THE ROLE OF SOCIAL CAPITAL IN THE EMPOWERMENT OF INDIVIDUALS WITH VISUAL IMPAIRMENT: THE CASE OF ANTIGUA AND BARBUDA

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ABSTRACT

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THE ROLE OF SOCIAL CAPITAL IN THE EMPOWERMENT OF INDIVIDUALS WITH VISUAL IMPAIRMENT: THE CASE OF ANTIGUA AND BARBUDA

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This research paper examines the contributions that social capital makes to the development of individuals with visual impairment (IVIs) in Antigua and Barbuda. The research was mounted as case study to ascertain the existence, and extent of social capital vis-à-vis IVIs and explores four key determinants of social capital, namely, social inclusion, access to resources, reciprocity and cultural norms and values. The central idea of social capital is that social networks and relationships have economic value.

The methods employed in this study were qualitative and included open-ended in-depth interviews. The results of this study indicate that IVIs have diminished access to resources, limited and one-way social inclusion and experience a reality of rejection and illusionary contribution to the society. Founded on the premise that IVIs have a lessened capacity to build social capital, this study argues that IVIs in Antigua and Barbuda require the assistance of governments and civil society organizations to help them develop a sense of belonging and ownership of the shared resources of their country.

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CHAPTER 1  INTRODUCTION

1.1  General Introductory Statement

This study examines the Role of Social Capital in the Empowerment of Individuals with Visual Impairment (IVIs) in Antigua and Barbuda. More specifically, this thesis investigates the existence of social capital and the extent to which it assists the development of IVIs to become independent and self-sufficient in Antigua and Barbuda. Social capital is a broad term that encompasses societal norms and social networks which facilitate collective actions to achieve shared benefits (Woolcock, 1998). Given its wide-ranging all-encompassing nature, the concept of social capital lends itself to diverse application and one may practically approach any social entity or situation through the framework of social capital. Schuller, Barron & Field, (2000) offer a definition of the theory as “social networks, the reciprocities that arise from them and the value of these for achieving mutual goals” (p.1). It can also be explained as “those features of social organization(s), such as networks of individuals or households, and the associated norms and values that create externalities for the community as a whole” (Grootaert & Van Bastelaer, 2002, p.2). In this regard, the central idea of the social capital theory is that, organizations, associations, relationships and the set of connections along with the associated norms of reciprocity have value within a community. It is all about establishing relationships purposefully and employing them to generate intangible and tangible benefits in short or long terms (Lin 2001). Simply put, relationships matter in any community. Thus, in order to determine the extent of social capital present in the community of Antigua and Barbuda, this study utilizes the social capital framework to
ascertain the level of involvement of IVIs in various institutions and associations and their access to resources and other forms of capital, such as human, cultural, physical and economical. Also, this study explores the cultural norms and values of the Antiguan and Barbudan society vis-à-vis disability, particularly, IVIs.

IVIs can be categorized as a marginalized group and as such, can easily be excluded from social debates. There is a positive link between empowerment and the development of marginalized group (Narayan 2002). In Antigua and Barbuda, IVIs on their own lack certain resources to independently create connections within the community, thus social capital provides a channel through which these individuals can become empowered therefore, equipping them with the necessary tools to exercise freedom of choice, independence, and self-sufficiency. Moreover, through the use of social capital they will have the self-power and self-confidence to approach and participate in various associations within the community of Antigua and Barbuda.

1.2 Background

Antigua and Barbuda is a twin island state located in the northeastern Caribbean. Antigua is 108 sq miles (281 sq. km.) and Barbuda is 62 sq. miles (161 sq. km.), with a population size of 80,000 (WDI) in 2004. The populace is predominantly of African origin. Some of British, Portuguese and Levantine Arab descendents complete the make-up of the Antigua and Barbuda population. The official language spoken by the people is English. The country is known for its tropical beauty, and is bordered by 365 white sandy beaches. The islands make up an emerging, small, open economy that is highly
dependent on tourism as the main source of income to the attendant businesses and the government, making tourism, by far, the major contributor to the country’s development. Other key contributors to employment and income include financial services and government services.

Antigua and Barbuda is one of the eight member states of the Organization of Eastern Caribbean States (OECS). The country was granted self-government in Association with Britain in 1967, gained political independence on November 1, 1981, and has since followed a Westminster-style Parliament Democracy with a Governor General as Head of State.

As a former British Colony, the educational system was fashioned after the British system. This consists of eight years primary education, five years of high school and two years of sixth form of pre-college classes or Advance level. There is no full term university on the island. However, there are programs that allow students to earn an associate degree upon completion of the particular program. In line with the mandates of the Education Act, there are schools for the physically impaired and the deaf and hard-of-hearing:

... there may be provided special schools suitable to the requirements of pupils who are deaf, dumb, retarded or otherwise handicapped” and further in section 11 subsection 1f it reads, “the public school system ... may include special schools for the education and training of children who are handicapped in such a way as to require special educational facilities for their best development (Education Act section 6 subsection 2).
However, there is not a school for the children who are visually impaired, students in this category are included as part of the mainstream education, which itself is keeping with the global trends. There are also technical or vocational schools to support the needs of craftsmen and technicians.

Appendix A shows the basic organizational structure of the education system in Antigua and Barbuda. It shows that the Minister of Education is the head of the educational system which gives him the responsibility to ensure that the government’s education policy is implemented and to ensure that the education system is designed to adequately provide for the planning and development of the country. Second in command is the Permanent Secretary, followed by the Chief Education Officer (CEO). The CEO is responsible for middle level administrators. The zone officers and the senior education officer are responsible for primary schools and secondary schools respectively. Noteworthy is the absence of provision for children with disabilities. Moreover, the technical officer is responsible for all forms of subject areas except for those associated with disabilities, including those who are visually impaired. From the diagram, it appears that the schools for the physically impaired, the deaf, and hard-of-hearing fall under specific zone leaders; and in view of the fact that the children who are visually impaired are mainstreamed, undoubtedly they would be aligned with the appropriate school.

The system that is provided for children with visual impairment is a resource center, which functions as a support base where students are taught Braille and given other academic assistance to help their performance at the mainstream school. Presently, the Unit for the Blind operates in two small rooms, (13ft x 13ft each), of a building
shared with children with hearing-impairment, and is situated on the same compound as
the regular primary school that the students who are visually impaired attend. The Unit
concentrates mainly on providing academic support; it is not equipped with the tools to
teach other skills deemed important for the holistic development of these children such as
cooking, ironing, washing and other activities for daily living skills. The survival at
adulthood of children with visual impairment depends immensely on what is learned
during the early stages of life, and children with sensory impairments face a set of unique
challenges, albeit not impossible, in their development and maintenance of a sustainable
livelihood.

While academic development is important, blindness or low vision affects every
aspect of a child’s development. Vision is one of the primary feedback senses that
enables children to become aware of their body mechanisms, and provides a general
collection of information on how the environment operates. For example, a child learns
how to eat by watching others taking the food from the plate to their mouths. Similarly
activities like brushing the teeth, combing the hair and tying the shoelace are best
understood by visualizing the actions of another.

In Antigua and Barbuda adults who are visually impaired attend an Industrial
Workshop of and for the Blind, which was initially set up by the Caribbean Council for
the Blind. At this institution they are taught handcraft such as basket and straw hat
weaving, and mop-making. They are given a monthly stipend as part of the
Government’s contribution to the workshop. The adults who attend the workshop consist
mainly of those who became blind as a result of diabetes, glaucoma or some other forms of ailment.

Unfortunately, there are no rehabilitation or vocational programs for young adults with visual impairment who have graduated from the unit and may wish to pursue further studies or enter into the job market. Undeniably this will add to the burden of a segment of the population, which is already among the society’s most vulnerable. Also, it creates a financial and social burden on families of IVIs, and on the community.

The matter of visual impairment is one of universal concern. Every five seconds, someone in the world experiences significant vision loss (WHO, 2002). Over one hundred and eighty (180) million people worldwide currently live with significant vision loss, which, according to the World Health Organization (WHO), could double within 25 years. There are in excess of two million children in the world who are blind, of which approximately 90 % are living in developing countries (WHO, 2002). These statistics are alarming, especially with predictions that the figure will continue to escalate. Ongoing studies reveal that blindness amongst children in developing countries is normally preventable and treatable once detected at an early stage (WHO, 2002). Childhood blindness is a problematic issue because it does not have a single cause. It causes range from damage to the eye as a result of any number of conditions, from cataract, to hereditary illness or intrauterine (womb) trauma. Indeed, the reason for a significant amount of childhood blindness is still unknown. What is indicated from global surveys is that: approximately 57 % of childhood blindness is unavoidable; 28 % is preventable; and 15 % is treatable (WHO, 2002).
The developing state of Antigua and Barbuda could not provide accurate data or statistics on children (and even adults) living in the country who are visually impaired because the country does not have a system in place to record and track such persons. Additionally, the number of students attending the Unit is dependent on parents of these children inquiring about opportunities available for their children who are visually impaired, and on teachers from regular schools informing the Unit of cases of children experiencing vision problems, rather than a national formal system of information and compulsory attendance for children with visual impairment.

In a country with a population of about 80,000 people in Antigua and Barbuda (approximately 1,200 in Barbuda), there are only 10 children attending the Unit – which is located in Antigua. Although authorities believe that there are more children living with visual impairment, based on the knowledge of at least two known cases of parents refusing to send their children to the Unit, little effort has been made to obtain more accurate statistics. The lack of attention stems from the belief and/or perception that the incidence of blindness in Antigua is low and as such the problem is not yet acute to demand significant recognition. Furthermore, the government already has a large financial burden without including in the budget a line item for visually impaired. Nonetheless, the constitution of the country section 5, subsection 1g states:

No person shall be deprived of his personal liberty ... under the order of a court or with the consent of his parent or guardian, for his education or welfare during any period ending not later than the date when he attains the age of eighteen years.
There are two extremely important issues emerging from the unavailability of adequate data on this important sector of the population, and form the government’s apparent overall laissez-faire position: (1) The legal and financial obligation of the government to ensure that every child receives an education up to age 18, is not being achieved. Children who are visually impaired have a right to education equal to that of sighted children. Furthermore, because of the physical challenges associated with their condition children need special attention to ensure that they are successfully integrated into the society. In essence, the state is also indirectly violating Part 1, Section 23 of the Convention on the Rights of the Child (UNICEF). (2) Blindness and low vision that can be avoided or treated may go unattended, especially amongst poor families. The government and civic organizations by not addressing the concerns of this group, are denying their existence, and depriving them of shared ownership of benefits and privileges of their community.

Like most developing nations, Antigua and Barbuda is striving to attain and maintain sustainable development in this highly competitive global economy. Developing countries are faced with the predicament of prioritizing, and tend to concentrate on the sectors that yield the greatest opportunity to obtain a position on the global map. However, with tourism as its main source of income, coupled with its small size and limited resources, it is critical that Antigua and Barbuda invests in the development of its human resource, which of course include paying attention to the needs of those who have disabilities, are often marginalized. Unfortunately, according to the
ECCB (2004) report, Antigua and Barbuda’s expenditure on education stood at 3.8% of Gross Domestic Product (GDP) in 2003. This figure represents the lowest in comparison to three other OECS counterparts, namely, St. Vincent and the Grenadines, St. Kitts and Nevis and St. Lucia whose contributions were, 10%, 7.6%, and 7.7% respectively, in the same year.

In the writings of Bishop (2004), he posits that when someone has lessened vision there are essentially four main areas of development that are affected, which are, social and emotional, language and communication, cognitive, and mobility and orientation. Thus, in examining the welfare of children who are visually impaired, the social, health and educational facets must be examined as a collective unit. From a social perspective, children who are visually impaired are limited in achieving certain social skills, such as observing and interpreting the reaction of their peers or to observe what actions are considered to be normal behavior. This shortcoming may lead to social isolation and thus it is imperative that these children are taught socially acceptable skills which will enable them to build social relationships and be able to reap the benefits of social capital as they become adults.

Social capital demands that everyone is regarded as important and thus should be embraced and included in the community. In their paper entitled, *Implications of social capital for the inclusion of people with disabilities and families in the community life*, Chenoweth and Stehlik (2003) claim that there is a significant difference between integration and inclusion as it pertains to disability. They contend that integration, which is a more technical term, involves strategies whereby people who have disability are
made to fit into the mainstream. In other words, a child who is blind is considered to be “apart” and action is required to bring him/her into the “whole.” Whereas, inclusion is positioned from a starting point of the whole having many parts but each, nevertheless, is part of the whole and it does not require assimilation but rather assumes a society which embraces diversity. Additionally, they state that inclusion is a process that is based on principles and values rather than on outcome. Noteworthy is that the authors make the case that there can be a transition from integration to inclusion and that the process of inclusion rests upon the fundamental principles of membership, friendship, relationships and supports.

1.3 Statement of the Problem

Unfortunately, disability in children and more particularly childhood visual impairment has not been a priority on the public’s agenda in Antigua and Barbuda. There exists a cultural anomie in which the sighted are ambivalent toward, or do not seem to know how to react towards others whom they consider less adequately able than themselves. Society lacks a complete understanding of the needs of people who are considered to have a disability, thus in most cases the interaction between the two dichotomous (disability and no-disability) group is non-existent. From the perspective of social capital this is a fundamental problem. Firstly, individuals with a disability already have a lessened capacity to develop social networks critical for their functioning or maximizing the benefits accruing from this network formation. With this deprivation of
social ties there is a fear that they may not have the opportunity to reciprocate any goodwill to other members of the community.

Among the group of IVIs in the community of Antigua and Barbuda, there is a noticeable absence of an important faction of the group. Notably absent from any accounting for the group are young adults between the ages of 21 and 40. The children are accounted for (at least those who attend the Unit) and so are the elderly who attend the workshop (at least those who attend). Their absence gives rise to speculation as to whether the members of this missing group are locked away in seclusion at home, or that they may have migrated to countries that offer more and better opportunities. This leads to a question of how effective is the Unit in fulfilling its objective of empowering the children with the tools necessary to fully integrate into the sighted world?

Essentially, the Unit’s focal point is that of ensuring academic education for IVIs. Thus other needs that are deemed important to the children’s development are neglected at this institution. Additionally, the Antiguan and Barbuban society still lacks a complete understanding of the needs of people with disabilities. When children become adults, what opportunities are afforded them within the country which will enable their survival to live independent and successful lives? At present, those opportunities, preparations are minimal to non-existent. Without the proper training in early childhood, getting around the community is impossible except with the assistance of others. Children who are brought up without being given the tools or opportunities to develop self-reliance are doomed to a life dependence on someone else.
Another major area that Antigua and Barbuda community takes advantage of its IVIs comes through an institution or privilege that should be aiding their empowerment. Applying for jobs becomes problematic, even when the academic skills are on par; other skills such as dexterity, expertise, agility and adroitness may be lacking, which possessing, would otherwise enable people who are visually impaired to be very productive employees. Unfortunately, businesses, as profit seekers, are reluctant to employ the visually impaired, and will remain so unless there are some legal requirements that directly address discrimination of persons with disabilities. Similarly, unless measures are put in place to ensure that IVIs receive adequate training additional to their academic education, and that the training be accepted as being of vital importance, the missing sector of IVIs will remain exiled abroad or in seclusion in their homes.

If on the other hand they are equipped with the necessary empowering tools, if they are given access to various resources in the community, allowed to build social relationships, allowed to become part of the whole; they will be able to build meaningful relations, be involved in organizations, create ties and reciprocate goodwill, generating tangible and intangible benefits to themselves and to the community.

Finally, there is a general consensus that the incidence of blindness in the state is generally low, yet there are known cases of children who are blind and not attending the Unit. There is a total of 10 students registered at the Unit. It begs the question of how many number of children who are visually impaired there may be that are not reported or identified. There are no reports or any census ever conducted. That, and that lack of a
proper tracking system to record the prevalence and distribution of childhood blindness, could fail to detect an increase in the incidence of vision loss, which is treatable and preventable, but may go undetected and untreated, especially in poor families.

From the above arguments emerge one intrinsic problem facing IVIs in particular, and the wider Antigua and Barbuda community; a problem consisting of many aspects, with varying manifestations; that is, that IVIs have limited capacity to develop social capital, may have limited access or no access to other forms of capital. And that, failure to take measures to arrest the situation, the country will continue to lose a critical section of its population through forced migration, those who remain become a financial and social burden on the general populace, and a society descends the slopes of insensitivity, uncaring, intolerance, marginalizing its own people and ultimately creating a subculture of poverty.

1.4 Purpose of Study

The primary goal of this research is to determine the contributions that social capital is making to the development of individuals with visual impairment in the twin-island state of Antigua and Barbuda. To this end, the following objectives are incorporated:

- To determine the level of involvement that individuals with visual impairment have to social network within the community.
- To ascertain the perception of the community about individuals with disability, particularly individuals with visual impairment.
• To explore the access to which individuals with visual impairment have to social, physical and economic resources.

1.5 Research Questions

A social capital paradigm is used to explore the following research questions:

1. How involved are IVIs in social networks of the community?

2. What is the community’s perception regarding individuals with disability - specifically those with visual impairment?

3. What access do individuals with visual impairment have to the social, physical and economic resources of the community?

1.6 Significance of Study

This study has the potential to inform and guide individuals and organizations. The groups or organizations and/or persons who are likely to use the findings of this research include, but are not limited to:

• Community members and civil society organizations

• Government Officials

• Educators

• Individuals with visual impairment and their families.

• Personnel of the Unit for the Blind and the Workshop of and for the Blind
1.7 Delimitation of Study

This study examines the existence and extent of social capital among individuals with visual impairment in Antigua and Barbuda. To this end the study investigates the access that individuals with visual impairment have to institutions, associations and other resources and the cultural norms that exist within the community of Antigua and Barbuda vis-à-vis IVS.

The study concentrates on individuals with visual impairment as a subset of disability. Limiting the study to individuals with visual impairment provides an instrumental framework in which their experiences can help to make generalizations about the social networks that are available to individuals who are disabled. As Mason (1997) so aptly states, “qualitative research should produce explanations which are generalizable in some way, or which have a wider resonance” (p. 6). Therefore, by analyzing the phenomena of individuals with visual impairment, the findings can be justifiable inferred to general disability in Antigua and Barbuda.

1.8 Definition of Terms

1.8.1 Differentiating between Handicap, Disability and Impairment

World Health Organization (1980) offers guidance on the difference between handicap, disability and impairment. Impairment is defined as any loss or abnormality of psychological, physiological or anatomical structure or function. Disability refers to any restriction or lack (resulting from an impairment) of ability to perform an activity in the manner or within the range considered normal for a human being. Handicap is the
shortcoming for a given individual, resulting from an impairment or disability that limits or prevents the fulfillment of a role (depending on age, sex, social and cultural factors).

