

Counselling Services: The Albatross of Students with Disabilities in the Pan African University in Ghana

Ficus Gyasi

Ghana Education Service

&

Samuel K. Hayford

University of Education, Winneba

Abstract

Universities set up counselling centres to provide services for students, including those with disabilities, to mitigate the challenges they encounter while schooling, in order to enhance their participation in academic work and social life. However, investigation conducted by the researchers revealed that the Counselling Centre in Pan African University in Ghana has become an albatross to students with disabilities. This paper describes the factors that have turned the Counselling Centre into an albatross for students with disabilities in the Pan African University in Ghana. The purpose of the study was to ascertain whether or not counselling services in the Pan African University were accessible to students with disabilities. A sample of 18 students with disabilities (six visually impaired, six hearing impaired and six physically disabled, respectively) was purposefully selected using maximal variation approach. Semi-structured interviews were used to collect data for the study. The researchers adopted thematic analysis to analyze the data. The results showed that students with disabilities were unable to access the much needed counselling service provided by the university due to barriers related to the location of the counselling centre and communication. These barriers adversely impacted on the students' moral and academic achievements. The students suggested that the University should decentralize the counselling services to make the services more accessible. The researchers recommended that the University should provide in-service training focusing on issues in disabilities for the professional counsellors in the University.

Keywords: students with disabilities, counselling services, barriers

Introduction

Globally, counselling services have become increasingly crucial for students and, in particular, those with disabilities in universities, because of the complexity of problems such students experience in their academic work and social life. According to Benton (2003), problems students in universities experience include but not limited to strained relationship, stress, anxiety, family issues, physical problems, personality disorders, suicidal thought and sexual assault. Gyasi and Hayford (in press) found that students with disabilities in universities in Ghana are also confronted with inaccessible physical environments, ill-equipped libraries, information in unsuitable format, inappropriate teaching methodologies and assessment procedures as well as non-affordable assistive devices, and unsuitable learning materials and equipment. The researchers argue that, in addition to the enumerated problems, students in Ghana also experience challenges emanating from insufficient and/or dysfunctional requisite learning and teaching equipment, inefficient internet connectivity, intermittent power fluctuations, poorly maintained and congested lecture theatres, non-availability of relevant reference books, lack of study centres, poorly coordinated transport system, lack of relevant support services as well as poorly organized funding schemes.

Essentially, the challenges students with disabilities experience are more diverse and unique in nature (Rose & Meyer, 2002; Smart, 2009; Tomlinson, 2001; Wylie, 2004). Such challenges include the failure to cope with schools' infrastructure because of functional limitation, as well as difficulty to adjust and fit themselves into schools (Brigman & Campbell, 2003; Cook & Kaffenberger, 2003). Furthermore, students with disabilities continually experience psychological pressures such as shock, disbelief, anger, denial, grief and bargaining in relation to their disabilities (Canary, 2008; Duquette, 2006; Heward, 2009; Smart, 2009). They are also confronted with isolation, teasing, as well as ridicule by other students (Berry, 2009; Heward, 2009). Again, Gyasi and Hayford (in press) also agree that the experiences of students with disabilities are shaped by factors including the type and degree of their impairments, family background and resources, the built environments, available programmes, resources and supports, attitudes of staff and other students, as well as policies and affirmative action of the institutions.

Literature shows that students with disabilities struggle to cope with stigmatic cultural standards, which make their counterparts without disability to find it difficult to interact with them (Dyson, 2010; Westling & Fox, 2004; Wylie, 2004). Also, such students manifest poor self-perceptions (Smart, 2009; Wylie, 2004), as a consequence of their mental and physical deviation from the norm. Some researchers have reported that students with disabilities feel insecure about their appearance and body image as they compare themselves to their peers (Heward, 2009; Lockhart, 2003). Arguably, the psycho-social well-being of students with disabilities depends on their perception of their personal image and identity. Besides, students with disabilities experience severe stress in their attempt to compete with others to measure up athletically, musically, scholastically or in popularity (Berry, 2009; Milsom, 2006). The failure to "compete" with peers and the society in its entirety, to a large extent, makes students with

disabilities feel inadequate. If counselling is intended to provide congenial environments, which in turn will enhance students' academic performance (Al-Banns, 2001), then counselling is crucially vital to university students with disabilities in Ghana.

