

Essay:

Problems Facing Disabled People in Malawi: A Critical Reflection on My Encounter with a Disabled Woman in a Rural Area in Malawi

by

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Abstract

This critical reflection is based on my encounter with a disabled woman in a district in Malawi, and how I have reflected and analyzed the encounter using social work theories. The essay reflects on the story of the disabled woman and my own perception at that time, in addition to my analysis of these perceptions using different perspectives in social work based on my current understanding of these perspectives. In line with Fook's (2002; 68) critical reflection techniques, social work theories will be applied to deconstruct and reconstruct the critical incident. The essay highlights the challenges and dilemmas I encountered in attempting to make meaning out of this encounter, which left me helpless and powerless, as I could not offer her any sustainable help at the time. The essay begins with a background on the situation of disability in Malawi, and subsequently the critical incident is also described in detail. The analysis and reflection applies the systems theories proposed by Healy (2005) and Payne (2005) to critically understand and deconstruct the story, while the strength perspective and empowerment theories described by Howe (2009), Healy (2005) and Fook (2002) have been applied to suggest intervention points and reconstruct the story.

Background on the situation of disability in Malawi

Disability is one of the major problems in Malawi, and most of the problems that disabled people find themselves in require the attention of social workers. Because there are many other conditions that disabled people face on top of their disability, the task of helping disabled people is not an easy one for a country such as Malawi. Being a poor country, Malawi lacks the necessary resources such as medical and material support to effectively help people with disabilities. In 2003, SINTEF conducted a disability living conditions survey in Malawi (Eide et al., 2004), which found out that from a total of 3,058 households randomly sampled in all the regions, 1,521 of the households had a member with a disability. The study found that Malawi had a growing number of people with disabilities, and that they faced more problems than their able-bodied counterparts. For example, disabled people were less likely to be married than non-disabled people, and it was also noted that 15.5% of the disabled people were divorced compared to 5% of non-disabled. At school, disabled children had lower rates of school attendance compared to their able bodied

counterparts, with the problem further compounded when gender is considered because 41% of disabled girls never attended school compared to 27% of disabled boys (Eide et al., 2004). Malawi is one of the poorest countries in Africa with a challenging economic climate and high levels of unemployment, but according to FEDOMA (2004) the problem of unemployment is much higher among disabled- compared to non-disabled people with no disabilities. Nonetheless, people with disabilities who acquire employment skills still find it difficult to find a job; this indicates that disabled people do in fact encounter discrimination in the labour market. As a direct consequence of this, households with disabled family members have a lower living standard than the average. At best, disabled people are considered the silent recipients of public charity, and it is estimated that as of 2010, there were 4.6 million disabled people in Malawi out of a total population of 14.9 million (NSO, 2010).

The critical incident: My encounter with a disabled woman

One morning in 2009 I went to a district in a rural area where I was conducting research interviews as a research assistant with women regarding gender-based violence, and since I was a stranger in the village, I used a snowballing method to recruit interviewees. After my first interview I was directed to another house, and when I knocked on the door, a woman came out. The first thing I saw was that the woman was disabled; she could not walk so, she crawled to come to where I was. She had very short legs and very short arms, all of which were crippled, and the moment I saw her I was filled with pity for her and wondered how she survived. The woman introduced herself as Maria (a pseudonym). I introduced myself, told her the purpose of my visit and then asked for her permission to join the research project. Maria agreed and expressed her gratitude that I was there to visit her, stating that she did not receive many visitors. One of my research techniques is to build a rapport with the interviewees by engaging in small talk unrelated to the topic. I did so to make the interview more of a conversation than the normal question/answer pattern that makes most respondents nervous. After some small talk with her, I posed my first question in my interview guide. Much to my surprise, Maria gave me her entire life story when I asked her how old she was. It was Maria's story that left me in a dilemma and a hopeless situation, as this was my critical incident.

Maria said she was happy that she finally had someone to talk to who she felt would give her help. I realized that Maria did not understand the reason why I was there, and I clearly explained to her again that my research was about gender-based violence in the family. From the way she responded to my question, it was clear that she still perceived me as someone who was there to hear her story and help her. This is usually the case for many people in Malawi, as when one goes to the village for research, everyone thinks that the researchers are government agents who go to the villages to hear problems that people are facing and give them solutions. Having knowledge of this, I politely attempted to bring her back to the interview questions. I tried to introduce some comments that signaled the focus on what I was there for, but she was still off track and continued explaining her story from the time she was born. I struggled to find a proper way of making her stop, but her story gradually caught my attention. I put down my pen and paper and listened to her.

