35	0	0	0

36-40	2	1	1
41-45	1	1	1
45 and older	1	0	1
Total	10	3	8

Degree of Visual Impairment

Apart from the school committee members, all the six young adults were visually impaired and used braille as a medium of communication; four were totally blind while two had light perception but could not move independently beyond the environments within which they were familiar. Table 4.2 presents the degree of visual impairment of all the participants in the study.

Table 4.2

Degree of Visual Impairment

Age	Degree of Visual Loss		Gender	
	Totally Blind	Low Vision	Female	Male
20-25	2	1	1	2
26-30	2	1	0	3
30-35	0	0	0	0
36-40	0	0	1	1
41-45	0	0	0	1
45 and above	0	0	0	1

Family Composition, Financial Income and Marital Status of the Study Group

The participants varied in terms of family and family ties. All six participants lived with their families and had little to no income. Table 4.3 shows the family composition, financial income and the marital statuses of all the six young adults with VI.

Table 4.3

Family Composition, Financial Income and Marital Status of the Case Study Group

Family Composition	Age Group	
	20-25	26-30
Living alone	0	0
Living with parents but married	1	2
Living with spouse and own children	1	1
Living with a guardian	1	0
Self-Reliance and source of income	All the participants are financially dependent on parents and guardian.	

Audit Trail Notations

Audit trail is a technique utilized to increase and help assess the degree of trustworthiness of a research process and allows for an external and objective reviewer to evaluate rigor and trustworthiness of the analyzed data (Bowen, 2009). According to Merriam (1988), independent judges authenticate the findings of a research study by following the trail of the researcher, not to concur, but to establish whether they make sense, are dependable, and consistent. Table 4.4

contains a list of audit trail notations which identifies each of the individual interviews conducted, observations that were made, researcher notes, notes from photographs discussed during the photovoice sessions and other documents accessed on the site during the interview sessions. I ensured complete confidentiality by assigning all participants a unique code containing letters and numbers and, whenever I used a direct quote from a participant, I provided the transcription page from which I extracted the quote in the transcribed interview of that participant, preceded by the code associated with the participant. This constituted the process of maintaining confidentiality in regard to the identity of the participant. Further, this method assisted me in maintaining a sequential and organized procedure of reporting the research findings.

Table 4.4

Audit Trail Notations.

Notation	Type	Participant description
PK1	Interview/Observation/Photovoice	Young Adult with VI
PK2	Interview/Observation/Photovoice	Young Adult with VI
PK3	Interviews/Observation/Photovoice	Young Adult with VI
PK4	Interview/Observation/Photovoice	Young Adult with VI
PK5	Interview/Observation/Photovoice	Young Adult with VI
PK6	Interview/Observation/Photovoice	Young Adult with VI
FG1M1	Interview/Observation/Photovoice	CBR members/ Young Adult with

		VI
FG1M2	Interview/Observation/Photovoice	CBR members/ Young Adult with VI
FG2M1	Interview/Observation/Photovoice	CBR members/ Young Adult with VI
KP1-5	Observation/Explanation/Photograph	Members of the focus group1-5
KP1-5	Observation/Explanation/Photograph	Members of the focus group 1-5

Axial Codes

The coding process assisted me in analysis and interpretation since I started with open coding whereby I did word by word, phrase by phrase and sentence by sentence analyses. Strauss and Corbin (1990) stated that by closely examining the data, the researcher gains an understanding that enables accurate interpretation of what the participants communicated. I was cognizant of the need for triangulation to establish the trustworthiness of the data (Strauss & Corbin, 1990); thus, inter-rater reliability was applied. Six blind coders who were doctoral student colleagues were involved in the inter-rater exercise in coding the themes from responses from each participant, whose identities were represented by an assigned code. The inter-raters had no other involvement with the research study except for the information on the focus of the study and the research questions. The second stage of the qualitative data analysis was the axial coding, a process applied to reduce the data to a manageable and more meaningful representation in order to configure the themes therein. What was apparent during this stage was that similar

themes emerged from both the participants interviewed during the one-on-one interview sessions and the focus group reports from the photovoice sessions.

The representativeness of concepts is an important step in grounded theory (Corbin & Strauss, 1990). Concepts are represented in the process of building a theoretical explanation of the phenomena under study and the researcher identified five sub-themes as building blocks towards the major themes that situate the experiences of the participants in the study in relation to others in the literature studied as posited by Bohm (2004). Presented in Figure 4.1 below are samples of open codes and five sample axial codes of the sub-themes that emerged from the participant interviews. The sub-themes are the building blocks and serve to inform the development of the major themes that emerged during the transcription process. Further, the sample themes presented represent some of the pertinent themes that emerged during the coding process. Figure 4 illustrates the context of the phenomenon underwhich the participants experience the condition of exclusion and inaccessibility to work participation and the strategies that the participants have employed in terms of coping skills to remediate that position.

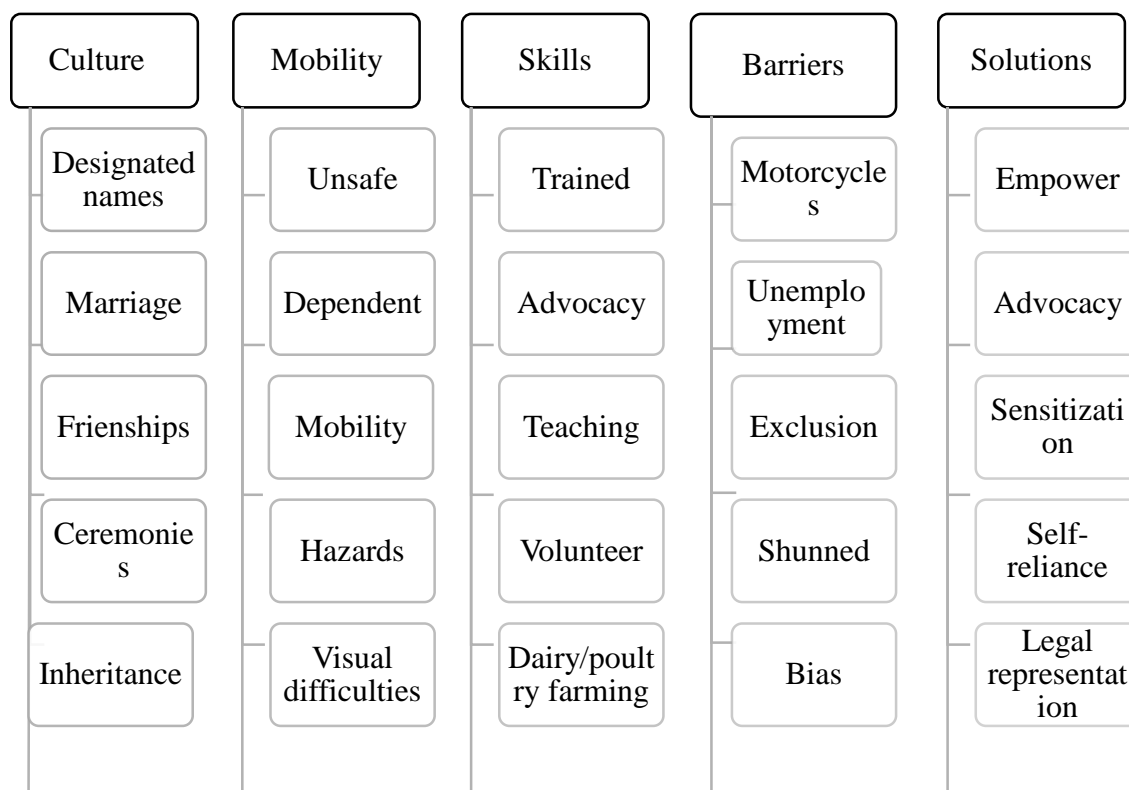


Figure 4. Presentation of Axial Codes.

Descriptive Matrix

The descriptive matrix in Table 4.6 below presents the themes per participant. The axial codes were organized in the form of rows and columns. The descriptive matrix does not determine cause and effect but presents perceptions of the participants in relation to the unique experiences shared. The matrix represents the recurrent pattern that cut across the preponderance (Taylor & Bogdan, 1984). The descriptive matrix was built with the research questions in mind, as well as the key variables in order to generate explanations of the participants' experiences (Miles & Huberman, 1994). More data from the research study can be found following the

descriptive matrix presentation. The data from interviews, observations, photovoice sessions and some documents accessed during the field study build on the data presented in the matrix.

Table 4.5

Descriptive Matrix from Building Principals

Participant	Culture	Mobility concerns	Access and skills	Barriers	Solutions
PK1	Where there is competition, disability features and it is used to mean that I am not able to carry out responsibilities to expected standards, so I become disadvantaged but when it is seeking advice or performing regular duties, they see me as an asset so I am not left out and I feel included. There are particular names also used for people with visual impairment which set me apart.	There are no environmental adaptations or modifications in shopping centers. The town has not provided for sidewalks so it's not safe walking alone even when keeping adequate distance from the road. Motorcyclists tend to avoid the main road and ride by the paths that people take so it's not even safe.	When people see what I do now, they say if I was not blind, I would be very far. Opportunities for work or contracts are not many and when contracts come, sometimes they last for like 6 months or so and end again. So I go back to volunteering.	I took a lot of time in school. I delayed for three years when I was being treated. I also had to learn braille. I feel pain sometimes in eyes and need medication so I have to keep struggling.	I can cook and do household duties very well since I was trained in school. I did home science so I am pretty independent.
PK2	Nowadays I am accepted because I have struggled and	I have my younger brother who always takes	I got a sponsor who took me to school for the blind but he	I have no source of income for now. I cannot get work	CBRs should come out and

	gone through school. I am a role model now. Some come to me for advice now.	me to places and makes sure that I am safe. It is expensive if we have to travel far from home because it means fare for two people which we cannot afford. That is the reason anyway I dropped out of school.	left the country. My mother tried hard to keep our children in school. I am the first child in the home to go and finish high school.	because it is hard for someone who is blind to be employed. I am still training also and I hope I can get a teaching job after this.	advertise so that they are known and found by people with VI who need them.
PK3	At home it is difficult to be chosen as a leader in the society. Getting married is a problem but prayed and God answered my prayer. People can't believe I could marry a woman without visual impairment.	I don't have problems within my compound but I need someone when I leave home. I have a white cane but motorists even don't care about it. They don't respect the white cane too.	People fear since they have never interacted with VI in their lives. I understand some of them because maybe they sympathize with me, but they don't know how to approach me.	Parents resist my employment because they have no belief a blind teacher is effective. I am expected to specify that I have visual impairment because the government pays benefits; disability allowance to be able to pay someone who is going to help you read; an aid.	I am affiliated to a CBO which deals with legal representation especially when rights of people with disabilities are infringed. It is an umbrella organization for all

					people with disabilities.
PK4	Yes, I cannot attend some ceremonies because I fear. I fear to be left alone and be isolated. Like in weddings or engagements. Unless I am with my sister.	I fear to fall down, or trip over stones or objects or something that can hurt me. When I am going to the shop, or a new environment, I don't go alone.	I went far away after I got blind I went to another school because I am not normal like other children. I went to where I can learn braille and get teachers with the skills to teach me.	There are no environmental adaptations like when they are working on the roads, no accommodation, and "dukas" (shops) have stairs so I have to walk carefully.	They bought books for us and paid some of my school fees. I used to help to feed the cows and harvest fruits from the shamba.
PK5	I can participate like anyone else.	I have a white cane for mobility, but sometimes I require some assistance.	When I went to school away from home, I did not receive attention. I was in the resource room alone. Every term went without any progress.	People are not willing to employ me. People think I cannot be productive. I do not have the level of education required by employers.	Now I can dig my shamba (garden) and grow vegetables and maize for subsistence. I am skilled

					in poultry keeping and dairy farming.
PK6	If it is during ceremonies like circumcision within the community for boys, I can participate with others if I get someone to take me.	I have mastered the compound and I can move alone but sometimes children can be playing and leave obstacles on the way. I fall down sometimes because some barrier has been left in my path. Fear of falling down, tripping.	The distance from school and home was far. I had to go with somebody since I could not go alone and it was very expensive. I went to three schools, but there were no skilled teachers.	There are no environmental adaptations like when they are working on the roads, no accommodation, and stairs and so on.	If I can be assisted to be independent and start a business that is very important to me because I want to be independent and start a family.
FGIP 1	VI people are not respected and even those with disabilities, they cannot inherit property. Culture says women are lesser and therefore they should take backstage and especially	We have realized that from the door of the office to the junction, we do not have a pavement to direct VI to our office or out. Pit latrines are not disability friendly.	The CBR represents people with visually impairment in cases of marginalization especially where rights of the children have been violated such as not being given learning	We have challenges of funding. We cannot be able to buy braille machines and for people with VI. The VI cannot also come for meeting because of mobility challenges. They need	We have trained some of them to be paralegal so that services are decentralized, have referred them to

	managing property. Their property was disputed and not allowed to inherit.	They have not been adapted and. therefore may present hygiene/ health issues.	opportunities.	someone to accompany them which is very expensive in terms of transport. Need also someone to take notes for them.	other organizations-networked them and be able to be served elsewhere when services required are not available in our organization.
FG2 M2	They are not readily accepted within the community and we have to go out and sensitize and advocate for their inclusion. Assistive devices like white canes are not easy to come by and, therefore students transit to the community without walking mobility devices. They face problems like making friends,	There are stones and boulders spread in the compound such that the visual impairment cannot move adequately. The orchard is not accessible in that the fence is not user friendly. No ramps for VI users so there is restricted mobility. The drinking fountain near the tank is not user friendly	We feel we have not met the needs of young adults with visual impairment because of our resources but are actively engaged in sourcing funding. There are still visual impairment in the community who do not transit to high school due to refusal by the principals to admit them into their schools. The teachers ask	The youth with VI are not accepted in the job market or community. They face discrimination and non-accommodation in the social environment. The school is not well adapted to meet the mobility needs of the young adults with visual impairment.	We started an orchard to act as a model and change the attitude towards the learners and youth with VI. The project acts as a bridge to reduce cultural and social