Webster and Roe (1998) simplify each term as; impairment is defined as any loss of normal functioning; disability those factors that restrict or hinder an individual in carrying out certain everyday activities in a given family or social context. Handicap concerns those impairing or disabling factors that also lead to disadvantage by limiting or preventing the fulfillment of roles for the individual.

1.8.2 Educational definition of Visual Impairment

According to Sacks and Silberman (1998), the Individuals with Disabilities Education Act (IDEA) Amendments of 1997 defines individuals with visual impairments as those who have a visual impairment, which, even with correction adversely affects educational performance. In the context of this paper visual impairment incorporates people who are legally blind and those who have low vision.

1.8.3 Operational definition of Social Capital

The ability to harness social relationships and other forms of capital (physical, human, economical, cultural) to the improvement of oneself and the community is social capital.

1.8.4 Civil Society Organizations

There is a set of diverse non-governmental institutions which are strong enough to counter balance the State, whilst not preventing the state from fulfilling its role of keeper
of the peace and arbitrator between major interests; they can nevertheless prevent the state from dominating and atomizing the rest of society. These include organizations such as registered charities, development non-governmental organizations, community groups, women’s organizations, faith-based organizations, trade unions, professional associations, self-help groups, trade unions, social movements, business associations, service clubs and advocacy groups (Tonkiss & Passey, 2000).

1.9 Organization of the Study

In summary, this thesis investigates the existence of social capital among IVIs in the Antigua and Barbuda society, to determine their ability and empowerment, or lack thereof, to exercise freedom of choice, independence, and self-reliance, to determine their right to associate, to join and/or form associations, to benefit from and contribute to these connections as they pertain to their developmental ambitions, and to the general good of the society. The study utilizes the social capital framework and supporting arguments, which declare that relationships matter in any community. The significance of the study cannot be overstated. Antigua and Barbuda is a close-knit community, a small developing economy, should any group within this structure be marginalized, there will be very serious consequences to the country’s economy and structure.

The study is divided into five chapters. Chapter one presents the Introduction coupled with the background information of the research topic, statement of the problem, purpose of the study, research questions, significance of the study, delimitations of the study, definition of key terms scope of study. Chapter two is the literature review, which
contains definition and types of visual impairment. It also consists of the theoretical framework which forms the basis for my research. Chapter three discusses the methodology applied in the study. Chapter four is an analysis and discussion of the findings of the study. The final chapter consists of summary, conclusions and recommendations for further study in Social Capital as it pertains to marginalized groups, particularly, individuals with visual impairment.
CHAPTER 2 LITERATURE REVIEW

2.1 Introduction

This chapter is divided into two main sections. The first section provides various definitions of visual impairment and explains the types of visual impairment. Given the extensive possibilities of reasons for vision loss, the most common types of visual impairments are discussed under three main categories, namely, structural, refractive errors and cortical visual impairment. The chapter continues by highlighting four main areas of an individual’s development that are affected as a result of vision loss. The second section discusses the theoretical framework of social capital along with its application to individuals with visual impairment.

2.2 The Concept of Visual Impairment

In general, the term visual impairment can refer to any condition in which eyesight cannot be corrected to what is considered, “normal.” Defining what is meant by “normal” vision is by no means straightforward. In everyday usage, people tend to consider the eyesight as adequate if they can cope with the majority of everyday tasks, such as driving, preparing food and reading the newspaper. The clinical measurement of visual acuity using the Snellen chart (an eye chart used by eye-care professionals and others to measure visual acuity) has an arbitrary standard of normal vision that permits us to carry out routine activities.

Simply put by Holbrook (1996), the term visual impairment is used to refer to a loss of vision that makes it difficult or impossible to complete daily tasks without
specialized adaptations. This visual impairment is often due to a loss of visual acuity, a case in which the eye is not able to see objects as clearly – to make out as much detail, as usual. The author also introduces another aspect of visual impairment in which there is a loss of visual field - the total area that can be seen without moving the eyes or head. Evidently, there is more than one aspect of vision loss, but Webster and Roe (1998) point out that visual acuity is normally the basis on which an individual’s visual impairment is categorized.

According to Sacks and Silberman (1998), most people who are blind or who meet the criteria for legal blindness can see light, color, and objects; can distinguish landmarks; and can discriminate specific visual information form a distance or at near point. There are several definitions given to describe the degree and severity of vision loss and have been established by educators and medical professionals to determine eligibility criteria for various services including funding. Sacks and Silberman (1998) provide the following categories of visual impairment.

- **Legal blindness**: A person who is legally blind has a visual acuity of 20/200 or less in the better eye with best correction and/or a visual field that is no greater than 20°. The first part of the definition describes a specific notation for acuity or distance vision as measured on a standard eye chart. The first number (20) describes the distance at which the visual acuity is measured (e.g., 20 feet); the second number (200) describes the distance at which a person with normal vision would be able to identify the largest symbol on an eye chart. In other words, even with glasses or contacts on, this person would see at 20 feet what a
normally sighted person sees at 200 feet. The second part of the definition refers to the amount of visual field that a person uses to view objects from the side. Typical visual fields extend to $180^\circ$.

- **Partial sight**: A person is considered as having partial sight when his or her visual acuity is from 20/200 to 20/70 with best correction.

- **Low Vision**: This is defined as a severe visual impairment, which is not correctible with conventional spectacles, contact lenses, or surgery and which results in decreased visual performance.

- **Educational definition of visual impairment**: The Individuals with Disabilities Education Act (IDEA) Amendments of 1997 define individuals with visual impairments as those who have a visual impairment, which even with correction adversely affects educational performance. Bishop (2004) explains that for educational purposes, a definition for blindness implies the use of tactual and/or auditory channels for learning. Some educationally blind students will have useful vision for mobility purposes (e.g. can move toward or around objects, shadows, light, etc) and some students can even see faces or outlines but optical devices are not helpful or useful. Bishop concludes by stating that the student who cannot read print of any size will be a tactual/auditory learner.

- **Functional definition of blindness**: A student is considered blind when he or she can learn only through tactile or auditory channels.
2.2.1 Types of Visual Impairment

IVIs fall within two groups, those who were born with a visual impairment (congenital) and those who acquired it after birth (adventitious). The types of visual impairment are discussed in the following categories:

- structural impairments, or damage to one or more parts of the eye
- refractive errors, or an inability of the eye to sharply focus images on the back of the retina
- cortical visual impairments, which are due to damage to the part of the brain that interprets visual information

2.2.1.1 Structural Impairment

A structural impairment exists when one or more parts of the eye’s optical, movement, or nerve system is poorly developed, damaged, or does not function properly. Structural impairments may be before or after birth. When they occur before birth, it may be because the baby has inherited a condition that causes structural impairments, or because something happened to disrupt the normal development of the visual system. After birth, structural damage may be caused by injury to the eye, disease, inherited conditions, or a variety of other causes. Regardless of when the damage occurred, the key is to identity the vision problem as soon as possible and promptly take the necessary steps to minimize its impact on the child’s growth and learning Mason (1997).
**Cataracts.**

A cataract is an opaqueness of the lens of the eye. The cloudiness of the lens prevents the passage of some of the rays of light onto the retina. The effect on vision may vary from detectable visual impairment to a severe loss of vision. In severe cases, the child may only be able to detect light from dark. Some types of cataracts progressively worsen, while others remain unchanged throughout life. Cataracts may be found in only one eye (unilateral) or both eyes (bilateral). In children, cataracts may be present at birth and may be associated with infection, metabolic disorders or toxic conditions (Stiles & Knox, 1996). Bilateral cataracts in children are often associated with nystagmus and retinal diseases (Rogow, 1988).

**Glaucoma.**

Glaucoma is a condition in which the pressure from fluid inside the anterior chamber of the eye is too high. The excessive pressure can irreversibly damage the optic nerve resulting in loss of peripheral vision initially and central vision if the damage continues (Stiles & Knox, 1996). Glaucoma can occur at birth or develop later in childhood or adulthood. Congenital glaucoma may exist by itself or in association with other pathological conditions (Rogow, 1988).

**Optic Atrophy (OA.)**

OA is a generic term that describes the degeneration of the optic nerve. The optic nerve transmits messages from the retina to the visual cortex of the brain. If the fibers in
the nerve are damaged, they may die and atrophy (waste away). When fibers atrophy, transmission of information from the eye to the brain is impaired. The resulting visual impairment can range from minimal loss of acuity or visual field to total blindness. OA can result from a variety of disorders, including hydrocephalus, glaucoma, retinitis pigmentosa, or from trauma and can be congenital or acquired later in life (Mason, 1997, Stiles & Knox, 1996, Rogow, 1988).

*Retinopathy of Prematurity (ROP).*

ROP is a condition that can cause vision loss or blindness in infants born prematurely. As the name implies, it is caused by damage to the retina. Generally, the blood vessels of the retina complete their growth at the baby’s approximate due date (9 months gestation). Premature infants are thus born before the retinal blood vessels have completed their growth. As the vessels continue to grow after a premature baby’s births, abnormal vessels, as well as scar tissue, can form inside the eye. In extreme cases, the retina may become scarred, distorted, or detached (separated from the back of the eye). This causes visual impairment ranging from a mild decrease in acuity to total loss of vision. (Stiles & Knox, 1996).

*Albinism.*

Albinism is an inherited condition which causes decreased pigment (lack of melanin) either in the skin, hair, and eyes, or in the eyes alone. The lack of pigment in the front of the eye (iris) is most noticeable and leads to a very light blue color of iris.
The lack of pigment allows the red reflex to shine through the iris tissue as well as the pupil, giving the iris a pink appearance. Albinism is present at birth and does not become worse over time. (Stiles & Knox, 1996).

*Amblyopia.*

This term is synonymous with lazy eye, cast, wall eye or squint. Amblyopia refers to the visual impairment that occurs when a child suppresses the image from one eye. With this condition there is a deviation of one eye, inwards, outwards, upwards, downwards or a combination of these movements. Amblyopia normally occurs: 1) when one eye has better acuity than the other (due to a refractive error, cataracts, cornmeal scarring, droopy eye lid, or tumor); 2) when one eye is crossed or turned due to strabismus commonly referred to as crossed eyes (Mason, 1997, Stiles & Knox, 1996).

*Microphthalmia.*

A condition in which the eye has failed to form fully, in this case, the eyeball is smaller than normal and may be deformed (Rogow, 1988).

*Pterygium.*

A pterygium is a growth of scar tissue and blood vessels that expand in a triangular shape over the cornea (the transparent part or front window of the eyeball). It may grow large enough to interfere with vision. A pterygium most commonly occurs on
the inner corner of the eye, with its apex towards the pupil, but also may appear on the outer corner (Pterygium website).

2.2.1.2 Refractive Errors.

Refraction refers to the process by which the cornea and lens of the eye bend light rays so they are focused on the retina. For the light rays to be sharply focused, the eyeball must be the right length, the lens must have appropriate power, and the cornea (the clear dome at the front of the eye) must have the right shape. If any of these parts of the eye is not properly proportions, then visual acuity is reduced. This type of visual impairment is known as refractive error. Common varieties of refractive errors include myopia (nearsightedness), hyperopia (farsightedness) and astigmatism (Stiles & Knox, 1996).

Myopia.

In normal vision, parallel rays of light coming from a distance should focus on the retina at the fovea – the central point of the macula. In myopia, the cornea is excessively curved, the lens is too strong or the eye is too long. As a result, images of distant objects are not focused on the retina, but in front of it, and this makes them appear blurry. Usually, children with myopia can see nearer objects more clearly. Myopia is quite common. Myopia may appear alone, or in combination with other eye conditions, for instance premature infants with retinopathy of prematurity are more likely to have high refractive errors including high myopia and/or high anisometropia (when a child’s
eyes are very close in refractive power – one eye may be nearsighted while the other far sighted) (Stiles & Knox, 1996).

*Hyperopia.*

Hyperopia occurs when the cornea is relatively flat, the eyeball is too short or the focusing power of the eye is too weak. Accordingly images are focused at a point behind the retina, which results in the child straining to focus, especially on nearby objects. This condition can be corrected with the use of convex lenses so that the light rays are focused on the fovea. Normally the problems that are associated with hyperopia include cataracts and amblyopia. In these cases, although spectacles will be prescribed, visual acuity will be reduced (Mason, 1997).

*Astigmatism.*

The main cause of astigmatism is the variation of the refractive power of the cornea or lens due to irregularities in its curvature. This results in a distorted image on the macula. It can be simple to rectify with a cylindrical correction built into the lens of the spectacles, but difficulties can arise when it is associated with myopia and hyperopia. When it is associated with another visual impairment, correction can be difficult and it can result in reduced visual acuity (Mason, 1997).

*Staphyloma.*

This is the bulging of the cornea due to inflammatory softening (Rogow, 1988).
2.2.1.3 Cortical Visual Impairment (CVI)

In contrast to a structural impairment or refractive error, a cortical visual impairment (cortical blindness) is not caused by any abnormality of the eyes. Instead it results from damage within the brain, often within the visual cortex of the brain. This damage prevents the child from adequately receiving or interpreting messages from the eyes, even though the eyes may be quite capable of gathering visual information. Furthermore this damage may result in a decrease in visual acuity or possibly total blindness. The causes of CVI range from insufficient oxygen to the brain at birth or during heart surgery, to stroke, or trauma (Stiles & Knox, 1996).

Children with CVI often have other disabilities such as cerebral palsy, seizure disorders, or mental retardation. This is because the same injury that damages the brain’s visual center can also cause other damage that results in cognitive, motor, or other impairments. When CVI occurs alone, it is often as a result of anoxia (no oxygen) or hypoxia (insufficient oxygen) during the birth process (Stiles & Knox, 1996).

There is no medical treatment for CVI. Nonetheless, it is important to rule out any visual abnormality, such as cataracts or retinal or optic nerve abnormalities, which may contribute to vision loss. Glasses should also be prescribed if the child has a significant refractive error in addition to CVI (Stiles & Knox, 1996).
2.2.3 Effects of Vision Loss

The effects of blindness and low vision are wide ranging and encroach on every aspect of an individual’s development. Moreover the effects of visual impairment also extend to the family and surrounding community. Lack of vision interferes with all other systems which are biologically geared to function after receiving feedback from vision. (Als, Tronick, & Brazelton, 1976). This statement presents in a nutshell the problems encountered by individuals with visual impairment, particularly during the early stages of their childhood. Early development is children’s attempt to organize themselves and the world around them and vision is the primary feedback sense that enables the child to get body systems operational and refined, and helps in the accumulation of information to make sense of the environment (Bishop, 2004). As mentioned in chapter one, Bishop (2004) identifies four developmental areas that affect individuals with visual impairment, namely, cognitive, social and emotional, language and communication, and mobility and orientation.

It is unequivocal that vision plays a large role in the development of intelligence of any child and children with visual impairment are of no exception, however, their intelligence may develop in a different way and by different routes, but as Bishop (2004) declares, it does develop. In explaining cognitive development Jan, Freeman and Scott (1977) propose that some problems of cognitive insufficiency may be due to information deprivation, based on the fact that other senses cannot process information as efficiently as vision can. For example when children who are fully sighted do jigsaw puzzles, they can look at an individual piece and determine which way up the piece goes
an decide the approximate area in which the piece fits. Furthermore, the brain is able to process the colors, shapes and shading on the piece almost simultaneously to determine its location. There is no other sense that can provide so much information so quickly. With this, it is evident that vision provides the child with the opportunity to make links between different situations and experiences and thus by extension, visual impairment imposes serious limitations on the satisfactory development of cognitive functioning.

In addressing social and emotional development, Bishop (2004) contends that social skills which are often learned through visual observation may be encumbered for children who are visually impaired. The author makes the claim that children who are blind have no way of observing how others behave and interact with each other, or what behaviors are socially acceptable, thus the gestures and body language that sighted people use without thinking about, must be taught, one by one, to those who are visually impaired, especially those who are legally blind. Smiling, shaking hands, waving bye-bye, using head nods or shoulder shrugs to indicate “yes,” “no,” or “I don’t know,” covering one’s mouth when yawning or sneezing – all these social skills must be taught, and for Bishop (2004) these should start in preschool years.

Added to this, Kinglsey (1997) puts forward the argument that if the social skills are not taught, as these children become older and start to socialize with other children, they will be ignored by other children especially at places like the local playground. Children learn to cooperate partly by observing each other play and making eye contact, children with visual impairment who are not able to see what the others are doing, are at an unfortunate position and consequently they do not get invited to join in. As children
become older they need the skills to initiate and sustain social relationships. If the body language of children who are visually impaired does not conform with that of their sighted peers these children may find socializing difficult (Kinglsey, 1997).

The third area that Bishop addresses is language and communication development. Communication is one of the ways through which we receive information about our environment in which we operate and as such the ability to communicate is an essential part of life, a necessary means for participation in society, and an essential ingredient for the development of self worth and dignity (Kingsley, 1997). In considering the impact of a visual impairment on early communication development, research evidence suggests that the visual impairment of itself does not mean that a child will necessarily experience severe communication difficulties. In fact, McGurk (1983) suggests that although the presence of a visual impairment seems to have a moderating influence on the development of communicative competence, children with visual impairment may well follow the same path to communicative competence as their sighted peers, and the range of capabilities the child eventually achieves is often well within the range of reaction society accepts as “normal.”

Moreover, the literal explosion in technology within the past twenty years has revolutionized the area of communication for everyone. Bishop (2004) is of the belief that this upsurge has been a mixed blessing in the field of visual impairment in that it has provides opportunities for communication, while at the same time requires both additional funding for extremely expensive special equipment and teachers who are prepared to teach the applications. In the past students who were visually impaired had
only a typewriter, tape recorder, Talking Book Machine (special –speed record player),
and/or a brailewriter as special equipment. The technology that is available today has the
potential to increase visually impaired student’s control over educational material and can
allow direct contact with classroom activities. There are systems and software to enlarge
print spontaneously, software to enable computers to talk, such as JAWS (Job Access
With Speech), self-contained electronic equipment to allow blind students to take notes
and to read print, and software that will translate Braille to print. The visually impaired
student in the regular classroom is only limited by the availability to technology and a
technically visually impaired person to instruct how to use it (Bishop, 2004).

