

**KWAME NKRUMAH UNIVERSITY OF SCIENCE AND TECHNOLOGY**

**COLLEGE OF HEALTH SCIENCES**

**SCHOOL OF MEDICAL SCIENCES**

**DEPARTMENT OF COMMUNITY HEALTH**



**THE INFLUENCE OF PHYSICAL DISABILITY ON THE LIVELIHOODS  
OF**

**THE DISABLED PERSONS AND THEIR FAMILIES IN THE TECHIMAN  
SOUTH MUNICIPALITY-BRONG AHAFO REGION OF GHANA**

**By**

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**NOVERMBER, 2016**

# KNUST



**KWAME NKRUMAH UNIVERSITY OF SCIENCE AND TECHNOLOGY**

**KUMASI, GHANA**

**The influence of physical disability on the livelihoods of the disabled persons and  
their families in the Techiman South Municipality**

**By**

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**A Thesis submitted to the Department of Community Health,  
College of Health Sciences**

**In partial fulfillment of the requirements for the degree of  
Master of Science (Disability, Rehabilitation and Development)**

**NOVERMBER, 2016**

## DECLARATION

I hereby declare that this submission is my own work towards the award of MSc Disability, Rehabilitation and Development and that, to the best of my knowledge, it contains no previously published materials by another person, nor material which has been accepted for the award of any other degree of the University, except where due acknowledgment has been made in the text.

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## DEDICATION

To my parents, Mr and Mrs Mensah Bonsu and my wife Matilda Mensah Bonsu for their support and encouragement. Thank you for always being there to support and guide me throughout my life. God bless you all and grant you with long life.

# KNUST



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CBR	Community Based Rehabilitation



DFID	Department for International Development
GDP	Gross Domestic Product
GSA	Ghana Statistical Agency
ICF	International Classification of Functions
ILO	International Labour Organization
KNUST	Kwame Nkrumah University of Science and Technology
NCPEDP	National Centre for Promotion of Employment for Disabled People
NGOs	Non-Government Organisation
NOD	National Organization on Disability
OECD	Organisation for Economic Co-operation and Development
ONS	Office for National Statistics
PDs	Physical disabilities
PWDs	Person with Disabilities
UN	United Nations
UNCRPD	United Nations Convention on the Rights of Persons with Disabilities
WHO	World Health Organization

## **ABSTRACT**

Livelihoods can help individuals and their families to secure the necessities of life and improve their economic and social situations. It is therefore imperative to support

disabled persons and their families through community- based rehabilitation (CBR) programmes and other livelihoods components to reduce the effects of the disability. To reduce the influence of the disability on the disabled persons and their families, it is essential to provide the needed mechanisms to promote the livelihoods of physically disabled person and their family members. Therefore, the purpose of the study was to investigate the influence of physical disability on the livelihoods of disabled persons and their families at Techiman South Municipality in Brong-Ahafo region of Ghana. The study aims to identify how physically disabled persons and their family members manage the influence of the disability on their livelihoods and also examine mechanisms needed to promote the livelihoods of physically disabled persons.

This study adopted the qualitative research methods and was limited to the Techiman South Municipality as a case study. The researcher adopted the non-probability sampling procedure, that is, purposive sampling, in the data collection. The study focused on physically disabled persons and their family members as participants. The instrument used was interview schedules. The data was obtained by interviewing 9 physically disabled persons and 9 family members, one each from a disabled person's family. The data were analyzed directly by performing thematic analysis. The study concluded that, physical disability adversely affects physically disabled persons and their family members' livelihoods. The major impacts on the disabled persons were low income level, limitation on employment opportunities, lack of career development, and lack of access to credit and effects on personal well-being. Also, the influence on family members such as financial challenges and emotional stress were also identified as a major problem. Another key finding from the study was that, both the physically disabled persons and their family members developed coping mechanisms to handle the effects on their livelihoods. Physically disabled persons adopted financial management

and membership of Disabled Persons' Organizations as mechanisms to manage the influence on their livelihoods while, financial management, savings and collective effort of family members were used by family members to mitigate livelihoods challenges on their livelihoods. In view of these findings, there is the need to develop mechanisms to promote the livelihoods of physically disabled persons. Likewise, family members of disabled persons of working age should be assisted and encouraged to develop skills and start or return to work to generate income to reduce financial burden.





## CHAPTER ONE

### INTRODUCTION

#### 1.1 Background to the study

Physical disability includes any type of physical state that significantly influences one or more major life activities (WHO, 2012). The World Health Organization (WHO) 'estimates that car accidents cause over 1.2 million deaths and about 50 million people are injured per year' (WHO, 2009). Developing countries account for over 85% of the deaths, and close to 90% of disability is caused by road traffic accidents globally (Krug, 1999 & Åstrøm *et al*, 2006). According to the 2010 Global Population estimate, about 15% of the world's population lives with some form of disability (World Bank, 2011). Ghana Statistical Agency (2010) also confirms that 10% of the country's population suffers from a form of disability. These suggest that disability has gained recognition at all level (Voluntary Service Overseas, 2006). Disability is worsening global disaster with enormous health, social, psychological and economic impacts on individuals, families, communities and nations. Disability is likely to influence disabled persons livelihoods because of economic situation available in the most developing countries (ILO, 2007). This is dangerous for development because disabled persons according to the above statistics are likely to affect productive.

Employment enables physically disabled persons to participate and contribute to community life. (Handicap International, 2015). Nevertheless, the situation concerning employment and livelihoods for physically disabled persons is poor. They are less likely to be employed and are therefore more likely to be economically and socially excluded from the community (Murphy, 1982). Globally, statistics available allude that unemployment for working age disabled people in developing and industrialised countries is between 80-90% and 50-70% respectively (Naami *et al*., 2012). Adequate

and secure livelihoods may therefore emerge as central concern to physically disabled person's well-being. To reduce the burden physically disabled persons, impose on family members, enough income generation and employment opportunities must be available to them to manage their livelihoods.

Disability in a family may entail major economic problems at household levels'. This is because family members have to use the available resources to provide care and support to the disabled person because in poorer countries there may be no much support offered to disabled persons (WHO, 2012). When physical disabilities cause individuals to be unable to fulfill their basic needs, family members are then expected to provide these needs. When the disabled person is unable to work or has limited employment opportunities to generate income, it is often family members who are required to fill the financial gap. Moreover, children might stop their education at any level due to financial constraints if one of the parents is physically disabled. The household might as well find itself in a debt that may result into exposing family properties for sale to repay back the debt if the situation gets worse. There are financial responsibilities connected with obtaining good social services and health; transportation; and medications and special food for the disabled person. Thus, families deal with the repercussion of the barriers and constraints that disabled individuals may face. These place a set of extra demands or challenges on the family system; most of these demands last for a long time (Murphy 1982). Many of these challenges and difficulty may cut across age of the person with the disability, disability type, and type of family in which the person lives and the predominant economic activity in the area.

