THE NEGATIVE STIGMA ASSOCIATED WITH LEARNING DISABILITY IN EDUCATIONAL INSTITUTIONS NIGERIA

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Abstract

There is a lack of understanding related to the way that the stigma of having a learning disability impacts students in Nigeria (Abang, 1988; Fuchs, Mock, Morgan and Young, 2003). The objective of this qualitative, autoethnographic research was to explore personal experience and engage in self-reflection through the theoretical lens of the social model of disability. Based on the current body of research it was determined that there are gaps that influenced the establishment of the problem at the core of this research and that there is a lack of understanding of the social, cultural and schooling factors that lead to the stigmatization of students with learning disabilities in Nigeria. An autoethnographic methodology was employed in the research as a means of exploring the problem as it would support greater depth and breadth based on the narrative of the primary investigator. Stigma plays a substantial role in the lifestyle of people with learning disabilities in Nigeria and is a factor that limits access to services that could improve quality of life. Intellectual impairments are not well understood and the assumptions of people in the community as well as educational professionals make obtaining accommodations difficult for people with intellectual disabilities. Teacher education in Nigeria must place greater focus on facilitating the development of special needs students.
The Negative Stigma Associated with Learning Disability in Schools in Nigeria

The stigma associated with learning disabilities remains a prevalent issue across most cultures today (Gersten, Jordan & Flojo, 2005), but it is especially challenging for students and their families living in developing countries (Turmusani, 2018). Stigma is a negative stereotype placed on individuals (LeBel, 2008). There is a lack of understanding of the role stigmatization plays in the lived experience of students with learning disabilities in schools. Stigma may take various forms, and may be influenced by an array of social, cultural and educational factors; however, there are common themes that are associated with the establishment of stigma of learning disability. Gersten, Fuchs, Williams and Baker (2001) point out the common social and cultural perception that students with learning disabilities lack the ability to care for themselves. A learning disability is a type of disorder that impacts an individual’s ability to speak, write, perform mathematic calculation or give attention (“Learning Disability”, n.d.). In several cultures such as Nigerian (Fuchs, Mock, Morgan and Young, 2003), the stigma of having a learning disability results in those students not receiving the same opportunities for social, cultural and educational development in school that non-identified students receive; in other words, the opportunities provided for this group are relatively sub-standard (Gersten, Jordan & Flojo, 2005). Gersten, Fuchs, Williams and Baker (2001) conclude that the stigmatization experienced by students with learning disabilities in learning institutions results in them feeling dehumanized; they perceive that they are treated less humanely than other students in the class.

In Nigeria, there is a paucity of research focused on the negative stigma associated with learning disabilities in learning institutions; however, students with learning disabilities are treated significantly different than non-identified students (Abang, 1988). Research by Fuchs, Mock, Morgan and Young (2003) confirms that there is a negative stigma associated with
learning disabilities in several societies, and that, specifically, in learning institutions in Nigeria, students with a learning disability are often treated differently or more poorly than their peers. However, while there is ample research surrounding the phenomenon of stigmatization associated with learning disabilities in an educational context in Nigeria and other cultures, there is a lack of research exploring the negative stigma from a cultural and social perspective based on the lived experience of an individual. This research adds to the examination of learning disability stigma in Nigeria by exploring the topic through the social model of disability.

**Problem Statement**

Learning disabilities are a significant phenomenon in Nigeria, in that they stigmatize individuals who are identified, which follows them throughout their academic lives. As a developing country, there are specific persisting differences in the way students and their families react to the identification of a learning disability (Vaughn, Elbaum & Schumm, 1996). There is a stigma which follows students with disabilities, and the stigma attaches to the family as well in Nigeria. People in the community do not understand learning disabilities well; in fact, they believe that there is either a spiritual or familial problem underlying the disability (Osonwa, Adejobi, Iyam and Osonwa, 2013). As a result, although research shows that 9% of students in Nigeria have learning disabilities, because of the nature of stigmatization, many cases go unreported (Smith, 2011). This percentage will likely grow as the prevalence of testing for attention deficit hyperactivity disorder grows (Egbochuku & Abikwi, 2017), and the process of reporting can stigmatize further. Stigmatization influences families to not seek treatment because of a fear that it will involve the community learning that a family member has a disability. Further, disability and stigma remain an issue because of the gap that persists in education attainment in Nigeria. There is a difference in primary school completion of 15% boys and 18%
girls between disabled and non-disabled students where students with disabilities are less likely
to complete primary school than students without disabilities ("Education for Children with
Disabilities" 2017). Based on these factors, further research is needed in exploring the effect of
social, cultural and educational factors on the stigmatization of students with learning disabilities
in Nigeria through focused inductive reasoning. The problem at the center of this research is that
there is limited knowledge surrounding the topic of learning disabilities and how they impact
students in Nigeria. More specifically, there is a lack of understanding related to the social and
cultural factors that lead to the stigmatization of students with learning disabilities in Nigeria.

**Purpose Statement**

The purpose of this qualitative, autoethnographic research was to explore personal
experience and engage in self-reflection through the theoretical lens of the social model of
disability. This was done to understand the social, cultural and educational factors that lead to the
stigmatization of students with learning disabilities in Nigeria. The participant in this research
was also the primary investigator and author of this manuscript. The geographic location of this
research is Toronto, reflecting on the researcher’s experience in Nigeria. Self-reflection on
critical incidents will contribute to the development of a greater understanding of the problem.
Employing an autoethnographic design in order to achieve the objective of this research was
suitable, as Adams, Jones and Ellis (2015) note that it is a way for the researcher to reflect on
personal experience as a means of description and a critical analysis of culture, practice and
experience, while also acknowledging the researcher’s relationship with other individuals.
Adams, Jones and Ellis (2015) also note the benefit of an autoethnographic design as being
capable of making greater sense of complex elements of life. A social benefit that could ensue
from this research is discovering how stigmatization impacts students with learning disabilities in Nigeria and the implications on the way they learn.

**Research Question**

What are the social, cultural and educational factors that lead to the stigmatization of students with learning disabilities in Nigeria?

**Theoretical Framework**

The theoretical framework for this research was the social model of disability. The social model of disability was applied in this research because of its focus on systemic barriers, exclusion and negative attitudes in society (Goodley, 2001). The social model of disability is an essential framework for understanding the negative stigma associated with learning disabilities, as it relies on identifying the ways in which society contributes to “disabling” the individual. In the current study, the framework contributes to understanding how people experience disability and why people refuse to take part in accommodating individuals with a disability. The social model of disability also facilitates a critical examination of disability (Oliver, 2013). This framework is applied in this paper with a qualitative, autoethnographic methodology. Through this research method and design, it is possible to develop a concise understanding of the negative stigma associated with learning disabilities in learning institutions in Nigeria from a wider cultural and social perspective.

The social model of disability is an important tool because of how it works to reframe the context of disability to facilitate an understanding of the difference between impairment and disability. Goering (2015) discusses the differences between disability and impairment in relation to social environments as being such that when an individual is experiencing a disability there is incongruity between the elements of their environment and their capacity to execute different tasks. When there is incongruity, the optimal response is to make changes to the environment in
order to accommodate a person who is considered disabled more effectively. Through the social model of disability, diseases and other conditions are problems that can be improved upon in an individual’s life through the establishment of changes to their surroundings. This research is focused on understanding how this happens in Nigeria using an autoethnographic approach.

There are different perspectives on the utilization of the social model of disability as a framework; however, the general perspective taken is to view it as a critical framework that can expose barriers in the “disabling world” effectively (Oliver, 2013, p. 1024). As a critical framework, the social model of disability facilitates the development of a greater understanding of the concepts of disability and inclusion to understand ways that people who have become disabled are able to overcome those disabilities. The International Encyclopedia of Education includes a discussion of the social model of disability and several barriers related to disability (Cigman, 2010). Cigman (2010) views these barriers as being systemic issues that society is responsible for overcoming in order to support greater inclusion of people with disabilities. The discussion is framed from a functional standpoint, with several references to ways in which disabilities created by impairments can be overcome. Essentially, the model supports understanding where inclusive features are lacking in order to ensure more effective efforts towards the inclusion of people in social events.

