CHALLENGES ENCOUNTERED BY MARRIED WOMEN WHO ARE ADVENTITIOUSLY BLINDED IN MACHAKOS DISTRICT: IMPLICATIONS FOR REHABILITATION OPPORTUNITIES IN KENYA

BY
RACHEL WANGARI NDATHE
REG. E55/10684/04

A RESEARCH THESIS SUBMITTED IN PARTIAL FULFILLMENT FOR THE DEGREE OF MASTER OF EDUCATION (SPECIAL NEEDS EDUCATION) IN THE SCHOOL OF EDUCATION OF KENYATTA UNIVERSITY
DECLARATION

This thesis is my original work and has not been presented for a degree in any other university.

Rachel Wangari Ndathe
E55/10684/04
Signature ........................................ Date: 27/10/2011

Supervisor(s) Declaration

This thesis has been submitted for examination with our approval as University Supervisors.

Dr. Rachel W. Kamau Kang’ethe
Senior Lecturer
Department of Early Childhood
Signature ........................................ Date: 03/11/2011

Dr. Donald Kisilu Kombo
Senior Lecturer
Department of Educational Foundation
Signature ........................................ Date: 03/11/2011
DEDICATION

To the Lord Almighty through whom everything has been possible. My beloved father and mother Mr. and Mrs. Evans Ndathe Nganga, My husband and friend, Moses Mwago Njuguna, my three sons, Simon, James and Victor, my late grandmother, Rachel Wangare Daudi and my brothers and sisters whom have always been my inspiration throughout the entire period of my studies.
AKNOWLEDGEMENTS

During the entire period of my study and writing of thesis, many people were of help to me and I wish to express my gratitude to them.

First and foremost, I am grateful to my supervisors Dr. Rachel W. Kamau Kang’ethe and Dr. Donald Kisilu Kombo who gave me the benefits of insight, guidance and effective supervision throughout my research.

Special thanks go to my husband and our sons for their love, understanding, material and spiritual support as well as their constant encouragement. May the Almighty God bless them abundantly.

I am also indebted to all my respondents who provided the data I needed.

I am specially grateful to my colleague and classmate Christine Matasio for being a reliable friend, good hearted and motivating during the period of my study.

Finally, I am grateful to my classmates especially Virginia Wambui Gichuke, Celina Mutisya, Daniel Kimani Mwangi who supported me in every possible way. May God bless you for your help.

Above all, thanks be to God Almighty, for grace, strength, and sustenance throughout the course.
# TABLE OF CONTENTS

<table>
<thead>
<tr>
<th>Declaration</th>
<th>ii</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dedication</td>
<td>iii</td>
</tr>
<tr>
<td>Acknowledgements</td>
<td>iv</td>
</tr>
<tr>
<td>Table of content</td>
<td>v</td>
</tr>
<tr>
<td>List of Tables</td>
<td>ix</td>
</tr>
<tr>
<td>List of Figures</td>
<td>x</td>
</tr>
<tr>
<td>Abbreviations and Acronyms</td>
<td>xi</td>
</tr>
<tr>
<td>Abstract</td>
<td>xii</td>
</tr>
</tbody>
</table>

## CHAPTER ONE

1.0 Introduction ................................................. 1
1.1 Background to the Study ............................... 1
1.2 Statement of the Problem ............................... 4
1.3 Purpose of the Study ...................................... 4
1.4 Objectives of the Study ............................... 5
1.5 Research Questions ....................................... 5
1.6 Significance of the Study ............................... 5
1.7 Limitations of the Study ............................... 6
1.8 Assumption of the Study ................................ 6
1.9 Theoretical Framework ................................. 7
1.10 Conceptual Framework ................................. 9
1.11 Conclusion .................................................. 11
1.12 Operational Definition of Terms ....................... 12

## CHAPTER TWO: LITERATURE REVIEW

2.0 Introduction .................................................. 14
2.1 Significance of Vision .................................... 14
2.2 Adventitious Blindness and its Physical and Psychological plan .................................................. 15
2.3 Challenges Encountered by Adventitiously Blinded Mothers in Kenya ............................................. 18
2.4 Socio-economic and Educational Opportunities for Married Women who are adventitiously blinded .............. 26
2.5 Methods of Raising Awareness to Provide Positive Attitude towards Married Women who are Adventitiously Blinded ........................................ 31
2.6 Assisting Married Women who are Adventitiously Blinded in the Rehabilitation Process of Adjustment ................................................. 35
2.7 Summary of Reviewed Literature .............................................................................................................. 41

CHAPTER THREE: METHODOLOGY

3.0 Introduction .......................................................................................................................... 42
3.1 Research Design .................................................................................................................. 42
3.2 Location of the Study .......................................................................................................... 42
3.3 Target Population .............................................................................................................. 42
3.4.1 Sampling Techniques .................................................................................................... 43
3.4.1 Sampling Size ............................................................................................................... 43
3.5 Research Instruments ...................................................................................................... 43
3.6 Pilot Study .......................................................................................................................... 44
3.6.1 Reliability ...................................................................................................................... 44
3.6.2 Validity ........................................................................................................................ 44
3.7 Data Collection Procedures ............................................................................................ 45
3.8 Data Analysis .................................................................................................................... 45
3.9 Ethical Considerations ....................................................................................................... 45

CHAPTER FOUR: PRESENTATION OF DATA ANALYSIS, RESULTS AND DISCUSSION

4.0 Introduction ...................................................................................................................... 46
4.1 Challenges Faced by Married Women who are Adventitiously Blinded ...................... 47
4.1.1 Marriage Stability ........................................................................................................ 47
4.1.2 Spousal Companionship and Assistance in Domestic Chores .................................. 48
4.1.3 Assistance by In-Laws ............................................................................................... 50
4.2 Socio-Economic and Educational Opportunities ......................................................... 51
4.2.1 Socio-Economic Opportunities .................................................................................. 51
5.3 Recommendations ................................................................. 77
5.4 Suggestions for Further Research ............................................ 78
References .................................................................................. 79
Appendix A: Interview Schedule .................................................. 82
# LIST OF TABLE

<table>
<thead>
<tr>
<th>TABLE</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>4.1: Current Employment Status of the Respondent</td>
<td>56</td>
</tr>
<tr>
<td>4.2: Academic Qualifications of Respondents</td>
<td>61</td>
</tr>
</tbody>
</table>
### TABLE OF FIGURES

**FIGURE**

1.1: Maslow’s Hierarchy of Needs *(Simons *et al.*, 1994) ........................................ 7
1.2: Conceptual Framework .................................................................................. 10
2.1: Division of Labour among African Women .................................................... 25
4.1: Marriage Stability ....................................................................................... 47
4.2: Spousal Companionship and Assistance ...................................................... 49
4.3: Assistance by In-laws ................................................................................. 50
4.4: Socio-Economic Opportunities ...................................................................... 52
4.5: Employment Before Blindness ....................................................................... 54
4.6: Still in Employment ..................................................................................... 56
4.7: Relief-Off Duties .......................................................................................... 59
4.8: Treatment of Adventitiously Blinded in their Places of Work ...................... 60
4.9: Planning to Build More Workshops ............................................................... 63
4.10: Further Specialized Training ....................................................................... 64
4.11: Community Awareness .............................................................................. 65
4.12: Government Role in Sensitizing the Public .................................................. 67
4.13: Rehabilitation ............................................................................................. 68
4.14: Establishment of Rehabilitation ................................................................. 69
4.15: Assistance by the Church .......................................................................... 70
4.16: Knowledge on NGOs ................................................................................. 71
# Abbreviations and Acronyms

<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>ADL</td>
<td>Activities of Daily living</td>
</tr>
<tr>
<td>AIDS</td>
<td>Acquired Immune Deficiency syndrome</td>
</tr>
<tr>
<td>ARVs</td>
<td>Antiretroviral Drugs</td>
</tr>
<tr>
<td>EBU</td>
<td>European Blind Union</td>
</tr>
<tr>
<td>CBR</td>
<td>Community Based Rehabilitation</td>
</tr>
<tr>
<td>CORPs</td>
<td>Community Own Resource Persons</td>
</tr>
<tr>
<td>HIV</td>
<td>Human Immuno Deficiency Virus</td>
</tr>
<tr>
<td>HGW</td>
<td>Honour of the Grand Warrior</td>
</tr>
<tr>
<td>IBSF</td>
<td>International Blind Sports Federation</td>
</tr>
<tr>
<td>ICEVI</td>
<td>International Council of Education of People with Visual Impairments</td>
</tr>
<tr>
<td>KIB</td>
<td>Kenya Institute for the Blind</td>
</tr>
<tr>
<td>KNPA</td>
<td>Kenya National Plan of Action</td>
</tr>
<tr>
<td>KSB</td>
<td>Kenya Society for the Blind</td>
</tr>
<tr>
<td>KUB</td>
<td>Kenya Union for the Blind</td>
</tr>
<tr>
<td>NGO</td>
<td>Non-Governmental organization</td>
</tr>
<tr>
<td>PWA</td>
<td>Persons with Disabilities</td>
</tr>
<tr>
<td>RNIB</td>
<td>Royal National Institute for the Blind</td>
</tr>
<tr>
<td>TBAs</td>
<td>Traditional Birth Attendants</td>
</tr>
<tr>
<td>UN</td>
<td>United Nations</td>
</tr>
</tbody>
</table>
ABSTRACT

The purpose of this study was to investigate the challenges encountered by married women who are adventitiously blinded in Machakos District, Kenya. Despite the government’s effort to provide free rehabilitation for persons with visual impairment, the socio-economic predicaments have not been identified and sufficiently addressed by researchers in Kenya. Thus, their integration into the societal fabric is wanting. The study sampled married women who are adventitiously blinded in Machakos District and how their becoming blinded affected them. The researcher first identified and sampled married women who were adventitiously blinded in Machakos District employing purposive sampling and snowball techniques. Purposive sampling was used in Machakos Rehabilitation Institute because it was reliable while snowball technique was used to identify married women who are adventitiously blinded who were not residing in the Rehabilitation Institute. Using both sampling techniques, 20 cases of adventitiously blinded married women were purposively selected to participate in the study from a target population of 50 married women who are adventitiously blinded. Data were collected through face-to-face structured interview schedules for the rehabilitees, institute personnel that are blinded and married women who are adventitiously blinded outside the institute. The results from the semi-structured interviews were manually coded and narrated. The structured interview method was preferred because the participants could not read printed materials. Data were analyzed thematically according to the objectives of the study. All the coded data under major themes of topics were assembled. The study concluded that married women who are adventitiously blinded suffered from lack of spousal companionship and assistance in domestic chores, societal negative attitude, marital tension, sexual deprivation and unproductivity in agriculture and socio-economic constraints as well as lack of access to educational information concerning them. The study recommends that the government should sensitize the public on the plight of married women who are adventitiously blinded at community level and that religious and non-governmental organizations should provide assistance. The study suggests that similar studies should be carried out with married women who are adventitiously blinded at the Kenya Union for the Blind (KUB) Rehabilitation in Nairobi. This would help generalize the findings; similar studies should be carried out in other fields of disabilities to get a wider perspective on identifying challenges encountered by blinded women not only in Machakos but in other districts which this study did not cover. Another study should be replicated to identify challenges encountered by blinded adolescent in secondary and primary schools in Kenya.
CHAPTER ONE

1.0 Introduction

Married women who are adventitiously blinded face many obstacles in their struggle for equality. Although married men and women who are adventitiously blinded are subject to discrimination because of their disabilities, married women who are adventitiously blinded are at a further disadvantage because of the combined discrimination based on gender and discrimination based on disability. This paper examines the lives of married women who are adventitiously blinded and examines the effects this double discrimination. This chapter examines background to the study, statement of the problem, purpose of the study, the objectives of the study, the research questions, significance of the study, limitation of the study, assumption of the study, theoretical framework and conceptual framework all in relation to challenges encountered by married women who are adventitiously blinded in Machakos District: Implication for Rehabilitation Opportunities in Kenya.

1.1 Background to the Study

One type of classification for persons with blindness is by age of onset of disability. Children who are born with this disorder are said to be congenitally blind. Those who acquire this disorder later in life are said to be adventitiously blind. There are more visually impaired people who lost their sight as opposed to those being born blind. Some 85% suffer progressive sight loss. The difference between these two visual impairment groups can be substantial because a person who has been blind from birth is more likely to have developed natural adaptive mechanism, whereas someone who has recently become blind may still be learning to cope and, therefore, requires considerably more support and assistance while undertaking the activities of daily living (ADL) and field work activities (Shepherd, 2001).
The universal Declaration of Human Rights provided that no one should be subjected to torture or to cruel inhuman or degrading treatment or punishment. It also emphasized on non-discrimination which is further explained in that all persons are equal before the law and are entitled without any discrimination to equal protection of the law. The law guarantees to all persons equal and effective protection against discrimination on any ground such as sex, and disability, (Mbote 2000-1).

The disability rights movements has ignored issues of importance to married women who are adventitiously blinded and many feminist with disabilities have complained about its male domination and male orientation. Disability rights movement have been criticized for directing most of its attention to male concerns while married women’s issues such as childbearing problems have received complain that like many other social change movements, the disability movement has often directed its energies toward primarily male experiences. This makes married women who are adventitiously blinded uneasy members of the disability rights movements. The married women who are adventitiously blinded feel uncomfortable in the disability movement because it is often male dominated and at times blatantly sexist, (http://wwwwwda.org.9/27/2011). It's not clear whether the married women who are adventitiously blinded in Kenya experience similar challenges.

