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# No Returns: Special Education in Sierra Leone

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# SENIOR THESIS APPROVAL

This Honors thesis entitled

"No Returns: Special Education in Sierra Leone"

written by

Abigail Adele Richett

and submitted in partial fulfillment of the requirements for completion of the Carl Goodson Honors Program meets the criteria for acceptance and has been approved by the undersigned readers.

Dr. Kathy Collins, thesis director

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Running head: SPECIAL EDUCATION

No Returns: Special Education in Sierra Leone

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#### Special Education in Sierra Leone

When I applied to travel to Sierra Leone in 2018, it was with the intent of researching special education in Freetown. In my mind, this meant researching schools and special services in a Sierra Leonean context. I had traveled to Sierra Leone twice before in 2013 and 2016, and I was aware that the school systems in Sierra Leone are a work in progress. Due to many factors, including the Civil War (1991-2002) and the more recent Ebola epidemic (2014-2016), the country is working to rebuild and develop its school system ("Sierra Leone Profile - Timeline," 2018). In 2015, 27% of children ages 6-11 were not enrolled in school, and the Ministry of Basic and Senior Secondary Education is working to decrease that percentage each year (Ministry of Education, Science, and Technology, n.d.). Schools may often lack supplies, trained teachers, and integrity in finances and relationships -- all issues the ministry seeks to correct (Ministry of Education, Science, and Technology, n.d.). Although I had some prior knowledge about the challenge of education in Sierra Leone, I was not prepared for the specific challenges children with disabilities face in Sierra Leone -- challenges that often eclipse their access to an education in the first place.

In June of 2018, I traveled to Freetown, Sierra Leone to spend a week researching special education in the country. My research was primarily composed of interviews and observations of those working with children with disabilities in Freetown. Coming out of a first interview in-country that highlighted Freetown's lack of support for special education and the vulnerability of children with disabilities in Sierra Leone, I remember wondering if I could find something productive to write about during my visit. I believe in a focus on strengths -- as well as a realistic understanding of needs -- and I knew I had discovered more than enough needs to fill a book.

The school programs and special services I had naively hoped to research did not exist, and I could not conceive of writing only about what was simply not in place yet. I knew that to paint an accurate picture of special education in Sierra Leone, I needed to find more than just the field's missing pieces.

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Thankfully, as the week progressed, I found what was undeniably present in the country

-- groups of dedicated individuals working to challenge cultural norms and provide hope to one
of Sierra Leone's most vulnerable populations. This thesis intends to highlight their work and
express its value in light of the context in which they operate. In a culture that overwhelmingly
views children with disabilities as threatening, insignificant, or returnable, these individuals are
working to make these children an understood and celebrated part of their communities with
meaningful and hopeful futures.

### Introduction to The Raining Season

One such organization is The Raining Season, who graciously hosted me as part of a visiting team in June of 2018. The Raining Season is a non-profit organization that works with orphans in Freetown, Sierra Leone. The Raining Season was launched by a small group of Americans and Sierra Leoneans in 2007, and currently runs an orphanage, a private school, and a transitional program for children aging out of orphanage care in Freetown (Our History, n.d.). During my time in Freetown, The Raining Season offered me numerous research opportunities through the organization and through their network in the city, providing me with experiences I could not have had access to otherwise. I am very grateful for their investment in this project.

The Raining Season (TRS) primarily runs an orphanage facility in Freetown called the Covering, which is home to about 100 children. The facility contains eight apartments where

children live, office facilities, a building for cooking, a garden, a well, a nurse's office, and a private primary school. Their goal is to provide a "safe place for children to live while waiting for their permanent families via reunification, in country adoption, or international forever family placement" ("The Covering", n.d., para. 2). Through jobs in caretaking, pastoral work, medicine, security, management, secretarial work, social work, and more, the Covering provides work for 67 Sierra Leonean families ("The Covering", n.d.). Most notably for this project, TRS provides quality care for their residents with disabilities and is making strong strides toward inclusion at the Covering, which is notable in a culture that generally leaves its members with disabilities on the fringes.

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At the time of my research trip, the Hope Apartment at the Covering was home to nine children with disabilities, ages five through 18, with one more child scheduled to arrive in the near future. Disabilities represented in the Hope Apartment include blindness, autism, Cerebral Palsy, and intellectual disabilities. Oftentimes, a child with a disability may not get an official diagnosis in Sierra Leone, and many of the children with disabilities who live outside of the Hope Apartment do not have one (A. Currie, personal communication, June 6, 2018). Geraldine Gaima manages the apartment, leading a team of eight caregivers, four at a time in each shift. Gaima is a nurse and is also trained in Physical Therapy and Occupational Therapy. She has been a part of the TRS team since the organization launched, and she is dedicated to her calling. Watching her interact with the children in her care is a delight — her love for them is clear to see, and she takes great pride in them as individuals. I consistently observed Gaima taking time out of her busy day to engage with the children in her care, kneeling down on their level to converse and play. During the week, Gaima introduced me to the Hope Apartment with the greatest

affection and respect -- each time she spoke of a child, I felt like I was meeting the most important resident at the Covering. The children in her apartment receive careful care, and even those with low mobility are clean, healthy, and free from the sores that can so easily occur when an individual has a constricted range of motion.