The major economic activity in Techiman municipality, the site for this study, are farming and trading. As a result, individuals who suffer from physical disability like mobility impairment may be less likely to find a job to improve the livelihood for

themselves and the family in such a community (ILO, 2007). It is therefore imperative to support the disabled persons such that they can have jobs that enable them generate income to sustain their livelihoods.

It is based on this premise that this research seeks to validate influence physical disability has on the livelihoods of disabled persons and their family members using Techiman South Municipality as a case study.

## **1.2 Problem statement**

The Universal Declaration of Human Rights (1948) Article 23 (1) affirms that every person has the right to work, has free choice in employment and to be guarded from unemployment (United Nations, 1948). This declaration recognizes that every person has the right to be provided with employment opportunities. Although, the above declaration has been followed and implemented by some countries, for majority of countries in Africa like Ghana, the provision of employments for physically disabled persons are still inadequate. The International Labour Organization (ILO) has indicated that as high as 80 % of disabled persons are unemployed in many countries and 386 million individuals of working age have a disability (ILO, 2007).

To improve the livelihoods of physically disabled persons, the parliament of Ghana passed the Persons with Disability Act 715 which among others, seeks to support the provision of employments for disabled persons in the country. Access to skills development, financial support and availability of employments are required to enhance the livelihoods of physically disabled persons in the country. In addition, financial support in the form of flexible loans, credits, common funds, and grants are needed to meet the financial challenges disabled persons face. Moreover, employments such as self-employments and wages employments may be essential to sustain the livelihoods

of person with disability (ILO, 2007). When disabled persons are not able to secure adequate employment to sustain their livelihoods family members deal with the repercussion of the livelihoods challenges. This is such that family members are often needed to reduce working hours so as to attend to the needs of disabled person. This adversely affects income generation of family members. Families experience household interruptions such that providing rehabilitation and other services may pose financial challenges on family members that surpass the burden experienced by other families without disability. In most situations, financial shocks appear in the form of households expenses, educational bills and hospital or medical bills that exceed their monthly or daily income and may indebt them to their employers or community Care-taking responsibilities and extra financial issues create emotional stress on the family systems such that there is uncertainty about the cost to rehabilitate the disabled person, about the future, about the desires of other family members and about who is providing enough assistance.

While studies indicate that physically disabled persons' livelihoods are adversely affected due to the disability, little is known about the relationship between the effects on them and those on their families and how they are supported to improve their livelihoods (Jemta et al., 2007).

This study therefore sought to investigate the influence of physical disability on the livelihoods of the disabled persons and their families in the Techiman South Municipality of the Brong Ahafo region of Ghana.

### **1.3 Research questions**

The study sought to answer the following questions:



1. What are the effects of physical disability on the livelihoods of disabled person?
2. To what extent are the livelihoods of family members of physically disabled person affected by the occurrence of disability in the family?
3. How are physically disabled persons and their families managing the effects of disability on their livelihoods?
4. What mechanism could be put in place to promote the livelihoods of physically disabled persons?

#### **1.4 Main objective**

To investigate the effects of physical disabilities on the livelihoods of disabled persons and their families

#### **1.5 Specific objectives**

1. To assess the effects of physical disability on the livelihoods of the disabled persons.
2. To examine how the livelihoods of family members of physically disabled person affected by the occurrence of disability in the family.
3. To identify how physically disabled persons and their families managing the effects of the disability on their livelihoods.
4. To examine mechanism needed to be put in place to promote the livelihoods of physically disabled persons.

#### **1.6 Rationale for the Study**

The nature of work available and economic situation in Techiman South Municipality is such that one needs to have physical strength to secure adequate livelihoods.

Physically disabled persons are likely to face challenges because of these difficulties. Again, facilities for employment/self-employment and access to financial assistance are



almost non-existent in the community. In addition, family members of physically disabled persons are likely to experience financial challenges due to disability in the family. Focusing on those areas, this study tries to investigate livelihoods challenges experienced by disabled persons and their family members

### **1.7 Significance of the study**

The study examined the effects physical disability has on disabled persons and their family members, explored coping mechanisms adopted by physically disabled persons and their families to deal with the effects of disability on their livelihoods and how to improve disabled person's livelihoods. The result of the study will help create awareness and also design appropriate medical, rehabilitation and life adjustment intervention strategies to support livelihoods of physical disabled persons and their families. Similarly, the study will be of huge advantage to students, institutions and researchers. For example, it will serve as a teaching material to lecturers who want to research into the livelihoods of physically disabled persons and their household. In addition, prospective researchers and students can use it as a secondary data and part of their literature review. Finally, Government and policy makers will find this study useful as some of the findings in the study will inform their decisions as far as policy formulation and implementation is concerned.

### **1.8 Limitation of the study**

The main limitation of this study was that, data were collected from the physically disabled persons and their family members who are from Techiman South Municipality, therefore their responses may not be representative of physically disabled persons and their families in Ghana.

Again, the study is limited to livelihoods such as job security and income generation of physically disabled persons and their family member therefore the responses may not be representative of other livelihoods components.

### **1.9 Scope of the study**

The main objective of the study was to investigate the effects of physical disabilities on the livelihoods of disabled persons and their families. Thus; the scope of the study is limited to the livelihoods effects of disability on disabled persons and their family members. Those with upper or lower limbs amputation and paralysis due to accidents or diseases were included in this study. For this study, people with hearing impairment, visual impairment and traumatic brain injury are not included since interviewing people with hearing impairment need skills in sign language. Again traumatic brain injury victims also require close acquaintance with the medical diagnosis process and different research strategy, because, people with brain injury might face with difficulties to memorize or communicate.

Physically disabled persons and their families experience the livelihoods effects of the disability through time, for this reason, physically disabled person who encountered their disability one year and above before the onset of this research are included in this study. The scope of the study could have covered a larger area and give a more holistic picture of the issue under investigation, however the time frame for the final presentation of the work, as well as financial constraints did not allow for a wider coverage of the study. Due to the small sample size, the researcher does not intend to generalize the findings.

