International orthodoxy versus national realities: inclusive schooling and the education of children with disabilities in Lesotho

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Specialists with international influence have been advocating in an uncompromising manner the policy of including all children with special educational needs (SEN) in regular schools and classrooms. The endorsement of this policy by an internationally agreed convention implies that it is universally applicable. This paper, however, questions the relevance of this orthodoxy to the educational systems of low-income countries and argues that the latter cannot easily progress from a situation of virtually no educational provision for disabilities straight to one of fully integrated provision. The paper examines an inclusion policy in Lesotho, a low-income country, which began with ambitious goals but largely failed to meet the needs of children with disabilities. It then outlines an alternative strategy for that context. A phase of development in which there is considerable use of specialised facilities and selected schools is seen as necessary if more children with disabilities are to have meaningful opportunities for learning.

Introduction

The present generation of educators will be remembered as one which internationalised educational goals and tried to do the same for educational rights. The best known examples of internationalised educational goals are the second and third Millennium Development Goals (MDGs) (United Nations 2000) and the six Education for All (EFA) goals stated in the Dakar Framework for Action (UNESCO 2000). Many of these use 2015 or 2020 as the target date, irrespective of the country concerned. Lewin (2007, 578) has pointed out that such ‘convergent approaches’ to the problem of access to education, however convenient for mobilising development assistance, tend to overlook the diversity of national situations. This problem is exacerbated by tensions between the MDGs, only two of which are overtly educational, and the EFA goals (Urwick 2007). The latter at least have the merit of giving attention to a range of educational sub-sectors. But in low-income countries the preoccupation of some national governments and development agencies with the second MDG – universal primary education – may entail neglect of EFA goals for other aspects of educational systems. As we shall point out, this tendency to treat only the MDGs as the essential agenda has adversely affected provision for special educational needs (SEN) in Lesotho.

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Policies for SEN, however, like policies on general access to education, have their own problems of excessively ‘globalised’ goals and strategies. In the next section we shall identify areas in which international conventions and policy discourse may have given misleading signals for low-income countries, especially in relation to students with disabilities. We shall elaborate this problem further with reference to developments in Lesotho. Our findings illustrate the dangers that may arise ‘when universal theories turn into international orthodoxies’ (McGrath 2007, 483).

Inclusive schooling: the orthodox view and its problems

Owing to widespread advocacy and a series of international conventions, the orthodox demand for ‘inclusive education’ is by now fairly well known. The inclusive agenda typically goes beyond a narrow concern with SEN to include the elimination of barriers such as those based on ethnicity and religion (Dei 2005). But our focus in this paper is on disabilities related to impairments. Starting with the premises that education is a fundamental right and that many learners have SEN of various kinds, the inclusive tradition holds that, firstly, national educational systems should provide for all kinds of SEN and, secondly, that regular schools should be adapted or reformed to accommodate and support all students with all kinds of SEN. Our position is that we have no disagreement with the first of these goals, but that we cannot fully endorse the second goal without some reference to the educational effectiveness of inclusion for particular learners in very real (as opposed to ideal) educational contexts. We also have concerns about the doctrinaire manner in which many advocates pursue the second goal.

The orthodox view contrasts the establishment of a system of ‘inclusive’ regular schools, supporting a wide range of SEN, with the ‘restrictive’, and supposedly outmoded, provision of special schools for ‘traditional’ categories of disability – typically hearing impairment, visual impairment, mental retardation and physical disability (see for example Johnsson and Wiman 2001, 8–10). In some versions of the contrast, policies of ‘mainstreaming’ or ‘integration’, sometimes involving special classes, represent an intermediate stage of development (Antia, Stinson, and Gaustad 2002, 214–215). The system of inclusive schools is said to be based on a ‘social model’, in which disability is assumed to be an artefact of social discrimination and barriers, while special schools and classes are associated with a ‘medical model’, in which disability is regarded as a problem of the individual learner requiring special intervention.

