

5 ***Attitudes and Beliefs about Disability in Tanzania***

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People are constantly evaluating and making judgements about other people and events. We react to people and situations on the basis of how we evaluate and judge them. This chapter focuses on reactions towards disability and disabled people in historical and contemporary terms. The generally held view that attitudes in non-western cultures are very negative is closely examined through an analysis of attitudes in Africa as epitomised in the folklore from Tanzania.

The author declares his bias towards people-centred, or autonomous development in which local communities and nations reflect on their own situation and take action to solve their problems (Freire, 1973). The phrase "*non-western cultures*" is used in this chapter to refer to nation states and local communities popularly known as "developing countries" or "the developing world". This is to avoid the economics-centred, material accumulation, stage theory of development which these phrases suggest. Likewise, industrialised or "developed countries" are referred to as "*western cultures*".

The use of the concept of culture places disability in its proper context, especially in relation to attitudes and attitude change in the community. It is also an attempt to encourage positive intercultural relations without which stereotyping, domination, oppression and imposition of foreign values in education and social work often occurs. Gadamer stresses the need for cultures "entering into an open-ended dialogue, where neither party is in control (and) there are no privileged...cultural positions" (quoted in Welch, 1993).

Historical Perspectives on Attitudes towards Disability

History is replete with examples of disabled people worldwide being ridiculed, killed, abandoned to die or condemned to permanent exclusion in asylums and ridiculed (Pritchard, 1963). Anang (1992) claims that the Greeks abandoned their disabled babies on hillsides to die while early Chinese left their disabled people to drown in rivers. In Europe, Nero Commodus is said to have targeted bow and arrows on physically disabled individuals and the Church in the 15th century sanctioned the extermination of disabled persons (Durant, 1944; Onwuegbu, 1988).

Coleridge (1993) traces through history the killing of people with disabilities, beginning with the Spartans who killed disabled persons as a matter of law; the endorsement by Martin Luther to kill disabled

babies because they were 'incarnations of the devil'; the English eugenicists who eliminated disabled people under the Darwinian evolution theory of the 'survival of the fittest' and the Nazi Euthanasia Programme under Hitler to exterminate disabled people as they could not make any contribution to society. These persecutions recorded in western cultures are still evident today.

In a world guided by economics, with its concern for investment and maximum rate of return, inequalities of opportunities are created for people with disabilities. There are people today who are strongly in favour of non-treatment of newborns with severe disabilities, much as were the nineteenth century eugenicists (McDaniel, 1989). Termination of life is now affecting foetuses. For instance, Gudalefsky and Madduma (1992:7) give an account of the "shocking and unacceptable" statement by a European delegate at a recent world conference who reported "that his country has solved the problem of defectives by the introduction of widespread amniocentesis and other prenatal testing procedures".

However, amid the raging persecutions, history also presents rays of positive societal perception and action. For example, Anang (1992) reports on the interest in the problems of blind people which became manifest in Egypt in 2650 BC. Subsequently Egypt began to provide opportunity for blind people "to engage in gainful employment" and to be known as the "country of the blind". As a result of this fame, Anang (1992:17) writes:

Pythagoras travelled to Egypt and observed the work being done with the blind in Egypt and carried the story of their work to Greece.

Pythagoras' visit to Egypt created interest in the study of eye diseases and influenced public attitudes towards people with blindness and other disabilities.

Favourable practices in rehabilitation and community care were found all over the world. For example, Miles (1983), in his review of literature, reports of the use of prosthetic and artificial eyes in India around the 6th century BC. and "a remarkable tradition of community care for the mentally disordered" which began in Belgium in the 5th century AD.

On the educational scene, the contributions made by such educational thinkers as Froebel, Rousseau, Locke and Montessori, to name but a few, have had an indirect influence on the understanding of disabled learners (Ishumi, 1976). The history of special education is in fact a story of changing attitudes towards people with disabilities; from private tuition, institutions, special schools to integration and

now gradually to inclusive education. It is worth noting that the idea and practice of integrated education is not a 20th century innovation. Johann Wilhelm Klein advocated it vigorously in Austria in 1810, prepared a guide to assist regular class teachers who had blind children in their classes in 1819, and this led to the issuing of a policy statement on integration in 1842 (Gearhart and Weishahn, 1976).

