

**THE IMPLEMENTATION OF THE EMPLOYMENT EQUITY ACT NO. 55 OF  
1998 IN RESPECT OF PEOPLE WITH DISABILITIES IN THE DEPARTMENT  
OF HEALTH KWAZULU-NATAL: PERCEPTIONS AND EXPERIENCES OF  
KEY PERSONNEL AND PEOPLE WITH DISABILITIES**

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## **DECLARATION OF ORIGINALITY**

**I hereby declare that this dissertation is my own original work.**

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## **ABSTRACT**

The study took place in the Department of Health. It involved four districts and the Head Office of the human resource planning component. Its purpose was to explore the extent to which the Employment Equity Act is implemented in respect of people with disabilities by the Department of Health, Kwazulu-Natal. The experiences and perceptions of employment equity officers and people with disabilities were explored. In addition the document on Gap Analysis on EEA was analyzed.

Qualitative methodology guided the explorative descriptive nature of the research. The sample selected for the study aimed at balancing opinions on the subject under investigation. Data was collected through structured questionnaires, indepth interviews and content analysis of the departmental Gap Report on Employment Equity.

The main findings revealed that there is a wide gap between the current status quo and achieving the desired objectives of the Act. There is also a lack of awareness among People with disabilities in understanding the legal rights in terms of the Act. This situation weakens stakeholder's participation in implementation of the Employment Equity Act No.55 of 1998.

The main recommendations related to the implementation of intensive training programmes, in order to assist stakeholders to participate effectively in Employment Equity Act programmes. A bottom up approach on implementation of the Employment Equity Act was recommended. This will help to ensure equal participation of and acceptance of the process by People with disabilities and employment equity officers.

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## **ABBREVIATIONS**

**DOH-----Department of Health**

**DPSA\_\_\_Disabled People South Africa**

**EEA\_\_\_Employment Equity Act No. 55 of 1998**

**EEP\_\_\_Employment Equity Plan**

**HRP\_\_\_Human Resource Planning**

**KZN\_\_\_Kwazulu Natal**

**ILO\_\_\_International Labour Organization**

**INDS\_\_\_International National Disability Strategy**

**PWD\_\_\_People With Disabilities**

**RDP\_\_\_Reconstruction and Development Programme**

**RA\_\_\_Reasonable Accommodation**

**SDA\_\_\_Skills Development Act**

**WPA\_\_\_World Programme of Action Concerning Disabled Persons**

## **CHAPTER ONE**

### **CONTEXT AND PURPOSE OF THE STUDY**

#### **1.1. INTRODUCTION**

This study aims to explore the extent to which the Employment Equity Act No 55 of 1998 (EEA) is being implemented in respect of people with disabilities within the Department of Health in KwaZulu-Natal (DOH). The Employment Equity Act was introduced against a background of extreme disparities in the distribution of labour market opportunities, particularly in terms of race, gender, and disability. Most of the disparities in the workplace are a direct legacy of past discriminatory laws, particularly those laws that deliberately excluded black people, women, and people with disabilities from key jobs, and skills development opportunities.

The Employment Equity Act makes provision for the promotion of constitutional rights, the exercise of true democracy and the elimination of unfair discrimination in employment. It seeks to ensure the implementation of employment equity to redress the effects of discrimination, achieve a diverse workforce broadly representative of our people, and economic development and efficiency in the workforce. It will give effect to the obligations of the Republic as a member of the International Labour Organization.

#### **1.2. CONTEXT OF THE STUDY**

The study took place within the Department of Health in KwaZulu-Natal. The Head Office is situated in Natalia Building, Pietermaritzburg. The Department is divided into 10 districts and 1 metropolitan ( eThekweni Municipality ). There are 21 primary health care centres, 75 provincial clinics, and 61 provincial hospitals.

According to the White Paper for the Transformation of the Health System in South Africa (1997), the functions of the provincial office include ensuring:



- provision of regional and specialized hospital services, as well as academic health services.
- appropriate human resources management and development
- rendering and co-ordination of medical emergency services
- rendering of medico- legal services
- planning and management of a provincial health information system
- formulation and implementation of provincial health policies, norms, standards and legislation
- co-ordination of the funding and financial management of district health services

The Department also has Strategic Objectives for 2000-2004, which emanated from the National Department's 10 Point Plan. They have been clustered into the core business and organizational issues to support the core business. Core business issues are about improving quality of care, ensuring that the quality of service is maintained in primary health care and district health system, decrease morbidity and mortality rates, and the revitalization of hospital services.

Organizational issues to support core business are about improving resource mobilization and management of resources without neglecting the attainment of Equity in resource allocation, improving human resource management and human resource development, legislative reforms, improving communication and consultation within the Health service and between the health system and communities. The Department of Health and all its service sites are guided by these objectives.

### **1.3. RATIONALE FOR THE STUDY**

People with disabilities in South Africa have tended to be excluded from all mainstream avenues, including employment, economy, sport, and social formations. The White Paper on Integrated National Disability Strategy (1997: 41) states that unemployment remains a fundamental problem affecting the majority of people with disabilities and their families.



The researcher's interest in this study arose out of her direct work environment, firstly as a health social worker providing ongoing psychosocial services to patients mostly in orthopaedic wards and clinics. These services are provided from trauma, rehabilitation and discharge stages. Upon being discharged from hospital, they are assisted to be retained by their employers (if they can still be productive at work) or seek state grants for financial support if they cannot be productive at work. This work created awareness (to the researcher) of difficulties facing people with disabilities when they leave hospital and attempt to enter the work environment.

Secondly, the researcher is a member of the Provincial Interdepartmental Disability Forum. The mandate of the Provincial Interdepartmental Disability Forum is to implement recommendations of the White Paper on Integrated National Disability Strategy (INDS). The recommendations of the White Paper on INDS (1997: 63-75) include:

- the prevention of disabilities
- public education and awareness raising
- health care access
- rehabilitation services
- barrier free access
- access to public transport
- communication and access to information
- information and research
- education and access to centres of learning
- employment
- human resource development
- legislation
- monitoring of violations against people with disabilities.

A further motivation for the study becomes evident when one considers that KwaZulu Natal has the highest number of people with disabilities i.e. 502090 as

compared to other provinces (refer to Annexure I). The Department of Labour Findings Report 2001, workforce profile reveals that KZN has 0.53% representation of PWDs' in employment. This representation is low when compared to other provinces. For a example, the Mpumalanga province has a population of 211913 and a PWD's workforce representation of 0.56% (refer to Annexure II). Therefore this study proceeded from the assumptions that problems exist with the implementation of the Employment Equity Act No. 55 of 1998.

#### **1.4. PURPOSE OF THE STUDY**

The purpose of the study was:

To explore the perceptions and experiences of key personnel and people with disabilities in respect of implementation of the Employment Equity Act by Department of Health.

#### **1.5. OBJECTIVES OF THE STUDY**

The objectives of the study were:

- To explore the perceptions and experiences of key personnel in implementing the provisions of the EEA.
- To explore perceptions and experiences of people with disabilities who are employed by the Department of Health.
- To assess and identify problems and barriers towards implementation of EEA
- To provide recommendations that will assist in facilitating implementation of EEA in order to advance employment of people with disabilities.

## 1.6. THEORETICAL FRAMEWORK

The study was informed by Ecosystem theory in exploring the experiences and perceptions of people with disabilities in the workplace and how they interrelate to the wider systems. According to Fourie as reflected in (Meyer, Moore, and Viljoen, 1997: 557) systems form a hierarchy of related systems and human functioning is studied in terms of the interactional patterns within and between systems.

People today can find help from three kinds of resource systems viz. informal, formal and societal ( Pincus and Minaham, 1983: 4). Informal resource systems consist of family, friends, neighbours, co-workers and other helpers. This system provides aid like emotional support, advice and information. Formal resource systems are membership organizations which promote interests of their members such as labour unions, welfare rights groups. Societal resource system refer to hospitals, vocational training programmes, place of employment ( Pincus and Minaham, 1983). This study focussed specifically on how the place of employment (DOH) impacts on PWD.

The Ecosystem theory shifted focus from examining individuals and their environments separately and advocated that people are located in a multiplicity of systems, which are in continuous transaction with each other. According to Meyer, Moore, Viljoen, (1997: 585) it simply makes sense to deal with the problem in a larger context. The problems of individuals can be addressed in relation to the family, the community, the nation or even the world. This study attempted to take the various systems into consideration when exploring the experiences and perceptions of key personnel and people with disabilities regarding Employment Equity Act implementation by DOH.



## **1.7. VALUE OF THE STUDY**

The study will be of value to the Department of Health in the following areas:

- It will help the Department of Health top management and service providers to assess their commitment to the legislative requirements of the Employment Equity Act No.55 of 1998.
- The findings of the study will provide the Department of Health practitioners, and service providers with insight and better understanding of skills, abilities and needs of PWD in the workplace, so as to improve their disability strategies.
- Information gained with regard to the gaps, barriers and successes will assist service providers to strengthen present and future Employment Equity implementation plans.
- The findings and recommendations will assist the Department of Health to fast track its implementation process.

The study will be of value to the Social Work Profession in the following areas:

- It will provide the social work profession with an information base to understand concepts, skills, tasks and frameworks that apply to different policy situations, particularly the to Employment Equity Act No. 55 of 1998.
- It will be of help to strengthen social work policy leadership in taking initiative of tackling important problems such as ensuring non-discrimination of PWD.
- Encouraging the social work profession to practice policy advocacy skills in an effort to gain resources and opportunities for powerless groups like people with disabilities
- The promotion of the well being of clients, consumers and citizens with disabilities by shaping the human service delivery system to a direction that will be beneficial to them holistically

## **1.8. PRESENTATION OF THE CONTENTS**

This chapter provided an overview of the study, focusing on the context, rationale, purpose, objectives, theoretical framework and value of the study

Chapter two will focus on the literature review and is organized into different sections. These include a definition of disability, International and South Africa's disability status, implications of disability for an individual in a workplace, theoretical approaches to disabilities. The literature review further discusses policy and disability with special reference to the role of government and the role of social work practitioners in policy analysis and implementation. The policy framework in South Africa, specifically focusing on EEA, is provided.

Chapter three discusses methodology, focusing on the research design, sample and sampling method, data collection methods: structured questionnaire, in-depth interviews, content analysis. It further discusses data analysis its steps and researchers activities. Issues of rigour and relevance are also outlined and this chapter concludes with the discussion on the limitations of the study.