The Universal Declaration of Human Rights, the International Covenant on Economic Social and Cultural Rights and the International Covenant on Civil and Political Rights, the Convention on the Elimination of all Forms of Discrimination against women as well as the World Programme of Action concerning Disabled Persons emphasizes that special attention in education should be given to adults with disabilities particularly women. Further, states should recognize the principle that persons with disabilities must be empowered to exercise their human rights particularly in the field of employment. In both rural and urban areas the married women who are adventitiously blinded must have equal opportunities for productive and a gainful employment in the labour market. States are
urged to be responsible for the provision of social security and income maintenance for persons with disabilities, (http://www.wwda.org.9/27/2011). It’s upon these international rules that one wonders whether the Kenyan society has established accessible social economic and educational opportunities to its married women who are adventitiously blinded as it has done for its married women who are not disabled.

The Standard Rules on the Equalization of Opportunities for Persons with Disabilities has it that state should take action to raise awareness in society about persons with disabilities, their needs, their rights, their potential and their contribution. States were to ensure that responsible authorities distribute up-to date information on available programmes and services to persons with disabilities, their families, professionals in the field and the general public, (http:www.wwda.org.9/27/2011). This information should be presented in accessible forms. The married women who are adventitiously blinded in Kenya are to clarify whether they have accessed information awareness campaigns concerning them as is done to married women who are non disabled.

Convention on the Rights of Persons with Disabilities article 26 declares that on assistance through habilitation and rehabilitation state parties shall take effective and appropriate measures, including through peer support, to enable persons with disabilities to attain and maintain maximum independence, full physical, mental, social and vocational ability and full inclusion and participation in all aspects of life. In Kenya, those who lost their sight totally during the 1998 bomb blast have joined the world’s approximately five million adventitiously blinded people who have been forced to dramatically change their lifestyles. Gradually, advanced societies are aiming to see that the persons with blindness remain integrated with everyone else. Institutions assisting in habilitation of blind adults should make their major concern to ensure that those who loose sight later from any causes should not be marginalized. They are able Kenyans who can be rehabilitated and who should continue being usefully employed. It’s not clear whether the married women who are adventitiously blinded in Kenya are provided with
assistance necessary in their rehabilitation process since they should continue being usefully employed. The study focused on challenges encountered by married women who are adventitiously blinded in Machakos District: Implications for rehabilitation opportunities in Kenya.

1.2 Statement of the Problem
The married women who are non-disabled experience challenges in their marriages but mostly affected are the married women who are adventitiously blinded. The latter experience hardships in adjustments and socialization. Because they do not see, they may be sexually discriminated against. Their domestic role may also be reduced as they try to cope with the new lifestyle due to sight loss. They may have stayed with the husband for a short or a long period. Blindness is not an issue one expects in life. However, if it strikes, the married woman affected is bound to face many more challenges compared to married men who are adventitiously blinded. Mbote (2000-1) states that, traditionally, married women who were adventitiously blinded were treated more harshly than men in the same predicament. Given this scenario, no study has been done to document the challenges or problems that are faced by such married women who are adventitiously blinded. Therefore, this study intended to identify challenges encountered by married women who are adventitiously blinded in Machakos District: Implication for rehabilitation opportunities in Kenya.

1.3 Purpose of the Study
The purpose of this study was to identify challenges encountered by married women who are adventitiously blinded, in Machakos District, Eastern Province, Kenya and to design intervention measures that may alleviate the problems experienced by such women.
1.4 The Objectives of the Study

The objectives of this study were:

i. To identify challenges facing married women who are adventitiously blinded in Machakos District;

ii. To identify socio-economic and educational opportunities available for married women who are adventitiously blinded in Machakos District;

iii. To establish awareness methods to be used to provide positive attitude towards married women who are adventitiously blinded in Machakos District; and

iv. To suggest ways of assisting married women who are adventitiously blinded in Machakos District.

1.5 Research Questions

The study sought to answer the following research questions:

i. What are the challenges faced by married women who are adventitiously blinded in Machakos District, Eastern Province, Kenya?

ii. What socio-economic and educational opportunities are available for married women who are adventitiously blinded to help them overcome the challenges they face in Machakos District?

iii. What methods can be used to provide positive attitude towards married women who are adventitiously blinded in Machakos District?

iv. What kind of assistance do married women who are adventitiously blinded in Machakos District require?

1.6 Significance of the Study

The findings of the study may:

i. Assist the Ministry of Education and Ministry of Gender, Children and Social Development in their programme development for married women who are adventitiously blinded;
ii. Enable the Ministry of Education and Ministry of Gender, Children and Social Development together with Kenya Society for the Blind (KSB), Kenya Union for the Blind (KUB), and Kenya Institute for the Blind (KIB) to find the best ways of helping the married women who are adventitiously blinded; and

iii. Create awareness within the Kenyan community of the plight of persons with disabilities and especially married women who are adventitiously blinded. For instance, the Ministry of Education and the Ministry of Gender, Children, and Social Development have incorporated a Strategic Action Plan in the African context for the decade and beyond. This should address pertinent issues experienced by special groups with the broader perception of women with adventitious blindness with the mandate to articulate specific concerns such as education, civic enlightenment in legal and psychosocial intricacies.

1.7 Limitations of the Study

The following were the limitations of the study:

i. Lack of sufficient literature on married women who are adventitiously blinded.

ii. That the married women who are adventitiously blinded may not agree that their performance of domestic chores is as satisfactory as it was before they became blinded.

iii. That married women who are adventitiously blinded may lose the love of their husbands.

iv. Socio-economic vibrance of the married women who are adventitiously blinded may not be stated correctly.

v. Adjustment and socialization of the married women who are adventitiously blinded is too traumatic to be articulated by the respondents.

1.8 Assumptions of the Study

The following assumptions were made:
• Respondents would give accurate, truthful and honest answers to the items that were in the interview schedule.

• That married women who are adventitiously blinded encounter many challenges in their lives e.g. social, economic, stigmatization, mistreatment by in-laws among others.

1.9 Theoretical Framework

Maslow’s hierarchy of needs theory implies that a conducive environment must be created for work to be done. If the married women who are adventitiously blinded are not provided with enabling conditions to face life, they will suffer increased frustration, lower performance (both at home and workplace) and job dissatisfaction. In view of the foregoing, this study was guided by Maslow’s theory on hierarchy of needs.

Figure 1.1 Maslow’s Hierarchy of Needs Theory (Simons et al., 1994)

For the whole being of a person to be achieved, Maslow states that a certain hierarchy of needs have to be satisfied. He described them as the hierarchy of human needs. According to him, the needs at the lower level have to be satisfied for the higher levels to be achieved. For married women who are adventitiously blinded to feel totally accepted and to achieve self-actualization, they too need to have various needs fulfilled.
Level I (lower level) entails the physiological needs such as food, shelter, clothing and sex. When a married woman suddenly becomes blind, some of these needs may not be achieved. For example, food. She may not be able to look for food from the shamba and even if it is readily on the table, she may not be in a position to reach the dish without support. In case of issues such as sex, the spouse might ignore her on account of her acquired state. The cleanliness of clothes, household equipment and environment needs to be maintained for health purposes. If the spouse, children and all the significant others are not willing to assist a married woman who is adventitiously blinded, then she cannot progress to the next level. If patience, love and understanding are used in the best way, then this person can fully integrate well in the society and move up to the ladder quite easily.

Level 2 is safety. Safety ensures our survival. We have to protect ourselves from crime and war. If the married woman who is adventitiously blinded is not assisted by spouse, children and significant others in adjusting herself in the accidental blindness, she may end up feeling insecure, but if she is protected, she would be in a position to feel loved.

Level 3 which is above level 2 is the level of love and belongingness. The adventitiously blinded married woman needs security, affection and attention from others.

Level 4 is the need for self-esteem. Self-esteem is the evaluative and effective dimension of self-concept. Self-esteem is also referred to as self-worth or self-image. The married woman who is adventitiously blinded needs to feel good about herself. She cannot feel good about herself if she does not have basic needs. She also cannot feel good about herself if she is insecure. If basic needs such as security and love are availed to her by her spouse, children and significant others, she can develop her self-esteem.

Self-actualization is the 5th level of Maslow's hierarchy of needs. It is at the peak of the pyramid. It involves realization of one's potential. The support the married woman who
is adventitiously blinded gets gives her the drive that propels her towards self-
actualization. In return, therefore, she gets strong intimate relationship with people to the
extent of societal admiration thus making her a model. Her duties are, therefore, well-
performed and life is without any stigmatization and she can handle any challenges in life
as well as anyone else.

1. 10 Conceptual Framework

The conceptual framework of this study was developed from Maslow’s hierarchy of
needs. Human beings have needs to be satisfied and when these needs are not met, life
becomes unbearable and traumatic. Maslow’s hierarchy is, therefore, relevant to this
study because married women who are adventitiously blinded have to fulfill the same
marital and socio-economic needs as any other person. Figure 1.2 below explains the
scenario through which married women who are adventitiously blinded undergo.
Figure 1.2: Conceptual Framework

Sighted Women

Adventitiously Blinded Women

Lack of Love

Employment

High Self-Esteem

Way Forward

Sensitize Communities

Retraining

Rehabilitation

Support Group

Successful Adjustment

Lack of Employment

Neglect

Low self-esteem

Divorce

Stigmatization

Source: Researcher (2009)
The diagram illustrates the possible progress of a once sighted woman who is totally enjoying her marriage succumbs to blindness and the social challenges she goes through in order to fit into the society. All the same, there should be a way forward despite the challenges to enable her to live independently and normally without stigmatization and in a position to handle any upcoming challenges in life as any other person in society. The newly blinded married women will suffer from psychological problems unless they are guided and counselled on how to face the coping challenges of adjustment and socialization.

1.11 Conclusion
Married women who are adventitiously blinded have historically been neglected by those concerned with the issues of disability as well as the feminist movements. No serious attempts have been made to identify the challenges they go through that mainly end up affecting their lives. The study has therefore dealt with four objectives that are expected to unearth a few obstacles they go through. A conceptual framework as well as theoretical framework trying to give us an understanding and an interpretation on social situation of married women who are adventitiously blinded have been put in place. Married women who are adventitiously blinded are one of the most vulnerable and marginalized groups in today’s society. We need to develop a better understanding of their lives in order to remove the obstacles that still remain in their way to equality.
1.12 Operational Definition of Terms

Adventitious blindness: Refers to persons who were born sighted and became visually impaired thereafter

- Other names for adventitious blindness are “blinded, newly blinded.”

Age of onset: Age at which a disability occurs.

Blindness: This is the state of being unable to see or lacking the sense of sight.

Braille: A system of reading and writing that uses dot codes that are embossed on paper, developed by Louis Braille in 1929.

Challenges - A new or difficult tasks that tests somebody’s abilities and skill.

Community: It’s a group of people living in the same geographical area and therefore sharing common resources. They may experience similar problems and issues such as droughts, famine, flooding, diseases or bad governance. They have similar interests.

Community-Based Rehabilitation: It’s a way of supporting persons with special needs within their own communities. This is done by making use of local resources to the maximum in rehabilitation of persons with special needs including those with disabilities.

Congenital blindness: Loss of sight before birth.

- Other names for congenital blindness are, “blind, born blinded”.

Rehabilitation: Certain abilities must have existed before the onset of disability.

Through accidents, diseases or unknown factors individual loses those abilities. A
systematic training process may be designed to restore those abilities. This is rehabilitation.

**Progressive blindness:** It is a gradual loss of sight a person experiences in life after having been born sighted.

**Retrain:** To learn or to teach somebody a new type of work, a new skill etc.

**Sheltered workshop:** This is a place where people with limited skills work alongside their non-disabled colleagues under close supervision.

**“Total” Rehabilitation:** It's a process whereby adults in varying stages of helplessness, emotional, disturbance and dependence, come to gain new understanding of themselves and their handicap; the new skills for their new state, and new control of their emotions and their environment.
CHAPTER TWO
LITERATURE REVIEW

2.0 Introduction

This chapter covers literature review related to this study. The main topics covered include: significance of vision; adventitious blindness and its effects on a person; challenges encountered by married women who are adventitiously blinded in Kenya; social economic and educational opportunities for married women who are adventitiously blinded; raising community awareness on the married women who are adventitiously blinded; and modes of assisting the married women who are adventitiously blinded.

2.1 Significance of Vision

Shepherd (2001), postulates that the visual system can be considered as the dominant sensory modality in humans. Almost half of the brain is devoted to sight and about 70% of the total capacity of the brain devoted to processing information is devoted to handling visual information. Studies of visual perception have revealed that there tends to be an attentional bias towards visual modality. Less well known, perhaps, is that where there is conflict between visual inputs and other sensory inputs, either the overall percept is determined by vision, or else the nature of the percept in other conflicting modalities is modified by the visual information, rather than vice versa.

In addition to these biases in the human sensory system, Shepherd (2001), reveals that, there are also visual biases in the languages used by humans to describe the world. Valkenburg and Kubovy (2000), suggest that notions of objecthood have traditionally been framed to visuocentric terminology. Others argue that much of the modern culture asserts the primacy of the visual and downplays the role of the other senses. Marshall McLuhan (1967), argues that the manuscript culture is intensely audio-tactile compared to print culture and that the transformation of the audio into the visual world was the prime effect of typography.
2.2 Adventitious Blindness and its Physical and Psychological Pain

Adventitious blindness is loss of physical sight to those people who had it for a period of time. There is physical and psychological pain in losing sight. The impact is devastating because the loss comes suddenly and adds up to total handicap. One of the impacts is that the blinded person equates loss of sight to dying. An individual feels that her/his normal life is interfered with. It becomes death to her/his way of life. It is the end of acquired methods of doing things. It is loss of relationship with other people and with the environment. Blindness is not a blow to the eyes or sight only but it is a destructive blow to the self-image which an individual has carefully constructed throughout his/her lifetime (Carroll, 1961).

Adventitious blindness is also viewed as loss of integrity. The person who grew up normally is now only a part. She/he is shattered. The cruel words which are usually used to describe the person who is not whole are “maimed” “crippled” “afflicted” and “blinded”. If she/he thought of a blind person in various stereotypes, the blind beggar, the blind genius, the blind musician and the like, her/his feelings would now be bitter (Scholl, 1986). This study looked at the predicaments which the adventitious blinded women face in Machakos District and how the society perceives them.

