The role of indigenous and external knowledge in development interventions with disabled people in Burkina Faso: the implications of engaging with lived experiences

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This paper explores the significance of engaging with the lived experiences of disabled people in countries like Burkina Faso in order to implement long-lasting and beneficial development. It looks at the way disability was conceived of in pre-colonial times and how knowledge imported from the colonisers conflicted with, and continues to influence today, indigenous knowledge in Burkina Faso. Although Burkina Faso obtained its independence from European colonisers over fifty years ago, disability as a terrain for intervention continues to be colonised by international non-governmental organisations (INGOs) that frame their approaches in western models, which are not necessarily applicable in countries like Burkina Faso. In a context where the predominant view of disability is that of disabled people being an economic burden, many disabled people in Burkina Faso feel the need to prove themselves as economically independent; and yet development agencies often do not engage with disabled people's voices when designing and implementing development programmes. This paper argues that there is a need to engage with disabled people’s lived experiences and knowledges through processes such as participatory video which create spaces where marginalised people’s voices can be heard and listened to by the development agencies that influence disabled people’s lives.

Keywords: Burkina Faso; Development; Disability; International non-governmental organisations; Lived experiences; Participatory video.

Introduction

Despite the fact that eighty percent of disabled people worldwide live in the global South (Greening, 2015), research on disability in the global South is scarce (Grech, 2015), even more so when it comes to research which is ‘[g]enuinely participatory, locally owned and accessible’ (Grech, 2015:15). Consequently, development agencies often employ western concepts in interventions with disabled people in global South contexts, without taking into account indigenous knowledge or the ways in which disability and impairment are
experienced and construed in the contexts in which they intervene. In this way, disabled people in countries like Burkina Faso have been subjected to both colonial and neo-colonial power, the latter in the form of development agencies such as international non-governmental organisations implementing programmes and projects designed and formulated in the west and often disconnected from the reality in which disabled people live (Grech, 2011). Consequently, these interventions do not result in long-lasting beneficial development for disabled people. Thus, there is a need to question the origins and implementation of the decisions and actions affecting disabled people’s lives in developing countries like Burkina Faso, where disabled people live in dire socio-economic conditions which have remained unchanged over the years.

In response to these challenges, this paper starts by briefly looking at the way disability was conceived of in pre-colonial times in Burkina Faso. It then goes on to explore how the knowledge imported from the colonisers conflicted with indigenous knowledge in relation to disability in Burkina Faso. Today, the perceptions of disability in Burkinabe society are predominantly influenced by the legacies of colonialism and their focus on able-bodied productivity. As will be discussed in the findings section, the prevalent view of disability in Burkinabe society is that of disabled people being an economic burden, and many disabled people feel the need to prove themselves as financially autonomous. However, disabled people’s agency, as seen through the interviews and mainly the participatory video, is emerging in the sense of disabled people not only speaking out on how development interventions can be more beneficial to disabled people, but also by demonstrating that they are not the helpless beings they are often portrayed to be. Finally, although colonialism in the sense of one country colonising another has ended in Burkina Faso (which gained independence from France in 1960), I suggest that disability as a terrain for intervention continues to be colonised by international non-governmental organisations (INGOs), that, despite good intentions, impose western models (which are not necessarily applicable in countries like Burkina Faso) and approaches which are often disconnected from the reality of disabled people’s lived experiences.

**Situating the disabled person in Burkina Faso**

In pre-colonial times, before the erosion of traditional structures of solidarity in Burkina Faso, the disabled person was cared for by society and participated in social activities, in particular those of the larger family (Handicap International (HI), 2005). For example, the Mossi (the largest ethnic group in Burkina Faso today) used to have a place for disabled and elderly people. Their care was shared by all the larger family, thus alleviating the parents’ responsibility. Close kin were in charge of the construction and upkeep of disabled people’s accommodation, as well as the maintenance of their fields. Thus, disabled people were almost
over-protected, and were considered to possess supernatural powers. As a result, negative behaviour towards them was thought to bring about evil consequences for the perpetrators or their extended family (ibid, 2005). Equally, there was a shared responsibility with regard to disabled people’s integration: this corresponded to the spirit of solidarity which regulated social relationships in the community (ibid, 2005).

The introduction of the market economy in traditional societies in Burkina Faso brought about profound disruptions, including the erosion of traditional structures of solidarity and the transformation of the domestic setup. The domestic circle, therefore, shrunk until only the nuclear family was left. Consequently, the care of ‘dependants’ was transferred from the extended family to the unit of biological reproduction (HI, 2005).