Historically, therefore, attitudes towards disabled people have been a mixture of persecution as well as tolerance. However, the tolerance shown has been paternalistic. Disabled people were perceived as incapable of making their own decisions and of taking control of their lives; they were viewed as people who always need to be helped or as objects of pity and charity (Coleridge, 1993). This paternalistic conception of disability is clearly evident in the work of voluntary organisations, especially in their fund-raising activities (Ralph, 1989). Unfortunately, paternalistic attitudes tend to create dependency and an incapacitating learned helplessness in people with disabilities. It erodes the self-esteem of the recipient of charity (Oliver, 1990).

Modern practices recognise and respect the disabled person as a person first and as disabled second. Disabled people are not perceived as inferior or second-class citizens, but capable of communicating and participating, entering into dialogue with other people (Freire, 1973). These are the empowering practices, the very basis of people-centred development, which recognise that disabled people, or any other group of human beings in society, need to be responsible for their own affairs.

Attitudes to Disabled People in Non-Western Cultures

There is ample evidence that all cultures - western and non-western - exhibit reactions to disability and disabled people which form a continuum (Ingstad, 1990). Yet much literature on non-western cultures is dominated by descriptions of negative attitudes. O'Toole (1988) has summarised these descriptions thus:

In the West the disabled have been stereotyped as being dependent, isolated, depressed and emotionally unstable...Such negative feelings are amplified in LDCs [Least Developed Countries] where the overwhelming impression, from published literature, is of attitudes towards the disabled which are very negative.

Ingstad (1990) argues against this stereotyping of non-western cultures and describes it as a recently created "north-south myth".

In order to raise money, create awareness..., a picture of the situation for disabled people has often been painted as negatively

as possible, emphasising shame, hiding, killing, etc.

Particular caution must be exercised when reviewing western literature on attitudes or literature that has been written by, or on behalf of, a charitable organisation.

However, regional, country and community-specific initiatives which are aimed at developing relevant strategies for changing negative public attitudes in favour of disabled persons are indeed laudable. The study carried out in Pakistan following the International Year of Disabled Persons (IYDP) in 1981 provides an excellent example of a country-specific action-oriented attitude consideration, whatever the researchers' initial assumptions (Miles, 1983). Kisanji (1993) and Walker (1986) have similarly provided an overview of the situation in Africa.

There are also a number of studies on attitudes at community level (Bickford and Wickham, 1986; Muya and Owino, 1986; O'Toole, 1988). Most of these published and unpublished works reveal a mixed pattern of attitudes which are a mirror image of the worldwide situation. Hence it is misleading to argue that attitudes in non-western cultures are very negative.

An examination of the published materials on non-western cultures shows that most of them are impressionistic, anecdotal (Miles, 1983) and written for a western audience often by westerners. Although the studies which are reported in literature are sometimes carried out with or in consultation with local professionals, the interpretation of data cannot escape the inevitable influence of western culture.

Each culture has its own unique characteristics which usually are best understood by indigenous people. However some of the local professionals, products of non-indigenised western education, may not understand their own culture (Thairu, 1985; Thiong'o, 1986). Misinterpretations of practices, therefore, may be made by both local and foreign researchers and caution needs to be exercised when reviewing findings on attitudes in non-western cultures.

Further problems in attitudinal research include difficulties with sampling procedures, attitudinal measurement and attitudinal biases (Gajar, 1983). A recent computer search on attitudes towards disability and disabled people, with *DISABILITY, ATTITUDES, DISABLED PEOPLE* as the keywords, gave 133 entries which included both rigorous studies and non-empirical descriptions of attitudes. The studies focused on perceived causes of disability, parental reaction immediately following the identification and confirmation of the impairment in the child or family member, educability and employability of disabled persons. Child rearing practices, despite their importance in showing action oriented

attitudes, were not covered.

Data were collected from disabled persons, parents, students, teachers, co-workers and other specific professional groups who have gone through western schooling. The findings of these studies may not be generalisable to oral (orate) cultures.