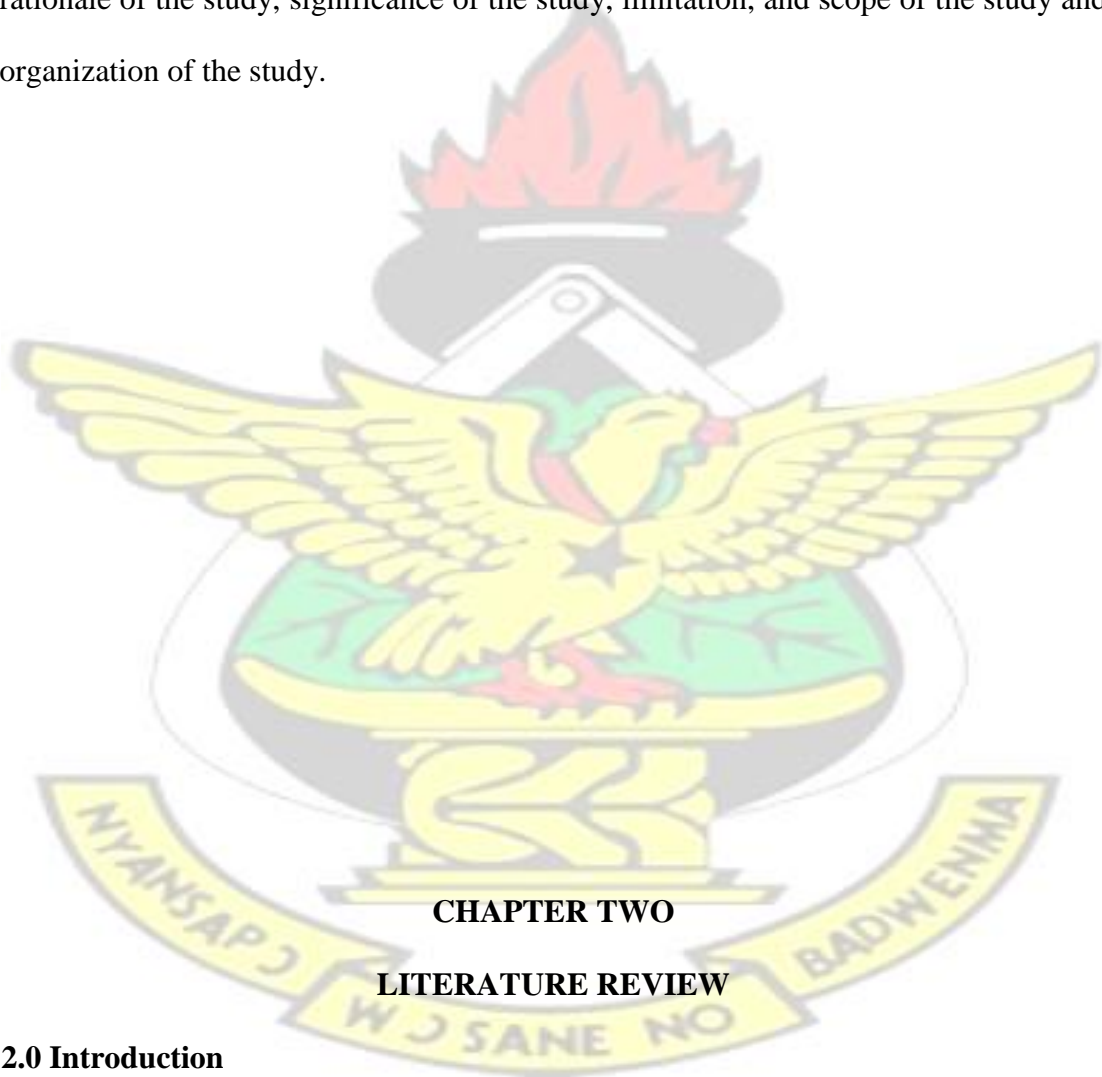
### **1.10 Organization of the study**

This study contains six main chapters. Chapter one covers the background information; the objectives of the study, significant of the study and scope and limitations. Chapter

two contains literature review, chapter three is made up of various methods used for the research, chapter four presents the analysis and results or findings, and chapter five is discussions of results and the chapter six deals with conclusions and recommendations.

### **1.11 Conclusion**

The chapter presented the introductory part of the study. This included the background to the study, the statement of the problem, the research questions, and the objectives, rationale of the study, significance of the study, limitation, and scope of the study and organization of the study.



## **CHAPTER TWO**

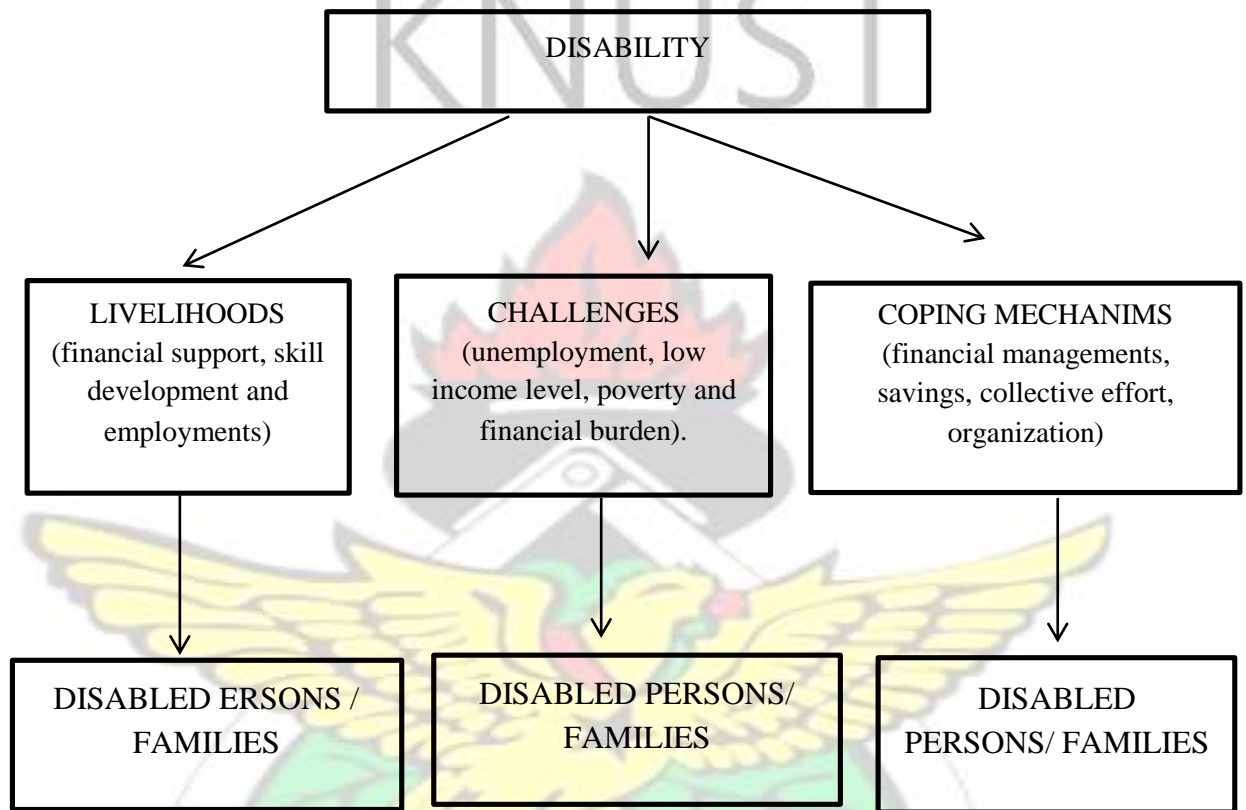
### **LITERATURE REVIEW**

#### **2.0 Introduction**

In this chapter, literature was reviewed on the following issues: conceptual framework of the study, disability, social and medical models of disability, International action on disability and livelihoods, livelihood challenges experienced by physically disabled

persons, livelihood challenges experienced by families of disabled persons, coping mechanisms adopted by physically disabled persons and their families and how to improve physically disabled persons' livelihoods.