Chapter four provides an analysis of the collected data and relates findings to the literature review from chapter two and other sources.

Chapter Five outlines the conclusion and makes specific recommendations to the Department of Health on EEA implementation with respect to People With Disabilities, and to the Social work profession.

## **CHAPTER 2**

### **LITERATURE REVIEW**

#### **2.1. INTRODUCTION**

The literature review begins with a definition of disability and discusses issues of disability and employment globally and in South Africa. The implications of disability for an individual in the workplace and society will be explored in addition discussion will also focus on different theoretical approaches towards understanding disability.

Government as a system and the role of public administration will be discussed in relation to responsibility and accountability. The role of social work practitioners in policy process will be examined, while the policy framework with regard to disability in South Africa, with special attention to the Employment Equity Act No 55 of 1998 will conclude this literature review.

#### **2.2. DEFINITION OF DISABILITY**

According to Chapter 1 of the Employment Equity Act No.55 of 1998, people with disabilities means “ people who have long-term or recurring physical or mental impairment which substantially limits their prospects of entry into, or advancement in, employment.

The draft Code of Good Practice on Key Aspects of Disability in the Workplace issued in terms of Section 54 (1) (a) of the Act, further define disabilities as:

##### **2.2.1.Long-term or recurring**

Long-term means the impairment has lasted or is likely to persist for at least twelve months. A recurring impairment is one that is likely to happen again and to be substantially limiting. It includes a constant underlying condition, even if its



effects on a person fluctuate. Progressive conditions are those that are likely to develop or change or recur for example, Hiv/Aids, Multiple Sclerosis

### **2.2.2. Impairment**

Impairment may be physical or mental. Physical impairment means a partial or a total loss of a body function or part of the body. It includes sensory impairment such as being deaf, hearing impaired, or visually impaired and any combination of physical or mental impairments. Mental impairment means a clinically recognized condition or illness that affects a person's thought processes, judgement or emotions. e.g. Neurosis, psychosis

### **2.2.3 Substantially limiting**

An impairment is substantially limiting if, in the absence of reasonable accommodation by the employer, a person would be either totally unable to do a job or would be significantly limited in doing the job. Some impairments are so easily controlled, corrected or lessened, that they have no limiting effects. An assessment whether the effects of impairment are substantially limiting must consider if medical treatment or other devices would control or correct the impairment so that its adverse effects are prevented or removed. e.g. sexual behaviour disorder, compulsive gambling, drug and alcohol abuse

## **2.3. THE STATUS OF DISABILITY AND EMPLOYMENT WORLDWIDE**

Disability occurs in every society throughout the world. O'Toole and McConkey (1995) reveal that common responses in the past have been shame, prejudice and exclusion from community life.

The world community has agreed on what social policy should be with regard to people with disabilities, and there is a shift towards community-based care. This is a new perspective that involves making a distinction between a disability and a handicap. A disability may be a biological given but handicap is socially defined. Internationally, the World Programme of Action Concerning Disabled Persons



(WPA) was adopted at the beginning of the Decade of Disabled Persons (1983-1992). Its purpose was to promote effective measures for prevention of disability, rehabilitation and realisation of the goals of "full participation," "equality" of disabled persons in social life and development and of. This meant ensuring that disabled people have opportunities equal to those of the whole population, and an equal share in improvement in living conditions resulting from social and economic development.

It was recommended that governments undertake to implement the WPA, and a number of strategies for achieving this at national level were proposed:

- participation of disabled people in decision-making
- prevention of impairment, disability and handicap
- rehabilitation
- equalisation of opportunities for disabled people.

The United Nation's committed itself to further the implementation of the WPA to the year 2000 and beyond and the strategy to achieve this has been put in place and emphasis:

- promotion of rights of persons with disabilities
- promotion of community based rehabilitation approach
- promotion of independent living
- enhancement of economic independence and
- development of appropriate legislation

Convention No 111 of the International Labour Organization (ILO) is concerned with discrimination in respect of employment and occupation. This Convention has been ratified by South Africa and must be followed. Convention 111 requires a member states to pursue a policy that includes:

- *method appropriate to national conditions and practice, equality of opportunity and treatment in respect of employment and occupation, with a view to elimination of discrimination in respect thereof.*
- *Undertaking special measures which are designed to meet the particular requirements of persons who, for reasons such as sex, age, disability, family responsibility or social or cultural status, are generally recognized to require special protection or assistance.* The Employment Equity Act is designed to fulfil South Africa's obligation in terms of this Convention and others, such as the International Convention on the Elimination of all Forms of Discrimination Against Women (1979) and the United Nations Declaration on the Rights of Disabled Persons (1975).

## **2.4. SOUTH AFRICAN STATUS ON DISABILITY**

The challenges facing South Africa are many and promoting social equity is paramount to redress the legacy of past discrimination and social prejudice. Tinarelli (2000) states that a 1996 survey in South Africa showed that approximately 5% of the population are disabled, only 1 in 5 disabled people is economically active and 1 in 100 severely disabled persons has a job on the open labour market.

Section 3, Chapter 8 of the White Paper for Social Welfare 1997, indicates that people with disabilities in South Africa face extreme levels of inequality and discrimination, 1,6% of the total South African population receives a disability grant. The provinces with lowest socio-economic indicators have the largest number of beneficiaries, such provinces are Eastern Cape, Natal, Northern Province.

The office of the Deputy President produced the White Paper on an Integrated National Disability Strategy in November 1997. This paper requires government departments to ensure that steps are taken so that PWD are afforded an opportunity to access same the fundamental rights as every citizen in the country. In October 1998 the Employment Equity Act No.55 was passed to

eradicate the past legacy of discrimination in our society and the labour market. This Act was the first equality legislation to be passed by parliament. Employment equity is, therefore, not only a moral or human rights imperative but also a precondition for the country's achievement and maintenance of global competitiveness.

Wide-spread ignorance, fear and stereotypes result in people with disabilities being unfairly discriminated against. They experience a high level of unemployment and in the workplace they remain in low status jobs and they earn lower than average remuneration. Most PWD find it difficult to find employment thus they enter into sheltered jobs. Funding for this sheltered employment is minimal and working conditions are not satisfactory. An estimated 99% of disabled people are excluded from employment on the open labour market (White Paper on Integrated National Disability Strategy, 1997).

Various structures exist in South Africa to try to improve the above described situation. In 1984 Disabled People South Africa (DPSA) was established, it serves as a disability rights movement both locally and internationally and is working towards the goal of equal opportunities and full participation of disabled people in society. There is also the National Federal Council on Disability which is another disability movement operating nationally and in the provinces. From the government side there are structures such as The Office on Status of Disabled People situated in the Office of the President and Disability Desks in all provinces located in the Premier's Office. Their roles are more on policy development, implementation, and monitoring. They also facilitate the implementation of Integrated National Disability Strategy by all government departments.

## **2.5. IMPLICATIONS OF DISABILITY FOR AN INDIVIDUAL IN THE WORKPLACE**



### **.5.1 Disabling Barriers**

The reality is that disabled people are more likely to face inequality both in terms of getting work and developing careers (Hales 1996). For many disabled people the financial and psychological risk associated with employment seems to outweigh the advantages of being at work.

The focus is directed to disability rather than ability and they become even more aware of their limitations than their strengths. For Hales, (1996), the employment barriers experienced by PWD takes three main forms:

- Physical - which is associated with the lack of access that is buildings, workplaces, equipment to do the job such as braille for visually impaired persons.
- Procedural - this includes recruitment, assessment, and promotion procedures, which discriminate by applying criteria that is not relevant to the job and allows decisions to be made based on assumptions rather than facts.
- Attitudinal – these barriers are often based on fear, ignorance or misconceptions and prevent people with disabilities from being given a chance.

### **2.5.2 Physical Aspects**

People with disabilities require basic needs to be met, viz. food, clothing and shelter, decent living conditions like all members of society. Lack of enough finance puts them at a disadvantage in terms of owning a house. The way to reduce stigma associated with disability is through adjusting the social and physical environment to ensure that the needs and rights of people with disability are met, rather than attempting to change them to fit to existing environment.

### **2.5.3. Educational Aspects**

Lack of access to education among persons with disabilities, (particularly in rural areas) has contributed to the high unemployment rate among PWD's. Adult illiteracy is high among PWD's due to inaccessibility of educational programmes and centres.

Disabled children and young people are still not entitled to the same kind of schooling, as their able bodied peers, nor do they leave with equivalent qualifications (Swain, Finkelstein, French, Oliver, 1998).

The special education system perpetuates the misguided assumption that disabled people are somehow inadequate thus legitimizing discrimination in all other spheres of their lives. Unless students with disabilities are given a real opportunity to gain qualifications and appropriate training, there will always be inequality in higher management positions. In South Africa inclusion in education is now the official policy and it is hoped that children with disabilities will be offered opportunities to be educated in their local schools.

#### **2.5.4. Psychological and Emotional Aspects**

People with disabilities may experience psychological impairments due to severity of injuries or altered intellectual and social functioning. Finkelstein & French (in Swain et al, 1993) stress that disabled people may feel negative and depressed about their situation because they have absorbed negative attitudes about their disability both before and after being disabled.

Lack of accessible buildings and a hostile physical and social environment inhibit access to employment, education, leisure, and sufficient income to lead an interesting life. This situation makes them vulnerable to always walking on an emotional tight rope.

#### **2.5.5. Family and Community Aspects**

People with disabilities need some assistance from non disabled colleagues, family, and society at large, for example helping with bringing a wheelchair closer to the car, or directing a visually impaired person. According to O' Toole and McConkey (1995) ordinary people can reduce the handicapping effects of disability if given appropriate knowledge and skills.

O'Toole and McConkey (1995) further state that services for PWD should be integrated into community development schemes. Community based services and facilities will offer the person and his or her family a wide range of opportunities and options to promote independent living. The family is a significant support system in meeting needs of people with disabilities.

## **2.6. THEORETICAL APPROACHES TO DISABILITY**

This discussion will focus on three different approaches towards understanding disability:

### **2.6.1. Traditional approach**

This approach views disabled people as unfortunate and different and disability being seen as a punishment for their own wrong doings, or those of family or neighbours. Bean and Thorburn ( in O'Toole and McConkey 1995) concur that most societies have traditional beliefs on many subjects. There are two areas that affect families in cases of childhood disability viz. the belief about the causes of disability and secondly misconceptions about effects of disability and the child's needs.