In this Manichaean scenario, the social model has secured all of the high moral ground and the medical model is widely described as being characterised by elements that few would find desirable. Perceived as explaining learning difficulties of whatever kind as primarily the consequence of within-child deficits, the latter model is said to assume that the individual’s personal inadequacies are to ‘blame’ and so to undermine the responsibility of society, and of educators in particular, to ensure appropriate educational provision.

‘Progress’ is thought to require change towards the new paradigm of inclusive schooling and the term ‘special education’ itself is called into question as being too suggestive of the vilified medical model. Some national governments were reported to be distancing themselves from the medical model by referring to ‘special educational needs’ rather than impairments or disabilities (OECD 1995): but Barton and Armstrong (2001), as strict adherents of inclusive schooling, are dismissive of such a rhetorical device:
This analysis still includes an adherence to old assumptions that place difficulties ‘within the child’ through a discourse of ‘having SEN’ and fails to recognize that disability is not an individual pathology but a form of oppression and exclusion produced by and within particular social and political conditions and relationships (696).

Some advocates of inclusive schooling also associate it with policies of community-based rehabilitation (CBR) for people with disabilities (e.g. Miles 2000; Eleweke and Rodda 2002). The CBR dimension emphasises the supporting roles to be played by the student’s family, the local community and (in some versions) non-governmental organisations (NGOs). While the case for inclusive schooling is based mainly on arguments about rights, dignity and equality of opportunity, some advocates also go so far as to claim, with reference to developing countries, that it is more cost-effective, and more beneficial for the reduction of poverty, than provision for SEN through special schools or classes (e.g. Johnsson and Wiman 2001).

There are a number of flaws in the orthodox view which require attention and make it especially questionable when applied to the low-income countries. The most important flaw is the assumption that fully inclusive schooling is universally the most effective strategy for children with SEN. A related problem, as is noted above, is the overly dismissive attitude to the ‘medical model’ and its use as a rhetorical slur on specialised services. Further problems are the supposed economic advantages of inclusive schooling and the heavy reliance placed on local communities and NGOs to support the education of disabled students. Consideration of these issues will inform our analysis of the situation observed in Lesotho.

Lindsay (2003) argues very logically that the appropriate strategy for educating children with disabilities or other SEN, in any particular context, should depend on considerations of educational effectiveness as well as the rights of children. As he also points out, the Salamanca Statement (UNESCO 1994) – which is virtually the Bible of the inclusion movement – contains assertions that ‘regular schools’ with an ‘inclusive orientation’ must be used and are the most effective strategy for SEN. Lindsay goes on to show that research findings (in western contexts) do not consistently support the Salamanca assertions. The implication is that the assertions are really articles of faith only. Wilson (2000) derides the ideological component of many studies that purport to demonstrate the success of inclusion, adding that these are often established in such a way that a perception of success is a highly likely outcome. The highly prescriptive character of the Salamanca Statement is also recognised by Artiles and Dyson (2005, 39–40), but many of the advocates of inclusive schooling, who are guided by the Statement, are probably not aware of its empirical limitations.

One general problem with the orthodox view is that, over-reacting to earlier approaches to special education in the industrialised countries, it plays down the importance of individual differences among students with SEN. Peters (2007), for example, an outspoken advocate of inclusive schooling, is critical of the statement in the Convention on the Rights of the Child (United Nations 1989) that interventions to support a disabled child should be ‘appropriate to the child’s condition’ (Article 23). She complains that ‘this language is transparent in its use of a medical model, with its focus on conditions that individuals have’ (103). We, unlike Peters, find this to have been a reasonable principle. The point is that both individual and social factors in disability must be considered. Advocates with an evangelical desire to reject any suggestion of individual impairment tend to lose sight of the need for the highly specialised skills and knowledge that are essential if inclusive practices are to be sustained over time. While differences of context must be understood, it is irresponsible to disregard the
systems of identification, assessment and referral that have been carefully developed in the countries of the north, on the grounds that these belong to a ‘medical model’ or to assume that these procedures have no place in the south. Such procedures are actually all the more vital in the south because of the more limited resources available for interventions, whether through inclusive or through special schooling.