	<p>attending social gatherings, and cultural activities because of their visual impairment. They are still secluded</p>	<p>for the young adults with visual impairment.</p>	<p>what they will do “with this one.”</p>		<p>stigma and discrimination towards the VI. The community had negative attitudes towards the students with visual impairment who came to learn here.</p>
<p>FG1 M1</p>	<p>In the community, women are not allowed also to inherit property. Meaning twice disabled, being a woman and VI. Culture says women are lesser and therefore they should take backstage and especially managing property.</p>	<p>We have realized that from the door of the office to the junction, we do not have a pavement to direct VI to our office or out.</p>	<p>The CBR represents people with visual impairment in cases of marginalization especially where rights of the children have been violated such as not being given learning opportunities to go to school.</p>	<p>We have challenges of funding. We cannot be able to buy braille machines and white canes for people with VI.</p>	<p>The CBR has advocated for a client who had volunteered as a social worker in her community school for 3 years and when it came to employment,</p>

					the board members did not consider her for the job.
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Findings

The findings in this study are based on the interviews, observations, photovoice sessions, researcher's notes made during the field trip and some few documents accessed on site during the research study. The research study centered on the perceptions of young adults with VI on challenges of supports for social inclusion and work participation of young adults with VI and what they think could afford them equity in access to available resources and opportunities within their communities of Elgeyo-Marakwet and Kisumu Counties in Kenya. The researcher arrived at the major themes through the coding process as guided by the grounded theory in the qualitative data design. The coding process identified categories, themes and sub-themes which resulted in the core category themes that answered the research questions. Major themes that emerged during the data analysis process centered on:

- Culture and community implications.
- Mobility and travel experience.
- Financial constraints associated with the lack of a source of income.
- Access to equal opportunities for education and skills training.
- Social supports for young adults with visual impairment.
- Access to equal opportunities for work participation.

The major themes identified above are discussed and each theme summarized in relation to the data obtained through the descriptive narratives of the participants' experiences.

Culture and Community Implications

Culture and its implications within the community comprise the first axial code discussed. The findings indicate that there are cultural biases associated with being a young adult with VI, as was expressed by all the participants in the study. The literature review indicated that culture plays a large role in defining a community and its perceptions concerning cultural issues as well as in assigning meaning to the disability status of a person as a way of making meaning of the apparent differences among individuals (Braathen & Ingstad, 2006). One participant in particular observed that names assigned to people with visual impairment connote derogatory references and insinuate that such people should be shunned and deserve no place in or respect from society. In response to whether there are cultural biases associated with visual impairment, PK1 said:

Where there is competition, my disability features and it is used to mean that I am not able to carry out responsibilities to expected standards, so I become disadvantaged but when it is seeking advice or performing regular duties, they see me as an asset so I am not left out and I feel included". In culture, there are names for people with blindness, for example, "*muofu*." It is a very bad word in my local language and set you aside, really discriminative word to describe a blind person. If someone uses that word, it is very derogatory. These are words and names which make someone with visual impairment not to be accepted. Names either add value or subtract value in my culture, so this word is very bad and very discriminative. There are occasions where people think certain types of people should not go. Like I should not be there because I might knock things over or not be well dressed because I don't see. When it comes to inheriting economic assets like land, the family might not give a person with visual impairment their share because they don't see what they are going to do with it. The culture does not recognize that a blind person can do things. Culture does no grade a person with visual impairment on the same level as other "normal" members of the community to deserve land. Even when given, it's just for the sake of it. (PK1, p. 2-3)

The description of some participant experiences indicated that the culture marginalized and discriminated against them, even in terms of the distribution of wealth within the family. However, some participants observed that they can attend some cultural ceremonies and be accepted, but, when it comes to forming relationships that lead to marriage, they are shunned. It is assumed that marrying a visually impaired person, culturally referred to as “*muofu*,” among communities living in Kisumu County and “*chepkoratiat*” among locals of Elgeyo-Marakwet County, will lead to bearing blind children.

At home, it is difficult to be chosen as a leader in the society. Getting married is a problem but I prayed and God answered my prayer. People can't believe I could marry a woman who had no visual impairment. People are still wondering how it happened. They wonder what happened with this lady. (PK3, p. 8)

PK4 fears to go out alone to attend cultural events within the community. She said that people will talk behind her back and she is always self-conscious. Yes, I cannot attend some ceremonies because I fear. I fear to be left alone and be isolated. Like in weddings or engagements unless I am with my sister. (PK4, p. 11)

However, PK5 responded that he did not experience much cultural bias associated with visual impairment during some ceremonies within his community but said he cannot participate in making decisions concerning community issues. PK5 thought that social exclusion for him was sometimes situational but he had definitely experienced marginalization arising from the cultural stigma of visual impairment.

When it is important decisions about the community, sometimes I am excluded. If it is during ceremonies like circumcision within the community for boys, I can participate with others if I get someone to take me. (PK5, p.14)

The participants in focus group one (FG1) were concerned that young adults with VI were still discriminated against and their rights violated. The main focus of the CBR in FG1 was

legal representation to fight for the rights of young adults with VI and for people with disabilities in general. The CBR is an umbrella organization for all people with disabilities in the particular area. The CBR offers subsidized and sometimes free legal services to people with disabilities across the board, which includes young adults with VI. The focus group members who were school committee members affiliated with a CBR within the neighborhood of a school for students with VI as well as an integrated program for students with disabilities across the board were members of that community. In response to an inquiry about what the CBR had done well, FG1M1 responded:

We teach them on their rights and engage them in activities as committee members. They are included in the leadership of the organization. The CBR fights for the rights of young people with VI in case of discrimination. (FG1M1, p. 19)

For example, in the community, women are not allowed to inherit property, meaning that women are twice disabled. FGM2 said:

Being a woman and being a VI person. Culture says women are lesser and therefore they should take backstage and especially in managing property. Their property is disputed and not allowed to inherit. A disabled person whether man or woman is challenged and cannot be able to inherit property. VI people are not respected and even those with disabilities, they cannot inherit property. (FG1PK1, 19)

The members of FG2 said that their CBR was started to act as a bridge between the school and the community. FG2M1 stated that most of the committee members of the CBR were teachers who they felt were better placed to advocate for the students with visual impairment within the community. FG2 started a project within the school to:

Act as a bridge to reduce cultural and social stigma and discrimination towards the VI. The community has negative attitudes towards the students with VI who come to learn here and, thus, we wanted to give the students a sense of belonging

and to feel cared for and protected, that their interests are protected just as all other students. (FG2M2, p. 20)

Summary of Axial Code for Community and Culture Implications

The participants were impacted by the implications of culture in community inclusion for young people with visual impairment. According to the participants, the names assigned insinuate that young people with VI do not have the same human value as their non-disabled counterparts and cannot inherit property, hold community positions or competitive employment, marry, or have friends. The axial codes for the implications of culture and community for young people with VI are summarized in Table 4.6 below.

Table 4.6

Summary of Culture and Community Implications

Description	Participant	Perspective
Designated names	Young adult with VI during interview	In culture, there are names for people with blindness for example “ <i>muofu</i> .” It is very bad and sets you aside, a discriminative word to describe a blind person. (PK1)
Marriage	Young adult with VI during interview	People still crack jokes with me. “How did this lady love you? What did she see in you?” Some tried to discourage her from marrying me. (PK3)
Friendship	Young adult with VI during interview	I was treated like an unwanted person in the school. The friends I had disappeared after some time. I was treated as an unwanted person in the school. (PK4)
Ceremonies	Young adult with VI during interview	I can participate like anyone else in ceremonies but getting a girlfriend is not easy. They think we can get blind children if we marry. (PK2)

Inheritance	Young adult with VI during interview	My relatives wanted to disinherit us because they thought I was no more and our home was gone. My siblings are still young and I fought back. (PK2)
Rights	Focus group photovoice session/interviews	To win a case, someone must have money, but the VI are overrepresented in poverty and therefore they cannot afford to represent themselves. (FG1PK1)

Mobility and Travel Experience

Growing up as a young adult with visual impairment presents difficulties that one cannot deal with alone. It is especially difficult to walk alone at dusk or in the night and one has to be sure to return home early. When traveling far away from home, for some participants; sometimes as much 20 kilometers to one of the nearest town, most of the respondents preferred to be accompanied by their family members. They expressed fears of insecurity and encountering barriers that they did not anticipate. Participants expressed concerns regarding toilet facilities which did not have rail guards or safety nets to guide them in order to use the facilities. This meant that they had to have a sighted guide to enable them to navigate such an environment. Other participants felt that there was a great deal of traffic in town and crossing the roads was hazardous while others thought that walking on the side of the road was unsafe due to motorcycles, being in new environments, and uneven surfaces.

I have my younger brother who always takes me to places and makes sure that I am safe. It is expensive if we have to travel far from home because it means fare for two people, which we cannot afford. That is the reason anyway I dropped out school. I was to travel far away from home, pay school fees and buy necessities and on the day of opening school we went with my brother and also during closing day, he had to come for me. It was so expensive, we could not afford. Fortunately, I got a sponsor and was able to complete high school. (PK2, p.6)

PK1 reported that he is treated differently as a young adult with VI because people around him always think that he needs help to navigate his environment. PK1 said he no longer has the

confidence to travel or walk around alone because there are motorcycles everywhere that are a threat to his safety. Motorcycles, commonly known as “*boda boda*,” are the simplest and cheapest means to get to places for commuters since the riders can reach every part of the village without fear of bad roads or getting stuck. The charges for fares are affordable for the majority, making it a very popular means of transportation.

Accessibility of the learning environment and environmental barriers were the major challenges that all the participants mentioned as having stood in the way of achieving their educational objectives. All the participants in the study had one form or another of educational qualifications gained in a school setting. Participant responses indicated that they had experienced different educational settings, ranging from special boarding schools for the blind to integrated community school settings. When asked about their aspirations, each of the participants responded that they had intended to complete school, obtain employment and support their families. PK6 expressed his exasperation at not being able to complete school due to financial and environmental barriers. The participants were certain that their dreams for higher educational attainment were not achieved because of visual impairment:

I have mastered the compound and I can move alone but sometimes children can be playing and leave obstacles on the way. I fall down sometimes because some barrier has been left in my path. Fear of falling down, tripping. I use a stick for mobility. I do not have a white cane. I cannot also go to the market if I am alone. I had to go with someone to and from school when I was learning braille because I cannot go alone to far places. (PK6, p. 17)

All participants who had been trained in orientation, mobility skills and activities of daily living in school expressed independence in carrying out their own chores. However, it was apparent that all the six participants were dependent on members of their families to carry out most household chores except for the female respondent who reported doing all the house chores as well as going to the stream for water, fetching firewood, and even cooking meals for the

family. This was not surprising in that household chores are considered “women’s roles” according to the culture of all the interviewees, as was evidenced by PK1’s response that household chores are a woman’s responsibility. It is tradition in their community for women to attend to house chores; PK1 felt it was not his place to “interfere” with the roles of his wife. The male participants reported a high sense of dependence as far as house chores were concerned.

Participants who were already married depended on their spouses to do household chores, but all reported that they attended to their personal needs such as getting their own bucket of water to take a shower, grooming, and making their own beds. All the respondents depended on sighted guides for mobility, be it a family member or a friend.