Studies of attitudes in orate cultures are bound to face even more problems. Ethnographic research takes a long time to complete. Mastery of the local language to a native speaker level would take many years. It is no wonder, therefore, that there have been so few studies on attitudes in non-western cultures. Local professionals have largely been content with impressionistic descriptions which may express mainly personal perceptions rather than genuine community attitudes.

However, community attitudes are an expression of a people's culture. A study of some aspects of culture ought to reveal generally held views about disability and disabled people. These aspects may include customs, paintings, drawings, carvings, and the folklore and language used in relation to disability and disabled persons and folklore. Ingstad (1990) provides a hint in this direction when she writes:

In the old days in Europe a disabled family member was considered a shame, a sign of God's punishment and thus someone to be hidden, killed, etc. This may have been true to some extent, but if we go to what is probably our best source, folktales and literature, we get a different picture (p.188).

The study described in this chapter was based on the realisation, that folklore may shed more information on attitudes. The main purpose was to identify community rather than individual attitudes and to represent both orate and non-orate cultures. It sought to find out whether communities in Tanzania understood the characteristics of disabilities and to survey the general attitudes towards disabled people. Although Africa is such a vast continent with diverse cultures, an examination of proverbs in various regions may yield patterns of attitudes similar to those reported in this study. A cursory search points to such Jabo proverbs from Liberia (Herzog, 1936) as "the arm is beautiful, yet it has a knot" and "one trusts his wrist before he speaks contemptuously".

Serpell (1993) uses proverbs from Zambia to point to three themes related to child rearing or education in Chewa society as it is "afforded by non-specialised adults to their young charges and apprentices" (p.70). The themes are (1) elders have a responsibility for the upbringing of children, (2) early experience has profound influence on later behaviour; hence the effectiveness of educational intervention early in life, and (3) instruction is essential for success in

life and it requires an awareness of how learning takes place. Although the proverbs listed in each case do not refer directly to childhood, parenthood or disability, their deeper meanings are immensely relevant to disabled persons, as the analysis of proverbs from Tanzania will show. These and other similar proverbs suggest that community attitudes in Africa can, with minor variations, be generalised. To this end, community attitudes in Tanzania are presented as a case study.

Disability in Tanzanian Proverbs

Proverbs, sayings, riddles, folksongs and tales which carry notions related to disability and disabled people were collected by the author using documentation and interviews. A literature search for the period 1935-1990 was carried out. Interviews were also conducted with tribal elders (N=44), primary school heads (N=10) and teachers (N=45). The data obtained was then analysed thematically by disability.

The thematically arranged proverbs, folksongs and tales were circulated during 1994 to 11 Tanzanian students at the Universities of Bradford, Cardiff and Manchester in the UK to verify their meanings and usage as well as to elicit their contributions to the disability-related folklore. A few additions were made, especially with regard to folksongs and folktales. The content and editorial comments received were incorporated into the analysis.

As the proverbs have been in existence for many years, as noted by the community elders (60 years of age and above) and from published material (Omari, Kezilahabi and Kamera, 1978; 1979), the dominant attitudes in the proverbs have existed for at least 50 years. In order to present a trend and pattern analysis, the data were arranged according to themes. These are (1) disability characteristics, (2) disability in various aspects of community life, (3) attitudes which show persecution (cruelty), and (4) attitudes which show accommodation, equality and human rights.

Disability Characteristics

An examination of 78 proverbial sayings collected through interviews and from published books indicated that personal characteristics of persons with sensory and physical impairments as well as those with severe intellectual impairments were well known.

A. Visual Impairment

1. *Kipofu hamwelekezi kipofu mwingine kwa mwenge*

A blind person does not lead another blind person using a

torch. This proverb is similar to the English one, "If the blind lead the blind, both shall fall into the ditch".

2. *Kummulikia kipofu ni kumaliza mzigo wa nyasi na wala hawezi kuona* To light a fire for a blind person to see, you will burn all the grass from the bush; the person will not see.

The two proverbs define blindness as lack of vision; it would be absurd for a non-sighted person to use a torch.