Maria told me that she was born disabled, and when she was young her mother took care of her. She was born from a poor family and when she was a baby, the doctor asked her mother to go to the hospital with her at least once a month for physiotherapy so that she could develop the ability to walk and use her legs. The hospital that Maria's mother was told to go to was in Blantyre, which is a big city located 90 kilometers from Thyolo where Maria and her family lived. The visit to the physiotherapist required some money for transport, and since they were poor Maria never visited the physiotherapist, even though this was free at the government hospital. Maria spent most of her life at home and did not go out a lot, because going out meant that her mother had to carry her to the place and Maria's mother thought it was better if she stayed at home. Maria was not taught many things, as her mother did many things for her such as bathing her, moving her around and making food for her.

Maria's school experience

In Malawi, children normally start going to school at the age of 6, though some go as early as 5. By the time Maria was 6, she could not go to school because her mother thought she still looked too young. Maria stayed at home until she was 11 years old, and then decided she wanted to go to school. At this point, Maria still could not go to

school on her own because her parents could not afford to buy her a wheelchair, so on the first day of school Maria was carried to school by her mother. Many people discouraged Maria's mother about the idea of keeping Maria in school, arguing that since she could not do things on her own she would be a burden to the other kids. On her first day at school Maria was frustrated by how the other kids treated her; they made fun of her disability, while others just stared at her. Maria felt out of place and could not handle the frustration, as she felt discriminated against in everything the other kids were doing, thereby robbing her of the desire to be in school. When she left school that day she decided that she would never go back to school, and that was the only day that she ever attended a class in her life.

The school incident gave Maria the zeal to live like the other kids, insofar as she wanted to play like them and do things independently. Maria decided she would teach herself ways of moving around and bathing herself. When she started doing this, her mother was not pleased because she believed there was nothing Maria could do on her own and she wanted to do everything for her. Maria never gave up her wish of trying to be independent and as she grew older she started taking care of herself. She moved around by herself, and even started bathing herself and doing things that she never did before. Maria learned a lot of chores by watching her mother, such as learning to cook, and one day she surprised her mother by making her lunch when she was away. When her mother saw the food that Maria made, she was reluctant to eat it, saying Maria could not cook something that one could eat. This frustrated her because she had expected that her mother would be proud of her, thus realizing that her mother was the first person who believed that Maria could never do anything on her own.

The playground stigmatization

Maria wanted a life more than that of staying at home, and she decided to socialize with the other kids as they played. Due to her experience in the playground, Maria had a stigma that was visible because she had short arms and legs. When a stigma is immediately perceivable, the issue that remains is how much it interferes with the flow of interaction. Maria could not keep up with some of the activities that the other kids were doing because she was not physically able to do so. Inasmuch as she

wanted to play with the other kids, Maria felt stigmatized and sidelined in most of the activities. She recalled an incident when they were supposed to be in groups and nobody wanted to have her in their group because she could not physically contribute. Maria felt disqualified from the playground due to her physical incapability, and because of this she grew up with little socialization with people her own age.

When she was 14 years old, her father died and their economic status dwindled even further. Two years later Maria's mother also died, and Maria was left alone since her siblings were all married and out of their parents' home. For various reasons, no relative wanted to take her in, which forced her to start staying on her own at the age of 16. Many people, including her siblings, helped her by giving her food once in a while. She survived, even though she had trouble in trying to get food every day. She tried to make ends meet, though she lived a poor life and on some days slept on an empty stomach.

Maria's marriage life

Maria got married at the age of 18 to a man she did not know very well. She became pregnant, and before the child was born the man left her. Maria said she married again three times after her first marriage, but all the men gave her a child and then left her. Some of them did so because people laughed at them for marrying a disabled woman, while the others simply left her because they later found partners who had no disabilities. This agrees with the findings of the study conducted by SINTEF (2004), which says that disabled people are less likely to marry than their non-disabled counterparts. Maria finally decided not to marry again but to raise her four children. At the time I visited her, all of her children were of school age, though none of them was in school because Maria could not afford it. Her eldest daughter went to school once and was frustrated when her friends made fun of her clothes, and she decided to do small piecework in the village to help her mother in feeding their family. Maria said she could hardly make a living, but all her children were supportive and helped her with most of the things around the house and in the garden where they grew crops for consumption.