The introduction of the market economy also brought about a change in the way disabled people in Burkina Faso are valorised. Integration is based on the individual’s participation in socially valued activities and the place occupied in the social system, among other factors. As Connell (2011:1374) observes about colonial conquest in general, ‘religious and cultural meanings of disability, village- and kin-based solidarities, livelihoods, and local customs of support, were all at stake and liable to disruption’. Whereas in traditional society in Burkina Faso disabled people were valued, or, at the very least, taken care of by the extended family, today, as discussed in the next section, disabled (and non-disabled) people are valued according to their economic independence. This in turn affects the disabled person’s self-definition, which is now based on his/her capacity to be economically autonomous.

These views of disability are then internalised by disabled people themselves. Shakespeare (1996:103-4) postulates that disabled people are socialised to think of themselves as inferior to others: people ‘are socialised into thinking of disability in a medical model way’ as lacking or damaged, which can be viewed as internalised oppression. A disabled person’s image of themselves ‘is reinforced by segregated education, negative images, cultural representation, absence of positive role models, social treatment of disabled people’, which ‘parallels the experience of women in patriarchal societies’ (ibid, 1996).

The social model of disability, meanwhile, has sought to challenge this internalised oppression, by making it possible for disabled people to explore their experiences in a way that takes away blame for their own marginalisation and relocates this as a problem with the normalising society (Tregaskis, 2002). However, the social model of disability developed in the west does not necessarily work in the context of disabled people in developing countries. One of the major characterisations of disabled people’s ‘inferiority’ in Burkina Faso is their economic status and cultural responses to inability to work. According to the United Nations (UN Enable, 2007), unemployment among disabled people in developing countries reaches between eighty to ninety percent, while the World Bank (2015) reports that disabled people are much more likely to be poor. They not only face lower probability of employment and
lower earnings, but also require more income than non-disabled people to achieve a comparable living standard. However, disabled people’s lived experiences in global South contexts and the ‘disability relationships that emerge from the politics of colonialism and neo-colonialism’ (Meekosha, 2008:6) have been subjected to what Meekosha (ibid) calls the ‘grand erasure’ in disability studies. She argues that ‘the imperialistic…and colonial processes responsible for disabling millions of people’ are ignored (ibid). And yet:

...in the global South much of the impairment or harm is a result of the legacy of invasion, colonisation and globalisation. This legacy has left many disabled people in the global South living in dire conditions of poverty (Meekosha and Soldatic, 2011: 1389).

The legacy of colonialism and its effects on disability today is not only ignored by disability studies but also by development agencies working with disabled people in countries like Burkina Faso, which, perhaps inadvertently, replicate imperialistic practices. Cohen et al (2008:74-5) argue that:

[i]n much the same way European empires once dictated policies across their colonial holdings, the new colonialists—among them international development groups… [and] nongovernmental organizations (NGOs)…– direct development strategies and craft government policies for their hosts.

This phenomenon is also occurring in the disability domain. Western-controlled disability non-governmental organisations have spread their reach to almost every corner of the globe (Sheldon, 2005). Interest in disability in African contexts can be traced back to the UN International Year of Disabled Persons in 1981, after which ‘disability became part of the agenda of governments, churches, and ‘development’ agencies’ (Devlieger, 1999:439). Significantly, indigenous knowledges and experiences were not considered important factors for organising development services for disabled people. Although the UN and other development agencies emphasised cultural sensitivity, efforts have been sporadic (Devlieger, 1999). Grech (2011:87) argues that: ‘Communities in the majority world are often bypassed or repositioned to accommodate the neoliberal development project, the history and practices of which remain largely unquestioned’.

The impact of European colonialism has been so profound in countries like Burkina Faso that recovering indigenous perspectives on disability that have not been shaped to some extent by colonialism is virtually impossible. What can be done, however, is to challenge the neo-colonial power relations that continue to inflect disability interventions by understanding the experiences and perceptions of people living with disabilities in countries like Burkina Faso.
Methodology: rationale and process

This paper is based on research conducted with disabled adults in Burkina Faso from June 2014 to June 2015. Over 300 interviews were conducted with people with physical, sensory and intellectual disabilities, grassroots and umbrella disabled people’s organisations (DPOs), INGOs working in the disability domain, as well as state authorities. The majority of interviews were conducted in three regions: the Centre region (the central region which comprises mostly of the capital city, Ouagadougou); the Est region (the Eastern region); and the Cascades region (the South-westernmost region). The paper also draws on participatory research with a group of seven people in the Est region with physical and visual disabilities, who engaged in a participatory video (and participatory diagramming) process.