B. Hearing Impairment

1. *Nduguyo akifa sikio utapata shida kuita* When your relative's ear dies, you will have great problems to call him/her.
2. *Kumwimbia kiziwi ni kumaliza nyimbo bure* To sing to a deaf person is a mere waste of songs.

Here the proverbs refer to inability to hear and difficulty of engaging in communication as well as enjoying audition-dependent activities such as music.

C. Intellectual Disability

1. *Ngongo ni zuzu na Ngomisho ni zuzu* or its short form *Ngongo na Ngomisho* Both Ngongo and Ngomisho are fools! They cannot lead or help each other.
2. *Kichaa huponywa, ujinga hauponywi* Mental illness can be cured; stupidity or foolishness cannot.

An intellectual impairment affects understanding and the community considers this fact to be more serious than mental illness.

D. Physical Disability

1. *Agana na nyonga kabla ya kuruka* Make sure you are physically fit before you take a leap; literal meaning: Your hips should agree before you jump.
2. *Mzee (mgonjwa au mlemavu) anajifahamu mwenyewe* or *Aliye dhai fu yapasa ajifahamu mwenyewe* An elderly, sick or disabled person is the best judge of his/her needs and difficulties; s/he should make these known to those near him/her otherwise it will be difficult for them to offer appropriate help when it is most needed.

One can only use affected parts of the body within limits.

E. Emotional and Behavioural Difficulties

1. *Asiyekomesha tabia mbaya hupatikana na makuu* One who does not stop bad habits lands into big problems.
2. *Asiyesikia la mkuu huvunjika guu* He who does not listen to one's elders breaks his/her legs.

Behaviour difficulties can lead to tragedy.

These proverbs provide evidence of the culture's understanding of both the distinguishing features of given disabilities as well as the limitations associated with them. They also present disability as permanent and make a clear distinction between an intellectual disability and mental illness.

Relative Importance of Specific Parts of the Body.

There is evidence from the proverbs collected that the Tanzanian culture places more value on some parts of the body, or a combination of them, than others. Damage or loss of those parts held dear by the community determines the definition and severity of disability. The following proverbs provide examples of this notion.

1. *Heri kufa macho kuliko kufa moyo* It is better to go blind than to lose heart.
2. *Jicho ni moja, nalo laingia mchanga* Sand has entered the only eye!.
3. *Nduguyo akifa sikio utapata shida kuita* When your relative's ear dies, you will have great problems to call him/her.
4. *Afadhali kuchakaa nguo kuliko kuchakaa akili* It is better to have worn out clothes than to have no brains.
5. *Asiyekiuno naye huvua* A person without a waist, which represents a woman's beauty, undresses when taking a bath in a river, sea or at a well like anyone else.

In addition to the commonly understood disabilities such as blindness, deafness, physical disability and intellectual impairment, Tanzanian culture also includes body shape, lack of attractiveness or ugliness as disabling conditions.

Classification of Proverbs According to Life Concepts

Proverbs permeate all aspects of everyday life. Disability and disabled people feature in all areas. Specifically, the proverbs present disability as a life and social leveller. However, disabled persons feature mainly metaphorically to highlight the community's moral and social duties and responsibilities as well as people's wellbeing. In all, 12 themes were identified.

A. Disability as a Social Leveller

1. *Kabla hujafa usikashifu kilema* Before you come to your deathbed, do not laugh at someone's deformity or disability.
2. *Usimcheke kilema* Do not laugh at a disabled person.

B. Respect for Individual Differences

1. *Kucheka chongo ya mwenzio na hali yako umeificha* Do not laugh at someone else's one-eyedness when you have hidden yours.
2. *Ukienda na mwenye chongo nawe jidai chongo* In the company of a one-eyed person, pretend to be also one-eyed.
3. *Mtu asiyekamilika viungo au akili, ukimtania hudhani unamtukana* When you tease a person with a disability, s/he may think you are insulting him/her.