On the porch of the Hope Apartment, you can usually see children sitting out in strollers, playing, or watching life happening around them. The Covering is a busy, happy place. Directly inside the door of the Hope Apartment is a space with cots and bunk beds where most of the community living seems to happen. Further on, there are rooms for sleeping, spaces for bathing, and a boarded-off section of the apartment that makes up a room for a resident with seizures and severe behavioral issues. The apartment recently lost a significant amount of equipment to a center-wide bedbug infestation, which currently leaves them with a shortage, and some of their more non-mobile residents spend a great deal of time on the cots in the community living area. The apartment could benefit from special equipment, such as positioning chairs, to remedy this.

The Raining Season is making strides towards inclusion in their center and seeks to integrate the residents of the Hope Apartment into life at the Covering (C. Currie, personal communication, June 5, 2018). Only children who need more specific care reside in the Hope Apartment, as there are too many children with both diagnosed and undiagnosed needs to concentrate them in one apartment. Most of the children in the Hope Apartment have conditions that require near-constant care, such as cerebral palsy, autism, or severe behaviors. Children with less demanding needs are dispersed in apartments across the center, living as much as possible with their peer group. Some of these conditions include intellectual disabilities and deafness. It is important to note that many children with disabilities in Sierra Leone do not receive an official

diagnosis, so living placement at the Covering is often based less on a specific diagnosis and more on the physical needs of a resident and the environment in which those needs can be met. Gaima remotely manages the care of those with disabilities outside of the Hope Apartment, helping their caregivers know how to meet the needs of the children for whom they are responsible (G. Gaima, personal communication, June 5, 2018).

The center has a large courtyard with basketball hoops, and the children who live at the Covering often spend evenings playing basketball, football, jump rope, and other games along the outside of the apartments. The entire orphanage gathers for evening devotions regularly, and the Freedom in Christ Church meets in the large meeting room of the school on Sunday mornings. In all of these things, the caregivers in the Hope Apartment try to ensure that their charges are generally included to the extent that abilities and staffing will allow. In the evenings, residents of the Hope Apartment can be found outside where the other children are playing and doing each other's hair, enjoying the evening with everyone else. A majority of them worship in church on Sundays. Gaima told me that it was their plan to have the baby apartment and the Hope Apartment trade places, putting the residents with less mobility or autonomy right next to the offices -- the hub of the facility -- and nearer to the common play area. This puts the Hope Apartment in a prominent and valuable position, reinforcing its presence as an integral and valuable part of TRS community. The new apartment will also provide the program with more space, filling a major need for the staff working in the Hope Apartment. One child in their care struggles with seizures and behavioral issues, and more space would lessen the risk that he could hurt himself during a seizure or inadvertently hurt another resident because of a behavior (G. Gaima, personal communication, June 5, 2018).

The way the residents of the Hope Apartment are treated at The Covering starts from the top of leadership and works its way through each facet of the TRS community. Gaima is passionate about advocating for the children in her care. The staff has been trained to understand and work with the residents of the Hope Apartment, and they each model consistent, caring, positive attitudes towards them. As a result, the other children at the orphanage grow up with this sort of respect towards individuals with disabilities being a norm, and they treat peers of differing abilities with an amount of consideration rare to found outside TRS walls. During my visits to the Covering, I've observed children without exceptionalities reading to children in strollers, including children from the Hope Apartment in games, and showing sibling-like affection towards residents of all abilities. Of course, no environment will be perfect, and even in the most inclusive setting people will still have prejudices and attitudes they will need to adjust and work through. Not even siblings in a typical family setting will always treat each other perfectly. However, the attitude at the center is overwhelmingly celebratory towards its members with disabilities, and seeing TRS set this example for the community was profound.

#### **Overview of Conditions**

Part of what makes the atmosphere at the Covering so sweet is how dramatically it contrasts with the cultural climate outside of its walls. The environment surrounding individuals with disabilities in Sierra Leone is overwhelmingly uneducated and non-inclusive. Individuals with disabilities face stigmas, poverty of resources, and insufficient care. The climate at large can range from generally ignorant and unsupportive to blatantly hostile and aggressive.

Many of the issues affecting those with disabilities are the direct results of miseducation and fear. Witchcraft practices never failed to be brought up by those who work in the field in

Freetown, and I was told that it becomes even more prevalent as one moves upcountry, away from the city (A. Vines, personal communication, June 6, 2018). Because of the prevalence of witchcraft in the culture, it is often thought that children with disabilities are related to the spirit world, and they can be called "devil children" or "demon children" (A. Vines, personal communication, June 6, 2018). Due to their distinctive features, it is especially common for children with Down Syndrome to be referred to as "demon children" (E. Bockarie, personal communication, June 7, 2018). Because people believe so strongly that a child with a disability has come from another world, many will not want anything to do with them. In many cases, parents are urged to "return" their child to the underworld through the aid of spiritual healers (A. Kamara, personal communication, June 6, 2018). This is an unfortunately common practice as one moves upcountry (A. Kamara, personal communication, June 6, 2018).