The last point leads us to another major problem for the orthodox view. How far can inclusive schooling, as envisaged in international conventions and the academic literature, succeed in the conditions of the low-income countries? Eleweke and Rodda (2002) review the challenges from the point of view of advocates of inclusion. They point to the gross inadequacies of facilities and learning materials for SEN, insufficient training both of teachers and of support personnel for SEN, inadequate public funding structures and lack of enabling legislation. All these problems, they admit, are linked to policy environments in which provision for SEN is regarded as an ‘optional extra’ rather than an element central to the achievement of EFA goals. But SEN specialists would do well to consider, in addition, some of the research on the classroom conditions of ‘regular schools’ in the low-income countries, which shows pedagogy and resource allocations that are anything but inclusive. Examples for African countries are the studies by Omokhodion (1989), Fuller (1991), Sebatane, Chabane and Lefoka (1992) and Ackers and Hardman (2001). Building on the previous research, Moloi, Morobe and Urwick (2008) identify pedagogy in Lesotho that is restrictive towards students’ learning and particularly unhelpful for ‘slow learners’.

The pedagogic and administrative environments of regular schools are of great importance for the prospects of including students with SEN successfully. In discussing the inclusion of hearing impaired students in American schools, for example, Antia, Stinson and Gaustad (2002) emphasise that mere access to communication in a regular classroom (a reference to sign language, hearing aids, etc.) is not sufficient for either academic or social goals to be achieved. Constant efforts must be made to establish and maintain the ‘membership’ of the students with SEN in the class and the school. Relations between special and general teachers, between disabled and non-disabled students and between parents and the school must all be managed appropriately. The authors conclude with the remark that a quality inclusion programme ‘is not for the faint-hearted’ (226). Pedagogy and administration are in turn constrained by the educational policy environment. With reference to England, Dyson (2005) reflects on the manner in which the focus of central government policy, since 1997, on standards and accountability has reduced the commitment of schools to goals of inclusion. In low-income countries, where national policy spreads resources thinly for the sake of targets of expansion, we may expect the constraints to be correspondingly greater.

In view of all these difficulties for a policy of inclusive schooling, it is disappointing that Eleweke and Rodda (2002), for example, have no new strategy to advocate for developing countries. They simply call for a sweeping reform of mainstream education, to make it more inclusive in its philosophy and practices, and for a more intensive use of CBR. One wonders what is to happen to children with SEN during the long period required for such changes to happen, if they ever do. Similarly, Engelbrecht (2008), another strong advocate of inclusion, reflects upon the slow pace of change in South Africa despite the existence of state of the art policy documents. Some critiques cited by Engelbrecht argue that the policies are idealistic, lacking in detail, and insufficiently grounded in the realities of life in South Africa (Christie 1999; Jansen 2001; Loebenstein 2005). In spite of such considerations, her primary response is simply to call for attitudinal change.
Noting the challenge posed by mass poverty to the establishment of inclusive education in South Africa, Lomofsky and Lazarus (2001) emphasise the importance of building a strong and efficient education support service. Here there is an echo of Engelbrecht’s earlier position, in which it is argued that special school teachers may provide a key support role (Hall and Engelbrecht 1999). A few years later, however, Engelbrecht noted that multi-disciplinary support services in the country were either ineffective or absent (Engelbrecht et al. 2003). Her call for greater teacher training in learner diversity underplays the difficulties that even the most skilled teacher would encounter in the poorer parts of Africa, where there may be 80 students in the class, no electricity and minimal learning materials.

Significantly, very little is said in the recent literature on low-income countries about the comparative performance of special schools, whether they are providing a supportive environment for their students and how far they are contributing to mainstreaming. A minor exception is a survey of special school students in Ghana (Prosper and Kofi 2005), which finds that most of them do not welcome the prospect of joining a regular school. One of the factors indicated is that the students have more confidence in the special school teachers than in those of the regular schools.