Current Education Paradigm in Ghana

Prior to 2015, the education system in Ghana was mainly segregation. At the Basic school level pupils with disabilities were educated in special schools. Basic school in this context refers to kindergarten, primary and junior high school. At the secondary and tertiary levels however, students with disabilities have been educated in designated integrated institutions (Hayford, 2013; Hayford & Asare, 2011). Regrettably, none of the integrated institutions has introduced the necessary adaptations to their facilities, environments and curricula to enhance the participation of students with disabilities (Hayford, 2008; Subbey & Avoke, 2008). Ghanaian universities have remained inaccessible and restrictive learning environments for individuals with disabilities.

Some researchers in Ghana have noted that the most critical of all barriers to education are negative attitudes and prejudice (Subbey & Avoke, 2008). Negative attitudes and prejudice persistently affect people's perceptions about individuals with disabilities, which subsequently pose serious barrier to their social and education inclusion (Agbenyega, 2005; Avoke, 2002; Oliver-Commey, 2001; Aubbey & Avoke, 2008). Although Ghana adopted the inclusive education paradigm in 2015, it is too early for the requisite adaptations to facilities, environments, and curricula to enhance the participation of students with disabilities in educational institutions and, in particular, the universities in the country. Subsequently, the universities continue to implement their own operational guidelines, which are not guided by the national policy to ensure uniformity, consistency and effectiveness (Hayford & Asare, 2011). In the circumstance, students with disabilities continue to experience many difficulties as they learn in the mainstream educational institutions in the country.

Benefits of Guidance and Counselling

Following the numerous challenges students with disabilities experience in mainstream educational institutions in Ghana, it can be argued that although school guidance and counselling services are essential to all students and, in particular, those with disabilities across the world; these services are crucially important for students with disabilities in Ghana. Counselling services enable students with disabilities in mainstream schools to learn to behave with consideration towards others and to understand themselves better, know how to get along well with others, learn manners and etiquettes and skills in pursuing academic and leisure activities (Chireshe, 2011; Neukrug, 2011). Furthermore, counselling services in schools help students with disabilities in mainstream schools to adjust to the curricula and school life (Johnson & Johnson, 2003). Additionally, counselling services help students to make realistic decisions on academic, social and vocational options and finally choose an occupation, prepare for it, enter it and secure it. School counsellors guide and counsel students including those with disabilities in

mainstream schools to choose academic and vocational classes that are commensurate with their potentialities and capacities (Chireshe, 2012).

In spite of the tremendous benefits of counselling services to students at all levels of education, researchers are silent on accessibility of guidance and counselling services to the ever increasing population of students with disabilities in universities in Ghana. Due to the paucity of studies into the experiences of students with disabilities in universities in Ghana (Gyasi & Hayford, in press) and, in particular, access to counselling services, this study was important because it provided empirical data that could be used to inform decisions with respect to improvement of counselling services in the university. Also, following the adoption of inclusive education as policy imperative, it was vital to create opportunity for the 'voice' of students with disabilities to be heard, as they were in better position to describe how they felt about their schooling. It was against this backdrop that the study explored how accessible counselling services were to students with disabilities in the Pan African University in Ghana. Specifically, the study set out to describe the experiences of students with disabilities in accessing counselling services, examine the influence of the experiences on the students' academic and social life; describe students counselling needs and coping strategies and make recommendations for improvement. Thus, the study focused exclusively on students with disabilities. As stated earlier, the researchers were interested in capturing the 'voice' of students with disabilities, who were in the minority as they learned in environments which were set up exclusively for individuals without disabilities.

The study was guided by the following research questions:

1. What are the opinions of students with disabilities about counselling services provided at the Pan African University in Ghana?
2. How do the experiences of students with disabilities influence their academic, social and psychological adjustment?
3. What suggestions do students with disabilities have concerning making counselling services accessible to all?