Employing participatory methods in this research has implications both for carrying out research with disabled people as well as with indigenous people. Traditional disability research has been problematised on a number of fronts, the main criticism being that it does not represent disabled peoples’ experiences (Kitchin, 2001). According to Oliver (1992:102), disability research should be ‘part of the struggle by disabled people to challenge the oppression they currently experience in their daily lives’. Indigenous knowledge holds resources which might not be found in the metropole or in international development agencies (Connell, 2011). Thus:

In moving beyond metropole-defined understandings of disability, and metropolitan models of disability politics, this is one of the most important points[:]… [t]he colonised and postcolonial world has intellectual resources… that can inform struggles to overcome marginality, prevent damage, and make the voices of disabled groups heard (ibid, 2011:1379)

Participatory research processes enable spaces where these voices can be heard, and where the dynamics of indigenous knowledge can be made better known to development agencies (Lunch and Lunch, 2006). Participatory Action Research (PAR), a ‘collaborative process of research, education and action explicitly oriented towards social change’ (Kindon et al., 2009:90), is significant in working with oppressed groups because one of its main goals is to ‘produce practical knowledge that is useful to people in the everyday conduct of their lives’ (Reason and Bradbury, 2008:4). PAR researchers have used methods such as participatory video to ‘destabilize the masculinist and colonial gaze of mainstream media representations’ of marginalised groups and provide ‘a vehicle for self-representation and community building’ (Kindon et al., 2009:91). The importance of self-representation takes on further significance when considering research with disabled people who are not only marginalised and oppressed, but are the objects of continuous representations. Participatory research with disabled people involves a research problem being identified by disabled people (or non-disabled people who bring it to the attention of disabled people); disabled people and
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researchers analysing the research problem together; and partnerships formed between disabled people, researchers and other key people in the field, with the partnerships being controlled by– and in the interests of– disabled people (Cocks and Cockram, 1995).

Participatory video (PV) is especially significant in the context of disabled people in sub-Saharan Africa and the ‘voicelessness’ that characterises disability (Power, 2001:87) in this region. PV creates a space for voices that are not normally heard to be heard, or faces which are not normally seen to be seen. In this research, the PV participants engaged in a participatory diagramming exercise in which they explored the pertinent issues experienced by disabled people in the Est region. This exercise served, as Lunch and Lunch (2006:13) indicate, as a basis for reflection about what disabled people are doing to improve their situation, as well as about their skills and resources. The participatory diagramming was the basis upon which the video was then developed. The participants were trained for two days in using filming equipment. The process had to be adapted to the context of facilitating PV with a group of people who have physical and sensory impairments. For example, one of the participants, who is blind, could not participate in all aspects of the PV process, so his role consisted mainly of being in front of the camera, while the other participants were both in front of and behind it. Two other participants, who have mobility difficulties with their right arms, could not effectively hold the video camera, given that the handle was on the right hand side. Thus achieving balance was tricky, mitigated by the use of the tripod. Participants also helped each other with learning how to use the equipment, with enthusiasm increasing as time went by. They later confessed that they had been afraid they would not be able to do the film, but that their confidence increased as they saw they were able to do so.

The participants then developed the storyboard. I took only a supporting role, continuing in this role throughout the filming, while the video with its relevant messages was directed and filmed by the participants over the course of the following two days. After one or two individuals would have filmed their part, the group would reunite to watch the footage and give their feedback for improvements. As Lunch and Lunch (2006:13) suggest, through visualising what they are currently doing, the participants’ reflection is stimulated on how things can be improved. Additionally, both the PV process and the final product enable development agents as well as researchers ‘greater insight into the dynamics of indigenous knowledge’ (ibid, 2006:13). The title chosen for the film was ‘Disability: It is not the end of the world’2, which embodies the spirit of the messages the participants convey in the film. The first part of the film, or the ‘short version’, consists of the participants talking about their own experiences, or giving a message, for example, to INGOs. This version is targeted mainly at INGOs and authorities, while the longer version is targeted at other disabled people and society at large. The ‘long version’ comprises a theatrical piece portraying the discriminatory attitudes faced by disabled people in Burkina Faso when marrying a non-disabled person.