C. Human Rights

1. *Ukila na kipofu, usimshike mkono* When you eat with a blind person, do not hold his/her hand. The same proverb is sometimes stated as: *Wala na kipofu, jichunge mkono wako* When you eat with a blind person, mind your hand.
2. *Usimdharau kilema hata kama si ndugu yako* Do not look down upon a disabled person even if s/he is not your relative.

D. Parental Responsibility in Bringing Up a Disabled Child

1. *Hata kama ni mjinga ni wako* or *Wako ni wako tu, ajapokuwa mjinga* Although s/he is a fool, s/he remains your child or relative.
2. *Ni bora uwe nacho cha thamani ndogo kuliko kukosa kabisa* It is better to have something of less value than nothing, i.e., a disabled child is better than no child at all.

E. Training for Survival and Independence

1. *Hata kama ni jinga litengenezee upinde* Even if stupid, give him a bow and a quiver of arrows.

F. Ability

1. *Usimwonyeshe kipofu njia* Do not show a blind person the way, i.e., when you teach something to a blind person s/he may develop greater expertise than yourself in that subject.
2. *Katika nchi ya vipofu, chongo ni mfalme* In the country of the blind, the one-eyed man is king.

G. Education, Guidance and Counselling

1. *Sikio la kufa halisikii dawa* A dying ear does not respond to medicine; it cannot be cured, i.e., it refers to someone who does not stop a socially unacceptable behaviour despite repeated advice against it.
2. *Kichaa huponywa, ujinga hauponywi* Mental illness can be cured; stupidity or foolishness cannot, i.e., people should

exert their efforts in learning, otherwise those helping them will be discouraged.

3. *Asiyesikia husafiri mbali sana, maana hata akiambiwa anakokwenda hatasikia* A stubborn person travels very far before s/he realises s/he is off-track, i.e., young people should take heed of advice given to them lest they regret.

H. Collaboration and Participation in Economic and Social Activities

1. *Kipofu hamwelekezi kipofu mwingine kwa mwenge* A blind person does not lead another blind person using a fire or torch; i.e., people are urged to contribute according to their abilities.
2. *Kula na kipofu ni sawa na kula peke yako* To eat with a blind person is like eating alone if a sighted partner takes advantage of his/her disability, but in a collaborative effort partners ought to respect each other.
3. *Asiyekiuno naye huvua* A person without a waistline undresses when taking a bath like anyone else, i.e., even a poor person can contribute something in the community however small.

I. Marriage and Family Responsibilities

1. *Apendaye, chongo huita kengeza* To someone in love, the one-eyed is a squint, i.e., someone in love does not see the shortcomings of the beloved.
2. *Mcheka kilema si mkwe wangu* He who laughs at a disabled person cannot be my in-law.

J. Political and Social Leadership

1. *Katika nchi ya vipofu, chongo ni mfalme* In the country of the blind, the one-eyed man is king.

K. Medium for Teaching Moral Values: Honesty, Integrity, Happiness and Freedom

1. *Kipofu hadanganywi jicho* A blind person cannot be promised a functioning eye, which s/he desperately needs, i.e., we should not make false promises.
2. *Mbona wanidanganya kana kwamba nina chongo?* Why do you deceive me as if I am one-eyed?
3. *Upendo humfanya bubu acheke/afurahi* Love makes a deaf or dumb person happy, i.e., kindness pays.
4. *Afadhali kuchakaa nguo kuliko kuchakaa akili* It is better to have worn out clothes than to have no brains, i.e., individuals

should behave responsibly, should have integrity.

L. Medium for Teaching Aesthetic Values: Beauty, Harmony and Elegance

1. *Asiyekiuno naye huvua* A person without a waistline undresses when taking a bath like anyone else.

In many societies in Africa, one criterion of a woman's beauty is her waistline. However, when taking a bath or a swim in a public place - a river, well or beach - even the woman who is not so well endowed with a waistline takes off her clothes. This proverb is used when a person is able to contribute only something small at such functions and occasions as parties, weddings and funerals.

Attitudes to Disability

The same proverbs identified in these aspects of culture may be interpreted as representing negative (dislike or cruelty) or positive (like, supportive or empowering). Examples were found for each of these aspects.