Given that some public universities in Ghana have allowed persons with disabilities to enroll and pursue different programmes without any adaptations to their facilities, environments and curricula, the findings revealed the barriers imposed on such students, and ultimately measures the Pan Africa University could adopt to make counselling services more accessible to students with disabilities to enhance their academic, social and psychological adjustments. For the purpose of confidentiality and anonymity the researchers adopted the pseudonym *Pan African University* for the university.

The present study gleaned a number of tenets from the Humanistic theory, the social model of disability and the International Classification of Function (ICF) by the World Health Organization (WHO). The humanistic theory is a psychological perspective that emphasizes the study of the whole human being; accordingly, humanistic theorists study human behaviour not only through the eyes of the observer, but through the eyes of the person acting the behaviour (McLeod, 2007). The humanistic approach stresses on the personal worth of the individual, the

centrality of human values, and the creative, active nature of human beings. According to McLeod (2007), humanistic approach is optimistic and focuses on noble human capacity to overcome hardship, pain and despair. In agreement with the humanistic perspective the researchers wanted to capture the lived experiences of students with disabilities in a public university in Ghana with respect to challenges they encounter as they attempt to access counselling services and their coping strategies. Besides, from the perspectives of the International Classification of Functioning (ICF) and the social model of disability, the experiences (challenges) imposed on the students with disabilities in the study arose out of the interactions between functional limitations and an unaccommodating environment (Altman, 2002; Hughes & Paterson, 1997; Mont & Loeb, 2008; Shakespeare & Watson, 1997). From the ICF and social model perspectives, students' impairments in vision, hearing and physical would not necessarily translate into an activity or participation limitation if the environment accommodated their different functional status. Environment in this context refers to both physical and cultural environment as well.

Methods

Subsequent to the humanistic theory, the researchers adopted the phenomenology design and qualitative methods for data collection. Qualitative research is useful for studies at the individual level, and to ascertain, in depth, the ways in which people think or feel. The phenomenological approach was appropriate as it allowed the description of phenomena as experienced by the students with disability; it offered the uncovering of the 'experienced truth' and understanding of the persons' lived experiences (Finlay, 2011).

Context of the Study

The major consideration for selecting the study area was primarily based on the aim, which sought to explore the experiences of students with disabilities at a Ghanaian public university. The phenomenon under study was a typical one, which could be conducted at only three of the eight public universities in Ghana. However, the Pan African University, which has a department that offers programmes in special needs education at the undergraduate level, was selected as the research site.

As stated in Gyasi and Hayford (in press), the target population for the study comprised 158 undergraduate students with visual or hearing impairments or physical disabilities, who had disclosed their impairments to the university authority. Out of 158 undergraduate students with disabilities, 91 of them signed the consent form to participate in the study. However, 18 students with disabilities were selected using the maximum variation strategy to participate in the study. It was a purposive sampling strategy in which the researchers sampled individuals that differ on some characteristic or trait (Creswell, 2005, Hayford & Gyasi, in press). The strategy was adopted because it ensured fair representation of participants with different disability categories from different levels to be involved in the study. Level in this context refers to the year of programme. The study included students with visual impairment, hearing impairment and those in wheelchairs and/or using crotches, which allowed generalization of findings among the study

population (List, 2004). The sample size was determined on the basis of the different characteristics of the population (types of disability, level of student and their gender).

One-on-one interviews (semi-structured) and focused group discussion methods were used to collect data. Both the one-on-one interviews and the group discussion were recorded with audio recorder after permission had been sought from the participants. Data were analysed using thematic approach. Thematic analysis involved analysis of narrative data to identify prominent themes and patterns among themes (Braun, Gavey & McPhillips, 2003). To analyse the data, the recorded interviews were transcribed word by word. The researchers read the transcripts and listened to audio tapes repeatedly to get immersed into the data; an exercise referred to as dwelling with the data (Burns & Grove, 2009). The repeated reading and listening helped the researchers to identify themes relevant to the research questions. In the initial stage of data analysis, descriptive codes were used to identify emerging themes, that is, the terms participants used during the interviews. The descriptive codes were interpretatively coded, where meanings were attached to the participants' terms. Some related minor themes merged to form major themes which also reduce the data. The identified themes helped to clarify the nature and meaning of the barriers students with disability experienced and coping strategies while accessing counselling services. Also, the two researchers constantly checked and rechecked the themes in order to foster agreement between themselves.