## 2.1 Conceptual framework of the study



**Figure 1: Conceptual Framework**

**Source: Author's own Construct (2016)**

This conceptual framework gives an overview of how physical disability affects the livelihoods of disabled persons and their family members. It explains how livelihoods components such as financial support, skill development and employments can contribute to the well-being of the disabled persons and their families. Challenges associated in accessing these livelihoods results into unemployment, low income level, poverty and financial burden. Strategies adopted by disabled persons and their family



members include, financial managements, savings, collective effort of family members and membership of Disabled Persons' Organisations.

## **2.2 Disability**

Disability has not been explained by most studies such as disability studies and social science (Mitra, 2006). This has resulted into different definitions of disability based on different context such as clinical, educational and rehabilitation. Different models have been applied in explaining disability. Furthermore, different concepts of various models of disability also influence livelihoods. The following are the two models explaining the concept of disability.

### **2.3 The Medical Model**

The model is linked with medicalization of disability. This model considers disability as a problem of individual that is directly caused by diseases, an injury or some other health condition that requires medical care in the form of treatment and rehabilitation (Mitra, 2006). According to this model a disabled person is unable to perform as normal person does and this requires rehabilitation in bringing the person back or close to the normal (Ibid). The Medical Model has been criticized on different grounds including its normative strength (Amundson, 2000). Barron and Amerena (2007) argue that the medical model is connected with negative ideas of permanency, dependency and passivity, and focuses on deficit rather than talent. Besides, it ignores fundamental needs and rights, such as employment, education, housing and the role of society in disabling the individuals. The model demonstrates how rehabilitating disabled person such as providing prosthesis and other support devices can help disabled persons to enhance their mobility to secure their livelihoods.



## **2.4 The Social Model**

According to this model, disability is caused by the social environmental and needs social changes (Mitra, 2006). This model was developed by Person with Disabilities to criticize the Medical Model. The potency of this model is that it extends beyond impairment and focuses on economic, social, legal, cultural and political dimensions with a rights-based perspective (Turmusani, 2003). It considers disabled persons' unemployment as the outcome of development where lack of adequate policies excludes them from work (ibid). Barron and Amerena, (2007) further suggested that the model, on the basis of human rights approach, focuses upon meaningful determinants of social inclusion such as access to employment, education and community facilities like transport, housing and public places. Braithwaite and Mont (2008) argue that concepts of the social model of disability is similar to Sen's (1999) ideology of poverty as deprivation of capability. Therefore, it is imperative to suggest that attitudinal issues in the community adversely influence the livelihoods of disabled persons. To improve the livelihoods of disabled persons in the community, social environment must be accessible to disabled persons.

## **2.5 The Biopsychosocial model**

The biopsychosocial model is an integration of medical and social models. According to the World Health Organization, there is a coherent view of different perspectives of health from a biological, individual and social perspective (WHO, 2001). The biopsychosocial model posits that disability has its genesis in a health condition that gives rise to impairments, and then to activity limitations and participation restrictions within contextual factors (Ibid). Impairments are problems in body function or structure causing a significant deviation or loss. An activity is the execution of a task or action by an individual and participation is the "lived experience" of people in the actual

context in which they live. The biopsychosocial model is helpful to understand disability in various dimensions. It is difficult to understand the effects of disability by limiting one's information on impairment or other dimensions alone (WHO, 2008). Understanding the effects of disability in terms of limitation of mobility, reduction of participation in social life and social activities will enable us view the person at psychological, biological and other levels to realize lived experience of disability victims.

With respect to this study, the unintended outcome of impairment cause many interrelated problems to the victims and their households, usually restriction of functional ability results lesser participation in leisure, job, loss of income and other customary life. Mostly the prolonged stay at the hospital and difficulty of regimens affects individual's health and leads to withdrawal from social contact and reduction of productivity. This goes to emphasizes that the victims' livelihoods and the general wellbeing will surely be affected.

## **2.6 International Action on Disability and livelihoods**

### **2.6.1 International approaches and framework to disabled people's livelihoods**

UNCRPD is currently the international framework that ensures the rights of disabled people (UN, 2006). Articles 24 and 27 focus on disabled individuals' rights to access education, work and employment. Article 28 of the Convention recognizes the right to an adequate standard of living for disabled persons and their family members through provision of food, clothing and housing without any discrimination. Moreover, the International Labour Organization (ILO) Convention (159) on Vocational Rehabilitation and Employment (Disabled Persons) value disabled people's rights to employment including recruitment, promotion, job retention and return to work (ILO, 2010).

In addition to these international frameworks, distinct approaches have been created to address disabled people's livelihoods. The first approach (twin track approach) recognizes specific issues to be initiated for empowerment of disabled people and disability issues to be included in all areas of work (DFID, 2000).. The second is the recently modified Community Based Rehabilitation concept, also based on the twin track approach, which facilitates access for disabled people and their family to learn the skills, livelihood opportunities and enhanced participation of community life (WHO, 2010b).

Many international organizations chose the twin track approach to address the livelihoods of disabled people. Both WHO and Leonard Cheshire Disability emphasize skill development, self-employment, wage employment, and financial and social protection schemes as the major areas of intervention to improve the livelihoods of disabled people (WHO, 2010, Coleridge, 2007). Skill development activities include basic education, apprenticeships, home-based training, business development skills and vocational training in both specialized institutions and mainstream. Self-employment support targets individual businesses, self-help groups and group businesses focusing upon disabled women and access to savings, micro-credit and start-up capital. Employment support activities are enabling and assisting people to find and retain the jobs, and social protection support measures are the inclusion of disabled people in poverty alleviation programmes, social assistance schemes, compensation and enhancing family and community support. Therefore, based on these approaches and international frameworks, it is imperative to empower disabled persons to improve their livelihoods and have access to livelihoods components.

### **2.6.2 Sustainable rural livelihoods approach**

The sustainable rural livelihoods approach based on Sen's (1999) capability approach can be defined as an approach, which can cope with stress and shocks, enhance capability and assets, and provide sustainable livelihood opportunities (Krantz, 2001). The approach is based upon the five capital assets on which individuals can strengthen their livelihoods (Carney, 1998), these being: social capital (networks, group, faith and trust, community membership); natural capital (land, water, wildlife, biodiversity and the environment); physical capital (shelter, energy, communication and production equipment) ;human capital (skill, knowledge, good health, ability to work); and financial capital (savings, credit, remittances or pensions) which provide different livelihood options for people. The sustainable rural livelihoods are based on the principles of individuals' capability and equitable distribution of resources (Chambers & Conway, 1991). Ellis, (1998) mentioned that the approach promotes and enhances diversified livelihood options, including, keeping livestock, farming, herding, trading, waged labour, salaried employment, remittance from migration, pensions, rental and self-employment like trading, artisan work, and vehicle repair and thatching. Furthermore, various disability-specific frameworks and approaches have been created to address disabled person's livelihoods. The World Health Organisation (WHO, 2010b) reveals that secured access to livelihoods can lower poverty among disabled persons. However, employments and livelihoods challenges experienced by physically disabled persons depict a poor picture. The statistics reveal that unemployment for working age disabled people in developing and industrialized countries is between 80-90% and 50-70% respectively (Naami *et al.* 2012). However, when physically disabled persons have equitable distribution of resources, their capability in terms of



being productive in the community will be manifested. This will help reduce financial burden they impose on their family members.