Persecuting Attitudes (Dread, Dislike and Cruelty):

1. *Sijali hata akiwa na usaha masikioni, si mwanangu* It does not matter to me whether s/he has a running ear or not; s/he is my child.
2. *Afadhali kuchakaa nguo kuliko kuchakaa akili* It is better to have worn out clothes than to have no brains.
3. *Ukioga pamoja na mjinga hutakati* When you take your bath with a fool, you do not get clean or *Ukicheka na jinga, angalia jicho lako* When you play with a fool or stupid person, watch your eye. Take care in selecting your friends.

Accommodating Attitudes:

1. *Usimcheke kilema* Do not laugh at a disabled person. No-one wants to be disabled, but disability can befall someone at any time.
2. *Kucheka chongo ya mwenzio na hali yako umeificha* Do not laugh at someone else's one-eyedness when you have hidden yours. Do not celebrate other people's problems while you have your own shortcomings.
3. *Hata kama ni mjinga ni wako* or *Wako ni wako tu, ajapokuwa mjinga* Although s/he is a fool, s/he remains your child or relative; it is your responsibility to take care of him/her.
4. *Ni bora uwe nacho cha thamani ndogo kuliko kukosa kabisa* It is better to have something of less value than nothing at all; a disabled child is better than no child at all. A parent should not lose hope or slacken in one's effort to bring up a disabled child.

5. *Usimwonyeshe kipofu njia* Do not show a blind person the way; when you teach something to a blind person s/he may develop greater expertise than yourself in that subject.

Reflections on Proverbs and Disability

Proverbs as Raw Material for Understanding Attitudes: Proverbs are common in all cultures; those that use predominantly using the written word and those that are mainly orate (using the spoken word). The main function of a proverb is to generalise a community's experience or "to cope with a situation as it arises, by regarding it in the light of something which has occurred before" (Herzog, 1936). As such, a proverb does not refer to the details of the original situation. Traditionally, in Africa for instance, each proverb was accompanied by a parable which provided a sketch of the original situation. The proverb was, therefore, a summary of the gist of the story, given by one of the actors or spectators (Herzog, 1936). The stories for the proverbs in this chapter, are now in the process of being collected.

Traditionally, proverbs have served three functions: legal, social relations and as an avenue for generalisations (Herzog, 1936). Proverbs were used to classify the facts of a case on the basis of an existing law or some precedents. Thus proverbs provided legal formulae. They were also used to smooth social friction and dissatisfaction among relatives, friends and other community members. The same proverbs could be used to help the individual to adjust oneself to a given adverse situation or "quoted for advice, instruction or as a warning - always to prevent and lessen friction". This social function was, and still is, more effective in Africa than perhaps anywhere else because seniority by age or status is still being highly valued. Advice, instruction and or warning given to others by seniors is evident from the fact that of the 12 life areas covered by the proverbs in this study, the theme "education and counselling" has 15 proverbs, whereas the average number is five for the other themes.

The third function of proverbs is that they act as vehicles of concept generalisation through the use of metaphors. Lakoff and Johnson (1980) conclude that metaphors are:

One of our most important tools for trying to comprehend partially what cannot be comprehended totally: our feelings, aesthetic experiences, moral practices and spiritual awareness. These endeavours of imagination are not devoid of rationality; since they use metaphor, they employ an imaginative rationality.

There is justification, therefore, to study the metaphors in proverbs if we are to understand attitudes towards disability and disabled persons

in society.

Attitudes Reflected in Proverbs: The proverbs collected in this study were those that made direct mention of disability or disabled persons. They were analysed to understand various cultural beliefs, customs and values about disabled persons. Attitudes represented in the proverbs include respect for individual differences, support for active participation in appropriate activities (as training for survival and independence), demand for parents to take full responsibility in the care and upbringing of a disabled child, the value attached to having children (whatever the condition of those children), and disability as source of inspiration for honesty and "good Samaritanism" (helping people in need). These attitudes are clearly positive, providing the basis for mutual understanding between disabled and non-disabled community members and promoting the quality of life within the "consciousness" of the community.