Parents may seek help for their child from a variety of sources if they can afford it, but will often end up turning to a spiritual healer when they do not find the cure they seek from a medical doctor or hospital. A spiritual healer has ways of determining whether a child is from another world, most usually indicated by certain signs in the child's features and actions (A. Kamara, personal communication, June 6, 2018). If it is determined that the child is from an evil spirit, the parents are told they must return their child. This essentially involves leaving the child under a cotton tree to die, and it is believed that if one were to watch, the child would turn into a snake and slither away. Sometimes parents will watch and, when their child does not become a snake, will seek emergency help for their child. Organizations that advocate for children with disabilities in Freetown, such as World Hope International, often meet families at this stage of

their journey and are able to provide them with the education and tools they need to find options for their child (A. Vines, personal communication, June 6, 2018).

One of The Raining Season's own children, whom I will call B, was born with a cleft lip to a family who believed he should be returned. However, the father took B to the hospital and left him there, instead. This action saved his life and allowed him access to surgeries and care through TRS (A. Kamara, personal communication, June 6, 2018). In this case, it is interesting that the father is the one who rescued his son and found him help. It is common to believe that something or someone caused a child's disability, and often the mother is blamed due to the belief that she was involved with witchcraft while pregnant or "went for a walk at night" (A. Vines, personal communication, June 6, 2018). This belief can leave mothers in vulnerable positions, as often the fathers will leave and their communities will withdraw. This choice on the part of the father is not always the case, as in the case of B, but it is a trend that is commonly seen in this field (A. Vines, personal communication, June 6, 2018).

Even if a child is not returned, they may be abandoned just the same. Abioseh Kamara, the co-founder of TRS, told me of Lucy, a child with various disabilities who was found abandoned in a graveyard and was cared for at the Covering until the completion of her international adoption. Other children at TRS were abandoned to the care of the children's hospital or found wandering in the streets. Abandonment places children with disabilities in incredibly vulnerable situations and they can easily be taken advantage of with no one to protect them (A. Kamara, personal communication, June 6, 2018).

If a child survives the early misconceptions surrounding their disability, they will go on to face many challenges in life. Even the most committed families may lack the resources to

meet their child's individualized needs and may not know how to handle behaviors or engage their child. For example, children with epilepsy may not be protected while seizing, even if they were to roll into a fire, because the fear of contagion is so strong (A. Vines, personal communication, June 7, 2018). Kamara told me of a child he knew with epilepsy whose family could not afford her medication. The family of the child was often gone to work during the day, leaving the child alone for significant lengths of time (A. Kamara, personal communication, June 6, 2018). In order to protect their daughter from falling while getting water or being injured in the street, the family chained her up when they left each day. Kamara was able to assist the TRS team that discovered the family's situation with arranging a partnership that funds the child's medication. This allows her to live a safer and more normal life (A. Kamara, personal communication, June 6, 2018).

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A major resource in caring for a child with a disability in any context is the community that surrounds the child. However, this valuable resource is often missing for families in Sierra Leone. Communities may withdraw from families because of the stigma surrounding disabilities. It can be difficult even for a child's own family to accept them if they are born with a disability, and it can be even more difficult for their surrounding community to do the same (A. Vines, personal communication, June 6, 2018). Since it is common to believe a child with a disability is demonic or from another world, the community will in most cases reject the child in fear (A. Kamara, personal communication, June 6, 2018).

Accessing education for a child with a disability can be a particular challenge. A few specialized schools exist for students with exceptionalities, such as the Browne-Penn School for Autistic Children, St. Joseph's School for the Hearing Impaired, and the Hosetta Abdulai Special

Needs School. However, these schools can only provide services to meet a fraction of the needs in Freetown. There is not an available statistic regarding the number of children with disabilities out of school in Sierra Leone, but of the population of children who are unenrolled in school, many cite a disability as their reason for not attending. The Ministry of Basic and Senior Secondary Education's education sector plan for 2018-2020 analyzes country-wide statistics of students and disabilities, stating, "Given the number of children with disabilities that are seen out of school in villages and towns there is every reason to believe that more children with disabilities are out of school than enrolled in school" (Ministry of Education, Science, and Technology, n.d., p. 29). The ministry has only relatively recently implemented policies to promote equal access to education. In their most recent sector plan, they state:

Until relatively recently, schools were not constructed and teachers were not trained with the needs of children with disabilities in mind. For example, it is only in the last 2 years that it has become a MEST policy for all schools to have ramps for the physically disabled and toilets that are disabled friendly. In fact 5.4% of respondent children interviewed whilst collecting data for the 2016 GoSL and UNICEF National Assessment of the Situation of Out of School Children in Sierra Leone gave disability as a reason for being out of school. The inclusive education policy currently should contribute to a more even playing field for children with disabilities as far as education is concerned. (Ministry of Education, Science and Technology, n.d., p.33)

The plan reports that "[i]nclusive education for children with special needs among normal children is still a new phenomenon in Sierra Leone," and the lack of training and accessibility in schools reflects this (Ministry of Education, Science, and Technology, n.d., p.50).

It is hoped that improving physical access to school facilities will help promote inclusive education practices in mainstream schools. Progress in this area is slow and goals are reflective of the enormity of the project: Intervention 1.6b seeks to ensure that at least 15% of mainstream schools have wheelchair ramps by 2020 (Ministry of Education, Science, and Technology, n.d.). Otherwise, there is little mention of planned improvements.