In many African cultures disability is seen as a punishment or the result of ancestral anger or retribution by divine forces. This may be as a result of :

- omission of a particular custom such as the cleansing ceremony
- jealousy of neighbours and resorting to witchcraft
- neglect of customs and religious rituals, which may be an indication of lack of respect for elders or ancestors.



The implications of this approach are that PWD's will have low self-esteem due to the curse attached to their disability.

### **2.6.2. Medical approach**

The cornerstone of the medical approach is the medicalisation of disability, that is the view of disability as being individual pathology. It has the perception that disabled people are sick, defective and in need of a cure and that they need to be cared for. Because the emphasis is on the medical needs of people, there is huge neglect of their wider social needs, and this has resulted in severe isolation for disabled persons and their families.

The medical approach tends to reduce problems of disabled people to their own personal inadequacies or functional limitations. This approach can be linked to the Reactionary Perspective to disability by Noon and Blyton 1997) which postulates that the natural inequality of people is due to genetic differences. Due to its focus on personal inadequacies and medicalisation of disability this approach has contributed to the exclusion of disabled persons from wider society. Dependency is created, and people with disabilities are seen as welfare cases and passive recipients of government aid. This therefore denies the wholeness and integrity of people and is disempowering

On a positive note medical interventions have contributed successfully over the years in surgery and physical medicine to enhance the physical, psychological and social functioning of people with disabilities.

### **2.6.4. Social approach**

The problems that disabled people face stem not from their physical or mental limitations but from the inappropriate social responses to them as human beings. French ( in Swain et al, 1993) highlights that disabled people are an oppressed and marginalized group in society is central to the social model to disability.



Hasler (in Swain et al, 1993) stresses that the social model does not only challenge attitudes, it challenges the very assumption of normality.

With the social approach there are two essential principles of addressing disability issue in society i.e. empowerment and integration.

#### **2.6.4.1. Empowerment**

The empowerment approach has been advocated as a means by which to address some of the root causes of this oppression. It is about helping people enhance and more effectively utilize their own problem-solving and coping capacities (Pincus and Minahan, 1973).

The goal of empowerment is to enable communities, individuals, and families to accept the reality of their situation in order to be in control of their own destiny. O'Toole and McConkey (1995) believe that the bottom up approach is to empower disabled persons by joining the organized struggle of all disadvantaged and marginalized groups, to change our present society into one that is fairer, more truly democratic and more accepting of human differences. This can be linked to the liberal perspective by (Noon and Blyton, 1997) as it highlights that equal opportunities exist when all individuals are enabled freely and equally to compete for social rewards. It can be further linked to the radical perspective, which indicates that policy makers should be concerned with the outcome rather than the process and should be seeking to ensure a fair distribution of rewards. It also requires direct intervention through policies of positive discrimination e.g. the Employment Equity Act.

#### **2.6.4.2 Integration**

People with disabilities have a right to participate fully in the life of the society to which they belong. One of the barriers to integration is people's attitudes and they need to be changed. The removal of environmental and physical barriers will

create an environment of equality. Institutional change in places such as school, workplaces and other public facilities will also facilitate integration of people with disability into society. Werner (in O'Toole and McConkey, 1995) states that the goal of rehabilitation is to tear down the walls of inequality, to work towards a social order that provides all people with equal respect, opportunities and rights.

## **2.7. POLICY FRAMEWORK AND DISABILITY PROCESS**

This discussion will highlight the role of government in policy development and its responsibilities in policy implementation, the role of social work practitioners in policy analysis and implementation will also be explored and will conclude with the focus on disability policies but specifically the Employment Equity Act No 55 of 1998.

### **2.7.1 The Role of Government**

According to Van der Walddt, and Helmbold (1995) governments are open and dynamic systems with both abstract and concrete elements.

They consist of resources, which are converted into inputs for specific consumers. The processing of these inputs takes place within a particular environment and is received from the environment, which consists of the needs and wishes of people.

The needs and wishes of the community have been converted in an authoritative manner by way of the political process in governmental institutions, as embodied in policy. This conversion takes place through the implementation of specific government functions and structures which are created for this purpose by the inputs, such as legislative mandates, which are received from the environment and converted into outputs, such as policy. The Employment Equity Act No.55 of 1998 was promulgated through the above-narrated process and it now needs to be implemented.

MacRae and Pitt (in Van der Walldt and Helmbold, 1995) identifies six norms which may be derived from administrative law rules:

- Public administration must occur legally, in that all actions of public official must take place strictly within the framework of the existing legislation.
- Public officials must be able to account to the public in relation to their actions.
- Public officials must treat all members of the public equally.
- Public administration must occur in an efficient manner.
- Public administration must be sensitive to public needs. Officials must be in a position to determine public needs and arrange these needs in order of priority.
- Public officials must be able to act within a clear conscience, so that they are able at all times to account to the public for their actions.

The government as a legal body in the country has a duty and obligation to convert the aspirations of people into action, and in this regard to ensure implementation of the Employment Equity Act No 55 of 1998.

### **2.7.2. Role of Social Work Practitioners in Policy Analysis and Implementation**

The routine activities of social workers are directly linked to policy. Jansson (1999 ) highlights three reasons why social workers should engage in policy formulation and reforming processes:

- To promote values that are prescribed in the professional code of practice of social workers.
- To promote the well being of clients, consumers and citizens by shaping the human service system.
- To create effective opposition to groups and citizens that do not subscribe to the ethics in the code of practice of social workers.



Social workers have access to corridors of power and this gives them political power. Gray (1996) argues that social workers render service to the most disadvantaged sectors of the society. This positioning enables them to monitor effectiveness of implemented policies, thus social workers should play a visible and meaningful role in advocating for the implementation of the Employment Equity Act and other related legislations. Social workers have skills that are essential in developing and influencing policy. These skills include:

- Listening
- identifying other people's goals and priorities
- clarifying objectives
- problem solving
- negotiating
- leading meetings and mobilizing interest or pressure groups.

## **2.8. POLICY FRAMEWORK IN SOUTH AFRICA**

This discussion will focus specifically on the policy being researched i.e. the Employment Equity Act No 55 of 1998. It was passed by parliament on 21 August 1998.

### **2.8.1. Purpose of the Act**

The purpose of this Act is to achieve equity in the workplace by:

- Promoting equal opportunity and fair treatment in employment through the elimination of unfair discrimination; and
- Implementing affirmative action measures to redress the disadvantages in employment experienced by designated groups, in order to ensure their equitable representation in all occupational categories and levels in the workforce. (Chapter I, subsection 2)

### **2.8.2. Values and Principles Guiding and Influencing this Act**

The formulation of this act was guided by a variety of fundamental values and principles.

These values and principles are:

- The promotion of the constitutional right of equality and the exercise of true democracy.
- The prohibition of unfair discrimination in employment.
- Ensuring the implementation of employment equity to redress the effects of past discrimination.
- Achieving a diverse workforce that is representative of the country's demographics.
- The promotion of economic development and efficiency of the workforce.
- To comply with terms of the International Labour Organization since South Africa is a member

The entrenched value of this Act is empowerment, which is based on capacity building and enabling people to take charge of their lives.

### **2.8.3. Major Provisions of the Act**

- The Elimination of unfair discrimination in any employment policy or practice in order to achieve equality and promote equal opportunity in the workplace, (Chapter II, Prohibition of unfair discrimination)
- Implementation of positive measures to redress the disadvantages in employment experienced by black people, women and people with disabilities, in order to ensure their equitable representation in all occupational categories and levels in the workplace. (Chapter III, Affirmative Action).
- Formation of the Commission for Employment Equity. This commission was established on 14 MAY 1999. Eight members and a chairperson constitute the Commission for Employment Equity. The Minister of Labour appoints all members. The commission has the function of advising the Minister on various codes, regulations and policies that are required for the

implementation of the act. It will also research and report to the Minister, as well as make awards recognising achievements of employers in furthering the purpose of the Act.

- Monitoring, Enforcement and Legal proceedings: According to Chapter V of the Act. Any employee or trade union representative may bring an alleged contravention to this Act to the attention of:

- another employee
- employer
- trade union
- workplace forum
- labour inspector
- Director General
- Commission

#### **2.8.4. Target System**

According to Chapter I of the Act designated groups are black people, women and people with disabilities. This research study is limited to people with disabilities.

##### **2.8.4.1. People with Disabilities**

Chapter I of the Act defines people with disabilities as those who have long-term or recurring physical or mental impairment which substantially limit their prospects of entry into, or advancement in, employment.

The Commission of Employment Equity developed a draft Code of Good Practice on Key Aspects of Disability, on the 19 April 2001 and which was released to the public for comments. Its aim is to guide employers in their implementation plan in order to fast track the process. The Commission's Annual Report 2001, reveals that KwaZulu Natal has the highest population of people with disabilities, (Annexure II). The report also shows that employees with disabilities represent 1% of all management levels.

### **2.8.5. Strengths of the Policy**

The EEA has been enacted to promote the constitutional right of equality and the exercise of true democracy. This policy legislates elimination of unfair discrimination in the workplace and provides an opportunity for members of the designated groups to contribute to the economy of the country (Tinarelli, 2000)

It is one of the state policies that is for the promotion of equality and anti-discrimination particularly in the workplace. The Act will assist previously disadvantaged groups to achieve maximum productivity and efficiency (Commission for Employment Equity Report, 1999-2001).

It is an internationally recognized policy and good for sustainable economic and social development of the country.

### **2.8.6. Conclusion**

This chapter began by defining disability and explained issues. It provides an overview of the role of government and of social workers in policy development.

The discussion was concluded by a special focus on the policy under investigation i.e. Employment Equity Act No 55 of 1998, its values, guiding principles, major provisions, target system and strengths of this policy.

The methodology adapted in this research is discussed in the next chapter.



## **CHAPTER THREE**

### **METHODOLOGY**

#### **3.1. INTRODUCTION**

This chapter will focus on research design, sampling methods, data collection, data analysis, ethical issues, issues of rigour and limitations of the study.

#### **3.2. RESEARCH DESIGN**

The researcher conducted an exploratory-descriptive research in order to explore the extent to which the Department of Health in Kwa-Zulu-Natal has implemented the Employment Equity Act in respect of people with disabilities. The purpose of the exploratory research was to gain insight into the situation, phenomenon, community or person (Bless and Higson-Smith, 1995). This type of research is useful in examining areas that have not been well researched in the past. This approach is critical in assessing the progress of implementation of EEA since the Act has been promulgated fairly recently and there is very little data reporting progress with implementation.