The terms mobility and orientation have specific meanings for individuals who
are visually impaired and for the professionals who work with this particular group.
Kingsley (1997) makes the following distinctions between orientation and mobility:

Orientation is the ability to understand the relationship that objects have to one
another – the creation of a mental pattern of the environment. Mobility training
involves the acquisitions of the set of skills and techniques which enable a visually
handicapped person to travel more easily through his environment (p.28).

Kingsley (1987) suggests that individuals who are visually impaired cannot easily
monitor their movement and without appropriate intervention, they may not know in
which direction to go or how to find their way round obstacles to get to their goal.
Uncertainties about their surroundings may lead to a lack of confidence in exploring the
environment. In order to develop as confident and independent travelers, Kingsley
(1987) states that individuals who are visually impaired need skilled intervention from a
very early age to promote motor development and coordinated and purposeful movement, and, as they develop, a carefully structured program to teach them the techniques of travel.

From examining the four development areas above, it is apparent that the loss of vision presents a gloomy outlook on the development of individuals with visual impairment, but of more significance, the message that emanates is the importance for informed advice which will enable the parent and others to understand children’s needs and intervene in an appropriate way at the right time, which in turn will empower assist these children to become independent, self-reliant, self-sufficient adults and give them the necessary tools to build meaningful relationships in the environment in which they exist.

Added to this, individuals with visual impairment need an array of resources and certain level of competence and capacity building both at an individual and collective level to enable them in the decision-making process and the control of resources. In adapting the definition of empowerment used by the Narayan (2002), empowerment is explained as, “the expansion of assets and capabilities of” individuals with visual impairment “to participate in, negotiate with, influence, control and hold accountable institutions that affect their lives” (p. xvii). In empowering a marginalized group, such as individuals with visual impairment, Narayan (2002) identifies several conditions that accompany empowerment. These include, own choice, independence, own decision making, capacity to fight for one’s rights, self-esteem, control, self-reliance and capability. These factors are embedded in the value system of a community, and
empowerment is an inherent aspect of the value system. Social capital provides a useful instrument through which IVIs can become empowered to satisfy the above-mentioned conditions, along with guaranteeing full inclusion into the society.

With this in mind, the following section examines in detail the theory of social capital which is founded on the premise that social inclusion and social networks are crucial to the development of individuals, communities and nations.

2.3 Theoretical Framework: Social Capital Theory

2.3.1 Introduction

Social capital theory impacts many scholarly disciplines. The application of this theory is extensive in the sociological and political science fields and to a lesser extent by economists, educationalists, historians, feminists, and policy makers (Field, 2003; Putnam, 2002). The theory provides a broad paradigm that allows for its easy adaptation above other theories. It is for this reason that there is no set and commonly agreed upon definition of social capital, and Robison, Schmid and Siles (2002) make the point that a particular definition will be adopted based on the discipline and level of investigation. Because social capital can take on various definitions, authors tend to discuss the concept and its ideological reasoning, intellectual origin, diversity of applications and some of its unresolved issues, before adopting a school of thought and adding their own definition (Adam & Roncevic 2003).

Some authors maintain that defining social capital depends on the concentration of the authors, whether they focus on the forms, the sources or the effects of social capital
In order to adequately grasp the theory, Eastis (1998) contends that social capital is multidimensional and must be conceptualized as such for it to be of any illustrative value. Despite the array of possible definitions that can be assigned to social capital, a common theme emerges in the various literatures, and that is, individuals, and by extension the community stands to benefit from social relations or interactions.

2.3.2 Origins and Core Theses

The concept of social capital theory was first introduced by a young progressive educator and social reformer named L. Judson Hanifan, in the early twentieth century. Hanifan (1920) in his writings concludes that the grave social, economic and political problems that existed in the communities in which he worked in West Virginia could be resolved by reinforcing the networks of solidarity among their citizens. For him, it is critical that the inclusion and the involvement of community members to occur, if a community is to achieve sustainable democracy and development. Thus, with that outlook, the idea of social capital is born and in his book, The Community Center he gives justification for utilizing the term:

In the use of the phrase social capital I make no reference to the usual acceptation of the term capital, except in a figurative sense. I do not refer to real estate, or to personal property or to cold cash, but rather to that in life which tends to make these tangible substances count for most in the daily lives of people: namely goodwill, fellowship, sympathy, and social intercourse among the community.
individuals and families who make up a social unit. The individual is helpless if left to himself ... If he comes into contact with his neighbor, and they with other neighbors, there will be an accumulation of social capital, which may immediately satisfy his social needs and which may bear a social potentiality sufficient to the substantial improvement of living conditions in the whole community (p. 9-10).

However, not everyone agrees with Hanifan, there are some authors who oppose and question Hanifan’s use of the word “capital” in social capital. Thus, before providing further definitions of social capital, it is important to briefly discuss the justification of “capital” in social capital. Those who object to the use of the term claim that social capital has no capital-like properties and as such should not be called capital (Hofferth, Boisjoly & Duncan, 1999; Inkeles, 2000; Smith & Kulynych 2002).

From the works of Smith and Kulynych (2002), the word capital has a too broad, all-encompassing meaning. Consequently, the term social capital becomes blurred in making various distinctions, which in turn adversely affects the scholarly inquiry, whatever its implicit or explicit normative concerns. From a different perspective, Inkeles (2000) insinuates that the term capital is too limiting and suggests using alternatives such as social or communal resources. Added to this, Hofferth et al (1999) make the point that social capital is the result of humanity and therefore not capital as capital is a resource that is built up through investment and can be drawn upon when needed.

Conversely, those who agree with Hanifan contend that social capital is similar to other forms of capital in that it can be invested to produce higher incomes or greater
outcomes (Adler & Seok, 2002; Bourdieu, 2002; Coleman, 1990a; Robison et al, 2002).

In their article, *Is Social Capital Really Capital?* Robison et al (2002) assert that properties of physical capital goods are found within the social capital paradigm and thus substantiates the use of the term. They identify these similar characteristics as: “transformation capacity, durability, flexibility, substitutability, decay, reliability, ability to create one capital form from another, opportunities for (dis)investment, and alienability” (p. 9). Furthermore, Lin, Cook and Burt (2001) argue that social capital shares commonalities with human capital and that the consequences of social capital are capital in nature because capital suggests something that is durable or long lasting and suggests something that retains its identity even after repeated use, something that can be used up, destroyed, maintained, or improved. Grootaert and Van Bastelaer (2002) advocate that there are two forms of social capital, structural and cognitive; and that both forms qualify as capital because they both require some investment of time and effort. Moreover, from their empirical work, these authors conclude that social capital can directly increase output and lead to higher productivity of other resources such as human and physical capital. Portes (1998) succinctly shows how social capital is different yet similar to other forms of capital when he states, “whereas economic capital is in people's bank accounts and human capital is inside their heads, social capital inheres in the structure of their relationships” (p. 7). Coleman (1990a) echoes the sentiments of Portes, “social capital inheres in the structure of relations between persons and among persons. It is lodged neither in individuals nor in physical implements of production” (p 302). Finally, social capital is similar to other forms of capital in that it can be invested with the
expectation of future returns (Adler & Seok 2002), is appropriable (Coleman 1990a) and is convertible (Bourdieu 2002).

It can be concluded that social capital exhibits a number of characteristics that distinguish it from other forms of capital, but it also shares common features to other forms of capital and these differences are not significantly dissimilar to warrant a different term. The challenge, therefore, as Grootaert and Van Bastelaer (2002) highlight is to give meaningful and pragmatic substance to the rich concept of social capital in each context, so as not to be too broad or too limiting, and to provide an appropriate definition with suitably measurable indicators based on the area of research.

Since the inception of social capital by Hanifan, the theory has undergone a series of alterations by various academicians. This was not surprising to Hanifan, because in his writings he claims that although social capital theory captures the essential aspects of community development, businessmen and economists may not willingly accept the concept of the productivity of social assets. It may be from this premise that the theory was not initially accepted by other social commentators of that era. Based on the writings of Putman (2002), the concept of social capital was independently reinvented at least six more times (since 1920) and it was not until the early 1980s that social capital gained global acceptance in the context in which Hanifan had intended.

Authors such as Chenoweth and Stehlik (2003) and Paxton (1999) are of the firm conviction that Bourdieu (1986), Coleman (1988) and Putnam (1983, 2000) are the ones responsible for placing social capital on global and public agendas. Chenoweth and Stehlik (2003) argue that governments are now fervently embracing social capital in their
attempt to seek ways to develop stronger communities, that will have the capacity and leadership to find local solutions to local problems. Moreover, they reason that the overall aim is to develop community capacity so that the resultant stronger communities can support weaker individuals and families, and that strong families will support weaker communities.

One of the pioneers of social capital, Pierre Bourdieu, a French economic and cultural sociologist, whose work dates back to the mid-1980s, seeks to expand the concept of social capital to include assets formed by access to culturally valuable symbols, ways of life, and social networks. Bourdieu (2002) asserts:

*Social capital is the aggregate of the actual or potential resources which are linked to possession of a durable network of more or less institutionalized relationships of mutual acquaintance and recognition – or in other words, to membership in a group – which provides each of its members with the backing of the collectivity-owned capital* (p 286).

However, social capital is not natural given, it requires more than the existence of a network of connections. Bourdieu (1986) explains that it is a product of endless efforts of individuals and institutions with the aim of “transforming contingent relations, such as those of neighborhood, the workplace, or even kinship, into relationships that are at once necessary and elective, implying durable obligations subjectively felt (feelings of gratitude, respect, friendship, etc.) or institutionally guaranteed (rights)” (p 249-50).

Bourdieu, when he first addressed the concept of social capital was interested in understanding the social hierarchy and the entrenched forms of inequality that existed
during the 1960s and 1970s, especially in Europe (Field, 2003). Greatly influenced by Marxist’s sociology, Bourdieu thought that “economic capital is at the root of all other types of capital” (Bourdieu, 1986 p. 252), but to see capital exclusively in economic terms was insufficient and thus Bourdieu proposed that cultural and social capital should be treated as assets, representing the product of accumulated labor. In explaining these three forms of capital, Bourdieu (2002) states that economic capital is immediately and directly converted into money and “may be institutionalized in the form of property rights;” cultural capital refers to the knowledge, skills, forms of expression that are culturally valued which can be transformed into economic capital and “may be institutionalized in the form of educational qualifications;” and social capital is made up of social obligations (connections), “which is convertible, in certain conditions, into economic capital and may be institutionalized in the form of a title of nobility” (p. 281).

For Bourdieu then, social connections can lead to jobs, loans, valuable information, and investment opportunities. He recognizes that the value of individual ties depends both on the number of connections they can mobilize and the volume of capital (cultural, social and economic) possessed by each connection (Bourdieu 1986). In this regard social capital can be seen as the value that one gains from personal connections such as membership in a family, associations, elite clubs or other solidarity groups (Biggart, 2002). With this, Bourdieu (1986) stresses that social capital is as much about exclusion from a particular group as about inclusion in it. He gives the example of the relationship between connections and cultural or financial capital with members of professions, such as lawyers or doctors who exploit their social capital to win confidence of a clientele in
high society, or even make a career in politics. By contrast, those who rely primarily on their educational qualifications are the most vulnerable in the event of “credential deflations,” not only because they lack connections but also because their weak cultural capital reduces their knowledge about fluctuation in the credentials market.

In summary, networking, in Bourdieu’s perspective, is the active attempt by individuals to build up social capital and is a form of investment that can lead to economic capital. Therefore, examining Bourdieu’s outlook of social capital, the underlying theme emerges that social capital is an asset for the privileged, and a means of maintaining dominance in a society (Field, 2003). Furthermore, members within these groups have strong ties complemented with trusts, goodwill, fellowship and access to more capital which are only enjoyed among members inside this echelon. At the same time, people of within the group of the less “privileged,” are not able to make contacts with members of the “privileged” groups to build social capital that they too may benefit accordingly from social relations.

Another major proponent of social capital is James Coleman, an American sociologist who was able to show that social capital was not limited to the powerful, but could also convey real benefits to poor and marginalized groups (Field, 2003). In Coleman’s (1990a) opinion, social capital represents a resource because it involves the expectation of reciprocity and goes beyond any given individual to involve wider networks whose relationships are governed by a high degree of trust and shared values. Like Bourdieu, Coleman’s interest in social capital emerged as attempts to explain relationships between social inequality and academic achievement in schools (Field,
2003). Putnam (2002) in his writings gives accolade to Coleman for being the first, after Hanifan, to put social capital on the intellectual agenda to highlight the social context of education.

In a study conducted by a team led by Coleman (1990b) during the 1980s, the achievements in private schools were compared with that of public schools. The team found that students performed better at Catholic schools and schools with other religious affiliation even when other factors, such as social class and ethnicity, were taken into account. Further evidence showed that pupils in Catholic schools had lower absenteeism and drop-out rates than pupils of comparable backgrounds and ability in state schools. Coleman (1990b) attributes this trend to the impact of community norms upon parents and students and thus concluded that communities were a source of social capital that could offset some of the impact of social and economic disadvantages within the family. Coleman and his team deduced that a community created by the church, was of great importance in reducing dropouts among students who were initially at high risks of dropping out. In effect, the church-and-school community, with its social networks and its norms about what teenagers should and should not do, constituted social capital beyond the family that aided both family and school in the education of the family’s children.

This does not mean that the family’s role is of no great concern or importance. On the contrary the family for Coleman is the archetypal structure of social capital. It is responsible for children’s cognitive and social development, the family is a societal keystone. Schools and other day care facilities are formal institutions and are structured
to fulfill certain aspects of the socialization process, such as “opportunities, demands and rewards”. On the other hand, the family is more intimate and is responsible for primary socialization, which includes the enrichment of “attitudes, efforts and conception of self” (Coleman 1990b, p. 333). Nevertheless, what Coleman observes is that the primal family structure is dissipating, thus shifting the responsibility of primary socialization to formal institutions such as schools (Coleman, 1990b). As Field (2003) indicates Coleman is not content with this replacement because he (Coleman) is of the view that constructed forms of organizations may not be able to provide the “normative cohesion and network closure that are required for the assured development of young people” (p. 27). The cognitive development of children is so important to Coleman (1990b) that he captures this in his definition of social capital as “the norms, the social networks, and the relationships between adults and children that are of value for the child’s growing up” (p. 334), additionally he explains, “Social capital (not only) exists within the family, but also (exists) outside the family, in the community” (p. 334).

Even with his adoration of the family, Coleman believes that certain types of social structures were more likely to greatly influence individuals’ choice of actions than others. This is evident from his empirical study mentioned earlier, where Coleman (1990b) underscores the importance of Church as a significant institution in creating network ties: “Religious organizations are among the few remaining organizations in society, beyond the family, that cross generations. Thus, they are among the few in which the social capital of an adult community is available to children and youth” (p 336).
Another dimension to Coleman’s view of social capital is the incorporation of human capital. In making this connection, Coleman posits that social capital has the potential of developing human capital, and as such he defines social capital as:

...the set of resources that inhere in the family relations and in community social organization and that are useful for the cognitive or social development of children or young persons. These resources differ for different persons and can constitute an important advantage for children and adolescents in the development of their human capital (p. 300).

He contends that just as physical capital is created by making changes in materials so as to form tools that facilitate production, human capital is created by changing persons so as to give them skills and capabilities that make them able to act in new ways. And social capital, in turn, is created when the relations among person change in ways that facilitate actions. For example, a group whose members manifest a high level of trust amongst each other will be able to accomplish much more than a comparable group with lower trust level (Coleman, 1990a).

At the end, Coleman gives the definition of social capital from a purposeful perspective:

Social capital is defined by its functions. It is not a single entity, but a variety of different entities having two characteristics in common: They all consist of some aspect of a social structure, and they facilitate certain actions of individuals who are within the structure (Coleman, 1990a, p.302).
It is evident that from Coleman’s point of view social capital, essentially, can benefit anyone who is part of a structure or institution. In other words, social capital does not benefit only those whose efforts are required to create or realize it (social capital), and it is for this reason that Coleman (1990a) refers to social capital as a public good exhibiting non-excludability qualities. Similarly, social capital illustrates how the social structure of a group can function as a resource for the individuals of that group and embedded in these structures are the creation of cultural values and norms, trusts, social relationships and ties.

Robert Putnam (2002), the third main contributor to the eminence of social capital, brings a different dimension to the social capital debate. As a political scientist, Putnam’s concerns include the role of “civic engagement in generating political stability and economic prosperity” (Field, 2003 p. 29). Putnam (1995) in his scholarly paper entitled, Bowling Alone: America's Declining Social Capital, which gained him significant popularity, claims that he does not intend to contribute to the development of the theory of social capital, but rather use the “central premise that social connections and civic engagement pervasively influence both public and private lives as the starting point for an empirical survey of trends in social capital in contemporary America” (p. 67). In this regard, social capital to him, “refers to features of social organization such as networks, norms, and social trust that facilitate coordination and cooperation for mutual benefit” (p. 67). Supporting this view Fukuyama (2000), gives his definition of social capital, as, “an instantiated set of informal values or norms shared among members of a group that permits them to cooperate with one another” (p. 9).
In Putnam’s (2000) opinion, the mainstay of social capital theory is that social networks have value, and that, “social contacts affect productivity of individuals and groups” (p. 19) and these connections result in the creation of “social networks and the norms of reciprocity and trustworthiness that arise from them” (p. 19). More specifically, Putnam (2002) claims that this norm of reciprocity is a “generalized reciprocity,” which means, “I’ll do this for you without expecting anything immediately in return, because down the road you will reciprocate my goodwill” (p. 7). The author places emphasis on trust as an important element to this social interaction. For him, a society that is characterized by generalized reciprocity is more efficient than a distrustful society. It is all about establishing relationships purposefully and employing them to generate intangible and tangible benefits in short or long terms. These benefits according to Putnam (2002) can be social, psychological, emotional and economical.

Unlike Coleman, Putnam looks at other formalized organizations, apart from school and church, through which social capital can be formed. Putnam (2000) declares that resources are gained from ties that are built from connections with (in) constructed organizations such as singing societies, credit unions, school-service groups (mostly parent-teacher associations), sports groups/clubs, professional societies, literary societies, labor unions, professional societies, fraternal groups, veterans' groups, and service clubs. Nonetheless, he asserts that religious affiliation is by far the most common associational membership but the religious sentiment, he claims, (in America) is becoming somewhat less tied to institutions and has become more self-defined.
Although Putnam does not supply a precise definition of social capital, in his edited book *Democracies in Flux*, he gives acclamation to Micheal Woolcock and Deepa Narayan for providing a collectively succinct and appropriate definition of social capital. He cites them as:

The basic idea of social capital is that a person’s family, friends, and associates constitute an important asset, one that can be called on in a crisis, enjoyed for its own sake, and leveraged for material gain. What is true for individuals, moreover, also holds for groups. Those communities endowed with a diverse stock of social networks and civic associations are in a stronger position to confront poverty and vulnerability, resolve disputes, and take advantage of new opportunities (p. 6).