Exclusion from developmental programs

Maria was also removed from the beneficiary list of the fertilizer subsidy programme because she is disabled. The fertilizer subsidy programme is a government initiative to help poor people buy fertilizer at a cheaper price, although the people in the village said it was a waste of resources to give her fertilizer because she could not farm. Even though this was said about her, Maria had a garden where she grew maize and other vegetables for consumption. She took care of the garden with her children but they did not harvest much because they did not use any fertilizer. Maria was also excluded from the loan club in the village, which gives loans to women so that they can start small businesses to boost their family incomes. Maria was excluded from this club because the villagers said she could not be productive with the loan, and if she was not able to pay back the loan then the club would run out of money. They argued that she could not use the money effectively because she was disabled. When she finished telling her story, Maria asked me to help her by talking to the chief in the village so that she could have the same rights as any other villager. She also asked me to help her in any possible way that I could.

After listening to her story, my eyes were filled with tears not just because I felt sorry for her, but also because there was nothing I thought I could do to help her. This was a hopeless situation, in which I felt useless since I could not act on what I had heard. Maria's experience as a disabled woman is quite representative of Malawi insofar as she is currently not married, has been divorced four times and leads a very poor life together with her family. Additionally, she is not educated, which has extended to her children, and she is discriminated against and stigmatized in many aspects of the everyday life. Fook (2002; 98) defined a critical incident as that which is significant to a person for whatever reason. Fook also argued that a critical incident may be important because it was traumatic or even because it was so mundane that it encapsulated something crucial about the nature of social work (ibid.). Furthermore, the critical incident might be remembered because it is unresolved or because it posed a dilemma for the person (ibid. 91). I define the story of Maria as such a critical incident because it remained unresolved to me. On the one hand, I was in a dilemma because I did not know what I could have done to help her, whereas on the other I did not know who could help her or how. It was also because of this critical incident

that some years later I decided to study social work so that I could help people such as Maria. I left Maria's house after giving her some money. I told her that there was nothing more I could do to help, but I promised her that if I ever met a social worker who dealt with disability-related problems I would mention her problem to this person so they might be able to help her.

Analysis of the incident or deconstruction

Howe (2009) stated that the world of people is of course social work's domain. The more the world makes sense or feels meaningful, the easier it is to negotiate our way around it. If the world in which we work happens to be complicated and turbulent, the need to make sense of- and know our way around it is even more urgent. Social workers deal with people in need and under stress, operating in environments where there is inequality and injustice. Power, money and opportunities are not fairly distributed (Howe, 2009; 2), which could be applied to the situation of disabled people in general. Howe argued that not being able to understand what is happening is stressful, both for the social worker and the service user. This is the reason why theories are regarded as a way of making sense, because they help social workers to see the regularities and familiar patterns in their practice (ibid.).

Healy (2005; 10) discussed how social work theories provide the guidance for practice because they identify who the focus should be on and how social workers should practically proceed. In my story, I had no idea on how Maria could be helped, but the social work theories point to some starting points to understand Maria's situation. Looking back at the story, the first thing that struck me is the relationship I had with Maria. Healy (2005; 53) argued that the relationship between a social worker and a service user is a vehicle for change in itself. Even though I did not go there as a social worker, Maria did perceive me as a social worker, and she believed someone in my position would be of help. Now I realize that I did not have any self-knowledge on my part, as self-knowledge is a formal base for social work according to Borden (2000; 368). Hamilton (1958; 34 in Healy, 2005) argued that social workers must first be able to understand themselves and their emotional drives and impulses before they can truly accept and analyse feelings, aggressions and or stories of their service users. In this case, my lack of self-knowledge as a social worker might help

explain my reaction to the situation, which was more of sympathizing with her than actually offering any help. If I was to act in the position that Maria placed me in, e.g. that of a social worker, I could have reacted differently. This is because realizing the role of a social worker could have empowered my thinking, and in this case I positioned myself as a research assistant who was there just to collect data. Maria's story aroused my sympathetic emotions, and I felt sorry for her. After giving her money I felt I had done my part, as my role was similar to that of a friend and not someone who could offer professional help. Since I will use this critical incident to enhance my understanding and knowledge about social work in this essay, I raise these two questions to direct my reflection: If I was a social worker, would this have been the right way to handle such a situation? What could I do differently now with knowledge of social work theories?