Marlow (1993: 24) describes exploratory research as "breaking new ground and generating exciting insights into the nature of an issue when we know very little about the problem area." An important feature in exploratory research is that it may determine the feasibility of conducting further studies in the area under investigation. According to Marlow (1993: 25) descriptive research describes records and reports phenomena as objective as possible.

The research was undertaken using qualitative methods. Qualitative methods are inductive and they seek to discover facts. Babbie and Mouton (2001) distinguish qualitative from quantitative and view qualitative research as one which has the understanding of social action in terms of its specific context rather than attempting to generalize to some theoretical population. The primary aim is

in-depth descriptions and understanding of action and events. In this study the researcher wanted to understand perceptions and experiences about people with disabilities in the workplace.

**3.3. THE RESEARCH PARTICIPANTS**

Twelve people participated in the research. The following table summarizes these research participants:

**Table 1: Research Participants**

SAMPLE	TARGET GROUP	TOTAL
Head office officials	1. Human Resource Planning Component 2. Equity employment manager	2
District: Urban +2, Peri-urban, rural	Equity employment officers	4
District: Urban + 2, Peri-Urban, Rural	People with disabilities	6
TOTAL		12

**3.4. SAMPLING METHOD**

The sampling method selected for the purpose of this research was non-probability, convenience sampling. Convenience sampling is a practical method that relies on readily available units (Fink, 1995). Urban (one urban district), peri-urban (two peri-urban districts), and rural districts (one rural district) were chosen for this study in order to provide a variety in data collection. The head office was interviewed in order to provide baseline data for the study. The selection was based on relevancy in terms of the nature of the research problem and the ability of interviewees to provide the required information.

Goetz & LeCompte (in Crabtree and Miller, 1992: 75) indicates that key informants are individuals who possess special knowledge, status or communication skills, who are willing to share their knowledge and skills with the researcher and who have access to perspectives or observation denied to the researcher.

A total number of 12 participants was interviewed. The interviewees were the key participants and by virtue of their positions within the Department they were able to provide relevant information.

### **3.5. DATA COLLECTION.**

In an attempt to gain an exploratory understanding of experiences and perceptions of key personnel and people with disabilities around EEA implementation, three methods of data collection were used viz. structured questionnaires, in-depth interviews, content analysis:

- **Structured questionnaires** (Annexure III & IV)

The researcher used self-completed structured questionnaires as one of the data collection tools. According to Robson (1993: 227) a self-completion questionnaire is based on a fixed sequence of largely closed questions. It was used in order to gather respondents' personal details such as name, gender, race, age, language, occupation, years in current position and their involvement in the recruitment process. In addition to the above-named details, the information on the cause of disability, duration of disability and assistive devices use were asked of PWD's.

- **In-depth Interviews**

The researcher used face-to-face in-depth interviews to gain an understanding and insight into the experiences and perceptions of key personnel about EEA implementation. Face to face interviews offer the possibility of modifying one's



line of enquiry, following up interesting responses and investigating underlying motives (Robson, 1993).

The researcher used semi- structured interview schedules (Annexure V & VI), which were guided by open-ended questions. Cohen and Manion (in Robson, 1993: 233) highlight the advantages of open ended questions as they allow the interviewer to probe so that she may go into more depth if he/ she chooses, or clear up any misunderstandings

Robson (1993) indicates that the interview is a flexible and adaptable way of finding things out. Interviews were conducted in the last week of August 2002 to the end of September 2002. The medium of communication was both Zulu and English and each interview lasted for approximately an hour and a half. The interview schedules were divided into broad categories of theme questions. For human resource officers, the focus was on the introductory phase, staff complement of the institution, knowledge of EEA implementation, experiences and perceptions about the Act, general views and recommendations. For PWD, the focus was on knowledge and perceptions, of people with disabilities in the workplace, the recruitment process and how they were being treated by colleagues.

The information was further gathered by analyzing the Gap Analysis on Employment Equity Report, June 2001. This was used as a baseline for checking progress of implementation. This report was quantitative in nature and content analysis by the researcher provided some qualitative inputs to the statistics provided in the document. Krippendorffs as quoted by Robson, (1993) defines content analysis as a research technique for making replicable and valid inferences from data to their context.



### 3.6. DATA ANALYSIS

Data analysis followed nine steps of which the first five steps are recommended by Kvale (1996) and the last four steps recommended by Hycner, (1985), Table below illustrates how the researcher implemented these steps.

**Table 2: Steps in Data Analysis and Researcher's Activities**

<b>Steps in Data Analysis</b>	<b>Researcher's Activities</b>
1. The respondents describe their experiences in relation to the topic	Listening carefully Transcribing the interview data
2. The respondent is discovering new insights during the interview	Bracketing the researcher's meanings, interpretation, and entering in to a new world
3. The researcher condenses and interprets the meaning of what the interviewee described	Listening to the interview for a sense of the whole, by reading the transcription a number of times
4. Clarification through elimination of repetitions and irrelevant information to the topic	Delineating units of general meaning and elimination of redundancies
5. Analysis of meaning through condensing and categorizing relevant meaning	Determining themes from cluster meanings
6. Conducting a second interview	Prepared feedback previous interviews and be receptive to new information
7. Modifying theme and summary from new data of the second interview	Writing a summary
8. Identifying general, unique, and new themes within the context of the study	Locate the unique themes, Contextualization of themes
9. Compile a composite summary	Write a composite summary

### 3.7. RIGOUR AND RELEVANCE

The researcher ensured rigour by presenting findings that were grounded in data and in a trustworthy manner. The experiences of the respondents are presented faithfully and in some cases their own words were used to illustrate their perceptions. The following table presents issues of rigour and relevance, looking at the standard and the researcher's strategies to achieve these.

**Table 3: Rigour and Relevance standards and strategies**

<b>Standard</b>	<b>Researcher's Strategy</b>
Findings must be authentic and credible	Feedback of interview was shared and confirmed by respondents during second interviews
Study should be ethical	Refer to chapter III which reflects ethical issues
Findings should be representing the experiences of the respondents	Analysis and discussion chapter VI provides the experiences of the respondents
Findings be grounded on theory	Chapter two of the study presents literature review which is guiding findings and discussion

### **3.8. ETHICAL CONSIDERATIONS**

The following ethical issues were considered and adhered to when conducting this study.

#### **3.8.1. Informed consent**

Permission to conduct the study was requested in writing from the Department of Health and districts concerned. According to de Vos (1998) obtaining informed consent implies that all possible or adequate information on the goal of the investigation, the procedures to be followed, the possible advantages, disadvantages, dangers to which respondents may be exposed and credibility of the researcher be rendered to the potential subjects.

#### **3.8.2. Confidentiality**

Assurance was given to participants to ensure confidentiality with respect to identity if they sought anonymity. Confidential information would not be divulged without their consent.

#### **3.8.3. Honesty and Trust**

The researcher gave her full identity and where the study would be conducted. A relationship of trust and honesty was maintained throughout the study.

#### **3.8.4. Use and Misuse of Results**

The findings of the study will be shared and used positively by those who participated in the study.

#### **3.8.5. Distress and Emotional Harm**

Research ethics require that participants not be harmed by the research. Some of the respondents were emotional about their disabilities and the limitations at the workplace which were linked to them having disabilities. The researcher was skilled in handling sensitive issues with care. She was able to provide counselling to respondents who were emotional, and provided a supportive environment while proceeding with interviews without being emotionally involved. Pincus and Minahan (1983) stress that in order for the social worker to make conscious use of relationships, he/ she must be aware of his/her emotions, hang ups, and preferences and try to keep them from interfering with his/her work.

### **3.9. LIMITATIONS OF THE STUDY**

While every attempt was made to ensure that this study was rigorous and trustworthy, no study is perfect. There are some limitations that need to be considered:

#### **3.9.1. Sample**

One limitation relates to the sample, which was convenient and provided the researcher with twelve readily available respondents. It can be argued that the sample size is small, however use of in-depth interviews as the data collection tool strengthened the quality and integrity of data collected during the interviews (Robson, 1993).

#### **3.9.2. Data collection methods**

The data collection methods used were structured questionnaires, indepth interviews, and content analysis of the Provincial Employment Equity report.



The limitation of the study relates to recording of data, a tape recorder was not used due to the unavailability of this equipment. The researcher relied on hand written data, and therefore might have missed capturing some of the information. The researcher then compiled and returned a summary and themes of the interview to the respondents and thereafter conducted second interview sessions. Most of the second session was conducted telephonically to validate data. According to Creswell (1994: 158) internal validity addresses accuracy of the information and whether it matches reality.

### **3.10. CONCLUSION**

This chapter has discussed the research methodology. The chapter describe the research design, sampling methods and data collection tools. The data analysis method and the researcher's activities were also outlined.

Ethical considerations and the limitations of the study were discussed.

The next chapter presents the findings of the study.



## **CHAPTER 4**

### **ANALYSIS AND DISCUSSION**

#### **4.1. INTRODUCTION**

This chapter is divided into three sections:

Section one discusses the status of the Employment Equity Act and its implementation in the Provincial Office. Section two discusses the experiences and perceptions of Human Resource Practitioners interviewed. Section three reveals experiences and perceptions of people with disabilities in the implementation of EEA.

##### **Section 1.**

##### **The status of the Employment Equity Act implementation in the Provincial office, Human Resource Planning Component**

This section will discuss the status of Employment Equity Act implementation in the human resource planning component (HRP) at the provincial office. The data presented in this section arises from, interviews with the HRP component, a brief summary of the Gap Analysis Report on EEA, June, 2001, and the success story on implementation of EEA, St Francis Hospital (interview with the head of the institution)

##### **Section 1.1**

##### **Perceptions of the Human Resource Planning Component**

According to feedback from the human resource planning component there are positions occupied by people with disabilities, but they are in lower levels. This was also revealed in the situational analysis of the White Paper – Social Welfare (1997; 23) which indicates that very few PWD are employed in the open labour market, and for those who are employed, the average income is extremely low.

Shortage of skills and qualifications were identified as barrier for PWD to get available job opportunities. Unavailability of appropriate reasonable accommodation such as an accessible physical environment and working equipment, is still a block to recruitment of people with disabilities. However attempts are being made to upgrade their status in the workplace through further training and a bursary scheme for academic purposes.

According to Tinarelli (2000:83) an employer must establish and, for the prescribed period, maintain records in respect of its workforce, employment equity plan and other records relevant to its compliance with the EEA. There was no record on forms/ nature of disabilities of employees within the department, because the National Department has not finalized the definition of disability. However a working definition is available in the Code of Good Practice on Disability Aspects (refer to chapter two).