One conceptualization of the social model of disability is based on the designation of four key barriers that impact persons with disabilities. Willder (2017) underscores that, environmental, organizational, communicative and attitudinal barriers all contribute to the nature of disability. Environmental barriers are created when individuals with physical disabilities are not able to enter locations because of design features. This also extends to features within structures themselves. Organizational barriers are barriers that are linked to the way that the
disabling world is organized (Oliver, 2013). Disabling features of events can be related to the amount of time allotted for an event, or access to papers translated to Braille. Communication barriers are barriers that emerge when communications are not designed to be received or articulated completely by a person with a communication-related impairment. Attitudinal barriers are barriers that are attached to expectations, assumptions, ignorance and fear related to a disability. These barriers relate significantly to the perceptions that other individuals hold. These four barriers are the basis for the thematic analysis of data in the autoethnographic research in this study.

An intellectual limitation that is present and creates functional constraint is referred to as an impairment; however, a disability is the restrictions that arise from a lack of accommodation for people with impairments. Disability is defined differently, dependent on social and cultural factors. “In Nigeria, a person with a functional constraint that impacts their learning would likely not be accommodated at their school, therefore experiencing environmental, organizational, communicative and/or attitudinal barriers. A common outcome is that a person with a disability is not included in social and economic opportunities. Through the social model of disability, it is then possible to understand how this stigma is formed and manifested in different societies. Persons with disabilities’ functional limitations are not accommodated, and without accommodation, they are not able to take part in activities such as work and education, or if they are, then rather than accommodation, the scope at which expectations are set is relatively smaller. The negative stigma of a learning disability leads people to believe that if they include people with disabilities in activities, the outcome will be that they will require more support and take away resources from other people. Overall, the social model of disability significantly
contributes to understanding the nature of social change that must occur to positively impact the lives of individuals with disabilities.

**Significance and Nature of the Study**

Identifying the social, cultural and educational factors that lead to the stigmatization of students with learning disabilities in Nigeria is important because the research can lead to understanding how the stigma manifests and determining ways in which the stigma can be reduced. There is a wide breadth of conditions that are not adequately dealt with as disabilities in Nigeria (Dewey & Tupper, 2004). Nigeria remains a developing nation where the population includes rural and urban populations that have different beliefs about learning disabilities; however, a common thread in the beliefs of these people are that mental disabilities are difficult or even impossible to treat (Okpalauwaekwe, Mela & Oji, 2017). This study is important because it takes the social perspective, rather than the medical perspective, to understanding learning disability, which can in turn lead to the development of new knowledge regarding the influence of stigmatization on different aspects of a student’s life. The study is also significant because the results could be used by people in different cultures to gain insight into the phenomenon of stigmatization and the way that it affects people with learning disabilities. These findings could be taken and used as support for further investigation of similar problems in similar contexts, and in identifying ways in which stigma can be reduced. The use of an autoethnographic study could mean deeper knowledge of the reaction to mental illness by the community. By applying the social model, it is possible to gain an understanding of the areas where there has been failure in the community related to understanding mental disabilities and the way that people dealing with mental illness cope with their condition. The research focuses on a single case and the reflection
of the researcher-participant on her past lived experiences in Nigeria, now as a citizen living in Toronto, Ontario.

**Literature Review**

Several research findings related to learning disability and how it manifests in learning institutions have noted that students with a learning disability experience a negative stigma (Fuchs, Mock, Morgan & Young, 2003; Gersten, Fuchs, Williams & Baker, 2001; Gersten, Jordan & Flojo, 2005; Vaughn, Elbaum & Schumm, 1996). While the most frequent problems have been found to include math (81.14%) and hearing (49.04%), the implications of other areas of learning disability can be substantial (Omotosho, 2001). According to research conducted in developing countries, the negative stigma surrounding having a learning disability is great enough that students or parents of children with these disabilities will sometimes avoid disclosing that their child has a learning disability (Abang, 1988; Ajuwon, 2008). However, while there is a growing body of literature surrounding stigmas associated with learning disabilities in learning institutions, the literature is limited regarding both the experience of students in developing countries, particularly those in Africa (Ajuwon, 2008). There are now multi-professional and interdisciplinary offerings available to mental disability professionals; however, these are short workshop courses (Omigbodun, Bella, Dogra & Simoyan, 2007). A search of the scholarly journal database Google Scholar for the terms “stigma”, “learning disability”, “learning institution”, “school” and “schooling” resulted in findings indicating that most research related to learning disability stigma in learning institutions was performed in North America or Europe; there a paucity of research related to Africa in this area. Based on these gaps in the literature, it is essential that research be conducted that addresses the negative stigma associated with learning disability in learning institutions in Nigeria from a wider cultural and social perspective.
Stigma and Learning Disabilities

The body of literature related to stigma and learning disabilities in education is robust; however, gaps continue to persist which must be filled with further academic study. Learning disability research has been performed in several geographic settings. Location has some impact on the way that disability is understood. In Nigeria, disability typically follows a medical model where it is understood to be largely a problem with the disabled. Developed countries typically accept a definition of disability in research completed by Dudley-Marling and Dippo (1995). The researchers investigated the issue of learning disability and schooling to understand the ways that the construction of disability works to support the dominant assumptions related to school and society. Dudley-Marling and Dippo (1995) found that the construction of learning disability supports the maintenance of the status quo where there is an unequal distribution of social goods based on the perception of an equitable meritocracy. One of the ways in which this system functions is by creating stigmas associated with learning disabilities. The researchers concluded that challenging the inequities created by the design of the system would help address the nature of the inequities present in schools and in society. This research is important because the findings of the researchers confirm acknowledgement of the differences in the treatment of students with learning disabilities based on the perception that they are not as valuable as mainstream students, and therefore are not worth the time and energy necessary to facilitate effective learning.

Generally, the issue of raising awareness and combatting the stigma attached to intellectual disabilities is a general problem faced by people in many countries, and the problem continues to persist because of limited resources and knowledge to combat it (Scior et al., 2015).
The findings of Scior et al. (2015) reveal that people with disabilities remain an invisible minority and that because of their low visibility and lack of personal agency it is difficult for them to get government action in place that would support overcoming the prejudices that they face. Overall, the issue is one where there is a lack of awareness and intellectual disability becomes subsumed under general disability. The different conditions of individuals with a disability are not being raised in terms of awareness and are typically overlooked entirely. Based on these findings, it is essential that there be greater awareness around the nature of intellectual disability and what it means for the development of students in various parts of the world.

Relative to this study, the findings of the current research could fill the existing gap by providing insight into the stigma surrounding intellectual disability and a deep understanding of the lived experiences of students with disabilities in a nation where the stigma remains prevalent.

The way people with learning disabilities perceive themselves and the impact of the stigma associated with such learning disabilities on their ability to learn is another focus in the body of current research. In research conducted by Finlay and Lyons (2000), the social categorizations, social comparisons and stigma associated with people with learning disabilities was investigated. They explored the phenomenon of stigma from the perspective of self-categorization theory because of the importance of the context where the meta-contrast principle operates. Finlay and Lyons (2000) found that participants would make downward comparisons between themselves and people with learning disabilities where people with learning disabilities who are less able or more challenged were being in lower categories. This research is valuable because it supports the construction of stigma, in that when people experience a learning disability, it is likely that others denigrate them and their behavior. The current research benefits
from these findings because it supports the idea that there are cultural challenges derived from
the stigma that is associated with having a learning disability.

The perceived stigma that individuals with an intellectual disability experience has been
measured in previous research. The findings contribute to the validity of the construction of
stigma as it relates to intellectual disability. In a research conducted by Ali et al. (2008), the
researchers designed a tool that measured the perception of stigma associated with their learning
disability. They focused on a sample from a population of people with mild to moderate learning
disabilities. In their findings, they noted the discovery of two factors related to stigmatization of
people with intellectual disabilities: perceived discrimination and reaction to discrimination (Ali
et al., 2008). While this finding is important, further research is needed to explore stigmatization
in determining the social, cultural and educational factors that lead to the stigmatization of
students with learning disabilities in Nigeria.