Carroll (1961) notes that at the onset of blindness, the persons experience a phenomenon generally called compensation which they tend to feel as natural or divine. When seeing is no longer possible, then for many people believing becomes difficult if not impossible. They tend to doubt the information gathered by the senses, to suspect validity. This is not an intellectual doubting but rather “sense doubting”, probably due to some disturbances of the pattern of the “central sense” which lasts until some kind of reorganization of that sense can take place. For instance, the sense of hearing brings us a great deal of our information with the censor, sight. The quick turning of the head, the automatic gesture which turns our eyes towards the source of a sound, the accompanying question, “what was that?” This indicates how automatic this tendency is to the test.
In addition, Carroll (1961) further observes that loss of contact with reality, "reality or "reality contact", with the tangible world in which we live also leads to panic and shock. It is further "death" to the world of things about us. To a person who knows contact with reality to be a measure of sanity, this may seem to indicate that the blinded person loses sanity. The significance of this can be clearer if we look at some questions, a psychiatrist is likely to ask a person suspected of being “disoriented” “who are you?” “What are you doing here?” “How long have you been here?” With the exception of the first question (with a recollection of the blows to “self” suffered by the newly blinded person), there would be a sense that would be very important in answering the other questions. To answer the questions with assurance, the average sighted person would depend on sight.

There is loss of visual background. Visual background constantly plays a part in our lives as a backdrop of peaceful change to the events or the monotony of daily living. It is a photographic activity that has the function of guarding us from danger. Even the sudden passing of a shadow can alert us quickly, put us on guard against real or fancied hazards. A visual background has a function of keeping us in contact with the world around us.

Of great importance is the loss of mobility. The person who suddenly loses sight is immobilized. He/she is fixed, rooted, confined to the spot on which he/she stands. He/she has lost one of the first marks of infant development – the power to walk. And he/she stands transfixed by panic and fear – yawning openings surrounding him/her. Alone, he/she is being watched. Surrounded, he/she is cut off. He/she is without security, without maturity, without ability – an utterly dependent being.

Communication is very vital but again, it is lost. This includes mainly, of course, the writing and reading of language. Along with these are signs, cartoons, pictures and the like. Carroll (1961) calls this the loss of graphic communication. All the same, this would not mean much to a non-book-reader. This loss affects not only actual listening and
speaking, but also gestures, posture, mannerisms, and facial expressions—all the unspoken elements of “spoken” communication.

Visual perception of the pleasurable is admirable and appreciable. Carroll (1961) further calls this as the loss of verbalized attitude. When sighted people talk or write about blindness, they very frequently put it thus: “Never again to gaze on his mother’s face—never to see his own home nestled among the trees.” Yet blinded persons seldom mention anything of the kind. This is the loss of the visual reception (intake embrace) of an object, which the blinded man/woman formerly found pleasing. The goodness symbolized by these things is what pleased the blinded person once. He/she looked at them once—and this is the special pleasure that is now lost.

Recreation is refreshment. It is giving of fresh life, especially after enduring toil or anxiety. It is important for everybody and mostly to those under serious stress. In the midst of new blindness, with all the stresses and strains, it brings about the blinded person’s loss of recreation. Recreation can either be intellectual or physical or a combination of both. Whatever the blinded person’s forms of recreation may have been, their loss can be completely disturbing to the whole pattern of the client’s emotional life and physical wellbeing.

Carroll (1961) next discusses loss of a career, of a vocational goal, or job opportunity. To lose a job, to which the client has set his/her heart or on which his/her career seems to depend, can be a tragedy in itself. This is bound up with the dignity of the individuals, dignity of the job or position involved, the dignity of work itself, the social pressures, the external and internal need of doing what is expected or demanded of us according to our age, ability, training and environment.

Although loss of a job and financial security are not necessarily the same thing for the average person, loss of a job means loss of income. Besides this, blindness can cause
financial difficulties by increasing expenses which can be divided into sickness expenses and expenses incident to blindness. Sickness expenses are easily recognized – cost of hospitalization, drugs, medicines, surgery, nursing care and the like. These expenses can run on much longer than they should. Expenses incident to blindness are chiefly incident to the loss of mobility, the loss of written communication and the loss of techniques of daily living.

The person whose mobility has been hampered is quickly involved in new expenses for instance, where previously he/she might walk he/she now finds that he/she must ride, where formerly he/she would have gone by bus, he/she now finds that she must go by taxi. The loss of written communication raises the possibility of having to pay for a reader. It is the same with the technique of daily living. The blind person has to buy services. He/she has to “buy sight” and the more often she buys, the heavier the cost – for instance, a person who lived alone now seeks a housekeeper. Messenger services become a necessity in situations where it was once a luxury.

All these losses compromise personal independence. To the public at large, the “helpless blind man” is a symbol of utter dependence. In such an exclusively dependent person, strong bitterness is directed not to self alone; it is often projected at the person or persons upon whom he/she is dependent. Strangely enough, it is often masked by something that appears to be “loyalty” or even “love”.

2.3 Challenges Encountered by Adventitiously Blind Mothers in Kenya

Marriages

Compared to both men with disabilities and non disabled women, married women who are adventitiously blinded are more likely to be divorced if they acquired blindness in marriage. Comparison of divorce rates of married women and married men with disabilities seem to suggest that married women who are adventitiously blinded are more likely to be left alone than married men who are adventitiously blinded.
Fine & Asch (1981) have stated that when blindness occurs after marriage men are more likely to divorce their wives who becomes adventitiously blinded but rarely does the marriage break down if it is the man who becomes adventitiously blinded.

Matthews (1983) has given an example of having interviewed married women with disabilities and it ended up that it was only five out of forty five were married. Married women who are non-disabled often feel trapped in unfulfilling or abusive relationships because they cannot imagine how they will survive economically on their own. Married women who are adventitiously blinded may often have to put up with abusive or exploitative relationships because of their limited social and economical means or because the only other alternative may be life in an institution.

Married women who are adventitiously blinded may return to abusive relationships because it may be the only intimate relationship they ever had and they may judge it better to have a bad relationship than no relationship at all.

**Motherhood and nurturance**

Since married women who are adventitiously blinded are in need of being taken care of, it is difficult for many to imagine how this married woman that is adventitiously blinded and is a mother can fill the caring and nurturing mothering role. The widespread belief that married women who are adventitiously blinded cannot and should not bear and raise children has made it difficult for married women who are adventitiously blinded and are pregnant to find doctors who will accept them. They have also found it problematic to gain access to information and services related to their special needs (Finger, 1985).

Corbett (1989) explained that when married women who are adventitiously blinded become mothers they encounter many difficulties because non-disabled world assumes that the disability makes them unfit to be mothers. Many lose custody of their children in
divorce while others may have their children removed from their care by social welfare agencies solely on the grounds that they have disability.

Asch & Fine (1988) stipulates that not only have married women who are adventitiously blinded reported difficulties in becoming biological mothers and keeping custody of their own children, they have also encountered discrimination if they have attempted to adopt children or become foster mothers. If they manage to keep their children they may encounter further difficulties in dealing with early childhood programs that traditionally have neglected the needs of married women who are adventitiously blinded.

**Sexuality and Sexual Abuse**

It is widely documented that married women who are adventitiously blinded are typically seen as asexual. Watson (1984) says that sexual abuse of married women who are adventitiously blinded have received growing attention in recent years. It’s further noted that married women who are adventitiously blinded are at a greater risk of being sexually abused than other married women who non disabled. O'Tole (1990) reports that married women who are adventitiously blinded may undergo sexual assault and battering two or three times higher than other married women who are non-disabled. To explain this further Cole (1984) have documented that sexual abuse has more to do with oppressive use of power than to do with sex. Abusers look for and use vulnerability to create opportunity to rape. This vulnerability is increased in people who are marginalized, dependent and in need of affection. Thus, the more vulnerable and powerless people are the more they are at risk of being sexually abused. Existing studies have documented that married women who are adventitiously blinded are at a greater risk than any other group of women being sexually abused.

Kamotho (1995) reports that motherhood can be difficult for any woman, even those with sight. Therefore, for anyone to perceive just how much more this is so for the blind
woman is important. Learning how to wash, feed, and meet a growing child’s numerous needs without the aid of sight can sometimes be a minute by minute act of faith.

When a blind woman’s children are dirty or ill, the mother’s lack of sight is blamed while it is normal in any home” Says Sinyo in the East African Standard, Women’s World Wednesday, May 24, 1995.

Kamotho continues to say that a blind married mother has the same needs for unconditional love and innate need for security as any other woman. Many men are deceived into thinking that if one is married to blind woman, her offspring would be blind as well. Many people imagine that a blind woman is a burden, some regard her as an incapable female whose options are to vegetate in darkness. Kamotho further states that blindness is equated to a curse reserved for the ugly and untalented, a social stigma that is hurting to a blind mother. Negative attitudes by society about a newly blinded woman are a tough challenge to encounter, quoting Josephine Sinyo’s experience when she delivered her first born. She narrates bitterly how she suckled the wrong baby in the hospital and the actual mother’s reaction to her. “The enraged woman screamed again .... Ulimnyonyesha matiti yako?” (You actually gave my baby your breast). “She turned into a tigress when she saw that a blind woman had actually fed her baby, as if my own baby was feeding off a wild animal.” Said Josephine. The woman glared at Josephine as though she was an extension of the devil himself. At the same time, she reached out and tore the little bundle of a baby out of Sinyo’s hands as though a second longer in them would turn it into a despicable creature, Sinyo concluded with a mixture of sadness and scorn. Such humiliation was from a fellow woman. Sinyo also narrates another story of a woman who is adventitiously blind who was cruelly taunted and humiliated by in-laws who quizzed her incessantly about how she expected to be able to farm land and carry out household chores. A blind woman is regarded as physically unattractive. Her disability can become a source of marital tension. The spouse might even marry another woman, or even desert her because she cannot perform her role as a wife (Kamotho, 1995).
Married women who are adventitiously blinded also suffer problems of isolation. Generally, married women who are adventitiously blinded have a problem of socializing, which arises as a result of immobility. Unless they have had orientation and mobility, they are not able to go about on their own. At times because of their perceived docile nature, blind women have been locked in compounds so that they do not go outside. Getui and Ayanga (2002) further note that the inability of a married woman who is adventitiously blinded to go about on her own limits her privacy. Often wherever she goes, she has to go with a guide. Isolation further leads to other problems such as difficulties in social interactions and uncertainties about other people’s perception of her. At times people may feel reluctant to socialize with married women who are adventitiously blinded due to their lack of knowledge about how to relate to a woman without sight.

Married women who are adventitiously blinded have been marginalized in issues regarding reproductive health. Besides not having access to information on these issues due to communication barriers, many of them avoid going to a family planning clinic because of the negative attitude health workers have towards them. It is assumed that blind women are not sexually attractive and active and, therefore, do not need contraceptives. When a married woman who is adventitiously blinded is pregnant, she is sometimes scolded by doctors for getting pregnant rather than congratulated (Daily Nation, December, 1997 as cited by Getui and Ayanga).

Given women’s major role in agricultural production, their economic activities are impaired by their disability. They cannot work effectively in their fields and their role as farmers is negatively affected, hence, their dependency on non-disabled persons in the households. A man may even marry a second wife who is able to provide additional domestic and agricultural labour. The lack of employment for blind mothers has certain adverse effects. Some may be forced to go on to the streets in the company of their children to beg for a living. Such mothers are exposed to all sorts of dangers. For
example, in Nairobi streets, blind mothers have been exploited by non-disabled people (Daily Nation, July, 1995 as cited by Getui and Ayanga).

There is cultural stigma associated with blindness. Usually, married women who are adventitiously blinded have no access to property and land which is a basic requirement for the development of shelter. If a woman becomes blind during marriage, she may be denied inheritance due to her from her spouse. In some communities, married women who are adventitiously blinded are marginalized in traditional rites. For example, bridewealth might not be given for a blind woman. In fact, her family members are grateful that she has found a husband at all. From the above issues, it can be said that disabled women are among the poorest of the poor. They are often marginalized in all spheres of life as a result of their disability (Getui & Ayanga, 2002).

**Marriage and Women Roles**

Marriage is an important institution in all societies. In the African situation, it is a union between two families rather than between two individuals. When a young man decides he wants a particular woman for his wife, he tells his parents about it. Then it becomes the parent’s responsibility and that of elders of the extended family to ask for the woman’s hand from her parents. Before this is done, the parents try to find out all they can about the woman’s family; whether there are any chronic or hereditary illnesses such as mental disorders in the family; whether the women in the family are known to be respectful and hardworking or not, and the like. These are important matters that are known to ensure the stability of a marriage. Emotional attachment for the young man and woman was not considered a legitimate ground for marriage. If the man’s parents are not satisfied with what they find out, they will tell their son that he should look for someone else or suggest somebody they approve of to him. It must be mentioned that in African societies, the nuclear family is a new concept and what is considered is the extended family, including brothers, sisters, cousins, uncles, aunts, grandparents, both from maternal and paternal sides (Getui & Anyanga, 2002).
Every African woman grows up knowing that it is the work of the woman to cook the meals and see to it that the house is clean and well-kept. Whatever her level of education or professional status, she does not expect her husband to share her household chores with her. Women are also expected to have children. To fulfill personal desire for motherhood, sometimes even educated professional women, some of them brought up in strict Christian homes, would rather have children outside marriage than remain childless. One may add that the love of children, not necessarily one's own, is a greatly admired virtue in women. For this reason, married women who are adventitiously blinded might not be considered able to cope with normal domestic chores and more so raising children. The spouse might even marry another woman or even desert her because she cannot perform her roles as a wife (Getui & Anyanga, 2002).