Structures have been put in place for the implementation process. There is a Provincial Consultative Forum which is composed of senior management, labour representatives, members of each occupational group and designated groups. This forum meets quarterly to discuss issues of Conditions of Employment, Skills Development Act, and EEA. At the institutional level the committee responsible for the above-named functions is called the Institutional Management and Labour Committee.

There is no budget for EEA implementation which results in other issues receiving priority, and without a budget it is difficult to provide training and infrastructure, which results in other issues receiving priority and without a budget it is difficult to provide training and infrastructure, Tinarelli (2000: 77) is stresses that there should be separate budgets designed solely for employment equity purposes.

It is clear that efforts have been made to develop awareness. This has been done through the Consultative Forum, online communication and through road shows (visiting different areas, districts, and institution to educate and empower the intended group with information i.e. EEA implementation. In addition there appears to have been fairly wide ranging consultation which is in accordance with Chapter III, Section 16 of the Employment Equity Act of consulting with all parties such as labour, all occupational categories, and employees from designated groups.

According to Tinarelli (2000: 63) managers should be provided with training where particular skills do not exist, such as training on diversity management, coaching and mentoring programmes. The Department had workshops for managers on areas such as change management, transformation, and diversity management. According to Chapter III, Section 19, of the Employment Equity Act, 1998 a designated employer must collect information and conduct an analysis, as prescribed, of its employment policies, practices, procedures and working environment, in order to identify employment barriers which adversely affect people from designated groups. A Workplace profile was done by the department in the form of the Gap Analysis Report on EE, June, 2001 and some policies were reviewed.

With regard to time frames of the EEP, it is to be implemented as from 2000-2004 (five-year plan) and is informed by its numerical goals. There are people who are leading the process. A noticeable gap is that at present there is no Retention Strategy within the department. According to the Code on Disability, subsection 11.2, retention is about the employer retaining the employee if she/he becomes a person with a disability. The employer should keep in touch with the employee, and encourage him/her to return to work.

In respect of monitoring and reporting, provincially it is done by the Human Resource Planning Component. Reporting has been done in two successive



years that is June 2000, and June 2001. According to the respondents, challenging aspects include, the lack of a budget for EEA implementation, resistance to change from level of managers, staff members who are suppose to work with PWD. Affirmative Action which is about measures designed to ensure that suitably qualified people have equal employment opportunities, is hard to implement due to resistance, misunderstanding and fears.

## **Section 1.2**

### **Gap Analysis Report on the Employment Equity Act, June 2001**

This report was facilitated by the Department of Health KwaZulu-Natal. This report analyzed gaps in the implementation of EEA at each employment level or category of the institutions. Employment levels were grouped into the following categories:

- Hospital management: Medical superintendent, matron and hospital secretary
- Medical personnel: Medical officers and specialists
- Nursing personnel: Professional nurses, staff nurses and nursing assistants
- Therapeutic personnel: Physiotherapist, pharmacist, occupational therapist, dental therapist, speech therapists, radiographers, dentists,
- Technical personnel: Medical technologist, works' inspector, artisans
- Professional group: Oral hygienist, social workers, dietician, clinical psychologists.
- Middle management: Assistant director, deputy director
- Clerical and Related personnel: Typist, clerks, secretaries, registry
- General personnel: Driver, security, aso, cleaners and ward aids

This report was used as a base line in the analysis of the results obtained during data collection.



The Department of Health has set itself targets for implementation of EEA within the designated group, Gap Analysis Report on EEA, (June 2001). The targets are as follows:

DESIGNATED GROUP	TARGET
1. Africans	50%
2. Women	30%
3. People with Disabilities	2%

This research focused on the implementation of EEA with respect to people with disabilities at district and institutional levels in the Department of Health. The percent level of compliance in implementing EEA at institutional and departmental level was calculated as follows:

$$\% \text{ compliance} = \frac{\text{total staff with disabilities}}{\text{total staff compliment of the institution}} \times 100$$

The variance between status quo and the 2% target is the gap in meeting the target. The gap will be calculated as follows:

$$\% \text{ Gap} = 2\% \text{ target} - \% \text{ compliance at institutional level}$$

A bigger numerical value of the gap indicates poor compliance in meeting the target.

The gap can either be positive or negative. A positive gap indicates noncompliance with the target i.e. 2% target, while a negative gap indicates that the target has been exceeded. A gap that equals zero implies that the 2% target has been achieved.

**Table 4: Analysis Results of interviewed institutions as reflected in the Gap EEA Report June, 2001.**

DISTRICT	INSTITUTION	STAFF COMPLEMENT	PWD COMPLEMENT	% TARGET	% COMPLIANCE	% GAP
Ugu	St. Andrews	265	1	2	0.4	1.6
Ethekwini	King Edward VIII	3146	4	2	0.1	1.9
Ethekwini	Addington	1723	10	2	0.6	1.4
Zululand	Benedictine	792	3	2	0.4	1.6

**Table 5: Ranking of order of compliance from highest to lowest compliance**

DISTRICT	INSTITUTION	STAFF COMPLEMENT	PWD COMPLEMENT	% TARGET	% COMPLIANCE	% GAP
1. Ethekwini	Addington	1723	10	2	0.6	1.4
2. Ugu	St. Andrews	265	1	2	0.4	1.6
2. Zululand	Benedictine	792	3	2	0.4	1.6
4. Ethekwini	King Edward VIII	3146	4	2	0.1	1.9

The districts reported above show a positive gap or noncompliance with the target of 2%.The percentage gap ranges from 1.4 to 1.9. King Edward VIII is the biggest institution in KZN with a staff complement of 3146. Compliance in this institution is the lowest with a gap of 1.9%.

The next largest institution is Addington Hospital which has a staff compliment of 1723. This institution shows the highest compliance with a gap of 1.4%.

Benedictine and St. Andrews show the same level of compliance with a gap of 1.6%.

**Table 6: Gap analysis Results of interviewed institutions as of September 2002**

DISTRICT	INSTITUTION	STAFF COMPLEMENT	PWD COMPLEMENT	% TARGET	% COMPLIANCE	% GAP
Ugu	Port Shepstone	803	5	2	0.6	1.4
Umzinyathi	Church of Scotland	650	2	2	0.3	1.7
Ethekwini	Ethekwini District Office	390	1	2	0.25	1.75
Zululand	St. Francis	224	11	2	5	-3

**Table 7: Ranking of order at compliance from highest to lowest compliance of interviewed institutions as in September 2002**

DISTRICT	INSTITUTION	STAFF COMPLEMENT	PWD COMPLEMENT	% TARGET	% COMPLIANCE	% GAP
1. Zululand	St. Francis	224	11	2	5	-3
2. Ugu	Port Shepstone	803	5	2	0.6	1.4
3. Umzinyathi	Church of Scotland	650	2	2	0.3	1.7
4. Ethekwini	Ethekwini District Office	390	1	2	0.25	1.7

The districts that were interviewed show compliance ranging from –3 to 1.75. Ranking in order of compliance is shown in Table 7.

Overall, these results show that the Department of Health is not meeting its targets with respect to People with Disabilities.



### **Section 1.3.**

#### **Success story on implementation of EEA: St Francis Hospital**

St. Francis Hospital is the smallest institution among the other three interviewed institutions in terms of staff complement. This institution shows a negative gap, which indicates exceeding compliance target of 2% by 3%. This is indeed a commendable performance from this institution.

St. Francis is situated in the Zululand rural area and it provides health services to poor and disadvantaged communities. Out of the eleven employees with disabilities employed in this institution, eight of them have developed disabilities while in the employ of this institution. The eight employees were retained through a supportive system under the leadership of the Nursing Manager of the institution.

The employee retention strategy of this institution enables them to comply with the "Code of Good Practice, Clause 11.1 to 11.4" which states that:

\*Employees who become disabled during employment should, where applicable be re-integrated into work.

\*If an employee is, or becomes a person with disability, the employer should keep in touch with the employee.

The other three employees with disabilities in this institution were employed in the year 2001. The Nursing manager of the institution also guided this undertaking.

St. Francis has a comprehensive support structure viz. a welfare committee that serves as a link between employees and employer. Differentially abled employees are also provided with individual services, e.g. counseling and monitoring of treatment.



The St. Francis institution implemented an Employee Assistance programme long before the EEA came into being.

Successes at St. Francis Hospital also include a tuck-shop, which is run by PWD's from the local organization of PWD's viz. Thembalihle Disabled People's Organization. This undertaking empowers PWD's with entrepreneurial skills.

However it has also been observed that St. Francis Hospital was not listed in the main gap report of 2001. This indicates that the DOH may be experiencing problems in capturing relevant data. In view of this one wonders how accurate the Gap Report on Employment Equity, June, 2001.

## Section 2.

### Experiences and perceptions of Human Resource Practitioners

- **Profile of interviewees**

The table below provides a description of Human Resource Practitioners who were interviewed. Pseudonyms are provided to protect their identities.

**Table 8: Profile of Human Resource Practitioners**

NAME	AGE	GENDER	RACE	YEARS/EXPERIENCE	INVOLVEMENT WITH EMPLOYMENT
MR Y	31-40	MALE	BLACK	20	Fill in all promotion positions
MR Z	41-50	MALE	BLACK	5	Oversee the selection process
MR W	21-30	MALE	INDIAN	5	Participate in selection process
MR U	41-50	MALE	INDIAN	12	Participate in selection process
MRS V	61-70	FEMALE	BLACK	13	Prepare staff establishment and identify people for recruitment

**Please note:** 'Black' is used instead of African as this is the terminology used in the Employment Equity Act.

Table 8 shows the profile of the key personnel leading the process of human resource management and development. It is also noted that the majority of those in position of influence are still predominantly male and there was no person with disability at this level. This confirms the input of the Director in Human Resource Planning that " *People with disabilities are in lower grades of employment* "

- **Knowledge of the Employment Equity Act**

All five respondents had an understanding that the Act was about redressing the imbalances of past deficiencies in the workplace. The Act recognizes the existence of a long history of exclusion, segregation and equality for designated groups viz. black people, women and people with disabilities.

The above input omitted some of the crucial aspects of the Act. These aspects are about satisfaction of the requirements of the Constitution in terms of equality, achieving diversity in the workplace that is representativeness of South African demographics. The EEA also promotes economic growth as well as giving effect to the obligations of the Republic as a member of the International Labour Organization

According to the Commission for Employment Equity Report 1999-2001 " The Act provides us with an excellent framework for developing all our human capital as a country and transforming the workplace to enable the harnessing of the full potential of every person."