Given the stigmatization associated with having a learning disability and its negative
effects, understanding this phenomenon is more pressing. Dagnan and Waring (2004) probed the
link between stigma and psychological distress. They found that in the social experience of
people with a learning disability, stigma has a significant impact on the social comparison
processes of students with learning disabilities, but that this relationship was also mediated by
the evaluative beliefs of an individual (Dagnan & Waring, 2004). Based on these findings, there
is a social-cognitive element that accompanies having a learning disability, where the
stigmatization that a person with a learning disability experiences can have significant negative
implications in the form of psychological damage. Dagnan and Waring (2004) suggest the use of
interventions that could have an impact on both social and cognitive domains. This research is
valuable as it acknowledges stigmatization and learning disabilities as a social phenomenon.
Lightner, Kipps-Vaughan, Schulte and Trice (2012) studied students with learning disabilities to understand the barriers that confront them in seeking out disability services. The researchers found that 36 of the 42 students interviewed only sought out accommodations from their school at the point of an academic crisis. At the same time, it is more difficult for students with a learning disability to seek assistance if they did not receive assistance in the past. For students who had never sought assistance, they would seek it much later. The findings of this research are important because they confirm the sense of urgency in the need for additional research into the lived experience of students with learning disabilities in Nigeria to understand the social, cultural and educational factors that lead to their stigmatization in an effort to eliminate the negative effects.

Learning Disabilities and Nigerian Schools

Learning disabilities create significant barriers for students engaged in special needs education programs in Nigerian schools. Adebisi, Jerry, Rasaki and Igwe (2014) studied the state of Nigerian schools to understand the barriers that persist in the delivery of special needs education. The researchers discovered that there is a lack of equal access to education for students with special needs in Nigerian schools and that factors such as stigmatization, poor health care and a lack of legal support to prevent abuse by caretakers all play a role in the difficulties that students experience in receiving equal access to resources. Adebisi et al. (2014) note that the barriers facing children with special needs in Nigerian schools are highly restrictive and create a learning environment that is difficult for students to navigate. Given the current structure of the educational system in Nigeria, children with special needs do not have access to the same resources that students without disabilities have. These findings relate to the current
research as they provide insight into another issue associated with the differences in access to resources for students with disabilities in Nigeria.

**Lack of Inclusive Education in Nigeria**

The problems that students with disabilities face are also related to the lack of professional services in Nigeria. Ajuwon, Ogbonna and Umolu (2014) highlight the case of a professional organization focused on professional services for students with intellectual and developmental disabilities in Jos, Nigeria. The Open Doors for Special Learners project was the focus of Ajuwon, Ogbonna and Umolu’s research (2014) where they highlighted a persistent problem in Nigeria’s education sector of an acute shortage of special education teachers, in addition to other social, economic and cultural problems that continue to have a negative impact on the implementation of specialized services for students with disability. These findings of Ajuwon, Ogbonna and Umolu (2014) underscore that the issues surrounding learning disability go beyond the classroom or other social institutions, extending to the core of child’s intellectual and social growth within the home. Ajuwon, Ogbonna and Umolu’s (2014) research confirms that families of children with learning disabilities need to be properly informed about their disability in order to help them overcome the challenges and limitations associated with their development.

The findings of Ajuwon, Ogbonna and Umolu (2014) are further supported by Njenga (2009) who reviewed current literature on epilepsy and intellectual disability in Nigeria in order to better understand the conditions that people with disabilities face in Africa as a whole. Njenga’s finding reveals a high level of discrimination and low levels of access in terms of social justice and education. Additionally, Njenga also found that learning disability was predominantly
viewed as a supernatural issue being at the core of the disability. Thus, rather than relying on education and inclusion as a means of dealing with these issues, families rely on faith healers. These findings indicate that how disability is dealt with in Nigeria and other regions of Africa requires an evidence-based approach that looks at the lived experience of students with disabilities, including the prejudices they face in the family unit and in the society.

A key problem contributing to the limitations experienced by students with learning disabilities in Nigeria is related to the lack of understanding of the problems they face on the part of teachers and administrators. Ajoku-Christopher (2012) conducted research related to the lack of awareness surrounding dyslexia and the implications that it has for the establishment of inclusive learning in the Imo state in Nigeria. Ajoku-Christopher (2012) interviewed education staff to understand their views on the issue of dyslexia and how it impacts teaching and learning in situations where there is an inclusive learning environment for students with disability. Ajoku-Christopher (2012) found that lack of understanding regarding learning disabilities contributed to the ongoing marginalization of students with special needs. Students with disabilities such as dyslexia can be included in the mainstream classroom; however, these students do not have access to accommodations that will facilitate their success. Further, the stigma that is associated with having such a learning disability incites bullying from students who do not have a disability. On the other hand, Ajoku-Christopher (2012) concluded that an awareness of the issues that accompany students being dyslexic in Nigerian classrooms contributes to understanding the negative nature of disability rights where they are lacking for individuals with disabilities. Further, for Nigerian educators, disability plays a major role in the way students are classified, in terms of whether they are capable of being educated or not. Ajoku-Christopher (2012) This
research is significant because it frames the stigmatization of students with learning disabilities as a social construction, wherein they are deemed to be uneducable.

The issue of schooling for children with learning disabilities is one that Nigeria has grappled with for several decades. There are significant inequalities in the Nigerian education system, particularly among the learning disabled (Hadjar & Gross, 2016). Garuba (2003) purports continued difficulties in the progress that schools have made with the establishment of inclusive education and the establishment of opportunities for Nigerian children with disabilities. Garuba (2003) highlights the difficulties that persisted at the time with integrating students with special needs into the mainstream classroom. Garuba (2003) expresses that these issues continue to persist where children do not have equal access in the classroom, or even to accommodations that would facilitate effective learning, leading to strikingly lower rates of enrollment of school age children who have disabilities in Nigeria. Disabilities included in Garuba (2003) included ADHD Garuba (2003) found that enrollment for students with disabilities in Nigeria stood at 42%, while enrollment of students who had no observed disability was 67.05%.

The issue of managing the education of students with disabilities is an important issue that extends beyond the borders of Nigeria to all of Africa. Reporting on the phenomenon of educating children with learning disabilities in Africa, Abosi (2007) raises the issue of poor performance in African schools. There is also difficulty identifying students who have disabilities. Abosi & Koay (2008) pinpoints that there are high levels of students performing below average and failure in school-leaving examinations in Africa; specifically, 30% of these examinations result in poor performance. Factors include school difficulties, overcrowded classrooms, poverty, health issues, teacher shortages and poor management of teacher expectations. Excluded from these factors is the capacity to monitor students for learning
disabilities or the ability to facilitate the development of programs that would contribute to more effective student performance.

For inclusive education to be a reality in the Nigerian classroom, it is important to look at social factors in the environment overall. Poverty and disability create difficulties, which suggest significant restriction for students in the establishment of education opportunities for all students (Biermann, 2016). This is because for students with a disability and that live in poverty, overcoming the institutional barriers that persist and maneuvering through the general power structures in Nigerian society is a surmountable challenge. Institutional pillars such as regulation, normalization and cultural-cognition each contribute to the barriers that persist in the establishment of inclusive education in Nigeria. For Nigerian students, if their family lacks social or economic power and they have a learning disability, they will face significant problems related to their development.

An important issue to consider is whether interventions can work in order to confront the current problems related to the lack of special education and inclusion in Nigerian schools. Adeniyi and Omigbodun (2016) examined the implementation of an intervention in Nigerian classrooms, where social skills were developed among students with intellectual disabilities as a means of contributing to improved performance in the classroom, and to prevent the development of mental disorders based on the treatment that they had received prior to intervention. These findings support the validity of the identification of the problem being such that the limited opportunities provided to students is tied to there being a deficit in structural factors, and that it is possible to change the system in ways that it would lead to better performance for students.
The importance of inclusion of students with disabilities in the general education classroom was the focus of research by Abosi and Koay (2008), where the researchers noted that education is developmental as it develops the unique qualities of a child, treats each child as an individual while appreciating their differences, and accommodates people of different backgrounds as a means of cooperative response to the problems that children face in the classroom. It is therefore essential for the classroom to be structured to meet these goals and that the development of teaching staff reflects the accomplishment of these goals (Abosi & Koay, 2008). According to Abosi and Koay (2008), the development goals for people with disabilities should be the elimination of poverty, the development of survival and practical skills, employability skills, empowerment and integration, which would be possible through an inclusive education system. Through the establishment of special education, there is then opportunity for all students; however, there are several political and social barriers that persist (Abosi & Koay, 2008). Abosi and Koay’s (2008) research is particularly important because it bridges the gap in understanding in order to see that the problem that students face is largely one where social stigma has created a classification where there is a lack of motivation to implement policy to actually support students with disability.