I did all the duties when I was still single. I did all chores in the house including cooking. I used to carry out all the activities in my house before I got married.
(PK3, p. 7)

Participants reported their fear of going out on their own due to the presence of motorcycles. Motorcyclists are hired to carry everything and anything, including building materials, grocery, smaller animals like goats and sheep and water and firewood among others. People pay motorcyclists to take their children to school, transport adults to and from their businesses including places of employment, to attend community functions and to run other small errands. Motorcycles are a trusted mode of transportation, despite the many accidents they cause due to inexperienced drivers. Motorcyclists ride on small paths within the villages with their passengers in their rear seats and they are available as needed, as well as affordable since they are cheaper to buy and use less gas than a car. PK1 said that some of the motorcyclists do not have drivers’ licenses and do not observe traffic rules.

In fact, one of my longtime friends; a graduate was knocked over and killed last year by a motorcyclist. He was very vocal and fought for us to be employed. He worked with the government and had a steady source of income. In fact, his family was doing well and he was a role model to us. He was well-known around

here and he always walked freely alone, using his white cane. When he was killed, I became very scared of walking or traveling alone. I always make sure one of my family members or a friend is available to go with me. (PK1, p.3)

Most participants (90%) are worried about environmental barriers in unfamiliar environments, although they move freely within their homes and other familiar environments. There has been much road construction going on and upgrades of local roads, following the establishment of county-based governments. Some roads have become hazardous because workers shove barriers off onto the roadside:

Every time I go out, there seems to be some barrier on my way that was not there before. I have to move with caution; that is why I need a sighted guide for mobility outside the home and in larger town centers. There are no environmental adaptations or modifications in shopping centers. The town has not provided for sidewalks so it's not safe walking alone even when keeping adequate distance from the road. I have realized that motorbikes tend to avoid the main road and ride by the paths that people take so it's not even safe anymore. (PK5, p.14)

Most participants felt that environmental barriers restricted them to a smaller social circle and alienated them from the wider society. FG1 members observed that the environment in which their office was located had many barriers that affected ease of mobility and access for the young adults with VI they serve, as well as those of people with disability in general; they took photographs of that environment. The members later expressed their views of the visual representation in which they acknowledged that the VI faced barriers associated with the lack of ease of mobility within the environment:

We have realized that from the door of the office to the junction, we do not have a pavement to direct VI to our office or out. The location to our office is not convenient since it is hidden between offices and inaccessible with no signs or directions to the office and other locations. (FG1PK1, p. 18)

Figure 4.2 below is a photograph of the CBR office with its door open. The picture demonstrates the lack of accessibility.



Figure 4.2. The FG1 CBR office serving the young adults with VI and people of other disability areas. Photograph is courtesy of FG1 photovoice session (2014)

The CBR office is the one with an open door but is sandwiched between a modern building and a workshop for use by students of the school where the CBR is located. There is a grass path leading to the office. FG1PK3 noted that the office location is not conducive since it cannot easily be located especially by the young adults with VI and any other clients visiting for the first time. The members of FG1 were also concerned that their clients who are visually impaired are not able to attend meetings since they face mobility challenges and must have someone to accompany them, which becomes very expensive. Although the motto of the CBR is “*Bringing Legal Justice Closer to the People*,” the office does not have a sign or any indication that it is a CBR office advocating for community justice. However, FGPK1 noted that they have a mobile sign that is put up during meetings and special occasions.

Participants in FG2 described the school and office location as well as their compound as still being inaccessible for the young adults with VI since stones and other forms of environmental barriers are present. After visiting and taking pictures of their physical environment, the FG2 members seemed perturbed at the reality on the ground and that they had taken the physical environment for granted for so long. FG2M1 observed that:

The environment has not been adapted and the compound is uneven making mobility hard. There are stones and boulders spread in the compound such that the VI cannot move adequately. The orchard is not accessible in that the fence is not user friendly. No ramps for VI users so there is restricted mobility. The drinking fountain near the tank is not user friendly for the young adults with VI. However, we are going to meet as a committee and see what we can do. (FG2M2, p. 18)

Figure 4.3 below is a photograph that represents part of the environment where the school located. It is also where the CBR office, orchard, and dairy animals are situated.



Figure 4.3. The office location and the orchard of the CBR. Photograph is courtesy of FG2 photovoice interview session (2015)

Below, in figure 4.4, is a photograph of the main earth road that leads to the school and the office location where the FG2 CBR is located.



Figure 4.4. The main path to the school and office location of FG2 CBR. Photograph is courtesy of FG2 photovoice interview session (2015).

Notice the effort that has been put in arranging the stones to the sides and clearing the path of major barriers. The stones have been arranged in such a way that they have added beauty to the path. Despite the rough path, the young adults with VI in transition and students can comfortably use the stones as guides along the path, which is especially useful for individuals using a white cane for mobility.

Summary: Axial Code Mobility and Travel Experiences

Participants expressed concerns about travel and mobility beyond the home. Most participants used white canes for mobility within the home and stated that they were comfortable moving alone within the compound which are enclosures within which the family homesteads, cow pen, chicken house, granaries and other structures for home use are enclosed. Compounds are either fenced off using barbed wire or a life fence. PK5 expressed reservations about moving alone within their compound due to fear of unexpected barriers that may be left lying around by the children after playtime. The majority of the participants depended on sighted guides whenever they travel away from home. Their reasons for travel beyond the home included

attending ceremonies, going to school or training, shopping, and in search for employment.

Table 4.7 below summarizes the axial codes for travel and mobility experiences.

Table 4.7

Summary of Mobility and Travel Experiences.

Description	Participant	Perspective
Dependent	Focus Group-Interview/Photovoice session	Assistive devices like white canes are not easy to come by and the students transit to the community without walking mobility devices.
Mobility	Young adult with VI/Focus Group-Interview/Photovoice session	Out of the CBR gate, it is very difficult for VI to cross the road and come or visit the offices. There is a fence which is a barrier for VI. (FG1M1)
Hazards	Young adult with VI/Focus Group-Interview/Photovoice session	There are stones and boulders spread in the compound such that the VI cannot move adequately. The orchard is not accessible in that the fence is not user friendly. No ramps for VI users so there is restricted mobility. (FG2M1)
Travel expenses	Focus Group-Interviews	The VI cannot come for meetings because of mobility issues. They need someone to accompany them, which become very expensive in terms of transport. They also need someone to take notes for them. (FG1PK1)

Financial Constraints Associated with the Lack of Source of Income

Financial barriers caused by the lack of a source of income comprised another aspect of the participants' experiences that was very important. All of the participants interviewed had a small or no source of income and depended on their nuclear and extended families, including

guardians, for upkeep, medical and travel expenses, and other needs. It appeared that financial and income independence was the motivation to move forward and get some training for job placement. All the participants were therefore working towards financial independence and had made plans to achieve their goals. However, some of the participants had ruled out particular careers due to visual impairment and settled for careers such as teaching, as in the case of PK2, PK3 and PK4, social work for PK1, and farming for PK5, in the hope of finding work placement while, at the same time, remaining close to home and their family members. PK1 said that he has an unstable source of income and has to go back to volunteering when contracts do not come by:

I do have a source of income but it is not dependable. I still volunteer with these organizations. The opportunities for contracts are not many and when they come the contracts sometimes last for like 6 months or so and end again. So I go back to volunteering. I feel pain sometimes in my eyes and need medication so I have to keep struggling. (PK1, p.2)

Asked about his source of income, PK2 responded:

I have no source of income for now. I cannot get work because it is hard for someone who is blind to be employed. I am still training also and I hope I can get a teaching job after this. (PK2, p.4)

PK2 reported depending on his family for his needs, fees, and other personal expenses while PK3 had a source of income as a teacher within a community school. However, PK3 thought it was inadequate since he was a family man and that he was looking forward to a job placement. He indicated that, being a family man, there were definitely financial constraints associated with the responsibility:

Yes. I have a source of income but too little. I am teacher in a community school around but income is not adequate now that I have a family. I am looking forward to securing a job with government. (PK3, p.7)

As earlier stated, PK6 had a dream of becoming an engineer but the onset of visual impairment meant that he could not pursue his dream career. He said he dropped out of school altogether due to inaccessibility to high school education associated with visual impairment, his medical needs, and the fact that he came from a poor background so his parents could not afford to take him to a special school far away from his home.

I don't have any source of income. I get financial support from my family members especially my brother. I do not work at all. I depend on my brother mostly, but if I was not blind, I would have finished school and joined further studies and become an engineer. Blindness has really affected my dream. (PK6, p.16)

PK6 said he had intended to start his own business and needed financial assistance to get him started. He said he planned a fund raiser but people did not come to his home to help raise money for this purpose.

The Focus Group members were in agreement with the young adults with VI as to the constraints faced that were associated with lack of a source of income. The challenges were seen as stemming from being a young adult with VI and an inability to complete school and get good job placement. The CBR in FG2 started an orchard to help with the process of inclusion of the young adults with VI, bring in financial support to buy braille machines and books for students with VI, and to facilitate social acceptance of the students with VI within the community.

We started an orchard to act as a model and change the attitude towards the learners and youth with VI. The project acts as a bridge to reduce cultural and social stigma and discrimination towards the VI. The community have negative attitudes towards the students with VI who come to learn here and thus we wanted to give the students a sense of belonging and to feel cared for and protected, that their interests are protected just all other students. (FG2M1, p. 20)

The other objective of the CBR was to create a bridge between the community and the school to change community attitudes towards the students and the young adults with VI. The CBR members envisioned that this would enable smooth transition to the community and access to equity in opportunities. The CBR is funded by a Non-Governmental Organization (NGO) that also sponsors provision of white canes and braille material for the students of the school where the CBR is located.

The school did not have any income generating activities and students with visual impairment left school without some practical independent skills like farming. Also the CBR was to encourage the community to change their attitude towards the VI and encourage them to support the students. The CBR also grows tomatoes, sweet potatoes, onions, water melons, different kinds of vegetables, and other tuber food for sale when the season is right. (FG2M2, p. 20)

Figure 4.5 below is a photograph of the CBR orchard which both provides an income for the school and acts as a link between the community and the school. The result is a change of attitude of the community in terms of social inclusion and the work potential of students of the school and its young adult graduates.



Figure 4.5. Part of the CBR orchard: mangoes, pawpaw, and banana plants. Th picture is courtesy of FG2 photovoice session (2015).

In addition to bananas, mangoes and pawpaw fruits, the CBR grow vegetables and legumes that are drought resistant. Figure 4.6 below is a photograph of part of the orchard where the CBR does mixed farming to support and train the young adults with VI in their transition to inclusion and work participation in the community.



Figure 4.6. Mixed farming area. The picture is courtesy of FG2 photovoice session (2015).

The CBR and the school harvest rain water as well as harness stream water brought to the school via polyvinyl chloride (PVC) pipes laid just below the ground for the use of the students and for watering the orchard during the dry season. The water storage tank is used to water the dairy animals on a daily basis. Figure 4.7 below is a picture of the tank and the tank area.



Figure 4.7. The water harvesting tank. The picture is courtesy of FG2 photovoice session (2015).

Summary: Axial Code Financial Constraints Associated with Lack of Source of Income

All the participants in the study lived with one among their family members. A quarter (25%) of all the participants were married but living in the same compound as their nuclear and extended families. For the majority of the participants, financial help was provided by family members, including covering needs such as medical costs, travel expenses, living expenses, and tuition and fees for those who were still in training. However, the participants expressed frustration at unmet needs due to poverty and the limited resources available to their families that impacted their livelihoods. Below, in Table 4.8, is a summary of the axial code on financial barriers arising from lack of sources of income for the young adults with visual impairment.

Table 4.8

Summary of Financial Constraints Associated with Lack of Source of Income

Description	Participant	Perceptions
Income-generating activity	Focus group/Young Adults with VI.	There are dairy animals whose proceeds go to support economic income for the youth with VI. Also grow tomatoes, sweet potatoes, onions, water melons and other tuber food for sale when the season is right. (FG2)
Living expense	Young adults with VI: Interviews	I have no source of income; I can't get work because of visually impaired. People don't think I can be productive getting work. (PK5)
Medication	Young adults with VI: Interviews	I was sick and my brother struggled to pay my medical money. Mostly it is the daughter of my auntie who paid my hospital bills. (PK6)
Tuition and fees	Young adults with VI: Interviews	I was not able to go to these normal schools and I could not afford to go to a special school because it was expensive getting fare and school fees. (PK2)

Access to Equal Opportunities for Education Access and Skills Training

The respondents were asked if they thought their access to school had been impacted by their visual loss, a situation that impeded their future ambitions and informed career choice for others. The respondents who were not able to continue with their education explained that they lost the hope for school due to the barriers of visual impairment and the affordability of education access. PK6 had the ambition to become an engineer but when he acquired his visual impairment, he said his dream was lost. Those respondents who completed high school and

some other form of training had revised their career decisions based on the onset of visual impairment:

I stopped going to school because of school fees. I come from a very poor family indeed. The distance from school and home was far. I had to go with somebody since I could not go alone and it was very expensive. I went to three schools but there were no teachers with skills to teach blind students. I went to a nearby school where the teachers from the primary school taught me braille but they could not teach me in the secondary school because they said they did not have the training and were overwhelmed with teaching braille too. The secondary school said they had three students who were VI and taking me in would mean more work. They told me to go to the education office where they could place me somewhere else. I depend on my brother mostly but if I was not blind, I would have finished school and joined further studies and become an engineer. Blindness has really affected my dream. (PK6, p. 16)

It was apparent that visual loss had contributed to the choice of careers since two of the respondents with visual impairment who had chosen a career in teaching said they did so because they knew teachers who were visually impaired who had been employed by the government. PK2 and PK3 said that one had a better chance to be employed by the government as opposed to private institutions. However, there was always a long wait since it could take up to five years for the Teachers Service Commission to clear their backlog from previous years. According to PK2 and PK3, private institutions had turned down their applications because they thought being visually impaired was an impediment to performance.