- **Knowledge of the Contents of the Act**

The respondents were unable to provide detailed contents of the Act and the responses ranged from:

*"I am not clear about contents, I have not seen the document"*

*"I am not well versed with the contents, but I know that medical testing is prohibited to a certain extent"*

*"I do not know them"*

Key personnel are expected to know and understand this policy in order to be able to implement it effectively and achieve the goals of the Department of Health. However responses obtained in this area show gaps in the understanding of the contents of the Act by key personnel.

- **Implementation Process of EEA**

The Act provides guidelines for its implementation and the employers need to take care of Affirmative Action measures to achieve employment equity. These measures are outlined by Tinarelli ( 2000) as follows:

- **Consultation** with unions and employers in order to ensure that there is buy-in by everyone. Consultation improves the chances of acceptance of the employment equity plan
- **Analysing** all employment policies, practices, and procedures, and preparing a profile of the workplace in order to align them with new requirements of the EEA.
- **Preparing and implementing** an employment equity plan setting out the Affirmative action measures to be taken in order to achieve employment equity.
- **Reporting** to the Department of Labour on the implementation of their plan.
- **Displaying a summary** of the provisions of the Act in all languages in the workplace

None of the above measures appears to being implemented at present. Only two respondents have started with some implementation, at the level of raising awareness of the policy.

Other institutions are focusing more on implementation of the Skills Development Act. The Commission for Employment Equity Report, 1999-2001 indicates that the Employment Equity Act recognizes the importance of human resources, including skills development, however it cannot handle this task alone. It is critical to link this policy with other policies like Skills Development as some of the respondents/institutions have initiated.



- **Code of Good Practice**

The code is a guide for employers and employees on key aspects of promoting equal opportunities. This code was available as from the year 2001 and is in the government system and is has to be a guiding document for managers responsible for implementation of the Employment Equity Act. The aspects of good code of practice are as follows:

- definition of disability
- reasonable accommodation
- preventing unfair discrimination
- achieving and planning for employment equity
- confidentiality and disclosure
- employment benefits

On this area the researcher had to elaborate to the interviewees, on the key provisions of the code. Respondents who are directly involved with implementation were either unaware or have not seen nor read the code.

- **Employment Equity Plan**

Chapter 3, section 20 of the Employment Equity Act outlines the process of compiling the EEP as follows:

- The objective to be achieved for each year of the plan
- The employment barriers to be identified in the analysis and the steps the employer will take to eliminate these
- The positive measures that the employer will implement
- The numerical goals to achieve equitable representation of people from designated groups within the workplace; the timetable within which this will be achieved; the strategies by which the employer intends to achieve these goals

- The timetable for each year of the plan for the achievement of the goals and objectives other than numerical goals
- The duration of the plan, which may be shorter than 1 year or longer than 5 years
- The procedures that will be used to monitor and evaluate the implementation of the plan and whether reasonable progress has been made towards bringing about employment equity
- The internal procedures for resolving disputes about the interpretation of the plan
- The person in the workforce, including senior managers, responsible for monitoring and implementing the plan


The findings reveal that only the Head Office of the Department of Health had a copy of the Employment Equity Plan. The major reasons given for this deviation was lack of training to carry out this task.

The public service should be composed in such a way that it is capable of and committed to the implementation of the policies of the government and the delivery of basic services to the people of the country. Mechanisms must be put in place to monitor implementation of the programme. A programme of monitoring and retraining for all those willing to serve loyally under a democratic government should be instituted.

- **Reasonable Accommodation**

Reasonable Accommodation is defined in the Employment Equity Act as “ any modification or adjustment to a job or to the working environment that will enable a person from the designated group to have access to or to participate or advance in employment”.

The Employment Equity Code of Good Practice, section 6.9 provides examples of reasonable accommodation as:

- 
- adapting existing equipment or acquiring new equipment including computer hardware and software
  - adapting existing facilities to make them accessible
  - re-organizing working stations
  - changing training and assessment materials and systems
  - restructuring jobs so that non-essential functions are re- assigned
  - adjusting working time and leave
  - providing readers, sign language interpreters, and
  - providing specialized supervision, training and support

The majority of respondents had a general understanding of what reasonable accommodation was. Types of reasonable accommodation known to the respondents were physical environment accessibility i.e. building ramps, adjusting doors, toilets and offices. Some of the respondents indicated as follows: “ *We have provided some reasonable accommodation for old staff members with disabilities, that is ramps for wheelchairs, and adjusted doors of offices*”

“*With the new block I have raised the issue of accessibility for wheelchairs*”

“*Toilets are not disability friendly*”

It is therefore imperative that reasonable accommodation is made available for relevant individuals so that all people have equal opportunities in the working environment.

- **Training and Development**

The five respondents expressed the need to have more training on the implementation of the Employment Equity Act in general and on other specific areas that have an impact in the implementation of the EEA e.g. managing diversity, and transformation. The findings also show that more emphasis was being given to implementation of the Skills Development Act (SDA). Reasons for this preference were that SDA has an allocated budget and there was more training focusing on implementation of the SDA.

The two pieces of legislation i.e. Employment Equity Act and Skills Development Act complement each other to achieve human resource development.

- **Perceptions and Experience**

- **Affirmative Action**

✦ The majority of respondents raised this issue as an appropriate measure to bridge gaps and disparities in the workplace. On the other hand it was identified as causing tension among employees as some sectors perceive it as "Reverse Discrimination". Affirmative Action seeks to aid the integration of disadvantaged groups into society by dismantling unjust barriers to fulfill integration, thus affirmative action is sought to address these lingering economic and social imbalances that constitute the historical legacy of apartheid in South Africa, (Kanya, 2000).

✦ General observation is that emphasis is given to racial and gender aspects of the Act and very little emphasis on disability aspects. However, Affirmative Action is also about ensuring that suitably qualified people from designated groups have equal employment opportunities and are equitably represented in all occupational categories and levels in the workplace.



### ➤ **Managing Diversity**

The implementation of EEA leads to a diverse workforce in terms of race, culture, gender and ableness. It becomes important for employers to know how to manage that diversity. According to Griggs & Louw, (in Tinarelli, 2000) diversity refers to the full spectrum of differences represented in the general population.

Respondents expressed the following in recruiting people with disabilities:

- *"It is difficult to recruit PWD as they do not disclose their disability"*
- *"Recruitment still has a problem of attracting people with disabilities"*
- *"It is difficult to address staff about the Act because of the race issue"*
- *"Nature of the job available and equipment is not appropriate for PWD"*
- *"Lack of required skills, qualifications from PWD to meet the requirements of the advertised posts"*

It is thus imperative that managers and human resource practitioners are well informed on issues of diversity management. Valuing diversity brings with it a paradigm shift, a new way of thinking about differences among people. The objectives of diversity in the workplace aim to create work environment in which, every group fits, feels accepted, has value, and contributes to the goals of the organization. Workplace diversity also aims at changing the organizational culture, a concept that is beyond just changing numbers in the workplace.

**Section 3.1.**

**Experiences and perceptions of People With Disabilities**

- Profile of Interviewees with Disabilities**

The table below provides identifying details about PWD's who were interviewed. Pseudonyms are given to protect their identity. The institutions at which they work are not identified in order to further protect their identities.

**Table 9: Profile of Interviewed Employees With Disabilities**

NAME	AGE	GENDER	RACE	YEARS/EXP	NATURE OF DISABILITY
MS. A	31-40	FEMALE	WHITE	12	Multiple sclerosis
MS. B	41-50	FEMALE	BLACK	15	Amputation right leg
MS.C	41-50	FEMALE	COLOURED	23	Left blind eye
MS.D	61-70	FEMALE	WHITE	22	Partially deaf both ears
MR. E	41-50	MALE	BLACK	9MONTHS	Deformed right leg
MR.F	21-30	MALE	BLACK	10MONTHS	Polio deformed leg

- Knowledge of the Act**

The majority of respondents were aware of the Act, only 2 of the 6 had no knowledge at all. Even though they were aware of this Act, all of them were either not certain about the contents or did not know details, responses were:

- *"I am not very clear, because I have not seen the document, but ---, uhm is about Affirmative Action and people with disabilities"*
- *"I am not well versed with other aspects the of Act, I have not read it through, but it is about dealing with unfair discrimination, medical testing is prohibited to a certain extent"*
- *"People with disabilities have a right to work"*
- *"I do not know, I have not seen it"*

The above response are indicative of a lack of awareness and knowledge of the EEA. Incidentally, this response is consistent with the responses obtained from the human resource practitioners. There is thus a general lack of knowledge about this Act and it will be unlikely to achieve progress in implementation if both management and beneficiaries of the Act do not have sufficient knowledge of it.

- **Experiences**

- **Recruitment**

Four out of the six respondents are old members of the public service. Only two out of the four mentioned employees were recruited after the promulgation of the EEA. Five of the six respondents were recruited by word of mouth.

- **Reasonable Accommodation**

Five out of the six respondents were not aware of the reasonable accommodation clause (RA) of the EEA. Common RA in the workplace is on physical working environment i.e. issues of accessibility. One respondent was aware and had already advocated for them in her working environment, after sustaining an injury at work. Together with the supervisor they forwarded a letter to the Department of Works to “*adjust doors, toilet seats, hinges of doors and handles*” i.e. to improve physical conditions of the workplace.

This initiative indicates readiness of personnel and beneficiaries to be proactive in facilitating implementation of the Act when armed with the right information.

It is important that the disability of the employee be known to the employer in order for him/ her to be able to provide required accommodation. The Employment Equity Code of Good Practice, section 6.4 states that “ The obligation to make reasonable accommodation may arise when an applicant or employee voluntarily discloses a disability related accommodation need or when such need is reasonably self evident to the employer”

### ➤ **Career Path**

Respondents knew the existence of the institutional training programmes and they felt that they were part of those processes. All respondents were positive about better chances and promotion opportunities in the workplace. The Employment Equity Code of Good Practice, section 10 states, “ employees with disabilities should be consulted so as to develop specific career advancement programmes responsive to their needs and circumstances

- **Perceptions and Experiences**

### ➤ **Treatment by other colleagues**

There was unanimous agreement from all interviewees that their colleagues were generally supportive and were treating them fairly. Disclosing their status in the workplace has helped to facilitate this fair treatment.