**Differing Perspectives on Learning Disability by Region**

Abang (1988) elucidates the issue of special education in Nigeria where there is a significant difference in the way students with disabilities are treated, which is dependent on different factors. One of the most significant factors impacting the nature of the treatment that students with disabilities experience in Nigerian schools is location. If students are in rural areas, it is more likely that those students generally will not go to school at all; and if the students attend school the family will either conceal or minimize the nature of the disability. In urban
areas, there has been greater focus on the establishment of special schools that provide special education. However, the establishment of special schools to accommodate the needs of children with learning disabilities is rejected by Mathias (2015), who views it is a way of avoiding inclusion. Abang (1988) notes that it is essential for special education needs to be addressed in concert with the establishment of improved healthcare for students, including an early diagnosis of disabilities. However, the problem with these findings is that even though there is diagnosis at an early age, the pathway of the student with a disability has changed minimally over the past few decades, and while there are generally espoused beliefs among teaching professionals related to the value of integration, its practice has been generally limited in Nigerian schools.

Further research related to the quality of programs designed for students with learning disabilities uncovered that while there are clear gaps between the quality and features of programs in other regions such as the US, it is possible for programs in developing countries to improve (Obiozor, Onu & Ugwoegbu, 2011). Obiozor, Onu and Ugwoegbu (2011) examined the academic and social challenges that African students face in terms of accommodations for learning and developmental disabilities and noted key differences between programs in developed nations such as the US and developing nations across Africa. These differences include structural features such as effective legislation an overall philosophy related to the development of curriculum and the establishment of support services that can be deployed at several levels to facilitate the development of students. Inclusion is featured as an important faction, leading to the conclusion that it is essential that there be a universal design of learning deployed in the development of students (Obiozor, Onu & Ugwoegbu, 2011). Obiozor, Onu and Ugwoegbu (2011) argue that students in African nations face problems related to their development and educators lack the capacity to assist students in meeting their potential with
their learning abilities. However, Obiozor, Onu and Ugwoegbu (2011) do not discuss the role of stigma in the problems African students experience in the classroom.

Within the scope of specific disabilities that impact the capacity of children to learn, some research has been performed to understand the prevalence of attention deficit/hyperactivity disorder (ADHD) among students in the Benin Metropolis in Nigeria. This research is vital to understanding the problem at the core of the current study, in that it involved an investigation of the ways in which students with disabilities learn in the Nigerian system. Egbochuku and Abikwi (2017) examined students to understand the prevalence of hyperactivity and inattention among them and found that 23.15% of students had symptoms of ADHD. This reveals the other side of disability in Nigerian schools, where children who have a disability are not identified, and therefore, have no accommodations in place. Overall, this reflects the nature of the system being such that students who escape the fate of being labeled as disabled also suffer the fate of progressing without accommodation. In both instances, the system does not facilitate the learning of these students.

The problems that Nigerian students with learning disabilities face in terms of equal access to education is apparently tied to greater social conditions wherein it is difficult for other groups of people to gain access to education. In the West Africa sub-region, in which Nigeria is situated, the enrollment of females in primary schools is significantly lower than that of male students (Tuwor & Sossou, 2008). Tuwor and Sossou (2008) presents several reasons for the differences in enrollment rates between males and females; however, they conclude that this gap can be best explained as being an element of cultural beliefs and attitudes coupled with a lack of mandatory measures that should be put in place to hold both parents and schools accountable for the learning and development of young women. The disparity between male and female
enrollment rates appears to be linked to the issue of students with learning disabilities where there is a lack of accountability on the part of parents and the education system, where education is “rationed out” only to those who appear to be the most robust and viable. It is also noted that females who should be in school miss the experience of formal education because they either marry young or are sold or kidnapped into child slavery or trafficking (Tuwor & Sossou, 2008). At the heart of the issue is a lack of government apparatus to protect young females, which is also reflective of a system that lacks the apparatus to protect students with learning disabilities from being denied the experience of a good education.

There is also a small body of research related to learning disability and the capacity to learn among Nigerian students. Aderemi and Pillay (2013) examined the role of intellectual disabilities among adolescent students in Nigeria learning about sexual abstinence and HIV. Abstinence and HIV knowledge are important elements of education in many African countries, including Nigeria, because of the prevalence of HIV/AIDS in the region. Aderemi and Pillay (2013) sought to fathom the differences in understanding and practice of treating children with and without intellectual disabilities in the Oyo state of Nigeria. The results were that there is statistically significantly less abstinence among students with learning disabilities than the students without a disability, and that female students with a learning disability were four times more likely to report a history of rape than girls without a learning disability. Aderemi and Pillay (2013) determined that beyond having a learning disability, social support and self-advocacy played significant roles in the likelihood that a student would engage in abstinence or not. These findings provide evidence that intellectual capacity, social factors and psychosocial elements all play a role in student learning, and as stigmatization is in part a social phenomenon, it could be a driving factor in the propensity of a student with a learning disability to perform poorly.
Stigma in Nigerian Schools

The issue of stigmatization and access to education for people with disabilities is a prevalent phenomenon. The phenomenon is also significant because it is associated with issues such as suicidal ideation and depression among students with learning disabilities. In Nigeria, students with learning disabilities have a significantly higher rate of suicidal ideation and depression than students without a disability (Oladele & Oladele, 2016). Stigmatization is associated with a lack of understanding of conditions in the community and among professionals (Oshodi et al., 2016). Azalde and Braathen (2018) conducted research on stigmatization and education access in low to middle income countries, aimed at understanding the current barriers that persist related to the urgency of equal access to education among vulnerable groups and the essential nature of including people with disabilities in the education system. They found that there are different factors that work as barriers and facilitators, and that they contribute to both the prevention and enablement of people with disabilities to access inclusive and quality education. Azalde and Braathen’s (2018) research determined that stigmatization impacts the student at several levels and that it comes from teachers, staff, peers, parents and students themselves. There is a lack of knowledge surrounding specific disabilities and the implementation of special and inclusive education approaches in low to middle income countries. The stigma continues to persist from a societal standpoint and remains an impediment to the development of the student. Azalde and Braathen (2018) concluded that there is a need to build a new understanding of what disability means and to eliminate the ways that disability impedes the development of students; they added that awareness campaigns are necessary to facilitate conversations related to the capacity for students to have a positive social experience in the classroom.
Generally, the approach taken to special education and the development of students with disabilities in Nigeria has been non-chalet, with the government assuming a passive attitude. However, the problem requires a more active approach wherein there is engagement and conscious support for students with disabilities. Obiakor and Afolayan (2012) examined the current paradigm in place in special education in Nigeria, acknowledging it as being one that has been hindered by several structural and environmental factors. Included in those factors is poor teacher development, lack of funding, negative perceptions of children with disabilities as well as negative cultural attitudes and beliefs. These factors have had a significant and negative impact in creating opportunities for children with disabilities in Nigeria. According to Obiakor and Afolayan (2012), change must occur from the standpoint of the government in terms of educating the public and there being greater funding for inclusion programs and staff development for these programs. The current research supports these findings as it is an examination of the experience of a student with a learning disability who is a product of cultural and political features.

To understand the problems associated with disabilities in primary and secondary schools in Nigeria, it is also beneficial to learn from post-secondary types of learning programs that exist in Nigeria, designed around facilitating development for people who have disabilities. The United Nations Development Programme and the Oyo state government in Nigeria established a community-based vocational rehabilitation program to facilitate improved living and learning conditions for adults with either learning or physical disabilities. Individuals involved in the program faced problems like those related to stigmatization, wherein people felt that being a part of the program would have negative social implications. Alade (2004) discovered that participation in these programs would contribute to successful and positive learning and training.
for people with disabilities. Based on the success of this program, there is evidence that
successful learning can occur in Nigeria through programs wherein greater participation and
inclusion are key priorities. These findings also support the current research as additional
evidence of the validity of the problem where the stigma of having a learning disability and
participation in Nigerian classrooms must be understood with greater depth.