Farming is a major activity of women living in Africa. They have small farms on which they grow staple foods primarily for feeding the family but they sell extra produce to supplement the family income. The processing and preservation of food have always been women's activities. Married women who are adventitiously blinded are felt to be incapable of working effectively in their fields and their roles as farmers are thus felt compromised. A man will again take this as an excuse to marry a second wife who is able to provide additional domestic and agricultural labour (Khasiani, 1992).

In developing countries, women have always had a close relationship with the trees and the forest. Traditionally, women have gathered products from trees and other plant products which have provided them with the basic three 'Fs' of fuel, food and fodder, and a variety of other uses. Whereas men consider the forest more in terms of commercial possibilities, women see it as carriers who commute several times each week to the forests, where they harvest fruits and vegetables for food and gather small twigs and sticks for fuel (Khasiani, 1992).
Again, women play a vital role as both water suppliers and water managers. It is the women who have knowledge of the location, reliability and quality of the local water sources. They are responsible for collecting water and for controlling its use; they also oversee sanitary arrangements. Collecting water can be a tiring and arduous task that usually needs to be undertaken several times each day. Reactions to the nearest source may entail walking several kilometers in the dry season; paths to springs and other sources may be steep and treacherous; or women may have to wade deep in mud to reach clear water. The water is heavy; some women carry 20 kilograms or more in containers balanced on their heads or in cans strapped to their backs. In addition, to the burden of carrying water, women often experience difficulty in obtaining it from its sources. In those areas where water can be pumped, women have not been taken into account either in design or location of the pumps. The handle is often difficult to reach, and heavy to use, and when pumps break down, women are not trained to repair them (Khasiani, 1992).

As regards division of labour, women in Africa do up to three quarters of all agricultural work in addition to their domestic responsibilities. See the Figure 2.1.

**Figure 2.1: Division of Labour among African Women**

<table>
<thead>
<tr>
<th>Task</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ploughing</td>
<td>30%</td>
</tr>
<tr>
<td>Planting</td>
<td>50%</td>
</tr>
<tr>
<td>Livestock</td>
<td>50%</td>
</tr>
<tr>
<td>Harvesting</td>
<td>60%</td>
</tr>
<tr>
<td>Weeding</td>
<td>70%</td>
</tr>
<tr>
<td>Processing and storage</td>
<td>85%</td>
</tr>
<tr>
<td>Domestic work</td>
<td>95%</td>
</tr>
</tbody>
</table>

Women [ ] Men [ ]

**Source:** UN Economic Commission for Africa as cited by Sparr, (1994).
In relation to Figure 2.1 above, this is almost normal for a sighted woman for she can undertake these agricultural skills just as well as the normal domestic skills. It will take a heart, understanding, patience and a lot of love for one to impart these agricultural skills to an adventitiously blinded woman. As a result, division of labour will be affected because the adventitiously blinded woman cannot be fully integrated.

2.4 Socio-Economic and Educational Opportunities for Married Women Who Are Adventitiously Blinded

In 1984 the presidential committee on employment of the handicapped published a report containing statistical information about women with disabilities that clearly demonstrated the disadvantaged status of married women with disabilities in terms of education, employment and income compared to both their male counterparts and non-disabled women (Bowe, 1984).

Education

Access to education still remains a major problem for married women who are adventitiously blinded than it is to both non-disabled women and married men who are adventitiously blinded.

Russo & Jansen (1988) reveals that education continues to be a challenge for married women who are adventitiously blinded. Like married men who are adventitiously blinded, married women who are adventitiously blinded face accessibility problems, unwillingness on behalf of educational institutions to provide accommodation for disabilities, lack of special services such as readers for the blind students. In addition to the problems married women who are adventitiously blinded share with their male counterparts, they face additional barriers. Like non-disabled women, married women who are adventitiously blinded are channeled into traditional female fields by school counselors and they are likely to encounter even greater obstacles than non-disabled women if they attempt to pursue a career in male dominated professions. In addition to
being channeled into traditional female fields by educational and career counselors, married women who are adventitiously blinded often receive pressure from such counselors to pursue a career in disability related fields such as rehabilitation counseling and special education. It’s then suggested that the combined effect of gender and disability stereotyping tracks married women who are adventitiously blinded into most traditional female roles. As a result, married women who are adventitiously blinded are unlikely to have educational opportunities that will allow them access to highly valued, well paying professional positions.

In addition to being ignored by those concerned with disabilities, married women who are adventitiously blinded have been ignored by feminist movement. Feminist with disabilities have criticized feminist scholarships for excluding the experiences of married women who are adventitiously blinded from feminist analysis, (Fine & Asch, 1988; Hannaford, 1985)

Further, published writings about married women who are adventitiously blinded have not received attention from feminist scholars and instead they have joined men in relegating married women who are adventitiously blinded to a real beneath their intellectual and political ken, (Asch & Fine, 1988:4).

Israel (1985) observed that married women who are adventitiously blinded have described their exclusion from the women’s movements because meeting and conferences are typically held in inaccessible places. In addition, materials are usually available in print only not in Braille or on tape.

Married women who are adventitiously blinded are typically seen as helpless, childlike dependent, needy, victimized and passive. They therefore reinforce traditional stereotypes of women. Asch and Fine (1988:4) suggest that this may be one of the reasons why married women who are adventitiously blinded have been excluded from the women’s movement. Married women who are non-disabled have severed married women who are
adventitiously blinded from sisterhood in an effort to advance more powerful, competent and appealing female icons.

**Employment**

Bowe (1984) states that while married men who are adventitiously blinded have serious employment problems, married women who are adventitiously blinded are significantly worse off. Married men who are adventitiously blinded are almost as twice as likely to have jobs than married women who are adventitiously blinded. Almost 42% of men with disabilities are in labour force (meaning that they either work or are actively seeking work) compared to 24% of women. In addition, while more than 30% of married men who are adventitiously blinded work full time jobs, only 12% of the married women who are adventitiously blinded have a full time employment. Married women who are adventitiously blinded are also significantly poorer than men with disabilities, partly due to the fact that they are more likely to be unemployed and partly due to the fact that when they work they receive considerably lower wages than their counter parts.

A comparison between married women who are adventitiously blinded and married women who are non-disabled also reveals the disadvantage of married women who are adventitiously blinded. The past few decades have seen a revolutionary increase of women's participation in the paid labour force. Especially noticeable has been the increased number of working mothers (Berg, 1986, Fox & Hesse-Biber, 1984).

In 1970 forty five percent of married women who are non-disabled were in the labour force while by 1982 sixty four percent of married women participated in the labour force and more than fifty one percent of married mothers with pre-school children were working (Berg, 1986, Bowe, 1984).

Married women who are adventitiously blinded have not been part of the women's employment revolution. Employment policies have devoted little attention to the
disadvantaged employment status of married women who are adventitiously blinded. The evidence available to date leads to the conclusion that the economy in general and the specialization services in particular restrict the employment opportunities and lives of married women who are adventitiously blinded.

Married women who are adventitiously blinded will need to learn strategies for both acquiring and advancing in careers. Career advancement encompasses both job promotion and the opportunity for continued growth at other levels in their careers contaminant with the contemporary escalated women's increased participation in the workforce. Women have faced double blindness because they have not only had to struggle to enter occupations that have traditionally been the domain of men, but have often been halted at the lower levels of these occupations. They have frequently confronted a "glass ceiling to advancement: a barrier to higher position on the career ladder through which they can see but cannot pass" (Kartzen, 1997).

Kartzen (1997) stipulates that married women who are adventitiously blinded may face a quadruple bid in employment outcomes: gender issues, disability, functional limitations, and the gap in the career development theory. The lack of career development theory specific to women has resulted in role stereotyping that channels women into traditional, stereotypically female low paying jobs with little hope of advancement. Thus, the careers from which women with visual impairments could choose – such as secretarial work, teaching, nursing, social work, psychology and rehabilitation counselling have historically been low paying and often encompass an interest in helping or caring for others. Clients of the vocational rehabilitation system often selected careers in the system because they were unaware of other options.

Further, Kartzen (1997) states that married women who are adventitiously blinded can break the mould to become successful in non-traditional mainstream occupations if they had career advancement processes that can provide important information for them.
These career advancement processes can help young women and their families to access ways to augment opportunities for full inclusion in this society. What the woman who is adventitiously blinded should know is what characteristics are common to women who succeed and advance in their Activities of Daily Living (ADL) and other related fields of activity. These include: intelligence, self-discipline, a strong personal self-concept, self-esteem, drive, motivation, risk taking, creative thinking, assertiveness, strong written verbal skills, self-reliance, determination and perseverance.

Other characteristics are an androgynous personality, having mentors and role models, the development of career goals, and early work experience. The Journal of Visual Impairment and Blindness says that women who are successful in their careers are the best source of knowledge about the activities that prepared them to advance. To prepare the married women who are blinded to select and advance in non-traditional mainstream careers, rehabilitation counsellors should intervene effectively with their families as early as possible to plan for their life-long career development. They will need to furnish parenting information and training for families to enable them to build positive self-esteem in their children and to avoid gender bias. The labour force projections for the centuries to come indicate the need for more persons with college degrees. Consequently, women with visual impairments will expect to encounter professionals who are prepared to inform them about potential careers and facilitate their career aspirations in a wide variety of professions (Kartzen, 1997).

Successful counsellors will develop and use strategies for job placement that are appropriate for professionals who just happen to be married women and to be blind. The stakeholders should be courageous in using “tough love” approach in all activities that would foster the independence of the married women who are adventitiously blinded. These women are expected to participate in life and excel. This approach should provide for the context in which the married women who are adventitiously blinded should develop a strong sense of confidence in their ability to direct their own lives. Thus, the
experiences of these women should lead to the conclusion that for intervention to be meaningful, families must be included in career development, advancement and planning as early as possible in their lives (Kartzen, 1997).

Self-awareness and self-confidence are crucial to the career and personal achievements of these women. These women should have efficacious, conscious decisions to determine their path. These women should use team-work with their families in decision-making and problem-solving. They should have high expectations, be able to set goals, participate in all social activities. Thus being independent as they use mobility skills without resorting to excuses. They should have personal courage to cope with life (Kartzen, 1997).

2.5 Methods of Raising Awareness to Provide Positive Attitude Towards Married Women who are Adventitiously Blinded

Mbote (200-1) states that in modern times, state inaction in situation of raising awareness on the equalization of opportunities on married women who are non-disabled is one of major factors that allow discrimination on them to continue. This becomes even worse off for married women who are adventitiously blinded. The state is an arena of conflict on the one hand it acts according to legislation and practices which are against married women’s who are non-disabled interests.

On the other hand it emerges as the major instrument in transforming certain legislative, administrative and judicial practices which empower women to vindicate their rights. Therefore the state’s negligence on advocating for the policies, rights, needs, potential and contributions of married women who are adventitiously blinded makes them experience major social disparity compared to married women who are non-disabled. In all societies there are still obstacles that prevent married women who are adventitiously blinded from exercising their rights and freedoms and making it difficult to participate fully in the activities of their societies compared to married women who are non-
disabled. It is the responsibility of started to take appropriate action to remove such obstacles.

Okech (2003) states that Community-Based Rehabilitation is a way of supporting persons with special needs within their own communities. This is done by making use of local resources to the maximum in rehabilitation of persons with special needs including those with disabilities.

To get the community to take an active part in rehabilitation, CBR makes the community aware of their responsibility. CBR also ensures that the community is recognized and appreciated. CBR also enables the community to empower people with special needs by supporting them in acquiring relevant skills so that they can feel confident and be able to participate in the rehabilitation activities.

It is, therefore, the work of the CBR to ensure that all initiatives are planned, implemented and evaluated at the community level. This is meant to create equal opportunities for married women who are adventitiously blinded so that they can participate and be included in all aspects of community activities and development.

Community-Based Rehabilitation has a strategy for improving service delivery. It also includes measures that are taken towards the promotion and protection of the human rights of people with special needs.

Okech (2003) also verifies that Community Based Rehabilitation (CBR) has various models which include the following:

A Medical Model which is normally part of the community health activities. It targets prevention of diseases that may cause disability. Where disabilities have already been identified, it focuses on early intervention to reduce their impact of disability. Also relevant to this is the Educational Model of CBR which lays great emphasis on
increasing access, equity and quality of education for those with special needs. An Economic Model is also included. This aims at equipping those with special needs with technical skills that are relevant to their local communities. Married women who are adventitiously blinded are expected to operate income generating activities within the community.

Community-based rehabilitation is said to be part of community development. The Community Development Model of CBR emphasizes the improvement of the entire infrastructure and overall development of the community. Good governance, good roads, clean water, good sanitation, a barrier free environment and appropriate income-generating initiatives are important aspects of this model of CBR (Okech, 2003). The models identified above may not address all the needs of the individuals if they are provided separately. They do not address the entire life of an individual or the community. The comprehensive model of CBR combines the medical, educational, economic and community development models.

In CBR, sensitization involves awareness campaigns about the causes, prevention and management of special needs. It also means encouragement of persons with disabilities or special needs to be more assertive in demanding their rights in society. Sensitization also means engagement of relevant people in discussions.

The community mobilization is also important and is part of CBR. This involves bringing out all resources. These includes community's own resource persons, trained personnel from related ministries, NGOs, volunteers, trained persons with disabilities and even married women who are adventitiously blinded.

Sensitization and mobilization are put in place in the community. They can be conveniently used to pass on information that would reach many people through public
meetings or barazas, schools, churches, mosques, women organizations and the market place (Okech, 2003).

Okech (2003) further identifies the stakeholders of CBR. Among them is the government. The government through the provincial and district administration and departmental workers, is a major stakeholder in rehabilitation. Other stakeholders lending support to the government’s efforts towards rehabilitation include non-governmental organizations. NGOs supplement government development programmes mostly at the community level. They may help in initiating income generating activities or may assist local artisans to market their wares. They are also useful in awareness campaigns on various areas of special needs.