When visiting schools, it is very apparent that most lack the physical structure needed to accommodate individuals with disabilities, such as wheelchair ramps or alternative seating. The Covering has one student in a wheelchair, and the primary school has several flights of steep, tile stairs that are slippery in the rain. This can pose a physical obstruction to this child's education. A school I visited in Freetown in 2016 had steep, narrow staircases inside and held some classes on the roof, which required students to climb a narrow staircase and navigate a bridge from the roof of one building to another. It would be impossible for a student with a physical disability to navigate many of these scenarios, and a child with behaviors or issues in judgement might find themselves in a potentially dangerous situation.

Reducing the amount of overcrowded classrooms in the country is also discussed as a priority in the education sector plan (Ministry of Education, Science, and Technology, n.d.).

Many classrooms are full to the brim -- a private school I visited on a previous trip serves 85 students in a mostly open space barely the size of three typical-sized American classrooms, using wooden dividers to separate one class from another. Other classrooms I've visited may have

upwards of 30 students under the care of one teacher. Students with severe behaviors may attend school in the same classroom as a large class of students, and the teacher may not have the assistance that would allow them to engage a student with exceptionalities.

In addition to this, teachers are usually not trained to teach and advocate for children with exceptionalities. A student with exceptionalities must learn alongside their typical peers, taught with the very same methods. There are very few teachers with any form of special education training, and instruction does not accommodate for students with disabilities (A. Kamara, personal communication, June 6, 2018). Classrooms may not even be safe environments for them, as ignorance regarding disabilities extends into the learning environment. Evelyn Bockarie, a volunteer with World Hope International and a mother to a son with autism, told me that she would never force her son to go to school in the mornings if he showed her that he did not want to go that day -- he may have been beaten at school the day before, and she would have no way of knowing unless there were marks she could see (E. Bockarie, personal communication, June 7, 2018).

During my research trip in 2018, TRS connected me with Enable the Children (ETC), the branch of World Hope International that works with children with disabilities in Freetown. I was given the opportunity to interview the staff of ETC, along with their director, Anna Vines. Their team is made up of therapists, pastors, volunteers, and many more individuals who all come together to serve families of children with disabilities. They serve a total of over 800 children in the Freetown area, whose disabilities include Down Syndrome, Cerebral Palsy, Epilepsy, Autism, physical disabilities, intellectual disabilities, and more. A team from ETC visits the TRS Hope

Room regularly to assist the caregivers there with therapies and further training (A. Vines, personal communication, June 6, 2018).

I was given the opportunity to accompany one of the ETC teams the next day, shadowing Aminata Dumbuya and Evelyn Bockarie on their home and school visits. As a team, Dumbuya and Bockarie manage a caseload of 65 children, seeing each client every three to four weeks.

Navigating Freetown can be time consuming, and some days a child they intend to visit may not be available when the team arrives. As a result, their job requires a great deal of dedication and flexibility. Dumbuya works with ETC in occupational therapy and physical therapy. Bockarie is a behavioral therapist and volunteers with ETC's clients with autism and various behavior disorders. As a mother to a son with autism, she knows firsthand the unique challenges that face the families her team serves (A. Dumbuya & E. Bockarie, personal communication, June 7, 2018).

Throughout the day, we visited children and families of all kinds and from a broad range of socioeconomic statuses. I was also accompanied also by Dr. Robbie Hampton, an associate professor of education at Lipscomb University. It was an incredible opportunity to observe in the field, and I saw firsthand the challenges that face children with disabilities and those who love them in Freetown. However, I also got to experience the hope that dedicated individuals are bringing to one of the city's most vulnerable populations.

#### Journal of School and Home Visits with Enable The Children

The first child the ETC team visited was a young girl with Down Syndrome, whom I'll call L. She attended a preschool and daycare in the eastern part of Freetown. When the student arrived, Dumbuya and Bockarie instructed her to greet us, which she did with some coaxing.

Bockarie had previously told us that children with Down Syndrome are often not looked after well and may look disheveled. This has to do with their distinct features and their common label, "demon children" (E. Bockarie, personal communication, June 7, 2018). However, we observed that L's hair was neatly plaited and her uniform was clean. We set up a table and chairs in the corner of the classroom and observed as Dumbuya and L worked. The classroom was noisy with morning exercises, and L was easily distracted by posters on the wall, classmates chanting lessons, or adults unintentionally distracting her by dancing when she got something correct. Dumbuya's patience with her was infallible.

The teacher of L's class is responsible for 33 students without aid in a mixed-grade classroom -- levels nursery through prep 1. It was clear that she did not always know what to do with L, and told us L often simply played with toys in the corner during lessons. However, her attitude towards the child was caring and affirming, even if she did not know how to address behaviors. In a culture that emphasizes respect and obedience, behavioral issues can be especially difficult to find patience and understanding for. L was very much a part of her school community, and her teacher informed us that she was a favorite with the sewing school next door, where the girls were always encouraging her to speak. Her neat appearance was due to the teacher and the girls in the sewing school taking the time to do her hair in the mornings, which is significant.