There are several factors that play a pivotal role in the establishment of stigma related to
students with disabilities in Nigeria such as gender, knowledge and attitudes towards disabilities.
Lazarus and Oluwole (2017) investigated the general stigmatization that persists among students
with special education needs in Nigeria, finding that stigma remains a key issue impacting
childhood development and the preparation of children to be good citizens through education.
Lazarus and Oluwole (2017) surveyed civil servants working in education in Oyo state in Nigeria
and confirmed that there is severe stigmatization, a lack of knowledge and poor attitudes towards
students with disabilities in Nigeria. The issue of stigmatization was assessed by Lazarus and
Oluwole (2017) as being a social issue that requires educating the public to bring about
awareness and a better understanding of issues relating to stigmatization as being essential to
improve conditions for students with disabilities.

The stigmatization of students based on their status as “disabled” in Nigeria is highly
detrimental, as it can relegate a student to being largely neglected. Atilola, Omigbodun, Bella-
Awusah, Lagunju and Igbeneghu (2014) investigated the treatment of adolescents in custodial
institutions in the South-West region of Nigeria to understand the impact of being a part of such
institutions and having intellectual disabilities on the development of the student. Atilola et al.
(2014) found that stigmatization and social prejudice against students with these disabilities and
a lack of support systems contributed to their neglect. Part of the reason for the neglect and poor
treatment that these students experienced was a result of myths related to intellectual, psychiatric and neurological disabilities, wherein supernatural beliefs played a role in the way that children were treated. Prejudice among caregivers of children with such conditions also contributed to the difficulties that these children face. Atilola et al. (2014) support the implementation of curative and restorative services and hold that these should be a significant component of the social welfare and juvenile justice system in Nigeria.

In looking at the way learning disabilities are handled in Nigerian classrooms relating to anxiety disorders, researchers Frank-Briggs and Alikor (2010) found that students with learning disabilities had the highest levels of co-morbidity with anxiety. Frank-Briggs and Alikor (2010) also found that 18.68% of students with a learning disability also had an anxiety disorder, and that these students had significantly lower academic performance. Students with learning disabilities also experienced feelings of anxiety because of their fear of how they are perceived in the classroom and commonly because of the lack of management and accommodation received for their disorder (Frank-Briggs & Alikor, 2010). There is a persistent feeling among these students that they will underperform or not have the same opportunities as their counterparts because of the lack of accommodations received. While Frank-Briggs and Alikor’s (2010) research findings did not explicitly attribute the student’s experience to stigmatization, there is an apparent stigma in place where learning disability and anxiety are co-morbid as the social implications of having a learning disability prevail.

Stigmatization also plays a role in academic performance for students identified as having a learning disability. Osonwa, Adejobi, Iyam and Osonwa (2013) probed into the issue of academic performance of students in Nigeria, which revealed that factors related to the development of stigma in education contribute to the failure of students in Nigerian secondary
schools. According to Frank-Briggs and Alikor (2010), “to an extent, some groups of people are given social stigma…leading them to have limited opportunities, regardless of personal capabilities” (p. 119). This statement is important because it frames the issue of Nigerian students’ performance as being one that is in part related not only to the limitations of the student and the lack of accommodations, but also to the stigma attached to the disabilities of the students themselves. The conclusion is that there is a socially constructed limitation that students with disabilities face, while also being denied access to accommodations that could otherwise contribute to an improved learning environment.

Stigmatization is not limited to students who have learning disabilities but extends to students with all forms of disabilities, which is a prevalent issue in Nigeria. Eguavoen and Eniola (2016) investigated the issues of self-concept and social acceptance as they relate to the academic achievement of students with visual impairment in Nigeria. The research was focused on students in the Oyo state. The findings of Eguavoen and Eniola (2016) support the assertion that students with physical impairments also experience problems such as discrimination, stigmatization, neglect and isolation in the classroom, and that their experiences have created problems in the establishment of an effective learning environment. Eguavoen and Eniola (2016) also revealed that students with visual impairment experience lower levels of academic achievement and are more likely to have a lower self-concept and social acceptance. Eguavoen and Eniola (2016) conclude that these findings are evidence that special educators require greater training and development in dealing with students who have a visual impairment in order to devise ways to improve academic achievement. However, what appears to be missing from Eguavoen and Eniola’s (2016) discussion is the impact that instructors can have from the standpoint of establishing a more socially conducive setting in the classroom where student
development can be enhanced by the elimination of other factors such as discrimination, stigmatization, neglect and isolation. While these factors were noted as impacting students, the researchers did not indicate addressing them as part of the solution; thus, further research is needed in order to gain deeper insight into these factors so that recommendations can be made from an evidence-based perspective to alleviate them.

There is a general scarcity of resources in Nigeria to facilitate addressing disabilities in public services. Jack-Ide and Uys (2013) explored the barriers to mental health service delivery in the Niger Delta region of Nigeria and found that factors included inaccessibility in rural communities, poor knowledge related to mental health and stigma. These are factors that were previously found as common reasons for students not being able to access special education in the Nigerian education system for all students with disabilities, including learning disabilities. Significant to the current study, Jack-Ide and Uys (2013) concluded that stigma is a significant barrier to access mental health services in Nigeria and that it has created difficulty related to overcoming misconceptions and discrimination surrounding mental health care access. Thus, it is essential that there be greater focus placed on reducing the social stigma attached to learning disabilities in Nigeria. The current research was designed to contribute an in-depth understanding of the effects of stigmatization from the standpoint of a student in the Nigerian education system.

The exclusion of children with intellectual disabilities from the mainstream classroom is also a significant problem that creates barriers to education. Eni-Olorunda and Temitayo (2014) surveyed 169 teachers in the Oyo and Ogun states, finding that 57.4% of teachers are not able to cope with children with learning disabilities and that 84% of teachers disagreed that culture was a factor impacting intellectual disability. These findings are significant because they illustrate the
lack of understanding among teachers in Nigeria about the implications of exclusion and the role of culture in disability perception.

**Conclusion**

This literature review considered the topic of learning disability and the negative stigma that surrounds it. The learning impairments that students in Nigeria experience become exacerbated by the lack of understanding of learning disabilities and the replacement of medical and scientific understandings of these disabilities with spiritual rationale, which has remained a part of culture in the region for several generations. The stigma is such that many people believe that learning impairments are caused by spirits and superstitions, and families will often seek to avoid the stigma associated with their family being stricken with these conditions. As a result, the learning impairment becomes an even more significant learning disability because educators are frequently not told of the disability and when they are, their approach is often to treat the disability as though it is an indicator that the student will never be capable of learning. The literature review began by covering the issue of stigma and learning disabilities. A common theme in this discussion was the difference in how students from different areas are treated when it is discovered that they have a learning disability. Students in developing nations will often be treated differently than other non-identified students and the issue of stigma is avoided by educators. They will often refuse to deal with the problem of stigma in a way that leads to social accommodation for the condition and the student will often have to cope with the impairment and the implications of their disability not being accommodated. Stigma is also a factor that prevents parents and loved ones from seeking help for their child. Learning impairments lead to the disability being a significant barrier where special needs are not met in Nigerian schools. Chapter two closed with a discussion of disability and stigma in Nigerian schools. Disabilities
are framed as a social phenomenon where educators, peers, parents and the students themselves play a role in the disabling of the student and its significance in students’ lives. This means that the impact of impairment in Nigeria could be considered greater than in countries with an education infrastructure which includes support for the disabled because of the way that society views impairments. Chapter three describes the methodology for exploring the research question. The methods are based on the study being qualitative and autoethnographic in nature.

**Methodology**

The purpose of this qualitative, autoethnographic research was to explore the lived experience of the participant and engage in self-reflection through the theoretical lens of disability studies theory. An autoethnographical approach was selected for this study because of its benefits from the standpoint of placing the subjectivity of the researcher in the foreground rather than to impose limitations as is customary in traditional empirical research. In the autoethnography the researcher also has the role of being the primary participant of the research, with her personal narrative being the primary data examined in the study (Chang, 2016). The autoethnography design depends on the researcher taking the position of embracing her personal thoughts and feelings as a means of developing a greater understanding of the context and setting of the study, while also sharing those personal thoughts and feelings with readers (Margolis & Pauwles, 2011). The autoethnography also contributes to a greater understanding of a phenomenon by rejecting the construction of research as being a relationship where researched phenomenon must be outside of the boundaries of the researcher by making the researcher and researched the same.