## **2.7 Livelihood challenges experienced by physically disabled people**

There are different factors and conditions that impact the livelihoods of disabled people. The National Centre for Promotion of Employment for Disabled People (NCPEDP) (2009) report reveals that difficulty in identification of suitable jobs or work, accessibility, discrimination, and inadequate comprehensive education and skills are the major challenges for disabled people to secure employment. A survey in Odisha reveals that stakeholders' views of disability as a charity, accessibility and welfare issues and their inadequate awareness on disabled persons' rights are major factors that adversely impact the livelihoods of disabled people (Mohapatra, 2012). Seeley (2001) argues that physical incapacity can prevent the disabled from selecting for labourintensive agriculture occupations. Thomas (2005) further reveals that lack of adequate education, quality vocational training, lack of funds, costs of treatment and transport are major challenges for disabled persons to become self-employed. Due to lack of understanding on the capabilities of disabled persons, family members and community treat disabled persons as objects of pity and charity (Lang, 2001). Hence, family members invest in non-disabled relatives anticipating that they will care for them in their old age. These suggest how disabled persons are considered poor in a community because of lack of suitable employments and comprehensive skill developments to improve their living conditions. Also, negative attitudes of the society adversely affect disabled person's livelihoods. This is due to poor education on capability of disabled persons in the community.



## **2.8 Livelihood challenges experienced by families of disabled persons**

Generally, families experience financial distress when there is or are physically disabled persons in the family. The situations are worse when the disabled person's disability was sudden. This creates interruption in the economic status of the family. Most of the time financial gap is created by the disabled person as a result of inability to work to generate income to support household. The family cannot plan because they do not know what to expect and may have difficult time planning the roles of other family members to accommodate uncertainty (Eisenberg et al., 1984).

Variability in the severity of impairment also has effects on family's livelihoods. The way to which a disabled person is limited in doing activities or functions of daily living (e.g., walking, toileting and feeding oneself,) is called functional status. This means that when a physically disabled person has lower functional status, family members need to reduce working hours to attend to the disabled person needs (Biegel, Sales, & Schulz 1991; Stone & Kemper 1989). This adversely affects income generation of the families. This is because time spent during work hours to generate income may be reduced. Providing this assistance by family members can create emotional discomfort and depression in the family settings (Patterson, Leonard, & Titus 1992; Singer et al. 1993).

The age of the person when the disability occurs is associated with different effects on the family members' livelihoods (Eisenberg, Sutkin, & Jansen 1984). When disability emerges in late adulthood, the impacts on family's livelihoods are usually less disruptive to the family. This is because in late adulthood disability becomes normative and more anticipated. When disability occurs earlier and in the middle stage an individual's life, the impact on the family's livelihood is greater. In this situations more livelihoods adjustments need to be made and for longer periods of time to sustain the living conditions of the households. The situation becomes more challenging when one

parent is physically disabled. In this case the other parent needs to work extra hard to generate income to fill the financial gap created by the disabled person. In conclusion, family members experience livelihoods challenges due to disability in the family due to extra care responsibilities.

## **2.9 Coping mechanisms available to physically disabled person**

Physical disability usually may place the disabled person at some form of economic disadvantage in society such as poor educational attainments, poverty and low income level. However, the extent to which a disability can affect an individual's livelihoods maybe determined by the coping strategies or mechanisms he/she adopts to deal with the situation and also the institutional support available to him/her. Also, the ability to cope with livelihoods challenges by disabled persons varies from one individual to another and also on the area in which the individual encounters the challenges. For example, a person who uses a wheelchair to access employment in a building that is not wheelchair accessible will have challenges. Many studies in recent years such as Stewart and Knight, (1991), Halmhuber and Paris, (1993), Andersson and Hägnebo, (2003), Jemtå *et al.* (2007) have shown interest on how disabled person develop coping strategies to handle livelihoods challenges. Some of these studies have focused on various mechanisms and strategies that have been adopted by various classes of individuals including disabled persons in coping with life problems including livelihoods challenges (Babar et al., 2004; Elzubeir et al., 2010). Some of the mechanisms found included time management, reductions in expenditure. Also, some physically disabled persons join association such as society of physically disabled to have sense of belongingness.

In the same vein, some studies seem to suggest that the coping mechanisms that will be adopted by disabled person are determined by a number of factors such as age, gender,

type of disability, period of disability and so on. For instance studies have tried to demonstrate how gender differences can determine how disabled persons cope with livelihoods difficulties (Arthur, 1998; Rijavec & Brdar, 1997). Mature disabled persons have difficulty in coping because of number of dependences while middle persons find it easy.

Carver and co-workers (1989) distinguish between two types of coping strategies adopted by individuals to handle livelihoods challenges associated by disability. The first, known as problem-focused coping, is aimed at problem solving or doing something to change the source of the stress associated with the disability. For example, proper management of income generated to meet expenses. This helps reduce financial challenges that the individual faces. The second, emotion-focused coping, is aimed at decreasing or managing the emotional distress that is associated with (or cued by) the disability. Although, most individuals elicit both types of coping, problem-focused coping tends to predominate when individuals believe that something constructive can be done, whereas emotion-focused coping tends to predominate when individuals think that the stressor is something that must be endured.

Folkman and Lazarus (1980, 1985) and other social researchers have developed various coping mechanisms and in order to determine how individuals cope with various life situations such as disability, little information is available regarding the types of coping mechanisms adopted to handle livelihoods effects by disabled persons (Folkman, 1980 and Lazarus, 1985). In conclusion, the ability of physically disabled person to cope with livelihoods challenges depends on number of factors such as age, type of disability and many more. Due to lack of proper policies to support disabled persons' livelihoods, they continue to have challenges to cope

## **2.10 Coping strategies adopted by disabled's families**

Coping involves psychological resources, material resources and strategies or mechanisms that help to eliminate, modify, or manage a stressful event such as disability (McCubbin & Patterson, 1983). Depending upon which type of strategy is adopted to deal with the effects of the disability on their livelihoods; one form of coping can be more effective than another (Bailey & Smith, 2000; Judge, 1998).

To cope with the effects on family's livelihoods, personality characteristics of the family members, their financial status, educational level, problem-solving skills, and spirituality all influence a family's ability (Abbott & Meredith, 1986; Bailey & Smith, 2000; Minnes, 1988). Willingness of none disabled parent to support the livelihoods of disabled person depends on strong marital relationship and social support (Abbott & Meredith, 1986; Kwai-sang Yau & Li-Tsang, 1999). How the family thinks about disability may have a great deal to do with how they feel about it? Changing the way, they think about livelihood challenges may help them develop additional strength to cope more successfully with and/or improve the situation.

