

**THE ATTITUDES OF PARENTS
TOWARDS THEIR BLIND CHILDREN:
A CASE STUDY IN BAHIR DAR TOWN**

BY

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Study in Bahir Dar Town**

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DECLARATION

I, the undersigned, declare that this thesis is my original work, has not been presented for a degree in any other university and that all sources of material used for the thesis have been duly acknowledged.

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ABSTRACT

The main purpose of this study was to find out the attitudes of parents towards their blind children. The method used was that of qualitative research methodology. The data were mainly collected using an in depth interview. Seven parents were the main informants of the study.

The results of the study indicated that parents expressed different reactions as a result of having blind children. These were shock, denial, anger and sadness. The stigma held by the society about the causes of blindness influenced parents to feel quality and disgraced. This may be one of the causes for parents to develop negative attitude towards their blind children.

The beliefs held by parents about the causes of their children's blindness varies from real cause to sin, evil eye, curse, misdeed in previous life by parents and misfortune. The types of treatment sought by parents to get cure for their children varies from modern medical center to traditional healer, witchcraft, prayer, and holy water. Some parents believed that their blind children have less learning potential, unable to accomplish household chores, and unable to play like sighted. Those parents who are in better educational level have positive perception about their blind children and play positive role in the overall personality development of their children.

Table of Contents

Contents	Page
Acknowledgement -----	I
Abstract -----	I
List of Tables -----	III
Acronyms -----	IV

Chapter One

1. Introduction -----	1
1.1 Theoretical background of the study -----	1
1.2 Statement of the Problem -----	3
1.3 Objectives of the Study -----	5
1.4 Significance of the Study -----	5
1.5 Operational definitions of terms -----	5
1.6 Limitation of the Study -----	6

Chapter Two

2. Review of related literature -----	7
2.1 The concept of attitude -----	7
2.2 Factors affecting attitude towards persons with disabilities -----	8
2.2.1 Culture and beliefs -----	8
2.2.2 Religion -----	9
2.2.3 Metaphoric expression -----	10
2.3 The attitude of the society towards blindness -----	11
2.4 The attitude of parents towards their blind children -----	11
2.5 The impact of blind child on the family relationship -----	15
2.5.1 Influence on the marriage of the parent -----	16
2.5.2 Influence on sibling -----	17
2.5.3 Influence on the extended family -----	18

2.6 The support or service required by blind parents to accomplish their parental role -----	19
2.7 The impact of parental involvement on the educational and social skill development of blind children -----	22

Chapter Three

3. Research Methodology -----	26
3.1 Source of data -----	26
3.2 Instruments -----	27
3.3 Procedures of the study -----	27
3.4 Data analysis -----	27

Chapter Four

4. Analysis and Discussion of the study -----	28
4.1 Background information -----	28
4.2 The type of support parents receive from different bodies -----	30
4.3 The reaction of parents to their child’s blindness at the beginning of the problem 32	
4.4 The impact of blind children on parents’ marital bond and relationship with others -----	38
4.5 Parents belief about the causes of their Children blindness and the type of treatment sought -----	43
4.6 Parents perception about the learning Capabilities of their blind children -----	46
4.7 Parental effort in the educational progress of their blind children -----	51
4.8 Parental belief in involving their blind children in different home activities -----	54
4.9 The role of parents in developing the social interaction of their blind children 59	
4.9.1 The participation of blind children in different social matters and their parents reaction -----	62

4.10 The ability of blind children to move independently and their parents role -----	66
4.10.1 The ability to move from school to home -----	67
4.10.2 The ability to move independently around the village and other places in the town -----	67

Chapter Five

5. Summary, Conclusion and Recommendation

5.1 Summary -----	69
5.2 Conclusion -----	71
5.3 Recommendation -----	73

References

Appendices

List of Tables

Table 1 – The extent of visually impaired in Ethiopia done by different agencies at different year	2
Table 2 – Demographic information of the family of blind children	28
Table 3 – Demographic information of blind children	30
Table 4 – Onset of the impairment, age of start of school present age, and present grade level of blind children	45
Table 5 – A summary of spare time activities of blind adolescents and their participation in different social matter	64

ACRONYMS

CSO – Central Statistics office

NCC – National Children’s Commission

MOA – Ministry of Agriculture

AAD – Rehabilitation Agency for the disabled

UNESCO – United Nations Educational, Scientific and Cultural organization

Chapter One

1. Introduction

1.1 Theoretical background of the study

According to different studies, there are a large number of persons with disabilities in Ethiopia. However, the exact number of persons with disabilities is not known, although some estimates exist. It is very difficult to get exact and reliable information because of two major reasons (Savolainen, 1990).

1. Definitions of disability are not exact, but vary among different studies.
2. Getting accurate information on number of persons with disabilities is difficult in a country as large as Ethiopia. Even the census has been carried out with ten-years interval, included data collection on disabilities based on a sample of the whole population. More over, the data collected from households by surveys that do not have any or very little training on disabilities.

The base line survey conducted by Tirussew et al (1995) expressed that the number of persons with disabilities is increasing all over the world. The incidence and prevalence of disabilities in developing countries is higher than the economically advanced countries. The global conditions are more pronounced in Ethiopia. This is due to infectious diseases, malnutrition, under nutrition, war, periodic episode of drought, famine and other factors associated with prenatal and postnatal conditions.

The prevalence rate of blindness in Ethiopia varies from time to time. In the document prepared for the secretariat of ECA (Eshetu, 1986) estimated that there were about 300,000 blind or weak sighted persons in Ethiopia. On the other hand, the Ministry of Health assumes the prevalence of blindness about 3,000,000 (Dorrit Alopaeus-Stahl 1985) Cited by (Tirusew, 1989).

Table 1: The extent of visually impaired in Ethiopia done by different agencies at different years cited by Tirussew, (1989) is as follows.

Agency and year	Sample Size	Types	%
MOA, CSO & RAD (1979/80)	25,704,786	Blindness & partially sighted	1.27
Ethio-Italian trachoma project (1981)	11,441	Blindness	1.31
NNC (1983)	14,819,300	Visually impaired	0.02
CSO (1984)	1,423,111	Blindness & partially sighted	1.25
WHO (1986)	6,640	Blindness	1.52

The 1994 population and housing census of Ethiopia indicates that there are 301, 623 visually impaired persons in five regions. These are Tigray (37,365), Amhara (110, 059), Oromiya (93,425), Southern Nations and Nationalities of People (47,886), and Addis Ababa (12,888). The base line survey conducted by Tirussew et al (1995) found that the number of persons with disabilities is about 1,435,000 of which 30.4% are visually impaired persons.

Even if these large number of persons with disabilities can perform many things, which are valuable for the development of a country, the environment in which they live has a great impact on the extent of their contribution. Particularly, the attitude of the society towards disability at large has an adverse effect for the proper development and function of persons with disabilities. For many centuries, superstitions and myths surrounded the disabled persons. Disabilities were seen as innate, imprinted before birth by God, nature or devil (Winzer, 1987). Moreover, the able-bodied persons consider persons with disabilities as useless. By supporting this Savolainen (1998) and Tirussew et al (1995) described that the problem of disability is created by an able-bodied and disabling world that refuses to accept

disabled persons on their own personalities. The majority of the population consider persons with disabilities as burden to the family and society, unable to lead an independent life, and their fate is to look for alms. Hence, societal attitudes are one of the prime barriers to their personal development and role in society. This influences the way the family treat child with disability.

The main objective of this study is to investigate the attitude of parent towards their blind children. Different studies noted that the attitudes of parents are perhaps the most important element in the proper development of the child. When parents realize that their children have disabilities, they show different reactions. Such as.. shock, denial, anger, bitterness and shame, loss of self-esteem, guilt, disappointment, sadness, grief etc, all these reactions have their own impact on the over all development of the child. According to Warren (1984) and Trachtenberg (1992) the perception of parents towards disability in general and blindness in particular affects the type of treatment and way of handling their child with disability.

1.2 Statement of the problem

Jordan, Gallagher, Hutinger and Karnes (1988) cited by Kirk, Gallagher, and Antasasiow (1993) one of the major forces that influence a child with disability is the family. In order to be effective in special education, it is essential to work with the family system in which the child lives, not just only with the child. Parents are the child's first and most important teachers. They can be his first guide to favourable emotional and social adjustment as well as the guardians of his physical well being. When parents first realize that their child has a disability, their hopes are rushed. Sommer (1944) cited by Warren (1984) distinguished four types of parental attitudes towards blindness.

1. Viewing the child's blindness as a form of punishment

2. Fearing that others would think that the child's blindness was a result of parent's having a social disease,
3. Feeling guilt because negligence or because having violated some moral or social code, and
4. Feeling personally disgraced.

The relationship between the blind child and the family is reciprocal. The child affects the family climate while the family in turn affects the child's development. According to Winzer (1987) the degree to which a child with disability can learn and participate in normal activity depends on a number of factors. These are:

- The reaction of the child's nuclear and extended family to the condition, and the family's acceptance and willingness to focus on the child's positive potential.
- The time of diagnosis and intervention, and appropriateness of intervention, whether medical, psychological, educational, or social.
- The amount of acceptance by the community.

Whether the family is nuclear, single parent, or extended, it plays a powerful role in the child's social, emotional, behavioral, and academic progress. Taking this in to account, the study tries to investigate the attitudes of parents towards their blind children. More specifically, this study tries to get answers for the following basic questions.

- How did parents feel or react to their children's blindness?
- What are the beliefs held by parents about the cause of their children's blindness?
- What were the types of treatments sought by parents for their children?
- What are the beliefs held by parents about their blind children?
- How much are parents involved in the academic and non-academic development of their children?

1.3 Objectives of the study

It is known that the family is the main building block of any development process. It is the center of a child's experience and the structure through which most learning takes place. Many parents show a wide range of feelings towards their impaired children. The objectives of the study are to:

1. investigate parental cognitions or beliefs about blindness and blind children
2. explore parental feeling and reaction toward their blind children
3. examine parents involvement in the overall development of their blind children in terms of interpersonal relation and school performance.

1.4 Significance of the study

This study is designed to examine the attitude of parents towards blind children and its impact on their parenting style. It is hoped that the study.

1. generates body of knowledge about the effect of parental attitude on their treatment & inturn the overall development of the child
2. provides information about parents' attitude towards blind children for different governmental and non-governmental agencies that work in the rehabilitation of people with disabilities.
3. provides information for teachers, special educators, and other school personnel in order to give appropriate support for children and parents.
4. may serve as a stepping stone for further studies.

1.5 Definition of terms

Attitude – A learned predisposition to respond either positively or negatively to persons or things. It has three basic components. These are

- a) Cognitions or beliefs about a particular person, situation or thing;

- b) An emotional reaction toward that stimulus; and
- c) A tendency to behave in a certain manner (Worfman and et al, 1985) and Malin and Birch 1998).

Blind – one who can learn through factile or auditory channel with out the use of residual vision (Hallahan and Kauffman, 1991).

Disability – is any restriction or lack (resulting from an impairment) of ability to perform an activity in the manner or with in the range considered normal for human being (Macha, 2001).

1.6 Limitation of the Study

This study is limited to seven parents who have blind children. The data was mainly collected using an indepth interview. But the researcher believes formal observation may help to get further information about parent-child interaction. But due to the lack of time formal observation was not used in this study.

Chapter Two

2. Review of Related Literature

2.1. The concept of attitude

According to Allport (1935) cited by Malim, and Birch (1998) "an attitude is 'a mental and neural state of readiness, organized through experience, exerting a directive and dynamic influence up on the individual's response to all objects and situations with which it is related". Kuppuswany(1984),Fishbein and Ajzen (1975) in Wortman, Loftas, and marshall (1985), and Sprinthall, Sprinthall, and Oja, (1994) described that an attitude is a predisposition to react favorably or unfavorably toward ideas, objects, persons, events or situations. An individual develops certain kind of attitude from his previous experiences in favour of or against, a particular idea, person, object etc. An attitude is not innate but it is learned. It persists relatively for a long period of time. It also motivates the individual to act, helping to shape, and direct his behavior.

Allport (1935) cited by Kuppuswamy (1984:227) identified four ways in which attitudes are developed. These are: a) the integration numerous specific responses of a similar type in to a generalized response pattern. b) Through differentiations as in one's feelings and actions toward a group, favorable to some and unfavorable to others. c) Through a traumatic experience and d) through imitation or identification. The comments of one person towards somebody or something may influence another person to develop favorable or unfavorable attitudes towards that object. Malin and Birch (1998) and Insko and Schopler (1976) in Wortman et al (1985) categorized attitude in to three component parts. These are:

- Cognitive, which includes perceptions of objects and events or reports or beliefs about them.
- Affective, which includes feelings about and emotional response to objects and events

- Behavior or conative refers intentions and predicts the way in which an individual may behave in relation to an object or events. Rajecki (1990), Oppenheim (1992), and Eagly and Chaiken (1993) cited by Chernet (1999) described that it is difficult to measure attitude by separating in to the above three components. Cognitive, affective and behavioral responses are often not empirically distinguishable as three classes.

2. 2 Factors affecting attitude towards persons with disabilities

There are different factors, which affect the attitude of persons towards disabilities in general, and blindness in particular. These are culture, religion, knowledge concerning disability and others.

2.1 Culture and beliefs

The way people treat disabled persons with disability differs from family to family, community to community and country to country. It is related with the culture of the society (Werner, 1994). This means the culture of the society has an impact on the attitude of that society towards persons with disabilities which in turn affect their way of treatment. Caul Crick (1979) pointed out in Nigeria, the presence of different ethnic cultural beliefs regarding the cause for disability. These are curse from God, breaking laws and family sins, offences against gods, witches and wizards, adultery, misfortune, God's representatives, misdeed in a previous life, illegal or unapproved marriage, shows the omnipotence of God, evil spirit, killing certain forbidden animals, a warning from God and fighting elders during harvest. Werner (1994) also described that in some part of the world, people think a child is blind as a punishment for something the parents have done. According to him in Latin America, villagers believe that blindness occurs when a bat's urine fell in the baby's eyes, or a 'black witch moth' flew by the baby's face.