An important contribution of Putnam (2002) to the social capital discourse is his ability to cleverly categorize social capital into four forms, based on different types and dimensions of social capital that have emerged from scholarly debates. These forms of social capital are peculiar, yet, they are not mutually exclusive. To be more precise, Putnam claims that they are complementary lenses through which social capital can be comprehended, appreciated and evaluated. The four forms are:

1. Formal versus informal social capital. Parents’ organization, service clubs or labor unions are considered to be formal institutions with elected or nominated officers, dues and scheduled regular meetings. People, who meet to play a few games of basketball or gather at the same bar or even family dinners, constitute informal social capital. Putnam asserts that both groups make up networks in which reciprocity can develop, thus
he emphasizes the importance that associations constitute merely one form of social capital.

(2) Thick versus thin social capital. This explains the distinction between strong ties and weak ties. Putnam defines strong (thick) ties in terms of the frequency of contact and closeness. There is a strong tie between friends who spend a lot of time together with similar friends in common. On the other hand, there is a weak (thin) tie with someone with a passing acquaintance and not a lot of common friends.

(3) Inward-looking versus outward-looking social capital. Putnam explains that inward-looking social capital is formed based on choice or necessity and tends to promote the material, social or political interest of the members within this crowd, this include organizations based on class, gender or ethnicity. Outward-looking are those organizations that concern themselves with the publics’ interest. These include the charitable organizations, such as the Red Cross.

(4) Bridging (exclusive) versus bonding (inclusive) social capital. Bonding, for Putnam, means the bringing together of individuals who are like one another in important respects, while bridging refers to those links that bring together people who are unlike one another. Bridging social capital provides a valuable source of information and contacts that can help people with everything from job finding to problem solving.

Before advancing to the next section which discusses how social capital theory is applicable to individuals with visual impairment, it is essential to provide a synopsis of the three foundational authors of social capital theory. Surely, the concept of social capital lies on the premise that networks and relationships matter - they have productive
value. The three writers all made this clear but through different lenses. Bourdieu sees social capital as an asset enjoyed only by the elite group, thus signifying a strong horizontal tie of members within that group. By that token, people external to that network are disadvantaged and a weak vertical tie exists between the haves and have-nots. Coleman, following on the works of Bourdieu, perceives social capital as an asset that can benefit these disadvantaged groups, as long as they are part of the community. Like Bourdieu, he places great value of being part of a family or church. Putnam, who expands the boundaries of social capital, explains it as a resource that functions at societal level.

When all the tenets emanating from the above theorists are combined, it is unequivocal that social capital has many dimensions, with each dimension contributing to the meaning of social capital although each by itself is not able to adequately portray the concept in its entirety. Therefore, when it is all put together, social capital, results from networks, inheres in networks, provides access to resources that are controlled by network members, is a structure of networks that provide a resource for its members, is a result of trust, results in trust, and creates norms, especially norm of reciprocity. Social capital, is belonging to clubs and associations, creates human capital, is created by human capital, it determines the rate of return on human capital, facilitates individual action, is the expectation of action that has economic and social outcomes, is something that solves common/group problems, upholds cultural norms and finally, social capital requires cooperative behavior and inclusion of all.
Having examined various contributions on this paradigm, it is appropriate to conclude that, the ability to harness social relationships and other forms of capital (physical, cultural, human, and economical) to the improvement of oneself and the community is social capital. This, therefore, serves as the operational definition for this study. The next section also examines the variables that are employed to explain social capital as it pertains to individuals with visual impairment.

2.3.3 Social Capital Theory and its Application to IVIs

Although there is an ongoing debate about the application of social capital theory, there are several key determinants of the theory that can be applied to individuals with visual impairment. Social capital theory places emphasis on the idea of reciprocity, it embraces the concept of social inclusion for all, it promotes cultural norms and values, and it highlights the importance of access to resources. In this regard, the tenets of social capital paradigm and its ideology form a useful framework to determine the importance of social networking in the development of the community and its members. Thus, the terms reciprocity, social inclusion, access to resources and cultural norms and values, will function as determinants to investigate the existence and impact of social capital in Antigua and Barbuda, vis-à-vis individuals with visual impairment.

Reciprocity as a central precept to the theory presents a problem for families with children or even adults with visual impairment since such families already have a lessened capacity to form social networks because of being consumed with internal responsibilities of day-to-day needs of living. This means that they are not able to build
the network needed to form social ties to provide the support system that is so enthroned in the teaching of social capital theory. Additionally, individuals with visual impairment themselves have a lessened capacity to develop the social networks critical for their functioning or maximizing the benefits accruing from this network formation. If both the family and the individual become less able to access the mainstream, then they are highly disadvantaged since they cannot depend on each other, or if they do, they will be relying on diminished resources.

Furthermore, with this deprivation of social ties there is a fear that they may not have the possibility to reciprocate, because they may not have a job, or may not end up in a stable economic situation to give a return on any investment. Moreover, the lack of connections in the community creates barriers that prevent IVIs from building trust, goodwill and support with other members of the community. Trust forms the foundation of reciprocity and by building trust, individuals will operate in a supportive, benevolent manner without fear of ill will, or the causing of harm to each other. Yet, this level of trust can only be fostered by constant interactions. Therefore, it is necessary for the community to engage in capacity building to provide support to the weaker families and individuals; and in return these individuals will in return be able to contribute to the community’s development. In other words, by helping people with disabilities the community is helping itself.

Generally, people with disabilities and their families are excluded from the broader social debate, thus, making it difficult for their inclusion into the community life. Inclusion consists both of participation and involvement in various networks through
family and friends, neighborhoods, government and work. (Chenoweth & Stehlik, 2003).

In Antigua and Barbuda there is a disregard for people who are visually impaired when it comes to certain structures, for example the sidewalks are constructed with the sighted in mind and in most cases the end of a sidewalk is a step down instead of a decline which merges into the road creating serious architectural barriers for the visually impaired. The access to buildings, especially those without handrails, and the operating of machines by and large require assistance by sighted people, normally it is the family members who provide the necessary help. Likewise, involvement in associations and institutions will enable IVIs to create their own social networks of friends, promote a level of independence, improving social ties and even develop skills, talents and other capabilities, which are all critical tools in building social capital. Unfortunately, this level of involvement appears minimal, if not non-existent.

Another important principle of social capital that is echoed by Bourdieu and Coleman is access to other forms of capital. As seen above, these authors made a strong case that social capital not only leads to other forms of capital but it is also created by all other capitals. In Antigua and Barbuda, much work is desired to the improvement of human capital on a whole. This is evident by the 3.8 % expenditure of GDP on education highlighted in chapter one. Moreover, since disability, and in the interest of this study, children who are visually impaired are not included in any budgetary allocations, one can argue confidently, that there is an inefficiency in the investment in education (including an expanded core curriculum) of the marginalized group. Undoubtedly, the human capital deficiency, will lead to IVIs denial of economic and cultural capitals, which are needed
for network building, full participation and self-sufficiency. Also striking is that the paltry investment in education, and the lack of inclusion may help to explain the “missing” population of young adults who are visually impaired. These individuals might have migrated in search of better opportunities or they may have remained behind closed doors because of the lack of opportunity within the state. Access to resources or other forms of capital, according to Chenoweth and Stehlik, (2003) gives participants a strong sense of belonging, appreciation and commitment to the shared ownership of the resources.

The final determinant of social capital is the maintenance of cultural norms. Cultural norms in a community dictate what is “normal” and the circumstances under which someone is “accepted” into the society. As Chenoweth and Stehlik, (2003) maintain, to have any form of disability, means that one of the most powerful norms is challenged. Unfortunately, nationals of Antigua and Barbuda, for whatever reason, do not appear to know how to react towards others who are considered “different.” To the majority, people with disabilities may be considered different, and as such uncertainty of how to reach out to, and embrace people who are unlike, or outside the “norm,” becomes challenging.

This chapter discusses the technical aspects of disability, especially that of visual impairment. Among other issues identified in this chapter is that visual impairment adversely affects a persons ability to learn by interfering with the body systems that are biologically geared to function after receiving information. It was also established that children are the most vulnerable sub-set of this group, and that impairment among this
group occurs prior to or after birth, hence the responsibility for their impairment rests with someone else. Thus, the responsibility of facilitating the development of skills, talents and other capabilities, among children with visual impairment, as with other IVIs, the development of which are all critical tools in building social capital, squarely rests with the community in which they find themselves.

Social capital theory was also discussed in detail in this chapter. It was ascertained that in order to make sense of the role of social capital in the empowerment of IVIs, this study adopted four main determinants of social capital, namely, social inclusion and involvement, access to resources or other forms of capital, reciprocity and social norms and values. These four categories are used to obtain answers to the three research questions, identified in Chapter one, which were: (1) How involved are IVIs in social networks of the community? (2) What is the community’s perception regarding individuals with disability - specifically those with visual impairment? (3) What access do IVIs have to the social, physical and economic resources of the community?

The next chapter explains the methodological framework which guided the study. It is divided into seven sections, starting with the overall research design process, selection of site and participants. The instruments used and the data collection procedure are then addressed, followed by the limitation of study and analysis of the data.
CHAPTER 3 RESEARCH METHODOLOGY

3.1 Research Design

This research paper adopted a case study qualitative research paradigm to provide insights on how social capital has assisted in the development of individuals with visual impairment (IVIs) in Antigua and Barbuda. IVIs in this instance represent a subset within the general group of disability. As Stakes (2000) asserts, “A case may be simple or complex… (but) it is one among others” (p. 436). For this author, no matter the nature of the study, researchers usually concentrate on “the one” to make general inferences. To determine the role of social capital, this research investigated the level of involvement that IVIs have in social networks; the availability of resources to them and how IVIs are perceived by community members in Antigua and Barbuda. Figure 3.1 shows a graphical representation of the design process that this study followed.

![Research design process](image)

Source: from data 2007

Figure 3.1: Research design process
From Figure 3.1, highlights a case study as a strategy used in qualitative methodology. Glesne (2006) defines a qualitative research as an umbrella term that encompasses many different philosophical orientations to interpretive research. Expanding on Glesne’s definition, Merriam (1998) agrees that qualitative research is a broad term that covers several forms of inquiry, but adds that this type of research allows the researcher to understand and explain the meaning of social phenomena with as little disruption of the natural setting as possible. Adding to this school of thought, Patton (2002) offers that a qualitative inquiry is used in order to comprehend the environment of a particular setting, what it means for participants to be in that setting, what their lives are like, what is going on for them, what their meanings are, and what the world looks like in that particular setting. This type of inquiry is in line with this study as it examined the resources and social networks within the community and their availability to IVIs.

In defining a case study, Yin (2003) sees it as a process: “A case study is an empirical inquiry that investigates a contemporary phenomenon within its real-life context, especially when the boundaries between phenomenon and context are not clearly evident” (p 13). Merriam (1998), however, focuses on case study as an end product and defines it as, “an intensive, holistic description and analysis of a single instance, phenomenon, or social unit” (p. 27). Both meaning are captured within this study, in that IVIs represented the unit of study – the case; and that the study examines how the members within this social entity (or group), who have a lessened capacity to create networks, are included or excluded into mainstream society.
The third stage in Figure 3.1 shows the instruments used to gather data for the study. In-depth, open-ended interviews and focus group interviews were the main method of gathering data from participants of the research. The best way to find out how individuals feel, the way they view the world, is to converse directly with them; thus, an interview provides the most fitting method in which a researcher can obtain information about an individual’s life which cannot be attained through observation (Glesne, 2006; Patton 2002; Merriam, 1998). Patton (2002) adds that a researcher for instance cannot observe emotions or offer meanings to participants’ behavior; neither can a researcher offer explanation for activities that took place before the commencement of the research, and as such were not observed. In essence, an interview allows researchers to find out what someone else knows or is thinking (of course with the understanding that the point of view of others is important and should be accepted without any prejudices or perceptions). Therefore, for the purpose of finding out the level of involvement, participation, societal norms and the availability of resources that existed within Antigua and Barbuda through the lens of IVIs, the researcher conducted person-to-person and person-to-group interviews. These participants are identified at level four in Figure 3.1.

Once the data were collected from the interviews, they were analyzed based on the four key determinants of the social capital theory as shown by the final tier of the design process in Figure 3.1. These determinants created the basis to answer to the research questions of the study and are further explained in the data analysis section.
3.2 Site Selection

The study was conducted in the country of Antigua and Barbuda, and mostly at the Unit for the Blind, which is the only resource center for children with visual impairment. The Unit is located on the periphery of the commercial center of the city of St. John’s, and shares compound with T N Kirnon School - the public school where the children who are visually impaired attend. Another focal location for data collection was at the Workshop of and for the Blind, which is situated in the heart of the capital of St. John’s, and caters to adults with visual impairment who are trained to make handicraft items.

3.3 Selection of Participants

Participants of the study were selected based on purposive sampling. This process is centered on the assumption that if a researcher wishes to increase knowledge, obtain understanding and gain insights into a situation, he/she must select a sample from which to garner the information (Merriam, 1998). Therefore, the sample of this study was drawn from individuals with visual impairment, teachers of the Unit for the Blind, parents of children with visual impairment, government officials and opinion leaders.

The exact number of the population of IVIs was not known since there has been no census or appropriate system in place to ascertain that population. Thus, my sample for the interviews of IVIs and parents of children with IVIs was drawn from information provided from the Workshop of and for the Blind and the Unit for the Blind respectively. Participants from the Workshop of and for the Blind became a focus group interview.
This is in line with Krueger (1994), who states that a focus group interview must satisfy certain characteristics. He posits that there must be more than four people who have common characteristics and provide data and a focus group interview must be of a qualitative nature and focused in discussion. These features justify the use of IVIs at the Workshop of and for the Blind as a focus group.

Three teachers at the Unit and one from the mainstream school were interviewed to gain an understanding of the educational strategies used to empower the children and how the Unit functions as a preparatory organization for inculcating principles of self-sufficiency in the children. Six opinion leaders were also interviewed. Watson and Hill (2006) define opinion leaders as a collection of people who are both informed and are upholders of the "norms of a social system" (p. 163). (Watson & Hall 1997, p.163). Additionally, Katz and Lazarsfeld (1955) see opinion leaders as people in certain sectors interested in particular subjects who become, in effect, experts on those subjects. The authors further explain that opinion leaders are not necessarily traditional leaders in society, rather, they are perceived experts in specific fields. Therefore, on this premise, the opinions leaders selected for this study comprised of the Director of the Caribbean Council for the Blind, the Director of the Workshop of and for the Blind, the Director of the Board of Education, an Ophthalmologist, the Regional Development Officer for Disabled People, and a Lecturer at one of the leading technical institutions in Antigua and Barbuda. This group of people was selected because (in the opinion of the researcher) they possessed a good understanding of the system of government, the community, and
IVIs, and accordingly were apt to provide objective, profound information valuable to the study.

Included also in the process of interviews were government officials who act as policy implementers within the Ministry of Education, namely, the Minister of Education, the Chief Education officer, the Permanent Secretary and the Zone leader (a person who is responsible for a set of schools in a particular area). These sources presented information about the role of government and its participation in the development and wellbeing of IVIs. Although interviews from all four government officials were transcribed, only data from two of them answered questions relevant to the study; accordingly, those answers were the only ones analyzed.

3.4 Instruments of Research

The research made use of in-depth, open-ended questionnaires as the main instruments of research. There were five different sets of interview protocols, based on the group interviewed. Each question in the protocol was created by the researcher to answer the research questions. In addition to providing answers from the interview guide, parents were also asked to do a social mapping exercise to identify the organizations and groups in which their children participate. Appendices B, C, D, E and F display the questions asked to parents, teachers, government officials, opinion leaders and focus group respectively.
3.5 Data Collection Procedure

Interviews were conducted over a two-week period. The researcher contacted each participant via phone to get acquainted and to make arrangements to deliver the consent form (Appendix G) with the intention of setting up an interview time. For those who worked within the Ministry of Education, the meetings were conducted at their offices. As for the teachers, interviews were held in their respective classrooms. Some parents were interviewed at home, while others met at the Unit and one at her place of work. The focus group interview took place at the Industrial Workshop of and for the Blind, in the office of the Director. Interviews with opinion leaders took place in their respective offices except for one, whose interview was conducted via the Internet.

Before each interview, signed consent forms were obtained from the participants. They were briefed them about the nature of the study, and reminded of the confidentiality of the research as well as their voluntary participation. The interviewees were also advised that the interview would be tape-recorded. Each interview lasted approximately one to one-and-half hours.

3.6 Limitation of Study

The research conducted presented two main problems. Initially, the researcher had intended to conduct non-participant observation of the children with visual impairment at the mainstream schools. This would have allowed for the observance of these children various activities involving their interaction with their sighted peers, and also to some of the teaching methods of the teachers in the various classrooms.
Unfortunately, the time off of the researcher from the University, coincided with the time off from school for the children, as consequence, the researcher’s visit to Antigua took place when the students were having exams, after which they went on break. As a result, the researcher was unable to visit secondary schools where the children with visual impairment mix with sighted children, and the observation of the children functioning at the Unit and in mainstream classrooms was not significant enough to provide data for analysis.

Secondly, there were some questions that were deemed important before entering the field but later were considered unessential to the study. Therefore, there are some questions in the interview protocols that were not analyzed.

### 3.7 Interpretation of Data

The data for this case study were analyzed in a descriptive form, using tables and figures to represent the data. This process involved three stages. First, the interviews were all transcribed and saved in respective folders, on the computer, according to the group of interviewees. Then, each transcription was printed and gathered together in similar groups. Each question in the interview guide was examined, highlighted and assigned to the appropriate category. The four determinants adopted from social capital theory mentioned earlier, became the coding categories for the data, namely, Social Inclusion and Involvement, Access to Resources, Reciprocity and Cultural norms and values. Each category was identified with a specific color. The data were rearranged into groups based on the categories. A table was constructed with three headings: category, quotes and
findings, and explanation. The first column identified the four categories and the second column consisted of quotes and applications that supported the specific category. The final column provided explanations of the findings as it relates to the question(s) on the interview guide. For example, in analyzing the data under the category of access to resources, the findings reported exact quotes and from the respondents and of the nature of the answer, that is whether IVIs have or do not have access to resources. In providing an explanation, the answers were placed into context. This involved discussing the findings in relation to the questions from the interview guide and supported by various quotes from the participants. During this stage, frequency in responses were observed within each category, as a result the researcher was able to derive a common theme to explain how the key determinants of social capital affected IVIs in Antigua and Barbuda.