Results

The following three broad themes were extracted from the data from the respondents: challenges, impact and suggestions.

Barriers relating to physical access

The predominant barrier that emerged from the data was inaccessible environments and information. From the data majority of the participants (13) complained about the lack of access to the University's counselling centre. Specifically, the participants vehemently complained about open gutters, stair cases and the inaccessible nature of environment where the counselling centre has been sited. This finding was not strange; as stated earlier, public universities are yet to adapt its facilities, environments and curricula to enhance the participation of students with disabilities in learning. Currently, public universities in the country continue to have inaccessible environments, old structures, dysfunctional and insufficient equipment among others (Hayford, 2008; Subbey & Avoke, 2008). In addition to physical barriers created by inaccessible environments, the students in the study not only faced problem with lack of funds to commute from their halls of residence to the counselling centre for support, but the students were also constrained by time as it took half an hour or more to get to the centre for support. The following were comments from some of the participants:

The location of the Counselling Centre is a challenge to me. Once I took a taxi from south campus to the centre and had a very bad experience. Because I cannot see, I move about with my white cane. After I had struggled to cross a gutter, I could not locate another one just ahead of me, I therefore fell into it and got seriously injured. (FVI-3)

What is even more frustrating is that, the environment around the Counselling Centre is not friendly to some of us who are physically challenged. There are several open gutters; the landscape is undulating, with no pavements to move on with your crutches or in a wheelchair. Besides, you need someone to carry you to the main corridor before you can enter any of the rooms. (MPI-2)

.... when I am going for lectures, I have to be carry at the back of colleagues to the halls, going for counselling which I think should be administered in friendly environment is a mirage. There no rams, the gutters are left open, erosion has created gutters all over the place; it is very frustrating. MPI-1

The comments from the students were very revealing; in spite of the differences in their disability, the difficult terrain in which the centre has been sited emerged as a major challenge to many of the students in the study. This was not however surprising; elsewhere, physical access has been noted as the most critical barrier imposed on students with disabilities in tertiary institutions (Fuller, Bradley & Healey, 2004; Madriaga et al., 2010; WHO, 2011), because of such students' functional limitation (Brigman & Campbell, 2003; Cook & Kaffenberger, 2003), which as conceptualized by ICF and the social model of disability, emanated from unaccommodating environments (Altman, 2002; Hughes & Paterson, 1997; Mon & Loeb, 2008; Shakespeare & Watson, 1997). In addition to the difficult terrain, the students in the study were confronted by communication barrier as discussed in the next section.

Inaccessible Information

Arguably, access to information is crucial for students in tertiary educational institutions across the world; information flow would facilitate students' academic work as well as social lives. However, in mainstream educational institutions where students with diverse needs have enrolled, information should be in accessible formats. This was not the case, while students with visual impairment complained that information relating to counselling services were not in accessible format such as braille or audio recordings, their counterparts with hearing impairment on the other hand, not only complained about lack of information in visual forms but they also complained about lack of Sign Language interpreters and counsellors' inability to communicate in Sign Language. For students with hearing impairment, though they were able to circumvent the difficult terrain in which the Counselling Centre was located, they still could not access counselling services because none of the staff could communicate in sign language with them:

Although there are pieces of information about counselling activities, which are important to all students on campus, I do not have access to any information because they are in print. Notices posted on bill boards are in print which I cannot read. (FVI-3)

...I have to always depend on my sighted friends to get information on activities at the Centre. On two occasions I only had information about a programme while my friends were on their way to the centre. I was later told posters on the programme had been pasted that are all in prints. (MVI-5)

The counsellors at the Counselling Centre can only communicate orally. One day I was emotionally disturbed so I decided to visit the counselling centre for help. When I got there, the counsellor and the other staff present could not communicate in the sign language. Though that day I really needed help, I went back to my room without any help.