- **Views on the Act**

Respondents who were not clear about the Act could not comment on this question as expected. Two of the participants responded as follows:

➤ *“I am happy about the Act”*

➤ *“I have questions; Is the Act working for PWD?, Have they considered inward feelings of PWD? , How about the departmental progress report how far are they with finalizing the report”?*

The above information clearly reflects the gap in knowledge of the EEA.



## **CONCLUSION**

This chapter covered analysis and discussions and these discussions were divided into three sections. Section one focused on the status of EEA implementation at the provincial office and the interviewed institutions.

Section two discussed experiences and perceptions of human resource practitioners. Section three provided experiences and perceptions of people with disabilities which were also analyzed in relation to the literature review.

The next chapter concludes the study. It summarizes the main findings and provides recommendations.

## CHAPTER 5

### CONCLUSIONS AND RECOMMENDATIONS

#### 5.1. INTRODUCTION

This chapter is the summary of the main findings and key recommendations of the research conducted.

#### 5.2. CONTEXT

This study was conducted in four districts plus the Provincial Human Resource Office of the Department of Health KwaZulu-Natal. The districts represented rural, semi rural, and urban settings. Human Resource Practitioners and Employees With Disabilities were interviewed from each identified institution in the district.

#### 5.3. PURPOSE AND OBJECTIVES OF THE STUDY

The purpose of the study was to explore the perceptions and experiences of key personnel and people with disabilities in respect of implementation of the Employment Equity Act by Department of Health and this purpose was met.

The findings relating to each of the objectives will now be discussed.

**Objective one:** To explore the perceptions and experiences of key personnel (human resource) in implementation of EEA

The findings pertaining to this objective reveal that key personnel in the Department of Health

- lack knowledge of the Act
- lack understanding of the reasonable accommodation clause of the EEA
- are unable to compile Employment Equity Plans by institutions

- find it difficult to implement affirmative action measures at these institutions
- are unable to ensure diversity in the workplace
- report good working relationships between employees and employees with disabilities within the Department of Health
- reported that key personnel are committed and willing to acquire knowledge in order to implement the requirements of the EEA.

**Objective two:** To explore the perceptions and experiences of people with disabilities in the workplace on EEA implementation

The findings reveal that PWD in the Department of Health

- have knowledge and understanding of the Act although this level of knowledge is not satisfactory in view of the pace at which the EEA should be implemented.
- felt that the research has created awareness among key personnel and PWD's in terms of the EEA
- have an acceptable level of knowledge with regards to the reasonable accommodation clause of the Act
- are aware of general skills development processes although this process did not cater for special needs of PWD's
- lack the forum to learn, share and raise specific concerns of people with disabilities
- have good and supportive relationships with colleagues.

**Objective three:** The following problems and barriers to implementation of EEA were identified by respondents

- Inability of human resource practitioners to contextualize the major provisions of the Employment Equity Act No 55 of 1998

- Inability to translate the requirements of the Act into action i.e. developing an Employment Equity Plan
- Difficulty in integrating diversity management into human resource strategy
- Insufficient training in EEA implementation
- Ineffective EEA monitoring procedures at district level and at institutional level
- Ineffective EEA reporting [procedures at district level and at institutional level
- There is no dedicated budget for Employment Equity Act implementation
- Lack of Equity Employment Committees to drive this process at institutions and district levels. It is only the Head Office that has constituted this committee and it is expected to provide technical and practical expertise to districts and institutions.
- lack of knowledge about disability and issues pertaining to this sector
- Negative perceptions of Affirmative measures which impact negatively on the EEA implementation process
- Scarcity of skills within the sector of People With Disabilities



## **5.4. RECOMMENDATIONS**

### **5.4.1. For the Department of Health**

The main gap report of 2001 does not appear to be inclusive of all institutions. This leads to a lack of comprehensive compliance reporting on provincial institutions. Opportunity for commending or motivating compliant and noncompliant institutions, respectively, may be lost if the institution was missed during the assessment. It is recommended that an inventory of all institutions be prepared prior to compiling a compliance report. This exercise will ensure that all institutions listed have been assessed for compliance with the EEA.

Lack of awareness of the EEA, as observed from direct responses of the respondents interviewed calls for re-training of management, human resource practitioners, officials and PWD's. The training should link to other legislation e.g. Constitution, Skills Development Act, International Declaration etc. in order to promote understanding of the big picture. It is recommended that equal attention be given to both EEA and SDA on implementation.

Lack of awareness of the availability of the EEA Plan among the ranks and PWD's in the employment suggests a need for transparency in compiling the report to cover the following issues:

- Purpose of the Act and who are the beneficiaries of the Act as well as how such benefits can be derived
- The rights of beneficiaries as outlined in the Act
- Need and contents of the "Good Code of Practice" document
- Budget available as a resource to facilitate the implementation of the EEA Plan.
- Members of the Equity Employment Committee
- Progress of EEA implementation

The approach to compiling the EEP should be bottom up i.e. institutions should be involved in order to ensure that the overall EEP from the head office flows from institutional plans. It is recommended that programmes be implemented to empower PWD's both within and outside the workplace. This will increase opportunities for PWD's to acquire skills and qualifications that will empower them to be self-sufficient. Such skills could include:

- Project management
- Diversity management
- Entrepreneurial

The recruitment process of PWD's needs to be reviewed and or standardized i.e. in terms of specifying positions for PWD's in newspaper advertisements, whether recruitment should be via renowned organizations for PWD's etc.

The Department of Health to make a concerted effort to establish links with PWD organizations since they are stakeholders and beneficiaries of the EEA. This will help to addressing issues such as:

- Reasonable accommodation
- Implement acceptable strategies in the workplace in order to comply with the EEA
- Improving role of PWD's in their employment
- Document best practices for promoting compliance with EEA

The Department should reward institutions that meet set targets for EEA implementation.

To keep accurate personnel records for all institutions in order to ensure integrity of data for purposes of EEA and other audits that may be undertaken to improve implementation of various pieces of legislation.

PWD's could consider forming their own forum where they can discuss issues of interest to them.

### **5.5.2 For the Social Work Profession**

An increased awareness and understanding of EEA is necessary for social workers so that they can:

- Implement community programmes that educate communities on the Employment Equity Act and other human rights legislation.
- Promote a culture of inclusivity of PWD's in communities as a means to prevent discrimination of PWD's within communities and the workplace.
- Ensure that clients with disabilities are treated in accordance with the law
- Challenge discriminatory practices when they observe them
- Insist that their employing organization implement the Employment Equity Act
- Monitor policy implementation, make recommendations when necessary
- Engage in research that can intervene in policy formulation
- In addition it is recommended that at tertiary level social work students be sensitized to the needs of People With Disabilities.

## **CONCLUSION**

The Employment Equity Act No. 55 of 1998 and the Code of Good Practice on Key Disability Aspects are key documents that provide a framework to redressing the imbalances of the past and elimination of unfair discrimination in the work place. However, its power will be in its implementation.

This research has revealed that implementation is a slow and tedious process and needs constant monitoring and support for it to be successful. As a result of the promulgation of EEA in 1998, issues of diversity in the workplace can no longer be swept under the carpet, old mindsets can be legitimately challenged and new ways of doing things can be legitimately explored.

Only when everyone is fully committed to this course, will people with disabilities be able to take their rightful place in the open labour market.



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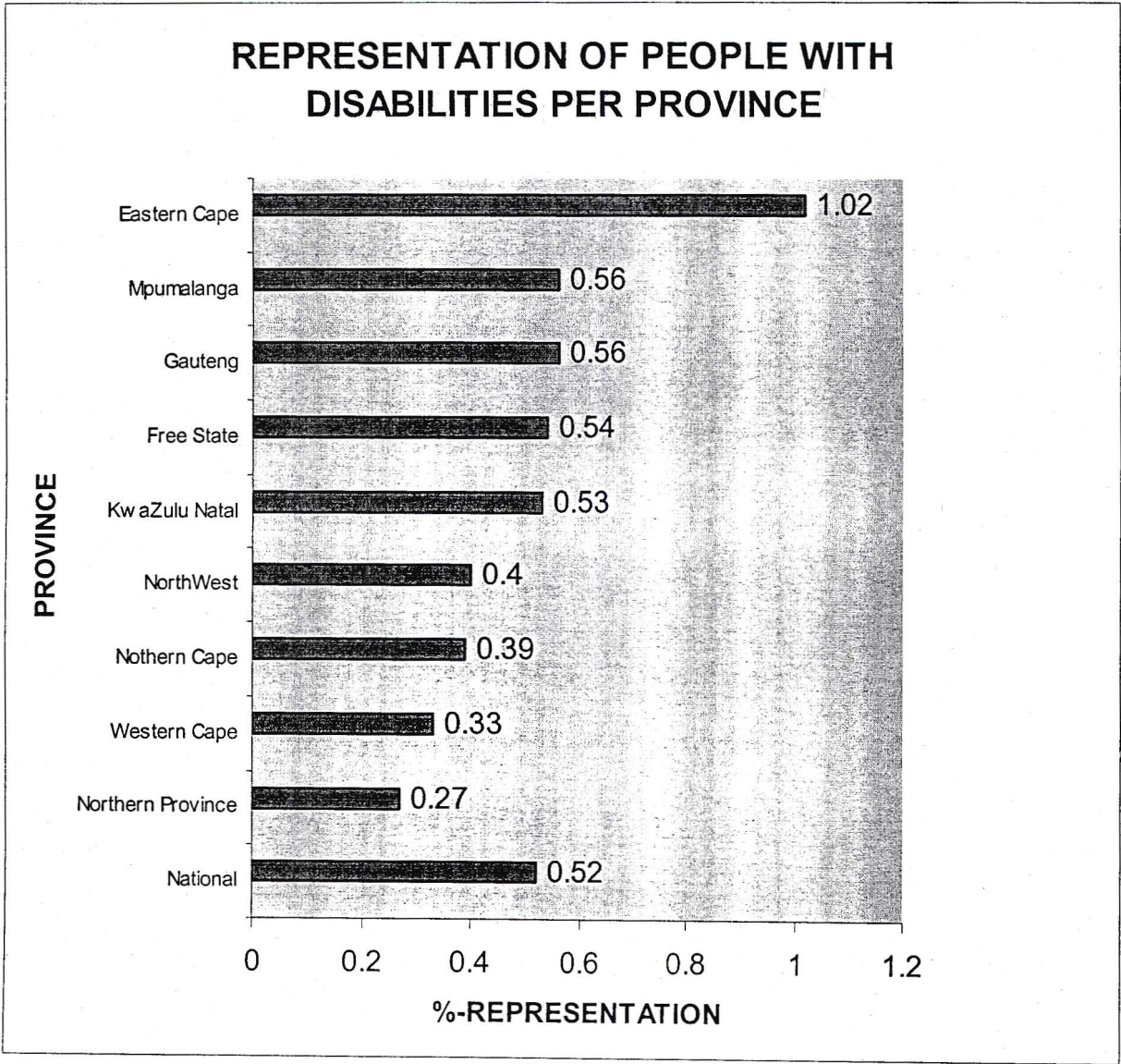
**ANNEXURE I**