Ellis and Bochner (2000) support the use of the autoethnography as a research method as it is an “autobiographical genre of writing that displays multiple layers of consciousness,
connecting the personal and the cultural” (p. 739). The act of connecting the personal with the cultural is at the core of the current research. The objective is to understand the single case of the researcher from her personal experience within the context of culture at large in the form of the theoretical framework applied in this study. Based on these aspects of the autoethnography, for the current research the approach is suitable in that it supports deeper learning of the social, cultural and schooling factors that lead to the stigmatization of students with learning disabilities in Nigeria; deeper understanding of emotion, social interaction and critical incidents contribute to a stronger understanding of the phenomenon.

Ethical Considerations

The autoethnography is a unique type of research where the researcher is also the case under investigation. There are unique ethical considerations associated with this research approach because of the position of the case investigated and the entities that lay parallel to it (Sikes, 2015). The publication of the autoethnography means that the experience of the researcher, and potentially those who are associated with the researcher, become known entities and the description of the case become public knowledge. This situation creates the need for greater consideration of the issue of anonymity and the lack of protection that the researcher can guarantee for people who otherwise are not associated with the research project. The implications of the research for people who could be identified through information in the manuscript, but who traditionally would not be considered necessary to obtain consent from, must be weighed by the researcher; the researcher must also weigh the implications of the publication of the case for herself.

One key ethical consideration in this study is how the discussion could impact people associated with the primary investigator-participant. The single case under investigation in this
study is known and it is possible to link back to where the investigator-participant was born, as well as her educational history. By making known who she is and that her experiences in the Nigerian school system were what they were, the investigator is creating a scenario where people can be identified and the experience could reflect poorly on the people who taught in the same schools that the researcher-participant learned in. Another ethical consideration is whether the impact of making these findings known could be greater than the impact that the findings could have on the education system in Nigeria. It is essential that there be a greater benefit than cost from this research, otherwise, conducting the research would be unethical. Another ethical consideration is the issue of risk minimization. While efforts could be taken in the write-up of the manuscript for this study to limit risk by way of anonymizing persons and places, the anonymized factors of the study could be blanks filled in easily by an individual who had interest in determining where in Nigeria these experiences took place and the parties who were involved. These ethical considerations cannot be minimized; however, the autoethnography is important because it offers a synthesis of understanding specific experiences in Nigeria through the lens of a framework that contributes to understanding the implications of social factors of disability in Nigeria.

**Research Design and Analysis Approach**

An analytic autoethnographic approach was taken in this research where there was a focus placed on developing a theoretical explanation surrounding the social model of disability regarding the social phenomenon of the stigmatization of students experiencing learning disabilities in Nigeria. Personal narrative of the subject, who is also the primary investigator of the study, was examined within the theoretical framework of the social model of disability in order to develop a stronger understanding of the phenomenon and how the experiences are
nested within theory. Ellingson and Ellis (2008) note that there is a distinction between analytic and evocative autoethnographic research where one relies on theoretical explanations and the other is designed to promote discussion and elicit response among readers. An analytic approach to the autoethnography was selected for the current study because it appears to be better aligned with a scientific approach where new knowledge could be developed from the findings. The use of narrative from the personal experience of the primary investigator relied on review of writings to determine common themes (Spry, 2016). These common themes were then examined in the context of the body of literature related to the social model of disability. Findings were then matched between the themes and the model to determine the ways that the autoethnographic case fits within the greater framework of the social phenomenon investigated. The findings were then presented in the form of a table that expresses the nature of how the researcher’s experience fits in the model.

**Findings**

This section presents the findings of the autoethnographic study, beginning with a presentation of the data through an autoethnographic discussion, which is followed by a discussion of the findings. The findings are then assembled into a table that groups themes with elements of the social model of disability. The social model of disability is employed in this section, as the theoretical framework of the thematic findings of the study are nested. The social model of disability was chosen as the theoretical framework because of its suitability within the issue of education and inclusion, while also being related to the topic of inclusion. The four barriers discussed in Willder (2017) are also utilized in this section; the themes discussed were formed based on reflection and analysis of data taken from the implementation of an autoethnographic process of data collection. The findings examined in this chapter serve as the
foundation for discussion of what the findings mean in the larger body of research and
collaborations discussed in the chapter that follows.

Autoethnographic Discussion

As an individual with mental impairments living in Nigeria, there were several instances
in the K-12 system wherein insufficient accommodation impacted my personal development and
learning. In Nigeria, there are few accommodations for students with mental impairments—
which are a form of learning disability. These disabilities were stigmatized because there was a
lack of focus on facilitating the success of students dealing with impairment. My peers were
awake of my struggle to keep pace with the class and noticed that I lagged them in terms of
classroom productivity. As a result, they considered my presence in the classroom a burden.
Socially, it was difficult to find people to collaborate during group work or to study with outside
the classroom. The challenges that accompanied my learning disability manifested themselves as
social problems that set me apart from my peers and impacted my performance even more.
While other students could improve through team work, I could not because students did not
want to work with me. My peers ostracized me, either by ignoring me when I sought to work
with them or suggesting that I left them alone, all because of the stigma associated with my
learning disability. This stigma influenced their perception and attitudes towards me. As a result,
the challenges associated with my disability intensified, affecting my performance drastically. I
became conditioned to perceiving school as a negative experience, just as individuals had
perceived my presence in the classroom as negative.

Perception of Impairment as an Ancestral Curse

From my earliest experiences in school systems in Nigeria, a common theme was always
the assumption that my learning impairments were caused by some supernatural factor, and that
as it was the fault of my ancestors that I had received such a curse, my family should be responsible for determining solutions. The root cause of the disability was never consistent. One was that God had placed a curse on my family and my disability was the product of an ancestor committing a great wrong. Because the disability was caused by our own people, my family would need to address the problem on their own. Another belief was that my disability was brought on by a spellcaster, similar to a witch, a person who has knowledge of supernatural magic. Again, my family would need to take responsibility for the condition, and it was up to them to determine their response. Curing the condition, becoming a lifetime ward of my parents or paying a premium for education to accommodate my needs were the options that my family was left with. My father chose the option of paying for additional services designed to accommodate my education. Still, because of the belief that my impairments were brought on by supernatural factors, when educators failed to accommodate my needs, blame was placed on the supernatural cause for my condition. Because it was easier and culturally made more sense to attribute failure of accommodations to supernatural factors, there was not responsibility or accountability, only stigma.

The Burdens of Disability on Family

There were several burdens which were placed on my family because of my disability. These burdens were greatly related to economic and social factors. As an economic factor, my disability created expenses for my father that would subsequently cost him a significant amount of his income and lead my father to sell property he owned. The cost of accommodations were substantial because of the lack of professionals in Nigeria to address intellectual disability. Professionals had difficulty because of poor training and development, as well as a lack of standards. The most significant costs which came from my disability included the cost of tutors
and learning materials which were crafted to address learning disability for people with my specific conditions. My father would have to work more in his job and he sold real estate and personal items in order to pay the cost of accommodations which often failed to address personal disability. The cost of further lecture time for me was a cost which was difficult to encumber.

In addition to the economic cost, there was also a social cost which went along with my disability. Our family experienced significant scorn in the community because of my disability. I was told by my mother that when it was determined that I had a learning disability, the family had to decide on whether to tell me about this because of the ramifications the discovery could have on our standing in the community. My parents were not leaders in the community, but they were respected members of the community. Eventually, as I received accommodations, other families learned of the nature of my disability. The families in our community were cold and began to bully my parents and siblings. They believed that there was a supernatural curse placed on our entire family and that our family was less viable and did damage to the community. The ostracism that my parents received eventually caused my father to experience economic hardship where he lost a position at work and was required to work more hours for the same amount of pay. Women in the community would not associate with my mother. In addition, children were instructed by their parents to ridicule me in school.