Advocates of inclusive schooling have made other generalisations, again without sufficient evidence, about its financial implications. The ‘articles of faith’ in the Salamanca Statement contain an assertion that inclusive schools will ultimately improve ‘the cost-effectiveness of the entire educational system’ (UNESCO 1994, ix) More specifically, Johnsson and Wiman (2001) insist that inclusive regular schools are more cost-effective than special schools in providing for SEN: but the only evidence they mention is OECD data showing integrated provision to be less expensive (3). This generalisation about cost-effectiveness is not acceptable, especially with reference to low-income countries. It could apply to some mild types of SEN, but overlooks the whole question of economy of scale where special personnel and equipment are required. A low-income country cannot place a sign language interpreter or a Braille machine in every primary school. The need to concentrate resources is an argument, not only for using some special schools, but also for limiting inclusion, for some types of SEN, to selected regular schools. This even applies to a high-income country to some extent (see Lindsay 2003, 10). It is futile to point to the low cost of integrated provision if its ‘effectiveness’ is near to zero, as may be the case if a disabled child attends a regular school with no special support.

A related problem applies to the reliance of inclusion advocates on local communities and NGOs to provide essential services for students with SEN. Of course their support is desirable, for social as well as financial reasons, as the CBR literature emphasises. But, if they are relied upon to provide assistive devices or special accommodation near the school, for example, disappointment may occur. In relation to South Africa, Lomofsky and Lazarus (2001) sound a note of realism in pointing out the difficulty of achieving effective support for SEN learners within an integrated and community-based framework. Similarly, in Lesotho, the necessary social capital and fund-raising capacity may not exist at the local level. The public authorities should accept responsibility for these necessary interventions.

The attempt to establish inclusive schooling in Lesotho, 1992–2007

Lesotho is an example of a low-income country which, before the 1990s, had very little educational provision of any kind for children with disabilities or other SEN. For
a national population of nearly two million, there were just four special schools and hardly any integrated provision for SEN. The attempt to establish inclusive schooling in this country is significant both for its ambitious and uncompromising goals and for its generally poor achievements except in the early stages. On the introduction of the inclusive education programme, our main written sources are a brief official policy statement (Kingdom of Lesotho, Ministry of Education 1989), an account by the leaders of the initiative (Khatleli et al., 1995) and an external evaluation of the pilot phase (Mittler and Platt 1996). In addition, we held focused interviews with two of the leaders of the initiative and with a former Principal Secretary who was involved. On the outcomes of the initiative 14 years later, our main source is a consultancy report, cowritten by the first author of this paper, presented by the Lesotho College of Education (2007).

The brief policy statement on special education, published by the Ministry of Education in 1989, set out seven goals for the education of disabled children, as follows. Their integration into the regular school system was to be encouraged. Resource centres were to be established in order to assess the needs of such children and to prepare them for integration. All were to receive a complete primary education and some vocational training. A team of specialist itinerant teachers was to assist classroom teachers in their work with SEN. The Ministry would uphold the rights of disabled persons with regard to access to services generally. Initial teacher training was to include an introduction to SEN. While these goals seem reasonable as far as they go, there is no mention of early childhood, secondary or tertiary education, no goal for the gifted and talented and no goal of specialised training. The relationship between resource centres and special schools is not explained.

The policy statement was followed by the establishment of the Special Education Unit within the Ministry of Education, in 1991. The next major steps were a feasibility study for the inclusion programme (Mariga and Phachaka 1993) and then a pilot inclusion programme in 10 primary schools. The external evaluators of the pilot programme two years later (Mittler and Platt 1996) recommended that it should be extended to all schools in Lesotho. Thereafter the Special Education Unit tried to extend it, in stages, to other schools.