Numerous studies have shown that families are coping successfully but there are additional challenges related to the strategies adopted (McDonald-Wikler, 1986). These additional challenges may include lack of financial assistance, lack of social protection and lack of employment opportunities. Family members vary widely in their responses to these extra livelihoods challenges related to the presence of a disability within the family. Some cope with difficulty while others seem to cope more successfully and seem even to be strengthened by the challenges. How the presence of a disability is perceived by families may be influenced by the use of cognitive coping strategies (Taylor, 1983).



In addition, by choosing to focus on different aspects of a challenging livelihoods situation, it may be possible for families to change how they think and feel about disability in order to cope successfully.

### **2.11 How to improve physically disabled person's livelihoods**

Access to livelihood opportunities is fundamental to ending the cycle of poverty and disability. In recognition of this, skills development and economic empowerment need to be encouraged for people with a disability. Physically disabled person can experience numerous barriers including negative attitudes, lack of access to training, information and inaccessible work places when seeking employment. Livelihood programs which are disability inclusive can play a valuable role in addressing these barriers (ILO, 2010).

Person with a disability may not be able to access loans or other financial support to start a business and therefore, need explicit consideration in microfinance initiatives. As employers do not always recognize the capabilities and breadth of experience people with a disability can bring to the workplace, strengths and capacity of people with a disability need to be valued and developed. There are many successful examples which highlight the contribution persons with disabilities make to the workforce and local economies. The economic empowerment of people with disabilities is the key to independent living and social participation (WHO, 2010). Livelihood initiatives encourage opportunities to end the cycle of poverty and disability and also contribute towards poverty reduction and inclusion of individuals with a disability in their local community. Many mainstream micro finance programs are not inclusive of person with a disability due to restrictive entry requirements related to education, skills and collateral (ILO, 2010). Livelihood programs are encouraged to address such barriers and promote disability inclusive, equitable self-employment and work opportunities.



It is important to support the inclusion of physically disabled persons in all livelihood approaches, including formal employment, income generation projects, skills development and access to loans and financial services which can improve their standard of living.

The following principles, which adhere to a human-rights approach to disability, are used to demonstrate inclusion of individuals with a disability in all development programs and sectors. They are comprehensive accessibility, awareness of disability and its implications and participation (ILO, 2010)

## **2.12 Conclusion**

The variables that were the focus of the literature review covered disability, models of disability, International approaches and framework to disabled people's livelihoods , sustainable rural livelihoods approach, livelihood challenges experienced by physically disabled persons, livelihood challenges experienced by families of disabled persons, coping mechanisms available to physically disabled person, coping strategies adopted by disabled's families and mechanisms to improve physically disabled person livelihoods.

The evidence provided by the literature review showed that a physical disability adversely affects the livelihoods of physically disabled persons and their families. It was reviewed that the disabled persons and their families adopt financial adjustments to cope with the effects on their livelihoods. The evidence also reviewed that appropriate policies and livelihoods components such as financial assistance, social protection, skill development and self-employments must be available to improve the livelihoods of disabled persons. The next chapter will discuss the methodology used in the data collection.

# KNUST



## CHAPTER THREE

### METHODS

#### 3.0 Introduction

This chapter discusses the methods that were followed in collecting data for the study. It covers the research design and approach, study population, selection criteria, study setting, sample size and sampling techniques. Also, covered are research instruments - interview schedules, trustworthiness of the data, data collection procedures, data analysis, as well as ethical considerations.

#### 3.1 Research Design

Research is mostly about systematic investigation to discover reality (Laws, *et al.*, 2003). This is descriptive study which adopted qualitative data collection methods. According to Creswell (2008), qualitative approaches emphasize the importance of the participant's views and highlight the meaning people personally hold about issues. McMillan and Schumacher (2001) noted that qualitative research investigates in-depth small distinct groups as the purpose is to understand the social phenomenon from participant's perspective. Patton (2002) also argued that qualitative methodological approaches tend to be based on recognizing the subjective, experiential 'lifeworld' of human beings and describing their experiences in-depth. Therefore, qualitative approach is ideal for this descriptive study since it describes the characteristics of the population or phenomenon being studied. Descriptive design was used to provide insights and understanding on the effects of physical disability on the livelihoods of disabled persons and their family members and again coping mechanism available to disabled persons and families.

### **3.2 Sampling technique**

The non-probability sampling method was employed in this study. Non probability sampling is appropriate when the researcher's emphasis is on studying the traits of a specific group rather than concerning about generalization of the data, and it usually uses purposive sampling to select study participants (Freedman & Taub, 2006). The purposive sampling technique was adopted to select all participants. With this technique, "the researcher handpicks the cases to be involved in the sample on the bases of his or her judgment due to their typicality" (Cohen *et al.*, 2007). Purposive sampling is preferred because the researcher needed participants who had adequate knowledge on the topic and could provide the information needed for the study. For example, the physically disabled persons and members in the family were purposively selected because they were considered to have adequate knowledge on how members in the family and the disabled people's livelihoods are affected due to the disability.

### **3.3 Selection criteria**

The participants of this study were physically disabled persons and a family member each from disabled family at Techiman South Municipality. This municipality was selected because of the nature of work available and the economic situation in the town.

### **3.4 Target Population/Sample Size**

The targeted population was physically disabled persons and their family members in Techiman South Municipality. In all, a total of 18 participants were targeted. These included 9 physically disabled persons and 9 family members ;( 1each from the disabled person's family was selected). This number was appropriate because the researcher took into consideration the time frame to complete the study, the available logistics as well as lack of funds.



### **3.5 Study setting**

Techiman the capital town of the Techiman South Municipality is situated in the northern part of Brong Ahafo Region of Ghana. The municipality shares common boundaries with four different districts; three in Brong Ahafo Region and one in Ashanti Region. The Wenchi District lies to the northwest, Kintampo South District lies to the northeast, Nkoranza District to the south-east and Offinso District (in Ashanti Region) lies to the south. The town is a major market centre and a nodal town. Trunk roads from Sunyani, Kumasi, Wa and Tamale all meet at Techiman thus making it a bustling food crop market and commercial center.

The town was chosen for this study because physically disabled persons are likely to face challenges due to nature of work available. The most available job is farming and the people depend on their physical strength for production, others are traders and very few are sedentary workers.