The Ridicule of Peers

Peers singled me out for ridicule because they had seen that I was receiving extra accommodations with my studies, because I was treated differently in the classroom and because parents in the community learned of my disability and instructed their children to not allow me to feel comfortable in the classroom. In the classroom I would receive ridicule and attention every time I was called upon to respond in lessons. The instructors would commonly make a show of
embarrassing me in front of the children and use me as an example of why children in the classroom would want to be correct. Teachers would outright use insulting language towards me. This created a classroom culture where it was permissible for students to attack me. The purpose of this on the part of instructors felt like by making an example of me, that other students would try harder in the classroom. In groupwork, students would not allow me into their groups. The teacher would typically place me in groups where I would be focused upon for ridicule and told what to do by other group members. When I did not achieve what they wanted, then they would either ridicule me further or report me to the instructor. On several occasions I was given a non-passing grade when this happened without any investigation by the instructor. Students would not allow me in social situations and when I attempted to socialize with peers I would be verbally or physically abused by my peers.

**Attitudes and Learning Disability**

Negative attitudes came from several sources, including teachers, staff, peers and parents. These attitudes created barriers to learning in several ways. Teaching staff are on the front line of the development of students. Their position of authority and as a role model set the expectations of students. When their expectations are manipulated because of impairments, then a disability is created. A critical incident occurred in the classroom during a reading exercise. As a class, we were given the task of reading aloud from a textbook. When it was my turn, my impairments created difficulty. Rather than accommodating me, my teacher overlooked me. This became a recurring pattern, as staff members did not understand the nature of my impairments and refused accommodations. Their ignorance regarding the nature of my impairments created further difficulties where both teachers and staff refused accommodations. Prior to this, when I was younger, several of my peers saw my disability as a problem wherein they did not quite
understand my impairments and were afraid that I would either cause them to slow down or that I would create problems for them. This resulted in me being bullied by my peers. Fear was a common problem in my family as well, where some family members assumed that there was something unnatural about me because of my disabilities. Overall, attitudinal barriers associated with my learning disability created significant difficulties through my learning experience, which created even greater challenges because there was no social network to depend on and authority figures who assumed that they understood what was best for me, would rather lower expectations than provide accommodation.

**The Learning Environment and Learning Disability**

The learning environment at my school was not conducive to my personal development. While the environment supported accessibility, there was a lack of design features in the curriculum to support students with learning disabilities. On one occasion, my teacher asked me to perform a math problem on the blackboard. Although I was physically able to complete the problem, my learning impairments prevented me from understanding the material up to that point. Because of the challenge that came with understanding the material, the environment—in terms of how the coursework had been set up—was not structured in a way that supported successful completion of the problem. My learning disability was not supported in the classroom by teachers refusing to develop materials that my family could use to work with me on development outside of the classroom. Teachers also refused to give me feedback that could facilitate better development. Also, while the school had informed my parents of my learning disability, it failed to support my family’s understanding of my disability and did not provide the tools that they needed in order to facilitate my personal development in the classroom effectively.
Coming to Canada and ESL

The decision to come to Canada was not made in haste. Years of experience in the classroom, on the street and in the home led to the conclusion that I could never be treated fairly and equally in Nigeria. I would need to leave and explore other places to find a place to call home where I could be treated fairly and equally. I needed to find greener pastures in order to build a fulfilling life. Canada was selected because of the ease of entry in comparison with other Western nations and the nature of the education system. Becoming acclimated to the culture of Canada was difficult and required greater time than I thought it would take before coming to Canada. The culture of Canada felt welcoming; however, the nature of social interaction and the ways that people would communicate were foreign to me. While I appreciated the differences between Nigeria and Canada where I would not experience the same type of treatment that I had in the past, there were language and cultural barriers which functioned as social impairments which led to becoming more reclusive from Canadian society. From a social standpoint, I felt that while in Nigeria I was ostracized and shut out from the community, I was shutting myself out from community in Canada because of my lack of familiarity with people in Canada. I needed to improve my ability to communicate.

I returned to school in Canada and began taking ESL courses as a way to develop my communication capabilities. English as a Second Language was important to me because of the importance of understanding how to communicate with other Canadians. At this point I had become reclusive and was mainly communicating with family over the internet and looking for other Nigerians to communicate with. I did not want to just leave Nigeria to find Nigerians abroad to be friends with, I knew I would have to do something to self-improve. I learned that Canada will support students living with disabilities in ways which could contribute to their
success in the classroom. Further, I learned that there are many other people living with
disability in Canada, and that their disabilities did not create significant difficulty in terms of
their ability to live a life similar to that of people who are living without disability. Essentially, I
did not want to have privilege that other people did not have. I wanted the ability to live life with
the same opportunities that people without disability live. Upon arrival to Canada, I selected
English as a Second Language (ESL) courses as a way to improve my understanding of the
English language. The ESL courses were difficult and I had a lack of understanding of what was
happening in them because they moved quickly and the speed of the classes made it confusing. I
needed a way to learn the same material in the classroom, but also required some form of
facilitation on the part of the school to support my learning experience. I became frustrated and
chose to step away from education, but knew that it was something I would need to come back to
if I was going to have a fulfilling, successful and satisfactory life.

**Accommodations**

I did not know how this could be achieved; however, a peer in an ESL course informed
me about the potential to access accommodations from our instructor. Upon discovering
accommodations, I learned that it was possible to live a happier, healthier life through assistance
that could support my personal development and preparation for becoming a better citizen. A
peer in my ESL and I spoke about my personal impairments and the impact that they were
having on my ability to learn in the classroom. My peer told me about the challenges that they
face and that if I were to speak with out instructor about the challenges that I was facing in the
classroom, that I would receive accommodations which would support my success in the
classroom. This was confusing because of prior experience with learning in the classroom where
teachers would not work with students or ensure that they would have access to
accommodations. Teachers preferred to teach all members of the class at the same speed using the same materials to educate the class in Nigeria. Learning about the ability to gain access to accommodations that would support my success was transformational for my education experience.

To receive accommodations, some documentation from a professional was required. The documentation was in the form of a letter which outlined the nature of accommodations and the thing that I would need in order to be successful in the classroom. There are several accommodations for impairments which were listed as essential to overcome personal disability. Further discussion with my teacher led to the determination that accommodations can be met and that they would involve a mix of teacher time outside of normal classroom hours and tools which could support learning away from the classroom. There were several accommodations which my teacher made for me which made accommodation successful. My teacher agreed to spend extra time with me in order to support learning classroom materials. In addition, I was given books and access to one-on-one sessions with teachers who were experts in ESL. My teacher also used motiveative speaking as a tool to encourage my learning further. Never before did I have an experience in education where a teacher was going beyond the scope of their normal duties as a way to ensure my success outside of the classroom or the ability to be able to learn in a way where my disabilities were being accommodated by the school. Because of these experiences and my knowledge of the impact that accommodations will have on learning, I was able to become a better student and completed my secondary education in Canada.

Success with Stigma

My experience in ESL informed me of the importance of accommodations where they are important tools which can facilitate effective learning and improve the ability of students to learn
when they are experiencing some form of impairment. I was able to be successful through accommodations to the point of earning a high school diploma because I learned the importance of treating the education experience as a team experience where several people must work together in order to achieve. People learn in different ways and in some cultures that may carry a stigma, but even if there is a stigma attached to having disability, it is essential that accommodations are made. Learning disabilities will impact the capabilities of people in significantly different ways, therefore, it is essential to focus on overcoming these disabilities together and as a community. Following my experience, I now work as a volunteer in my community and work with people in the community from different socio-economic backgrounds to facilitate improved learning for them. Just as the community helped me when I need it, I now help the community myself. The social structure in Nigeria would never support the completion of high school, let alone college, but I am at the point of earning a Master’s degree because the society I live in now has lifted feelings of discrimination, stigma and fear. I was always able to accomplish these things, I just needed the right social setting to do so.

The Organization of Learning and Learning Disability

The organization of learning, in terms of how the classroom was designed, played a pivotal role in my development. The classroom was designed in a way that supported the learning of other children. Fortunately, our school received funding and learning materials from the UN, but for children with disabilities, these resources were not as useful because our teachers were not trained in how to use them to enhance our learning. On one occasion, our class was given the opportunity to go on an educational excursion; however, because of my learning disability, my teachers informed my parents that it would be best if I was not included on the
excursion. In other instances, the organization of classroom activities prevented me from learning effectively and from completing the same activities as my peers. During grade 6, I was placed in a special education class, where there was less of a focus on education and a greater focus on teaching basic skills such as simple math and introductory reading to the general classroom. There was also no focus on helping students overcome impairments.