In a conversation to the side, the teacher told Dr. Hampton and me that when L first came to her school, she did not want her there. Caring for her was difficult, and she believed that L may have been a demon. Afraid that such a condition was contagious, she did not want L near her other students. However, she told us that ETC's work with L had opened her eyes to see that

it is not the child that causes her to look and act how she does, but a condition that can be understood and worked with. The teacher said ETC changed her mindset and gave her the vision to empower L in her classroom.

Since ETC's involvement with L, they have seen great improvement. Dr. Hampton and I were told that when she first started therapies, she was non-compliant, aggressive, and prone to slap the people who worked with her. When we met her, she was happy, compliant with the tasks put before her, and only struggled with attention and focus.

ETC sets specific goals for each child, and assess at each visit whether goals have been met and what future goals they will make a priority. A score of +1 in an area means the child is still dependent in that area. A score of +2 means that the student is progressing, but still needs help. A score of +3 means the child is independent in that area. Once a child has reached +3 for their goals, the child is considered fully independent and ETC no longer works with them (E. Bockarie & A. Dubuya, personal communication, June 7, 2018).

During interviews with Geraldine Gaima and with ETC, I asked the question, "What is the goal for the children you work with?" Everyone emphasized independence as the forefront hope for the children in their care. Children with disabilities are such vulnerable individuals in a society with no safety net. More than anything, it is important that they learn to care for themselves as much as possible. Many of the goals we saw children working toward were simple things like getting dressed, getting their own water, and brushing their teeth — necessary skills for functioning as independent people. Sometimes the ETC team will give the family picture cards for a nonverbal child to use to ask for water or for assistance with a task. However, the picture cards are only partly useful to their clients because they aren't often enforced at home.

Parents may not understand how independence skills are built through daily practice — if the child will drink when simply handed a cup, the parents often don't see a need to have them ask for it (A. Dumbuya, personal communication, June 7, 2018).

Our next visit was with a boy with Down Syndrome, whom I'll refer to as P, who lived in a nearby slum community. At this home, P had reached a +3 in potty training, so Dumbuya moved on to a new goal of learning to get dressed. The family brought out a large yellow polo shirt, as Dumbuya recommended larger clothes for P to learn to dress himself with. She modeled helping P learn -- not just dressing him herself, which would be easier, but holding the shirt so he had to put his head and arms through himself. The mother watched intently. Dumbuya also worked with him in fine motor skills, stacking and restacking colorful rings. As she worked, the neighbors stopped to see who was visiting and what was happening with P. One neighbor bought him bread with beans, and the mother gave him a small piece after every few successful and focused attempts at whatever Dumbuya had instructed him to do.

It was common throughout the day for parents, grandparents, and teachers to intervene in whatever the child was doing, attempting to show them how it should be done or encourage their efforts. When this happened, I noticed that Dumbuya did not say anything unless it was impacting how effective the entire therapy would be. With a caseload of 65 and the team only able to see each child every three to four weeks, it is essential that parental and community involvement not be discouraged in any way. The parents and caregivers of each of their clients must see working with the child as a personal responsibility and must feel confident in taking it on (A. Dumbuya, personal communication, June 7, 2018). The family and community support surrounding P was evident --- he was full of laughter, and his laugh was echoed back by his

mother, sister, and neighbors. There was a shared look of pride from those around him when Dumbuya told him to "Clap for yourself!" after completing a task successfully (A. Dumbuya, personal communication, June 7, 2018).

We sat in plastic chairs that the family brought for us, and a family of healthy goats was tied with twine to the branches around us. Watching Dumbuya work with P using tools and methods I learned in classrooms in the United States was surreal. The quality of professional care these families are given through Enable the Children is incredible.

As we left P's home, Dumbuya asked to give the parents a letter about a support group they are starting for fathers. In Krio, Dumbuya explained that very often fathers abandon a child with a disability to mothers, and it is important to support those who stay involved with their children. The group would meet for the first time in a few weeks, with the goal of encouraging fathers and creating a community in which they can support each other in caring for their children. The team hoped P's father would like to join them. The mother read the letter carefully and kept it.

Before we left, Dumbuya asked something I did not catch in Krio. P placed his hands palms-up, and I realized his family was Muslim and was praying for the ETC team. When he finished, Aminata asked if she could pray for the family as well. She told me later that she likes to pray for families as she leaves, but always asks for their permission. Most of the families they work with are Muslim and some do not want her to pray, as she is a Christian. However, here the mother says to P, "They are Christian," and they bow their heads, palms down. This is sort of religious tolerance and reciprocity is commonly seen between those of different faiths in Freetown.

Our next stop was the home of a 3-year old girl the team was observing for autism and working with behaviorally. The child was being raised by her grandparents, and her grandfather was present during our visit. Although it was clear that her behaviors were a source of frustration, his care for her was also clear. He was the only adult male we met during the day who was invested in caring for a child with disabilities.