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The next step was the editing, which comprised several stages: group paper editing; digital editing (done by myself and one of the participants); and fine-tuning. This last stage was carried out by myself, since I was by that time carrying out interviews in Ouagadougou, thus making it difficult for me to be in the same place as the PV participants. Furthermore, the participants had limited computing skills, and it would have increased the time spent on the film, time which also translates into money spent on participants’ per diems, lodging and refreshments. The video was, however, participatory in the sense that the participants planned and filmed it, chose what was to be said and shown (and not shown) in the film, and started the editing process.

The film was then shown to an audience on two different occasions, the first time to a group of disabled and non-disabled people. It had a good response and the PV participants who were present also felt proud of their film. Months later, it was shown to a group of disabled people and authorities in the Cascades region. The showing sparked a discussion between disabled people who identified with what the video participants were saying and the representatives of the Ministry of Social Action and National Solidarity (under whose remit disability in Burkina Faso falls) who were present. In this sense, the PV created a space where disabled people could share experiences. The film was also used ‘to strengthen both horizontal communication’ (with other disabled people to facilitate peer-to-peer learning), and ‘vertical communication’ (Lunch and Lunch, 2006:13) (in enabling disabled people to speak to policy-makers). Meanwhile, an attempt to hold a PV viewing with INGOs did not go through, due to their busy schedules. Therefore it felt as if part of the PV process – of providing a space in which participants could communicate their experiences directly to practitioner- was missing. However, the participants used the video to reflect on the development interventions that are carried out by state authorities and INGOs and to appeal to them to know the reality on the ground before intervening, as well as suggesting ways in which development interventions could be more beneficial to them. In this way, the PV started demonstrating the significance of providing people with disabilities with the possibility of having their voices heard within the development industry. Furthermore, the film is also available online and in DVD version, copies of which both the PV participants (who can use it in future activities) and INGO representatives possess. Other copies were also disseminated to DPOs and authority representatives.

Although PAR is viewed as less hierarchical than traditional research practices (Kindon et al., 2009), it has been subject to various (justified) criticisms. Chambers (1995) points out that there is the risk of networking with the local elite, thus missing the poorer elements of a community. There was a risk in the PV (and sometimes in the research in general), of collaborating with ‘elite’ disabled people, such as those who are more active in their DPOs, who usually are also the ones with a better education. Care was thus taken not to overgeneralise the research findings and to acknowledge that the views expressed by the participants might not be those held by all disabled people in Burkina Faso. Present was also
the risk of falling into the trap that Hall and Kearns (2001: 239) warn against, that is, of listening ‘to those with the loudest voices’, especially when one of the participants seemed to take over the participatory diagramming (PD) session. Since he was also my gatekeeper, I was wary of trying to diminish his role. Should I have tried to prevent this, I risked damaging the atmosphere of camaraderie among the participants and bringing discussion to a halt. Hence, I attempted to take a less dominant role and relegate myself to observing and recording group dynamics, as well as facilitating any arising difficulties, such as ensuring the involvement of one of the participants who is blind, and who was not always included in discussion by the participants. One way in which this was counteracted was by asking a participant to give a ‘running commentary’ of the diagram that was being developed, so as to enable the visually impaired participant to know what was going on and thus participate.

Thus, participatory methods, although an improvement on traditional methods, face various criticisms. Exercises like participatory diagramming can be patronising when, for instance, participants are told to draw a diagram to illustrate their views. Furthermore, ‘Western models of cognition assume knowledge is mediated by language but most knowledge is non-linguistic, tacit and generated in practice’, while diagramming still relies largely on the ‘linguistic representation of knowledge’ (Mohan, 1999:45). PAR techniques themselves therefore, symbolise ‘a way of thinking’ that ‘could be seen as peculiarly Western’ (Robinson-Pant, 1996:540). However, in the context of disability research in the global South, participatory research is still the most ethical way to conduct research, particularly in ‘revealing the ways in which colonial discourses have impacted upon knowledge, subjectivity and power’ (Mohan, 1999:42).

Finally, with regard to the research in general, a challenge was encountered in accessing people in the furthest margins of society. People (especially men) with physical disabilities are more visible and easier to ‘access’ than people with auditive or intellectual impairments in Burkina Faso. People with intellectual disabilities were the most difficult to include. The larger part of interviews with intellectually disabled people was conducted with a relative (usually one of their parents) or the heads of DPOs working with them. This issue brings to the fore dilemmas regarding having people speak on other (disabled) people’s behalf. However, in this research, this was the only way to access people with intellectual impairments. This also meant that knowing and understanding what ‘development’ for intellectually disabled people means, is rather challenging, and denotes the importance for future research and action to open up spaces where the less heard (and harder to reach) people with disabilities can be heard and listened to. This is extremely significant especially in Burkina Faso where people with intellectual disabilities rarely have the space to speak out, even in DPOs.
Findings

The following sections present the key findings from the study.