Generally, the beliefs held by different cultural groups determine the degree of acceptance or rejection of persons with disabilities in that society.

2.2.2 Religion

Different studies have indicated that religion has a powerful role in influencing the attitude of persons towards disabilities. Barker, Wright, and Gonich (1946) cited by Tirussew et al (1995) stated that, in Greek, the Christian doctrine introduced the view that disabling disease is not a disgrace nor a punishment for sin, instead a means of purification and a way of grace. This ideology shows suffering perfects the sufferer. The sick has a preferential position, and it is a privilege for the healthy to minister them where as Hull (2001:13) stated that, in Britain, the biblical and Christian tradition tends actually to encourage and authorize negative attitudes to disability. Fritzon (2001) tried to show the meanings of disabilities in the bible by mentioning different scripture and the way people interpret. According to the bible, every human being is created in God's will and knowledge regardless of their physical or mental capacities. The love that God has for every being also applies to people with different kind of disabilities. Even if, the meanings given for disabilities in the bible is positive, people interpret in different way. According to him, the disciples' questions to Jesus when they meet the man who was blind from birth; (John 9:2) "who sinned, this man or his parents, that he was born blind?" Jesus answer is clear: "It was not that this man sinned or his parents." This answers should have prevented any interpretation that the bible teaches as that disabilities is a punishment from God for sins. Yet we meet such interpretations among Christians all over the world. In Ethiopia, followers of the Orthodox Christian express disability in different way (Sisay, 1996). According to him person from the Orthodox Christian church express blindness as follows the first respondent (Abba Geberekidane) states the following

According to our belief --- God has every power to do any thing --- we believe in it and we preach it. If we obey his words he blesses us, if we disobey, he punishes us. Blindness is caused by not obeying God.

On the other hand “Alka” Ayalew Tamiru, who is blind himself and who chairs Orthodox intellectual congregation stated the following.

--- every thing that happens to man, good or bad, comes from God. With out his will and knowledge nothing can happen --- but disabilities are not caused as a punishment for sins ---

2.2.3 Metaphoric expression

The terms used by the society, the massmedia, newspaper etc. to address different types of disabilities and persons with disabilities have an effect on the development of either positive or negative attitude towards disability. According to Hallahan and Kauffman (1988) during the previous time the massmedia have been representing persons with disabilities in stereotypic and inaccurate ways. This creates negative attitude for non-disabled person towards persons with disabilities and inturn creates low self esteem for disabled persons. Hull (2001) identified different words used to express blindness from the ‘guardian’ British newspaper. These are blindness as indifference, blindness as insensitivity, blindness uncritical, blindness as indiscriminating, and as violent. Besides, Sisay (1996) identified the following sayings connected with blindness.

- እውር ሲሸፍት እስከ ንግሥት ነው (A rebel of the blind is up to the back of his house)
- እውር ሲጠግብ ከመሪው ጋር ይጣላል (When a blinds stomach is full of, he quarrels with his/her guide.

This shows blind individuals cannot move independently to distant places from his village. Both sayings tend to undermine the potential of blind person and inherently perpetuate the dependency trait.

2.3 The attitude of the society towards blindness

According to different scholars, societal attitudes are one of the main barriers or handicaps to the development of persons with disabilities. Societal attitudes show a person with disability as a burden, dependant and an object of pity. These attitudes have a great negative impact on the development of disabled people. Macha (2001) stated that the societal responses towards persons with disabilities is determined by two valuable but interrelated factors. These are the mode of production and the central value system. During the previous time, it was believed that people with disabilities were a curse from the gods and deliberate actions was taken to distroy their lives. Even today there are different beliefs held by the society about blindness and blind people. Hallahan and Kauffman (1991) and Scholl (1988) described that in ancient times blindness was considered as a punishment for sins, either one's own or one's ancestors. Furthermore, blind people are musician, dependant and helpless, and beggars. Sisay (1996) also indicated that blind people are perceived as hopeless, miserable, beggars and one who deserves pity as well as sympathy, one who is compensated for loss of vision and so on. In addition, Arega (1999) identified that our society looks at disabilities in general as being caused by evil sprit, God wrath, punishment for sin and curses by somebody.

2.4 The attitude of parents towards their blind children

Among the different factors which complicate the satisfactory development of blind children are parental attitudes both towards them selves and their blind children. Attitudes in general ranges from acceptance to the other extreme of rejection and feelings of guilt. It is undeniable that positive attitude of parents is perhaps the most important element in the

child's environment. By substantiating this Lowenfeld (1964) cited by Garwood (1983) pointed out that the attitude of parents as more critical to a blind child's development than the particular child rearing techniques they employed. There are different factors which affect the attitude of parents towards their blind children. Such as the attitude of the society towards disability in general and blindness in particular, religion, culture superstitious beliefs (Tirussew et al, 1995). Concerning religion, it is difficult to say followers of some religious accept person with disabilities and followers of other reject them.

Macha (2001) stated that in Africa some parents of disabled people were afraid of being laughed at and isolated by the society. Hence, they often kept them in doors and made no efforts to develop them for their future lives. Many parents show a wide range of feelings and practices when they realize that their child has any disability. They nearly always react strongly (whether positively or negatively) to the birth of a child with disabilities. Furthermore, Ware (1981) cited by Ferrell (1988) showed that the birth of blind infant can challenge the parents' basic system of values, beliefs, and trust, as well as the sense of control over their own lives. How parents respond to the situation will depend on their strengths and weakness, the help given by other family members, professionals and other factors like severity of the problem (disability), socio-economic status, the availability of time and so on. There are different ideas held by scholars about the reaction of parents with different socio-economic status towards the birth of a child with disability. Schell (1981) and Marion (1981) in Ferrell (1988) state that the higher the socio-economic status of the family, the more adverse the reaction to the birth of a disabled child. In the same reference, higher educational level in parents do not necessarily guarantee positive attitudes toward persons with disabilities, either college graduates are just likely to have been exposed to and to sustain common myths about blindness. Where as, the base line survey conducted by Tirussew et al

(1995) showed that respondents with secondary educational level have more positive attitude than respondents with no education. At the same time parents who have disabled child have more positive attitude than parents who do not have.

Differences in family attitudes, actions, and support result in variations in how children with special needs adjust to education or cope with their special education. Hence, it is necessary to understand what has happened to them in their family life before they entered school, or even what is happening in their life now beyond the school environment (Kirk, Gallagher, and Antsasiow, 1993).

In order to accept a child with disability in general, parents show different reactions. According Trachtenberg (1994) and Ferrell (1988) the process of acceptance includes the following stages:

1. Denial and isolation

This stage can give momentary escape for the parent from feelings of guilt and shock.

At this stage parents deny the presence of disability. According to Garwood (1983) denial has two counter productive consequences for the child's development. That is, parents may become over protective, keeping their child put of situation that would help in the normalization process. On the other hand, parent may out excessive pressures for achievement on the child, leading to frustration for both the child and parents. This will also result emotional problem for the child.

2. Anger

It can be directed toward anyone and anything. Many parents feel angry and search for some one or something to blame. Often the anger is directed at God or at the whole world. They may ask why did this happen to my child and me. Anger also may be self directed.

3. Bargaining

It is characterized by a search for cure.

4. Depression

During this stage the disability has began to have its full impact on the family. Family members typically may show symptoms like extreme fatigue, insomnia, loss of appetite or over eating, restless and irritability.

5. Acceptance

Parents see their child as an individual with his own strengths and weaknesses. Crnic, Friend Rich, and Greenberg (1983) in Trachenberg (1992) asserted that how will individuals ultimately adjust to their child's disability depends on marital status, support systems and previous life experience. Strong religious affiliation and effective behaviour interventions in the home are also associated with early acceptance. Parents who have previous experience in rearing a child with disabilities can easily accept the new born infant with disability.

It is clear that many parents of children with disabilities pass through similar reactions and emotional responses to reach the stage of acceptance. But the time varies from parent to parent. For some parents years may pass, and for some it may take few months or days (Heward and Orlansky, 1988). Mitchell (1991) described that, even if parents reach the acceptance or adaptation stage, the child is treated as much as possible, as just another member of the family, which does not revolve around him or her. The parents may always experience some sadness that their child has a disability but this does not interfere with their efforts to make the best out of life.

2.5 The impact of blind child on the family relationship

The family is an interacting, inter dependent group of individuals but not a singular entity that reacts as one to external stimuli (Garwood, 1983). Any event which affects one member also either directly or indirectly affect the others.

According to Turnbull et al. (1986) cited by Mitchel and Brown (1991) in a family there are subsystems. These subsystems are the spousal sub systems which shows the husband and wife interactions; the parent subsystems which signify the interaction between parents and their children; the sibling sub-systems which shows child-child interactions; and the extra marital sub-system, which indicates the interaction of children with grand-parents and maids, etc. In the different sub-systems, the interactions may be different depending on different factors.

According to Fielder, Best and Bax (1993) the arrival of a child with a disability affects the entire family as a whole. The complex needs of a blind child with or without associated impairments, usually lead to a change in life style for the family from birth onwards. Yssesdyke and Algozzine (1995) and Winzer, Rogow, and David (1987) explained that the relationship between the child with disabilities and the family is reciprocal. The child deeply affects the family climate, while the family in turn affects the child. When ever the child is born, the structure of the family changes. All families have to deal with that change, but the families of children with special needs face a special challenge. Of course the effect of the child on the family differs according to the parents views, the severity of the impairment and other factors.

The interaction with family members deeply influences the child's opportunities and barriers, challenges and expectations, ambitions and frustrations, and general quality of life.

Generally, according to different researchers the child with an impairment have an influence on the marital bonding of the parents, and creates stress on the siblings and extended family which inturn determines the way in which parents over come their parental role properly or not.

2.5.1 Influence on the marriage of the parent

The birth of a child who is blind may be emotionally draining for the parents, who may feel confused, afraid, and angry, may hope for miracles; or may blame each other for their child's impairment. These feeling and reactions may lead to increasingly stressful family relationships and even separation and divorce (Hancock, Wilgosh, & Doland, 1990; Herrison & Crow, 1993) cited by Fagon (1997).

However, the findings in this area are conflicting that certain findings explain the birth of disabled child strengthen marriage. On the other hand, it may be the cause for divorce. For example, Farber (1959), Holroyd (1974), Marchus (1977), Tavormina and Krali, (1975) cited by Winzer, (1987) stated that a child with a problem create marital stress and conflict where as, Freeman, Malkin, and Hastings (1975) indicate inmarital problems. Moreover, Andrew, (1976) stated that the presence of disabled child brings parents closer together. Based on the above evidences, Winzer, (1987) stated that the presence of disabled child places a strain on the parents' marriage, and serves to underline already existing tension. However, in some families, the child with disabilities may become the focus of increased family solidarity and cohesion.

According to Hodapp and Krasner (1994) there is high divorce or separation rates in the families of children with disabilities than in those whose children were not disabled (i.e. 20.1% versus 15.3%). Moreover, the families of children who were visually impaired have

even higher divorce or separation rates than did the families with children with other impairments (Fagan, 1997).

Goldfarb, Brotherson, Summers, and Turnbull (1986) depicted that some marriages are able to meet and even be strengthened by the challenges created but others deteriorate. This particularly true if the couple did not have a strong relationship to begin with or does not have a supportive network of family, friends, and community services (Trachtenberg, 1992).

2.5.2 Influence on Siblings

In order to understand the interaction of the blind with the family fully, it is necessary to understand the impact the child has on sighted siblings. Some believe that the presence of visually impaired child on the family disturb the whole family relationships and creates great psychological burdens, especially on sighted siblings. By substantiating this Winzer (1987), Garwood (1983), and Trachtenberg (1992) explained that siblings of impaired children have a high incidence of emotional problems. These are related to feelings to guilt for being normal and to their parents' expectations that they will excel. The impact of the impaired child on normal siblings depends on many factors. These are:

1. The extent to which siblings are held responsible for the impaired child bears a strong relationship to the perception and feelings siblings have toward their impaired siblings and their parents. Winzer (1987) depicted resentment on siblings aggravated when the impaired child receives excessive attention and affection, or when additional care expenses deprive the other of educational and recreational opportunities. It is obvious that the presence of impaired child requires great energy, time, money and emotional resources of the family.
2. Family size also affect the extent to which the siblings are affected by the impaired child.

3. Socioeconomic status also appears to be related to the amount of responsibility a non-disabled sibling assumes for an impaired brother or sister. Garwood (1983) stated that the more financially able a family, the better prepared they are to secure needed help from sources outside the family.
4. Siblings may also be burdened by excessive high parental aspirations to compensate for parental disappointments and frustrations about an impaired child.

2.5.3 Influence on the extended family

The presence of blind child in the family affects the extended family. Inturn the extended family has also a great impact on the overall development of the blind child. Cochran and Brassard (1979) and Berns (1980) cited by Winzer (1987) explained that the extended family may influence the development of disabled children through direct interactions and through the nature of the support provided to their parents. It is repeatedly written in different literature that the attitude of the parents is highly influenced by the society in which they live. Beyond this, the extended family has strong contract with parents. Hence, if the extended family react negatively to the birth of a child with disability, parental stress will increase. This inturn deprive the way parents treat their child properly. By supporting this Garwood (1983) stated that family stress has strong impact on family functioning and child care. Stress can reduce family flexibility and effiience, increase family conflicts, alter family coalitions, and decrease coping ability, all of which can, inturn contribute to the development of disturbed and unfavourable behaviour in children as well as in adults. Moreover, it may hamper children's cognitive development and social competencies. Like parents, grand parents hope for a healthy, normal baby. When a child is diagnosed as disabled, they too may experience a death of expectations. This may leave them with a

diminished capacity to provide support for the child's parents and disturb their previous relationship.

A case study done with blind person by Tirussew (1998) clearly shows the reciprocal impact of the child and the extended family. The respondent expressed the following.