Information from the social mapping exercise was grouped together, two circles were constructed. One circle contained each child with an assigned number; arrows were drawn from each child to the second circle pinpointing the associations in which they were part of as indicated by their parents. A second figure was drawn with three circles, each representing the children’s level of involvement which were, highly, moderately or barely involved, in each of above identified association.

The final stage synthesized major issues raised in the above analysis to answer the three research questions: how involved are individuals with visual impairment in social networks of the community; what is the community’s perception regarding individuals with disability - specifically those with visual impairment; and what access do individuals with visual impairment have to social, physical and economic resources in the
community? The answers to the research questions were discussed with respect to the theoretical framework of social capital.

In summary, this research adapted a case study qualitative inquiry strategy to investigate the existence of social capital on the development of IVIs in Antigua and Barbuda. To achieve this end, the research accepted the four recognized key determinants of social capital, namely: social inclusion, access to resources, reciprocity, and cultural norms and values. To obtain an understanding to this phenomenon, every attempt was therefore made to include the opinions of those who are mostly responsible for the livelihood and development of IVIs. A total of 21 persons were interviewed, which consisted of teachers, parents, government officials, opinion leaders and representatives at the Workshop of the Blind. The data provided by the interviews were analyzed in a descriptive manner under the four categories. The information from the analysis was then used to answer the three research questions, with respect to the theoretical framework discussed in the previous chapter. The next chapter presents the findings and discussions of the research questions of the study.
CHAPTER 4 PRESENTATION OF FINDINGS AND DISCUSSION

4.1 Introduction

There are three major sections to this chapter: Section 1 discusses the characteristics and background of the participants in the study.

The four determinants used to explore the existence of social capital vis-à-vis IVIs as identified in Chapter 2 will form the major categorization for Section 2, namely,

- Social Inclusion and Involvement,
- Access to resources and other forms of Capital
- Reciprocity
- Cultural norms and values.

Emerging themes and issues are identified within each category.

Section 3 discusses the data with respect to the literature review and how they answer the three research questions of this study:

- How involved are individuals with visual impairment (IVIs) in social networks of the community?
- What is the community’s perception of individuals with disability - specifically those with visual impairment?
- What access do individuals with visual impairment (IVIs) have to the social, physical and economic resources of the community?
4.2 Background of Participants

A total of 21 persons were interviewed, which consisted of parents, teachers, government officials, members of the Workshop of and for the Blind, and opinion leaders. Of the six parents interviewed all were women, representing various sectors of the country’s workforce, with the exception of one mother - who was unemployed at the time of the interview. One parent had two IVIs attending the Unit. Three teachers and a teacher’s assistant were interviewed, including the Acting Head of the Unit for the Blind who has been at the Unit for 14 years, and has been trained in special education. The Teacher’s Assistant has been at the Unit for two-and-a-half years but has no formal training. Another teacher has been with Unit for about one year, and is the first student to have gone through the Unit. The third teacher to be interviewed had been in mainstream education, and for many years was responsible for preparing students for the common entrance exam, including students who attended the Unit. Her teaching experience began before the commencement of the Unit.

The list of government officials interviewed included, the Minister of Education, the Permanent Secretary in the said ministry, the Chief Education Officer, and the Planning Officer for Zone 4 (in which zone TN Kirnon School falls). Opinion leaders are individuals who have the potential to influence other people by giving them advice, and by defining or setting standards. All of the opinion leaders have specific expertise, and in someway can influence the development of IVIs in the community. Among the list of opinion leaders was an Ophthalmologist who also served as a Board member for the Workshop of and for the Blind, the Speaker of the House who was also the Director of
the Board of Education, a writer, feminist, active member of an advocacy group and editor of a leading magazine in Antigua and Barbuda. The list also included, the Director of the Workshop of and for the Blind; Director for the Caribbean Council for the Blind who is also visually impaired; Regional Development Officer for Disabled Peoples' International North America and the Caribbean who is physically impaired; and finally, a lecturer at the Antigua and Barbuda International Institute of Technology (ABIIT), who was also a writer, business owner and an ardent and executive member of Optimist International at the local and Caribbean level.

4.3 Presentation of Findings

4.3.1 Social Inclusion and Involvement

One of the main notions of social capital is inclusion and involvement. Social inclusion also captures the interaction and participation of IVIs in social networks and associations. To determine IVIs involvement in social networks, participants were asked to list the various associations, to the best of their knowledge, which existed in Antigua and Barbuda. Their responses on the number of social networks that exist are presented in Table 4.1 below. The associations are categorized in four groupings: Community Groups, Development organizations, Specific issues organizations, and Service organizations.
Table 4.1
Social (formal) networks in Antigua and Barbuda

<table>
<thead>
<tr>
<th>Community Groups</th>
<th>Developmental Organization</th>
<th>Specific issues Organizations</th>
<th>Service Organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Churches</td>
<td>Gilbert's Agriculture and Rural Development Center (GARDC)</td>
<td>Industrial Workshop of and for the Blind or Society of and for the Blind</td>
<td>Optimist</td>
</tr>
<tr>
<td>Youth groups</td>
<td>ABC Dyslexia Awareness</td>
<td>Lions</td>
<td></td>
</tr>
<tr>
<td>Choirs</td>
<td>Sickle Cell Council of Antigua &amp; Barbuda,</td>
<td>Rotary</td>
<td></td>
</tr>
<tr>
<td>Girl guides</td>
<td>Health, Hope and HIV (3H) Foundation</td>
<td>Leo Club</td>
<td></td>
</tr>
<tr>
<td>All Saints caring group</td>
<td>Professional Organization for Women in Antigua &amp; Barbuda (POWA)</td>
<td>Jaycees</td>
<td></td>
</tr>
<tr>
<td>Boy scouts</td>
<td>Association of Persons with disabilities</td>
<td>Salvation Army</td>
<td></td>
</tr>
<tr>
<td>Pathfinders</td>
<td>Center for the handicap</td>
<td>Para military groups</td>
<td></td>
</tr>
<tr>
<td>Sporting groups</td>
<td>Amazing Grace Foundation Schools</td>
<td>Sea-cadets</td>
<td></td>
</tr>
<tr>
<td>Cricket clubs</td>
<td>Good Sheppard home for girls (until 12 years)</td>
<td>Rotaract</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Sunshine home for girls (after 12 years of age)</td>
<td>Soroptimist</td>
<td></td>
</tr>
<tr>
<td></td>
<td>St. John’s ambulance brigade</td>
<td></td>
<td></td>
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<tr>
<td></td>
<td>Caribbean Council for the Blind</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Library</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Hands That Speak</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Source: From Data 2007
From Table 4.1, community groupings can be further divided such that there are two sporting groups, two social groups and five church groups. Participants appeared not to be very familiar with Developmental organizations - only GARDC was identified by one participant. Most respondents were able to identify organizations that cater for specific needs. These organizations were the largest among social networks identified by respondents, and consisted of seven groups on Antigua and Barbuda that address issues relating to some form of a disability; three of the groups are gender related, two can be placed into the diseased unit, and the other two - a library and a school, pertain to education. The fourth category of service clubs are mainly philanthropic organizations apart from Para military groups and Sea-cadets, which are part of the youth arm of the Antigua and Barbuda Defense Force.

In a social mapping exercise parents were given two sets of drawings and were asked to map the organizations in which their children were involved and to indicate the level of involvement. The results of this exercise are presented in Figures 4.1 and 4.2 below.
Mapping exercise of children’s involvement in social networks

Children with visual impairment

Associations/Institutions/Groups

Source: From Data 2007

Figure 4.1: Mapping exercise of children’s involvement in social networks
Mapping exercise of children’s level of involvement in social networks

Highly Involved

Child 7

Church and Music

Moderately Involved

Child 4

Church

Child 7

Swim team

Child 6

Church and summer camp

Barely Involved

Child 2

Church

Child 5

Church

Child 7

Singing in choir

Child 4

Music

Source: From Data 2007

Figure 4.2: Mapping exercise of children’s level of involvement in social networks
According to Figure 4.1, of the 18 associations given, children were only involved in a total of four groups. One parent indicated that her son was not involved in any association or group. All the other children were involved in church, two children were involved in playing the steel pan but only one child of the seven participated in all four organizations, which included church, musical group, choir and swim class. The level of involvement, as depicted by Figure 4.2, highlighted that for most of the children their levels were either moderately or barely, and as stated by the parents their involvement was mainly in the form of attending church. Only one parent indicated that her child was highly involved in church and music, where the child plays several musical instruments from time to time at church.

Other participants of the study acknowledged specific-issues organizations and some service clubs as having some involvement with IVIs. According to one teacher, “These associations have assisted the Unit for the Blind at some point, Amazing Grace foundation, Good Sheppard Homes for Girls, Sunshine Home for Girls, Rotary, Leo, Optimist, Lions.” When asked the type of involvement she responded, “they have parties for them especially during Christmas.” However, some of the service clubs have gone beyond just providing Christmas parties, for example, one opinion leader explained, “Lions and Rotary provide eye care assistance through equipment and glasses donation.” This was echoed by one of the teachers who stated “If we have a need, most of the organizations listed above will help, for example there have been donations of computer,
printer, depending on what the Unit asks (for)... Rotary donates food items at the start of each term as emergency food supply for the children... We find this very beneficial.”

Members of the focus group interview gave less significant rating of their level of involvement in social networks. They were only aware of organizations that directly provide for people with disabilities, particularly IVIs. As one member within the group explained:

*There is always access to church. There are not many institutions that particularly cater for or to visually impaired persons for instance, we have a library but it is not equipped with computers for blind or visually impaired persons or special large type books or Braille for visually impaired persons* (focus group member).

One pragmatic participant summed up the lack of inclusion of IVIs in social networks,

*Realistically we have access to almost every institution that there is, but there are not really a lot of public relations from the CCB or the government to enlighten the public. The organizations themselves may not be specified for people with disabilities but they (do) not ostracized people with disabilities either, they need someone who understands people with disabilities, who can tell them what they need to do within their institutions to make it more friendly or compatible with people with disabilities* (focus group member).

Another IVI who was not a part of the focus group interview believed that Antigua and Barbuda accommodate only the sighted, stated matter-of-factly:
(There is a) lack of awareness, IVIs don’t really know that these organizations are out there and what they are willing to do. Most things are printed and one can read what the clubs are doing, and because we are not able to read prints, we tend not be aware of certain things. Information technology is there but it is expensive and many (of us) do not have access to it (IVI participant).

In examining the aspect of social inclusion, the common theme that emerges is that there is a limited form of social inclusion, in that the participation of associations flows in one direction. Service clubs or other formal institutions interact with IVIs only to the extent of providing equipment, of meeting requests, or providing certain needs of these individuals. Moreover, the frequency of social contact is minimal, in that only once a year - during the Christmas seasons is a party hosted.

All the participants agreed that IVIs should be more involved in associations. Most of the respondents stated that increased level of involvement would increase IVIs socialization and their communication skills; furthermore it would improve their independence. It was also agreed that involvement in organizations also gives them the opportunity to meet people, to discuss issues of IVIs resulting in more resources being made available to IVIs. According to one participant, being in organizations,

...will ensure that your voice is heard, because we don’t really have that, so when you ask what access we have, to tell you what we don’t have (any) is easy. You see there is no access to it (organization) because there is no link (focus group member).
One member of the focus group interview indicated that when someone is in an organization, it also helps that individual’s mobility skills, “going out and learning how to navigate different buildings and different settings, because you will be constantly on the move, visiting new locations.”

In answer to the question of how can IVIs be included in the community of Antigua and Barbuda, respondents gave their opinions on the need for changes in the structure of the country as follows:

- “Increased their recreational activities, it is not only making these facilities user friendly but also provide the necessary security.”
- “Better bus system, better roads, sidewalks, rails to help them walk”
- “I don’t think that there should be a school only for visually impaired, there should be a whole unit by itself …not just teach them bookwork, but how to be better in the community, dress themselves, know how talk to people.”
- “Provide resources to them … so that they could be independent, successful and once people who are not blind, see what we can do, then they will say that he walks just like me but he has a cane or they know that what you do, although you do it differently from them, you do it successfully.”
- “Better communication between the disabled and the non-disabled.”

The attitudes of Antiguans also needed to be altered:

- “Change of attitude, need more education.”
- “The people in the community need to learn about the different types of blindness, what can cause blindness, they should have documentaries on blindness.”
“Have more activities for them, when they have stuff for regular people they should make us feel as though we are important and that they are not different from us.”

“People need to be more friendly and accepting. People don’t understand.”

“People should have a place for them and let them know that they are invited. Let them know that it is ok to be part of them (or organization). Show them appreciation. Let them know that they can be part of, that you need them, that you need to learn from them, and that they have something worth knowing.”

“Give a person a chance before you can say, because they are blind they can’t do this. You have to give them a chance to fail, first … they won’t fail because a blind person is not going to do something that they don’t believe that they are going to succeed. Give them the opportunity.”

“Stop the stigma and discrimination and look at them as persons who although they have a disability they still have their human rights which will be respected.”

“Start with service groups such as Girl Guides, Pathfinders, because they are highly structured and I think that people who are differently abled need structure.”

“Get them involved in music and sculpture; start at the primary school. I am sure that that people would be willing to volunteer their time.”

There were also areas in which government initiatives can enhance the development and inclusion of IVIs:

“The White Paper on Disability for Antigua and Barbuda that was presented to the Constitution Review Commission … give clear guidelines on the things that
need to be implemented to secure the full inclusion of IVIs and persons with disabilities in general in the development processes of Antigua and Barbuda.”

- “I think some of the parents need counseling.”
- “I think if the government put more interest in the education system to meet their needs with certain things they can reach their goals.”
- “Significant increase in opportunities for home and community-based training in (the area of) independent living skills to include: Orientation and Mobility, Social & Daily Living Skills, and pre vocational simulation.”
- “Making them more visible in the community, I truly believe that the people who have been employed to assist are limiting the level of assistance they are giving.”
- “Go on the radio programs. We have a state owned TV station, they can do documentaries.”
- “Retiring teachers still have gifts. I would try to match young people with retired teachers who have more time and more patience and who have seen more and even if they are not teaching academics, as in preparing them for exams, there are lots of things for them to learn. These are confidence building measures.”
- “Someone to prepare them for the work field, promoting more sporting activities for them, instead of making straws and mops alone.”

4.3.2 Access to Other Forms of Capital

There is a diminished access to resources available to IVIs. This is the general assessment of the responses given by all to their opinion of whether IVIs had easy access
to the various forms of capital. Table 4.2 shows the four types of capital that are embedded in social capital and the various responses given by the participants. These consist of physical capital including: buildings, roads, transportation and land; economic capital that comprises financial resources such as income, money or loans. Human capital refers to the knowledge and skills acquired by an individual through education. It also entails the well-being of individuals with respect to health and civic resources. Cultural capital captures forms of expression that are socially valued and distinguishes one group from another. Parks and playgrounds are included as part of cultural capital.

Table 4.2: Respondents’ reaction to IVIs access to other forms of capital

<table>
<thead>
<tr>
<th>Other forms of Capital</th>
<th>Responses</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Physical Capital</strong></td>
<td></td>
</tr>
<tr>
<td>o Buildings</td>
<td>No. Some buildings have rails and some don’t. They do not cater for people with canes and wheel chair. Older buildings no and new ones yes.</td>
</tr>
<tr>
<td>o Transportation</td>
<td>No. Depends on where you live. Unless it’s the family car or government vehicle they don’t have access. The buses are there but I can’t say about easy access. Buses run in most communities now.</td>
</tr>
<tr>
<td>o Land</td>
<td>No. I don’t know. If you have the means. Yes.</td>
</tr>
</tbody>
</table>
Table 4.2 (continued).

<table>
<thead>
<tr>
<th>Other forms of Capital</th>
<th>Responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Economic Capital</td>
<td></td>
</tr>
<tr>
<td>- Employment</td>
<td>No. Overall I think that they give them a hard time.</td>
</tr>
<tr>
<td>- Loans</td>
<td>No. I don’t think so.</td>
</tr>
<tr>
<td>Human Capital</td>
<td></td>
</tr>
<tr>
<td>- Education</td>
<td>Society of and for the Blind. Unit for the Blind. Board of Education provides all the resources at the school. Yes and No. Integration into the mainstream.</td>
</tr>
<tr>
<td>- Health</td>
<td>IVIs have the same health care at the hospital and clinics as everyone else; however there is no eye care service at either institution. Cuban Eye Care Program. Medical Benefits Scheme. Lions ongoing eye care commitment. Eye health services are available, but might not be affordable. Dr. Martin at Amazing Grace Foundation.</td>
</tr>
<tr>
<td>- Civic</td>
<td>No. None. Can’t think of anything special. Not aware. They have access to the legal aid like everyone else, apart from that I don’t know of anything else. The Constitution of Antigua and Barbuda guarantees every human the right to participate in civic activities. Limited. I know there is a child abuse center that we can call.</td>
</tr>
</tbody>
</table>
Table 4.2 (continued).

<table>
<thead>
<tr>
<th>Other forms of Capital</th>
<th>Responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cultural</td>
<td></td>
</tr>
<tr>
<td>o Parks and Playgrounds</td>
<td>No. Do we have them? We don’t have park and playgrounds.</td>
</tr>
<tr>
<td></td>
<td>Whatever we have, I guess it is easy access. Everyone has easy access - that may be the problem. There are no protected areas, so access might be there but I don’t know about the safety issue.</td>
</tr>
<tr>
<td>o Other</td>
<td>No special allowance is made. Most of our cultural stuff are things that you can see. Some of the cultural activities that IVIs could utilize include: writing, steel pan, arts, music, swimming, and Carnival, but the participation in these is meager or non-existent. No policy exists to ensure that IVIs or other individuals with limitations participate in cultural activities. Barriers to shared cultural experiences. Culture is not part of the school’s curriculum. We display our tools, baskets, rag mats and mops.</td>
</tr>
</tbody>
</table>

Source: from data 2007

Table 4.2 identifies a view shared by representatives of both the sighted and the non-sighted society, that IVIs were not privileged to other forms of capital. The various types of physical structures to which IVIs have access, received very low ratings by the majority of the interviewees. The respondents reported that most IVIs either used human
guide or the white cane to get around in the various communities. Members of the focus
group advanced the argument that almost all business places have rare steps and awkward
inclines. The walkways were very hazardous, sometimes with objects strewn across
them. One IVI said quite seriously, “I see fully sighted able-body persons rip off their
heels trying to get into a building. Imagine you who could see good struggling and I am
visually impaired have to navigate the same sidewalks?” Another echoed the same
sentiments and added, “they wonder why we walk in the streets, but we have to walk in
the street. A car would be easier for me to see and get out of the road, than if you walk
on the sidewalk and fall into a gutter.”