An emerging agency

The remnants of colonialism and its effects on the perceptions of disability in Burkina Faso are still visible today. Most disabled people interviewed focus on physical difference when describing what disability meant to them, an approach which, according to Shakespeare (1996:95), is used when disability is seen as the consequence of impairment: ‘Disabled people are defined as that group of people whose bodies do not work; or look differently or act differently; or who cannot do productive work’. For example, Idrissa, a physically disabled man, says:

I identify myself as disabled because there are activities which I don’t manage to do: I want to do them; and it’s not because I am old or something: because of my disability I cannot do them…. For example, we are farmers: thus, to make a field, you need to cut down trees. Hence, there are moments when, to cut certain trees is difficult. Thus I don’t manage to work in the manner I should be able to. Also, to cultivate, I plough on because I cannot sit around and wait for someone to help me; but I don’t manage to work well.

The issue of being able to work and be productive is linked to the perception shared by the majority of the research participants: success means being economically independent. Related to this, the theme that comes out in numerous interviews with disabled people is the need to prove oneself, to prove that one is not a burden. According to many interviewees, being a burden is how the non-disabled society views disabled people. For example, Serge, a physically disabled man, states that:

People think that you are first of all a disabled person; they don’t accord you a lot of attention. And they think you are a burden for society…this is very bad for a disabled person.

In the PV facilitated during the course of this research, however, an emerging agency shows itself among disabled people in Burkina Faso. While it is true that disabled people are discriminated against, Benoit, a physically disabled man, insists that:
Having a disability is not the end of the world; having a disability…does not mean it’s the end: having a disability is only the beginning of a process.

The process that Benoit is referring to is the process of, in the PV participants’ words, “overcoming their disability” to be successful members of society, in the sense of overcoming the disadvantages associated with their disabilities. They use the PV to recount (and disseminate) the struggles they have endured to do so:

Given that in our society, most disabled people have problems in the employment area, I asked myself ‘What should I do?’…and I started to work in the telecommunications domain…First of all, I started working for someone. Thereafter, I managed to open my own small shop where I sell mobile phone credit. Recently I also started offering money transfer service. It hasn’t been easy. Today, I manage better, given that I manage to meet some of my family’s needs. I am a married person. In our community, I am respected, and I think that I have tried to overcome my disability. (Benoit, man with physical disability)

I’m in the last year of sixth form. I am a girl with a disability. I fell sick when I was in my second year of secondary school. I was obliged to have a two-year gap before being able to continue. To start again, it wasn’t easy for me. With my disability, I wasn’t accepted back in secondary school, but we tried to explain to the Director, but it wasn’t easy. I was obliged to go to Togo. When I obtained my GCSE, my father passed away, so it wasn’t easy for me: I was obliged to fight to be able to continue. (Hélène, woman with physical disability)

In a section of the film introduced as ‘Whatever one wants to do, personal engagement is the key to success’, several participants recount how they have struggled to have their own means of living such as a small farm, or a shop, overcoming numerous obstacles to arrive where they are today. This is exemplified by Regina, a physically disabled woman:

I did not get discouraged because I am disabled, no, no, no! I am creative, I like to create, I like trying, I like risking. I have a restaurant; I am not a hairdresser but I had the idea of opening a hairdressing salon and putting a friend in there. I do livestock farming…I do everything!

Experiences such as those of Regina’s, substantiate Lang’s (2000:1) argument that, while both medical and social models offer valid insights into the conceptualisation of disability, neither of these models offers ‘an adequate, comprehensive explanation of the phenomenon’. Each model only indicates a part of ‘the ‘reality’ of disability’. Lang postulates that both models view disabled people as ‘passive subjects’ and fail to explain how disabled people can ‘recognise their potential to change their present situation’ (ibid).
The PV participants demonstrate that many disabled people are not, in fact, passive subjects. Having a space where they can be seen and their voices heard, participants use the film they have created as a vehicle to speak out to other disabled people in Burkina Faso and development agencies working with them. They focus on aspects ranging from personal experiences to urging development agencies to become familiar with their needs before implementing development actions, and suggesting ways in which the same actions can better benefit disabled people.