The new policy was part of the international movement for inclusive schooling that was popular at the time. It reflected influences from a Canadian consultant (Csapo 1987), whose position clearly reflected the wider orthodoxy, and from Save the Children UK and UNICEF, which provided some financial and technical support. Within Lesotho, awareness of SEN had been increased by activities of the ‘Decade of People with Disabilities’ (the 1980s) and by efforts of the Lesotho National Federation of the Disabled (LNFOD). The formation of the Special Education Unit was part of a wider restructuring of the Ministry of Education, for which preparatory consultations had been held during the same decade. The pace of change had been slow: but in 1991–1993 there happened to be a Principal Secretary of the Ministry who showed more than the usual interest in SEN.

The pilot programme of inclusive schooling was a bold initiative, marked by a desire to change the attitudes of teachers, parents and the special school staff. Important features of the plan were the development of new curriculum materials, in-service training of teachers in the pilot schools and parental training and involvement. Mittler and Platt, in their evaluation of the pilot programme, found some evidence of teaching methods that were appropriate for the inclusion of students with SEN. But their findings on parental involvement were less conclusive and they noted that a
system for provision of assistive devices to children who needed them was lacking except in a few areas.

The initiative, as presented by its leaders, also displayed some very rigid and restrictive ideas. Reflecting the dominant western perspective, they give a doctrinaire definition of disability as ‘caused by barriers … which society builds to exclude children and adults with impairments’ (Khatleli et al. 1995, 7). More surprisingly they state that ‘there will be no separate cadre of teachers, no separate training courses, certificates or salaries, and no special units’ (3). In the light of this it is not clear how the cadre of itinerant teachers, or the assessment teams, were to be formed. Our interviews with two of the leaders reveal that the failure of the Ministry to allocate funds for specialised training was an underlying factor, as well as the uncritical acceptance by some Basotho of naïve international views about how inclusion could be achieved.

Another problem in the leaders’ presentation was the lack of a clear policy for the special schools, beyond an assurance that the existing ones would not be closed. The authors state that ‘existing special schools (only four) will be used to support integration in mainstream primary schools’ (Khatleli et al. 1995, 3). But they do not explain what other purposes special schools might serve. The special school staff are said to have had negative attitudes to mainstreaming and to have needed persuasion to support the integration policy. But it is not openly stated that three of the pilot primary schools were located near special schools, which in practice have prepared students for mainstreaming and have provided them with some ongoing support when mainstreamed. These are still today the schools in which inclusion is most successful. Two other pilot schools were located near homes for physically disabled children, in spite of the doctrine that students should be based in their home communities. Mittler and Platt (1996) also failed to report on these features of the pilot schools.

A further related problem was the focus of the policy on the milder forms of SEN. The feasibility study used survey findings to report that 17% of children in primary schools had some kind of SEN (Mariga and Phachaka 1993). These included 12% who were reported to have ‘learning disabilities’. To judge from the experience of a later survey (Lesotho College of Education 2007), teachers use this category very loosely and may well have over-reported it. The demand for an approach suited to mild SEN, i.e. inclusive schooling, was thus emphasised. But no goals were stated for children with severe or moderate disabilities, who, in the context, might depend on the special schools for all or part of their formal education. Mittler and Platt even recommended that the special schools should eventually be closed, without explaining how provision would then be made for the more severely disabled.

In the period which followed the pilot phase (the later 1990s), the Special Education Unit was unable to replicate the results that had been achieved initially. Higher officials forced ever larger numbers of primary schools into the inclusion list without allocating the necessary funds for additional staff, transport and learning materials. The assistance of UNICEF and Save the Children UK was therefore all the more vital for the survival of the initiative, but increasingly hampered by the Ministry’s own protocol.

As the new century began two major developments, beyond the control of the Special Education Unit, created an environment even less favourable for the success of the inclusive education policy. These were, firstly, the programme of Free Primary Education (FPE), launched in 2000 and, secondly, a rapid increase in the number of children in school who had lost one or both parents as a result of the AIDS pandemic. This combination of developments has occurred in a number of other low-income
countries, especially in Africa. While in principle the two developments have made an inclusive education all the more necessary, in practice they have reduced the prospects of effective interventions for SEN. A few comments will be made on each.