The family is recognized by CBR as the key stakeholder. They must be involved in all levels of rehabilitation right from the planning stages. Religious organizations are also crucial stakeholders within the community. Rehabilitation usually originates from a charitable background which is often supported by religious bodies. Secondly, religious leaders are highly regarded in their communities. Support from them is both respected and easily adopted by people in the community (Okech, 2003).

The community at large is also a stakeholder. The members wish to see the population of persons with special needs and disabilities integrate and functioning independently. There are resource persons within the community. These are people referred to earlier as the community’s own resource persons (CORPs). They include traditional birth attendants (TBAs), volunteer health workers, the community’s traditional healers, herbalists, local artisans and people with disabilities in the community with some basic training (Okech, 2003).
Participation by community members is quite important if Community-Based Rehabilitation is to succeed. When members of a community participate willingly, the future of the programme is bright.

A Community-Based Rehabilitation programme is only sustainable through the people themselves. People should make the final decision. This is what is commonly referred to as consumer participation. Okech (2003) stipulates factors that may hinder participation of community members in CBR activities which include;

**Socio-Cultural Beliefs**

Ignorance which may result when members are unaware of the programme and its activities. Others may not be interested. Socio-cultural beliefs and traditions whereby community members find it difficult to participate in some activities unless they are sensitized adequately. A thorough understanding of a community’s socio-cultural and traditional beliefs is very important.

**Stigma and Religion.** Working with certain groups of people may be “taboo” in some communities.

**Political influence.** The elite in the community and the leadership set up may jeopardize CBR activities if they are not well informed about them. They need to be thoroughly briefed as their goodwill is quite crucial.

**Lack of leadership.** This requires a leader with a clear vision of the programme.

### 2.6 Assisting Married Women who are Adventitiously Blinded in the Rehabilitation Process of Adjustment

Okech (2003) states that married women who are adventitiously blinded and are to be rehabilitated must together with their families be in the committee of community based rehabilitation (CBR). He goes further to say the married women who are adventitiously blinded should have access to public information. This is information related to
happenings around them and involving them. Relevant newspapers, magazines, radio and video programmes on blindness issues may be suggested.

The married women who are adventitiously blinded should have education on rights and policies for persons with visual impairments. Further to this, Okech (2003) said information on technological advances was crucial to them. These may be in the field of medicine and assistive devices such as talking computers, talking watches, talking calculators, and the like.

Okech (2003) also identified the need to assist the married women who are adventitiously blinded by offering them social and psychological adaptation. It’s vital for the community that newly blinded live in to know that they are equal members of the community and equal participants in development and must fully participate in the social life with the others. The family, friend’s, significant others and community at large must help them identify barriers to their participation and discuss how these can be overcome.

**Rehabilitation**

Vocational rehabilitation is an important issue in helping the married women who are adventitiously blinded. At the end of the day, the family has to have food on the table. One does not have to beg because one has disability. Married women who are adventitiously blinded need appropriate and relevant vocational training.

**Gender biases in rehabilitation services**

A handful of studies have been conducted to examine and explain the unequal employment status of married women who are adventitiously blinded as compared to their male counterparts in a study of gender equity in access to rehabilitation services.

Married women who are adventitiously blinded are more likely to be successfully rehabilitated in part-time jobs or to a homemaker status while men are likely to enter full-
time jobs in the labour force. The reason for these differences are gender biased assumptions about women, men and work. Married women who are adventitiously blinded face double jeopardy based on both disability and gender. The stereotypes described to married women with disabilities, in general condones passivity, dependence, helplessness and failure. These attitudes seem to be shared by the general public and rehabilitation counselors, the result being that married women who are adventitiously blinded are less likely to get quality training: and are more likely to be “successfully rehabilitated” into non-employment.

Carol (1961) indicates that rehabilitation is concerned with helping persons who have been deprived of sight in their adult years, but are otherwise normal. The rehabilitation process should begin at the hospital bedside during the “shock” period that results from the first realization of the onset of permanent blindness. No attempt should be made to cut this period short or to inhibit the depth of mourning in the “bereavement” period that follows. Rather, the hope of normal functioning as a human being should be substituted for the hope of normal sight and the blinded person should be helped to begin to regain simple skills: eating, dressing himself and the like. The real friend of the married woman who is adventitiously blinded is not the one who hides the truth from him but the one who at the proper time tells him/her the full truth. In the same way, the outcome of rehabilitation should not be exaggerated but presented realistically. The process of arousing realistic hopes of rehabilitation and of helping the blinded person to regain lost skills should be carried on at home during the first weeks of the bereavement period.

“Total” rehabilitation, then, is the process whereby adults in varying stages of helplessness, emotional disturbance and dependence, come to gain new understanding of themselves and their handicap: the new skills necessary for their new state, and a new control of their emotions and their environment. This is no simple learning process but one of the pain and recurrent crises. A process of accepting the implications of the many “deaths” to sighted life in order to go forward and gain new life ahead. It must in
consequence be a process that makes full use of group strength and group support but is ultimately tailored to the unique personality and problems of each individual (trainee) undergoing the process (Caroll, 1961).

Vocational skills training should target both direct and indirect employment. It should be relevant to their situations. Careers for the married women who are adventitiously blinded should not be limiting. The past practices set some stereotypical jobs in the community for persons with special needs. We need to see them as part and parcel of the larger community doing what everyone else is doing (Okech, 2003).

The married women who are adventitiously blinded also need a lot of counselling. This is meant to shape their mind towards the vocation of their choice. The newly blinded may be assisted in joining the open market through Community Based Rehabilitation (CBR). They can work very effectively in the competitive market. They only need a few adjustments to succeed. Orientation and mobility skills may be the only requirement for the newly blinded to operate in a packaging industry (Okech, 2003).

Similarly, the community-based rehabilitation may assist the married women who are adventitiously blinded to be self-employed. They can run their own businesses such as shops, small industries or farms. The “jua kali” sector is well known in the country as a place where many persons with special needs compete with their non-disabled peers for livelihood. What they need are the right adjustments and skills.

The community-based rehabilitation should not fail to place the married women who are adventitiously blinded who may not be able to work in competitive markets in sheltered workshops. Such people with limited skills should work alongside their non-disabled colleagues. The supervision should always be close. In sheltered workshops people may earn a fixed salary. They may also be paid according to the amount of work done (Okech, 2003).
Okech (2003) does not forget the issue of financial assistance. There are various sources of financial assistance for up-coming investors. They should not only look to the big financial institutions but also involve local initiatives. Merry-go rounds and small group revolving funds are other means that may be tried.

Okech (2003) further states that the married women who are adventitiously blinded should be assisted to join support groups. People with the same interests often get together in a group. It is then easier to solve problems and meet their needs than if they did so individually. While forming groups, it is important to let individual members join groups of their choices. Support group meetings may be used to sensitize and mobilize people who may be helpful in supporting the programme. As much information as possible should be availed to the members during such meetings. Community groups may be a ready starting point for rehabilitation for Married women who are adventitiously blinded.

Overcoming Barriers

One indication of the changing social attitudes is that people with visual impairments participate in a wide variety of pursuits that might previously have been thought out of bounds to them. These include sports, mountain climbing and explorations. Women who are adventitiously blind have a lot to learn from these activities, not only in terms of the narrow practicalities of “how to do it”, but also from the broader motivational factors involved. The participation of the adventitiously blind women in these pursuits suggests that we should no longer ask the question “Can they do it?” Rather the question should be “How shall they do it?” (Shepherd, 2001).

Tuttle and Tuttle (1996) further explain that it should be clear that blindness in and of itself does not impair one’s innate ability to process or manage sensory information intellectually. The limiting factor is the extent to which experiential interaction with the environment is impoverished, thus inhibiting the blind persons’ ability to gather the
greatest amount of alternative sensory information possible. Though vision provides a
greater variety of detailed information more efficiently, it is not an indispensable medium. There is no unique psychology of the blind, no unique set of psychological principles required to understand the behaviour patterns of persons who happen to be blind. The essential “me” of the individual is the same before and after the trauma of blindness, whether that trauma is the onset or the subsequent confrontations with the social meaning of blindness.

Tuttle & Tuttle quote Kemper (1977) who expresses thus:

Of course no man is an island. No elephant is an island either. Just because I had suffered a transforming wound did not mean that I had at that instant also ceased the functions of life. This elephant’s island was surrounded by others. I was still the husband, still a father, still a home owner, still a workman, still a minister of Christ Church. All that I had been, I still was. (Tuttle & Tuttle, 1996:51).

Machakos Technical Institute for the Blind

The institute is situated about a kilometer from Machakos Town. It was hardly known except by those with relatives or friends admitted there. It was not until the first blinded victims of the Nairobi bomb blast of August 7 1998 were moved en masse all the way to Machakos District to begin their rehabilitation when the importance of the institute came to light. Founded in 1958, the institute has over the years remained a unique centre in East and Central Africa, giving persons who are visually impaired recognized vocational training in various trades. For decades, the institute has helped transform the lives of many blind people, some well-placed in society, to be able to fend for themselves. Its status is a great referral centre for the blind. The students are trained in marketable vocational skills to enable them to be self-reliant. Higher technical and business courses are offered to enable them to seek employment in government institutions and the private sector.
2.7 Summary of Reviewed Literature

Marriage is an important institution in all societies. When a man decides that he wants a particular woman as his wife, his parents try to find out all they can about the woman's family; whether there are any chronic illnesses, whether the women in that family are known to be respectful and hardworking or not and the like. These are important matters that are known to ensure the stability of a marriage.

However, this married woman who is non-disabled experience a lot of challenges as she embarks on her main domestic roles of being a wife, mother and nurturer of her family and the like. It's upon this background that the literature has been reviewed on challenges encountered by married women who are adventitiously blinded who compared to married women who are non-disabled are at a further disadvantage because of the combined discrimination based on gender and discrimination based on disability. The literature reviewed significance of vision, adventitious blindness and its physical and psychological pain, challenges encountered by married women who are adventitiously blinded, socio-economic and educational opportunities for married women who are adventitiously blinded, raising awareness on married women who are adventitiously blinded and further assisting the married women who adventitiously blinded.
CHAPTER THREE

METHODOLOGY

3.0 Introduction

This chapter presents the methods that were employed in data collection and analysis. The chapter focuses on research design, location of the study, target population, sampling techniques and sample size. It also covers construction of research instruments, the pilot study, validity, reliability, data collection techniques, data analysis, logistical and ethical considerations.

3.1 Research Design

This study employed a Descriptive Survey Design to identify social challenges encountered by adventitiously blinded married women in Machakos District. This design is preferred because it involves collecting data in order to answer questions concerning the current status of the subjects of the study. It is also suitable to assess attitudes and opinions about events, individuals or procedures (Gay, 1992).

3.2 Location of the Study

The study was undertaken in Machakos District, Eastern Province of Kenya. The main reason for choosing the district was the presence of the Machakos Rehabilitation Institute for persons who are Visually Impaired within the district. It is located 70km East of Nairobi. This allowed easy contact with women with such disabilities who come to seek assistance from this institution. Machakos is bordered to the South by Makueni, Kibwezi to the West and Kitui to the East. The district is almost dry all the year round.

3.3 Target Population

The study targeted 50 married women who are adventitiously blinded in Machakos District. As stated earlier, this disability is a low incidence occurrence worldwide. This
number was arrived through what was known by rehabillitatee, personnels at the Machakos Rehabilitation Institute as well as through PCEA Kikuyu Hospital Eye Unit who offer a lot of community services to the persons with visual impairments.

3.4.1 Sampling Techniques
The study used purposive sampling to sample the married women who are adventitiously blinded from Machakos Rehabilitation Institute. The Snowball sampling technique was used to sample out the adventitiously blinded married women who were not in the Rehabilitation Institute. The identified women gave names of others that they knew but were not currently at the Rehabilitation Institute until the researcher got the number of cases required. This method facilitated easier identification of women in similar circumstances (Orodho, 2005).

3.4.2 Sample Size
The study sample comprised 20 women who are adventitiously blinded. Ten were purposively sampled from the centre. Ten were obtained from outside the centre. However, out of 20 sampled respondents, four respondents did not respond to the questionnaires after they realized they were not to be paid. The other four did not participate in the interviews without explanation. So, the researcher had to utilize responses from 12 respondents. Through interviews, the researcher was tipped by rehabilitatee and the blinded personnel at the Institute about the married women who are adventitiously blinded outside the Institute.

3.5 Research Instruments
Semi-structured interview schedule formed the research instrument. The married women who were adventitiously blinded were not in a position to read printed materials and questionnaires. In addition, even for those few who had the ability to read Brailled materials, it was not possible to have Braille machines to help them write out the
information needed. Therefore, the researcher had a set of questions when interviewing respondents and wrote down the responses.

The instrument had two sections. The first one consisted of five structured questions which formed the introduction of the interview schedule. The second section had four open-ended questions which were according to the objectives of the study. Finally, the interview guide provided directions or explanations regarding the method of gathering data. The interview questions were structured according to the objectives of the study.

3.6 Pilot Study
A pilot study whose participants were similar to the target group for the main research was conducted in Nairobi. The researcher interviewed five respondents from the Kenya Institute for the Blind (KIB) centre in Nairobi West. The interviewees were accessed through the director of the Institute. Those five respondents were not to participate in the main study.

Piloting is necessary in order to enhance validity and reliability of the instrument chosen (Mugenda & Mugenda, 1999). The pilot study enabled the researcher to modify research instruments before the actual study took place. For instance, unclear directions, cluster questions and wrong phrasing of interview questions were cross-checked.

3.6.1 Reliability
Reliability of an instrument is the consistency in producing the same results in two or more trials to measure the same thing (Orodho, 2004). The research instrument was administered twice after a period of one week. Reliability was assessed by the University supervisors. Their advice was used to modify the research instrument.