The systems theory

Reflecting on my critical incident, I first look at what might have been the cause of Maria's problems. I draw attention to the work of Cree (2000) and Stein (2003) in Healy (2005; 59), which is that humans are profoundly social beings; this view challenges individualistic explanations of social problems. Healy (2005) describes systems theory as interpersonal systems, emphasizing the role of these systems in contributing to individual and community well-being. Looking at the environment that surrounded Maria, I might attribute some of her problems to come from her surroundings. The systems in this case could be the family, friendship ties and neighbourhood. Maria was excluded from the social world from the time she was born, and her surroundings in school made her leave school before she went any further. The treatment that came from her friends, and the fact that she felt like a stranger among people she was supposed to be friends with, excluded her from the social world. Even her own mother did not believe she could cook anything eatable. This system deprived her of the right to education, as well as being independent and fully valued. In this way, I find that the problem was not her disability but how the system interpreted her disability. The social structure and cultural processes in her village made her believe that there was nothing she could do, and her mother installed in her an attitude of dependency. Mattani and Meyer (2002) stated that the systems theory challenges the profoundly individualistic focus evident, and

encourages social workers to give substantially more attention to environmental change as described in Maria's case (Healy, 2005: 136).

Another important point is the analysis of the potential actors in Maria's story. Her mother could be regarded as the first player in this story, as she thought that the best thing she could do as a mother was to be there for her daughter all the time and to do everything for her. Inasmuch as this might have been done out of love for Maria, this was not helpful to her. The role that Maria's mother played in her life could also determine some aspects of her life because her role could either foster independence or dependency. Hence, it is useful for a social worker to consider these roles, and bring interventions for change if necessary. The other players could be her friends at school, and even those who played with her. By making fun of her, they decreased her confidence and self-esteem. The people in her village who excluded Maria from different aid programmes also hindered her productive life, since they believed that she could not make any contribution to the group because of her disability, and therefore was not suitable to participate. This shows that when looking for interventions in a service user's life, we cannot focus only on the client, but also on the different players who have had an influence on the client's life.

Howe (2009) argued that the systems approach to finding causes to problems could also be its strength in introducing intervention and change. He proposed that a change in one thing in the system could end up changing other things in a completely unexpected way. For example, looking at Maria as a young girl, a question could be what would have happened if her mother had perceived her as someone who could be independent and treated her as such? Or what would have been the result of a change in attitude among the community members towards disabled people?

Reconstruction with the strength theory: Disability is not inability

The strength perspective not only demands a focus on the person behind the label, but that we should also recognize that the individual has potential and strengths, and it is the potential and strengths that should be recognized, acknowledged and released. Maria lived most of her life under the label of being "disabled". The first thing that came to peoples' mind (including me when I first met her) was her

disability, and everyone, including her mother, limited her capabilities because of the label of disability. Healy (2005) highlighted that part of the values of social work is its emphasis on respect and service-user self-determination. The strength perspective focuses on the capacities and potentialities of service users. In Maria's story, people never believed that she was capable of doing anything, although her capabilities were overshadowed by peoples' doubts. Looking at her story from a critical perspective, it is noticeable that she had several strengths. For example, she learned how to cook, bath herself and to live independently with four younger children. Maria accomplished what many thought was impossible for a person in her condition, as she had strength and was determined to achieve more. Maria did complex jobs such as farming, which was considered to be an activity for able-bodied people. In several ways she proved that her disability was not an inability, but her efforts were constantly unrecognized by other people.

Saleeby (1997 in Healy, 2005) suggests that the strength perspective concentrates on enabling individuals to articulate and work towards their hopes for the future, rather than seeking to remedy the problems of the past or even the present. According to Saleeby, the strength perspective formula is to mobilize clients' strength such as talent, knowledge and capacities in the service of achieving their goals and visions, resulting in the clients having a better quality life on their own terms (ibid.). Reflecting on Maria's story, I think a social worker can start by mobilizing the strengths she had and working on utilizing them to the fullest.

Slightly differently, Weick et al. (1989) understand the strength perspective to be a strategy to search for resources that are already available to service users. This is to say, the role of a social worker is that of a translator, who helps people to see that they already possess much of what they need to proceed in their chosen path. Weick et al.'s explanation of the role of a social worker as a translator gave me an insight that a social worker does not always need to go and help people by giving them resources such as money and other material things, but to help them see and recognize the resources they already possess. Looking at social work in this way helped me realize that my position with Maria could have been helpful even if I had nothing to offer her. This could have been realized by making her aware of her own

strength and potential for positive changes. Weick et al. (1989) also point out that many social workers view their clients as victims, and this is exactly how I perceived Maria. To me, she was a victim in so many ways, and by doing this I allowed her to “buy in” to the pathological view of herself. Reflecting on this event, I realize that the right thing to do was to challenge my own mindset before passing this on to her. In a similar way, Howe (2009) argues that as social workers we should believe in our client’s strength and present ourselves in a way that can give the client the assurance of possibilities and the promises of life.