Of the two respondents, PK3 had completed his teacher training three years ago and he had yet to find a secure job. PK3 said the government had a backlog and was employing people who had completed their training in the year 2010, but he was confident of being employed once his group was considered. He said he had only two years to wait and would be patient. Meanwhile, he depended on his family and the teaching contract he had been offered by his community school. He reported that he was happy to be a role model and proof that people with visual impairment can take up responsibility.

PK3 felt that there were challenges to his educational access. He recalled that it was difficult while in teacher training since the college did not have learning equipment for teaching a subject like music, which was a core subject. The subject was taught in print yet he is a person who uses braille. Since the exams were set in braille, he did not pass the subject because he could not understand the music notations written in the braille medium of communication. There were few teachers with skills to teach students with VI:

The toilets were not disability-friendly since there were no guard rails or raised surfaces to indicate location of the pit. However, there were a few pavements to ease mobility which I thought should be everywhere in the college environment. (PK3, p. 7)

All the participants interviewed had formal education while half of them were skilled in their professions. PK5 and PK6 did not complete their primary and secondary education respectively due to visual impairment, illness and poverty. PK6 had intended to pursue a career in engineering after his secondary education, but he could not overcome the barriers of visual impairment and poverty.

PK5 responded that he did not receive enough support in his primary school to enable him proceed with his education. He explained:

When I went to school away from home, I did not receive attention. I was in the resource room all day alone. Every term went without any progress. I got a teacher later on but time had moved so I did not gain much. They left me alone and every day I went to school, I was alone. I learnt braille and also skills in mobility. I did not go to secondary because my parents did not have money. I got a sponsor who paid my fees for agricultural college and I finished poultry keeping and dairy farming certificate course. (PK5, p. 13)

Other participants felt that their environment was limiting in terms of experiences so they did not get their best shot at their schooling and career choice. Due to scarce learning and teaching facilities for the young adults with visually impairment in their community schools,

they had to travel far to access education at schools for the blind. This meant that they had to live far away from home and adjust to boarding school life.

PK1 reflected on his experiences of traveling far away from home. He said he needed someone to travel with him to and from school, which was very expensive. When he had completed his secondary education, he chose to be trained as a social worker instead of enrolling at the university because he could not afford it. Later, he chose to provide paralegal services so he could position himself to advocate for affordable education for people who are blind. PK3 was of the opinion that the government should provide free education and support to young adults and students with VI so that they can succeed. He said he thought there was not enough government on the ground to advocate for people with VI. He said:

I think there should be sensitization and education for people in communities to understand and take VI seriously. The government should give VI priority in service delivery; empower them in terms of free education and work or employment. There is a boy I know who is visually impaired whose parents died and [who] cannot go to school. (PK3, p.9)

The researcher observed that FG2 members were concerned about the provision of adapted teaching and learning materials for students with VI that would make their learning environment both accessible and competitive. FG2 had initiated collaboration with the school for students with VI in order to facilitate access through networking with like-minded organizations:

The government does not provide adequate resources for the students. Little support also is available from the community and we felt that coming together would improve or enhance our capacity to support the students. Students needed braille paper, white canes, thermophones and models. The school did not have any income generating activities and students with visual impairment left school without some practical independent skills like farming. (FG2M2, p. 20-21)

FG2M1 added:

The school was also struggling to meet the needs of the VI and, therefore, we established this association and network with other organizations to provide a base for the VI, train them on skills in farming so that they can live independently. (FG2M1, p. 21)

Summary: Axial Code Equal Opportunities for School and Education

The participants in the study stated that their choice of careers had been impacted by visual impairment. All the participants indicated that they had struggled through school since they had to leave their homes to attend boarding schools for the students who were blind.

Represented in Table 4.9 below is a summary of the axial code “equal opportunities for school and education.”

Table 4.9.

Equal Opportunities for School and Education

Description	Participants	Perceptions
Training	Young adults with VI interview/observation	I stopped going to school because of school fees. I come from a very poor family indeed. The distance from school and home was far. I had to go with somebody since I could not go alone and it was very expensive. (PK6)
Environment Adaptation	Young adults with VI interview/observation	The toilets were not disability-friendly since there were no guard rails or raised surfaces to indicate location of the pit. However, there were a few pavements to ease mobility which I thought should be everywhere in the college environment. (PK3)
Advocacy	Young adults with VI interview/observation	I think there should be sensitization and education for people in communities to understand and take VI seriously. The government should give VI priority in service delivery; empower them in terms of free education and work/employment. There is a boy I

		know who is visually impaired whose parents died and [who] cannot go to school. (PK1)
Resources	FG1/ Young adults with VI- interview/observation/p hotovoice	The government does not provide adequate resources for the students. Little support also is available from the community and we felt that coming together would improve or enhance our capacity to support the students. Students needed braille paper, white canes, thermophones and models. (FG2M2)
Security	Young adult with VI/Focus Group- Interview/photovoice session	Community have negative attitudes towards students with VI who came to learn here and, thus, we want to give them a sense of belonging and to feel cared for and protected. (FG2M1)

Social Supports for Young Adults with VI

One of the researcher's goals was to learn if there were aspects of visual impairment that had impacted the ability of the participants to socialize and communicate with others, make new friends and maintain existing friendships, and be understood. Further, the participants were asked to express their opinions in regard to the perception of body language in social settings and if they were able to interact with confidence with others in their communities. Most of the participants had had different experiences but all of them thought that there were definitely aspects of feeling being left out in unfamiliar social settings. All participants noted that they had a healthy circle of friends before the onset of visually impairment but lost them all when they became blind. However, after reintegration into the community, they have been able to make friends, although their social circles were not as wide as they were prior to the onset of visual impairment:

People think I need help all the time, especially when hanging around with friends. I am seen as a burden and [they] think I am not capable of doing

anything and need help all the time. Some fear me since they have never interacted with VI. I understand some of them because maybe they sympathize with me but they don't know how to approach me. (PK3, p. 8)

Some participants felt socially included to a point and they are comfortable since they have appreciated who they are and have accepted things as they are:

I am accepted presently because I have struggled and gone through school. Sometimes I am recognized but with reservations, but my social circle has improved over time. I am sometimes invited to join community activities and social activities like volunteering to give a talk or join a friend for lunch. My acceptance into the community has improved, over time unlike when I just went blind. (PK2, p. 5)

The major sources of social support referenced by the participants were the family unit and the extended family structure. Most participants said that they lost friends immediately after becoming visually impaired and their families became a source of support. The participants felt limited social support beyond their families. Some of the respondents believed that people were not sure how to respond when they were around them. PK1 recalled that before he became totally blind, he had many friends, but they all left him at the onset of his disability. Asked if visual impairment had affected his social inclusion in the community, PK1 answered in the affirmative:

Yes, aaah! Very much. I had many friends before I became sick and blind but I remained with none when I became blind in class seven. But now I have a few more friends. I have adjusted. Others see me of course as a burden even without interacting with me. People keep away from me because they think I am dependent. It was not easy integrating with people who are seeing. For example when I wanted to marry, it was difficult to get a fiancée. There was a go-between who introduced me to a woman who told me that I must wait until she finished form four, then we could marry. So I waited. I used to hear that true love waits. But when she was finishing, she started pulling apart and brought in her sister. She told me that she feared that we could get children, they will be blind. She wrote me a letter with genetic crossings indicating our children were going to be blind. I made up my mind to get a woman by myself and I met this woman later who loved me and we have two children of course who are not blind. I wanted to hear what people were commenting about me but it is a joke among my friends I always laugh. I regretted because I wasted two years waiting. (PK1, p.2)

The responses from some of the participants were accompanied by intense emotions of despair and feelings of being isolated. Several of the respondents recalled that they were left out and hopeless and that they felt a sense of desperation before training in orientation and mobility and the activities of daily living. PK2, who has low vision but uses braille as a medium of communication, explained that the training helped him to move beyond the home;

I used to be sad all the time because even my siblings did not notice that I had a visual impairment except Mom. She struggled to take me to a normal school. My sisters were not friendly, so I was always lonely. Even now, I still feel treated differently than young adults who do not have a visual impairment. I know I am treated differently. (PK2, p. 5)

Participants described occasions when they had encountered situations in which they perceived either negative or positive attitudes regarding being young adults with VI. Participants attributed attitudes to other people, some to family members, social settings, and the general public. Some of the participants described incidences of negative attitudes in situations when people were either rude, unappreciative of their presence, or demonstrated undue sympathy. Others said that the treatment they received sometimes arose from individuals being unable to understand how to deal with them as a young adult with VI. PK2 thought that people had mixed views and reactions associated with visual impairment:

Some people in the community feel I should not go to school because I cannot do anything since it is not easy for someone who is blind to do normal activities. Sometimes they like it that a blind person can be a teacher. (PK2, p. 5)

PK3 described situations in which he thought he is sometimes felt discriminated against: I feel left out because it is hard to be elected as a leader. I am feared and some sympathize with me. Some shun me completely. I prayed to get a partner to marry and I got a lady who is a pre-school teacher. People still crack jokes with me. "How did this lady love you? What did she see in you?" Some tried to discourage her from marrying me. (PK3, p.8)

Participants spoke about how other students and peers in their school did not understand them as individuals with VI. PK4 explained:

In school, the teachers and the students of the school I went were not social with me in a way that I was treated like an unwanted person in the school. The friends I had disappeared after sometime. I was treated as an unwanted person in the school. (PK4, p.11)

Body language, facial expressions and gestures were communication modes that the young adults with VI said that they could not understand. Participants felt that these modes of communication was apparently convenient for people with vision. In cases where individuals expressed views about expressions that left out the young adult with VI in conversation, PK1 stated that he would that the information be repeated:

I think body language is very biased. In meetings, people forget and explain something then says “Do you see this? That one, that one, yes.” I tell them I don’t see. They often repeat it in a way I can understand. (PK1, p. 4)

Eating in a public place like a hotel did not present challenges for the young adults with VI. The majority of the participants acknowledged that they had been trained in activities of daily living and orientation. PK4 stated:

I am shy to eat in public places and I prefer to eat with my hands. I can participate in a discussion as long as I am understood. I am not confident to participate in a group. (PK4, p. 12)

While PK3 expressed satisfaction with his social etiquette skills:

I am well-adjusted when sitting with people. I have been trained on social etiquette. I have no problem joining a conversation and participating, (PK3).

FG1 members observed that there limited social supports for young adults with VI. The young adults with VI find it difficult to navigate their environment when seeking job placement:

Work vacancies are posted online and target people with vision. People with VI are not competent due to limited training and therefore cannot apply for work. (FG1PK, p.20)

According to participants, the environment presented a barrier to social inclusion in terms of perception and resource allocation. Members in FG1 viewed their environment as limiting and inaccessible, compared to that of the sighted community. Apart from the office location, which was not as easy to locate, the path and main road to the office were major barriers. FG1 provided some photographs to illustrate their perception of social exclusion. The photographs in Figures 4.5, 4.6 and 4.7 below show the feeder road that leads to the main road from the CBR office, the main gate that leads to the main highway that connects the county to major cities and towns of the country, and the path to the FG1 CBR office, respectively.



Figure 4.8. Part of the feeder road that leads to the main highway. The picture is courtesy of FG1 photovoice session (2014).



Figure 4.9. The gate leading to the highway. The picture is courtesy of FG1 photovoice session (2015).

The traffic that runs through this road travels from the county to the rest of the country. Note that there are no crosswalks for the young adults with VI as well as for the general population immediately past the main gate nor is there an alert that they are near or coming to the highway and an increase in the volume or type of traffic.



Figure 4.10. The grass path leads into the CBR office. The picture is courtesy of FG1 photovoice session (2015). Note that there is no ramp or specific environmental mobility modification to accommodate the young adults with VI.