FPE, although introduced one grade at a time, entailed a rapid increase in enrolments and was sustained only by the increased use of unqualified teachers, large classes and inadequate physical facilities and supervisory support. From 2004 to 2007 more than one-third of the primary school teachers were unqualified. In a national survey of such teachers conducted in 2005, 30% reported that they had not been seen by an inspector or resource teacher over the past year, one-quarter reported insufficient furniture and a majority reported insufficient textbooks for their students (Lesotho College of Education 2006). Even though more children with disabilities have been enrolled in regular schools as a result of FPE, this is largely a matter of ‘casual integration’ and any attempt to reform pedagogy for their benefit faces an uphill struggle. This illustrates the point we made in the introduction: the authorities have been preoccupied with the MDG of universal primary education and have given a lower priority to other EFA goals. Their financial allocations for SEN have been particularly poor. In the context, electoral calculations have influenced this situation. The ruling party has seen FPE as a major source of support both from the electorate and from major international donors. Provision for SEN, however, is not seen as a vote-winner; neither has it been high on the agendas of donors. The prospects for SEN became even worse with the departure of Save the Children UK from Lesotho in 2004.

Over the same period since 2000, orphans and other bereaved children have become the largest category of students likely to have special needs, being vulnerable to emotional and behavioural problems. Another significant group is adolescents in secondary schools who have become HIV-positive. As Beyers and Hay (2007) show in the context of neighbouring South Africa, the psychological and emotional problems associated with the pandemic are in themselves enough to defeat an inclusive approach to education. In the poorer context of Lesotho, however, the Ministry of Education and Training (MOET) has been preoccupied with the basic problems of feeding orphans and children who have lost one parent and enabling them to continue their education. In 2007 there were reported to be 174,000 children in primary and secondary schools who had lost one or both parents. Some receive additional meals through the school feeding programme (which provides a free lunch for nearly all children in primary school). Bursaries were being provided, in 2007, for 17,000 bereaved children in secondary education and were reported to be needed by another 16,000. These problems have absorbed energy and resources from which students with more traditional disabilities could otherwise have benefited. Some hearing impaired children of primary school age, for example, attending a special school, were not (in 2007) receiving either bursaries or free school lunches.

These developments, as well as the shortcomings of the inclusive education policy, account for the situation observed in 2007 with regard to educational provision for children with disabilities and other SEN (Lesotho College of Education 2007). Relevant findings will be mentioned, firstly, on inclusion in the regular schools and, secondly, on the predicament of the special schools.

For the primary level in 2007, the Special Education Unit provided a list of 156 schools (11.5% of the registered primary schools in the country) whose teachers had supposedly received some training in SEN and which were therefore expected to lead the way in the inclusion programme. These schools were supported by just six itinerant teachers for special education, deployed at the district level, and by four inspectors
Comparative Education

at national level. A research team of the Lesotho College of Education (LCE) carried out a survey of the teachers in these designated schools, using a national, EPSEM sample of 218 (LCE 2007, 4). In addition some lesson observations and student case studies were carried out in the same category of schools. Evidence was obtained on training received and on the strengths and weaknesses of the inclusion programme.

With regard to training, the most important finding was that 52.6% of the sample had received no training of any kind for SEN. While 16.3% had received both a pre-service orientation and some in-service training for SEN, another 31.2% had received either one or the other. None had received any full-time, specialised training for SEN. This situation, together with the small number of itinerant teachers, immediately casts doubt on the viability of the inclusion programme. It became obvious that the Unit was maintaining a long list of schools that would look impressive but far exceeded its capacity for support, perhaps in the hope of securing a larger budgetary allocation.