The strength perspective also highlights some solutions to the problem of stigmatization and marginalization. Goffman (1991) presented findings from research on social labeling, stigma and marginalization. One of them is that many of the practices adopted by human service institutions and human service professions contribute to the problems that they intend to overcome. As for Maria’s case, using the label “disabled” can impose a stigma on the person if we not aware of in which way we are using it. This can lead to a range of negative ramifications for their own self-understanding and the way others respond to them. For instance, by calling one “disabled”, it literally means “they are not able” or “incapable”. Language thus has the power to “elevate” and “inspire”, or to “demoralize” and “destroy” a person. Saleeby (1997, in Healy, 2005) urged social workers to be sensitive with their language, particularly in the description of a client’s perceived capacities and deficits. In Malawi, the language used to describe people with disabilities is stigmatizing and discriminatory. In Malawi’s local language Chichewa, disabled people are called “wopunduka” or “wodwala”, which literally means “the cripple” or “the sick”, respectively. The word “sick” is mostly used for many disabled people, which has several effects, including disempowering people with disabilities. The use of such language enhances stigmatization, discrimination and exclusion. Maria was excluded from the fertilizer subsidy programme because she was regarded as a sick person, and therefore someone who was not able to work. According to the rules of the programme, sick people are not included in the beneficiary list, so by describing her as sick, this automatically excluded her from the programme.

Howe pointed out that as a social worker you can also discover the strength of the client by asking certain kinds of questions such as survival questions, exception questions and possibility questions about their hopes, in addition to esteem questions about the good things that people say about them (Howe, 2009). These questions help people recognize and embrace the good and successful valued bits of themselves, thereby helping to rebuild their self-confidence. Calling back to my encounter with Maria, I realize that I was mostly interested in the sad part of the story, and never focused on her strengths, which was a limitation on my part if I was to be of any help. This critical reflection has given me an understanding of the framework of promoting respect for clients' potential and capabilities as proposed by the strength theory. At the same time, I see that highlighting the strengths and capabilities could also be a powerful intervention.

In my encounter with Maria, I felt powerless. Fook (2002) suggests that it is necessary to look at how we are positioned as social workers in relation to power, and what we think power allows us to do. If we find our lack of power to be potentially disempowering, such as I felt in my case, then we need to fashion new ways of thinking about power that places us back in the centre of possibilities. The view I had of myself as a powerless and helpless researcher obscured my thinking about the possibilities that could be of great help to Maria. Howe (2009) cautions social workers to be mindful of their own potential for being oppressive and discriminatory, adding that social workers need to exercise their powers with awareness, thought and sensitivity. For example, in Marias' case, if a social worker tells her what she needs and what she should do, then that will be disempowering. Howe (2009) added that it is by analysing the meaning of their own experiences that oppressed groups recover control. Social workers need to work in partnership with oppressed people and support them to gain more power, and to allow their voice to be heard (Dalrymple & Burke, 1995).

Conclusion

In this critical reflection, I have described how we can explain the problems faced by people with disabilities, such as in the case of Maria. With the application of these perspectives in understanding problems and their solutions, I can state that disability

is not inability; the only disability in life is a bad attitude. My encounter with Maria proved this and widened my understanding of such situations. By understanding this story critically, it has given me the opportunity to suggest solutions. This critical reflection has changed my previous perceptions, and will change my reaction in the future if I am found in a similar situation in my practice. My insights have gone from attempting to understand situations to attempting to make appropriate interventions that can bring about change. This allowed me to position myself in my future practice, and how I would use theory to bring about effective practice. From the critical incident, I have realized that to understand and make meaning of situations, I have to look at the broad picture by focusing on pieces of the entire story in order to create meaning. This critical reflection has also helped me to realize that theory is an integral part of our practice as social workers. Theory helps us to understand, and to also find solutions and interventions to different problems and issues of clients as we make use of patterns and familiar regularities in practice. Therefore we can use theory to find causes to problems and we can also use theory to suggest solutions to problems, and by putting theory to practice we can deliver solutions to service users. This critical reflection has enabled me to analyze and remake power relations in a contextually relevant way for social work practice. Critical reflection also adds to the knowledge of understanding complex cases as I have done in analyzing Maria's case. This has given me a scrutinized incident that I can learn from in order to practice effectively in new situations. Unpacking the constructions of situations and dilemmas in practice to help improve my understanding involved the exploration and critical analysis of elements such as context, values, my assumptions, alternatives and knowledge claims. Fook (2002) suggested that critical reflection helps to subject one's practice to a more critical gaze, and allows us to integrate theory and practice in a creative and complex way.

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