However, as the economy of Antigua and Barbuda continues to expand and
authorities become more aware of the population’s composition, trends in construction
are changing. Other respondents believe that the newer buildings are more accessible to
people with disabilities than the older ones. One opinion leader points out that the new
government complex, which includes the nation’s parliament, was constructed with
accessibility for people with disability. Furthermore, “there are parking spaces now
available only for people with disabilities at several shopping areas and business places.
Ten to fifteen years ago, this provision was nonexistence.”

Opinion leaders differed on the matter of IVIs having easy access to
transportation. Depending on who gave the answer either have or do not have easy access
to transportation. Some were of the view that if a family member does not own a car, then
there is no access to transportation. Others simply state, “in Antigua everybody drives
and buses go closer to your homes now, so I believe fairly, yes (there is easy access).” A
government provided bus daily transports the adults at the Industrial Workshop for the Blind between home and the workshop. In the case of the children at the Unit, only those who are totally blind have the advantage of an assigned bus to transport them to and from school everyday. Everyone else is subjected to the same means of transportation as sighted students in Antigua. This means that either the parents make arrangements to take the child to school, or making use of the school bus system in which students are picked up at various locations in the community and taken to their respective schools.

The general bus system is privately operated, and as long as persons are aware of location of the bus stops, then hopefully there should be no problem. Yet, parents are skeptical about allowing their children to ride on buses in Antigua. One parent categorically said, “I (may) have easy access to public transportation but I will not allow her to go on the bus on her own... nobody is going to take advantage of her.”

In reality, there were several viewpoints regarding access to transportation, yet no one is wrong, as a parent has said, “when it comes to determining easy access to transportation, it depends on where you live.”

In other aspects of physical capitals, the responsibility for IVIs access to land, houses and other essentials rests with family members. One participant in response to IVIs owing land stated that, “I don’t know anyone in that position. I know a lady who is handicap and her sister does everything for her… help her with land and everything.” An interesting discovery was that those in the focus group interview, who had become blind after reaching adulthood, had obtained house and land before losing their sights, but those who were born visually impaired did not have either. One man testified, “I lost my sight
at age 30 and had my house and land. I had my children looking after me, I did not want to come here but I got encouragement to come here.”

There were not many deviations in the answers given to the question of access to financial resources. Most participants did not know anyone who was visual impaired and was working in mainstream jobs. A few mentioned Lisa Hixon, who works at the Unit of the Blind and Arvel Grant who is employed at the Caribbean Council for the Blind, both of who have disabilities. Of the interviewees, no one was able to identify for certain a person who is visually impaired and worked in a mainstream job.

A number of respondents made a direct link to land, loans and employment. They asserted that access to land and loans rested primarily on employment. One respondent astutely summarized, “No to all (land, loans and employment) ... if you don’t have a job you can’t get loan and land, and if you have (a) disability you can’t really get a job.” Some of the interviewees were asked why they thought that IVIs were not engaged in mainstream employment. One answered, “maybe they are looking at (the fact that) because they cannot see they cannot do the work efficiently.” Another stated, “these business places don’t meet the needs for visually impaired or blind persons.” Another asserted that, “businesses are reluctant to employ IVIs in spite of their qualifications because they do not want to invest in a computer specially equipped the IVI.” Another added that no business wanted “to be responsible for you bumping your head and then try to sue.”

The Industrial Workshop of and for the Blind provided an avenue for IVIs to have access to financial resources. One member reported on the significant of the workshop:
The industrial workshop is not here to cater for the entire population of blind and visually impaired persons in Antigua and Barbuda. The Industrial Workshop is more an institution that was developed by CCB as a way for the blind and visually impaired to have some means of employment or some sort of income (focus group participant).

In summary, access to loan and land depends on employment and when it comes to employment, IVIs are not employed in mainstream occupations, making it difficult for them to obtain land and loans. One opinion leader put it as, “I am seeing a gap, a missing set of people who are the ones who would be employed and thus be the ones purchasing lands.”

In view of the foregoing, the members of the focus group interviewed (younger ones) were asked if any of them had tried to apply for mainstream jobs. One said yes but that he was discriminated against, he recounted his experience,

*the guy said to me, take off those glasses I want to see those eyes, I said that I can’t take them off because they are for my visual impairment. The next he said was that if you (are) blind how you going to see to work. I went to several places and once they found out that I was visually impaired they were not prepared to give me the night or day* (member of focus group).

IVIs have access to the same health care service at the hospital and clinics as the general public. These are provided free of charge by the government. However, there is no eye care service at either institution. There is Medical Benefits Scheme which provides free medication for certain ailments of which Diabetes and Glaucoma (which
can cause blindness) are included. In discussing eye care treatment on Antigua and Barbuda, a few of the opinion leaders mentioned the Cuban Eye Care Program under which Antiguans and Barbudans obtain free eye surgery in Cuba, in accordance with an agreement between the Cuban and the Antiguan-Barbuda Government. These procedures include treatments for cataract, pterygium and strabismus (cross eyes). The Cuban government pays for airfare, surgery, and accommodation for patients and chaperon.

Other interviewees claimed that there are a few local doctors who have given free eye care service to people in need, namely Dr. Walwyn, Dr. Martin at the Amazing Grace foundation and Doctors and Dentists from the Seventh Day Seventh Church. Lions and Rotary clubs were the only two philanthropic organizations that were identified as having assisted IVIs with the provision of eye care. One person noted that the Caribbean Council for the Blind (CCB) provides school screening and lab for fabrication.

Although general health care is provided publicly, one opinion leader underscored that “individuals with other varying limitations are not that adequately catered for in the public service.” Another added, “eye health services is available, but might not be affordable.” Everyone in the focus group interview shared the opinion that access to all resources for IVIs was non-existence. From their perspectives, the resources were there, but there was nothing specific to IVIs. For example one member of the group categorically stated, “the health care is dependent on the amount of money that you have in your pockets.”

From the participants’ perspective, it was unequivocal, that the general consensus was that there was no civic opportunity available for IVIs. The main reason for this
belief is that there is no policy specific to people with disabilities, thus the public is unsure and unaware of government’s obligation and responsibility to persons with disabilities in general, and IVIs in particular.

There was no uncertainty about provision of education. Everyone knew about the Unit for the Blind and the Industrial Workshop of and for the Blind. Yet among the interviewees there were serious concerns about the quality of education that was being afforded to IVIs. One opinion leader was of the view that due to a lack of educational and economical opportunities in Antigua after attending secondary school, students generally go overseas to further their education, but they do not usually return. This opinion leader raised the point that “you can also understand why they might not come back because the opportunities might be greater where they might be studying.” This trend among young people in general gives rise to the belief that IVIs are also among the group of young people who seek better opportunities abroad. Certain other factors, including the extreme challenges IVIs face in obtaining a basic education within a system and at facilities that were designed for sighted individuals, compounded by the harsh discriminations they face in trying to land jobs, and influenced by the knowledge that fellow IVIs Lisa Hixon and Avel Grant were able to find meaningful work only after their studies abroad, it is fair to assume that young adult IVIs have also migrated due the paucity of educational and economic opportunities in Antigua and Barbuda. This view is shared by another opinion leader who felt that, “IVIs, as opposed to other individuals with limitations have access to education albeit somewhat limited, but again, the cultural stigma does not allow enough IVIs to take advantage of such a basic opportunity.”
Regarding education for adults with visual impairment the Director of the Industrial Workshop of and for the Blind explained that the Caribbean Council for the blind introduced a program where they wanted persons who are blind and visually impaired to have access to the computers. They provided a system JAWS - Job Access With Speech and they provided a volunteer from Canada but there was complication and the program crashed. The computers malfunctioned and nothing has happened since then.” But she added that there was Braille. Similarly, the Caribbean Council for the Blind provided laptops to students who are part of the Unit. According to one teacher, all the students who are secondary school owned laptops equipped with the JAWS program. Children at the primary school level learned JAWS from the computer system at the Unit. Lisa Hixon was responsible for teaching all the students the JAWS program.

Opinion leaders were asked if the various resources, particular education, in their opinion, were adequate to empower IVIs to become self-sufficient and independent. One gave her opinion that, “in terms of education, there is only the Unit for the Blind that assists children with visual impairment, after that there is nothing for the young adults. You need that transition and there is none. You have to go away (for it).” Another opinion leader in the teaching profession gave the following explanation why she thinks that IVIs are not empowered:

*I think if the school system was generally teaching children to think, and visually impaired children are part of that classroom, then they will learn to think as well. Generally speaking, I don’t think that they teach the children to think. I think our school system is based on passing exams and as someone who teaches as a
tertiary level I see children coming to me who can’t think so I run from teaching them, I want to teach them after they have been in the world a few years...So if we are falling short with our children in general then visually impaired children are part of that big set and so we are going to fail them as well (one opinion leader).

Another opinion leader held back no punches as she stated,

*I don’t think that IVIs are empowered. If they were empowered, they would be more visible...I know about the school because I work here at the Board of Education and everybody knows about the industrial workshop which is like ancient history* (one opinion leader).

Answers to cultural capital questions were enlightening. Respondents listed the cultural activities in which IVIs could participate but noted that their involvement is almost non-existent. These activities are itemized in Table 4.2, but most of the opinion leaders thought it peculiar that there was not more involvement of IVIs in cultural functions such as the making of Carnival costumes. As one rationalized,

*I am not sure that visually impaired people are involved in Carnival, which is strange because just as you have people making baskets, the creation of our costumed would require the same sort of skill. But I am not aware of anybody utilizing their skills for that* (one opinion leader).

This may because of the lack of understanding and appreciation of what IVIs are capable of doing. As expressed by another opinion leader, “barriers to shared cultural experiences would normally include negative attitudes towards IVIs, or fear of inclusion by IVIs.” But there may be structural barriers as well, as another opinion leader pointed out that,
“no special allowance is made.” Moreover, another opinion leader blamed the State by stating that, “No policy exists to ensure that IVIs or other individuals with limitations participate in cultural activities.”

A statement by one of the teachers suggests that IVIs, given the opportunity, capable of participating in cultural performances. She declared that “culture is not part of the school’s curriculum but through the efforts of a former teacher, Mrs. Palmer, two children who are blind Malcolm and Piesha learned how to play the steel pan.” Only one student from the Unit was very involved in playing several musical instruments, but this was at the expense of the parents. Some of the other parents expressed the desire to cater to this area of their children’s need, but were limited either financially or by time constraints. Simply put by one parent, “opportunities are not created to involve IVIs in general cultural activities.”

Finally, most people seemed amused by the question of ease of access to parks and playgrounds. Across the board, everyone said no and some jokingly asked, “do we have?” or “where are they?”

To gain insights about government’s modus operandi as it pertains to the availability of resources to IVIs, several key Government Officials within the Ministry of Education were asked what policy documents were available to promote the wellbeing of IVIs in Antigua and Barbuda. One official answered:

No we don’t have a policy document. Maybe that is one of the shortcomings but that is one of the things that will develop as the government evolves... maybe that is something that we should have had in place but you would appreciate that it is
only recently that a number of these issues are coming to the fore. Now that you have organizations being formed, standing in the vanguard of these respective groups and some of them are pushing for policy to be formulated and that is something that the government is embracing. And once those policy objectives are put forward to the government they will be ratified. The government is of the view that we cannot do these things on our own, decisions in education are actually informed by our various stakeholders and driven to some extent by these stakeholders who understand what is happening on the ground. Once we recognize that we have to address these particular matters we deal with them as they come to us. (Nonetheless) the government has always being cognizant that these people have a lot offer (Government Official).

However, according to one opinion leader,


Thus, there is hope that a policy document may soon be ratified in Antigua and Barbuda.

Although there was no formal policy in place, government officials were pleased to announce ways in which they were assisting IVIs. One official said:
We have a program with a local ophthalmologist whereby the government provides financial assistance to those children who may need glasses to assist them in the class room. I think that get up to about $200 which goes towards the purchase of the glasses ... The Unit for the Blind is run by the government, the teachers are paid by the government, everything there is handled by the government. The government even provides transport for these children if needed, and also the government invests in the training of all of the teachers ... It is in the general budget of education (Government Official).

It is worthy noting that of the four teachers at the Unit, only the Head has received formal training for the work they are required to perform. The same government official continued:

There is a stipend which goes to the School for the Blind (note this is the same as Workshop of and for the Blind), which falls under the Ministry of Education. Also, the government has made significant contributions from time to time in terms of buying equipment to assist these people at the School for the Blind. I believe that that facility does not really cater for all of the people in the country for visual impairment (Government Official).

Another government official contended that:

Apart from the school, the government from time to time assists these people through private groups to have fundraisers etc., who may make requests to the Cabinet via the Ministry of Education or Health based on the type of request and those things we support through cabinet. (Also) We are constructing our new
library which will come on stream next year and so we have had to make
adjustments in terms of the planning for people who are physically challenged
and for those who are visually impaired (Government Official).

The government official said in conclusion:

My government is of the view that all of its citizens are equal and we should do as
much as it is possible within the limited financial constraints of the country to
make educational opportunities and health care services and other resources
available to everyone in Antigua and Barbuda, but at the same time we recognize
that there are certain challenges associated with individuals, ... particularly in
the area of visual impairment. We (also) recognize that this is not a large
population that we are dealing with and we have to get people who are
specialized to be able to address these specific needs for these people. Like any
other person within the society, you know that health care through the medical
benefit provides for free treatment after a particular age without regards to your
status, whether physically challenged or otherwise (Government Official).

An interesting observation was that none of the government officials mentioned the big
initiative of the Cuban Eye Care program.
4.3.3 Reciprocity

The respondents were asked, if they thought IVIs could give back to the community, and how?

Everyone felt that IVIs could give back to the community. Some of the responses are:

- “By participating in family, community and national activities, religious activities, PTAs, and participate in elections and other activities.”
- “To become part of the community and contribute financially, by being employed and paying taxes or lending a voice to what takes place in our country, politically, socially, and also to provide for yourself so we don’t have to depend on charitable associations to always provide for us.”
- “The biggest gift that they can give to each other is to function in mainstream society, and let people see, hey look at me I am functioning.”
- “Teach the community a sense of responsibility for one's fellow man and raise the awareness of difficulties that IVIs and persons with disabilities face beyond the normal.”

The teachers were of the conviction that the visually impaired children they are assisting will utilize the knowledge that they are receiving to make significant contributions later on in life. According to one teacher, “We are trying to prepare them now, intellectually to go out there and not to be at home, and show the world that I have been to school, and I am capable of doing something.” Others felt that these children should be a part of the community as any able person. One teacher asserted that “these children should be able to own their own businesses.”
Not many parents gave insights to the reciprocity dimension of social capital. Those who offered any explanation said that their children can give back either, by contributing financially to the Unit, talking to the children about their experiences and how they have grown from the support that they got from the unit to further their education to be a better person. They also thought that IVIs can educate the community about their capabilities. Another parent said that IVIs can teach music to children, whether they are visually impaired or not.

In the final analysis the participants’ responses make the case that IVIs should be able to contribute as regular citizens, but in actuality they are not. This is evident from earlier citations on the lack or low level of involvement on the part of IVIs in the community, and their absence from mainstream employment. The researcher thus perceives that there exists a sense of illusionary reciprocity between IVIs and the community. The lack of genuine reciprocity begs the question, why aren’t IVIs giving back to the community? Although interviewees were not directly asked this question, answers can be deduced from their responses to cultural norms and values, and as such is addressed below.

4.3.4 Cultural Norms and Values

Participants were asked for their opinions regarding the community’s perception of people with disabilities, and whether or not it was different in the case of IVIs. There is a reality of rejection emerging as a common theme for the community’s perception. Although the answers to this question varied based on the classification of the
respondents, there emerged a general conviction that, overall the Antigua and Barbuda society was not sociable towards people with disabilities. Of all the respondents, parents of IVIs were the most hostile and insular in their expressions. But they all stated that the attitude of Antiguans towards people with general disabilities was no different to those who are visually impaired. Here are some of their responses:

- “To me they are not helpful, they are not courteous.”
- “I find and when they see people with a disability they stare in a particular way that I don’t like … if you see a problem and you want to know about the problem you ask what is the situation.”
- “They treat them like they are not able to do anything for themselves.”
- “If we go out people will look at him as though they never see someone who is blind before.”
- “They don’t mind their business, they stare too much.”
- “They look on them like they have mental problems. They mock them and I will have to say something to them.”

Responses of the participants of the focus group interview though lacking the aggression of the parents, likewise an attitude akin to disdain coming from the community. Some attested that:

- “The attitude you will get from the people who don’t know you, and see you walking on the street is a negative attitude -kind-a if you are blind, why don’t you stay home kind of attitude.”
- “I think that they are fed up of blind people.”
• “I don’t think that they are fed up; Antiguans are ignorant … They don’t understand when I tell them that my dark shades allow me to see… They just don’t know.”

But one elderly man, who had lost his sight as an adult, had a very different experience, which gladly shared:

*Everybody doesn’t get the same treatment. I get through well with everyone; I go to church every Sunday. I get along with everyone. Sometimes people come up to me and say let me help you down the sidewalk or (say) you have a big step (focus group member).*

Most of the other participants were of the view that Antiguans behavior towards people with disabilities was one of a mixed nature. In addition, one commented, “some of us are not too good, but the majority of us are good,” while another, “you find those who are not considerate at all,” and a third noted, “I find that the people in the community are sympathetic towards people with disability.”

The opinion leaders supported both views and provided answers to this questions, as well as rationale for attitude of Antiguans’ toward people with disabilities. Some opinion leaders used expressions like, “not accepting, still marginalized, insensitive, dismissive, and on one hand we are very good, on the other hand we are bad, but not maliciously so.”