The trend of opinion among the teachers, as shown by the survey, was that students with SEN had more difficulty in learning and repeated grades more often than other students. They confirmed that specific obstacles to learning, for the SEN students, included lack of special materials, lack of special teacher training, inability to cope with the regular curriculum and constraints on the teacher’s time. The lesson observations and case studies suggested that additional obstacles were the prevailing style of pedagogy, in which little planning and little group work were involved; large classes and lack of team teaching; lack of individual educational plans for the students, and lack of basic assistive devices such as glasses and hearing aids. Despite the recommendations made in 1996, there was still no system for the professional assessment of disabilities and the provision of assistive devices. Any assumption that this could be left to CBR initiatives or to the Ministry of Health and Social Welfare had proved unrealistic.

With regard to the special schools, they may be given some credit for having survived through the intervening times of stress, but were still only four, all operating mainly at the primary level. A survey of their teachers conducted by LCE (2007, 12–16) shows that their staffing had been neglected. Only 5 out of 15 teachers responding to the survey had received full-time training for SEN, while three had received no training of any kind for SEN. Projections from the 2001 demographic survey suggest that the children who were enrolled in special schools accounted for less than 5% of children with severe or moderate disabilities in 2007 (LCE 2007, 7–10). Although some effort was being made to use these schools as resource centres, the need to increase their number had received no serious consideration. Furthermore, in the absence of appropriate assistive devices and of the expertise to service these, even in these special schools, some children with residual hearing or vision are inappropriately being taught Braille or sign language.

Although the magnitude of the problems caused by the FPE programme and by the AIDS pandemic was not entirely predictable in the early 1990s, it is necessary to call into question some major aspects of the policy then adopted. Was it wise to seek to reform the pedagogy of an entire educational system, on the basis of a moderately successful trial in 10 primary schools, in a situation where (after the Jomtien Declaration) rapid expansion of enrolment was likely? How could the necessary leadership cadres be formed for SEN without some element of specialised training? Was it responsible to treat the special schools as having no valid mission other than to provide support for the inclusion programme and as having no significant need for expansion or additional resources? For children with serious hearing, visual or mental impairments in
Lesotho, these few special schools continue to offer the only hope of educational advancement, whether or not they eventually transfer to a mainstream setting.

**Conclusion: towards an improved strategy**

Studies of educational practice which use a comparative and international perspective can provide insights which are relevant beyond the specific contexts under consideration. Many of the barriers to full inclusion of children with disabilities encountered in Lesotho – attitudinal, economic, social and systemic – are present not only in low-income countries but also, to some degree, in those very societies where the inclusion orthodoxy was first formulated. It is no coincidence that there has recently been a greater willingness in England to challenge the principle of wholesale inclusion. Although the key principles and values associated with inclusion are widely accepted, there is growing recognition that political and economic realities often militate against its effective operation for all. In a retrospective pamphlet, Warnock, whose report (DES 1978) had paved the way for SEN legislation in England, argued that developments in the world of SEN over the past 25 years had resulted in a ‘disastrous legacy’ (Warnock 2005). While accepting that inclusion was a grand aim for a society, she argued that an overly zealous application of the principle had resulted in some children becoming ‘casualties’ of a system that ignored their individual needs.

The Lesotho experience highlights the folly that is too often present in attempts to import western theorising and orthodoxy into the educational practices of low-income nations (Grigorenko 2007). The severe constraints under which Lesotho operates are such that the grand inclusion programme of the 1990s, fuelled by the rhetoric of human rights, had little chance of taking hold and was very unlikely to serve the needs of those with complex disabilities. As is true of the inclusion movement generally, ideology held greater sway than evidence (Kavale and Mostert 2003). Lindsay (2003, 2007) argues for a more scientific approach in which a broadly inclusive system may contain a variety of forms of mainstream and special schooling, the operation and outcome of which are rigorously researched.