Dumbuya modeled over and over how to respond to the child's behaviors with consistency. During one activity, the child threw a cup to the other side of the courtyard and a member of the household moved to pick it up. Dumbuya told them to leave it and modeled helping the child pick it up herself. They repeated this twice more as the family watched. During a significant portion of our visit, the child sat and worked compliantly and we were told this was a great improvement from their last visit, which had been almost completely non-compliant. Here, too, people from the community came to watch. Even as people passed by, they would greet us and pause, watching Dumbuya's interactions with the child.

For our next visit, we drove around to the entrance of the valley opposite the house we'd just visited. In front of us were green wetlands. Below us were zinc-roofed houses, stained red with rust, and built out of concrete brick walls. We walked down a hillside of crumbling stone steps, across a concrete bridge, and then over what seemed like people's porches mashed up together -- ducking under laundry and dodging children's games.

We arrived at D's house, a student who attends the Browne-Penn School for Autistic Children, which is the first school in Freetown for children with autism (A. Vines, personal communication, June 7, 2018). Once again, the community watched with interest even as they did laundry, cleaned fish, or chatted in small groups. Dumbuya told us later that just visiting the

homes does so much for the family and the community. Caring for a child with disabilities in even the most ideal circumstances can be challenging and isolating. When a team of professionals from ETC comes around, it says to the parents, *People care for my child*. And because people are coming to the home, the community comes to watch, learning how a child with disabilities should be treated and how capable they are of learning (A. Dumbuya, personal communication, June 7, 2018).

Dumbuya worked with D in writing and fine motor skills. She told the mother that the next time she came, she would bring an extra marker so D can continue to practice between visits. They asked about the goals they had previously set and set a new goal of tooth brushing, again demonstrating how the mother can show him how to do it by himself.

On our last home visit, we visited a boy with autism who lived outside of Freetown, towards Grafton. A collection of people were in the home with us -- a mother, two teenagers, a baby, and several small children. More teenagers arrived to watch while we were there. The boy stacked a set of cups by himself, but scattered them often. He was often noncompliant with Dumbuya's instructions, and the mother told us that when he got angry he would tear his clothes. Aminata showed us weighted and pressure vests ETC has a tailor make for their clients, and indicated that he might benefit from one.

The mother in the home was aggressive, very unlike the other caregivers we had met during the day. When the child would not comply or scattered the cups, she would yell at him to give her his hand to hit or would threaten to beat him. At the end of our time with the family, Bockarie asked the mother how she was coping -- taking care of a child with a disability can be

difficult, even in the best of scenarios. On their visits, Bockarie ensures that they check in with the parents as well as the children.

Enable the Children receives funding from donations and relies on the resourcefulness of their staff. Their team is passionate, professional, and committed to their work with a desire to continue growing professionally in their field. However, their work is made challenging by a lack of resources in the country. Some things they are able to provide for clients themselves -- building standing frames from scratch, printing picture cards found online, or creating their own weighted vests -- but they need some items, such as teething rings, that they cannot find in Freetown.

We drove past the recent mudslide on Sugarloaf Mountain when we took the mountain road back to the city. A whole side of the mountain had crumbled off, sliding onto the community below at six in the morning while everyone was sleeping. Whole families died. They eventually stopped looking for bodies (E. Bockarie, personal communication, June 7, 2018). The mountain is scarred red — you can see it all the way from Lumley Beach. The country has been through several tragedies — most prominently, a civil war and Ebola epidemic. Some tragedies you can clean up, but that side of the mountain is a visual reminder that is there to stay.

Other surrounding mountains have been deforested — I noticed that the mountains are not as noticeably green as they were when I'd last visited a few years before. I was reminded how the whole picture matters acutely in issues of poverty: environmental issues typically affect impoverished communities most directly. Whether it be Freetown's overwhelming sanitation issue, the yearly floods that rise in the city, or careless clearcutting on mountains for housing solutions, it is usually the most vulnerable populations that are affected first and most severely.

#### Future Options for Children with Disabilities

Life in Sierra Leone can be risky for someone with a disability, and there is no safety net in the system to protect someone who has a limited capacity to help themselves. People with disabilities struggle against stigmas and a lack of adequate care. Children may be abandoned because of their disability or may lose their families due to other factors — there are 370,000 orphans in Sierra Leone, many orphaned by factors like violence, Ebola, illness, natural disasters, and a generally low life expectancy for adults ("At a Glance: Sierra Leone," 2012). It is not guaranteed that a child with an exceptionality will have family to care for them as they grow, and there is only one established facility near Freetown that cares for adults with disabilities (A. Kamara, personal communication, June 6, 2018). Career options for an adult with disabilities are limited depending on the disability, and many are left trying to make a living however possible. Many end up begging for a living, traveling into the city every day to make better profits. Kamara shared:

[Those with disabilities] go out to the streets to fend for themselves, because most of them just think that, "We have been left out. We don't have any hope.... The only hope we have now is just to go out there begging. Begging gives them money.... That's the only option most of them have. (A. Kamara, personal communication, June 6, 2018)

Although there are some schools that train individuals with physical disabilities in trade skills, someone with a disability will often not be able to attend school if they also wish to survive. A day in school is a day of begging income lost, and the immediate need for survival often takes precedence (A. Kamara, personal communication, June 6, 2018). The government is largely

uninvolved with those with disabilities, even though Kamara said they are supposed to be contributing even to the cost of caring for the children in the Covering's Hope Apartment. There are no government programs in place for individuals with disabilities, and the nonprofits working in the country are only scratching the surface of the needs present (A. Kamara, personal communication, June 6, 2018).