**Classroom Communication and Learning Disability**

There were several areas where poor classroom communication contributed to the difficulties of learning rather than overcoming the challenges associated with my learning disability. The communication in the mainstream classroom was designed for students without disability, and there were no supplemental learning materials or tools for students with learning disabilities. The design of assignments was modified for students with disabilities to lower expectations, and communication of requirements was never a focus in terms of differences between students with and without learning impairments. Assignments were structured differently with less requirements. Teachers would generally ignore efforts made by students with disabilities to talk to them about design features of assignments. Overall, the difficulties of impairment were magnified and made worse through poor classroom communication.

**The Role of Stigma**

Impairments to learning and the attitudinal, environmental, organizational and communication boundaries in my learning experience were made worse through the stigma associated with my learning disability. Learning disabilities were stigmatized by teachers, staff, peers and family. The stigmatization of my learning disability reinforced the barriers to learning in the classroom and in completing coursework outside of the classroom. The people in my learning environment felt that their perceptions of me as being intellectually deficient were well
founded and that the best solution would be to modify expectations; they were not interested in making modifications to the environment or organization in ways that would more effectively support overcoming the challenges that accompanied my learning disabilities. By placing me in special education and excluding me from the mainstream curriculum, my access to equal education was blocked based on the stigma surrounding my disability. Communication barriers were not accommodated because they were all attributed to my disability. Overall, the social model of disability supports the assertion that stigma reinforces barriers to overcoming learning difficulties in school.

**Learning Disability, Social Model of Disability and Stigma in the Nigerian School**

The disabling process is fortified by stigma. The people and processes within a school are not set up to accommodate or support students with learning disabilities (Figure 1). Students with learning disabilities have the choice of being in special education where they are prevented from learning alongside children who do have impairments, or who do not have accommodations. The stigma surrounding learning disabilities invalidates the needs of impaired students. The impairments do not create the disability, the people and processes in the system react poorly and do not accommodate the impairments because of barriers and the establishment of an overall stigma associated with the learning disability. Students who have disabilities are not broken, they are impaired, and fixing the system would allow them to function effectively within it.
Stigma plays a substantial role in the social model of disability, particularly in this case, because it is a factor that links the people and processes of the school to barriers. There are several barriers to accommodation, and experiences with these barriers are such that there is a complete lack of opportunity and resources available to overcome these barriers. Social stigma supports the continuation of these barriers having an impact on educational experience because impairments will not be accommodated; rather, the impairments are assumed to be rationale for the lack of resources and support.

Conclusion

The findings in the current research support the findings in previous research related to the phenomenon of disability and a lack of accommodation for impairments in Nigeria. The autoethnographic research contributed a deeper understanding of the phenomenon from the
standpoint of the experience of a single student. The experience of the student offered a new perspective on the role of stigma as one wherein factors of the social model of disability are reinforced through the stigma created by learning disabilities where the people and processes of the system fail to support students with disabilities. As a result of the lack of support received, barriers become stronger because the impairments result in the disabilities of students becoming more pronounced. The system does not manage these disabilities well and the outcome is that the student does not receive the same quality of education as his or her peers.

**Impact of Findings on Previous Research**

The findings of the current research have implications for several other pieces of research reviewed in this study. An example of this is research by Adebisi, Jerry, Rasaki and Igwe (2014) where the researchers investigated barriers to the delivery of education to children with special needs. The researchers found that a lack of systemic support, negative attitudes and stigmatization, all contributed to the poor level of education among students with learning impairments. Based on their findings and the findings in this study, there is greater support for the role attitudes play as a barrier to equal education for students with learning impairments. Ajuwon, Ogbonna and Umolu (2014) also found that there were significant organizational barriers that contributed to the difficulties that students experienced in terms of access to equal education. The researchers noted that Nigeria has a problem of a shortage of special education teachers. The current research focused on this as an organizational barrier, and the lack of teaching staff as an example of the way the human element of the system works to support the establishment of stigma, in particular in the lack of value placed on special education or on choosing special education as a career path. At the same time, Njenga (2009) contributed evidence that there is a high level of discrimination in Nigeria related to people with learning
disabilities, and that the stigma is significantly related to prevailing attitudes. The way in which attitude and people interact through stigma was discussed in Njenga’s study as being extreme, with many people believing that learning disabilities are related to a supernatural phenomenon and that special education is not the ultimate solution to the problem. Ajoku-Christopher’s (2012) findings also support the current research and provide evidence that the system is created poorly in terms of the capacity to deal with students with disabilities. Given the limitations that these students experience, it is essential that organizational resources be designated to overcome learning impairments.

**Potential Solutions**

This research provides insight into the way learning disability works and is made worse through the design of the overall educational system in Nigeria. There are several suggestions that could have a positive impact on overcoming the problems that students with learning impairments cope with. However, solutions must be founded in changes to people and processes within the education system and a challenge to the stigma that currently surrounds learning disabilities. These solutions should address the social model of disability barriers to overcome the barriers, which continue to persist. The attitudes of people within the system must be addressed. People’s attitudes towards learning impairment contribute to the challenges students with learning disabilities face, significantly. One way that they must be confronted is by educating educators and the families of people with disabilities about why the disability exists and what is the root impairment of the student. People must understand the nature of their impairment, and that their impairment is not the product of supernatural rationale. People must also understand that people with learning disabilities can learn effectively if their impairments are accommodated by the school. The stigma surrounding their disability must also be
confronted. This can happen through education on the difference between impairment and disability. Also, environmental barriers should be challenged by teachers where they support students with disabilities in the classroom completing work. Organizational barriers must be challenged as well. Organizational barriers such as the design of the classroom and segregation are detrimental to the development of students and contribute to the difficulties they face in the classroom. Segregation also reinforces stigma because it is an explicit act of dividing students into groups. By placing students with disabilities together, apart from those without a disability, the former are denied the right to socialize with children who do not have a disability.

Communication barriers must be challenged as well. Communication barriers create a difference between students who have a disability and those who do not and support stigmatization because they impact the capacity of the student who is stigmatized to communicate with others. Communication should be designed in a way that supports everyone in the classroom.

**Closing Remarks**

In closing, the impairments that come from having a learning disability can vary; however, people experiencing learning disabilities will typically carry a negative stigma associated with the need for accommodations for their impairments. The learning disability that is not accommodated creates a barrier in the life of the person with the disability, which is difficult to overcome without social support. For individuals experiencing these impairments, the negative stigma of acknowledging them could be perceived as being great enough that it creates greater barriers in their life. This paper employed an autoethnographic approach to understanding the problem of the negative stigma associated with learning disabilities in learning institutions in Nigeria to understand the wider cultural and social ramifications through the social model of disability and the use of an autoethnographic research method and design. The use of an
autoethnographic approach facilitated the development of an understanding of how culture and society contribute to the stigmatization of learning disability. The personal experience of having a learning disability in learning institutions was that the impairments were not accommodated, and the disability carried a negative stigma where students focused on the impairments as points whereby disdain and harassment were common experiences. As other students focused on the learning disabilities, it became a factor that made learning even more difficult because it was difficult to focus on coursework; this in turn contributed to their disengagement from the social system in the learning institution. From these findings, it is apparent that for students with learning disabilities to succeed, they need to have accommodations for their impairments and social development facilitated. It is critical that both intellectual and social elements of the student’s experience with the learning institution are accommodated by faculty. By doing this, students with learning disabilities will be empowered to be successful and the negative stigma created by poor accommodation of impairments will be eliminated.

**Limitations**

There are several limitations that are connected to the performance of ethnographic research. One such limitation is that it requires that the researcher be introspective to the point where there may be ethical considerations that need to be made. While researchers are trained to acknowledge possible ethical considerations, self-identification of instances where the research delves too deeply into her emotions, which could cause emotional distress, is a factor that is typically difficult for the researcher as they have a vested interest in the completion of the research. Another limitation to this research is that there is only one case that is examined. As a result, the findings of this research should not be generalized. Another limitation to this research is that it is based on the thoughts, feelings and perceptions of the single participant and the
participant is also the primary investigator. This could create some degree of bias in the interpretation of findings and the extent to which findings would be made public by the researcher.
References