Where does this now leave SEN policy and practice in Lesotho? In keeping with Lindsay’s position, we would argue that, along with a general commitment to inclusion, a more pragmatic and strategic approach to the development of policy and practice is necessary. We would argue that specialist expertise, to cater for the educational needs of those with severe sensory, physical and intellectual disabilities, should be located in regional centres which provide both on-site basic education and a limited outreach service to schools in the area. The development of successful school-based initiatives might then serve to demonstrate what is possible, given resources, expertise and commitment. As a step towards providing the latter, specialised teacher training for major types of impairment is currently being designed at the Lesotho College of Education and an advanced diploma course commenced in 2009.

These developments could take place within a multi-track strategy for the long-term development of special and inclusive education. In this regard the South African White Paper (Republic of South Africa, Department of Education 2001) is useful for reference, recognising as it does the importance of building on existing resources. The first track would be the regional centres, which would function both as special schools and as resource centres. These would be developed from the existing special schools, with a more balanced geographical distribution of facilities and the addition of some
provision for the secondary level. For the benefit of school-leavers, the skills training centres designed for people with disabilities (at present only two in Lesotho) should also be increased and strengthened.

The second track would consist of a small number of selected regular schools, both primary and secondary, with additional staff, facilities and learning resources to enable them to serve a wide range of SEN. These would be similar in concept to the ‘full-service’ schools of South Africa. Some of the schools in this second track would be adjacent to the specialist regional centres, would receive SEN students transferred from them after suitable preparation and would collaborate closely with the centres in order to support such students. The goal would be integration, but, where necessary for effective learning, they would make limited use of special classes for particular types of SEN. The number of such schools would be determined by the availability of supervisory support as well as other resources.

A third track would be regular schools adjacent to special homes for children: those for the physically disabled and those for orphans and vulnerable children. These schools would have some additional resources for the particular problems concerned, but would otherwise have a normal curriculum. They would serve the local community as well as the special home.

The fourth ‘track’ would be all other regular schools. In the short term, these would have a very limited capacity to provide for SEN and some costs of concentrating disabled students in second and third-track schools would have to be borne. In the longer term, with major improvements in teacher education, learning materials and pedagogy, the fourth track would be able to absorb a larger proportion of students with SEN. But whether the necessary reform occurs, in a low-income country such as Lesotho, will depend to some extent on the wider national and international responses to poverty, disease and pressures on the environment. Given the realities of Lesotho, it is clear that the education of children with more general learning difficulties will continue to prove problematic. Given that their pedagogic needs are not significantly different to those without SEN (Davis and Florian 2004; Lewis and Norwich 2007), there appears to be a strong case for placement in mainstream schools. Yet the needs of those with learning difficulties for structured and gradual progression in the delivery of their schooling are not well served by an educational tradition that typically involves whole-class teaching to very large numbers of children. It would appear that future practice for such children will require greater use of small group work, supported by peer and ancillary tuition.

The strategy we outline above sits uneasily with the dominant theoretical perspective. It points to the need for a framework of theory and policy that is less dogmatic, more attentive to stages of national development and responsive to the needs and possibilities of individual learners within national contexts (Crossley and Watson 2003). The complexities and constraints encountered by low-income countries are such that an uncompromising policy of inclusive schooling is highly unlikely to succeed. Following such a policy initiative in Lesotho, virtually a whole generation of Basotho children with special educational needs has grown up without those needs being met in most cases. Ironically, the desire to establish an inclusive education system on the basis of ‘human rights’ has contributed to a failure to fulfil these children’s own individual right to even a minimally acceptable level of education. Surely, access to a sound education should be seen as the primary human right, as Farrell (2001) and Wilson (2000) have argued? Greater realism is essential in a society that continues to be devastated by economic and health concerns. This is surely not a time
for dogmatic assertions: international orthodoxies should be put on hold while we roll up our sleeves and get to work.

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Notes
1. An earlier version of this paper was presented at the Annual Conference of the British Association of International and Comparative Education, held at the University of Glasgow, September 4–6, 2008.
2. Statistics reported by the MOET at its Joint Review Meeting of September 2007.
3. EPSEM stands for ‘equal probability of selection method’ (Kish 1995).

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