Summary: Axial Code Social Supports for Young Adults with Visual Impairment

As the responses of the participants made clear, there is need to establish more social supports for the young adults with visual impairment. Participants indicated that they were confined to a small social network due to community's not understanding their needs as young adults with VI. Table 4.10 below represents the summary of the axial code on social supports for young adults with VI.

Table 4.10:

Summary of the Axial Code on Social Supports for Young Adults with VI.

Description	Participant	Perceptions
Acceptance	Young adult with VI- Interview/observation	I am accepted presently because I have struggled and gone through school. Sometimes I am recognized but with reservations, but my social circle has improved over time. I am sometimes invited to join community activities and social activities like volunteering to give a talk or join a friend for lunch. (PK2)
Etiquette	Young adult with VI- Interview/observation	I am well-adjusted when sitting with people. I have been trained on social etiquette. I have no problem joining a conversation and participating. (PK3)
Body language	Young adult with VI- Interview/observation	I think body language is very biased. In meetings people forget and explain something and say "Do you see this? That one, that one, yes". I tell them I don't see. They often repeat it in a way I can understand.
Friendship	Young adult with VI- Interview/observation	I had many friends before I became sick and blind but I remained with none when I became blind in class seven. But now I have a few more friends. I have adjusted. Others see me of course as a burden even without interacting with me. It was not easy integrating with people who are seeing. (PK1)

Visual difficulties	Young adult with VI/Focus Group-Interview/photovoice session	The teachers ask what they will do “with this one” meaning a blind student in their institution. There is very poor attitude towards VI in institutions of higher learning- not accepted. (FG2M1)
Discrimination	Young adult with VI-Interview/observation/F G1-Interview/photovoice	Work vacancies are posted online and target people with vision. People with VI are not competent due to limited training and therefore cannot apply for work. (FG1PK1)
Partnership	Young adult with VI/Focus Group-Interview/photovoice session.	We started an orchard to act as a model and change the attitude towards the learners and youth with VI. The project acts as a bridge to reduce cultural and social stigma and discrimination towards the VI. (FG2M2)

Access to Equal Opportunities for Work Participation

The questions on work participation were based on the topic discussed in the literature review that revolved around transition challenges faced by young adults with VI. The participants were asked to express their opinions based on personal experiences of any practical difficulties in seeking paid work as individuals with VI. It was apparent that there were limited choices for suitable work for the young adults with VI. This was attributed to barriers related to being a visually impaired individual, including mobility issues, difficulties navigating the application process and the unwillingness of potential employers to hire workers whom they feared might be a liability.

Most participants were concerned about the discriminatory attitudes that they encountered when seeking paid work. Some of those who had short-term paid work felt that they were not treated the same as their colleagues and that treatment accounted for their limited

chances of attaining long-term employment within the institution. For example, PK2, who is a practicing teacher, shared his feelings about a job placement for which he had applied. He did not receive any feedback, even after several inquiries, but someone who did not have visual impairment was later offered the position. Although he did not experience any direct discrimination, he said he was concerned that the school administration did not bother to contact him to tell him he had not been hired for the position.

All the participants have sought work at some point and still others are attempting to gain paid employment. PK6 reported that it is not easy finding employment, even with the right skills but with fewer academic qualifications:

If I could get financial assistance to start my own business and be self-employed. I would like to keep dairy animals, but I don't have the start-up capital. (PK6, p. 15)

However, PK5 stated that this may be generally the case countrywide since potential employers seek academically and professionally qualified individuals. Asked if visual impairment had affected his work participation, PK1 said that was not in doubt:

Very, very much. When people see what I do now, they say if I was not blind I would be very far. Opportunities for work or contracts are not many and when contracts come, sometimes they last for like 6 months or so and end again. So I go back to volunteering. (PK1, p.2)

When asked about work participation, some of the participants described themselves as holding temporary positions because they have not yet been successful in their application for permanent work. They thought they experienced negative attitudes that stemmed from their being young adults with visual impairment. The participants stated that employers or the community around them did not trust that anyone with a visual impairment would be equally productive compared to their non-disabled peers. PK1 had been doing volunteer work for an extended period of time for the same reasons while PK4 was not seeking active work, preferring

instead to wait and enroll at a teacher training college to gain skills for employment. Asked if his visual impairment had affected his work participation, PK5 replied:

Yes. People are not willing to employ me. People think I cannot be productive. I do not have the level of education required by employers but I am skilled in poultry keeping and dairy farming. I could not get fees since my family is poor and even my siblings did not go to school. I wanted to be a professional farmer if I were not blind because even now I can dig my shamba and grow vegetables and maize for subsistence. (PK5, p. 14)

PK3 was categorical that visual impairment had affected his access to work and that people did not have confidence in his performance as a young adult with visual impairment:

It has really affected me much because there are those people who believe that the visually impaired cannot attain expected standard of performance especially those in private schools. Parents resist my employment because they have no belief a blind teacher is effective. I am expected to specify that I have visual impairment because the government pays benefits; disability allowance to be able to pay someone who is going to help you read; an aide. I feel discriminated so far and I have not found permanent employment since I finished college in 2011. I have to specify my disability when I apply to teach in a school. (PK3, p. 8)

PK2 believed that potential employers are not willing to offer him practical experience since he is a young adult with VI. PK2 is a teacher in training and seeks short term teaching engagements while on holiday. However, he also mentioned the fact he is not yet done with training:

People are not willing to employ me though I am a trained teacher. People think I cannot be productive. Maybe they can give me work once I am done with teacher training, I don't know. (PK2, p. 5)

Young adults with VI have their rights infringed upon and need legal representation. More often than not, they are not aware of what those rights are. The motivation for the establishment of a CBR as reported by members of FG1 was to offer legal representation and referral services for the education and protection of the legal rights for young adult with VI in cases where they experienced discrimination in service delivery:

It is difficult to serve students with VI. Funding and resources was difficult. There was need for VI to be treated equally but there was a bias towards VI. The organization is a human rights organization and the CBR put down objectives to defend the underprivileged and underrepresented of whom VI are a group. To win a case, someone must have money but the VI are overrepresented in poverty and therefore they cannot afford to represent themselves. (FG1M1, p. 19)

The members of the CBR were motivated by the lack of representation for young adults with visual impairment, based on the fact that people with disabilities across the board did not understand their rights in the larger society:

We teach them on their rights and engage them in activities as committee members. They are included in the leadership of the organization. The CBR fights for their rights of young people with VI in case of discrimination. (FK1M2, p. 19)

On what prompted the CBR to partner with the school, FG2M2 responded:

The school did not have any income-generating activities and students with visual impairment left school without some practical independent skills like farming. Also, it was to encourage the community to change their attitude towards the VI and encourage them to support the students. The school was also struggling to meet the needs of the VI and therefore established this association and network with other organizations to provide a base for the VI, train them on skills in both agricultural and dairy farming so that they can live independently. (FG2M2, p. 21)

Figure 4.5 below represents part of the farm where members of the CBR in FG2 engaged in mixed farming, including dairy and agriculture. The section in the photograph shows the grazing field for the dairy animals. Some of the animals are seen grazing in the field.



Figure 4.11. Part of the farm where the CBR keep dairy cows for milk. The picture is courtesy of FG2 photovoice session (2015).

Summary: Axial Code for Access to Equal Opportunities for Work Participation

There was general agreement among the participants of both groups, from the individual one-on-one interviews with young adults with VI and the focus groups, that work participation was dependent on skill-specific training and higher levels of education. For the young adults with VI, it was especially challenging and directly linked to discrimination based on disability.

Table 4.11 below is a summary of the axial code on access to equal opportunities for work participation.

Table 4.11.

Summary of Axial Code on Access to Equal Opportunities for Work Participation

Description	Participant	Perceptions
Attitude	Young adults with VI- Interviews/observation	Yes. People are not willing to employ me. People think I cannot be productive. (PK5)
Confidence	Young adults with VI- Interviews/observation	Parents resist my employment because they have no belief a blind teacher is effective. (PK3)
Rights	Young adults with VI/ Focus Group- Interviews/observation/ photovoice session	The CBR fight for their rights of young people with VI in case of discrimination. (FG1PK1).
Advocacy	Young adults with VI/ Focus Group- Interviews/observation/ photovoice session	We have not succeeded in advocating and getting them to be accepted and be employed or accessed work participation because there is no acceptance in the job market. (FG2M2).
Practical Skills	Young adults with VI- Interviews/observation	I do not have the level of education required by employers but I am trained in poultry keeping and dairy farming. (PK6).
Health	Young adults with VI- Interviews/observation	When I am sick, my brother pays for me to go to hospital. My sickness has also affected me so I am not able do many things that I plan.

Summary

Chapter 4 has provided the perceptions of participants who are young adults with VI concerning what they perceive as barriers of social inclusion and work participation. The

findings of the study illuminate the meanings that the experiences shared have for individuals in the study. Further, the findings illustrate the complexity of issues which the participants encountered within their communities on a daily basis that contribute to the perceived dependence and marginalization they experienced in terms of social inclusion and work participation. The themes that emerged centered on culture as a component of bias that contributes to the way the community viewed visual impairment and assigned roles of subservience that relegate a young adult with VI to dependence upon the “able-bodied” members of their families, extended families, friends, the CBRs and other accommodating members of their communities. It is apparent that the expressed dependence results from perceived insecurity and marginalization among the young adults with VI, as discussed in the findings of the study.

The findings in Chapter 4 indicate that the participants were proactively seeking independence through skills training as teachers and plans to initiate income-generating activities such as dairy farming. Areas of independence were centered on activities of daily living, orientation and mobility skills mostly utilized within familiar settings and reliance on strong family support networks. The findings indicate that career change among the young adults with VI was influenced by visual impairment.

Partnerships with the CBR as reported in the two focus groups was motivated by the need to create social support structures for inclusion and work participation in creating opportunities for skills training in self and collective advocacy on human right issues as reported by FG1. The motivation for Focus Group 2 was the need for and training in practical skills as farming for the young adults with VI, provision of mobility and writing materials, financial support, as well as acting as a tool for community change to support social acceptance, inclusion and work participation for the young adults with VI. Table 4.12 below lists a summary of the axial codes

represented in the six major themes presented in Chapter 4. The major themes are as contained in the report from the study findings during the research.

Table 4.12:

Summary of the Axial Codes Represented in the Six Major Themes Presented in Chapter 4.

Culture and Community	Young Adults with VI, FGs/Interviews, observation/photovoice sessions	Disinheritance due to visual impairment, designated names for people with blindness, for example, “ <i>muofu</i> ” set individuals apart and are discriminatory.
Mobility and Travel	Young Adults with VI, FGs/Interviews, observation/photovoice sessions	Inability to master and be in control of the environment due to mobility and travel restrictions due to uneven surfaces and in pathways and inaccessible buildings.
Financial Constraints	Young Adults with VI, FGs/Interviews, observation/photovoice sessions	Dependence on family: travel, living, medical expenses due to unequal access to work participation opportunities, lack of adequate academic and professional resulting from restrictions of visual impairment, discrimination, employer attitudes.
Equal opportunity for education and skills training	Young adults with VI interview/observation	Restrictions of access to adequate teaching/learning resources; brailers, mobility devices, tuition and fees, environmental adaptation.
Social Supports	Young Adults with VI, FGs/Interviews, observation/photovoice sessions	Involvement in decision-making processes, communicating, building friendships/relationships that impact self-esteem, community acceptance, policy articulation at different levels of society

Access to Equal Opportunities for Work Participation	Young Adults with VI, FGs/Interviews, observation/photovoice	Limited choices for suitable work attributed to barriers related to visual impairment, including mobility issues, difficulties navigating the application process and attitude of potential employers to hire workers assumed to be a liability.
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Chapter 5: Discussion and Recommendations

Chapter 5 relates the study findings to the existing research on social inclusion and work participation among young adults with VI, as discussed in the literature review, to the functional model of disability, according to the ICF model of disability, and the theoretical framework on which the study was based, i.e., grounded theory (GT). The purpose of this study was to understand the barriers to social inclusion and work participation for young adults with visual impairment in the Elgeyo-Marakwet and Kisumu Counties of Kenya. Chapter 5 notes the implications for these experiences and the role of CBR in meeting the inclusion and work participation needs of the young adults with VI, for in so doing, CBRs involve the young adults with VI in community development. That, in turn, prevents or alleviates dependence and overreliance on families by creating structures that emphasize interdependence on community networks and supports.

The discussion on the study findings examines the potential for change in proactively seeking independence and access to equal opportunities to resources for the young adults with VI, addresses future research questions arising from the study findings, conclusions and recommendations, and the limitations of the study. The main research question was:

- What are the cultural biases and social constructs of disability that discriminate against young adults with visual impairment in the transition process towards work participation in the Elgeyo-Marakwet and Kisumu Counties?