3.6.2 Validity
Validity is measuring what you think you are supposed to be measuring. In this study, validity was ensured through establishing whether the content in the questionnaire was
measuring what it was supposed to measure. According to Orodho (2004), validity is defined as the degree to which a test measures what it purports to measure. After validity test, corrections were made before actual administration of the research instrument.

3.7 Data Collection Procedures
The researcher conducted face-to-face interviews with the married women who are adventitiously blinded at the Institute and outside the Institute at their own convenient time and venue which was to be agreed upon through appointment. Respondents were initially assured of confidentiality of the information they were to provide. The researcher asked the questions the way they were on the questionnaires as she recorded all the required information from the interviews and transcribed it into a written form afterwards. A tape recorder was also used to assist in collecting the information.

3.8 Data Analysis
Data analysis is the process of bringing order, structure and meaning to the mass of information collected. In this study, the collected data from interview schedules were analyzed thematically. The collected data were categorized in relation to the objectives of the study. Key quotations were highlighted. All the coded materials under the major themes of topic were put together for summarization reports and conclusions were drawn.

3.9 Ethical Considerations
The researcher sought permission from the Ministry of Education (MoE) through the Graduate School of Kenyatta University. She assured respondents of the confidential use of the research data collected from them. The researcher then made preliminary visits to the research Institute to establish rapport with the director, deputy director and guidance counselors at the Rehabilitation Institute. For respondents outside the Institute, the researcher made rapport through the chief, sub-chief and village elders.
CHAPTER FOUR
PRESENTATION OF DATA ANALYSIS, RESULTS AND DISCUSSION

4.0 Introduction

This chapter presents analysis, results and discussions of the challenges encountered by married women who are adventitiously blinded in Machakos District: Implications for Rehabilitation Opportunities in Kenya. The study was required to address the following research questions which were derived from research objectives:

i. What are the challenges facing married women who are adventitiously blinded in Machakos District, Eastern Province, Kenya?
ii. What socio-economic and educational opportunities are available to help overcome the challenges faced by married women who are adventitiously blinded in Machakos District?
iii. What methods can be used to provide positive attitudes towards married women who are adventitiously blinded in Machakos District?
iv. What kind of assistance do married women who are newly blinded in Machakos District require?

In this chapter, the results are discussed under the following subheadings:

a) Challenges encountered by married women who are adventitiously blinded.
b) Socio-economic and educational opportunities
c) Raising awareness on married women who are adventitiously blinded.
d) Assisting married women who are adventitiously blinded.
4.1 Challenges Faced by Married Women who are Adventitiously Blinded

This section presents data from field interviews. The interviews were intended to find out the stability of the married women who are adventitiously blinded in Machakos District.

4.1.1 Marriage Stability

From the field interviews with married women who are adventitiously blinded in Machakos District, those who were happily married were 3 (25%). Those tolerating their marriages were 3 (25%) and those who had separated with their husbands were 6 (50%).

**Figure 4.1: Marriage Stability**

![Marriage Stability Chart]

From the findings from figure 4.1 above, 25% of the respondents were happily married, 25% were tolerating marriages while 50% of the respondents were separated.

The findings of the study revealed that 6 (50%) married women who are adventitiously blinded were deserted by their spouses as had been observed by Getui & Ayanga (2002). They had noted that a spouse might even marry another woman. The study also observed
that when blindness occur after marriage men are more likely to divorce their wives who becomes adventitiously blinded as had been discussed by Fine and Asch, (1981) who had noted this and further indicated that rarely does the marriage break down if it is the man who becomes adventitiously blinded. From the findings the 3(25%) who are tolerating with marriage is an indication that married women who are adventitiously blinded have to put up with relationships that are abusive because of their limited social and economical means. Only a minor fraction of married women who are adventitiously blinded are able to sustain their marriages after adventitious blindness in marriage (Mathews, 1983).

4.1.2: Spousal Companionship and Assistance in Domestic Chores

Those married women who are adventitiously blinded that approved of their spousal companionship and assistance in domestic chores constituted 3(25%) of the respondents. They claimed that their husbands supported them in cooking and washing, while 9(75%) respondents said they were not supported by their spouses in any way. The findings then established that the married women who are adventitiously blinded were in unfulfilling or abusive relationships because of their limited social and economical means or because the only alternative may be life in an institution (Mathews, 1983).

One of the respondents had this to say;

_I lost my eyesight abruptly. I was in the farm together with my children. I could not believe it. My husband was informed but nevertheless came home late, drunk and showed no concern_ (Married woman who is adventitiously blinded, No. 11, interview, 11th Feb. 2010).

Another respondent had this to say;

_I live with a lot of tolerance. He does not assist me at all. He is not bothered about me at all. He claims that I come from a cursed family. He is contemplating of getting married_ (Married woman who is adventitious blinded, No.10, interview, 6th Feb. 2010).
Figure 4.2 Spousal Companionship and Assistance

The figure 4.2 above indicates that 3(25%) of the respondents enjoyed companionship and support of their husbands while 9(75%) did not enjoy any of the two.

The study findings established that married women who were adventitiously blinded did not enjoy unconditional love and security as expected from their husbands. The study findings concurred with Kamotho's statement that many people imagined a blind woman as a burden and even equated blindness to a curse. The findings also established that the husbands assumed that the disabilities made their wives unfit (Corbett, 1989).

Married women who are adventitiously blinded experienced sexual abuse inform of oppression. Cole (1984) had noted that sexual abuse has more to do with oppressive use of the power than to do with sex. The findings also revealed that married women who were adventitiously blinded are asexual. Their spouses did not show any concern on them (Watson, 1984).
4.1.3 Assistance by In-Laws

Concerning the views of the family members, 11(91.67%) respondents complained that they were not given assistance by their in-laws. 1(8.33%) only one respondent said that her in-laws supported her.

Figure 4.3: Assistance by In-Laws

The figure 4.3 above indicates that 1(8.33%) enjoyed assistance from in-laws while 11(91.67%) did not.

One respondent had said;

*On losing my sight my mother in-law told me openly that his son had to remarry. She said that there was too much work and it needed someone to manage it* (Married woman who is adventitiously blinded, No.6, interview, 20th Jan. 2010).

Another respondent had this to say;

*My mother in-law was heartless. She united with her daughters to throw me out of my house. My husband sided with them* (Married woman who is adventitiously blinded No.7, interview, 28th Jan. 2010).

The study findings established that the married women who are adventitiously blinded encountered negative attitude by the society such as marital tension, isolation, slow mobility, lack of agricultural productivity and cultural stigma. The findings established that the married women who are adventitiously blinded experience social challenge of motherhood and nurturance. This concurred with Traustadottir (1990) writings where he
explained that since married women who are adventitiously blinded are in need of being taken care of, it is difficult for many to imagine how the same person is a mother and how she can fill the caring and the nurturing mothering roles.

4.2 Socio-Economic and Educational Opportunities
This section examines the socio-economic and educational opportunities available for married women who are adventitiously blinded in Machakos District.

4.2.1 Socio-Economic Opportunities
The findings of the study revealed that 8(66.67%) of the respondents claimed they were not aware of any socio-economic opportunities available for married women who were adventitiously blinded. One had this to say:

*I have never heard of anything like socio-economic opportunity. I have to struggle for my needs. I have not met any government or NGO's officer suggesting socio-economic opportunities for persons like me. People hardly associate with people with misfortunes (Married woman who is adventitiously blinded, No. 10, interview, 6th Feb, 2010).*

The study findings established that the married women who are adventitiously blinded had social constraints that hindered their economic independence. These challenges are in agreement with Scholl’s (1996) study that indicated that married women who are adventitiously blinded experienced a lot of isolation. He also said that people imagined the persons with visual impairment as a debilitating black void filled with isolation and loneliness. People had an image of a person who is totally inadequate and unable to take care of herself. The findings of the study were also supported by Kamotho (1995) who identified blindness as a social stigma which is hurting to a blind mother.

The findings established that 8(66.67%) had not accessed any information on socio-economic opportunities. There was therefore a challenge of accessing them and it’s likely they were excluded from all socio-economic activities that would assist them. This tallies with literature written by Israel (1985) who stated that married women who are adventitiously blinded have complained that they are excluded from women’s movements.
because meetings and conferences are typically held in inaccessible places. In addition, materials are usually available in print only not in Braille or on tape. The findings also indicated that 8(66.67%) had no idea of what was happening about them. It would then mean employment policies have devoted little attention to the disadvantaged employment status of married women who are adventitiously blinded (Berg, 1986 & Bowe, 1984).

However, 1(8.33%) respondent claimed she was aware of social economic opportunities through her own family members who had enabled her to exploit them. She had this to say:

*My family members joined hands and bought me a sweater machine upon completion of the rehabilitation. They assisted me in joining the sweater pieces neatly marketing them. Source of money is a limiting factor to my business (Married woman who is adventitiously blinded, No. 2 interview, 15th Jan, 2010).*

**Figure 4.4: Socio-Economic Opportunities**

The figure 4.4 above showed that 8(66.67%) were not aware of the socio-economic opportunities available but 3(25%) were aware of socio-economic opportunities but had not identified the area to exploit and 1(8.33%) was aware of socio-economic opportunities and had exploited area of sweater making.
4.2.2 Employment Before Blindness

The study revealed that 2(16.67%) of the respondents said they had established businesses before becoming blind. One respondent said this:

I used to educate my siblings since my parents had no source of income. My husband could not ask me on this because he knew these were my efforts. I could support his parents who were old from that business (Married woman, who is adventitiously blind, No.2, interview, 15\textsuperscript{th} Jan, 2010).

Another respondent had the following to say:

My Saloon used to earn me a lot of money. I was totally an independent woman. I used to lead a beautiful life. I had furnished my house with money I got from my business. I had several customers (Married woman who is adventitiously blinded, No.3, interview, 23\textsuperscript{rd} Jan, 2010).

It's worth noting that 5(41.67%) of the respondents had formal employment. Among them two were teachers, a lawyer, clerical officer and a cateress. They all played varied roles in their families. They therefore had good relationships with their family members they had happy lives too.

The study also found out that 5(41.67%) of the respondents were in the Jua Kali sector. They claimed that Jua Kali earned them their living. Among them one respondent said:

Even though I was a casual labourer, I cannot forget it gave us food, shelter and clothing. I did not borrow anything for my children. We lived a happy life (Married woman who is adventitiously blinded, No.4, interview, 26\textsuperscript{th} Jan, 2010).

From the views of the married women who are adventitiously blinded, it was noted that they were independent economically, whether with much or little money. The findings showed that they were trying to improve their lives as well. The findings were in agreement with Maslow's Hierarchy of needs that explained that one's basic needs had to be met to enable one to move up to the next level on the hierarchy of needs.
From the figure 4.5 above, 5(41.67%) of the respondents were in formal employment, 5(41.67%) were in Jua Kali sector while 2(16.67%) had established business.

4.2.3 Current Employment Status

The findings established that 4(33.33%) respondents were in formal employment that the two teachers, one telephone operator, one house mother but the lawyer lost her job.

The study findings revealed that 8(66.67%) of the respondents were not in any employment which was a challenge to the study.

Since 8(66.67%) of the respondents were not in employment it can be said that majority of the married women who are adventitiously blinded were not in any employment while those few in employment were still in the traditional stereotypically female low-paying jobs with little hope of advancement. These jobs included secretarial work, teaching, nursing, social work and psychology among others Kartzen (1997).
The findings also identified that the employment policies have devoted little attention to the disadvantaged employment status of married women who are adventitiously blinded. The finding draws a conclusion that the economy in general and specialization services in particular restrict employment opportunities and the lives of married women who are adventitiously blinded. The fact that 8(66.67%) are not in any employment would lead to a conclusion that they can experience a significantly poor status due to unemployment and partly due to the fact that when they work, they receive low wages (Bowe, 1984).

It can also be suggested from the findings that little have been done in introducing the married women who are adventitiously blinded in male dominated carriers. This concurs with Russo and Jansen (1998) study that explained that married women who are adventitiously blinded are channeled into traditional female fields by school chancellors which are likely to make them encounter greater obstacles than non-disable women if they attempt to pursue carrier in male dominated profession.

_"I was a young lawyer before I became blind. I was in private sector. My employer dumped me because he felt I was incapable of performing my duties. I needed to think of what to do next. I am dependent on my husband. I have lost my truck in life" (Married woman who is adventitiously blinded No.8, interview, Feb, 6th 2010)._ 

Another respondent had this to say:

_"My saloon business was doing very well but how on earth can any client go to unsighted woman for any beauty make ups or even hair making? All my clients went to other people" (Married woman who is adventurously blinded, No.3, interview, 23rd Jan, 2010)._ 

Another respondent supported what had been said by others and said:

_"I was a casual labourer. I used to be on demand. All my employers disappeared when I lost my sight. One employer claimed I could not distinguish weeds from plants" (Married woman who is adventitiously blinded, (No.11), interview, 12 Feb, 2010)._
All these sentiments supported the argument by Karzen (1997) that women without visual impairment were faced with quadruple bid in employment outcomes which are gender issues, disability, functional limitation and the gap in career development theory.

Table 4.1 Current Employment Status of the Respondent

<table>
<thead>
<tr>
<th>Position</th>
<th>N</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Telephone operator</td>
<td>1</td>
<td>8.33</td>
</tr>
<tr>
<td>House mother</td>
<td>1</td>
<td>8.33</td>
</tr>
<tr>
<td>Teacher</td>
<td>2</td>
<td>16.67%</td>
</tr>
<tr>
<td>Jobless</td>
<td>8</td>
<td>66.67%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>12</strong></td>
<td><strong>100</strong></td>
</tr>
</tbody>
</table>

Figure 4.6: Still in Employment

As indicated by Table 4.2 and figure 4.6, 8(66.67%) was unemployed as opposed to 4(33.33%) percent in employment.
4.2.4 Relief-off Duties after Blindness

From the study, it emerged that 4(33.33%) respondents were relieved off their duties.