The social problems started immediately after I lost my vision, my parents' relatives were coming from very distant places to express their sorrow and remorse as if somebody was dead in the family. Most of them were saying "better he were dead than living as a blind." The worst of all was the ill expression of a close relative, who he said to my mother, 'He is the only male child of you; you baked only a piece of injera and it was a broken one; this statement was a psychological and mental torture to me.

2.6 The support or service required by blind parents to accomplish their parental role

Effective intervention is very important for the overall growth and development of the child with disability. Many intervention program focus on influencing the child's development through improving the child's immediate environment. Intervention is very effective if it begins early i.e. as soon as the child has been diagnosed as having disability.

Mitchell (1991). Meisels & Shonkoff (1990), and Kirk, Gallagher, and Anastasiow (1993) explained the advantage of early intervention as the following:

1. It is very important to help children who are developmentally delayed achieve higher level of intellectual and social function.
2. It is important to prevent secondary defects in children with disabilities. The secondary defects may result from lack of stimulation to the child because of disability or sensory deficit.

3. It prevents the development of minor impairment to major disability. For example, minor visual problems can develop to major visual disabilities because of lack of early intervention or treatment.

In order to accomplish intervention for blind children the involvement of different professionals like medical doctors, psychologists, special educators, etc., are indispensable. Moreover, parents play a significant role in the intervention program. For example, to help children to be very active in the overall development, parents can encourage children to use different non-visual senses and learning techniques.

According to Kirk, Callagher, and Anastasiow (1993) it is especially important that the systematic education of blind children begin as early as possible. For example, many children with visual disability are passive because of lack of visual stimulation as a result the child does not have well established motivation to move. Deliberate instruction and an organized environment are important for concept development of children with visual impairment. Even if it is valuable to support visually impaired youngsters learn tasks, it is also important to let them take over when they are able.

Parents of children with disability have a more complex and demanding role than parents of non-disabled children. Heward, Darding, and Rossett (1979) in Heward and Orlnasky (1988) described the many roles of parents who have children with disabilities. Such as:

- a. Teaching different skills and how to use special equipment systematically;
- b. Counseling the child to change the emotions, feelings, and attitude resulted due to his particular disability;
- c. Creating good relationship with the child through favourable behaviour;
- d. Parenting non-disabled children;

- e. Creating good parent to parent relationship;
- f. Educating others such as grand parents, aunts and uncles, neighbours, etc on how to interact or treat the child with disability.
- g. Creating strong relationship with the school and community.

Therefore, parents need different types of support in order to properly discharge the above mentioned roles from professionals and the community. Mitchell (1991) asserted that to help parents to accomplish their parental role properly it is essential to satisfy their early needs.

These are:

1. Providing up to date information about the nature of the problem and how they can facilitate the child development. Concerning blind children the most important points for the proper development includes:
 - a) Creating loving and accepting family environment;
 - b) Encourage other children to interact and discuss with the blind child;
 - c) Help the child to practice movement from place to place in his or her surrounding;
 - d) Orienting the child about the environment using all non-visual senses;
 - e) Helping the child to interact with his or her peers in the neighborhood;
 - f) Encourage the child to explore his/her environment;
 - g) Avoiding physical barriers in his/her environment;
 - h) Providing the child with playing objects particularly those which produce sound
 - i) Avoiding over protectiveness and encouraging the child to develop self confidence and self reliance (Tirusew, 2000).
2. Providing counseling service, parents who have children with disability need counseling service to make speedy and successful adaptation to the problem.

By substantiating the above idea, Fagon (1997) expressed that families of children with disabilities need considerable help from their extended families and community agencies. It can lessen the possibility of abuse, since less stressed, “recharged” parents will be able to discipline their visually impaired children.

2.7 The impact of parental involvement on the educational and the social development of blind children

All parents are responsible for their children learning many skills. This may be either by systematic teaching procedure or as a result of the everyday interactions between the parents and children (Heward and Orlansky, 1988). In many respects, no one ever knows as much as about a child as a parent does. Many children with out disabilities can learn many skills from their parents through the natural interaction by observation and imitation. Where as the casual routine tasks done by the family does not offer sufficient skills for the child with disability. Therefore, parents should teach different skills for their children with disabilities systematically. Heward and Orlansky (1988) also noted that, although some degree of involvement in the education process is desirable for all parents, it is a must for parents of children with disabilities. Therefore, in order to make the education of disabled children effective, teachers should collaborate and work with parents. According to Ysseldyke and Algozzine (1995) described that with appropriate assistance, people who are blind achieve academic success just like their neighbours and peers. Garwood (1983) also noted that there is a substantial agreement among vision educators and researchers that blindness itself is not a detriment to academic achievement if favourable educational opportunities are available in the school and home.

This shows that the life of blind children will be either better or worse depending on the way that his parents treat him/her. When there is appropriate help and encouragement

from family a child who is blind can usually develop early skills as quickly as and as well as other sighted children (Werner, 1994). Such skills are daily living skills, orientation and mobility skills, inter personal skill or social skills, career and vocational skills, and recreation and leisure skills. Sighted children can learn many of these skill through observation and imitation where as blind children require intensive and continuous instruction from their parents or professionals to develop the above mentioned skills.

Huebner (1988) and Sacks and Rosen (1994) described that daily living skills are critical for the well being and self concept of blind children. Hence, blind children should actively participate in age appropriate routine activities in the home, school, and other environments. Such skills include eating, personal hygiene and grooming, food preparation, house care, money management, shaping, sewing, telephone use, childcare and minor household maintenance. In teaching self care development (eating, toileting, and dressing) slight delays in attaining the objectives may occur or the sequence of learning may be longer frequently because the parents (caregivers) do it for the blind child rather than taking the time to train the child to perform a task. Huebner (1988) also indicated that, if adults or parents restrict and over-protect, then the result will be dependent children who lack the skill to perform routine tasks. Werner (1994) described that the blind child should be invited and expected to help in a wide range of daily activities just like to sighted child. In many countries and farming communities, book learning is much less important than the skills children learn through helping their families with daily work. A family that farms the land can begin to include a blind child in gardening and farming activities from an early age. This will help the blind child to live and do things independently during adulthood.

Orientation and mobility is the other basic functional skill/social skill that should be learned by blind children. Hallahan and Kauffman (1991) described that the most important

ability for the successful adjustment of blind children is their mobility. Mobility is the ability to move around the environment safely, independently, and effeciently (Dodds, 1988). Mobility skills depend to a great extent on spatial ability (orientation). Orientation shows knowing one's position in space and in relation to objects in the environment. Tuttle (1986) and Graves (1983) cited by Sacks and Rosen (1994) stated that the level of independence in mobility have a direct relationship to the development of self esteem and the participation blind children in different social activities and later to obtain employment. By supporting the above idea Hill (1988) pointed out that orientation and mobility have psychological, physical, social and economic value for blind children.

A person who does not acquire good orientation and mobility skills is restricted in the amount, diversity, and spontaneity of social encounters. Hence, parents should encourage and give a chance to move freely and independently for their blind children. Parents should take their blind children to the different ceremonies meetings, recreational areas etc in order to develop the social skills. Besides, they have to give information or orientation about all things that are found in the environment where the child is moving or walking. It is clear that overprotection is as bad as neglect or rejection. Werner (1994) noted that providing too much protection is one of the biggest problems observed in different countries of the world. The parent do almost every thing for their disabled children and holds them back from developing skills and learning to care for themselves. This is because most parents believe that their children are unable to do things by themselves. Moreover, they do not allow their children with disabilities to play with other children because they fear they will be teased or unable to do as well as the others.

The other social skill of blind children that should be taught or encouraged by parents are interpersonal skills or social adjustment. Garwood (1983) wrote blind children are quiet

and passive in social interaction during their earlier period. They may remain passive, if outside stimulation does not evoke pleasurable experiences. It is essential that these children be cuddled, enjoyed, and placed at the center of family activities. Tait (1972) in Garwood (1983) has suggested that play and exploratory behaviour are related to the degree of social attachment experienced by blind children. These behaviours move blind children away from themselves and toward the external world where both social independence and social reciprocity with persons other than parents can develop. Tayler, Sternberg and Richards (1995) and Hallahan and Kauffman (1991) pointed out that the interpersonal skills of blind children is directly related with the reaction or attitude of the sighted person. When blind individuals are not accepted by those who are sighted, the interpersonal skill will be hindered. The attitude and behaviour of parents towards their blind children also affect the interpersonal skill of the children. By substantiating this Scott (1968) in Garwood (1983) wrote the following. Development of a positive self concept is critical to social competency. This self concept is acquired in large part through social interactions and the expectations of others, particularly the parents. In order to develop the interpersonal skills of blind children, scholars advice to apply relationship intervention strategy. Sacks and Rosen (1994) noted that relationship programs such as special friends and peer tutoring should be practiced either in school or home. In special friends program a student who is blind and a student who is not disabled pairup for regular meetings. The students engage in different leisure activities. Through time, it is expected that a friendship will develop and the students may then introduce each other to their own friends, thus expanding the social network of both students. Peer tutoring is equally important as special friendship in enhancing social interaction of blind children.

Chapter Three

3. Research Methodology

The main objectives of this study was to investigate the attitude of parents towards their blind children and its impact on their treatment. It is a qualitative method of research conducted in Bahir Dar town. Qualitative method was used in this study by the fact that it is through an in depth qualitative study that one can better get individuals attitude towards a given object. It allows the investigator to go deep and generate an intensive data which are useful for intervention Gull. Borg and Gall (1996) stated that one of the main characteristics of qualitative research is its focus on the intensive study of specific instances that is cases of phenomena. The way parents treat children with disabilities differs from one another. It is also true for attitude. Hegarty (1985) also asserted qualitative method is most important to get intensive data from small number or cases.

3.1 Sources of data

The sources of data for this study were parents, blind children and teachers.

The total number of parents included in the study were seven. There are about 74 visually impaired students in Bahir Dar town. Among these only 9 students have parents in the town. The rest do not have parent in the town. Among the 9 (nine) visually impaired student 7 (seven) are blind and 2 (two) are partially sighted. Hence seven of the blind students with their parents were included in the study. From the seven families, seven parents were selected. Among these six are mothers and one is father. In Ethiopia, the mother is the one who mainly carries out child rearing. Hence the attitude and role of the mother has greater impact than the father on the development of the child. Even if mothers play great role in the development of the child, one father is included in this study to be an informant. This is because the family is single parent family headed by the father. The seven blind students are

learning in ‘Serte Dingle’ and ‘Shimbit’ primary and junior secondary school. Besides, two special education teachers and two school directors were interviewed.

3.2 Instruments

The instruments used in this study were interview, casual observation, and informal talk. An in depth interview (both open and close ended) were carried out with parents and blind students. In addition teachers were interviewed.

3.3 Procedures of the study

The researcher first contacted teachers and blind students in the school. With the help of blind students, the researcher contacted parents to get permission from them. Then, after the permission is secured, the interview was made in the parents’ home by their own choices. Before starting the interviews, parents were informed about the objectives of the study and assured their identity will be kept confidential. The same is true for students, i.e. based on the interest of blind students; the interview was made in school.

All the interviews (both close ended and open ended) were recorded using the tape recorder, all parents and blind children were informed about the purpose of using a tape record. Based on their consents all interviews were recorded. The interview for parents and blinds students lasted approximately in a range of fifty minute to one hour.

3.4 Data Analysis

After collecting the data, the interview made was transcribed and noted on a paper based on the code for each interview. Then it was translated from Amharic into English. After this, thematic contents were formulated based on the research questions. Finally, the information gathered in different ways and places came together and analysed under each thematic content and discussed with the findings of other related studies.

Chapter Four

4. Analysis and Discussion of the study

4.1 Back ground information

The main objective of this study is to investigate the attitude of parents towards their blind children. To do this seven parents from seven families who live in BahirDar town were selected. Among these six are mothers and one is father.

Table 2: Demographic information of the family of blind children

Case		Education al level	Occupation	Age	Family size	No of children	Religion	Other person with disability
Case 1	F	Can read and write	Daily labourer	48	2	1	Orthodox	-
Case 2	F M	Illiterate	Daily labourer	43 35	5	3	Orthodox II	-
Case 3	M	Illiterate	Pity trader	35	4	3	Orthodox	-
Case 4	M	Illiterate	Pity trader	42	5	4	Orthodox	-
Case 5	M	Grade 4	Pity trader	35	2	1	"	-
Case 6	F M	High school graduate Grade 3	Lives in pension House wife	62 48	6	4	Orthodox "	-
Case 7	F M	Illiterate "	Farmer "	56 50	5	3	Orthodox "	-

As it can be seen from table 2 all the family (parents) have the same religion i.e. orthodox. All families have no person with disability other than their blind children.

Case 1 It is a single parent family headed by the father. The father lives with his son only. He is a new comer to Bahir Dar. He came from Gonder, Belesa district this year mainly because he wants to educate (teach) his blind son. His wife and sighted children live in Belesa district. The occupation of the father is daily laborer in the town. Where as the occupation of his wife is farming.

Case 2 It is an intact family (nuclear family). Both the father and mother have no education. They were living in one of the surrounding rural area of the town before ten years ago. But these days they live in Bahir Dar town. The father is daily labourer and the mother is housewife. They have three children.

Case 3 It is a single parent family headed by the mother. The mother is illiterate and pity - trader. She has three children.

Case 4 It is a single parent family like case 3. The mother has no education. She is pity trader and lives on selling different vegetables like potatoes, carrot, etc. in the village street. She has four children.

Case 5 It is a single parent family headed by the mother. She has only one son who is blind. She makes living like case 4 and 3. Her educational level is grade 4.

Case 6 It is an intact family. The father's educational level is grade 12 complete. He lives on pension. The mother had no occupation. She is housewife. She learned to grade 3 and drop out. They have four children.

Case 7 It is a nuclear family. The occupation of parents is farming. Both mother and father have no education. They have three children all of them are farmers except the blind. They live in the boarder of the town known as Shimbt.