My challenge with the counselling service on campus is all about communication. Counsellors at the centre cannot communicate with sign language. Because I cannot hear well and talk back to them, I went there once and since I did not go there again.

Thus, even in terms of accessibility, there were variations in the experiences of students with disabilities in the study. The students' challenges were diverse and unique in nature (Rose & Meyer, 2002; Smart, 2009; Tomlinson, 2001; Wylie, 2004). As argued by the researchers, in addition to problems relating to academic, personal and social needs of students in tertiary institutions across the world (Benton, 2003), students with disabilities in this study were overwhelmed by peculiar problems such as inaccessible Counselling Centre, lack of professional counsellors with knowledge in Special Education to provide related services including Sign Language interpreting, brailled information, and/or information in more accessible formats. In fact, the Counselling Centre focused mainly on serving students without disabilities and completely ignored the needs of those with disabilities. Invariably, the students with disabilities were exposed to different types of stress.

Physical and emotional impact

Analysis of students' transcripts revealed that the challenges the students experienced had both physical and emotional impact on their well-being. According to the students in the study, their conditions made movements and communication not only difficult but also energy sapping. These experiences translated into frustration and a sense of rejection, which culminated in the decision to boycott counselling services or the Centre altogether:

... going for counselling at that Counselling Centre is not in my plans. Although sometimes I encountered some difficulties of which I need the assistance of professional counsellor, I prefer calling my parents or friends to going to such unfriendly Counselling Centre. FPI-2

Sometimes I feel seriously rejected by the university. Buildings on the campus give little or no recognition for us (persons with disability). At least the Counselling Centre that ought to be a place of refuge for every student in the university, still students with disability cannot easily and

independently access it. I can best describe the centre as a death trap for those of us who cannot see. FVI-1

...the Counselling Centre, what am I going to do at that place? I can only communicate in sign language. Unfortunately, the only time I visited the place nobody there could sign with me. I felt so embarrassed. The counselors cannot communicate with sign. To visit the Centre to experience such embarrassment again, it is more appropriate staying with my challenges. FHI-2

Regrettably, the Counselling Centre which was set up to provide counselling services to create congenial environment to enhance students' academic performance (Al-Banna, 2001), has rather turned into an albatross for students with disabilities in the study.

In order to transform the Centre into a functional unit to serve all students and, in particular, those with disabilities, the following suggestions were extracted from the transcripts of the participants in the study: decentralization of services, relocation of Centre and in-service training for staff.

Decentralization of professional counselling

For counselling services to become accessible to all students in the university, the participants suggested that the services should be decentralized across the various halls of residence:

Since movement to the Counselling Centre is very challenging, there should be counsellors attached to the halls of residence. When counsellors have offices in the halls of residence, at least seeing a counsellor at the hall will not be difficult like going to the Counselling Centre at the North campus. MPI 2

If the university is not having enough professional counsellors, then the authority should employ more of them so that each of the university halls can have their counsellor. Once they are attached to the halls, it will make access to the service more easily. FVI-2

Additionally, the students requested for the attachment of professional counsellors to the Resourced Centre for Students with Disabilities, which is more accessible.

Most of us frequent the resource centre on daily basis. Sometimes we share our frustrations with some of the staff there. To me I think if a counsellor is attached to the resource centre that will go a long way to help us. We will even feel more comfortable sharing our issues with such a person. MVI-3

We depend heavily on the Resource Centre for information and assistance. We always visit the Centre therefore counsellors should be attached to the Centre. This will make us to fully benefit from counselling services. FPI-1

Re-location of Counselling Centre

Other students suggested that the Centre should be relocated to a more accessible area as the ultimate solution to the challenges:

The Counselling Centre should be relocated to a different place on campus. The centre should be move to an area that all students can easily and independently access. The current location of the Counselling Centre is a death trap. FPI-3

If the university can get a different place on campus as the counselling centre, it will be the best. The authorities should get different building where access to will be less difficult. Where the centre is currently located is not appropriate. MVI-1

In services training for counsellors

Additionally, some of the participants suggested that the university counsellors should be given regular training in issues relating to persons with disabilities to enhance their understanding of the needs of such students and they could be supported:

... Luckily, the university has a department with specialists who can teach people how to communicate in sign language. Counsellors at the centre can be trained to acquire skills in the use of sign language. I think this will go a long way to help us (the hearing impaired) to communicate effectively with the counsellors. FHI-3.

There should be regular in-service training for all the staff at the Counselling Centre on issues regarding disabilities. The attitude of some of them, seems discriminatory. We are students, therefore we deserved equal respect and treatment... given them training on disability issues will help a lot. FPI-1

The participants also felt that, regular in-service training would enable staff to develop positive attitudes, which would address the discriminatory acts meted out against them. Regrettably, negative tendencies are still prevalent in some educational institutions in the country (Subbey & Avoke, 2008), including the Pan Africa University.

Discussion

From the analysis, the Pan African University in Ghana had a number of students with disabilities that had been offered opportunity to pursue different programmes for degrees as their counterparts without disabilities. It is commendable that the University had created opportunities for qualified individuals with disabilities to pursue programmes to earn higher degrees, which would eventually enhance their qualifications and lead to acquisition of better and secured jobs in the future. However, the University's inability to provide a safe, secured and accessible

counselling centre to serve all students and, in particular, those with disabilities is counterproductive and undermines the good intention, such as the offer to students with disabilities to pursue programmes to earn higher degrees and better qualifications. Studies have established that students with disabilities experience tremendous stress due to failure to cope with schools' infrastructure resulting from functional limitation, as well as difficulty to adjust and fit into institution of learning (Brigman & Campbell, 2003; Cook & Kaffenberger, 2003). Obviously, the stress students experience invariably compromises their capabilities to participate successfully in learning and ultimately lower their overall performances.

As argued earlier, owing to their conditions, students with disabilities intermittently experience psychological pressures such as shock, disbelief, anger, denial, grief and bargaining in relation to their disabilities (Canary, 2008; Duquette, 2006; Heward, 2009; Smart, 2009), which make the need for counselling services very crucial. Indeed, the students with disabilities in this study were not really confronted with isolation, teasing, as well as ridicule by their counterparts who did not have disabilities as noted by other researchers such as Berry (2009) and Heward (2009); rather, the students experienced isolation as a consequence of inaccessible physical environment which not only endangered their lives whenever they ventured out of their halls of residence but also, effectively made it impossible for those using wheelchairs and crutches to move out independently.

Besides, as students with deafness who by the nature of their disability could manage with the inaccessible physical environment, still could not access services at the Counselling Center because of communication barrier, the Centre has become an 'albatross', to all students with disabilities in the University. Thus, the challenges students with disabilities encountered, were not their impairments per se; rather they were disabled by unaccommodating environments (both physical and cultural) (Altman, 2002; Hughes & Paterson, 1997; Mon & Loeb, 2008; Shakespeare & Watson, 1997). The students were prevented from accessing counselling services, which not only constituted a vital component of support services required to enhance participation of students with disabilities in learning but also enabled students with disabilities to learn to behave appropriately towards others and to understand themselves better (Chireshe, 2011; Neukrug, 2011).

It is also important to highlight the variability of the challenges imposed on students with disabilities in the study. For students with visual impairments (blindness), the overarching challenge was safety; in fact, the risk of getting injured was so real that they were compelled to boycott the Counselling Centre during their tenure as students. Students with physical disabilities, who were wheelchair users on the other hand, had no choice but solely rely on their compassionate friends to 'carry' them to the Centre. Thus, they were compelled to depend on others for movement; they could not move independently. Finally, for the students with hearing impairment, they experienced communication barrier as none of the staff could communicate in

Sign Language. The humiliation and frustrations those students also experienced made them to vow never to attend the centre for any support. The following comments encapsulate students' risks, frustrations and humiliation, '...I could not locate another one just ahead of me, I therefore fell into it and got seriously injured' '...Sometimes I feel seriously rejected by the university. Buildings on the campus give little or no recognition for us (persons with disability).' '... going for counselling at that Counselling Centre is not in my plans.' '... I prefer calling my parents or friends to going to such unfriendly Counselling Centre.'