Most of the opinion leaders acknowledged that although some people may describe Antiguans’ behavior as one of hostility, rudeness or even as cruel - this is the
culture of the people and there is no harm intended. As one opinion leader explained and shared a personal encounter of hers,

*Antigua is a very blunt society and to understand that the interaction with disability you have to understand the way we think and the way we deal with each other and I remember seeing an elderly gentleman who obviously visually impaired, I think he was trying to make his way about St. John’s and seem to have become turned around, not sure where he was going, and he wondered into the street. A tourist came along and was trying to help him and she herself didn’t really know where things are I suppose, and these two local ladies came along and what might have been in a gruff way, they grabbed him and taking him along. In their eyes they are helping him and if he is an Antiguan man, he probably is accustomed to their way (one opinion leader).*

Along the same lines, another opinion leader and a teacher asserted that it is not rude individuals stare at anything or anyone that they find out of the ordinary, this is probably part of the human characteristics. Quoting the teacher, “in any society, if you see something strange you are going to look for a while, and then it becomes a norm if you see it all the time. I think that is how Antiguans are, they will look, they will stare and then once they are accustomed to it then they will take it for the norm.” The opinion leader shared her view by stating, “I don’t think that curiosity is rude at all. If I see something that I have never seen before, chances are that I would look at it longer than something I see all the time. I don’t think that IVIs are treated any differently to anyone else with other disabilities … people want to know… I don’t think that it is a cruel thing.”
In further examining the answers and notions expressed in the previous paragraph, the concept of visibility (or lack thereof) of IVIs creating part of the cultural norm in the country was addressed. According to one opinion leader, “exposure is very important.” Another opinion leader added, “the more an individual appears and functions ‘normally’ (within the community) the more acceptable they tend to be.” Essentially, the reality of rejection towards IVIs could be mollified if the level of discernment about disabilities and particularly IVIs is increased within the population. One opinion leader frankly stated, “There is a lack of awareness, so perhaps with more sensitivity or the society being made aware, I think that would also come simply by some of these people being more involved in the society.” Interestingly, another opinion leader asked in the final analysis,

*Who should be encouraged in the involvement (process) and who should be facilitating it. Should it just be the organizations that are on a voluntary basis or should there be some person who is employed by the government? Should those people be the ones saying how can we find other ways to bring these people into mainstream society?* (one opinion leader)

There were two individuals among the respondents who thought that IVIs were treated differently when compared to other forms of disabilities. Interestingly enough, both individuals have different forms of disabilities, one is visually impaired and the other is physically impaired. The latter claimed that there is a,

*Fear borne out of a lack of understanding and a failure to recognize the individual's humanity and potential that progresses to sympathy that inexplicably*
ends up in scorn that then causes discrimination, but it is to a lesser extent for IVIs (one opinion leader).

On the other hand, the individual with visual impairment declared, “I find though that people have a difficulty accepting blindness, (because) we tend to function basically on sight.”

In conclusion, the emerging themes of illusionary reciprocity and the reality of rejection seemed to be grounded in the lack of visibility of IVIs in the community, and lack of awareness of the Antiguan public of the capabilities of IVIs. According to the IVIs and director of the Workshop of and for the Blind, once people see the work that they do at the workshop, they are astonished and impressed and “they treat you different in a good way.” Another in the group interview added, “…they are surprised and amazed and they want to ask you questions to fill up their curiosity and (they) forget that you are visually impaired and that you have a problem.” The two brothers shared an account of the reactions of people who are familiar with their work, “The support from them is great. It is even greater when they know we are visually impaired and yet they see us running around on the computer, and when they are finished they hear their voices sounding so lovely, they are amazed by that and they leave there go out and tell their friends what we can do and sometimes they even add ‘and dem blind you know!’”
4.4 Discussion of Research Questions

The research questions are answered in this section, with the theoretical framework as the basis for discussion in this section.

4.4.1 Research Question One

How involved are individuals with visual impairment in social networks of the community?

Social networks are foundations of social capital, which create the avenues for individuals to access resources that will result in personal and mutual benefits. Social capital is founded on the premise that “my connections can help me.” This study has determined that IVIs in Antigua and Barbuda are not significantly involved in social organizations in the community that are not specifically disability-oriented. The study found that there were no IVIs who are involved in a service club of any kind. The study notes however, that a majority of the IVIs attended church. This discovery is a reflection of Putman’s findings in his research as discussed in Chapter 2, whereby church has remained a prominent institution for creating and promoting social capital.

Although IVIs attended church, they do not participate except on a congregational level, in the activities of the church. The only exception to this limited involvement is an elderly man at the Workshop and a student as the Unit both of whom were actively involved in various church activities. An effective way of building social capital is frequency in church attendance and by participating in various activities, thus making
oneself easily accessible to people who may reach out to IVIs for inclusion, and to offer assistance. Social capital also argues that social interactions and connectedness help individuals to come out of their shells, to which IVIs are no exception. Unfortunately, IVIs in Antigua and Barbuda though desirous of being involved, are not privy to benefits of these sorts of interactions and connectedness, and lack opportunities for participation in activities; therefore, many of them remain sheltered and withdrawn from the society even though belonging to church congregations.

Putman also stresses that participation in associations help build trust, a norm of reciprocity, and create strong ties. This is definitely a problem for IVIs in Antigua and Barbuda, since they are missing the first step of making the meaningful connections that initially needed to develop trust, ties and reciprocity.

This finding of IVIs’ isolation is not different from other studies. Various researchers have found that people with disabilities are socially disconnected (Kitchen, 1998; Kerr and McIntosh, 2000; Chenoweth and Stehlik, 2003). Moreover, the data collected in this research found that IVIs have limited social inclusion that tends to flow in one direction only. Assistance to IVIs both from government and civil society organizations was often based on requests made by families or teachers, or someone with a vested interest in IVIs. Social clubs consider it their philanthropic responsibility to have an annual Christmas party, which in the teachings of social capital theory make for weak social ties. Further, the lack of any policy document on disability, and the absence of a proper system to identify IVIs, reinforces the point that IVIs are marginalized in the country.
4.4.2 Research Question Two

What is the community’s perception regarding individuals with disability - specifically IVIs?

Social Capital promotes both shared beliefs and shared norms. As noted earlier, IVIs challenge the norm of societal customary standards. The work of Chenoweth and Stehlik (2003) found that there was a rejection of people with disabilities, but they found that these people were physically attacked, intimidated and cast aside. This research also found that there was a reality of rejection of people with disabilities, and by extension IVIs, but there were no indication of violence. In this study Antiguans are portrayed as being insensitive, uncaring, non-accepting, uncouth and intolerant to people who do not fit into their realms of “normality.” This lack of appreciation and respect for IVIs has serious repercussions for IVIs in their ability to create social capital, especially since social capital encourages cultural norms and values. Furthermore, IVIs will not be able to reap the benefits associated with building social capital without a shared understanding of the common terms as it pertains to societal beliefs system. Essentially, the lack of general helpfulness and fairness by community members highlight that there is a thin level of trust between the sighted and non-sighted groups in the community.

Further implications of Antiguan’s attitude towards IVIs pertain to the idea of reciprocity. The way in which IVIs are perceived can be even more important to their capacity to contribute to the development of social capital than do their disability. This study drew attention to a “circular argument.” On one hand most of the participants were of the view that IVIs are not demonstrating their ability to be on par with the rest of the
population. On the other hand, IVIs inferred that the community was not allowing them to contribute because of society’s general stigmatization and discrimination against IVIs, which act as a negative force or lack of incentive for them to give back to the community. Ultimately, this situation begs the question of which comes first? More importantly, how can IVIs, who have started out with a handicap, give back to the community, if they are not given the opportunity to do so, both cognitively and structurally?

Consequently, this study found that there was an illusionary contribution of IVIs, which is underscored by the false hope that IVIs can reciprocate, but in reality they are not empowered to do so, caused by the community’s suffocation. This discovery differs from that of Chenoweth and Stehlik (2003) whose study found that people with disabilities were making significant contributions to the society but their contributions were oblivious by the wider community.

### 4.4.3 Research Question Three

What access do individuals with visual impairment have to social, physical and economic resources in the community?

The three major promoters of social capital theory presented in Chapter 2 assert that social capital is a structure of networks that provide a resource for its members. It also creates other forms of capital namely, human, cultural, physical and economic capital. For the purposes of this study the four forms of capital were further divided to provide illustrations of each capital. Consequently, the study discovered that IVIs have restricted access to resources and opportunities. Access to some capitals was more
diminished than others. In some cases there were little, but IVIs have no access to resources such as, land, employment, loans, civic and cultural activities. Transportation and education were accessible to IVIs and free health care service at clinics and the hospital was the same for all nationals of the country, but no assistance to eye care treatment. Similarly, in their study, Chenoweth and Stehlik (2003) found that people with disabilities have few resources to invest in social capital building.

In order for social capital to thrive, people must have sufficient economic and human resources, which will help them participate successfully in social networks. Thus, the possession of knowledge and competence is not sufficient to achieve optimal personal goals, and as such this study argues that IVIs must be empowered holistically that they may have the ability to harness social relationships and other forms of capital, which will ultimately lead to their full independence and full inclusion.
CHAPTER 5 SUMMAR Y, CONCLUSION AND SUGGESTIONS

5.1 Summary

This research paper sought to examine the role of social capital in the empowerment of IVIs in Antigua and Barbuda. The twin island state of Antigua and Barbuda is located in the north-eastern section of the Caribbean with a population of about 80,000 people. As a former British colony the country has adopted many British laws, policies and practices, which include the educational system. Within this structure children attend eight years of primary school, five years high school and then two years pre-college or Advance level called A’ levels. Although there are no full term universities, there are several institutions that offer associate degrees, which then allow students to transfer to universities abroad.

Children who are visually impaired are part of the mainstream education and a resource center is set up to act as a support base and to assist them in their academic work in school. This Unit is situated in the same building that caters to children afflicted with hearing impairment. Adults who are visually impaired attend an Industrial Workshop of and for the Blind where they receive a monthly stipend to produce handcraft works such as mats, hats, mops and baskets.

Generally individuals with disabilities, including IVIs, are excluded from social debate. This was substantiated by the fact that no allocations are made in the education budget for children who are visually impaired, no other monies are budgeted, and no expenditures are made on their behalf except for that of providing transportation where necessary, and of giving a stipend to elderly IVIs; no policy document on disability; no
The exclusion of this group holds equally serious consequences for IVIs and the community of Antigua and Barbuda. The extent to which IVIs are limited in their personal development is the extent to which the development of the country will be hindered. Full and meaningful development cannot take place in the country whilst any group - no matter its size, is excluded from the decision making process. Consequently marginalizing of IVIs potentially creates a subculture of poverty among this group, with other serious repercussions to the community.

Another outcome of social exclusion was the notable absence of a missing faction of the population – IVIs in the 21 to 40 age group. In a limited way younger and older generations of IVIs were identified and are accessible; however there is no account of an in-between group. This “missing” section of the population may either be isolated behind closed doors or have migrated in search for better opportunities. Of significance also is the absence of a census on IVIs, and the need for an appropriate identification system. This gives rise to the situation in where unreported cases in which blindness and low vision can be avoided or treated potentially go unnoticed and unattended to, especially in poor families.

Another ramification of this social exclusion is that in reality the government is reneging on its legal and financial obligation to a very dependent sector of the community, depriving them of a constitutional right.
In Antigua and Barbuda there seemed to be a social anomie in which there is little or no interaction between the sighted and the non-sighted except at the level of care giving and assistance. This poses a serious problem from a social capital perspective, which advocates that social relationships are critical to the development of individuals, communities and nations. The study argued that IVIs have a lessened capacity to develop social networks critical for their functioning or the maximizing the benefits accruing from these networks formations. It is therefore necessary for the community to engage in capacity building, to provide support to weaker families and individuals, these and in return will be able to reciprocate to the community’s development.

Against that backdrop, the study posed the following questions to ascertain the existence and extent of social capital in Antigua and Barbuda as it pertains to IVIs holistic development:

- How involved are IVIs in social networks of the community?
- What is the community’s perception regarding individuals with disabilities - specifically IVIs?
- What access do IVIs have to the social, physical and economic resources of the community?

To answer these questions, the study utilized a case study qualitative research methodology. The main instrument used in the study was an interview guide to capture information from 21 respondents namely; teachers, parents, government officials, opinion leaders and members at the Workshop of and for the Blind who formed a focus group.
Social capital theory formed the basis for this research. This theory which was first introduced by L. Hudson Hanifan in the 1920s, who states that the inclusion and involvement of all members of the community is critical, and it was only then that sustainable development can be achieved, in any community (Hanifan, 1920). The study examined the works of three recent authors who led the way for the expansion of social capital. They were French Sociologist, Pierre Bourdieu, American Sociologist, James Coleman and American Political Scientist, Robert Putnam. They all made the case that social connections in the community have economical value; however they argued this from different viewpoints. Bourdieu saw social capital as an asset enjoyed only by the elite group. This meant that people external to that network are disadvantaged and a weak vertical tie exists between the haves and have-nots. Coleman, following on the works of Bourdieu, perceived social capital as an asset that can benefit these disadvantaged groups, as long as they are part of the community. Like Bourdieu, he placed great value of being part of a family or church. Putnam, who expanded the boundaries of social capital, explained it as a resource that functions at societal level. For him, everyone within the structure should receive any positive spillovers that society offered.

Although these authors did not directly recognize individuals with disabilities, this study found that some of its tenets are adaptable to the situation of IVIs, and as such created its operational definition of social capital, as: the ability to harness social relationships and other forms of capital (physical, human, economical, cultural) for the improvement of oneself and the community. The study recognized that social capital theory places emphasis on the idea of reciprocity, it embraces the concept of social
inclusion for all, it promotes cultural norms and values, and it highlights the importance of access to resources. Consequently, four key determinants were extracted to become instruments for analyzing and discussing the data of the study; these were reciprocity, social inclusion, access to resources and cultural norms and values. The major findings as they answer the research questions are summarized in Table 5.1 below.

Table 5.1: Research summary

<table>
<thead>
<tr>
<th>Research Questions</th>
<th>Categories/ Determinants</th>
<th>Major Findings</th>
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<tbody>
<tr>
<td>1</td>
<td>Level of IVIs Involvement</td>
<td>Social Inclusion</td>
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<td></td>
<td></td>
<td>Limited, One-way</td>
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<td></td>
<td></td>
<td>Social Involvement</td>
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<td>2</td>
<td>Community’s perception</td>
<td>Reciprocity</td>
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<td></td>
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<td>Illusionary Contribution</td>
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<td></td>
<td>Cultural Norms</td>
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<td></td>
<td></td>
<td>Reality of Rejection</td>
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<tr>
<td>3</td>
<td>Access to other forms of capital</td>
<td>Access</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Diminished Access to Capitals</td>
</tr>
</tbody>
</table>

Source: From Data 2007

From Table 5.1 it can be concluded that social capital has not been effective in the empowerment of IVIs in the community, evident by the diminished access to resources,
limited and one-way social inclusion, reality of rejection and the illusionary contributions of IVIs. This study considers social capital to be a useful tool in helping IVIs to create avenues to promote their social relationships and inclusion. These relationships are reciprocal in nature, and since social capital advocates embracing all, it demands that people’s norms, practices and values support the diversity of IVIs.

5.2 Conclusion

This study found that the extent to which social capital existed in the development of IVIs in Antigua and Barbuda was minimal. This assertion is based on the extremely low level of involvement and participation of IVIs in organizations and associations. Social capital encourages societies to nurture relationships between people with disabilities and those without disabilities in such a manner that everyone can feel at home in mainstream society. This does not mean establishing conformity or assimilation, but rather, it is the embracing of diversity to ensure full inclusion for all. The non-existence of relationships between IVIs and sighted was a significant problem in the twin-island state of Antigua and Barbuda. The findings of this study revealed a range of reasons to explain why IVIs were not part of organizations. These include, lack of awareness by both groups (the sight and non-sighted), lack of trust, lack of visibility of IVIs, lack of acceptance, and lack of understanding.

The research also established that the level of involvement was highly influenced by cultural barriers. A fully developed social capital requires challenging the country’s cultural consensus of people with disabilities. The data showed that Antiguans’ have not
embraced the diversity of disabilities, consequently their attitude ranged from being insensitive, dismissive, rude, uncaring, non-accepting, to uncouth and intolerant. Yet, there are the faithful few who are portrayed as helpful, caring, supportive and sympathetic. The study however found that the positive attitude of these few seemed to have been less significant and less felt by majority of IVIs. Furthermore, the study recognized that the negative cultural norms create weak ties between society and IVIs, lack of trust, and disincentive for IVIs to reciprocate. In order for IVIs to effectively give back to the community, Antigua and Barbuda’s social capital will have to first address the cultural anomie. The study concludes that the people were of the opinion that IVIs have the potential to make an above-average contribution to the community. The challenge therefore lies in finding ways to transform the society’s attitudes, cultural norms, values and comprehension to promote adjustments and improvements in the treatment or recognition of IVIs among the nationals of the country. This lies at the nucleus of country’s social capital.

Another major finding to explain the low level of social capital of IVIs, was evidenced by their diminished access to all resources identified in this study. Education appeared to be the only resource that IVIs have access to, but this statement is made with caution. Education is an important asset to build social capital but to do so in and of itself is useless. Simply achieving the status of student or graduating from secondary school does not build social capital if there are few opportunities for personal growth and development for networking and relationship building. Social capital therefore demands that these challenges are addressed.
There exists an opportunity for government to assist in the promotion of social capital in the lives of IVIs. The state has a central role to play in addressing the societal-level factors and for promoting institutional structures that reinforce certain economic, physical, and social inequalities. In other words, since the government has the obligation to promote to the overall well-being of its nationals, it more than any other entity, it has the responsibility to provide for and safeguard the rights of the more vulnerable in the community, into which category IVIs fall. Nevertheless, as noted earlier by a government official, there are financial constraints within the administration, which compel the government to prioritize. This means that disabilities, particular IVIs that form a relatively small fraction of the population will inevitably be left out of governments’ allocations. It is perceived that the situation may only be remedied through the intervention of external agencies assisting IVIs to make their voices heard, highlight their concerns, have their needs attended to, promote and protect their rights and privileges, and advocate and influence a government agenda in favor of IVIs.

It is noteworthy that civil society organizations can act a source and form of social capital for IVIs. The study revealed that there are numerous organizations within the country of Antigua and Barbuda, the number of which is undoubtedly greater than those listed in the findings. Although all the proponents of social capital theory promote social networks as necessary to social capital it was Putman who categorically stated that social organizations are both a source and form of social capital. Thus, civil society organizations have a critical role to play – that of catalysts in the advancement of IVIs in the community, both socially and politically. The study maintained that IVIs have a
lessened capacity to create connections on their own, thus requiring the assistance of others.