Table 3: Demographic information of blind children

Case	On set of the impairment	Age	Grade	Sex	School entrance age	Birth order
1	6 years old age	13 years	1 st	M	13 years	2 nd
2	6 years old age	12 years	3 rd	M	9 years	2 nd
3	Congenital	14 years	3 rd	M	12 years	1 st
4	6 month age	14 years	4 th	M	8 years	4 th
5	6 years old	15 years	4 th	M	9 years	1 st
6	12 years	18 years	8 th	F	7 years	3 rd
7	12 years	20 years	7 th	M	14 years	3 rd

Table 3 shows demographic information about blind children. All blind children in this study do not have additional observable impairment and health problem. As it can be seen from the table they are found between age 12 and 20. The number given for each case is similar with the parent. I.e. the blind child (case 1) is the son of the father (case 1). Even if the main focuses of the study are parents, the response of blind children is treated or analysed together. Therefore, in order to distinguish the report of the parents and children, researcher indicated in bracket either mother, father for parent or son/daughter in front of each case. For example, case 1 (the father) case 1 (the blind son), case 6 (the mother) case 6 (the blind daughter)

4.2. The Type of support parents receive from different bodies

The presence of a child with disability in general may complicate the life style of the whole family. Parents may face so many challenges to accomplish or develop natural and

responsive parenting style unless appropriate support is provided. The main reason why the investigator tried to identify the type of support given for parents by different bodies is that, it has its own contribution for the development of negative and positive attitude on the part of the parent toward their blind children. According to the responses of parents there is no any organization (professional), which help them in educating how to handle blind children. But the regional education bureau helps them financially, i.e. their blind children get pocket money (50 Birr) per month from the bureau. Concerning the range of support secured from extended families is different from family to family.

Case 4 and case 6 responded that they get support from extended families . i.e. case 4 stated the type of support she receives from her younger brother as follows.

My younger brother gives care for my blind son better than me. He always advises the child to be clever in his education.

Case 6 has also the same expression like case 4. The relatives emotionally support the family. Some encourage her blind daughter by providing materials for learning. On the other hand, cases 1,2,3, and 7 reported that they do not get any support from their relatives. Case 2 and 1 reported their relatives discouraged them not to take their blind sons to treatment. Rather the relatives advised them to give proper care for those children who are not disabled (blind).

Fagon (1997) stated families of children with disabilities need considerable help from their extended families and community agencies. The social support is powerful buffer to the stress involved in raising children who are disabled and help parents feel they can cope. The parental stress because of their lack of support together with other factors like family's low income, low educational level, single parent family, etc. put the child in disadvantaged condition. Children who are born without vision must learn about their world in ways that are

different from those in which other children learn. For early learning parents have more significant role than others. Since, the roles of parents who have children with disabilities are more demanding and complex than parents of non-disabled children

(Heward and Orlnasky, 1988). Therefore, parents require professional support to accomplish these roles. Rose (1988) also noted the better the support offered, the sooner the adaptation or orientation phase follows and coping strategies are developed.

4.3 The reaction of parents to their child's blindness at the beginning of the problem

On the basis of the following basic interview guides and other leading questions, parents reported their reaction about their child's blindness when the problem occurred.

- Did you think that your child would have such kind of problem?
- How was the problem created?
- What did you feel when you first realize that your child could not see?
- How did you say? What did you do?
- Did relatives and neighbours use to visit your child when the problem occurred?
- How did they use to react/say about the child's blindness?

Case 1 (the father) at the beginning something, which looks like white, covered the edges of his eyes. During this time he took the child to the holy water. But through time his eyes were totally covered by it. He said:

“I was shocked and confused. Some advised me to take the child to medical treatment. But the persons in the clinic told me the problem was beyond their level.”

After he heard the news this information he was frustrated and he said to God

Why do you punish me twice? You killed his mother and now . . . Is it my own sin or another?

He believes the problem created was a warning from God. Hence he decided to obey the rules of God. He had a strong belief that if he obeys the word of God properly, his son will be cured one day. Then, he prays every day for his son. His best wish is to see his blind son in better life. He doesn't want his son to be beggar. He said:

I hope one day God may cure him

Case 2 (the mother) reported that at the beginning of the problem (when the child's eye become ill). She took the child to traditional healer for treatment. Although the traditional healer gave medicine for the child, the medicine (treatment) did not cure the problem. The traditional healer ascribed the cause for the child's eye illness to be evil eye. Then, through time the eyes of the child become totally blind. She said:

I was shocked and terrified with the problem. I discussed with my husband and decided to take the child to medical treatment.

Then, she took the blind son to clinic and the nurse told her to take the child to hospital. The problem was beyond the capacities of the clinic. Since the family is poor to take the son for further medical treatment, she was too much worried about it. She said to God

"It was better to kill me instead of showing my child being blind"

She said the above statement because she lost all her hopes to get cure for the child. Besides, she has a perception that blind persons are helpless and useless. She also reported that the neighbours and relatives were coming to visit the blind son. Most of them were disappointed by the situation. Some of them advised her to take the child to holy water. But

her elder brother and sister advised her not to take the child for treatment. Because they believe that the child became blind as a result of their old mother's curse. Due to this she was not interested to take the child to holy water. But the father accepted the advice to take the child to holy water. Then, they took the child to holy water. But the child was not cured. Then, the father and mother lost their hope of cure. She said her husband

I have told you before. But ...

Case 3 responded that the problem created was a traumatic experience for her. In addition, the child was the first born for her. She reported how the family experienced the situation.

At first, when the baby was born, none knew he was blind for about a week. Both my mother and I did not know that he couldn't see. After a week, we realized that he is unable to see. We were very shocked. My mother told my husband about the problem. He too was very shocked and denied the problem (condition).

But after sometime, her mother went to a wizard to ask about the problem created. The wizard told to her mother that the problem was related to a belief or culture known as “Yebet tata” in Amharic. The wizard ordered them to do things related to the belief. They did as the wizard told them. But the child was not cured. Then, they became much more worried. She further said

I also used to wish it was better to be sterile than having such a baby. Especially when some people talked to me about what happened to me during my early age, I used to feel so much. Some people advised me to take the child to holy water. Then, I took him more than three times but he was not cured. I considered people say that I am cursed to have a blind baby. Due to this I told my mother not to talk about my baby's problem . . . I believe I have some natural problem when I thought of giving another birth, I was afraid of having the same child (blind). After four years, I gave birth to another normal baby and stopped worrying.

Case 4 (the mother) reported that at the beginning, the eyes of the child changed its colour into something like cloud. Soon after she took the child to a nearby clinic. But she heard the problem was so intense and the nurse ordered further medical treatment. When she heard this she was shocked and worried. She said:

I asked my self what did I do that disappointed God I said to God, why did you give me such kind of problem that cannot be solved by me.

According to her report, she did not take the child to hospital for further treatment due to financial problem. Rather, she took her son to holy water. She strongly believes if somebody strictly obeys the words of God and prays, he can get every thing he/she needs. She said

I decided to obey his words and took my son to the holy water. But he was not cured . . . it is not the will of God.

She also reported that the neighbours and relatives were visiting the child and advised her not to be terrified with the problem created.

Case 5 (the mother) has the same experience like case 4 and responded that before the child become blind, he was taking medicine for TB case. After he took the medicine he lost his sight. Soon after she took him to hospital. But the medical doctor told her to take the child for further medical treatment to Addis Ababa. When she heard this, she was very anxious about it.

He is the only son to me, I did not do any crime before, Why did you created me for suffering. Why do not you kill me?

She did not take the child for further medical treatment due to lack of money. But she always prays to God. She has similar belief on God like case 1. She always prays to God. She said:

God is omnipotent; it can give better life for him. So I pray every day.

Case 6 (the mother) reported that at the beginning they took the daughter to a hospital called Feleghiwot in Bahir Dar and then to Minilik Hospital in Addis Ababa. But they heard that the daughter couldn't get any treatment because the retinas of her eyes are injured. She said:

I cried too much when I heard this information

After that they did not take the child for treatment. She said,

What can we do, it is her fate. It is once decided by God.

Case 7 (the mother) reported that

First his eyes became red. Then I took him to traditional healer ... The traditional healer told me that the son became ill due to the reflection of sunlight from water at a sunny midday ... The traditional healer gave a medicine for my son but did not cure. Through time his eyes became swollen. Due to this I was frustrated ... soon after, I took him to witch doctor.

The witch doctor told to her that evil eye makes the son's eyes like that (swollen). He gave medicine to the son but did not cure. Due to this the mother (case 7) was confused. She reported her feeling as follows:

I Cried, I was asking myself that I could not get answer for the cause of the problem created.

Case 7 also reported that some relatives of the father believe the causes of the son's blindness is "due to inherited sin from the grand father" Because the grand father of the son had done so many wrong deeds (immoral act) like stealing animals from persons, taking the agricultural land of old persons by force, etc.

As it has been reflected in the literature part of this study that different scholars believe the presence of a child with disability affect the parent in different ways. So, parents show different reactions in their way of coping mechanism or parenting style. To reach the stage of acceptance, parents pass through different processes. These are denial and isolation, anger, bargaining, and depression (Trachenberg, 1992 and Ferrell, 1988). Although the responses of parents (respondents) above is not the only reaction, it shows that they pass through different feelings or reactions which is similar with the findings stated by the above two scholars and others. The following shows the reactions (feelings) of parents in relation to the stage.

1. Shock and Denial: The report of case 3 i.e.

After a week, we realized that he is unable to see. We were very shocked. I considered people say that I am cursed for having a blind baby. Due to this, I told my mother not to talk about my baby's problem

2. Anger and Sadness – case 1 (why do you suffer me twice . . .)

Case 5 (why do not you kill me . . .)

Case 4 (. . . What did I do that disappointed God . . .)

Case 7 (I cried. I was asking myself that I could not get answer . . .)

3. Bargaining this stage is already reflected by case,3and case 4. For example case (the mother) reported that after her child became blind the family took the child to wizard and holy water.

4. Depression, case 3 (I also used to wish I was sterill than having such a baby) Trachenberg (1992) stated symptoms of depression like over eating, restless, irritability and the like

5. Acceptance: case 3 ("when I thought of giving another birth, I was afraid of having the same child. But after four year, I gave to another normal baby and I stopped worried".

Case 6 ("what can we do, it is her fate It is once decided by God.")

Ferrell (1988) described all parents at one time or another experience them in this sequence or to this degree is open to guess. Lairy and Harrison (1973) in Ferrell (1988) suggest that parents who have reached acceptance stage are more likely to have further pregnancies, which may imply that the parents no longer see blindness as an over whelming handicap or fear that other children will be born with the same condition. That is why the idea of case 3 catagorized in the stage of acceptance. Furthermore, Lairy & Harrison (1973) described reaching a point of acceptance, does not necessarily imply competent parenting. Trachenberg (1992) asserted that how parents adjust to their child's disability depends on marital status, support systems, and previous life experience. When parents receive favourable support from the community and other agencies, they are likely to develop positive attitude and favourable treatment.

4.4 The impact of blind children on parents marital bond and relationships with others

As already mentioned by different educators, bearing a child with out disability is psychologically, socially or culturally important for parents. But the presence of a child with disability may affect the family relationship with themselves as well as their relation with the community. Hence, parents were asked how much the presence of a blind child affects their marital bond and relationship with community. The following interview guides and other leading questions were posed to parents:

- Did your child's blindness cause any influence on your marital bond? If there was, could you tell me what was it ?

- Did your child's blindness affect your relationship with the community that is, your relationship with neighbors, relatives and others?
- Was there any unfavorable reaction that you encounter from others in local social organizations such as 'mahiber', 'Edir', weddings and work place as a result of your child's blindness? If so, what was it?

With regard to marital relation ship /bond, all parents except case 2 responded that their children's blindness didn't affect their marital bond. But case 2 reported her son's blindness to some extent affect her relationship with her husband.

She said,

At the beginning, I sometimes quarreled with my husband. He considered me as the root cause to the child's blindness. Because he believed that the child became sightless due to my old mother's curse.

Case 2 also responded that though they quarreled sometimes before, they are at peace now. Some studies like Hodapp and Krasner (1994) in Fagon (1997) reported, there is a higher divorce or separation rates in families of children with disabilities than in those whose children were not disabled (i.e. 20.1% versus 15.3%). More over, they identified there is a higher divorce rate in families who have visually impaired children than in families with other disabilities.

Concerning the impact of their children's blindness on their relation ship with neighbours, relatives, and others. Case 4,5 and 6 reported that they did not encounter any problem. Where as, cases 1,2,3 and 7 responded that they experienced (encountered) some type of problem as a result of their children's blindness.

Case 1 (the father) reported that he quarreled with some of his relatives when he decided to bring his blind son to Bahir Dar. Before he came to Bahir Dar, he was living in Gonder

(Belesa district). But when he heard the information that his blind son can learn in modern school (i.e. in Bahir Dar), he decided to live in Bahir Dar together with the blind son for the sake of educating the child. When he told his decision to his relatives they were teasing him. He became an object of ridicule, i.e. his relatives consider him as foolish. This is because the relatives have a belief that blind individuals are helpless and useless.

He said,

Some said, " Are you joking? It is better to handle other sighted children properly than this useless child. He is once blind and ill-fated". Some advised me to send the blind son to church school. But I refused the ideas of all. Due to this they neglected me and considered me as foolish. Hence, I stopped interacting with those people who consider my child as if he is useless.

Case 1 further reported that although his relatives discouraged him he brought the blind son to Bahir Dar with the consent of his wife. Now (these days) his wife is living in Belesa with other sighted children.

Case 7 (the mother) reported as follows:

Once upon a time, I quarreled with one of my neighbours. She said to me, it was preferable that God makes you blind instead of punishing you by making your son blind. I expect that other neighbouts also held her idea (belief) that my son became blind as a result of my own sin, they used to gossip on me. Hence I don't freely interact with them. Some times, I prefer to leave out the village.