The PV thus enables the participants to express their experiences and concerns, stimulating one of the essential and key elements of constructive development: the invitation to development agencies to engage with indigenous knowledge. The PV participants appeal to development actors who intervene in the disability domain:

If they want to help disabled people, [they need to] talk to them first, to know how their life is in the community, before helping them. (Hélène)

In view of the experience lived by each one of us, we would like to launch an appeal to the different entities who intervene in the disability field to try to add, in their intervention strategies, personalised individual actions, in order to increase the chances of attaining the total flourishing of the disabled person in the Est Region. (Regina)

In the video, Hélène appeals to INGOs and state actors to listen to the voices of development beneficiaries before implementing development actions, which enables the multiple dimensions of development ‘recipients’ to come to life with their different personalities, lived experiences, wants and needs. This contrasts with western representations of (disabled) people in the global South:

Th[e] representation of the Southern black body is firmly anchored in flattening their histories and their culturally textured daily lives. Thus, socially entrenched dominant power relations of class, gender, ethnicity and disability are made invisible, along with a multitude of contentious collective struggles for recognition, representation and redistribution (Soldatic and Biyanwila, 2010:79)

In the same vein, Campos (1995: 72) argues that ‘people are often seen and classified by the single dimension of their disability and certain procedures are automatically prescribed, rather than considering people as individuals with a varying range of characteristics and skills’. Although Campos is discussing rehabilitation services, her argument applies to the ways in which INGOs fund or implement income-generating activities, which rarely reap the intended benefits and often ‘job-type’ disabled people. For example, furniture-weaving is
often funded as an income-generating activity with blind people, and yet this activity is generally not profitable in Burkina Faso, where most people prefer to buy cheaper imported products than the more expensive artisanal ones. Disabled people in Burkina Faso, therefore, are asking development agencies to consider alternative pathways of supporting them in development. The PV participants suggest that development practitioners should know reality on the ground and take into account indigenous knowledge of what disables people, and the perceptions of disability and impairment and the priorities of disabled people, before intervening. They suggest that focusing on individual capabilities, rather than group responses, would be more beneficial for disabled people. This is also an idea echoed by other disabled research participants:

[W]ith regard to income-generating activities, [NGOs] should try individual funding, fostering the emergence of economic operators capable of employing other people and of setting an example. (Serge)

It’s what each and every one can do individually, because not all of [us] have the same capacity to do the same thing: according to each person, his disability...Support should be that each person can be supported in his domain, not as an organisation, but individually. (Dramane, physically disabled man)

[We] are in the phase of applying to see if [we] can have aid in the individual training domain, so that people can have something to do. (Mohamed, physically disabled man)

Serge, Dramane and Mohamed, who are all DPO presidents, argue that disabled people want to be considered individually according to their talents, capacities and wishes. Having the same, or similar, impairment(s) does not mean that they all want to do the same activity. This echoes Atampugre’s (1997:62) suggestion that the ‘developmental use of credit’ ‘or financial support’ by INGOs and other development agencies ‘should [be]…tailored to meet the varied needs of poorer strata of society’. As Serge confirms, it would be ideal to fund individual disabled people in income-generating activities and then use them to set an example for other disabled people. The case of Rachid, a blind man who used to work in a furniture-weaving workshop financed by an INGO in the Cascades region, exemplifies the need for people to engage in an activity that not only are they able to do, but that serves a purpose in the community. The workshop at which Rachid worked, collapsed due to the failure to make a profit from furniture-weaving; following this, Rachid started selling mobile phone credit, which today helps him make a living. While artisanal work such as furniture-weaving is often funded by INGOs for groups of disabled people, some disabled people like Yacouba, a blind man who has a soap-producing enterprise, insist that artisanal work is unsustainable. He stresses that disabled people need to engage in producing necessary products such as soap, rather than artisanal furniture which is not a necessity and thus does not sell widely. However,
Yacouba comments that INGOs (and other development practitioners, including the state) who insist on this as a path to development, do not listen to disabled people on this matter:

We cannot go there, in front of them, so that they listen to us. Here, when we speak, they would not listen to us. And those who will speak, they will listen but it is useless… what we want to say, we’re not able to say.