Because of these factors, the goal of those who work with children with disabilities is primarily the children's independence, to whatever extent their abilities allow. Will the child be able to get water, feed themselves, or dress themselves? Will they have the skill set needed to advocate for themselves if no one else can? Most of the work done with children with disabilities is done with very basic, realistic goals in mind (G. Gaima, personal communication, June 5 2018). Anna Vines stated that it is the hope of ETC "that children will be loved and cared for in their communities and reach their highest level of potential" (A. Vines, personal communication, June 6, 2018). Their "highest level of potential" is often synonymous with them growing up to be as independent as possible (A. Vines, personal communication, June 6, 2018).

Ultimately, what will paint a brighter future for children with disabilities in Sierra Leone is a shift in the culture's philosophy of disabilities. Charles Currie, who works with the Roots Project at TRS, expressed that shifts in belief happen when cognitive dissonance is created in people's minds. Creating this cognitive dissonance incites questions and paves the way for new norms to be established (C. Currie, personal communication, June 6, 2018). Some ways to create this cognitive dissonance include raising awareness and simply setting a paradigm of behavior that counters the existing norms. There are many ways organizations and individuals in Freetown are working towards this goal. ETC regularly hosts beach outings for families enrolled in their

program, allowing children with disabilities and their families to be a visible and normal part of life in Freetown. TRS ensures that their children with disabilities are engaged with life outside the walls, allowing those who are able to go on outings with visiting teams. Their strides towards inclusion insure that the community will see these children being loved and treated as valuable members of the TRS family. As children at The Covering grow, it will hopefully be with a philosophy of disabilities that challenges the cultural norms around them (C. Currie, personal communication, June 6, 2018). Efforts like the walk for autism that took place in Freetown in 2018 and media produced by ETC — which includes music videos that raise awareness about disabilities — also contribute to the creation of new norms in Sierra Leone (A. Vines, personal communication, June 6, 2018).

The issue of future care is a current dilemma for TRS, who can only legally care for children in their facility until they are 18 years old (A. Kamara, June 6, 2018). Many of their children have very high needs and will continue to need specialized care. TRS has recently launched a transition program for their typical residents, which places them in a family environment and prepares them to transition to life outside of the Covering. They focus on family living, life skills, education, and career opportunities tailored to each participant's individual strengths (C. Currie, personal communication, June 5, 2018). The plan for residents in the Hope Apartment is still largely undefined, but it is heavy on the minds of those involved (A, Kamara, personal communication, June 5, 2018).

Kamara shared his wish for a future care facility for the children in the Hope Apartment, recounting the journey of Lucy, a child who was first found abandoned in a graveyard. She became part of the TRS family and received care through the staff of the Hope Apartment, but

there were only so many resources that TRS could offer her in-country. Although she made progress, it was limited by the resources that could be offered to her in Freetown. Eventually, Lucy was adopted internationally and moved to the United States, where she made incredible strides physically, academically, and personally. From his experience with Lucy, Kamara's wish is that one day the kind of resources that helped Lucy in the States would be available to children in the Hope Apartment and in the country at large (A. Kamara, personal communication, June 6, 2018).

The weight this concern for the future carries with it is heavy, but it is heavy because the children of the Hope Apartment are an indispensable part of the TRS family. The challenge may be large, but what is equally as large is the organization's commitment to every child in their care, no matter the obstacle. There is not a single child in their care -- or in the care of ETC -- that is viewed as threatening, insignificant, or returnable. Their needs might be great, but their needs are not a threat or an inconvenience. Their presence is seen as valuable, and their worth as individuals is indisputable. Most of all, they are a non-returnable part of the family: giving them back to whatever circumstances they came from is not an option (A. Kamara, personal communication, June 5, 2018).

#### Conclusion

If one thing shines brightest out of my time in Freetown, it is the theme of hope. The children, families, and workers I had the privilege of meeting live and work in incredibly difficult circumstances. When talking about the future of The Raining Season's children, Charles Currie said, "We do not want to be a people who write off hope for anything" (C. Currie, personal communication, June 5, 2018). I remember that phrase coming back to my mind over

and over throughout my time in-country. The individuals involved in special education and the care of children with disabilities in Sierra Leone are surrounded by a great deal of loss and challenge. One could quickly become defeated by the number of circumstances available to grieve on a daily basis. However, the hope I saw in each individual was undaunted -- having been grown in hard places, their hope would not be easily done away with.

Circumstances may be difficult in Sierra Leone's field of special education and progress may be slow. However, as those involved in the field work to fulfil practical needs, they are providing children with meaningful and hopeful futures in the face of what could seem like hopeless circumstances. Through the daily, hopeful actions of dedicated individuals, more rooms is made for hope to grow in the lives of others. Their hope for the success of individuals is slowly altering cultural norms and community beliefs, paving the way for the children they love to become understood and celebrated parts of their communities. The needs in Sierra Leone's field of special education may be great, but the strengths of those involved in the field are working to give Sierra Leone's children with disabilities the brightest future they can hope for —and they have a lot of hope to share.