This study therefore concludes that social capital has not significantly benefited the upward mobility of IVIs in Antigua and Barbuda. Moreover, this study argues strongly that there are two the main hindrances in IVIs development - society’s negative attitude toward IVIs, and lack of opportunities in areas critical to their development. Failure to acknowledge and address these issues will result in the further isolation and alienation of IVIs, thus causing a subculture of poverty and dependency to become entrenched, institutionalize bias against the vulnerable in the community, and lead to a breakdown of the fabric of goodwill on which the Antigua and Barbuda society is founded.

5.3 Unintended Results

The research provided a medium for the researcher to increase her connections within the community, thus increasing her social capital. The research also laid a foundation on which work may continue to make IVIs more visible in the Antigua and Barbuda community. Most of the interviewees demonstrated an appreciably high level of interest in the concept of social capital and enthusiasm toward its application to IVIs in Antigua and Barbuda. As the researcher explained the fundamentals of social capital it was apparent, and most participants confirmed that they were not familiar with the theory, and those who had knowledge of it, were impressed with its application to IVIs. Some of the interviewees requested to see the results of the study, while others
volunteered to assist in activities that will facilitate the positioning of IVIs into the mainstream of society. The researcher especially notes the optimism of one IVI who excitedly expressed his intention to start using the term social capital, while another suggested that the researcher takes a more active role in assisting IVIs by, for example, serving as a board member of the Society of and for the Blind.

5.4 Suggestions

This study provided evidence that social capital has not played a significant role in the empowerment of IVIs in Antigua and Barbuda, hence the following suggestions are provided:

To Civil society organizations (refer to all non-government organizations):

The following suggestions are considered important with relatively low use of resources, and as such can be implemented in the short term.

- Take a more active role in ensuring the inclusion of IVIs in the affairs of the community. The Civil society organizations have the potential to bridge the gap between the sight and the non-sighted society and must do their utmost in this regard. These organizations should create ways of reaching out to IVIs on a more regular basis, and to engage in activities that promote blindness awareness in the country. This is a starting point to reducing the stigma, marginalization and discrimination that IVIs experience.
• Increase their role as advocacy groups in the community, to agitate and to urge the government to implement policies and enact legislations to the betterment of people with disabilities. Action in these areas has tremendous potential to strengthen and heighten the level of trust between IVIs and the community and inevitably lead to an actual norm of reciprocity.

To Government Officials and Educators:

The following are critical to the development of IVIs. This study therefore strongly suggests that these are addressed in the short term.

• Implement Policy document or Disability Act to address the needs of people with disabilities. A document has already been drafted, steps should be taken to have it vetted and/or upgraded, approved and enacted.

• Establish a program to assist secondary school IVIs prepare for higher education, or for the work field.

• Introduce and document a proper system of identifying IVIs in the country

• Create economic opportunities for IVIs. Lead the way in providing employment to IVIs, and encourage the private sector to do the same. Introduce incentive package to qualified IVIs who are desirous of becoming home owners.

• Elevate the status of IVIs by appointing them to boards and other entities for which they have the competence. This will lend to previously mentioned measures to help society to better accept this group.
The following suggestions require longer planning and implementation processes and will therefore be appropriate as long-term initiatives.

- Implement Early Intervention Programs (before primary school) for children with visual impairment.
- Produce an Expanded Core Curriculum for children with visual impairment to include activities for Daily Living Skills, Vocational training, Orientation and Mobility and Social Skills.
- Upgrade the Unit for the Blind to be a resource and training center at which IVIs may be referred and registered, source information; provide training and assistance in Daily Living Skills etc.
- Create incentives that will encourage private organizations to take an active role in employing IVIs.
- Create a dependable system of public institutions to promote state-society synergy in catering to the needs/concerns of IVIs and other vulnerable groups in the community.
To Personnel of the Industrial Workshop of and for the Blind:

Due to their potential to have an immediate effect on positively improving the image of IVIs in the Antigua and Barbuda, the study proposes that the following be done without much delay.

- The environment of the workshop should be enhanced to be one of warmth, light and beauty, to elevate the spirits of the men and women who spend the major portion of their waking hours there.
- Increased visibility of IVIs in the country, to include ongoing public radio announcements, TV and Radio programs to highlight the capabilities and work of IVIs.

The following suggestions require greater planning, may require further feasibility studies, and as such could be viable in the longer run.

- The Industrial Workshop of and for the Blind needs to be more instrumental in ensuring the empowerment of IVIs. The introduction of other skills is critical to this end. Such skills include, but not limited to, computer literacy, job finding techniques and exposure, on going personal growth and development programs.
- Expand the market for mop making, by securing local and regional buyers for the mops and also consider ways of increasing product output.
To IVIs and Family Members:

The study strongly believes that the following two suggestions are critical to the unification and empowerment of IVIs.

- Increased interaction among families with IVIs. Although this study did not set out to examine the social relationships among IVIs, there was an evident lack of cohesion between the various family members with IVIs.
- Organize among yourselves, become a registered group and take a more active role in the local Association of Persons with disabilities.

For Future Research

- This research was limited because it was not able to effectively observe the children in their learning and social environments. A more comprehensive research is therefore recommended, to observe and interact with children who are visually impaired. This will allow the researcher to examine the behaviors and negotiation skills of visually impaired children, as well as their interaction with their sighted peers. A further research of this nature will also be able to assess the early social relationships of these children. The observation will act as a cross reference to validate what teachers assert about the strategies used to empower these children.
- Other factors notwithstanding, time constraints prevented the researcher from locating a critical subset within the set of IVIs on Antigua and Barbuda. An
observation of this group would doubtless inform on challenges that IVIs face, additional to the findings of this study.

- Focusing on the importance and role of social networks in the development of IVIs, provides a distinctive and informative research, however many of the issues that have been highlighted in this study equally apply to other groups that are at risk of exclusion from the Antigua and Barbuda social landscape. Such groups include people with other disabilities, women, the poor, children in foster homes, the elderly, homosexuals and lesbians, vagrants and addicts. Thus, there is room for further research as it pertains to social capital and the development of marginalized groups in Antigua and Barbuda.
REFERENCES


Smith, S. S. & Kulynych, J. (2002). It may be social, but why is it capital? The social construction of social capital and the politics of language. *Politics & Society*, 30, 149-186.


APPENDIX A: BASIC ORGANIZATIONAL CHART
Ministry of Education

Minster of Education

Permanent Secretary

Chief Education Officer

Senior Education Officer (Secondary Schools)

Zone Officers (4) Primary Schools

Technical Officers
Math, Science, Music, Health & Family Life, Art & Craft, English (vacant), Home Economics

Curriculum Development Officer

Principal

Deputy Principals

Heads of Departments

Teachers

Source: Adapted from Ministry of Education, Antigua and Barbuda
APPENDIX B: INTERVIEW GUIDE FOR PARENTS

SECTION 1 (DO MAPPING)
1. What benefits do you think she can gain being involved in the various organizations?
2. What are the disadvantages of this lack of access to these networks for individuals with visual impairment?
3. Why do you think that he/she is not included in those activities or networks?

SECTION 2
1. What resources are available to you and your child in the community in the following areas: Health, Culture, Civic, Education Any others?

SECTION 3 (DO MAPPING)
1. How involved is your child in the institutions and associations in the community?
2. In what ways are they involved? OR What activities do they engage/participate in?
3. Do you think that she/he should be more involved in associations? If yes, how beneficial would this be to the IVIs? If no, explain.
4. Do organizations reach out to him/her to organize activities?
   a. Which notable organizations can you mention?
   b. What types of activities do they organize for the IVI’s?

SECTION 4
1. From your experience how would you describe the attitude of community members towards people with disabilities? Do you think the situation is the same for IVI?

SECTION 5
1. How does your child generally get around in the community?
2. Do you think that IVIs have easy access to: Buildings, Transportation, Parks & Playground:
3. Which of the following economic resources do IVIs have access to: Land, Loans, Employment

**SECTION 6 - GENERAL**

1. In what ways can IVIs give back (reciprocate) to the community?
2. Do you think that your child is empowered through the system to become reciprocate?
3. What rehabilitation programs are available in the community to IVIs?
4. What types of skills do you think should be taught as a rehab center?
5. What types of employment are graduates from the center are engage in?
6. What recommendations would you give to improve the inclusion of IVIs into the St. John’s community?

**Social mapping for parents**

[Diagram showing social mapping for parents with categories such as Associations/Institutions/Group, Debate Society, Church, Service clubs, 4H club, Church groups, Cushion or Reading club, Community groups, 4H club, Drama club, Summer Camp, Other educational institutions, 4H club, Choir or singing groups, Youth Groups /clubs, Pathfinder, Youth arm of an organization, Girl Guides, Boy Scouts, Music groups, Very Involved, Moderately Involved, Barely Involved, Level of Involvement, Child, and Child.]
APPENDIX C: INTERVIEW GUIDE FOR TEACHERS

SECTION 1
1. What are the network relationships that exist, that you know of, in the community?
2. Which of these do you think that individuals with visual impairment have access to? Please name them.
3. What benefits do you think they gain by access to these institutions and/or associations? (If no access, ask what potential benefit they would derive from having access to these networks?)
4. What are the disadvantages of this lack of access to these networks for individuals with visual impairment?

SECTION 2
1. What resources are available to IVI at the Unit in the following areas: Health, Culture, Civic, Education, Any others?

SECTION 3
1. How involved are IVIs in the institutions and associations in the community?

<table>
<thead>
<tr>
<th>Level of involvement</th>
<th>Types of organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Very involved</td>
<td></td>
</tr>
<tr>
<td>Adequately involved</td>
<td></td>
</tr>
<tr>
<td>Barely involved</td>
<td></td>
</tr>
<tr>
<td>Not at all involved</td>
<td></td>
</tr>
</tbody>
</table>

2. In what ways are they involved? OR What activities do they engage/participate in?
3. Do you think that they should be more involved in associations? If yes, how beneficial would this be to the IVIs. If no, explain.
4. Do organizations reach out to the Unit to organize activities?
   (a) Which notable organizations can you mention?
   (b) What types of activities do they organize for the IVI’s?
SECTION 4
1. From your experience how would you describe the attitude of community members towards people with disabilities? Do you think the situation is the same for IVI?

SECTION 5
1. How do IVIs generally get around in the community?
2. Do IVIs have easy access to: Buildings, Transportation, Parks & playground

SECTION 6 - GENERAL
1. In what ways can IVIs give back (reciprocate) to the community?
2. Do you engage in activities that foster the following?

<table>
<thead>
<tr>
<th>Empowering Tools</th>
<th>Associated Activities</th>
</tr>
</thead>
<tbody>
<tr>
<td>self-strength</td>
<td></td>
</tr>
<tr>
<td>self-control</td>
<td></td>
</tr>
<tr>
<td>self-reliance</td>
<td></td>
</tr>
<tr>
<td>own choice</td>
<td></td>
</tr>
<tr>
<td>sense of dignity</td>
<td></td>
</tr>
<tr>
<td>decision making</td>
<td></td>
</tr>
<tr>
<td>awareness of rights</td>
<td></td>
</tr>
<tr>
<td>Independence</td>
<td></td>
</tr>
<tr>
<td>adaptive behavior</td>
<td></td>
</tr>
<tr>
<td>Self-esteem</td>
<td></td>
</tr>
</tbody>
</table>

3. What rehabilitation programs are available to IVIs?
4. What types of skills are taught? What types of skills should be taught at a rehab center?
5. How effective are these programs?
6. What types of employment are graduates from the Unit are engage in?
7. What recommendations would you give to improve the inclusion of IVIs into the St. John’s community?
APPENDIX D: INTERVIEW GUIDE FOR GOVERNMENT OFFICIALS

1. Is there any policy document with respect to individuals with disabilities in Antigua and Barbuda?

2. What is the government’s policy on children who are blind and visually impaired in reference to education and health care?

3. What policies are in place to facilitate easy mobility among IVI’s in the community?

4. What is the current system used to identify the number of children who are blind and visually impaired living in Antigua and Barbuda?

5. What types of assistance do the government provides to IVIs?

6. Researcher: You mentioned about the school for the blind, do you consider this to be a

7. What kind of rehabilitation program does the government provide to assist young people who are visually impaired to integrate into the community?

8. What present plans do the government has in place to further assist with the development of the Unit from an educational perspective?

9. What %age of budget is allocated to the Unit for the Blind?

10. What type of assistance would the unit or Government provide to a child or children who are visually impaired whose parents refuse to send them to TNKirnon School?

11. What policy considerations are in place to grant IVI’s easy access to the following? Buildings, Transportation, Parks & playgrounds, Land, Loans
APPENDIX E: INTERVIEW GUIDE FOR OPINION LEADERS

SECTION 1
1. What are the network relationships that exist, that you know of, in the community of Antigua & Barbuda
2. Which of these do you think that individuals with visual impairment (IVIs) have access to? Please name them.
3. What benefits do you think they gain by access to these institutions and/or associations? (If no access, what potential benefit they would derive from having access to these networks?)
4. What are the disadvantages of this lack of access to these networks for individuals with visual impairment?
5. What do you think are reasons for the lack of access to these institutions?

SECTION 2
1. What resources are available to IVIs in the following areas: Health, Culture, Civic, and Education?

SECTION 3
1. From your experience how would you describe the attitude of community members towards people with disabilities? Do you think the situation is the same for IVIs?

SECTION 4
1. How do you think IVIs generally get around in the community?
2. Do you think that IVIs have easy access to: Buildings, Transportation, Parks & Playground?

SECTION 5 - GENERAL
1. In what ways can IVIs give back (reciprocate) to the community?
2. Do you think that IVIs are empowered to give back to the community?
3. Do you consider the industrial workshop as a rehabilitation centre?
4. What types of skills you think are taught there?
5. What recommendations would you give to improve the inclusion of IVIs into the St. John’s community?
APPENDIX F: INTERVIEW GUIDE FOR FOCUS GROUP

SECTION 1
1. What are the network relationships that exist, that you know of, in the community?
2. Which of these do you have access to? Please name them.
3. What benefits do you think you can gain by access to these institutions and/or associations? (If no access, ask what potential benefit they would derive from having access to these networks?)
4. What are the disadvantages of this lack of access to these networks for individuals with visual impairment?
5. What do you think are reasons for the lack of your access to these institutions?

SECTION 2
1. What resources are available to you in the following areas: Health, Culture, Civic, Education, Any others?

SECTION 3
1. How involved are you in the institutions and associations in the community?

<table>
<thead>
<tr>
<th>Level of involvement</th>
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<tr>
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<td></td>
</tr>
</tbody>
</table>

2. In what ways are you involved? OR What activities do you engage/participate in?
3. Do organizations reach out to you to organize activities?
   c. Which notable organizations can you mention?
   d. What types of activities do they organize for the IVI’s?

SECTION 4
1. From your experience how would you describe the attitude of community members towards people with disabilities? Do you think it is the same for you?
**SECTION 5**

1. How do you generally get around in the community?
2. Do IVIs have easy access to: Buildings, Transportation, Parks, Playground
3. Which of the following economic resources do you have access to: Land, Loans, Employment

**SECTION 6**

1. What rehabilitation programs are available to you?
2. Do you have a rehabilitation officer?
3. What types of skills are you taught? What are some of things you do here?
4. What are the possible benefits of these programs or how can it improve?
5. What types of employment are IVIs engage in?
6. What recommendations would you give to improve the inclusion of IVIs into the St. John’s community?
APPENDIX G: RESEARCH PARTICIPANT CONSENT FORM

Title of Research: The Role of Social Capital in the Empowerment of Individuals with Visual Impairment: The Case of in Antigua & Barbuda

Principal Investigator: Treasa M. James

Department: International Development Studies

Federal and university regulations require signed consent for participation in research involving human subjects. After reading the statements below, please indicate your consent by signing this form.

Explanation of Study

Purpose of Research: To gain insights on the social networks available to individuals with visual impairment living in Antigua and Barbuda. The research will also seek to investigate what access these individuals have to institutions and associations within the community and the potential benefits (or lack thereof) to them and by extension the community, through the use of social capital. Social Capital provides a useful framework to understand the processes of empowering children with visual impairment to become more self-sufficient and independent which will reduce future financial and social encumbrances in the community.

Specific Procedures to be used: I will conduct interviews with teachers, parents, opinion leaders and government officials in the Ministry of Education.

Duration of Participation: Each person will be interviewed on different days, with each session lasting no more than one hour for a period two weeks.

Risks to the Individual: The risks to participant are minimal, in that the participants will not be subjected to more risks than what they would encounter in their everyday lives.

Benefits to the Individual or Others: There are no immediate benefits to the individuals but the potential benefit would be to add to the existing knowledge of how individuals with visual impairment are perceived in the community. Furthermore, this study will highlight what access do individuals with visual impairment has to resources in the country and how social networks can help them to become empowered.

Extra Costs to Participate: The cost of this research will be fully funded by me, the researcher.
Confidentiality and records: I am the only person who is aware of the interview between the two of us. If you do not wish for me to use your real name in the report, I will always identify you with a false name (or one of your choosing); your permission is sought at the end of the consent form. When I interview you, I would like your permission to audiotape our interview sessions and take photographs. I will be the only one who will listen to the tape and when I am not using it, it will be kept in a locked cupboard to which only I have the key. Upon completion of my study I will destroy the tape. However, I would like to use the photographs as part of my presentation and as such at the end of this consent form I will also ask you to check off whether you do or do not give me permission to take and use your photograph.

Voluntary Nature of Participation: You should also be aware that you do not have to participate in this research project. If you agree to participate and you subsequently wish to withdraw your participation, that is your decision and there will be no penalty.

Contact Information
If you have questions regarding this study, you may contact me, Treasa James at 268-771-2569 or via email at jaytee@candw.ag or tj253205@ohio.edu.

If you have any questions regarding your rights as a research participant, please contact Jo Ellen Sherow, Director of Research Compliance, Ohio University, (740)593-0664 or by email at sherow@ohio.edu.

I certify that I have read and understand this consent form and agree to participate as a subject in the research described. I agree that known risks to me have been explained to my satisfaction and I understand that no compensation is available from Ohio University and its employees for any injury resulting from my participation in this research. I certify that I am 18 years of age or older. My participation in this research is given voluntarily. I understand that I may discontinue participation at any time without penalty or loss of any benefits to which I may otherwise be entitled. I certify that I have been given a copy of this consent form to take with me.

☐ I give permission for my real name to be used in the research project

☐ I do not wish for my real name to be used in the research project.

Signature ______________________________________ Date __________________

Printed Name ________________________________