While the three research sub-questions were:

- What are the specific barriers young adults with visual impairment face in accessing equal opportunities for work participation in the Elgeyo-Marakwet and Kisumu Counties in Kenya?

- What are the specific barriers young adults with visual impairment face in accessing equal opportunities for community inclusion in the ElgeyoMarakwet and Kisumu Counties in Kenya?
- What do young adults with visual impairments and their families think could facilitate work participation and successful community integration in the Elgeyo-Marakwet and Kisumu Counties in Kenya?

Selective Coding

According to Strauss and Corbin (1990), the process of selective coding involves integrating and refining theory. Through constant comparison of data obtained, as is the case in grounded theory (Carr-Swofford, 2009; Paton, 1990), the researcher identified core categories, themes and theories based on data that was generated. It is important to note that the theories generated are specific to the data collected from the particular phenomena under study and may not have a wide applicability or scope, as was posited by Creswell (2012). The four selective codes from the six themes as confirmed from the data during the coding process were: (a) culture, (b) monetary concerns, (c) self-perception, and (d) empowerment. The four selective codes emerged from a carefully maintained clear audit trail through data transcription wherein themes from interviews, observation notes, document analysis, journals, photographs, and other important information on the human experiences of the participants in the study were carefully analyzed and reported. The researcher was aware of the responsibility of ensuring the in-depth understanding of the human experiences of the phenomena under study by describing the steps of the process of data collection, data analysis and reporting of results (Wolf, 2003). The theories grounded in the data explain the behavior of the participants (cases) in this study who are six

young adults with VI and four members of CBRs affiliated to schools that serve students with VI who participated in the two focus groups in the study.

The researcher engaged in the process of triangulation by employing the multiple methods to confirm the findings (Merriam, 1988). Triangulation is part of the process in qualitative design engrained in GT to establish validity in case studies (Merriam, 1988). Further confirmability of the findings was done during the peer examination with the doctoral student colleagues. The researcher established that despite the different sites, Elgeyo-Marakwet and Kisumu Counties where the findings were obtained, the participants experienced similar phenomena. Both sets of narratives and experiences fit within the themes and categories as presented in the axial codes in Chapter 4. Figure 5.1 is a visual representation of inductively developed theory from the data as a theoretical explanation of the events. The selective codes illustrate the themes that emerged from the findings and its relationship to the GT.

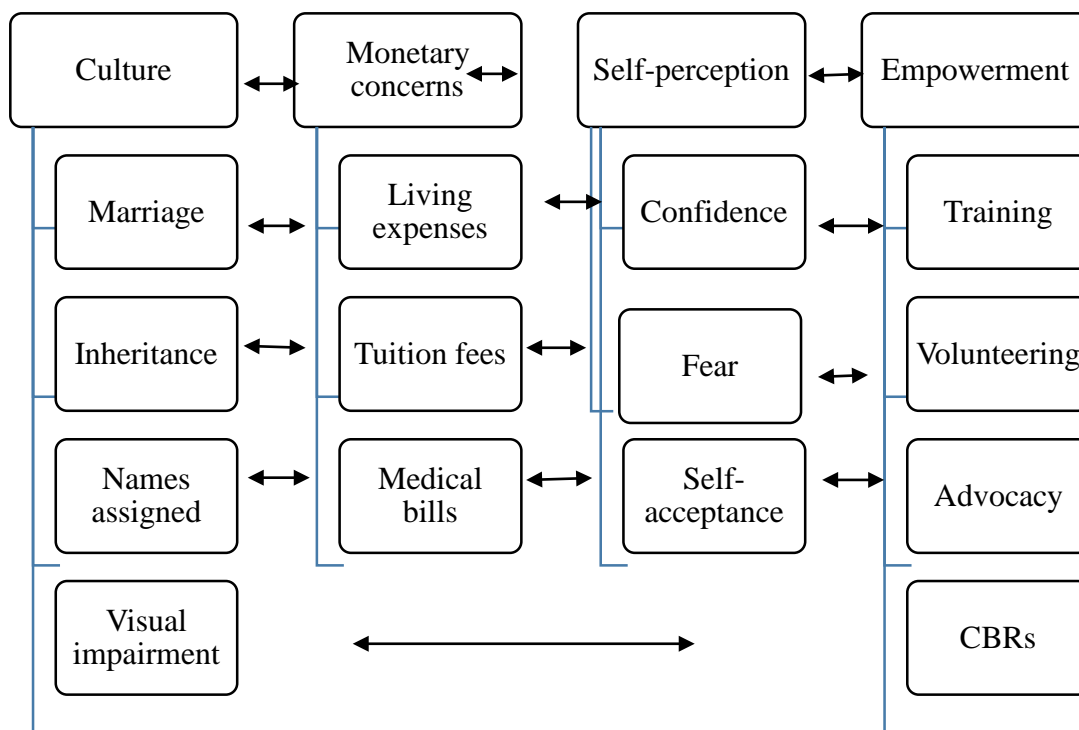


Figure 5.1. Major selective codes that emerged from the themes in the form of theories

Key Findings of the Study

Culture

Culture is a phenomenon that plays out in enabling or not enabling the transition process of youth with VI from school to work participation and social inclusion in their communities. The axial codes that supported the selective code “culture” were marriage, inheritance, and names assigned to the young adults with VI in the community which goes for everyone with a visual impairment. The findings of this study provide strong evidence that young adults with VI encounter transition difficulties as they seek work participation and social inclusion. There are social structures in a community that play the role of interpreting and judging phenomena by standards inherent to that particular community (Braathen & Ingstad, 2006). The standards

influence the perceptions that concern cultural issues and, as a result, cause social consequences that create disequilibrium associated with the social stratification. In order for social inclusion to occur in terms of marriage, participating in community ceremonies, forming lasting relationships and friendships, social structures need to view young adults with VI as possessing the capacity to make decisions in regard to the social issues affecting them and the community.

The participants in the study experienced difficulties in forming lasting friendships and finding partners in marriage. Even those who found marriage partners still experienced ridicule as members of their community questioned their ability to be successful spouses as well as the judgement of their partners in the union as to what they found appealing in a spouse with VI. The CBR in FG2 confirmed that the young adults still face difficulties such as making friends, attending social gatherings, and cultural activities because of their VI. The CBR acknowledged it has not attained the vision of socially including the young adults with VI because the abiding culture still segregates them while the CBR is advocating for acceptance and access work participation.

The participants agreed that they felt set apart and only found acceptance and support within the nuclear and the extended family. Even so, some participants found it difficult to inherit property since some family members sometimes challenged their right to their inheritance. Individual rights for the young adults with VI to property are challenged due to a culture that treats individuals with VI as lesser and requires that they take a secondary role in owning or managing family property. Further, according to the culture, women who are visually impaired are also denied the right to inherit family property. Thus, a person with a disability, whether man or woman, is challenged and cannot inherit property. Culture plays a role in defining a community and assigning members to social positions that may create differential

exposure in access to opportunities and resources (Musoke & Geiser, 2013). The CBRs in the study were bridges to access equal opportunities by offering legal representation where rights to inheritance were infringed. The value of a young adult with VI is perceived to be lesser and their capability brought to question so that inheriting property is not a right bestowed upon a young adult with VI.

This attitude or perception is clearly represented in the way the culture assigned names to people with VI, for example “*muofu*,” which is a word in the local language that sets a young adult with VI apart and is discriminatory in describing a blind person. Names either add value or subtract value in the communities where this study was based and *muofu* or *chepkoratiat* are derogatory and discriminative terms used to describe visual impairment and the person who is VI.

Names assigned by culture in the community were found to be stigmatizing for the young adults with VI since they thought that their friends would not understand them and that they were not as forthcoming in forming friendship. According to Bambara et al. (2009) and Gilbert and Miles (2000), young people can internalize social rejection and blame themselves, thus limiting their ability to achieve personal competency and causing them to experience a loss of self-identity as a result of unfavorable social comparison. The researchers’ observation rings true in the case of the young adults with VI in this research study since, as some observed, they feared going out into the community on their own, felt disadvantaged and marginalized in resource allocation and attention, and therefore had internalized low self-esteem. In all responses, every participant thought that visual impairment had negatively affected their social inclusion into the community, especially in the area of work participation.

Monetary Concerns

The second selective code to emerge was monetary concerns, which was supported by the axial codes of living expenses, tuition and fees and medical bills. Monetary concerns brought into question the smooth transition of young adults with VI from school to work participation and independent financial living. To be independent financially, the participants would need competitive training in terms of careers or practical skills. The participants communicated that even with adequate practical skill training, it was difficult to find work since potential employers considered academic experience alongside practical skill training. Some of the participants however held temporary job placement and had source of income, albeit inadequate.

The participants who held temporary job placement expressed more confidence in their abilities and believed that they would find work placement in the long run. This is an indication that financial security adds to the improved QOL for the young adults with VI (ILO et al., 2004; Olusanya, 2005). Work participation reduces income gaps and increases social and psychological well-being of young adults with disabilities that in turn improve the QOL (Schur, 2002). The ICF model of disability views functioning as an interaction of the environment, health, and personal factors with a complex relationship where an intervention in one entity, has potential to modify one or more of the other entities (McColl et al., 2006).

The interactions work in a two-way direction such that the presence of a disability may modify a health condition. The study findings raised the concern that visual impairment among the young adults has been given more attention than the individuals themselves and led to their marginalization in access to work participation which in turn limits their independent living and ability to lead fulfilled lives. The environment presented challenges that were hard to overcome in seeking financial independence. Most participants were struggling with medical conditions

associated with visual impairment and were not able to pay the medical bills. Close and extended family members were mostly reported to carter for medical expenses according to the respondents.

Because of lack of tuition and fees and traveling expenses, the young adults with VI in the study were unable to compete equally and fulfil their career goals. After the onset of visual impairment, the young adults with VI had to seek admission for alternative school placement and settings since their needs could suddenly not be met in the schools were they previously attended. The teachers anticipated that the newly blinded students would require new methods of approach to instruction, specialized equipment, environmental adaptation, and learning modes. Equipment such as braille machines, mobility devices, and books written in braille were the new requirements in terms of schooling. The absence of skilled teachers with training in specialized areas for students with VI in community schools meant that those students had to move to find personnel and resources to meet their specific needs in a different school setting. The newly blinded students also found traveling as an impediment to independence since they could not travel alone to far flung schools due to issues of adjustment to the visual impairment and leaving home; a familiar environment, to start live in a school in a new location. Orientation and mobility beyond the home added to their insecurity and therefore the student required to travel with a family which added to the cost of traveling. It is important to note that the individuals had to stay away from school for a longer period in order to deal with medical conditions and the barriers of mobility that accompanied visual impairment. Three years was reported as the period for some participants they stayed away from school making them pursue school beyond their adolescence and youth age, the average student is expected to have completed school. This translated to staying longer in school and delayed transition to community, training and work.

Kenya is yet to meet the needs of the young adults with VI from what the participants shared. Kenya recognizes that adults with VI require support in order to complete their educations, develop work skills, treatment, and rehabilitation. Further, they require support services, assistive technology, training, and rehabilitation to maintain a good QOL (Republic of Kenya, 2013). However, challenges in service delivery and monitoring implementation persist. FG2 members opined that the government does not provide adequate resources for the students and that there is less support from the community thus the need to subsidize through the CBR by partnering with other organizations to provide need braille paper, white canes, thermophoms, and models.

It was clear from the responses that the participants in the study attributed their choice of career as informed by visual impairment for they chose an occupation or skill training area where they could be near home and family members indicating a sense of dependence and insecurity. The role of CBR in the lives of the young adults with VI was indicative of the efforts towards empowerment. The focus was to mitigate the effects of VI by creating opportunities where the interaction of the environment, health, and personal factors were modified in enabling the individuals navigate successfully. In effect, CBR is designed to meet specific needs of young adults with disabilities that target to ameliorate the effects of marginalization experienced within the communities the young adults belong (Musoke & Geiser, 2013).

Self-Perception

The third selective code that emerged was self-perception. On further analysis of the axial codes, the researcher established that the selective codes self-perception was supported by the axial codes confidence, fear, and self-acceptance. Negative self-perception among the young adults with VI stemmed from stereotypic treatment by the community which continues to

advance the old adage of “disability is inability.” Participants noted that there persists a socialization practice within the community that perpetuate social exclusion and enable non-participation of young adults with VI in institutions of marriage, work, inheritance, and education. Most participants expressed fear of moving independently due to the many motorcycle riders who did not recognize that not all community members could comfortably walk along the roads. Some participants observed that they were feared and shunned by certain members of their community when they sought friendships, to engage in community ceremonies, join regular community schools, or get work placement. The general perception was that young adults with VI are depended and always need help on mobility. The participants also felt that community members did not understand them and therefore feared being friends. During ceremonies, it was observed that some young adults with VI were asked to leave and assigned a sighted guide to take them to their homes before the start of major activities. The actions led the VI to shy away, feel rejected and shunned, which resulted to feelings of inadequacy, low self-esteem and less self-confidence.