**DISABLED POPULATION BY PROVINCE**

	SIGHT	HEARING	PHYSICAL	MENTAL	MORE THAN ONE	UNSPECIFIED	TOTAL
EASTERN CAPE	161898	68531	115717	41432	35997	38604	462179
FREE STATE	133614	33045	41960	13947	16461	18127	257154
GAUTENG	211769	59868	69936	24033	26030	63906	455542
KWAZULU NATAL	183758	76034	129894	42646	24895	44863	502090
MPUMALANGA	98322	31895	41381	12211	9019	19085	211913
NOTHERN CAPE	18529	6083	9052	3791	2403	7135	46995
NORTHERN PROVINCE	113088	51416	60078	22578	16019	33690	296869
NORTHWEST	129442	37571	54706	17768	16193	23134	278814
WESTERN CAPE	40603	18965	35051	14146	6499	30174	145438
NATIONAL	1091023	383408	557775	192552	153516	278720	2656994

**SOURCE: CENSUS 96 (STATS SA)**

ANNEXURE II



# **ANNEXURE III** **QUESTIONNAIRE**

**TARGET: HR MANAGEMENT**

1. NAME & WORK TEL. No.: (FOR CONTACT PURPOSES ONLY)		
2. GENDER: <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 5px; width: 40%;">FEMALE</div> <div style="border: 1px solid black; padding: 5px; width: 40%;">MALE</div> </div>		MARK APPROPRIATE BOX WITH "X"
3. RACE: <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 5px; width: 40%;">BLACK</div> <div style="border: 1px solid black; padding: 5px; width: 40%;">COLOURED</div> </div> <div style="display: flex; justify-content: space-around; margin-top: 10px;"> <div style="border: 1px solid black; padding: 5px; width: 40%;">INDIAN</div> <div style="border: 1px solid black; padding: 5px; width: 40%;">WHITE</div> </div>		
4. AGE GROUP: <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 5px; width: 40%;">21-30</div> <div style="border: 1px solid black; padding: 5px; width: 40%;">31-40</div> </div> <div style="display: flex; justify-content: space-around; margin-top: 10px;"> <div style="border: 1px solid black; padding: 5px; width: 40%;">41-50</div> <div style="border: 1px solid black; padding: 5px; width: 40%;">61-70</div> </div>		MARK APPROPRIATE BOX WITH "X"
5. PREFERRED LANGUAGE: <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 5px; width: 40%;">ZULU</div> <div style="border: 1px solid black; padding: 5px; width: 40%;">ENGLISH</div> </div> <div style="display: flex; justify-content: space-around; margin-top: 10px;"> <div style="border: 1px solid black; padding: 5px; width: 40%;">AFRIKAANS</div> <div style="border: 1px solid black; padding: 5px; width: 40%;">OTHER</div> </div>		MARK APPROPRIATE BOX WITH "X"
6. OCCUPATION:		
7. YEARS IN CURRENT POSITION:		
8. WHAT IS YOUR INVOLVEMENT IN RECRUITMENT OF PERSONNEL		

## ANNEXURE IV QUESTIONNAIRE

**TARGET: PEOPLE WITH DISABILITIES**

1. NAME & WORK TEL. No.: (FOR CONTACT PURPOSES ONLY)	
2. GENDER: <div style="display: flex; justify-content: space-around; margin-top: 10px;"> <div style="border: 1px solid black; padding: 2px 10px;">FEMALE</div> <div style="border: 1px solid black; padding: 2px 10px;">MALE</div> </div>	MARK APPROPRIATE BOX WITH "X"
3. RACE: <div style="display: flex; justify-content: space-around; margin-top: 10px;"> <div style="border: 1px solid black; padding: 2px 10px;">BLACK</div> <div style="border: 1px solid black; padding: 2px 10px;">COLOURED</div> </div> <div style="display: flex; justify-content: space-around; margin-top: 10px;"> <div style="border: 1px solid black; padding: 2px 10px;">INDIAN</div> <div style="border: 1px solid black; padding: 2px 10px;">WHITE</div> </div>	MARK APPROPRIATE BOX WITH "X"
4. AGE GROUP: <div style="display: flex; justify-content: space-around; margin-top: 10px;"> <div style="border: 1px solid black; padding: 2px 10px;">21-30</div> <div style="border: 1px solid black; padding: 2px 10px;">31-40</div> </div> <div style="display: flex; justify-content: space-around; margin-top: 10px;"> <div style="border: 1px solid black; padding: 2px 10px;">41-50</div> <div style="border: 1px solid black; padding: 2px 10px;">61-70</div> </div>	MARK APPROPRIATE BOX WITH "X"
5. PREFERRED LANGUAGE: <div style="display: flex; justify-content: space-around; margin-top: 10px;"> <div style="border: 1px solid black; padding: 2px 10px;">ZULU</div> <div style="border: 1px solid black; padding: 2px 10px;">ENGLISH</div> </div> <div style="display: flex; justify-content: space-around; margin-top: 10px;"> <div style="border: 1px solid black; padding: 2px 10px;">AFRIKAANS</div> <div style="border: 1px solid black; padding: 2px 10px;">OTHER</div> </div>	MARK APPROPRIATE BOX WITH "X"
6. FORM OF DISABILITY:	
7. CAUSE OF DISABILITY:	
8. HOW LONG HAVE YOU HAD THE DISABILITY	
9. ASSISTIVE EQUIPMENT USED	
10. OCCUPATION	
11. YEARS IN CURRENT POSITION	
12. PREVIOUS EMPLOYER & POSITION HELD	
13. YEARS IN PREVIOUS POSITION	



## **ANNEXURE V**

### **INTERVIEW SCHEDULE**

#### **TARGET PERSONNEL: EMPLOYMENT EQUITY MANAGER**

##### **ROLE OF INCUMBENT**

- Overall functions
- Specific functions with respect to Employment Equity Plan (EEP)
- Confirm Key Performance Areas include Equity Employment Act/Plan

##### **STRUCTURE OF THE EMPLOYMENT EQUITY COMMITTEE (EEC)**

- Composition of the EEC
- Champion of the EEC
- Availability of budget. Percentage of budget in relation to provincial/regional payroll

##### **PROCESS OF FORMING THE EEP**

- **Process followed to draw up EEP**
- Awareness, training, communication (workplace forums, pamphlets, workshops) etc.
- Consultation: policies and procedures (recruitment, job advertising, interviews, access to workplace, equipment and time)
- Time frames: Audit position to target for equity employment, targets set
- Communicating the plan: Intranet, pamphlets, newsletter, workshops etc.
- Monitoring and evaluation: when, how, by who and to whom
- Reporting: Report submitted in June 2000? If not then when was the submission, accessibility of report?

## **ANNEXURE VI**

### **INTERVIEW SCHEDULE**

#### **EMPLOYMENT EQUITY OFFICER**

This interview schedule is divided into six broad categories named: A, B, C, D, D, E & F

#### **A. INTRODUCTORY PHASE**

- \* Introduction
- \* Purpose of the interview
- \* Assures confidentiality
- \* Ask permission to take notes, use tape recorder

#### **B. INFORMATION ABOUT THE RESPONDENT**

Refer to the questionnaire (Annexure III)

#### **C. STAFF**

- \* How many
- \* Gender distribution in staff compliment
- \* People with disabilities, how many, forms of disabilities
- \* Positions held by people with disabilities

#### **D. KNOWLEDGE OF EMPLOYMENT EQUITY ACT No. 55 OF 1998 AND ITS IMPLEMENTATION**

- \* Your understanding
- \* Recruitment policy and Employment Equity Act
- \* Implementation process:-
  - (i) When
  - (ii) How
  - (iii) Employment Equity Plan
  - (iv) Code of good practice
  - (v) Reasonable accommodations

- \* Monitoring mechanism
- \* Barriers to implementation
- \* Annual Report

**E. EXPERIENCES AND PERCEPTIONS**

- \* Your own feelings about the Act (reasons)
- \* Your own experiences (Implementation)
- \* Challenging aspects of the Act
- \* Staff perceptions about the Act and people with disabilities.
  
- \* Advantages and disadvantages
- \* Feelings of people with disabilities

**F. GENERAL**

- \* Your view about the Employment Equity Act.
- \* Recommendations, comments

Thank you.

## **ANNEXURE VII**

### **INTERVIEW SCHEDULE**

#### **PEOPLE WITH DISABILITIES**

This interview schedule is divided into seven broad categories named: A, B, C, E, D, E, F & G.

##### **A. INTRODUCTORY PHASE**

- \* Introduction
- \* Purpose of the interview
- \* Assures confidentiality
- \* Ask permission to take notes, use tape recorder

##### **B. INFORMATION ABOUT THE RESPONDEDNT**

Refer to the questionnaire (Annexure IV)

##### **C. KNOWLEDGE AND INFORMATION OF EMPLOYMENT EQUITY ACT**

- \* Awareness of the Act
- \* How
- \* Familiarity with the contents of the Act
- \* What aspects of the Act

##### **D. EXPERIENCES AND PERCEPTIONS OF PEOPLE WITH DISABILITIES IN THE WORKPLACE**

###### **1.1 Process of recruitment**

- \* Was there an advert, what kind
- \* Was it specific to people with disabilities



## **1.2 INTERVIEW**

- \* People involved (Who)
- \* Types of questions asked
- \* Discriminatory / irrelevant questions

## **1.3 OFFER**

- \* Package of the position
- \* Its similarity to equivalent posts

## **1.4 REASONABLE ACCOMMODATION**

- \* Physical working environment (access)
- \* Working hours

## **1.5 CAREER PATH**

- \* Training (job specific)
- \* Staff development plan or programme
- \* Opportunities for high positions

## **E. TREATMENT FROM OTHER COLLEAGUES**

- \* Supportive
- \* Discriminatory, negative

## **F. HIS OR HER PERCEPTIONS**

- \* Own position with the department
- \* Staff member's perceptions about her / his positions / presence

## **GENERAL**

- \* Your view about the Act
- \* Recommendations, comments

Thank you.