### **3.6 Methods of Data Collection**

Interview was the instrument used to collect data for the study. This instrument helped the researcher to gather data from different sources to enhance the quality and trustworthiness of the data

#### **3.6.1 Interview**

A semi- structured interview guide was developed and used to collect data from participants. Interviews were conducted on one-on-one basis and recorded using an audio recorder with permission from participants. Semi-structured interviews usually conducted face to face between the interviewer and the participants allow the researcher to control the process and also provide opportunities for participants to express their thoughts (O'Leary, 2004). The choice for this instrument was based on its flexibility,

which allowed the researcher to modify questions as and when needed. Furthermore, interviews create avenues for face-to-face interactions between the researcher and participants making it easy to enlist their cooperation, and for questions which are not clear to the participants to be clarified. The participants were asked questions on the effects of physical disability on livelihoods of disabled person, family members of physically disabled persons, coping mechanisms of both disabled persons and members of family and finally how to promote livelihoods of physically disabled persons. The interview was done in local language (Twi) this is because Twi language is popular in the community. Also, it enabled the participants to express themselves adequately.

### **3.7 Trustworthiness of the data**

To ensure the validity of the interview guides, the guides were shown to the researcher's supervisor to make the necessary corrections. The suggestions from the supervisor were cautiously considered and incorporated into the final guides before their implementation. Again, the researcher used member check, which is, allowing some participants to read through their responses after transcribing. The sampling procedure used for selecting participants for this study was purposive. One of the decisions guiding the use of purposive sampling was to sample participants who had adequate knowledge on the issues affecting physically disabled persons and family members of disabled person and whose views could best represent the views of the community. This minimized waste and maximized the utility of the data.

### **3.8 Data Management and Analysis**

The Audio-recorded interviews were transcribed verbatim by the researcher. The researcher listened to the audio recording several times before the transcription done directly from the local language (Twi) into English language to ensure accuracy. All field data were kept confidential. A Microsoft word file was created and used to save

the interviews on a computer accessible to only the researcher. The data were analyzed directly by performing thematic analysis. The researcher read through the transcript severally before developing themes and sub-themes. Supporting quotes from the transcripts were identified and linked to their respective themes. No computer software was used in the data analyses.

### **3.9 Ethical consideration**

The Kwame Nkrumah University of Science and Technology (KNUST) ethical code of conducting research with human subjects was followed throughout the fieldwork. The researcher strived to be unbiased, accurate and honest as much as possible during all stages of the study. Ethical clearance was obtained from the university's research committee as well as Ghana Society of the Physically Disabled at Techiman south municipality. The purpose of the study was explained to the participants prior to administering of the interview guide. Participants were assured that, individual responses will not be identified and that all responses will be analyzed together. Efforts were also made to protect the confidentiality and anonymity of participants and also to ensure that they were not exposed to any risk during the study. Each participant signed an informed consent form which described the purpose of the study, benefits, the risks and the voluntary nature of their participation, my full name and contact address to provide clarification and to answer questions on the research before they were interviewed. The consent form was also read to illiterate participants before they signed or thumb printed the form. All participants' responses were transcribed using code numbers. And, all the hard copy materials were locked in a personal locker and soft copy documents had password and saved in a hidden folder in my personal computer.

### **3.10 Conclusion**

This chapter has presented the research methodology of the study. Issues discussed in this chapter include: target population/sample size instruments used in the study, research design, sampling technique, selection criteria, data collection procedures, data analysis, ethical considerations, study settings, and validity of the design. The next chapter will present findings from the study.



## **CHAPTER FOUR**



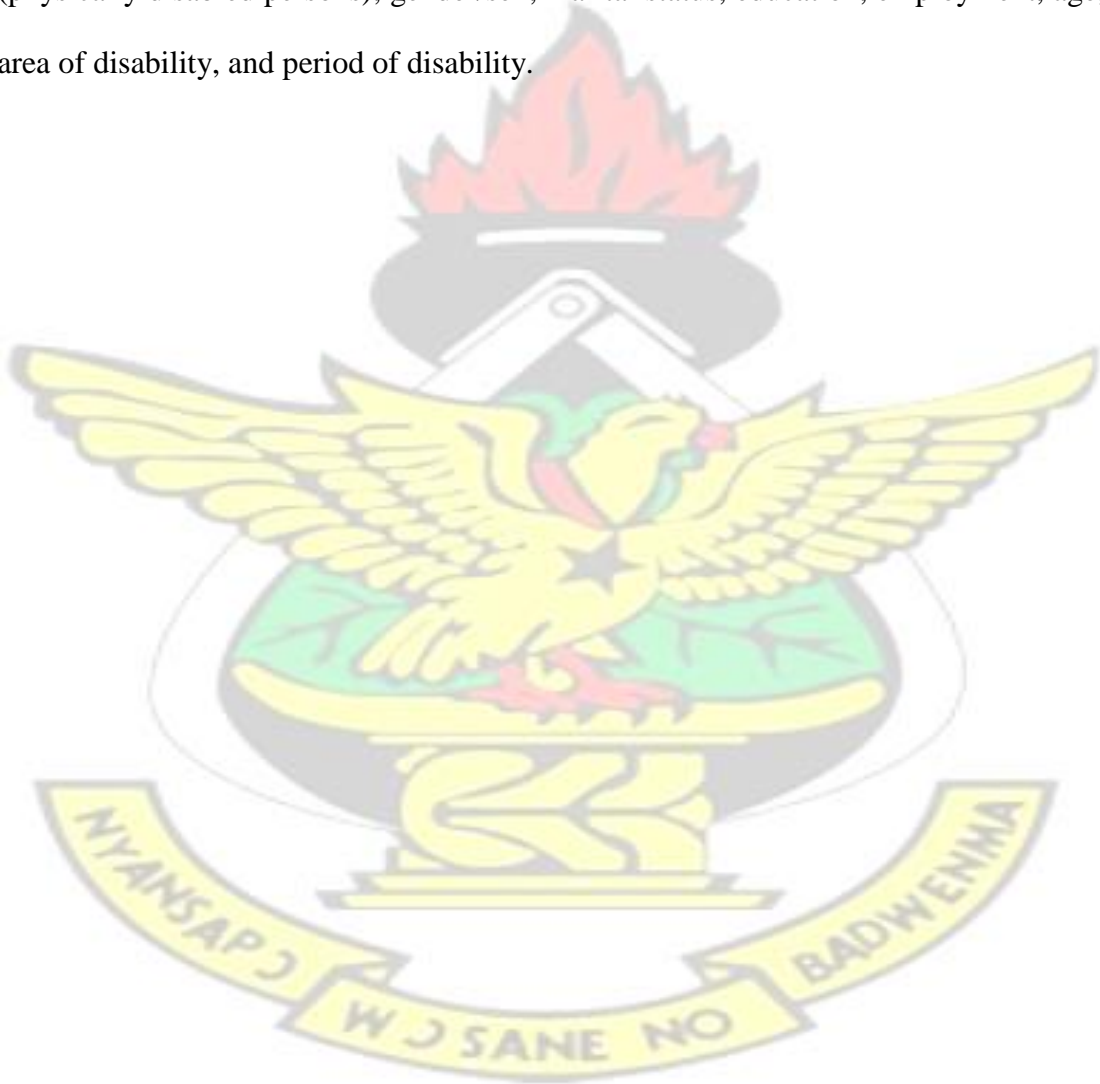
## RESULTS

### 4.0 Introduction

This chapter presents the analysis of data and the major findings from the study. The findings are presented in sections based on the objectives of the study.