As a result, for a lot of disabled people, nothing has changed in a long time:

When you meet them, it’s the same problem of the year… 2000; when you meet them, it’s the same thing… they still have the same problems. (Yacouba)

Thus, through the spaces that the PV creates, disabled people are providing their counterstories to the master narratives on disability, narratives which, according to Nelson (2001:6) ‘are often archetypal, consisting of stock plots and readily recognizable character types, and we use them not only to make sense of our experience… but also to justify what we do.’

Stories about disabled people that the non-disabled society— and, consequently, disabled people themselves— accept about disabled people become the accepted image, opinion, or perception of disability and disabled people. Disabled people are often portrayed and perceived as objects of charity, or as poor, sick, or tragic people. And yet, the PV participants demonstrate that there are ordinary disabled people in Burkina Faso who are not tragic, helpless individuals. They are people who are fighting against stereotypical representations and are telling their story ‘in such a way as to make visible the… relevant details that the master narratives suppressed’ (Nelson, 2001:7). In so doing, ‘counterstories aim to alter the oppressors’ perception of the group’ and ‘allow members of the oppressed group to exercise their agency more freely’ (ibid, 2001:7). The PV participants try to challenge the master narratives of disabled people as tragic recipients of charity by showing that disabled people can be successful. They also attempt to influence the nature of development interventions in the field of disability by, as discussed previously, proposing concrete practices to change the way in which development organisations can effectively support disabled people.

Nevertheless, changing the reality on the ground is not straightforward. The PV participants are conceptualising an alternative form of development; and yet, development organisations retain most of the power. Consequently, disabled people and DPOs remain ‘structured by a form of agency that has been complicit’ (Bignall, 2010:1) with development institutional practices. In practice, rejecting development interventions might mean losing livelihoods, funding, and opportunities: dependency is structural and difficult to reverse. Safiatou, the coordinator of a disabled artisans’ cooperative in the capital city, Ouagadougou, recounts how they currently have eight volunteers placed with them by an INGO, to help the development
of the cooperative. Three of the (European) volunteers are lodging with her personally as part of a cultural integration programme. When asked why she accepts this, Safiatou replies that it is because their DPO depends on the INGO. In addition to the burden this places on hosts, the ineffectiveness of volunteers being placed with a DPO for three months is highlighted by Edwige, the president of a disabled women’s organisation producing soya and cereal-based products. Edwige talks of how these young volunteers come for such a short time that:

As soon as [I] learn their names, they leave.

She continues to say that not only do they have no experience, but also some of them do not speak French (the official language of Burkina Faso), and are also too young (in her words, ‘children’) and she ends up ‘babysitting’ some of them when they are homesick. Denouncing this venture as ‘tourism’, Edwige contends that these volunteers are only sent to Burkina Faso to fulfill funding organisations’ conditions of sending a number of young people to Africa, without knowing if and what these volunteers can actually manage to achieve in practice. Regardless of these complaints, however, DPOs continue to accept help from INGOs because they do not see any other way to support themselves. Only one DPO from those I interviewed has refused to engage with some of the interventions proposed by INGOs. Serge says about the DPO of which he is coordinator:

It is necessary that [our DPO] distances itself from this; and be professional. When [the INGOs] come…[to finance] an activity which [our DPO] doesn’t do, we don’t do it.

Serge has decided that the DPO he coordinates will not follow the agendas of INGOs, but rather choose the projects and programmes it will implement according to its own agenda. Rather than search for INGO support and then implement what the INGO wants the DPO to do, the DPO develops its activities and then looks for funding for those specific activities. Serge’s case, however, is a rare one. In the rest of the cases encountered, DPOs are dependent on INGO finances and thus are subject to their agendas, however much they might criticise these. Disabled people in Burkina Faso must constantly negotiate a terrain almost devoid of support were it not for INGOs. DPOs are therefore forced to walk a tight line between exercising their agency and making their voice heard with regards to what they want to do and what they think is best, and conforming to INGO programmes and projects to survive. Thus, although disabled people’s agency in Burkina Faso is starting to emerge, there are limits placed on it by the actuality of life in Burkina Faso, including poverty and structural domination by INGOs.

Finally, the research participants are not asking INGOs to leave, nor are they rejecting their support. Rather, they are asking them to modify the nature of their interventions according to the likelihood of success. This is exemplified by Serge, who, while recognising the
importance and need for INGOs, suggests that they should have less influence and power:

I think NGOs should push DPOs towards specialisation in specific domains of disability, and that they [INGOs] should remain supplementary. I think NGOs’ work will always be necessary as long as there is work to do because the means of African states and the political will do not move at the same pace [as that of INGOs]; [and until] DPOs are strong enough to confront the authorities to take into consideration their specific needs.