One of the respondents had the following to say:

I had no problems at all with my employer. All my colleagues supported me morally, materially and emotionally. The District Education officer linked me to Machakos Rehabilitation Institute after which I was posted to the rightful teaching place (Married woman who is adventitiously blinded, No. 1, interview, 19th Jan 2010).

A different respondent observed the following;

Since I was working as a clerical officer in a government sector, I then became a telephone operator after the rehabilitation session of which I enjoy to-date (Married woman who is adventitiously blinded, No. 5, interview, 29th Jan 2010).

It emerged from the study that the respondents who worked with the government were given “total” rehabilitation in their places of work. The study’s validity is supported by Caroll’s (1961) observation that “total” rehabilitation is a process that makes full use of group strength and support, but is ultimately tailored to the unique personality and problems of each individual trainee undergoing the process. It also emerged from the study that of the respondents most 8(66.67%) were not in any employment.

One of the respondents had the following to say;

I was a lawyer in private sector, my employer declared me redundant. He gave me salary for three months and that was over (Married woman who is adventitiously blinded, No. 8, interview, 6th Feb, 2010).

From the views provided by the respondents on employment constraints, it’s clear that there are many constraints in the non-traditional mainstream occupations. It also emerged from the findings that there were no career advancement processes that could provide information for women who would work in the 21st century. Kartzen (1997) said that these career advancement processes could help married women and their families augment opportunities for full inclusion in this society.
It also emerged from the study findings that 8(66.67%) of the respondents were not independent. The findings established this to be a great challenge to the married women who are adventitiously blinded. Kartzen (1997) had noted this and had suggested that “tough love” approach in all activities would foster the independence of the married women who are adventitiously blinded.

From the study findings 8(66.67%) of the respondents were married women who are adventitiously blinded had to depend on others. So, it was difficult to realize their self-actualization which is the realization of one’s potential according to Maslow’s hierarchy of needs.

One of the respondents had the following to say on this regard;

> Now that I have to depend on well-wishers and friends, I do not know whether I will have anything called mine by the time I get to the grave (Married woman who is adventitiously blinded, No.6, interview, 30\(^{th}\) Jan, 2010).

Another respondent supported this and said;

> My husband’s relatives know that I am a helpless creature. This is no secret. They feed themselves wholly and they give me the remains of which I take because I have no other way out. I take and eat it with my two children (Married woman, who is adventitiously blinded, No.7, interview, 4\(^{th}\) Feb, 2010).
The figure 4.7 above indicated that 4(33.33%) were relieved off their official duties while 8(66.67%) had challenges in relief of their domestic duties.

This challenge was described by Caroll (1961) who showed how loss of sight can affect one's chosen career which in-turn can eventually affect the external and internal motivation for doing what is expected or demanded of us. This will largely depend on a person's age, ability, training and environment.

4.2.5 Current Treatment by the Employer

It emerged from the study that 4(33.33%) of the respondents who were employed by the government had no problem with the employer. One of the respondents had this to say;

*At times I get to my place of work late as I have to struggle to get right vehicles. At work I do my best. My employer understands and appreciates my efforts* (Married woman who is adventitiously blinded, No.5, interview, 29th Jan 2010).

The satisfaction of the married women who are adventitiously blinded confirmed that they practiced the characteristics that are common to women who succeed and advance in their activities of daily living and other related field work activities which included
intelligence, a strong personal self-concept, self-esteem, drive, motivation, risk-taking, creative thinking, assertiveness, self-reliance, determination and perseverance (Karzen, 1997). The 8(66.67%) of the respondents had nothing to say since they were not in any employment.

**Figure 4.8: Treatment of Married Women who are Adventitiously Blinded in Places of Work**

![Job satisfaction chart](image)

The chart above indicated that 4(33.33%) had job satisfaction in contrast with 8(66.67%) who had no jobs.

### 4.2.6 Education

It emerged from the study that 10(83.3%) respondents had acquired basic education and 2(16.6%) had university education and what they were thirsting for is thorough rehabilitation to enable them handle complicated activities in their daily lives. Table 4.3 below shows the academic qualifications of the respondents.
Table 4.2: Academic Qualifications of the Respondents

\[ N = 12 \]

<table>
<thead>
<tr>
<th>Qualification</th>
<th>N</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Primary level</td>
<td>5</td>
<td>41.67</td>
</tr>
<tr>
<td>Secondary level</td>
<td>4</td>
<td>33.33</td>
</tr>
<tr>
<td>Primary school teacher level</td>
<td>1</td>
<td>8.33</td>
</tr>
<tr>
<td>University level</td>
<td>2</td>
<td>16.67</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>12</td>
<td>100</td>
</tr>
</tbody>
</table>

It can be concluded from Table 4.3 that most adventitiously blinded women have attained basic education.

One of the respondents said this;

> The skills learnt at the Machakos rehabilitation helps one to get oriented to the daily routine. This does not include what one used to do before you became blinded. One is forced to abandon the previous activities (Married woman who is adventitiously blinded, No.8, interview, 6\(^{th}\) Feb, 2010).

Another respondent had this to say;

> I used to operate a wholesale shop in my town. The business required a lot of supervision for you to earn profit. Without eyesight, my employees could take advantage and it could lead to total loss (Married woman who is adventitiously blinded, No.2, interview, 15\(^{th}\) Jan 2010).

Another respondent had this to say;

> This blindedness comes to an individual offguard. No one thinks of unique training which can enable one to catch up with what you used to do. Life demands are more than what one is rehabilitated on (Married woman who is adventitiously blinded, No. 3, interview, 23\(^{rd}\) January 2010).

It can be concluded from the sentiments given by the respondents that the rehabilitation services offered are yet to make the rehabilitates to be competent in their own domain. It
would then mean that policy-makers need to go back into the drawing board and try to address rehabilitation in the modern and competent world.

4.2.7 Plans to Establish More Workshops

The study findings established that 3(25%) of the respondents said there were plans to establish more workshops but could not explain which plans. 2(16.67%) respondents said ‘no’ without supporting their answers, while, 7(58.33%) respondents said they were not aware. The study findings were challenging as they indicated that the majority of the respondents were living in isolation and had not joined support groups that could assist them in successful adjustment. There were no government officers or the community’s own resource persons such as trained personnel from related ministries, NGOs, who could help the married women who are adventitiously blinded in sensitization and mobilization. This did not tally with the researcher’s conceptual framework (2009) on the way forward towards adjustment for married women who are adventitiously blinded.

The findings would also indicate that since 7(58.33%) were not aware of establishment of more workshops, they had a challenge of accessing educational information concerning them and this concurs with Ruso and Jansen (1988) study which indicated that married women who are adventitiously blinded are unlikely to have educational opportunities that will allow them access to highly valued, well paying professional positions.
The chart above indicates that 8(58.33%) of the respondents were unaware of the workshops existence.

4.2.8 Further Training or Specialized Training

The study findings established that 9(75%) of the respondents said there was need for further or specialized training while 3(25%) of the respondents did not respond.

One respondent said this;

Specialized training that could enable one catch up with what one used to do is very crucial because it can enable one to catch up with her life's vision eventually (Married woman who is adventitiously blinded, No.9, interview, 15th Feb 2010).

The study findings established that specialized training to assist married women who are adventitiously blinded in their process of adjustment is necessary. It would therefore be suggested from the study findings that the policy-makers need to be in touch with modern training techniques that would assist the married women who are adventitiously blinded to easily adjust themselves. From the findings, it can also be suggested that the married women who are adventitiously blinded would require scholarships to their field of specialization as a process of assisting them to adjust. This can be supported by Asch and Fine (1988) who complained that feminists with disabilities have criticized feminist
scholarships for excluding the experiences of married women who are adventitiously blinded from feminist analysis.

**Figure 4.10 Further Specialized Training**

The pie-chart above indicated that 9(75%) of the respondents required further training while 3(25%) did not give any response.

**4.3 Raising Awareness on Married Women who are Adventitiously Blinded**

This section presents data from field interviews which were intended to establish whether the community within Machakos District was aware that there were married women who are adventitiously blinded. It was also to determine whether they knew the causes to this effect, how they assisted them at the grassroots level and not forgetting to find out the government’s effort in assisting this community. The study findings revealed that 3(25%) respondents said that the community within Machakos was aware of the married women who were adventitiously blinded.
One of the respondents had this to say;

*The community around Machakos is aware of women who are adventitiously blinded since the Machakos Rehabilitation Institute organizes for white cane day with the District Commissioner’s Office. It is an occasional event and all people in the town witness it (Personnel, No.1, Machakos Rehabilitation Institute interview, 31st Jan 2010).*

2(16.67%) respondents claimed that awareness was minimal.

One of the respondents said;

*Awareness is minimal because there are parents withholding children/persons who are visually impaired in their homes (personnel No.2, interview, 31st Jan, 2010).*

8(66.67%) respondents said that the community was not aware of persons who are visually impaired.

One of them said this;

*If the community in Machakos town was aware of women who are adventitiously blinded, then the local people within Machakos could not be taking illicit brews which have made some people to loose their eyesight just a few years ago. (Personnel No.3, interview, 31st Jan, 2010).*

**Figure 4.11: Community Awareness**

![Community Awareness Pie Chart]

- **Minimal awareness**: 16.67%
- **Aware**: 25%
- **No awareness**: 67%
The above pie chart indicates that the highest percentage 7(66.67%) do not have awareness of who the adventitiously blinded women are. Those with minimal awareness were 2(16.67%) while those with awareness were 3(25%).

Since 7(67%) had no awareness on married women who are adventitiously blinded, it would then be suggested from the study that Community-Based Rehabilitation (CBR) did not have well-laid strategies for improving service delivery as indicated by Okech (2003) that is prevention of diseases that may cause disability. This supported sentiments made by personnel (No.3) who claimed that local people within Machakos consumed local illicit brew that had caused people to lose their eyesight.

It can also be assumed from the same findings that the respondents do not know their rights as married women who are adventitiously blinded. It can therefore be said that those who were supposed to be working for these people like Kenya Society for the Blind, Kenya Union for the Blind and even the women societies have done very little in integrating married women who are adventitiously blinded in the social fabric. It can also be concluded from the findings that these married women who are adventitiously blinded suffer isolation, marginalization and discrimination when it comes to implementing their rights. This is in agreement with Israel (1985) study that observed that married women who are adventitiously blinded are excluded from women’s movements.

4.3.1 Government’s Role in Sensitizing the Public

The study findings established that 8(66.67%) of the respondents said they were not aware of any roles played by government, while 4(33.33%) gave various roles of which one of them said:

*The government creates awareness through the disability council (personnel No.3, interview, 31st Jan 2010).*

Another respondent had this to say,

*The government should create facilities to blind students to access talking computers, use calculators (Personnel, No.2, interview, 31st Jan 2010).*
Another respondent added this;  
_The Machakos Rehabilitation Institute organizes white cane day in liaison with DC office every year (personnel, No.1, interview, 31st Jan 2010)._  

Another respondent claimed;  
_There are adverts on the media to do with persons with visual impairment (personnel, No.4, interview, 31st Jan 2010)._  

**Figure 4.12 Government Role in Sensitizing the Public**  

The figure indicated that a majority 8(66.67%) of the respondents were not aware of any role played by the government in sensitizing the public on the plight of challenged persons in the community while 4(33.33%) were aware.

The findings established that 8(66.67%) of the respondents had a challenge of accessing government sensitization towards them. This is supported by Israel (1985), was observed that inaccessibility was brought about by materials which were available in print, not in Braille or on tape.

The study findings established that the role of the government in sensitizing the public on the plight of challenged persons at the community level were minimal. This indicated that
the government did not plan, implement, or evaluate its initiatives properly through the Community Based Rehabilitation (Okech, 2003).

4.4 Assisting the Married Women who are Adventitiously Blinded
To assist the married women who are adventitiously blinded, the researcher wanted to establish how the married women who are adventitiously blinded were rehabilitated at the Machakos Rehabilitation Institute and assisted by the Church and the Non-Governmental Organizations (NGOs).

4.4.1 Rehabilitation of Married Women who are Adventitiously Blinded
The study established that rehabilitation is one of the ways that was meant to assist married women who adventitiously blinded. It emerged from the study that 9(75%) of the respondents were being rehabilitated but 3(25%) were not but had already been referred to the Machakos Rehabilitation Institute by PCEA Kikuyu Mission Hospital.

Fig 4.13 Rehabilitation

The figure 4.13 indicates that 9(75%) of married women who are adventitiously blinded included in the study were going through rehabilitation while 3(25%) were awaiting rehabilitation.
The findings revealed that all the respondents had knowledge of the fact that they were to be rehabilitated.

4.4.2 Skills Learned in the Rehabilitation Institute

It emerged from the study that the skills the married women learned at Machakos Technical Training Institute enabled them to cope with the Activities of Daily Living (ADL). The skills learned in Machakos Rehabilitation Centre were: technical courses such as leather work, knitting, typing, weaving, skills of orientation and mobility, counselling and Braille lessons. This is in agreement with Okech (2003) who supports vocational rehabilitation as a way of supporting the newly blinded.

4.4.3 Establishment of Other Rehabilitation Institutes

The study findings revealed that 6(50%) of the respondents agreed and supported their response by identifying Thika and Nairobi as places where other rehabilitation centres were to be established. 6(50%) of the respondents said they were not aware. The findings were in agreement with Okech (2003) on establishing Community Based Rehabilitation centres to assist the newly blinded individuals.

Figure 4.14 Establishment of Rehabilitation
The figure 4.15 above indicates that 6(50%) respondents were aware of the existence of the centres 6(50%) were unaware.