Conclusion and Recommendations

Different but difficult barriers are imposed on students with disabilities in the Pan African University in Ghana in relation with access to counselling services to address personal, academic and social needs, in order to participate successfully in learning. While attempts have been made by the university authorities to staff the Counselling Centre with qualified professional counsellors to offer quality services; the source of regret is that the services are largely inaccessible and of no benefit to students with disabilities. Consequently, the students felt rejected, marginalized and not recognized as important members of the University. Arguably, these negative feelings about self adversely affected the performance of the students. It was therefore recommended, that the University employed additional counsellors and attached them to various halls of residency, educated counsellors on disability issues and incorporated the use of sign language in the activities of the counsellors. Furthermore, it was recommended that reference materials at the Counselling Centre should be in different formats to make them accessible and useful to students with disabilities, particularly those with visual impairments. In the long term, the university should set up a new Counselling Centre in a disability-friendly environment to make it more accessible to all students and, in particular, those with disabilities.

Reference

- Agbenyega, J. (2005). *Examining teachers' concerns and attitudes to inclusive education in Ghana; The International Journal of Wholeschooling*. University of Ghana, Legon. 3(1) online. www.wholeschooling.net/journal of Whole Schooling/articles/3
- Al-Banns W. (2001). *Deriving a comprehensive counselling model for college of health Science in Bahrain*. PhD theses. University of Pittsburgh: USA.
- Altman, D. (2002). "Sociology and Disability," in Albrecht, G., M. Bury, eds. *Handbook of Disability Studies*, New York: Russell Sage
- Avoke, M. (2002). Models of Disability in the labeling and attitudinal discourse in Ghana; *Disability and Society*. 17(7). 769-777
- Benton, M. J. (2003). *When Life Nearly Died: The Greatest Mass Extinction of all Time*. Thames & Hudson.
- Berry, J. O. (2009). *Lifespan perspectives on the family and disability*. Austin, TX: Pro-ed.
- Braun, V., Gavey, N. & McPhillips, K. (2003). The fair deal? Unpacking accounts of reciprocity in heterosex sexualities.