Since her neighbours believed her son became blind due to her sin, she is very ill disposed towards them and feels guilty.

Case 2 also reported that she felt shame to interact with her relatives, after she heard the reaction of her siblings. She stated,

My elder brother and sister insult me; they say your child became blind since you are cruel. Our old mother's curse made the child blind. All other relatives also held this idea and consider me as if I am cruel, so I don't want to visit them. I prefer to visit my husband's relatives. They don't have such kind of feelings.

Case 3 reported as follows.

At the beginning, i.e. when I gave birth of my blind son, I did not like to interact with any person. I consider my self as cursed and sinful. So I felt, any person who knew the problem considered me as unique. But now a days, I go to visit relatives and involve with different social matters. Because it is a must, you cannot live alone.

Furthermore, the mother (case 3) reported that when she remembers her mother's belief that the blind was born as a result of her misdeeds she had during adolescence period. Besides, she suspects that people may also have such kind of beliefs and consider her as unique person.

Generally, from the above four cases it possible to understand a child with disability has devastating effect on parents relationship with relatives as well as their neighbours. By substantiating this, Yasseldyike and Algozzine (1995) stated that parents who have children with disabilities feel guilty, angry and afraid which affects their relationship with each other and the community. The reports of the above four cases show that the society believe that blindness is a result of sin or curse. Besides, these blind individuals are perceived as useless and helpless. These negative attitudes held by the society about blindness lead parents to have

a feeling that they did something wrong which is against to the socially accepted rules. That is why the above four cases felt uncomfortable and ashamed to interact and be with their neighbours and relatives. When parents with disabled child are wrongly perceived and neglected by their relatives, neighbours, and others in the community, are likely to develop negative attitudes toward their blind children and in turn affect their way of treatment. It is similar with the findings of Sisay (1996) that the presence of a child with disability places the family in cultural pressure and spiritual crisis which determine the development of the child and the social interaction of the family. He stated the idea of a woman included in the study as:

It is difficult to bear a handicapped child in Ethiopia because the society mostly attributed the cause to punishment from God for some past sins committed in the family lineage .The family is considered a cursed and it has great social consequence.

Goffman (1968) and Offtner (1968) cited in Wade and Moore (1993) have shown parents suffer to the stigmas attached to their off spring. The stereotypical view of the society highly influences the attitude of parents and children.

Furthermore, Sommer (1944) cited by Warren (1984) distinguished four types of parental attitudes towards blindness. These are viewing the child's blindness as a form of punishment, fearing that others would think that the child's blindness was a result of parents having social disease, feeling guilt because of negligence or because of having violated some moral or social code, and feeling personally disgraced.

4.5 Parents' belief about the causes of their children blindness and the type of treatment sought

Case 1 responded that his son was crying too much when his mother died. He said

“I sometimes feel the child’s brain might be affected and in turn cause his sight loss.”

He ascribed the cause to be much crying because the child’s eye become sick soon after his mother died.

Case 2 (the mother) reported that her son’s blindness might be either evil eye or curse. She said

Only God knows. But I believe it might be as a result of curse from my mother. She was very old. My brother and sister say and agree, it is because of I am cursed for not helping my mother in her old age. My mother did not love me as she had to my brothers and sisters. She loved them very much. She used to bless them, but not me. She used to consider me cruel. There was also some disagreement between I and my brother and sister because of her. Therefore she might have cursed me. It might also be evil eye.

Case 3 (the mother) also reported that she does not know the real cause for her child’s blindness. But she guess (believe) the cause might be ‘Yebet Tata’ as she heard from the wizard or it might be as a result of her misdeed in previous life. Her mother told her that she teased at persons who have any type of impairment when she was adolescent. As a result she gave birth of blind child.

Case 4 (the mother) said

I do not know exactly the cause; it is the work of God.

Even if she said she does not know, from the statement made, when she heard about the problem from the Nurse was

I was shocked and tensioned. I asked myself what did I do that makes God disappointed.

Indicating that the cause was something to do with her deeds.

Case 5 reported that some people say the cause for her son blindness might be the medicine he took for T.B case. But she said,

Only God knows, everything takes place in the world is by its will. Hence it may be to see the strength of me

Case 6 responded that she does not know the cause for her daughter's blindness. She simply heard from hospital that the retina of the daughter's eye had a problem

Case 7 (the mother) stated that the cause of her son's blindness is most probably evil eye ('buda') though some relatives say it is a result of inherited sin from the grand father. She gave her reason as

It is an evil eye ('buda') because my son is very attractive and was interactive before he became blind. Due to this a person with evil eye ('buda') had affected him.

Even if she said evil eye is the cause for her son's blindness she suspect it might be inherited sin.

The causes of blindness as reported by parents various from the cultural, religious and other beliefs held by the society. As indicated in the literature part of this study, the belief of a society about the causes of disability in general and blindness in particular is a reflection of culture, religion and other belief. Previous studies reported that evil spirit, God wrath,

punishment for sin and curse by somebody as possible causes of disability in Ethiopia (Sisay, 1996 and Arega, 1999). Furthermore, Hallahan and Kauffman (1991) and Schol (1988) described that in ancient times blindness was considered as a punishment for sins, either one's own or one's ancestors. It is known that the type of treatment sought by parents to get cure for their children depends mainly on the beliefs held by them. This means, the culture, religion and other beliefs of the society influence the type of treatment. The responses of parents in the study also indicated their belief has its own impact on the type of treatment sought for their children. Some of the parents took to modern medical center and others to wizard, traditional healer, and holy water. For example case 2 (the mother) in the study believes her son became blind due to curse by old mother. Before she heard her son became blind as a result of curse from her brother and sister, she took the child to traditional healer and clinic. But after she heard the belief of her brother and sister about the cause of her child's blindness, she decided not to take any treatment. But her husband accepted the advise of some people to take the child to holy water and convinced her to take the blind son to holy water. Then they took the son to holy water with out any cure. Due to this she said to her husband.

I have told you before, but ...

Generally from the above expression of case 2, it is possible to understand the belief of others have great influence on parents attitude about disability. In line with this Macha (2001), Hallahan and Kauffman (1991), and others described that societal attitudes are one of the prime barriers to the development of disabled people. They further stated family attitudes are also influenced by societal attitudes. Furthermore, the mother's belief about the cause of her son's blindness i.e. bewitchment restricted her not take any treatment for the son's eyes.

4.6 Parents perception about the learning capabilities of their blind children

The perception of parents about the learning capabilities of blind people in general and their blind children in particular can affect the type of help given by parents for the educational progress of blind children. To identify the perception or thought held by parents about the learning potential of blind children, first the researcher asked parents about their children age of start of school.

Table 4: Onset of the impairment, age of start of school, present age, and present grade level of blind children

Cases	On set in years/month	Age of start of school in years	Present age in Years	Present grade level
1	6 years	13	13	1 st
2	6 years	9	12	3 rd
3.	Congenital	12	14	3 rd
4.	6 month	9	14	4 th
5.	6 years	9	15	4 th
6.	12 years	7	18	8 th
7	12 years	14	20	7 th

According to the reports of parents except case 6, their blind child entered to school late. It was not equal with the normal entrance age of primary school children in Ethiopia, which is 7 years of age. According to the parents, this was because of two reasons:

1. Parents (case 2, case 4, and case 5) reported that their blind children entered late due to searching different types of treatments for eye disease.
2. Parents (case 1, 3, and 7) responded that their blind children entered late to school due to lack of awareness that blind children can learn in modern school.

Case 1 (the father) reported as follows;

My child went to school late because of absence of school nearby where blind children can learn. For your surprise, I did not believe a person who cannot see can go to any modern school ('Askuala') and learn. What I used to believe was if a person is sightless, his/her only chance is to go to a priest school, or if this is impossible, to go and beg for his livelihood. But, fortunately one day a person came to our village, saw my child, and told me that he can attend modern school ('Askuala'). He also advised me to take my child to Bahirdar. When I heard this, I brought him to Bahirdar.

Case 3 (the mother) stated:

I did not know a blind person can learn in modern school before my child entered to school. I thought the fate of blind person is to be beggar ... I send my son to school (Sertse Dingile) after I heard the information from one person in my village..

Case 7 (the mother) reported that

First of all, we did not have the intention to send our child to school we wanted him to become a farmer? But at the age of 12, he became sick and lost his sight. Therefore, we realized he cannot help us like the others and decided to send him to church school (Kestimihirt') instead of being idle. So that he can do his best for his soul ('nefis'). After that, the government let him to join modern school (Askuala timihrt') paying him 50 birr a month.

Generally, the reports of the parents (case 7, case 3, and 1) revealed there is a belief held by the society and themselves in the region that if a person becomes blind his/her chance is either to be beggar or to be priest in the church. This idea is clearly reflected in the report of the above three cases. Specifically, the following sayings (reports) reflect the idea properly.

Case 7

. . . at the age of 12, he become sick and lost his sight. Therefore, we realized he couldn't help us like others . . .

Case 1

What I used to believe was if a person is sightless his/her only chance is to go to a priest school . . .

Further more, all the parents were also asked about the potential of their blind children to learn and become successful like the sighted one. Accordingly, case 4, 5 and 6 believe that if a person can get appropriate support from the school and the home, he can perform effectively like sighted students. Besides, Case 1 also indicated blind students might be successful in their schooling like sighted if the necessary support is given for them. He also reported that he has got (developed) this idea from the advice he got from some persons. At the same time, he heard from teachers of the school and saw that some students reach grade 8 in that school even if his son is in grade one. Furthermore, he stated his opinion as follows:

I think learning is not a difficult task like farming, weaving, and others. It is simply carried out by brain ('Angol') so the brain ('Angol') of my son is normal unlike his eye. Hence, I believe he can learn like sighted. Of course, the way of writing and reading is difficult. But if my son always touch the material he got from the school, he might be successful.

From the above expression of Case 1, one can understand that a blind person could be successful in life only if he is effective in academic subjects. He also asserted that if his blind son did not learn, he couldn't be a farmer like his sighted siblings. That is why he brought the son from Belesa to Bahir Dar. But the sighted children of case 7 are farmers.

When we see the reports of parents (case 2,7, and 3) their blind son cannot perform effectively like sighted peers even if the necessary support is provided. Case 3 and 7 gave their lines of argument as follows:

Though I do not know how my son learns at school, I can see his problem at home. He cannot feed himself well. He cannot take 'wat' and 'injera' from the tray properly. Besides, he cannot identify the food from straw ('geleba') how can he learn or identify letters as the sighted can?

Case 3 argued or gave her reason by comparing her blind son with the sighted interns of the participation in different home activities. She said

My sighted child helps me with different activities at home. Where as my blind son cannot do any thing . . .

Case 2 also explained her reason as follows;

We want our eye for many things in life. Without our eye, everything becomes difficult. My son is sightless ('Ewir'). How can he perform equally with sighted people?

Besides, parents were asked about the job opportunity of their blind children after completing their secondary education like sighted with their own effort. Hence, Cases 4,5,6 and 1 said if their blind children work hard in their schooling they can get a job like sighted, Case 6 noted that

If my daughter achieve good result in her education (schooling) especially after she complete the secondary education, she will enter to university and get job.

Case 6 believed that the likelihood of getting any job either for the blind or sighted highly depends on students' effort to achieve good result in ESLCE.

On the other hand, Cases 2,7, and 3 believed their blind son/daughter will not get any job with their own effort like sighted unless the state provides them with some kind of job which can be done by 'weak person' like blind. But the parents (Cases 2 and 3) were unable to state those jobs that can be done by blind person ('weak person'). Except their previous experience that blind person's fate to be beggars, they were unable to mention any other job that can be done by blind person. However case 2 stated,

Though I do not know those jobs that can be done by blind people, I think they may perform the work of teaching. Since teaching is simply done orally.

Case 2 developed the above idea since she heard that there is one blind person (mergeta) teaching in church education in one of the rural 'kebeles' of her relative.

Case 2 mentioned the likelihood of getting job as follows;

If my child completes his schooling, he may or may not get a job. The government now pays him 50 birr. It is good if he can be given any job he can do when he completes schooling as well.

Generally, parents (case 2,3, and 7) perceived or thought that their blind children do not have the same potential to learn like sighted. Besides, they do not have any hope that their blind children can get job like sighted with their own effort. Where as parents (cases 1,4, 5, and 6) believe that their blind children have the same potential to learn like sighted.

According to these parents the likelihood of getting a job depends mainly on blind children's effort and academic result

4.7 Parent effort in the educational progress of their blind Children

Different educators believe the importance of parents' involvement in the education of their children. For example, Heward and Orlansky (1988) noted that, although some degree of involvement in the educational process is desirable for all parents, it is a must for parents of children with disabilities. Therefore, in order to promote the educational progress of blind students, teachers should collaborate and work with parents. Garwood (1983) and Yesseldyke and Algozine (1995) describe that blind students can achieve good academic results like their sighted peers if they get the necessary help from their parents and the school. This shows, the visual impairment (blindness) is not a detriment factor for the educational problem created on the part of blind students. Blind students can be either successful or not like sighted students depends highly on the type of help given at home and in school. Due to this the informants (parents) in the study were asked how much they involve in the education of blind students. The following questions (interview guides) were asked

- Do you discuss with teachers about your son/daughter's schooling/progress at school?
If not why?
- Did teachers invite you to discuss with them about the educational progress of your blind son/daughter?
- How do you help your blind son/daughter to become effective at school/in his schooling/ if you do not help, why?

The responses of all parents except case 1 show they did not discuss about the education of their blind son/daughter with teachers. They gave their own reason for this. Case 2,3,4 described that they did not go to school for discussion because teachers did not invite

them for discussion. They believe that without invitation from the school asking teachers about the educational progress of their blind students is interference on the work of teachers.

Case 7. Stated her response

I did not discuss with teachers about the schooling of my son. I myself is illiterate so how can I discuss about education/learning. I think teachers might know about me/ i.e. I am illiterate) that is why they did not invite me for discussion.