Proverbs also acknowledge community awareness of the difficulty of teaching and counselling persons with disabilities. There are also instances of both disabled and non-disabled persons succumbing to helplessness and, therefore, resignation to supernatural powers. As expected, elements of negative, unfavourable reactions have also been identified, but the overall picture is one of tolerance, respect, care, assistance and integration. A closer look at the proverbs will help in understanding the implications of this study to grassroot workers, and especially to those in community based rehabilitation (CBR) and inclusive education.

Reference to Causes of Disability: Although many references to attitudes towards disability in literature are concerned with causes of disability and their influence on people's behaviour (cf. Walker, 1986; Anang, 1988), only one out of 78 proverbs referred to causes. The proverb, *Kwa matendo haya uliyonitendea, kama hukufa utalemaa* (For what you have done to me, if you do not die you will become disabled), represents the belief in seniority by age and/or status and the consequences for violating it.

Most literature refers to curses from God, gods and ancestors. The religious nature of Africans makes the latter source of curses plausible (Mbiti, 1970; Diop, 1989). However, the fact that proverbs constitute a coping strategy for new situations in the light of past experiences, reference to living elders of the family or clan seems to evoke relevance, immediacy and, therefore, effectiveness.

Characteristics of Disability: The proverbs indicate that most tribal communities in Tanzania have a good knowledge base about the personal characteristics of disabled persons. This is expected in view

of the fact that disability exists in the community and that disabled and non-disabled people come in contact with one another in the home and the community. Disabled persons are both parents and children, members of families. In other words, disability is a characteristic part of any human society (Groce, 1990).

Behavioural difficulties have been the concern of communities in Tanzania as revealed by proverbs. It is possible that this category is not perceived by the society as a disability, but rather as a non-conformist behaviour in a culture where the community transcends the individual (Mbiti, 1970).

Reference to Parts of the Body: The proverbs collected in this study point to the importance attached in traditional and contemporary communities to the rounded development of the human person; physically, emotionally, socially and intellectually. Greater importance is attached to some parts of the body than to others. The parts given prominence are limbs, eyes, ears, the brain and the heart (the heart representing emotions), in that decreasing order of occurrence in proverbs. These may be related to the main activities in the communities and the nature of the environment, which combine to produce a culture which demands agility, alertness and mutual understanding and cooperation. Impairment in any of these parts creates limitations in the ability to cope with environmental and social demands, hence evoking fear, overprotection, pity, compassion and charity (Miles, 1983).

Community Tolerance and Acceptance of Disabled Persons: In many communities in Tanzania disabled people are, as among the Maasai in Kenya and Tanzania, "as far as possible integrated in the normal routine of the homestead and the community" (Talle, 1990). Disability is, therefore, taken as a fact of life. Parents and the community are expected to take care of their disabled children and adults. This explains the reluctance of some parents to send their children to schools and programmes located away from their localities (Kisanji, 1993).

Conclusion

The characteristics of major disabilities are clearly represented in the collection of proverbs from Tanzania. These include visual, hearing, physical, intellectual and behavioural impairments and difficulties. Worth noting is the clear distinction made in the proverbs between mental handicap (commonly referred to as *ujinga*) and mental illness (*wehu or kichaa*). Closely linked to the characteristics are the limitations imposed by each disability.

There are very few instances in which negative or rejective attitudes were identified. Proverbs in Tanzania show that disabilities are feared and are, therefore, used metaphorically to exhort community members to behave in socially acceptable ways. Public attitudes reflect fairness and equal opportunities for all community members including those with disabilities. Through disability related proverbs people are urged to contribute to the community welfare according to their ability while at the same time urging parents to promote the acquisition of necessary skills in their children.

This is indeed the empowerment process which remains a rhetoric at national and international level. Disabled people need to live in a more just society which recognises their needs and acts to reduce or eliminate the societal harsh environments, social and physical barriers which prevent them from participating in the welfare of the state and community. Indeed, one cannot meaningfully speak of development in the community from the autonomous standpoint when disabled people are left out or ignored. This is what Coleridge (1993) refers to as a dehumanising experience. Frontline workers in rehabilitation and integrated education ought to take into account the cultural basis of disability as an entry point in the communities they work.

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