Most of the participants felt disadvantaged and isolated and feared going into the community on their own. It was generally agreed that there was more security within the home than further out into the community. One of the CBRs gave free legal representation or subsidized legal services whenever an individual with VI was challenged in accessing their rights within the community; be it in school or the workplace. The CBR in FG2 started an orchard “to act as a model and change the attitude of the community towards the students and youth with VI.” The project acts as a bridge to reduce cultural and social stigma and discrimination towards the young adults with VI. Since the community has negative attitudes that disadvantage the

young adults with VI in transition, the CBR wanted to give the students a sense of belonging, to feel cared for and afford equal protection for their interests.

The need for written or reading public information to be accessible to the young adult with VI was a source of concern for the participants. Participants observed that job advertisements were placed in print media and on the internet without alternative formats as braille. This was regarded as an impediment to access work participation since applicants who are VI need a sighted person to read or fill out the application forms for them. The situation was not any better since internet connectivity is not yet available in the rural parts of the counties requiring the participants who were eligible to apply to travel with a sighted guide to centers or smaller towns to access the internet. Such computer screen reader programs as job access with speech (JAW) for use by people with VI are not a technology that is yet available for the young adults with VI. Generally, the participants observed that they are technologically excluded first as young adults with VI, and, second, as youth seeking job placement in a technologically advancing world where the internet has basically become the major source of all kinds of information be it education, economic, social, job opportunities, or development among others.

Empowerment

The final selective code to emerge after axial coding was empowerment. Empowerment was supported by the themes volunteering, travel, advocacy and CBRs. Despite the challenges the young adults with VI faced in accessing social inclusion and work participation, there were positive support systems in place that enabled them successfully navigate their environment. Opportunity for volunteering was a satisfying activity that built the confidence of some of the participants.

I volunteered with the ministry of youth affairs which is a disability organization dealing with people with disabilities. I did work on policy with the ministry and came up with an accommodating policy for youth with disabilities. I have also volunteered with organizations to bring peace among communities since I have a paralegal background. (PK, p. 1).

Volunteering brought positive changes for persons with disabilities through contributing to writing policy guidelines which improve participation and inclusion of the young adults with VI. Apart from changing the way disability is viewed, volunteering opportunity gave PK1 opportunity to participate in the wider society and develop personal confidence and positive self-image. This confirmed that the young adults with VI are capable of empowering themselves given the opportunity as created by the CBR. The CBR concept is based on the premise that a person can only empower themselves by developing their own ability. By involving the community to work in solidarity for social change, CBR provides the opportunity for the inclusion processes and work participation in terms of skill development (Heinicke-Motsch, 2013).

The young adults with VI are engaged in advocacy through the CBRs and also are role models in their communities. Most participants were of the opinion that they are shunned and feared but that they are also respected that they could overcome visual impairment to go to school, get teacher education training and be married. The creation of an enabling environment and family support by way of paying school fees, accessing schools for students with VI to their children, and traveling with them to and from the schools gave some of the young adults with VI the motivation to pursue school to the highest level as PK2 aspired, "I want to continue to go to school up to PhD level and get a job." The members of the CBR observed that there was continued marginalization and discrimination in terms of social inclusion and work participation.

It was noted that VI are not granted their rights as provided by the constitution of Kenya or as accessed to the young adults in the community who are sighted. The CBR in FG1 trained most of the young adults with VI on how to advocate for their rights and whenever the need arises give them subsidized or free legal representation. Some of the participants had been trained on paralegal services to be able to network and advocate at their different levels. FG2 members saw the need to train the young adults and students in the community who have VI in practical skills to enable them transition from school to work or self-employment.

The members reported that the CBR networks and collaborates with like-minded organizations in advancing financial capacity through the sale of proceeds from the farm. The money went towards buying mobility devices and teaching and learning resources. For those who have transitioned to the community, the CBR accessed them banana shoots to grow at their homes in order to have a source of income. The CBR acknowledged that despite these efforts, funding was a challenge. The community were not as actively involved because of the general negative attitudes towards disability and visual impairment. This is an impediment to the smooth transition and acceptance of the VI in the community and in securing work placement.

Recommendations and Implications of Study Findings on Policy

The purpose of this study was to seek to understand the barriers to social inclusion and work participation for young adults with visual impairment in the Elgeyo-Marakwet and Kisumu Counties of Kenya. Kenya has in place a new constitution of 2010, Persons with Disabilities Act (PWD) of 2004, and is a signatory of different international, regional, and national treaties (Otieno, 2009). What lacks is the enforcement structure to ensure that schools and institutions are well equipped and prepared to meet the individual needs of all its citizens, different or otherwise. Aspects of stigma and discrimination are reduced and probably in due cause removed

if laws were enforced. The findings of this study indicate that the young adults with VI still face discrimination and face barriers of access to community social inclusion and work participation. The barriers faced stem from culture, community attitude, technological advancement and poverty among other indicators. The participants reported that people in their communities people fear them and do not understand their needs. The young adults with VI thought they were treated differently and not afforded opportunities for work participation in the way that the same opportunities are available to their sighted peers. Participants who had sought employment opportunities and were not successful attributed this to employer perception that young adults with VI were not as productive and competent due to the visual impairment. In a report by KNSPWD (2009), it was observed that there still exist barriers of attitude that are more disabling than the disability among people with disabilities so that prejudice is extended to the family members and friends. The cultural barriers experienced made the young adults with VI perceive themselves as shunned, feared and unaccepted. PK1 observed that without policy, it is difficult to access political offices and without policy, it is hard to access services that come to others. Thus this study observes that policy implementation and enforcement are key to the social inclusion and work participation of young adults with VI.

Gueorguieva (2012) noted that Kenya has been marked by growing inequality up to the very recent years. Although the researcher notes that there is a shift towards equality and social inclusion that culminated to the new constitution of 2010, the young adults with VI in the study reported a high incidence of marginalization and discrimination contributed by socio-economic, education and cultural structures that are still in place despite a new constitution. Kenya has ratified several treaties on employment and inclusion for people with disabilities. Tororei (2009) argues although the steps have been taken to ratify the treaties, persons with disabilities are still

among the most vulnerable group in Kenya. The way society perceives disability has resulted in inherent socio-cultural, economic and political prejudices (Insgad & Grut, 2007). In order to overcome these barriers, the study observes that policy makers in government, program coordinators and NGOs establish effective programs that deliberately target and promote the rights of young adults with VI. The CBRs models in FG1 and FG2 are a bottom-up approach where the community includes the young adults with VI and their families and community stakeholders assist in determining the needs, decision-making processes, and designing appropriate interventions.

The social exclusion of young adults with VI and the discrimination in their work participation stems from a lack of understanding that the impact of visual loss does not include or limit personal independence for the person with visual impairment (Cimarolli, Reinhardt, & Horowitz, 2006). The ICF model of disability views functioning as an interaction of the environment, health, and personal factors with a complex relationship (McColl et al., 2006); thus, modifying the environment to accommodate individual needs enhances the functioning of that individual. In initiating CBR, it is hoped that the local community is encouraged to participate in the development of positive social supports such as income-generating activities, self-care, and managing personal budgets, assistive technology and accessing rides to work, which in turn facilitates an understanding of disability and enables the implementation of sustainable initiatives (Bickenbach, 2009; Cimarolli & Boerner, 2005b). Traditional work participation practices should be recognized and, where appropriate and demonstrably safe, should be incorporated as complementary or alternative forms of inclusion in introducing and implementing CBR.

The CBRs expressed that they experienced funding limitations to accelerate and support the efforts of both FG1 and FG2 in meeting the human rights needs of the young adults with VI. The CBRs in both FG1 and FG2 had identified the needs as financial constraints for the young adults with VI: school, learning and teaching resources; legal representation; training and skill-area needs; discrimination and prejudice; social exclusion; discrimination in work participation; mobility and travel; and technological exclusion in terms of internet access and accessible reading and written media. While individuals with VI in high and middle level countries have advanced technological devices such as navigators for route planning and mobility features, wireless connections on mobile phone technology, mind-mapping applications and programs, and personal computers (Loomis, Marston, Golledge, & Klatzky, 2005), the young adults with VI in this study are yet to benefit from such opportunities. However, with free primary education and subsidized secondary education, it becomes more likely that with proper enforcement of policy and deliberate planning, these things may be available in the foreseeable future. However, the question to ask is, how much longer must they wait? The response to such a question is beyond the scope of this study but would definitely serve as a future research question.

The CBRs had put in place measures to mitigate or try to reverse the effects of marginalization but they were yet to meet their objectives. FG1 stated that despite concerted efforts to meet the legal representation needs of young adults with VI, they have not benefited as hoped due to lack of essential communication equipment as braille machines or people who could take down notes for them during training sessions or empowerment meetings. The FG1 also reported that transport to the meetings was a challenge since the young adults with VI lacked sufficient funding for transportation to the meetings, especially since that transport would

include both themselves and a sighted guide. This challenge was attributed to lack of adequate funding and resources. Resources here would mean technological devices for the young adults with VI such as travel guides and mobile devices with audio-recording applications, which is one recommendation of this study.

FK2 members observed that the CBR was actively engaged in seeking funding and other resources that would enable them to address the socio-economic and educational needs of the students in the school where the CBR is located, the students with VI in transition to the community, and the young adults with VI. FK2M1 reported that there were still children in the community who did not transit to high school due to lack of fees or refusal of high school principals to accept them into their schools. Apart from funding, the CBR in FG2 experienced challenges in addressing the social inclusion needs of the young adults with VI that stem from cultural definition of disability and visual impairment and acceptance for the individuals with VI in work participation and employment due to the attitude of potential employers that viewed the young adults with VI as incompetent due to the visual impairment. This study contends that with the barriers experienced by the participants in their communities, the young adults with VI continue to struggle with issues of self-esteem, self-confidence and poverty that ultimately affect their QOL since the lower the social support received, the higher the QOL and vice versa. It is therefore important to recognize the presence of policy and its enforcement in order to protect and promote the human rights of young adults with VI towards access to equity and social acceptance. Despite the challenges experienced, photovoice sessions among members of FG2 reported success in meeting skill training needs for the young adults with VI in transition in the school with which the CBR is affiliated. It was reported that the young adults with VI are sent

home with banana seedlings and, whenever available, other forms of seeds and seedlings to cultivate in their homes in order to contribute to their future financial independence.

Attending separate schools and training institutions outside of their communities immediately after the onset of visual impairment denied the young adults with VI equal opportunities for community inclusion which contributed to their low self-esteem. The participants felt their ties with their close family members, peers, siblings, and the community were severed since schools within their communities did not have adequate teaching and learning resources to accommodate their needs and enable them to benefit from the curriculum, which in itself needs to be adopted and adapted for ease of access. However, as much as they were able to get the right equipment and the right environment for school and training and function as a student or trainee with VI, the aspect of separate institutions made it difficult to adjust and to pursue a dream career.

The aspect of separation was traumatizing since it took away the social supports that were important in the process of adjustment to being visually impaired (Kef & Deković, 2004). Young adults with VI and their families were still coming to terms with the impact of visual impairment and the medical conditions that accompanied the onset of that impairment. The stress of adjustment to disability was increased by the challenges encountered from leaving a familiar environment for a school away from home. Coupled with these two factors was the need for participants to learn new modes of communication such as braille reading and writing, listening skills as communication and environmental cues, orientation and mobility skills, and activities of daily living that now included grooming and social etiquette (Mason & McCall, 2013).

Kef and Deković (2004) observed that disruption of routine and moving away from a familiar background into an unknown institution impacted both self-esteem and self-confidence for individuals with a disability. For young adults and students with VI, many additional changes are taking place, both inside and outside of the individuals who may feel the need to fit in with their age group peers and not to be seen as different. Meanwhile, the separation affects their state of happiness as the necessary psychosocial adjustment presents challenges in making friends, dating, and general relationships, just as the participants expressed in their interviews. Accordingly, there is need to rethink policy implementation, enforcement, monitoring, and evaluation so that an all-inclusive and continuous schools structure is established that keeps students with VI within their communities, among family members, siblings, and peers, as observed in KNSPWD (2009).

Supporting the communities to implement CBR approach is a recommendation that emerged from the findings of this study. The CBR in FG1 reported that, for three years, it had advocated for a client who had volunteered as a social worker in her community school. The employment interview was conducted over a weekend when the applicant, who was visually impaired, was off-campus and therefore could not make the interview; instead, a daughter of a board member was employed. Clearly, this was a breach of ethics and if there was enforcement of laws and policies that address equal representation and accountability, the kind of scenario described would not have occurred.