Case 5 and 6 reported that they did not go to school before in order to ask about the educational progress of their blind son/daughter because of the lack of time. They reported, it was important to ask teachers about their children's schooling although teachers did not invite.

Case 1 explained he sometimes discusses with two special education teachers about the schooling of his blind son. He reported

Sometimes, I ask two female teachers how my son accepts the situation (the schooling) when I take him from school to home and vice versa. Since my son was new to the school /strange to the school/ I was taking him from and to school . . . Teachers did not call or invite me to discuss about the schooling of my son.

The reports of parents on how they help their blind children to be effective academically differ from parent to parent. Parents (case 2,3, and 7) reported that they did not help their blind children to the lack of know how to help them. Even they did not encourage their blind children morally. According to the reports of their blind children, the above mentioned parents do not encourage them morally because they do not have any hope on their children's education and future job opportunity.

However parents (case 1, 4,5 and 6) help their blind children in different way. Parents (case 4,5, and 1) responded that they encourage their blind children morally. For example case 4 stated as follows

I advice my blind son to be Clever in his schooling and order his siblings to help him in some school work

Case 6 (the mother) responded as follows

I always encourage her morally. I told to her, if she studies hard, she will be successful academically and in all her life. We hired tutor for her and he help academically.

The responses of their blind children (case 4,5,6 and 1) also assured that their parents encourage them morally.

It seems that the beliefs held by parents about the potential of their children education has its impact on their effort to help their blind children in schooling. Those parents (case 1, 4,5, and 6) who believe their blind sons/daughters can be effective in their education like sighted encourage their children in different ways. On the other hand parents (case 2,3,7) who believe their blind sons/daughters cannot be effective (successful) in their education do not encourage (help) their sons/daughters. Scholars like Fielder et. al (1993) stated that children behave to large extent the way we expect them too. Their behavior is shaped by how they see the environment and how the environment sees them. If we expect them as helpless, it increases their chances of becoming so, regardless of their circumstances. Hence, the parents (case 2,3,7) expectation of their children educational success may affect the educational progress blind children.

Different scholars assert that the encouragement given by parents has a strong effect on the overall personality development of children. For example Singh (1983) in Tirussew (2001) stated that the amount of encouragement in verbalization and independence training is mostly correlated with interest, intelligence and career development of children. Moreover, Kuppuswamy (1984) described there is a relationship between the child's experiences and the formation of self concept. When parents accept their children as person of intrinsic merit regardless of their behavior they are likely to help them develop positive self concept. Coopersmith in Kuppuswamy found that there is a relationship between positive self concept and good school achievement. Whereas poor self concept leads to deficiency in school performance. Besides this children with poor self concept tend to be more anxious and less well-adjusted in life, than those with more adequate self concept. Hence encouraging the blind individuals in different aspects of life by emphasizing on their positive potentials will help them to develop self-esteem. Scholars like Ysseldyke and Algozzine (1995) described that with appropriate assistance, people who are blind achieve academic success just like their neighbours and peers. Garwood (1983) also stated that there is substantial agreement among vision educators and researchers that blindness itself is not detrimental to academic achievement if favourable educational opportunities are available in the school and home. This shows that the life of blind children will be either better or worse depending on the way that their parents treat them.

4.8 Parents' belief in involving their blind children in different home activities

Based on the following interview guides parents explained about their role and belief in involving their blind son/daughter in different home activities.

- Do you think that letting children do different tasks at home according to their age, sex, etc is good? If yes, what for?

- Do you do the same to your blind son/daughter? If not why? If so how do you help them to do effectively?
- Do you think blind children can help their parents in different tasks as sighted do?

All parents stated that it is important to let (order) sighted children to do different activities at home or outside. As a result they can help their parents in different work. As the same time it may help them to develop skills, which are very important for independent living in their future life. However, parents have somewhat different idea concerning the participation of their blind son/daughter in different home activities.

Case 2 reported

my son did not participate in any task, I do not ask him to do any activity or task. I think letting (ordering) him is like exposing him for danger.

Case 7. Explained her idea as follows

He is once blind how can he do different tasks? As you see our job is farming. So he cannot do this and help us. For example if we ask him to water 'chat' farm how can he do? If so he may destroy the plant by standing on it.

Case 3,4, and 1 have the same idea like case 2. They believe letting (ordering) blind children to do different tasks may induce them to encounter additional impairment. So they did not allow their blind sons/daughter to involve in different tasks.

Case 5. Described

Of course, at the beginning, I did not use to give him any task to do. Then, when I was busy, I used to ask children from neighbours to get me something from shop (Kiosk). But after

sometimes, he asked me to let him do something at home and I started giving him to perform different tasks. During the first days, I used to give him more clarification and warning to get him do something, so as to avoid any accident. But now he knows everything and helps me much in his leisure time.

Case 6 the mother explained

Before she become blind, she was helping me with different home activities. But after she become blind the whole thing become complicated. She was unable to move efficiently. Hence, stopped give her to do any work. But after one year, she told her father and elder brother that she was insulted because of not involved in different home activities. Since then I have started to give her to do some home activities.

Case 6, reported that her daughter can perform so many tasks at home like preparing food, cleaning of house, fetching water and the like. In addition, the blind children were asked how much they involve in different home activities.

Accordingly case 2 (blind son) explained his experience as

All what I do is eating, sleeping, and sometimes studying. I do not do any thing other than that. Let alone helping my family, I do not even know how to take water out of the pot. When I move to do something at home, they tell me to sit down and tell then what I want. They say you will break objects and you will be hurt. My mother and brother do everything in the house. These days, my brothers seems to have been very much board of their orders to help me. I feel pity about him and hate myself. I tried to do tasks so many times but they discourage and gave warning not to do.

Case 7 (the blind son) explained his experience as

I do nothing except studying and doing my home work. This is because my parents do not want me to do anything. When I was able to see, I could do everything. But now I left everything for them.

Case 7 (the blind son) also reported that how his parents discourage him when he want to do something to help his parents. He stated one among the many insulting expressions of his parents as

So one day I want to participate in planting together with my parents. So I went to the farming place where they were doing. As I tried to do, they said please do not do. This is not the work of blind person. But you can sit and play with us. As soon as I heard such patronizing expression, I left them and return to home.

Case 3 (the blind son) reported the situation as follows

I would be very happy if I could work we are very poor. My mother bakes injera and sells to make livelihood and help us. My younger brother sells lottery tickets. I always want to work but my mother does not allow me. She says she does not want to see me sufferering in doing things as long as she is in life. She says you will bump with something when you want to do something. So I do not help my mother as my brother does.

Case 4. (the blind son) stated

I never do any distinguished job. My mother, too, never told me to do anything. But my mother orders my sighted brothers and sisters to do

every thing. My mother punishes and gives warning when they fail to do their share. At that time I wish I were one of them. I feel Jealous. This is because I feel that they are considered as important for the family by my mother, on the contrary, I feel, I am not important for the family. Sometimes I ask my self, who am I? I feel inferior from others since I am not a contributing member of the family.

Case 1 (the blind son) also reported he does not participate in any activity to help his family when he was in the rural area as well as now. Where as children (case 5 and 6) expressed they are helping their family in some types of work.

Generally the belief of parents (case 1,2,3,4,7) shows blind individuals are unable to participate in different daily tasks as sighted one. In the other way round, they believe blind persons do not have any potential to do different activities and always need help.

Different scholars assert letting blind sons/daughters to do different tasks can help them to develop a sense of belongingness to the family and positive self concept. Where as failure to recognize the value and possibilities of blind individuals may lead to their being neglected or left out (Werner, 1994). This is also seen in this study from the responses of blind children (case 1,2,3,4 and 7). It is known that adolescence is a period when independence is highly valued by the individual him/herself. Accepting self as a person of worth and contributing member of the family or society is the main objective of adolescence (Scholl, 1988). All the blind students included in this study are from early to late adolescents. It is extremely important that blind individuals, especially by adolescence develop the independent living skills taken for granted by sighted people. They need to be taught such skills as how to work house hold appliances, eat at the table, and prepare food for cooking (Hallahan and Kauffman 1991). Werner, (1994) stated a family that farms the land can begin

to include a blind child in gardening and farming activities from early age. This will increase his or her skills and give a sense of being part of the life and action of the family. Further Alonso, Moor, and Raynor (1978) in winzer (1987) described the different experiences of children with disabilities have a great role in the type of feelings held about themselves. They can develop a sense of worthiness by doing things for them selves, get positive approval in a variety of activities and feelings accepted and loved by parents and others. When children with disabilities are always treated as if they are not capable, they may start to believe it and lose interest in trying. This is also reflected in this study. For example the response of case 7 (the blind son) clearly shows the above description.

*One day I want to participate in planting chat together with my parents
So I went to the farming place where they doing .As I tried to do, they
said please do not do. This is not the work of blind person. But you can
sit and play with us. As soon as I heard I left them and return to home.*

Werner also explains as blind child grows up, he or she can learn to do many kinds of work. The different kinds of work that blind persons can do are weaving, carpentry, cabinets and furniture making, pottery making, broom making, chalk making, gardening and vegetable raising, managing a small store or street shop, rope and string making, teaching, playing music and others. But the responses of parents included in this study (case 1,2,3,4, and 7) clearly showed they fail to understand all these potentials (capabilities) of blind persons.

4.9 The role of parents in developing the social interaction of their blind children

The social interaction of blind persons is highly dependent on the attitude of sighted persons towards them, the attitude of blind persons towards sighted and themselves, and their orientation and mobility skills. Parents can play so many roles in developing the interaction ability of their blind sons/daughters. This is possible when parents have proper know how and

attitude about blindness. Their ways of discipline, attitudes held by them about the blind children, and their interaction with each other have a great impact on the social development of blind children. To know how much parents are involved in helping their sons/daughters to have good social interaction skills, the researcher asked the parents about their belief and role.

The response of parents on how they help their children to interact with sighted peers in the village or out of school is as follows.

Case 2 (the mother) reported that she does not do any thing to enhance the peer interaction of her son. Rather she does not want her son to play with his peers during his spare time. She has the following reason for that

I do not want my son to go to play with sighted peers. Because his sighted peers are children who do not want to play simply sitting. They run, jump, play ball, and the like. But my son cannot do these. So when his sighted peers play indifferent way he may feel bad.

Case 2 (the mother) also reported sometimes she and his brother chat with the blind son which was considered as play by her in order to make the blind son feel free (relax). Her son also reported his parents reaction as follows.

I do not play mostly with my peers because my mother and father always advise me not to go far from the house alone. . . they fear I will encounter (face) something which might cause damage to my body parts.

Case 7 (the mother) responded that she does not play any role to help her son to interact with sighted peers. She has similar idea like case 2

Case 3 (the mother) responded that she does not do any thing to enhance the peer interaction of her blind son intentionally. Instead she is interested to see her son sitting and playing with family members. She does not want him to go far from the house. But sometimes when she

saw him talking with sighted peers in the village she will be worried on the reaction of sighted peers (i.e. the type of language they used). She explained her fear as follows:

Mostly I do not want my son to play with village peers. since most of them have bad behaviour. When they quarrel each other, they say “Denbara”(can not see properly), ‘Ewire’ (blind), and the like. Even when they play, they use such words. So that I fear he may feel sad when he heard such bad expressions.

Case 3 (the mother) developed such kind of fear as a result of her previous experience. This experience as stated by her was as follows

I think my son was about 6 years old, two sighted peers of my neighbors were playing with him. During this time, they took his playing material with force from him. They were teasing him by saying where is your playing material?, the bird took it, you. . You blind. Then he cried and told me. Soon I cried too and quarreled with them and their family.

Case 4 (the mother) said that she does not do any thing to promote interaction of her blind son.

If he wants to play, he can do at home. His brother and sisters are mostly with him.

Case 5 (the mother) responded that she lack time in order to help her blind son to play efficiently and freely with his peers. But she did not protect the son to play with his peers. She said

I am always too busy to see how he interacts with his peers . . . But I do not forbid him to go to them because I do not have any alternative. He is the only son in the house. He cannot simply sit alone when I go to work . . . I always advise him not to quarrel.

She (case 5) also reported, at the beginning (i.e. when the son became blind), she always asked him to sit simply in the house. Because of this her son was not happy. He was requesting her to play with others several times. She did not allow him since she believed that the son may bump against anything. But one day she decided to allow her blind son and she prayed to God to protect her son from danger.

Case 6 (the mother) explained that she does not want her daughter to go to her sighted peers' house. She said.

I do not want my daughter to go far from the house. Since she cannot see, some persons may do immoral things on her such as rape. But her father always advises me not to forbid her to go where she wants.

Case 1 (the father) responded he did not do any thing intentionally to foster the peer interaction of his son. His son also reported that he spent his time mostly by reading and chatting with his father.

When we see the responses of parents, some of them are more protective than others. For example case 2,3,4, and 7 are more protective than case 1,5and 6. But all of them do not play any role to foster peer interaction of their blind children.

4.9.1 The participation of blind children in different social matters and their parents' reaction

The involvement of blind individuals in different social matters like church/mosque, weddings, birthday celebrations, visiting relatives and sick persons, recreational centers and others is essential. It can enhance social skills. Besides it is valuable for the cognitive and mobility skills development.

The blind sons (case 2 and 3) reported that they go to church only twice a year. i.e. to celebrate 'Timket' and for the annual holiday of st. George church found in the town. Their

parents do not take them to church. Besides they reported that they never go to weddings, birthday celebrations, to visit relatives and to visit different recreational centers. For example

Case 2 (the blind son) said

No, no, let alone taking me to visit out relatives, even my brother, does not go that he must take care of me here at home where our parents are gone.

Case 3 (the blind son) also noted that he has the same experience like case 2.