4.4.4 The Role of Church in Assisting the Married Women who are Adventitiously Blinded

The study established that 1(8.33%) respondent was supported by the church and had this to say;

The Catholic Church that I attended was of so much help to me that they took care of my children during the time I went for rehabilitation. They gave me money for upkeep and medication throughout the rehabilitation period. (Married woman who is adventitiously blinded, No.1, interview, 19th Jan 2010).

The study also established that 11(91.66%) of the respondents were not assisted by their churches in any way.

Figure 4.15: Assistance by the Church

The figure above indicates that 1(8.33%) are assisted by the church while 11(91.66%) are not assisted by the church.

The study findings revealed constraints of religious organizations being stakeholders of community based rehabilitation. Religious organizations could not be relied upon to be
charitable to the community members who were in need as had been observed by Okech (2003) who had identified religious organization to be stakeholders in assisting married women who are adventitiously blinded.

4.4.5 Knowledge on Non-Governmental Organizations
From the interviews, the findings indicate that 5(41.67%) respondents said there were non-governmental organizations but could not trace them. On the other hand, 7(58.33%) respondents said they were not aware of any non-governmental organizations that could assist the married women who were adventitiously blinded.

Figure 4.16: Knowledge of NGOs

The figure 4.16 above shows that 5(41.67%) were aware there were NGO operating to the area but 7(58.33%) said that they were not aware of this.

One respondent had this to say;

People will always tell you to look for assistance from NGOs but those who have the knowledge about them are not willing to share about them (Married woman who is adventitiously blinded, No.3, interview, 23rd Jan 2010).

It therefore emerged from the study findings that the non-governmental organizations had not done good awareness campaigns in Machakos District concerning rehabilitation of married women who are adventitiously blinded.
4.4.6 NGOs Assistance

It emerged from the study that none of the participants had been assisted by the non-governmental organizations. The study findings revealed a constraint of non-governmental organizations not supplementing government development at the community level as had been stated by Okech (2003). It was evident from the study findings that the non-governmental organization had not initiated any income generating activities for married women who are adventitiously blinded which was not in agreement with what Okech (2003) had stipulated to be their main role. It was, therefore, established from the study findings that the role of non-governmental organization as a stakeholder in Community-Based Rehabilitation had no major impact for the married women who are adventitiously blinded in Machakos District.
CHAPTER FIVE
SUMMARY, CONCLUSION AND RECOMMENDATIONS

5.0 Introduction
In this section a summary is presented covering the purposes, objectives, methodology, findings and conclusions of the research. The purpose of the study was to identify challenges encountered by married women who are adventitiously blinded in Machakos District and the implication for rehabilitation opportunities in Kenya. To achieve this, the following objectives were formulated.

i. To identify challenges facing married women who are adventitiously blinded in Machakos District.

ii. To identify social-economic and educational opportunities available for adventitiously blinded married women in Machakos District.

iii. To establish an awareness method to be used to enable positive attitude towards adventitiously blinded married women in Machakos District.

iv. To suggest ways of assisting newly blinded women in Machakos District.

The study aimed at using a sample of 20 married women who are adventitiously blinded but the researcher managed to get only 16. Of the 16 married women who are adventitiously blinded, four of them did not respond to the interview but 12 did. The study used purposive sampling to identify married women who are adventitiously blinded at the Machakos Rehabilitation Institute. Snowball sampling was then used to identify married women who are adventitiously blinded at the larger Machakos District. Interview guides pertaining to research objectives were used to elicit information from respondents. The data were analyzed thematically. The collected data were categorized in relation to the objectives of the study. Key quotations were highlighted. All coded materials under the major themes of topic were put together for summarization reports and conclusions were thus drawn.
5.1 Summary of the Findings
This section summarizes the findings of the study thematically as follows:

5.1.1 Challenges Faced by Married Women who are Adventitiously Blinded
Only a small fraction 3(25%) of married women who are adventitiously blinded were able to sustain happy marriages. The findings of the study revealed that married women who are adventitiously blinded were not happily married and lived in unfulfilling or abusive relationship because of their limited social and economic means. When blindness occur to women after marriage, men are more likely to divorce their wives who become adventitiously blinded. The findings observed that the husbands assumed that their wives' disabilities made them unfit to be wives. Married women who are adventitiously blinded experience sexual abuse in form of oppression. This is oppressive use of power than to do with sex. The findings also revealed that married women who are adventitiously blinded were asexual. Their spouses did not show concern over them. The married women who are adventitiously blinded experienced challenge of motherhood and nurturance.

5.1.2 Socio-Economic and Educational Opportunities
The study also looked at the socio-economic and educational opportunities accorded to blinded women in Machakos District.

5.1.2.1 Socio-Economic
The findings of the study revealed that the respondents were not aware of any socio-economic opportunities for married women who are adventitiously blinded. The results also established that the married women who are adventitiously blinded had social constraints that hindered their economic independence. They also experienced isolation and loneliness. They had been excluded from all social activities that would assist them. The fact that 8(66.67%) were not in any employment showed that the married women who are adventitiously blinded experience a significant poor status due to unemployment and partly due to the fact that when they work they receive low wages. It can be said that
employment policies had devoted little attention to the disadvantaged employment status of married women who are adventitiously blinded. Further, it can be observed that the economy in general and specialization services in particular restrict employment opportunities in the lives of married women who are adventitiously blinded. Little had also been done in introducing the married women who are adventitiously blinded in male dominated career. The 8(66.67%) of respondents who were not employed by the government had a challenge of relief in their domestic duties whereby they became dependants and lose their self-esteem.

5.1.2.2 Education
From the results of the study, it emerged that 10(83.33%) of the respondents had basic education and 2(16.67%) had university education. The educational materials could not be assessed by the married women who are adventitiously blinded because they were in form of print, not in Braille or on tape. They also experienced a challenge of accessing scholarships and educational opportunities that would allow them access highly valued and well paying professional positions. They also had a challenge of acquiring specialized training that would assist them in their process of adjustment

5.1.3 Raising Awareness on Married Women who are Adventitiously Blinded
The findings reviewed that 7(66.67%) were not aware of adventitious blindness. They therefore did not know the causes and prevention of adventitious blindness. The respondents did not know their rights as married women who are adventitiously blinded. Those who were supposed to be working for these people like the Kenya Society for the Blind, Kenya Union for the Blind and women societies had done very little in integrating the married women who are adventitiously blinded. They also suffered isolation, marginalization and discrimination when it came to implementing women’s rights. The role played by the government was minimal.
5.1.4 Assisting the Married Women who are Adventitiously Blinded

It emerged that every respondent was aware that rehabilitation was meant to assist the married women who are adventitiously blinded who were in various stages of helpless, emotional disturbance and dependence. The skills learnt in rehabilitation centre enabled married women who are adventitiously blinded to cope with activities of daily living. The study also revealed that there was minimal contribution by the church. The non-governmental organization should assist and promote awareness campaign in Machakos District concerning rehabilitation of married women who are adventitiously blinded.

5.2 Conclusions

Based on the findings of this study, the following conclusions were arrived at:

i. The married women who are adventitiously blinded were not happily married and majority of those married lived in unfulfilling or abusive relationship because of their limited social and economical means.

ii. The married women who are adventitiously blinded women experienced a significant poor status due to unemployment and partly due to fact that when they work, they receive low wages. They have a challenge of accessing education fit for their advancement.

iii. The married women who are adventitiously blinded suffer isolation, marginalization and discrimination when it comes to raising awareness concerning their policies, rights, needs, potential and contribution.

iv. The role of the government, religious organization and the non-governmental organization in assisting the married women who are adventitiously blinded in the process of their rehabilitation was minimal.
5.2.1 Implications of the Findings

i. It's necessary for the government and those organizations fighting for the marginalized to devise ways of protecting married women who are adventitiously blinded from abusive marriages.

ii. It would also imply that policy makers would need to be in touch with modern training techniques that are specialized and make them accessible to married women who are adventitiously blinded to solve the issue of unemployment. The policy-makers would have to source for scholarships that would facilitate this specialized training to enable these women acquire the modern skills that would befit modern employment market that would also yield to high payment.

iii. It would therefore be necessary for the policy-makers, institutions working for the blinded persons, women movements to remove obstacles that hinder raising awareness on the equalization of opportunities for married women who are adventitiously blinded. This will enable the married women who are adventitiously blinded to exercise their rights and freedom as they participate in the activities of the society.

iv. The government, religious organization and the non-governmental organizations need to look for proper strategies of accessing the married women who are adventitiously blinded in order to have forums with them which would facilitate into the best ways of assisting them.

5.3 Recommendations

This section of the study gives recommendations on the findings of the study thematically as follows:

i. Methods of protecting and caring for the marriages of married women who are adventitiously blinded should be established by those who champion for their rights. The fact that there were negative attitude towards them calls for the need to sensitize the spouse and family members and other community members. This may help in creating a better understanding between the three parties. Elimination
of the negative attitude may help the married women who are adventitiously blinded feel secure, have a sense of belonging and develop self-esteem.

ii. Every work place should establish methods of working with those who become blinded to avoid their marginalization, isolation and discrimination. Those championing for their rights should address their employment and educational access in order to reduce the big challenge of unemployment and lack of access of educational information about them. This will reduce their poor economic status.

iii. Government should establish effective strategies for accessing married women who are adventitiously blinded and further look for effective methods of promoting awareness concerning them in every place.

iv. The government, religious organizations, non-governmental organizations should play an effective role of being stakeholders in establishing methods of assisting married women who are adventitiously blinded to avoid marginalization, isolations and discrimination.

5.4 Suggestions for Further Research

i. It is suggested that similar studies be carried out with married women who are adventitiously blinded at the Kenya Union for the Blind (KUB) Rehabilitation in Nairobi. This would help generalize the findings.

ii. A similar study should be replicated in other districts in Kenya where the adventitiously blinded married women are found.

iii. Similar studies should be carried out in other fields of disabilities in order to get a wider perspective on identifying challenges encountered by blinded women in Machakos District: Implication for Rehabilitation Opportunities in Kenya.

iv. It would also be important to carry out a study on identification of challenges encountered by blinded adolescents in secondary schools.
REFERENCES


Okech, T, (2003). Distance Learning Special Needs Education. Introduction to Community Based Rehabilitation. Nairobi: KISE.


APPENDIX A

INTERVIEW SCHEDULE

INTRODUCTION
I am a Master of Education (Special Education) student at Kenyatta University. I am carrying out a study on identifying social challenges encountered by adventitiously blinded married women in Machakos District. I would like you to help me complete this study.

I want to ask you some questions related to the social challenges you encounter. I shall maintain confidentiality in whatever you tell me. Your responses will help me make recommendations for alleviating social challenges encountered by adventitiously blinded married women. Your responses will be used only for the purpose of this research.

Thank you
Rachel Wangari Ndathe

SECTION ONE

1. What is your age?

2. What is your profession?

3. Which year did you get married?

4. How many children do you have?

5. When did you lose your ability to see?
SECTION TWO

1. **Socio-Economic Educational Opportunities**
   i. Are you aware of socio-economic opportunities
   ii. Has anyone from the government tried to alert you on socio-economic opportunities available for the visually impaired persons
   iii. Have you also made any initiative to source for any socio-economic opportunities to enable you to be self-sustained?
   iv. Were you employed before you became adventitiously blinded?
       If so, what were your roles in your family?
   v. Are you still in employment
   vi. Have you been given different responsibilities or relieved off you duties
   vii. How does your employer treat you in your current condition

Education
   i. What is your academic qualification
   ii. Are there plans to build more workshops for married women who are adventitiously blinded
   iii. Do you need further training or specialize training in order to cope with married life.

2. **Challenges facing married women who are adventitiously blinded**
   i. How is your marriage
   ii. Is your husband as loving as he was before you became blinded
   iii. Is your husband proud to walk with you/attend functions in your company
   iv. Does he share domestic chores with you e.g.
       • Washing
       • Cooking
   v. How do the family where you are married view your condition?
3. Awareness methods used to provide positive attitude to married women who are adventitiously blinded
   i. Do you think the community is aware of the visually challenged persons within the community? Please explain.
   ii. What role is the government playing to sensitize the public on the plight of the challenged persons in the community.

4. Assisting newly blinded women in Machakos District
   i. Have you been rehabilitated?
   ii. What skill did you learn at the rehabilitation centre?
   iii. Are there plans to establish more rehabilitations?
   iv. What is the role of the church in assisting the newly blinded?
   v. Are there non-governmental organizations dealing with above members?
   vi. How do they assist them?
APPENDIX B

RESEARCH PERMIT

This is to certify that:

Prof. Dr. / Mr. / Mrs. / Miss. RACHEL
WANGYE M. NCHAI

of (Address) KENYATTA UNIVERSITY
P.O. BOX 43844-00100

has been permitted to conduct research in:

Location: MACAUKOS
District: EASTERN
Province: KENYA

on the topic: CHALLENGES ENCOUNTERED BY ADAPTATIONALLY BLIND IN MACAUKOS DISTRICT: IMPLICATIONS FOR REHABILITATION OPPORTUNITIES IN KENYA

for a period ending 31ST DECEMBER, 2010.

Applicant's Signature

Research Permit No. NCST/BRI/12/1/65/783
Date of issue: 31/08/2010
Fee received: SHS 1,000

CONDITIONS

1. You must report to the District Commissioner and the District Education Officer of the area before embarking on your research. Failure to do that may lead to the cancellation of your permit.
2. Government Officers will not be interviewed without prior appointment.
3. No questionnaire will be used unless it has been approved.
4. Excavation, filming, and collection of biological specimens are subject to further permission from the relevant Government Ministries.
5. You are required to submit at least two (2) four (4) bound copies of your final report for Kenyans and non-Kenyans respectively.
6. The Government of Kenya reserves the right to modify the conditions of this permit including its cancellation without notice.

REPUBLIC OF KENYA

RESEARCH CLEARANCE PERMIT

GPK605543m110/2010

(CONDITIONS—see back page)