

## LETTER TO EDITOR

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Dear Editor,

### **Access to Education and Rehabilitative Resources for Children with Developmental Disabilities in Botswana**

As Botswana celebrates 50 years of independence, many dark areas are visible due to, arguably, the ever-increasing inequality. Botswana is a country that upholds a philosophy of equal benefits and rights to its diverse citizens and shows no discrimination to resources like education. Therefore, children with developmental disabilities such as Cerebral Palsy and Autism should have equal access and equitable outcomes of education just like their peers without disability. There is a Setswana proverb that says “*bana ba motho ba kgaogana tlhogwana ya ntsi*,” literally meaning that siblings equally share even the head of a fly.

Botswana has changed from being one of the poorest countries in the world to becoming an upper middle income one. The population is estimated at 2 million of which 36% live in rural areas, 42% in urban villages and 22% in towns and cities. Disability was calculated at 2.99% in 2001 and 3.5% in 2011, (Botswana Central Statistics Office – CSO, 2011).

At the time of independence in 1966, there were very few schools in Botswana. The number of conventional schools in the country has now increased; for example, there are more than 800 primary schools, and about 250 Secondary schools, Tertiary Institutions and Vocational Education Institutions (Botswana Federation of Trade Unions’ Policy on Education, 2007). This basically means that in each town and rural village, the number of schools is 4, on average, depending on the size of the town/village (both primary and junior secondary schools). There are also plans to start government owned pre-schools. These schools cater for “the normal” children.

There is no doubt that the government of Botswana appears to be committed to making Botswana a country fit for children. This is demonstrated through the adoption of numerous initiatives including: the ratification of the United Nations Convention on the Rights of the Child (CRC) in 1995; the passing of the Children’s Act No.8 of 2009; the setting up of the National Children’s Council (NCC), the National Children’s Consultative Forum, as well as Village Child Protection Committees and the social protection programmes that target

orphaned and vulnerable children, destitute households, and the elderly. However, all these documents do not specifically address the conditions of children with developmental disabilities who more often than not, in Botswana, end up without mobility and are confined to their home under constant care of a female adult, generally the mother.

About 40 years ago, missionaries began educating learners with disabilities in Botswana. The Dutch Reformed Church started the first school for children who were blind or had severe visual impairments in 1969 in Mochudi, and missionaries from the Lutheran Church opened the first school for children who were deaf or had severe hearing impairments in 1970 in Ramotswa. In 1977 Botswana developed its first policy on education which is commonly known as Education for *Kagisano*. It recommended that each child should have the right to education regardless of his/her disability, race, ethnicity, culture or background, but it was not enforced consistently (Otlhogile, 1998 cited in Mukhopadhyay, 2013). The Second National Commission on Education was established in 1992 to review the education system in Botswana and to address its shortcomings. Following the submission of its report in 1993, the Revised National Policy on Education (RNPE) was formulated and approved by the National Assembly as Government White Paper No. 2 of 1994. The RNPE lists specific provisions for the education and training of all children and young people, including those with disabilities.

The stated RNPE (1994) goals clearly indicate Botswana's acknowledgement of the importance of education for children with disabilities. In recent years, to show its commitment to this course, integrated settings in most of the government schools have been introduced for learners with disabilities. This has also seen to an increase in the training of special education teachers.

### **The Gap: Educational Access for Children with Disabilities**

While each major village in Botswana boasts of at least four primary schools and three secondary schools for mainstream learners, resources are barely available for children with disability. Most of the children with learning disabilities in regular schools tend to be misdiagnosed because teachers attribute test-failure to poor intelligence in most cases. Furthermore, the stipulated guidelines for assessment are far from what actually happens in practice due to lack of resources. There are very few Non-Governmental centres in the country which are specifically meant for children with developmental disabilities such as Cerebral Palsy, Autism and Down syndrome. These partially relevant privately-owned

educational facilities come at a hefty price, given the specialised resources used in such centres. Therefore, only children whose parents are able, access these schools for them to learn basic life skills. In most of the privately-owned centres which provide this rare educational service, apart from the medical practitioners such as occupational, speech and physiotherapists who in most cases work in collaboration to run such centres, caregivers are not even trained to do the job.

These disparities and imbalances in education resource provisions have continued, as noted by Botswana Federation of Trade Unions' policy on Education (2007) and Jonas (2014). The observation is that despite achievements in education access, children with disabilities and other vulnerable groups such as remote area dwellers, orphans and cattle herders are still largely left behind.

Given the circumstances of children with developmental disabilities, it is safe to argue that Botswana has only changed the terms from integration to inclusion in their policy documents, without necessarily considering what inclusion entails, let alone engaging all stakeholders to find out exactly who is not catered for by the system. The same has been observed by Jonas (2014).

### **Lack of Educational and Rehabilitative Resources: Implications for Caregivers**

Basically, being at school has economic benefits for children living with disability and their families because it frees up parents' time to undertake other productive activities. Lack of educational resources and/ or other facilities meant to improve the lives of children with Cerebral Palsy and Autism lead to such children being left at home when their peers with no disability go to school. Another challenge is one of care-giving, which is generally left to females such as the grandmother, mother, sister, aunt or an employed helper for the child with disability. Due to their traditional role, some mothers feel obliged or rather have no choice but to be the caregivers for their children.

In conclusion, despite the country's remarkable achievement to ensure Basic Education for all and improvement in the lives of the general population, children with severe developmental disabilities are still left far behind. The exclusion of these children in the development and education agenda gives them a poor start in life and leads to their being perpetually dependent on their caregivers (especially mothers). Without systematic inclusion of persons with developmental disabilities in the country's development plans, public education on disabilities and robust measures aimed at providing for their education, the ideal of even

achieving Sustainable Development Goals will not be realised while a portion of the country's population is constantly left out.

## REFERENCES

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