Case 7 (the blind son) reported that he mostly spends his time out of school by studying and doing homework listening radio, attending religious education at church. He never went to visit relatives, and sick persons, weddings, birthday celebrations and recreational areas, He noted that he feels very happy or free when he is alone. He expressed his disinterest to visit relatives and the reaction of his parents as follows

Not going to visit them, I am not happy when they come to visit my family. Whenever they come here, the first question they ask is about my sight problem. They keep saying, Do you get better? Worse than this, they say how a pity, a handsome person like you becomes blind. They consider me helpless ('Kentu')... My parents do not permit me to go to different places. They always express their fear of accident

Case 1 (the blind son) also has no interest (feeling) to visit relatives. The reaction of his relatives is the same as case 7. He responded that his father takes him to church only and tells him about everything they encounter. But he does not know any place other than church.

Case 4 (the blind son) explained that he used to go church together with his siblings sometime. He did not go to visit recreational centers before because his brothers did not take him. He said.

I cannot do anything alone. If I want to go somewhere else alone, my mother does not permit. She orders one of the siblings to go with me. She always worries about me. I told her so many times not to think like that but still she fears something bad will happen to me.

He reported his mother and siblings always consider him as, this makes him baby, feel inferior. He needs independence but his mother does not accept.

Case 5 (the blind son) reported he never went to church before. Because he and his sighted friend are not interested to go to church. Sometime, he goes to some recreational places together with his friend. He said

My friend can play table tennis and swim but I do not do it. I think it seems difficult to me though I did not try before.

Case 6 (the blind daughter) reported her father takes her to different places in the town (Shume Ambo recreational center, Marine recreational center. Pastries, and others). She further stated that her father explained about all things around them. She also reported that she visits her relatives. She is interested to visit them. She also goes to weddings, birthday celebration and the like.

Table 5: A summary of spare time activities of blind adolescents and their participation in different social matter

Cases	
Case 1	Studying and attending religious education
Case 2	Studying and chatting with family member only
Case 3	Studying and chatting with family members
Case 4	Studying and chatting with family members
Case 5	Studying and playing with his peers and going to recreational places
Case 6	Studying, discussing with her peers about schooling, playing, going to recreational centers with her father, participate in weddings, birth day celebrations, visiting relatives, and the like
Case 7	Studying, listening radio and attending religious education

When we see the social interaction of blind sons/daughters most of them are less interactive. They do not interact with their peers. As the same time, they don't participate in different social matters. Comparatively, Case 5 and 6 are more interactive than others.

According to Tayler, R.L. Sternberg, L. and Richards, S.B. (1995) Hallahan and Kauffman (1991) described that the interpersonal skill (social interaction skills) of blind individuals is directly related to the reaction or attitude of sighted person. When those who are sighted do not accept blind persons, the interpersonal skills will be hindered. Tuttle (1984, 1987) in Moore and Wade (1991) noted that how sighted people treat and react to individuals who are blind affect the interaction and self concept of them. It is also reflected in this study.

The responses of the blind sons (case 7 and case 1) clearly reflect the above idea. i.e. case 7 stated his disinterest to visit relatives as follows

Not going to visit them, I am not happy when they come to visit my family. Whenever they come here, the first question they ask is about my sight problem. They keep saying, Do you get better? Worse than this, they say how a pity, handsome person like you became blind. They consider me helpless ('kentu')

Case 1 (the blind son) also reported he is not interested to visit his relatives because his relatives have the same feeling like case 7's relatives.

The above responses given by case 7 and 1 shows us the blind person wants to be treated like every one else. Most blind people do not seek pity or even unnecessary help (Hallahan and Kauffman, 1991). Besides the social interaction of blind children (case 2,3 and 4) is highly restricted by their parents. For example parents (case 2 and 3) do not permit their blind sons to play with sighted peers. Because they believe their blind son will be teased and unable to play like sighted one. Such kinds of belief also reflected by many parents around the world who have children with disabilities as stated by Werner (1994). Parent (case 4) also protects her son from interacting with other sighted peers in the neighbour, because she fear accident. Caulcrick (1979) stated the blind children should be taken out along with others to see friends and relatives. This will promote his sense of belonging. But most parents in this study fail to do this.

4.10 The ability of blind sons/daughters to move independently and their parents role

The blind students were asked different questions to know their mastery level of the environment where they live. In addition to this parents were also asked to know how much they help their children to move independently

4.10.1 The ability to move from school to home

Blind children (case 2,3,4,7) reported that they are always going to school with the help of their siblings they hold the arm of their sibling and walk either slightly behind them or side ways. Their parents do not allow them to go alone for fear of an accident.

Blind children (case 5 and 6) reported that mostly they went to school together with their peers. That is, they use human guide. But rarely use cane to move independently. Parents of case 5 and 6 responded that they do not protect their blind children when they want to move independently by using cane. Even if they said like this, they fear that their children may face some accident when they go alone.

The blind son (case 1) responded that at the beginning he was going to school with the help of his father. But after some time, he developed the skill to go independently. Then he used to go alone. The father responded that at the beginning he was telling about all things available in the road to help the blind son to move independently. Through time, he understood that his blind son can go independently from school to home.

4.10.2 The ability to move independently around the village and other places in the town

Case 1, 3 and 4 reported that they are unable to go from their house to far distant independently. Their parents do not permit (allow) them to go independently. Case 2 and 7 responded that they know only the road from school to home and church to home.

Case 5 (the blind son) reported that though he did not went alone before to some places in the town such as the swimming place of lake Tana, Stadium and Table tennis playing places, He knew them properly and believe that he can go independently. But his mother did not play any role to help him to walk independently.

The response of case 6 (the blind daughter) is also similar with the case 5. She knows some places in the town. But she did not go to such places alone.

According to the responses of the blind students, all of them mostly use human guide. Although human guide undoubtedly enables blind persons to have greatest freedom in moving about safely, it is harmful. Because too much reliance on another person develops dependency on the part of blind person (Hallahan and Kauffman, 1991 and Hill, 1986)). There are different factors which can affect the mobility skills of blind persons. Age at onset of visual impairment, motivation (interest to move) on the part of the blind and over protective environment. According to Hallahan and Kauffman (1991) determining what makes blind person's mobility skills better than other's is difficult. It seems early loss of vision is more harmful to mobility than later loss. But this is not always true. The availability of different environmental factors determine the mobility skills of blind individual. Warner and Kocon (1974) and Warren, Anoushain, and Boolinger (1973) cited by Hallahan and Kauffman (1991) described that those individuals who become blind later in life may have greater adjustment difficulties. But with proper motivation they could be profitable from visual frame of reference acquired through previous experiences. They can relate their new reliance on non visual modalities to previous visual perceptions. Hence, age at onset only does not predict individual's mobility skill. For example when we compare case 5 (the blind son) with case 7 (the blind son), case 7 lost his vision later than case 5. But case 5 has better mobility skill than case 7. This is because; the parents of case 7 are more protective than case 5. Besides case 7 has greater adjustment problem. He responded that he feel free when he is alone. On the other hand when we compare case 2,3 and 4 (blind sons) with case 5 and 6, the first three cases are less mobile than the later two cases. This is because of their family environment. The parents of case 2,3,4 are more protective than the parents of case 5 and 6.

Chapter Five

5. Summary, Conclusion and Recommendation

5.1. Summary

The main objective of this study was to investigate the attitude of parents towards their blind children. More specifically, this study tried to get answers for the following basic questions

- How did parents feel or react to their children's blindness?
- What are the beliefs held by parents about the causes of their children's blindness?
- What were the types of treatment sought by parents for their children?
- What are the beliefs held by parents about their blind children?
- How much are parents involved in the academic and non-academic skill development of blind children?

To get answer for the above basic questions, interview incidental observation and informal talk were used.

The availability of different factors may facilitate or hinder the nature of attitude held by parents about blindness and their blind children. Among these, the availability of support from community, governmental and non-governmental organizations have its own impact (contribution). According to the findings of this study except the financial support they receive from the regional educational bureau that is birr 50 per month, they got no other form of support.

It has been already explained by so many scholars that the presence of a child with disability affects the family in different ways. Parents show different reactions when they realize that their children are with some kind of impairment. These are shock, denial, anger, sadness, and rushing from doctor to specialist or from witch doctor to local healer hoping for

miraculous cure (Ross, 1988). This has been observed in the findings of this study. The stereotypical beliefs held by the society in the region that blind individuals are helpless or useless and blindness is a result of some sins committed in the family. Misdeeds of parents, curse or bewitchment influenced some parents to have a feeling of guilt and disgrace. This in turn affected the social interaction of these parents.

The belief held by parents about the causes of their blind children depends on the educational level, religion, culture and other beliefs. Parents report indicated that the cause for children blindness varies from the real cause to sin, evil eye, curse, misdeed in previous life, misfortune or fate. Besides, the type of treatment sought by parents to get cure for their children depends mainly on the beliefs held by them. Parents in the study took blind children to different types of treatment. i.e. from modern medical center to traditional healer, witchcraft, prayer, and holy water.

The knowledge or belief held by parents about the learning capabilities of blind people and their blind children varies from parent to parent. For instance, case 4,5,6, and 1 believe blind individuals can learn and perform effectively like sighted students if the necessary support is given to them. Parents (cases 1 and 4) held such belief after they got information from other people.

On the other hand case 2,3 and 7 believe blind children cannot learn and become successful like sighted children. They said their blind sons will not get any job with their own effort like sighted unless the state provides them with some kind of work which can be done by 'weak' person like blind. Parents effort to help their sons/daughters to be academically successful in commented with their beliefs about the learning capabilities of blind children. Case 2,3 and 7 do not play any role to help their blind sons. Where as, case 1,4,5 and 6 encourage their blind children morally. In addition case 6 hired tutor for the blind daughter.

Different scholars assert allowing blind sons/daughters to do different tasks can help them to develop a sense of belongingness to the family and positive self concept. The parents in this study (case 1, 2, 3, 4 and 7) responded blind individuals are unable to participate in different tasks as sighted. This shows, that blind children are not contributing of the family like sighted. Most parents do not tend to encourage blind children to involve in different household chores. On the other hand parents (cases 5 and 6) reported blind children are able to participate in different tasks as sighted.

Parents effort to develop the social interaction of blind children various from family to family. It is related with the beliefs held by parents. Case 2,3,4 and 7 do not do any effort to develop the interpersonal skill of their blind sons. Instead, case 2,3 and 4 are too protective. They do not allow their blind sons to play with their sighted peers in the village. Because they fear their blind sons will be teased, feel sad for being unable to do as the sighted and may encounter accident. On the other hand, case 5 and 6 are not protective like the above cases. The participation of blind children in different social matters except case 6 is limited. All parents included in the study do not seem to know the importance of involving blind children in different social matters. Besides, parents do not put any effort to develop mobility skills of blind children, which actually is very critical for their social development.

5.2 Conclusions

1. Parents expressed different reactions as a result of having blind children. These were shock, denial, anger and sadness.
2. The beliefs held by parents about the causes of their children's blindness varies from the real cause to sin, evil eye, curse misde in previous life by parents or grand parents, and fate.

3. The type of treatment sought by parents for their children's blindness depends on the beliefs held by them about the cause of the problem.
4. Parent beliefs about the learning capabilities of blind children mainly depend on the type of information they got from other and their educational level. This means that, those who got favorable information about the learning potential of blind children and those who are in better educational level believed that their blind children have the same learning potential like sighted.
5. Parents who believe blind children are unable to accomplish house hold chores like the sighted did not involve their blind children.
6. Those parents who fear, their blind children will be teased, unable to play like sighted, and may encounter accident are too protective, and did not allow their children to play with sighted peers.
7. Parents who are in better educational level seem to be less protective than those who are with no education.
8. There is a relationship between parental beliefs and their involvement in the educational and social skill development of blind children. Those parents who have positive attitude towards their blind children play positive role for their children.
9. The attitude of parents about, blindness and their blind children affected the self concept, social interaction skill, daily living skills, orientation and mobility skills which are inter related to each other.

5.3. Recommendations

In light of the findings, the following suggestions are forwarded.

1. Since most parents in the study have negative belief about the potential of blind person and their blind children and lack the know how on how to help their children in schooling and social skill development, they require professional help. So concerned non-governmental and governmental organization should extend their service to these parents.
2. In order help parents to be involved in their children's education, teachers should collaborate and work with parents.
3. Special education teachers in the school should design a regular meeting for blind parents, hence parents will get other parents which in turn help them to share experience.
4. The regional education bureau should extend its service in educating parents in addition to the financial support

Appendix A

K`LD< 3/4T>Á[Ó nK SÖÃp SS]Á 'Øx<

3/4²=I Ø“f a“ -LT `LD< T3/4f K}d“†“< MÐ%o†“< ÁL†“< Ó”³u? >SK"ÿf

□“ K>ÖnLÃ □ÉÑ□†“< 3/4T>ÁÁ`Ñ<f T>“ U” □”ÁT>SeM KT`p ”<::

3/4`LÏ 3/4fUT`f Á[Í _____

Y^ _____

ï □ _____

□ÉT@ _____

GĀT•f _____

¾u?}cw >vLf w³f _____

¾MĐ< lØ` _____

¾Ö?"" f □]i _____

K?L >"M Ñ<Ç}— "K _____

¾MÌ (Mĭ...) □ÉT@ _____

¾Ö?"" f G<' @ □ _____

SËS]Á T¾f ¾}d'uf Ñ>²? _____

1. <Ó\ ŸSðÖ\ uðf Mĭ- ¾²=I - Ñ' f <Ó` K=ÑØS"< Ñ<LM wK"< >eu" Á"<nK<;
2. Mĭ- >Ñ'e"< SJ'<" □"Èf >'l;
3. Mĭ- >Ñ'e"< SJ'<" c=Á"<l KSËS]Á Ñ>²? U" }cT-f; U" >K<;
 - 3.1. U" >Å[Ñ<;
4. u>ÖnLÑ KMĭ- ÁÅ[Ñ<Kf I;U" (²S"©U J' vIL©) "K u='Ó~;
5. ²SÉ" Ô[u?f Mĭ- >Ñ'e"< SJ'<" c=cS<@ □¾SÖ< ÑÖÑl 'u`; ŸJ' u<Ó\ ²<]Á U" □"ÇK< u='Ó~;
6. KMĭ- >Ñ'e"< SJ" U; "Áf U"É" ""< ÑLK<;
7. ¾Mĭ<G< T¾f Sd" ufÇ^<G< LÑ ÁeŸ}K"< <Ó` 'u`; "K u=Áw^M~;
8. ¾Mĭ- >Ñ'e"< SJ" u>ÖnLÑ Tlu^© Ó" -<'f- ÁeŸ}K" >K<□© }î• >K; "K u='Ó~; KUdK?
 - 8.1. uTlu` u°É` uY^" uK?KA<U x□-<
 - 8.2. ŸÔ[u?f Ò` vK-f Ó" -<'f;
 - 8.3. Ÿ²SÉ Ò` vK-f Ó" -<'f;
9. Mĭ- T¾f Ÿ}d""< ÈUa uØ\ G<' @ □ □"Ç=ÁÉÓ" Ø\ Å[Í □"Ç=Å`e Ÿ²SÉU J' ŸÔ[u?f ¾T>ÁÅ`ÓM-f □Ñ³ >K<; Ÿ>K u=Áw^M~;