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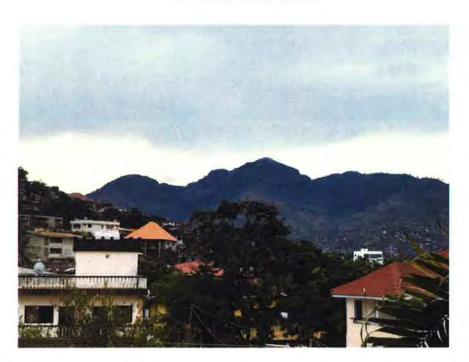
Vines, A. (2018, June 6). Personal Interview.

Appendix

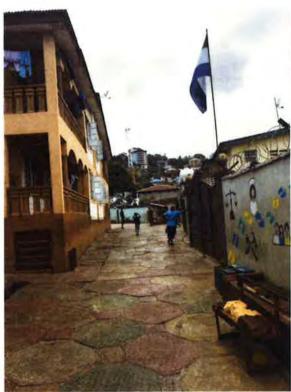
## Photographs

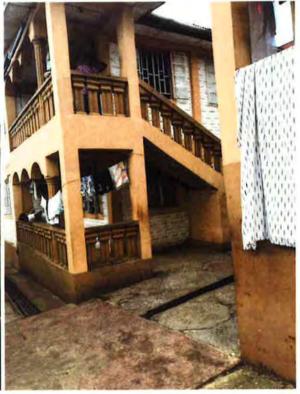


1. River No. 2 Beach



2. The view from my hotel -- Freetown is surrounded by mountains.







3, The Raining Season's facilities -- The Covering.



4. Inside the Hope Apartment at the Covering.



5. Some of the older boys at the Covering reading to a resident of the Hope Apartment..



6. Left to right: Dr. Robbie Hampton, Aminata Dumbuya, myself, and Evelyn Bockarie.



7. One of the schools Enable the Children visits regularly.

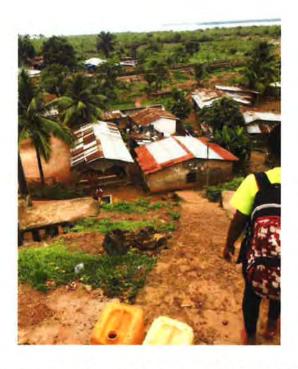




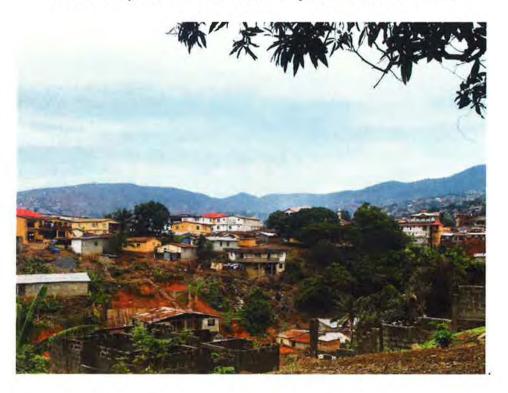
8. Aminata Dumbuya and ETC clients working hard on fine motor skills.



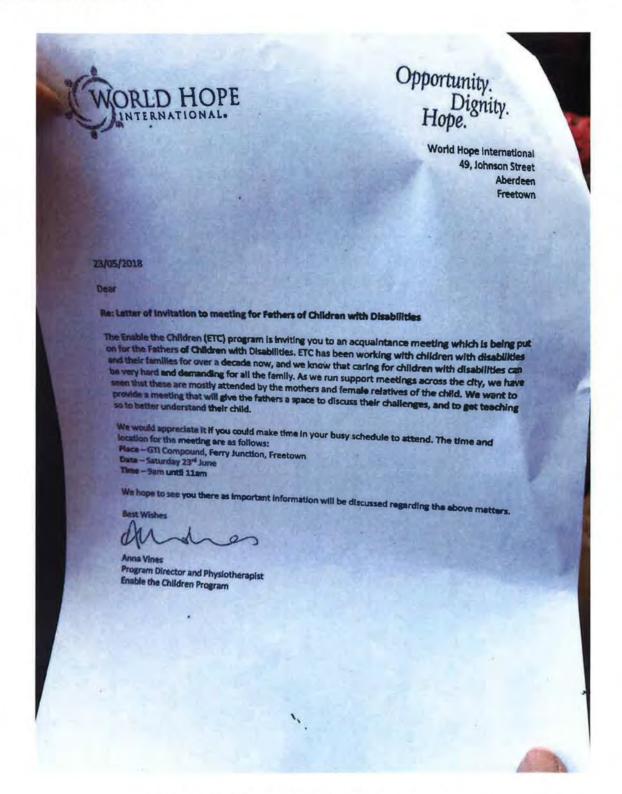
9. Neighbors watch intently as Dumbuya works with a client.



10. Bird's eye view of one of the valleys in which ETC works.



11. One of the communities in which ETC works.



12. ETC letter of invitation for a father support group.



13. Sugarloaf Mountain, the site of the tragic 2017 mudslide.



14. Weighted and pressure vests ETC has made by tailors for their clients.