- Brigman, G. & Campbell, C. (2003). Helping students improve academic achievement and school success behaviour. *Professional School Counselling* 7(2):91–98.
- Burns, N. & Grove, S. (2009). *The Practice of Nursing Research: appraisal, synthesis, and generation of evidence* (6th ed.). St. Louis: W. B. Saunders.
- Canary, H. E. (2008). Negotiating dis/ability in families: Constructions and contradictions. *Journal of Applied Communication Research* 36(4):437–458.
- Chireshe, R. (2011). School counsellors' and students' perceptions of the benefits of school guidance and counselling services in Zimbabwean Secondary Schools. *Journal of Social Science* 29(2):101–108.
- Chireshe, R. (2012). School guidance and counselling needs assessment in Zimbabwean Secondary Schools. *Anthropologist* 14(1):17–24.
- Cook, J. B & Kaffenberger, C. J. (2003). Solution shop: A solution-focused counselling and study skills programme for Middle School. *Professional School Counselling* 7(2):116–123.
- Creswell, J. W. (2005). *Educational Research: planning, conducting and evaluating quantitative and qualitative Research*, New Jersey: Pearson Education.
- Duquette, C. (2006). Teaching students with developmental disabilities. *Teaching exceptional children* 39(2):28–31.
- Dyson, L. (2010). Unanticipated effects of children with learning disabilities on their families. *Learning Disabilities Quarterly* 33(1):43-55.
- Finlay, L. (2011). *Phenomenology for Therapists: Researching the lived world*. UK: A John Wiley & Sons, Ltd., Publication.
- Fuller, M., Bradley, A., & Healey, M. (2004). Incorporating disabled students within an inclusive higher education environment. *Disability & Society*, 19(5), 455-468.
- Hayford, S. K. & Asare, D. (2011). "That's why we sometimes fall into gutters..." Recounting Experiences of Visually Impaired Students in a Mainstream Senior High School in Ghana'. *African Journal of Interdisciplinary Studies*, Vol. 4, No. 2, pp 86 – 94.
- Hayford, S. K. (2008). Improving Basic School Teachers Continuous Assessment Practices to Promote Inclusion. *African Journal of Interdisciplinary Studies*, Vol. 1 39-54
- Hayford, S. K. (2013). *Special Educational Needs and Quality Education for All*. Winneba: Department of Special Education Books.
- Heward, W. L. (2009). *Exceptional children: An introduction to special education*. 9th edition. Upper Saddle River, NJ: Pearson-Merrill.
- Hughes B, Paterson K. (1997). The social model of disability and the disappearing body: towards a sociology of impairment. *Disabil Soc.*, 12: pp. 325–40.
- Gyasi, F. & Hayford, S. K. (-). Strategies students with disabilities in a Ghanaian public university adopt in minimizing frustration from social and academic challenges. *Journal of Special Needs and Disabilities Studies*. Nairobi Press.
- Johnson, S. & Johnson, C. D. (2003). Results-based guidance: A systems approach to students support programmes. *Professional School Counselling* 6(3):180–185.
- List, D. (2004). Maximum variation sampling for surveys and consensus groups. Adelaide: Audience Dialogue. Available at www.audience dialogue.org/maxvar.html.

- Lockhart, E. J. (2003). Students with disabilities, in *Transforming the school counselling profession* edited by B Erford. Columbus, OH: Pearson Merrill Prentice Hall: 357–409.
- Madriaga, M., Hanson, K., Heaton, C., Kay, H., Newitt, S. & Walker, A. (2010). Confronting similar challenges? Disabled and non-disabled students' learning and assessment experiences. *Studies in Higher Education*, 35(6), 647-658.
- McLeod, S. A. (2007). Humanism. Retrieved from www.simplypsychology.org/humanistic.html
- Mont, D. & Loeb, M. (2008). Beyond DALYs: Developing Indicators to Assess the Impact of Public Health Interventions on the Lives of People with Disabilities. Social Protection & Labour, WORLD Bank Project.
- Neukrug, R. C. (2011). *Counselling theory and practice*. Belmont, CA: Brooks/Cole.
- Oliver-Commey, J. O. (2001). *The Disabled Child in Ghana: whose fault and who cares?* Accra: Ghana University Press (pp 38).
- Rose, D. & Meyer, A. (2002). Teaching every student in the digital age: Universal design for learning. Alexandria, VA: ASCD.
- Shakespeare, T. & Watson N. (1997). Defending the social model. *Disabil Soc.*, 12: pp. 293–300.
- Smart, C. (2009). *Disability, society and the individual*. 2nd edition. Austin, TX:Pro-ed.
- Subbey, M. and Avoke, M. (2008). Attitudes of Basic School Teachers towards inclusion of persons with disabilities in regular schools in the Agona District, Ghana. *African Journal of Interdisciplinary Studies*, Vol. 1: 30-38
- Tomlinson, C. A. (2001). *How to differentiate instruction in mixed-ability classrooms?* 2nd edition. Alexandria, VA: ASCD.
- Westling, D. L & Fox, L. (2004). *Teaching students with severe disabilities*. 3rd edition. Upper Saddle River, NJ: Merrill Prentice Hall.
- World Health Organization. (WHO) (2011). *World report on disability and Rehabilitation*. www.who.int/disability_world_report/2012/report/en/index.htm.
- Wylie, J. R. (2004). The influence of self-concept on non-traditional student persistence in higher education. Sydney: University of Western Sydney.