10. KMĪ- >ÖnLÃ □ÉÑf uÑ”²wU J’ fUI f uSeÖf ¾T>ÁÓ’- ÉĪf >K; “K ¾ÉĪ~”
 YU“ ¾T>ÁĀ`Ñ`<” ĵ”a’ @ u=’Ó\~;
11. ¾MĪ- >Ã’e`< SJ” u” Ñu=Á<G<“ u>ÖnLÃ Y^<G< LÃ ÁS×`< ĵî• >K; “K
 □”Èf □”ĀJ’ u=’Ó\~;
12. MĪ- fUI f u?f ¾Ñv`</¾Ñv`< SŠ ”`<;
13. >É T¾f ¾}d`< MĪ um □Ñ³ u=Á[ÓKf T¾f □”ĀT><K<f ufUI ~ ”<Ö?□T
 K=J” Ā<LM wK” ÁU“K<; ŸJ’ □”Èf;
14. MĪ- fUI ~”(…) Ÿ}T[(<) u%EL ”Āðf T¾f □”ĀT><K<f Y^ ÁÑ—M (□Ñ—
 K<) wK`< }Yó ÁĀ`ÒK<;
15. MĪ- u”Āðf IÃ”~ (….) ”<eØ >Ã’e`< eKJ’ (’<) w%o K=ÑØS” (Tf) Ā<LM wK`<
 ¾T>Áeu<f <Ó` >K;
16. MĪ- ufUI ~ (….) Ø\ ”<Ö?f □”Ç=ÁS× (□”É□S×) ¾T>ÁĀ`Ñ< Ø[f >K; “K
 uU” SMŸ< □”ĀJ’ u=’Ó\~;
17. YKMĪ- ¾fUI f G<’ @□“ >ÖnLÃ □ÉÑf ŸK?KA< T¾f ¾}d`“†”< MÐ< ”LD<
 Ò` }”ĀĀ□<G< □”<nL<G<; ”<ĀĀ~ U” ĀSeM ’u` ; Ÿ”<ĀĀ~ ÁÑ—<f ØpU >K;
 u=ÑMi<M~
18. MÐ‡” □”Ā □ÉT@Á†”<“ <KA□†”< □”Ç=G<U ĩ□†”< u}KÁĵ Y^ Td}ø Ø\
 ””< wK`< ÁU“K<; SMe >- ŸJ’ KU”;
19. T¾f K}d`</K}d`f MĪ- u}^ 1. 19 ¾}Ökc`<” ÁĀ`ÒK<; “MJ’ KU”;
20. u>ÖnLÃ T¾f ¾}d`“†”< MÐ< u}KÁĵ Y^<- uSd}ø ”LD%o†”<” ÁÓ³K< wK`<
 ÁU“K<; KUdK? uU” uU” Y^<- uSd}ø;
21. T¾f ¾}d`“†”< MÐ- u}KÁĵ Y^<- Sd}ø □”Ç=< (□”Éf<M) ¾T>ÁĀ`Ñ<f □Ñ³
 uU” SMŸ< ””<;
22. MÐ‡” kØKA ”Ā }²[²f x□-< Āµ SH@É (□”Ç=H@Æ TÉ[Ó) Ø\ ””< wK”
 ÁU“K<;
- 22.1. ”Ā}KÁĵ u?}ĵ`e+Á“f“ SeÑ>Ê<
- 22.2. ²SÉ“ ¾□SS c`< KSÖ¾p’ Kc`Ó“ KMĀf’ ”Ā}KÁ¾¾ ¾Ów¹ x□-<

- 22.3. □”Ç=G<U “Å}KÁ; S“— x□-<
- 23.□`e- T^{3/4}f ^{3/4}d”<” (“f”) MĪ-” ŸLÃ “Å}Ökc<f x□-< Ã²< ÅH@ÇK<; “ÅU
□”Ç=H@É/□”ÉfN?É ÁÅ`ÒK<; "MJ' KU”;
- 24.u>ÖnLÃ ŸLÃ “Å}Ökc<f x□-< □“ K?KA<U >”vu=-< T^{3/4}f ^{3/4}d“f/^{3/4}d”</MĪ-”
u}ÅÒÒT> uS`<cÉ >”vu=”<” □”Ç=Á`<p /□”É□`<p/ ^{3/4}T>ÁÅ`Ñ<f Ø[f >K<;
“K u=ÑMi<M”; "MJ' KU”;
- 24.1. “Å²=I x□-< uSĒS]Á Ñ>²? >wa-f ŸH@Å/< u%EL uK?L Ñ>²? Kw%ö<
□”Ç=H@É ÁÅ`ÒK<; "MJ' KU”;
- 25.MĪ- Ÿu?f “Å fUI f u?f ^{3/4}T>H@Å`</^{3/4}UfH@Å`< ŸT” Ò` ”<;
25.1. Kw%ö< SH@É u=ðMÓ Áu[□~□M “Åe ÅÿK;K<□M; ^{3/4}T>ÿK;K<f
ŸJ' KU”;
- 26.ucđ` MĐ<- “Å }KÁ; x□-< ^{3/4}T>”kdkc`</^{3/4}Uf”kdkc`< ŸT” Ò` ”<; (Kw%ö< </^a/
“Åe uc`< □`Ç□;) Kw%ö< S”kdke u=ðMÓ ^{3/4}ÿKÿK<uf Ñ>²? >K<; "K KU”;
- 27.u>ÖnLÃ MĪ- Ÿx□ x□ □^c<” (dD”) <L uum G<'@ □ SÕ´ □”Ç=<M/□”Éf<M
□“ Ÿ>”vu=”< Iw[]cw Ò` □”Ç=Ñ`~/□”ÉfÑ`~ ^{3/4}T>ÁÅ`Ñ<f Ø[f >K; "K □”Èf
”<;
- 28.MĪ- ucđ` Ñ>²?<”/”/ □”Èf ”< ^{3/4}T>ÁdMđ`</^{3/4}U□dMđ`</
- 29.MĪ- ucđ` T^{3/4}f ŸT>< ^{3/4}ÉT@ □ÿ<Ä‡ Ò` □”Ç=Ÿ`f/□”ÉfŸ`f/ ÅðpÇK<; "KJ'
KU”;
- 30.MĪ- uf`õ Ñ>²?< uw³f ŸMĐ< Ò` ÅÚ`□M;

Appendix B

K}T]-< ¾T>Á[Ó ¾nK SÖÃp SS]Á 'Øx<

□ÉT@ _____ ¾iõM Á[Í _____
 i□ _____

1. "LD<I u>" } (^) LÃ ÁL†" < ¾" Åðf } Yó U" ÃSeLM; KUdK? fUT fI" (i") Ú`cI
 (i) e^ □" ÅUfÃ" (, " " "LD<I"U/i"U/ J' □^eI" (i") S`Çf □" ÅUf<M ÁevK<;
2. ufUT fI Ø\ Á[Í □"ÉfÁ`e ¾T>ÁÁ`Ñ<MI □Ñ³/i/ >K; "K uU" SMÿ< □"ÁJ'
 wfÑMîM~ (BM~);
3. "LD<I (i) KfUT fI (i) " <Ö?f Sd" f TÉ[Ó ¾'u[v†" < 'Ñ` Ó" ÁLÁ[Ñ<MI (i) 'Ñ`
 >K; ÿJ' U"É" " <; ÁLÁ[Ñ<uf U; "Áf U"É" " <;
4. uu?f " <eØ u?}cwI" (i") J' ^eI" (i") KS`Çf u}KÁj Y^-< fd}óKI (i); ÿJ' uU"
 SMÿ<; "MJ' KU";
5. "LD<I (i) ¾}KÁj Y^-<" □"Éfc^ (J) ÃðMÒK<; ÿJ' Y^" <" uf; ;M □"Éfc]/^/
 ÁÓ²<HM(hM) □"Èf; "MðKÑ< KU";
6. u}KÁj Y^-< vKSd}õI/i/ "Ã"U vKS□²I ¾T>cTI 'Ñ` >K; wfÑMîM~;
7. ucð` T¾f ÿT><f ¾°ÉT@ ÕÅ—I (i) Ò` w²< Ñ>²? fÝ"□KI (i) "MJ' KU";
8. "LD<I w²< Ñ>²? uf` õ Ñ>²?I (i) ÿcð` MÐ< Ò` □"ÉfÝ" f ÃðpÇK<; "MJ' KU"
 ÃSeMHM (hM);
9. ÿf/u?f " <ß Ñ>²?I"/i"/ uw³f ¾U□dMð" </ð" </ □"Èf " <;

APPENDIX A

Interview Guide for Parents

The main purpose of this study is to investigate the attitudes of parents towards their blind children. More specifically the study will investigate parental cognition, feelings or reaction and their involvement in the personality development of their blind children.

- Educational level
- Occupation
- Sex
- Age
- Religion
- Age of the blind child
- Health records of the blind child
- Date he/she first become blind
- Number of family
- Number of children
- Health records
- Is there any other disabled child

1. Did you think your child could face such a problem before it happened?
2. How did you know your child is blind?
3. How did you feel when you first know your child is blind? What did you say? What did you do?
4. What medical treatment did your child get? If you did, please specify?
5. Did relatives and neighbors use to visit your child when they knew he/she is blind? If so, what did they use to say about the problem?
6. What do you think about the cause of your child's blindness?

7. Is there any problem your child's blindness caused upon your marital bond? If there is any, could you explain it?
8. Is there any negative impact your child's blindness caused upon your social life?
Could mention them? For example
 - 8.1 In work places, social activities, etc.
 - 8.2 In your neighbor-hood
 - 8.3 In your relationship to kinships
9. Since your child became blind, is there any help you get from different bodies? If any specify?
10. Is there any organization that helps your child to enable him educated and be a better person? If any, mention the name of the organization, and what it did to your child?
11. Did your child's blindness cause any impact on your monthly income and job? If yes, please tell me how?
12. When did your child first go to school?
13. Do you believe that a blind child can be as effective as the sighted ones if necessary support is given?
14. Do you hope that your child can get employment after some qualification like the sighted people?
15. Do you think there are problems that your child will face in life only because of her/his blindness?
16. Do you put some effort to help your child be effective in his/her education? What is it?
17. Did you ever have a discussion about your child's educational and overall growth with other parents who have blind children? How was the discussion? What advantages did you get? If you could specify?
18. Do you think that it is good to give tasks to children according to their age and sex? If yes, why?
19. Do you give such a chance (in no. 18) to your blind child? If no, why?
20. Do you think that blind children can help their parents by being engaged in some tasks? In what type of tasks, for example?
21. How do you give help to your blind child to participate in different tasks at home?
22. Do you think it is good to take children to places like the following?

- 22.1 Churches and mosques
 - 22.2 To visit relatives and friends, weddings and birthday parties, different festivals.
 - 22.3 Recreational centers.
23. Do you take your blind child to the places mentioned above? Do you allow him/her to go? If yes, specify? If no, why?
24. In general, do you frequently try to let your blind child know places like the above ones? If yes, specify? If no, why?
25. With whom does your child go to school?
- 25.1 If he/she wants to go alone do you encourage him/her? If not, why?
26. With whom does your child move in the village?
27. Are there things you do to help your child to walk alone and interact with a village community on his/her own? If yes, how?
28. How does your child spend his/her time in the village?
29. Do you allow your child to play with his/her age mates that are sighted? If not, why? Do you help him/her to play without any problem?
30. Does your child often play with other children in his/her leisure time?

APPENDIX B

Interview guide for blind students

Age ----- Sex----- Grade

1. What is your parent hope about your educational success? Do they think that you can get any job after your education?
2. Is there any help they give you to succeed in your education? If there is how?
3. If there any thing you think your parents should have done for your educational success, but did not? What is that? Why do you think they failed to do?
4. Do you participated in different tasks at home? If not why?
5. Do your parents want you to do different tasks at home? If so, how they help you to perform the task?
6. Do you always play with your sighted peers in the village? If not, why?
7. Do your parents allow you to play with your sighted peers?
8. How do you spend most of your time out of school?
9. In your leisure time, do you go to the following places?
 - 9.1 Churches or Mosques
 - 9.2 Visit relatives and friends
 - 9.3 To recreational centers
10. Do your parents take you to the above places or do they allow you to go? If not, why?

APPENDIX C

ለመምህራን የሚደረግ ቃለ መጠይቅ

1. ማየት ከተሳናቸዉ ወላጆች ጋር ስለ ልጆች የትምህርት ሁኔታ ትወያያላችሁ ከሆነ የወላጆች ተሳትፎ ምን ይመስላል?
2. ወላጆች ከሌሎች ወላጆች ጋር ተገናኝተው ልምድ እንዲለዋወጡ ታደርጋላችሁ?

Interview guide for teachers

1. Do you discuss with parents about the educational progress of children?
2. Do you do a regular meeting for parents and organize parent groups?

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