Thus, Serge’s argument suggests that INGOs should be working towards ultimately making themselves redundant, that is, working with DPOs and disabled people until the latter are independent.

Conclusion

This paper has shown how, often, western disability viewpoints and ideologies are exported to global South countries, ignoring vital societal, political, economic, cultural and historical elements connected to the contexts in which these western concepts and theories were developed (Grech, 2011). In this way, Grech (2011:87) argues, ‘the implications for disabled people remain confined to epistemological silence’. Disabled people’s voices and agency are thus often not heard in development. Consequently, INGO concepts of what disabled people in Global South contexts need are often different than those voiced by disabled people.

The lived experiences and indigenous knowledges of disabled people in global South contexts like Burkina Faso are often ignored by the development agencies which intervene in disabled people’s lives. Support for disabled people by development agencies tends to be formulated in western disability models, which are not always appropriate in non-western contexts. The UK Department for International Development (2000:8), for example, in a report on disability and development, talks about the recent ‘changes in attitude’ toward disability, which emphasise the social model of disability and promote ‘social change that empowers and incorporates the experiences of people with disabilities, asking society itself to adapt’, without noting that this change took place in western societies, rather than worldwide. It then cites an example of good practice by a western NGO which ‘promotes a rights-based approach to sustainable development for persons with disabilities’ (ibid). However, in global South contexts, basic issues such as quality of life might be more significant (McEwan and Butler, 2007) than human rights legislation.

Thus, while, on the one hand, the medical model consolidated western medical knowledge and reflected ‘postcolonial paternalism’ (Lee, 1997:25); on the other hand, the social model,
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despite being a great leap forward in western societies, is still western-centric, having roots in the civil rights movement, the advocacy for inclusion and the removal of disabling barriers within society. The social model has been assumed to have universal relevance, which fails to take account of indigenous experiences and perceptions of disability. The availability of technical and environmental solutions (and cultural shifts), which the social model assumes, have costly implications and are sometimes not fully provided even in the global North (McEwan and Butler, 2007). Other issues, such as employment, also take on a different angle in global South contexts, where most employment opportunities are in sectors such as agriculture, forestry and other manual labour jobs in which people with mobility or visual impairments have difficulty participating (Mitra et al., 2011).

Consequently, the approaches and frameworks in which programmes and projects are formulated and implemented are often at odds with the realities faced by disabled people. These realities, while being partly the result of European colonisation which brought with it a focus on production and the marginalisation of disabled people deemed to be unproductive, affect the perceptions of disability in countries like Burkina Faso today, where capitalism continues to put an onus on individual economic independence. Many disabled people participating in this research thus put an emphasis on proving themselves as capable, whilst challenging the dominant view of disabled people in Burkina Faso as being a financial burden. Meanwhile, INGOs, while perhaps well-intentioned, tend to fund and implement projects such as income-generating activities with groups of disabled people, ignoring the unfeasibility of these activities. Many disabled people in Burkina Faso feel that their needs and wishes are not taken into account by these development agencies, and thus, there is a need felt for spaces to be opened up where disabled people can be heard and listened to. In this context, the participatory video facilitated through this research proves significant in enabling disabled people to not only represent themselves in the way they choose, but also in enabling communication with international organisations who make decisions influencing their lives. As the research participants suggest, they are not rejecting support from developing agencies, but rather that these agencies listen to them first, before making decisions on the development interventions carried out with them.

Notes

1 Handicap International has since changed its name to Humanity & Inclusion.

2 The video can be found on these links. Long version available at: https://www.youtube.com/watch?v=pNygwowl4xY; Short version available at: https://www.youtube.com/watch?v=rrqV7ZyT4Ec. French version: available at: https://www.youtube.com/watch?v=Gcqr3T6aLsE

3 The names of the interviewees have been changed for the purpose of this publication.
The names of the participatory video participants were (with their consent) not anonymised since they are shown in the film.

Acknowledgements

I would like to thank Professor Cheryl McEwan (Durham University), for her invaluable feedback in the formulating of this paper. I would also like to thank the Economic and Social Research Council who provided the research funding through the North East Doctoral Training Centre. I am grateful not only for the 1+3 funding, but also for the funding provided for the fieldwork and for making it possible for me to participate in the training on participatory video.

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Presented at 4th Biennial Disability Studies Conference, Lancaster University, UK, 2-4 September.


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