Otieno (2009) posited that the rights of individuals with disabilities are well-protected in the current and existing international, regional, and national human rights instruments, including the UN Convention on the Rights of Persons with Disabilities of 2006, the KPWD Act of 2004, and the present Constitution of 2010 that promote and protect the human rights of individuals

with disabilities and ensure fundamental freedom and respect for individual dignity. However, prejudice, inequality and discrimination still persist in society that prevent social inclusion and work participation, aspects of marginalization that were confirmed in this study. This study further recommends that the parents, the communities, policy makers, government agencies, and NGOs network and collaborate to establish or initiate CBRs that can define specific community needs for social inclusion and work participation for the young adults with VI, their families, and community stakeholders.

Members of both focus groups had established CBRs to address the inequalities encountered by persons with VI. Although not explicitly reported by the participants in the photovoice sessions, it was evident that the ICF model of functioning was exemplified in the establishment of policies and procedures for the CBR. According to WHO, the main strategy for CBR is the promotion of community inclusion whereby projects are tailored to meet the unique needs of a given group (Deepak et al., 2014). In this study, the CBR was responsible for defining the needs of the young adults with VI within the perspective of community development. The CBR goals were relevant to the individual situation (Heinicke-Motsch, 2013) in terms of acting as a bridge to community inclusion and changing attitudes, as exemplified by FG2's comments and the legal representation for individuals with VI, as noted by FG1. Despite the consensus regarding CBR as a major step towards maximizing the full potential and abilities of young adults with VI in their natural environments and among their families and communities, Kenya is yet to reap its benefits in the area of inclusive development, as observed by Heinicke-Motsch (2013). The findings of this study made it clear that the CBR needs to continue to work toward its goals of facilitating work participation and encouraging community inclusion. The researcher recommends a more rigorous approach at the community level, where culture still

defines the individual in terms of disability. By enabling success through policy implementation and empowerment, the young adults with VI would be able to utilize available community resources to advance their cause towards financial, education, socio-economic independence, in turn influencing the perception of visual impairment within the natural settings of young adults with VI.

Photovoice is a community-based participatory approach by which people identify, represent, and enhance communication through specific photography techniques in order to assess situations of concern and communicate their views (Wang & Yanique, 2001). Photovoice is intended to carry out participatory needs assessments to enable critical thinking in discerning what is significantly important (Hergenrather, 2009), as happened in this study. The researcher recommends a follow up of this study in order to pursue the findings and ultimately develop an action plan to enhance individual and community development and communicate the views to policy makers to plan services to meet the needs of the young adults with VI within the CBR areas. Further, it is intended that this findings will inform future funding proposals for the CBRs in the study in empowering the communities to better serve the young adults with VI and meet their needs in work participation and social inclusion within the communities in which they reside and thrive.

Limitations and Implications

This study was limited in scope since it focused on rural-based young adults with VI in Kenya and are therefore specific to the group from which responses were obtained. Further investigation focusing on a longitudinal study, which is another feature of the case study in understanding phenomena, is required. A longitudinal study would ensure that the interplay among the long-term interventions of CBRs among the young adults with VI, the focus groups,

and government-focused development in resource allocation to the county level governments recently implemented by the government of Kenya strategies are sufficiently examined to inform generalizability of the study results. Indeed, Gartin (2012) acknowledged that longitudinal case study design allows for surveillance in changes over time. In effect, a longitudinal study would allow for observable and felt changes in regard to the interventions and policy implementation associated with county government focus. Further, a longitudinal study of a given cohort for a longer period of time such as when they become part of a CBR would produce sufficient results from the sample population that can be generalized to the particular region. The group under study was based in a rural setting. Both locations of the CBRs were in rural Kenya and thus these findings are limited to this setting unless replicated in a research follow-up and even then, case studies are unique since experiences shared are individual and sometimes intrinsic.

Conclusion

Disability has been a subject of discrimination and marginalization for a long time (Lichtman, 2012). By understanding the social construct associated with visual impairment and how bias has contributed to the discrimination of young adults with VI, strategies to address the gaps of marginalization can be evaluated for suitability for addressing specific development needs. The young adults with VI in the study developed coping skills to deal with experiences of marginalization. They sought to address feelings of being put down, excluded and unaccepted and to play roles in their communities by seeking control of their lives through educational achievement albeit, not at higher levels due to financial and accommodation challenges. They saw that training such as para-legal training, dairy and poultry farming, volunteering, and professional courses such as teacher education and social work was the way for them to achieve acceptance in the community and alleviate the impact of their disability.

Despite the research study being limited to the sites where the study was conducted, it is hoped that the lessons learned can be utilized within a wider context to inform issues of policy implementation and enforcement for the betterment of the lives of young adults with VI. Having young adults with VI learn together, among peers, siblings and family members, the community stakeholders and CBRs administrators, loop the group in while articulating policy to participate in decision-making processes in small groups. That can result in sharing ideas, acquiring the courage to take up risks, developing the ability to disagree with and share with one another, to generate ideas and to reconcile points of view. These norms may not necessarily cut across all CBRs or groups but do result in high motivation and cultivates a sense of belonging and affiliation, which enhances accountability and affects changes in the individual's knowledge and skill repertoire, ultimately allowing independence and social inclusion. Further, by being within the community, cultural biases, mobility and travel issues and problems with social supports would be altered to include the needs of young adults with VI.

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Appendix A: Interview Protocol

1. Tell me briefly about yourself. What is your age, education level, and what are your skills?
2. Do you live alone, with family, or with others?
3. Do you prepare your own meals and/or perform other household chores?
4. What was it like growing up with a visual impairment?
5. Do you think you are treated differently than young adults who do not have a visual impairment?
6. How has visual impairment affected your access to school?
7. How has visual impairment affected your inclusion in the community?
8. How has visual impairment affected your participation in the work force?
9. Tell me about your source(s) of income
10. Describe one experience that you think is unique as a young adult with visual impairment
11. Have you experienced discrimination because you are a young adult with visual impairment?
12. What are some cultural biases about visual impairment that have affected your sense of belonging in the community?
13. What are the challenges to mobility that you face?
14. What are some environmental barriers that you experience being a young adult with visual impairment?
15. Do you think the public or community understand your needs as a young adult with visual impairment?
16. How would you describe your social circle?

17. Do you think your friends understand your needs?
18. What issues are important to you?
19. What do you think could be done better to address your needs as a young adult with visual impairment?
20. How would you describe your social adjustment in terms of:
 - a). Self-confidence
 - b). Understanding of body language
 - c). Social etiquette?
21. Do you know of agencies or non-governmental organizations (NGOs) that support young adults with visual impairment?
22. Do you feel actively included in the decision-making processes of these agencies?
23. What do you think the agency should do better?

Appendix B: Letter of Consent to Participants

Title: The role of Community Based Rehabilitation (CBR) in Supporting Communities to Promote and Protect the Human Rights of Young Adults with Visual Impairment in Community Inclusion and Work Participation in Kenya: A Case Study

Investigator:

University Affiliation: University of Arkansas at Fayetteville, USA

Contact: Email:

Description: The purpose of this study is to understand your perceptions as young adults with visual impairment on barriers of access to work participation and social inclusion in your communities. You are requested to participate in a one-on-one audio-recorded interview session and also in a focus group comprising of school committee members. I will take 1.5 hours of your time with each participant in the first part of the interview session. In the second part you will be asked to participate in a session when you take photographs of scenes that depict the roles of young adults with visual impairment and explain your thoughts and perceptions concerning environmental or social barriers of access or otherwise to community inclusion and work participation of young adults with visual impairment. This will be during an interview and observation session when combined in a focus group with the school committee members. I will take 1.5 hours of your time during an information dissemination session of my expectations as a researcher and your input of thoughts as a focus group. I will take 2 hours of your time during photography reporting session as a focus group.

Risks and benefits: The benefits of participation in this research study include the satisfaction of contributing to research concerning perceptions of young adults with visual impairment on work participation and social inclusion of young adults with visual impairment and the role of community based rehabilitation as a tool for their development. Qualitative methods, mainly interviews, observation and taking of photographs will be utilized in data collection for this study. The researcher will seek to access documents on individual records of the young adults with VI that they will be willing to share and public records that are either available online, in hard copies and journals or other sources that carry information that support information accessed during the interview and photograph sessions. Memoing will be part of the data collection process where the researcher will document points of interest shared by you as participants during the interviews and photograph sessions. Risks are minimal since participants' names and locations will be kept confidential. Only the researchers will know your name but it will not be attached to any data collected.

- Voluntary participation: Your participation in this research is completely voluntary. There are no payments or credits associated with the participation.
- Confidentiality: All information will be recorded anonymously. Only the researchers will know your name but it will not be attached to any data collected. All information collected will be kept confidential to the extent allowed by law and the University policy.

- Right to withdraw: You are free to refuse to participate in this study or to withdraw from this study at any time. Your decision to withdraw will bring no negative consequences and no penalty to you.

If you have questions or concerns about this study, you may contact:

For questions or concerns about your rights as a research participant, please contact:

Informed consent: I have read the description, including the nature and purposes of this study, the procedures to be used, the potential risks, as well as the option to withdraw at any time. Each of these items has been explained by the researcher. All of my questions have been answered and I believe I understand what is involved. My signature below indicates that I have agreed to participate and that I have received a copy from the researcher.

Signature _____ Date _____

Appendix C: IRB New Protocol Approval



UNIVERSITY OF
ARKANSAS

Office of Research Compliance
Institutional Review Board

December 3, 2014

MEMORANDUM

TO:

FROM:

IRB Coordinator

RE:

New Protocol Approval

IRB Protocol #:

14-11-246

Protocol Title:

*The Role of Community Based Rehabilitation in Supporting
Communities to Promote and Protect the Human Rights of Young
Adults with Visual Impairment in Work Participation and Inclusion:
A Case Study*

Review Type:

EXEMPT EXPEDITED FULL IRB

Approved Project Period:

Start Date: 12/03/2014 Expiration Date: 11/25/2015

Your protocol has been approved by the IRS. Protocols are approved for a maximum period of one year. If you wish to continue the project past the approved project period (see above), you must submit a request, using the form *Continuing Review for IRB Approved Projects*, prior to the expiration date. This form is available from the IRB Coordinator or on the Research Compliance website (<https://vpred.uark.edu/units/rscp/index.php>). As a courtesy, you will be sent a reminder two months in advance of that date. However, failure to receive a reminder does not negate your obligation to make the request in sufficient time for review and approval. Federal regulations prohibit retroactive approval of continuation. Failure to receive approval to continue the project prior to the expiration date will result in Termination of the protocol approval. The IRB Coordinator can give you guidance on submission times.

This protocol has been approved for 10 participants. If you wish to make any modifications in the approved protocol, including enrolling more than this number, you must seek approval *prior to* implementing those changes. All modifications should be requested in writing (email is acceptable) and must provide sufficient detail to assess the impact of the change.

If you have questions or need any assistance from the IRB, please contact me at 210 Administration Building, 5-2208, or irb@uark.edu.

Appendix D: IRB Project Modification Approval



UNIVERSITY OF
ARKAN SAS

Office of Research Compliance
Institutional Review Board

December 11, 2014

MEMORANDUM

TO:

FROM: IRB Coordinator

RE: PROJECT MODIFICATION

IRB Protocol #: 14-11-246

Protocol Title: *Community-Based Rehabilitation Supports for Social Inclusion and Work Participation of Young Adults with Visual Impairment in Kenya: A Case Study*

Review Type: EXEMPT SJEXPEDITED FULL IRB

Approved Project Period: Start Date: 12/11/2014 Expiration Date: 11/25/2015

Your request to modify the referenced protocol has been approved by the IRB. This protocol is currently approved for 10 total participants. If you wish to make any further modifications in the approved protocol, including enrolling more than this number, you must seek approval prior to implementing those changes. All modifications should be requested in writing (email is acceptable) and must provide sufficient detail to assess the impact of the change.

Please note that this approval does not extend the Approved Project Period. Should you wish to extend your project beyond the current expiration date, you must submit a request for continuation using the UAF IRB form "Continuing Review for IRB Approved Projects." The request should be sent to the IRB Coordinator, 210 Administration.

For protocols requiring FULL IRB review, please submit your request at least one month prior to the current expiration date. (High-risk protocols may require even more time for approval.) For protocols requiring an EXPEDITED or EXEMPT review, submit your request at least two weeks prior to the current expiration date. Failure to obtain approval for a continuation on or prior to the currently approved expiration date will result in termination of the protocol and you will be required to submit a new protocol to the IRB before continuing the project. Data collected past the protocol expiration date may need to be eliminated from the dataset should you wish to publish. Only data collected under a currently approved protocol can be certified by the IRB for any purpose.

If you have questions or need any assistance from the IRB, please contact me at 210 Administration Building, 5-2208, or irb@uark.edu.