### 4.1 Demographic characteristics of the participants

The following variables represent the demographic characteristics of the participants (physically disabled persons); gender/sex, marital status, education, employment, age, area of disability, and period of disability.



**Table 1: Socio-demographic data of participants (physically disabled persons)**

Demographic features	Number of Participants	Percentage%
<b>Educational level</b>		
Educated	7	77.78
Uneducated	2	22.22
<b>Total</b>	<b>9</b>	<b>100</b>
<b>Sex</b>		
Male	5	55.56
Female	4	44.44
<b>Total</b>	<b>9</b>	<b>100</b>
<b>Age</b>		
24-39	2	22.22
40-55	5	55.56
56-70	2	22.22
<b>Total</b>	<b>9</b>	<b>100</b>
<b>Marital status</b>		
Married	7	77.78
Single	1	11.11
Widowed	1	11.11
<b>Total</b>	<b>9</b>	<b>100</b>
<b>Employment status</b>		
Employed	6	66.67
Unemployed	3	33.33
<b>Total</b>	<b>9</b>	<b>100</b>
<b>Area of disability</b>		
Upper limb	1	11.11
Lower limb	8	88.89
<b>Total</b>	<b>9</b>	<b>100</b>
<b>Period of disability (years)</b>		
1-10	6	66.67
11-20	2	22.22
21-30	1	11.11

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*Source: Field Data, 2015*

Table 1.0 shows demographic information of the physically disabled persons. The main demographic features of participants analyzed in this study included the educational, sex, age, marital and employment status, area of disability and period of disability. According to age, participants of the study were above twenty-four years. Concerning period of disability, six had their disability between one and ten years, two had their disability between eleven and twenty years and only one had it between twenty- one and thirty years. Six out of nine participants had jobs while three were unemployed after their disabilities. Except one single and one widowed, seven of the participants are married. Five of the participants are males while four are females. Concerning participants' educational background, seven of them attended school while two of them did not. On the basis of area of disability, only one had the disability in the upper limb, the rest had it in the lower limb.

**Table 2: Socio-demographic data of participants (family members)**

Demographic features	Number of Participants	Percentage%
<b>Educational level</b>		
Educated	6	66.67
Uneducated	3	33.33

<b>Total</b>	<b>9</b>	<b>100</b>
<b>Sex</b>		
Male	3	33.33
Female	6	66.67
<b>Total</b>	<b>9</b>	<b>100</b>
<b>Age</b>		
20-35	3	33.33
36-51	5	55.56
52-67	1	11.11
<b>Total</b>	<b>9</b>	<b>100</b>
<b>Marital status</b>		
Married	7	77.78
Single	2	22.22
<b>Total</b>	<b>9</b>	<b>100</b>
<b>Employment status</b>		
Employed	8	88.89
Unemployed	1	11.11
<b>Total</b>	<b>9</b>	<b>100</b>

**Source: Field Data, 2015**

Table 2.0 shows demographic information of family members of physically disabled persons. Except one participant who is unemployed, eight are employed. On the basis of gender, six females were interviewed as against three males. Three of the participants were between twenty and thirty-five years; five were between thirty-six and fifty-one years while only one was between fifty-two and sixty-seven years. It can be seen that out of the total participants, seven were married while two were single. In terms of education, it was found that six had education as against three who did not.



## **4.2 EFFECTS OF DISABILITY ON THE LIVELIHOODS OF PHYSICALLY DISABLED PERSONS**

It is evident that due to a lack of specific plans and policies for physically disabled individuals in the Municipality to improve and sustain their livelihoods, disability has adversely affected their standard of living. The discussions generated five interrelated themes: low income level, limitation on employment opportunities, effect on career plan, lack of access to credit and effects on personal well-being.

### **4.2.1 Low income level**

Participants shared their views on some effects of their physical disability on their livelihoods. Some participants agreed that their income level has reduced due to their inability to produce enough items to sell in the market and other factors. For example, participants stated that their income generation has reduced because their impairment has reduced their physical capacity to produce men shirts to generate income. Again, lack of access to financial services and negative and discriminatory attitudes of the society toward the physically disabled have negatively affected their income level.

A 44-year-old man who produces men shirt sadly noted the effect of physical disability on his livelihoods as follows:

My disability has reduced the level of my production. I do not have enough customers compared to able person because the society see my disability not my capability. People do not patronize my services even though I produce good designs. Due to that I do not generate enough income and savings for myself and family.

Participants also discussed a range of areas in which their disability has affected their income level.

The following quotes were stated by 65 year married man

After my disability I am facing hardship. I was a commercial farmer and chain saw operator before my disability. I had big plantain and cassava farm; the amount of profit I used to generate from my farm has reduced because I cannot monitor my farm and also money needed to invest into my farm has been used to pay my hospital bills. I have sold my chain saw due to hardship. Now my farm has been destroyed by animals and others,

On the same issue, a 53-year-old unemployed man said,

After my disability I cannot work again. My disability has affected me so much that I have turn into beggar because I do not earn income any more. I was running transport systems and a farmer, after the onset of my disability I sold two of my cars to take care of myself because it was difficult to settle my debts and hospital bills. I cannot go to my farm anymore because of distance to the farm. All my food crops have rotten. I have lost the land to relative since I could not continue cultivation.

#### **4.2.2 Limitation on employment opportunities**

Unemployment was identified as a problem hampering the livelihoods of physically disabled persons. One participant sadly narrated that,

I completed polytechnic but after that I am not getting job because managers of companies believe I cannot perform. I was called by one company to be interviewed for employment, when I was attending the interview I worn long sleeves, later I was called to collect my appointment letter, when the manager saw my disability this time, he sadly told me later and that was all. This has been happening all the time

While the above participant had the effect in terms of her wage employment, response from a 48-year-old widowed seemed to suggest the opposite. For example, she believes her self-employment has been affected. She was involved in farming, selling of palm

oil and kenkey. Her activities were used to support the family since her husband was seriously sick and died later. She financed one of her children to complete Senior High school. One child had head injury and was operated; all the hospital bills were paid from her pocket. In her situation, her livelihood has been affected due to inability to do physical work for long periods

She mentioned that,

I depend on only one job for myself and the family compared to three jobs due to limited physical capacity and also lack of funds to expand my business. My children cannot go to better school since there is no enough money. I am facing huge challenges personally. Now I am widow and four children are looking up to me for livelihood.

Some participants expressed that availability of skills training is not a problem but funds to start business is their concern. For example, a married man who wanted to become information technologist but learned shoe making due to his disability stated that due to lack of funds to start his business he has become a burden to his family. This has negatively influences his employment opportunities.

He expressed that,

After my disability I decided to learn skills (shoe making). Now I have finished training but it is difficult to start my own business because of start-up capitals to buy equipment and rent a place. Due to that I have become burden to my family members

#### **4.2.3 Effect on career plans**

Some of the participants suggested that their disability has negatively affected their future career. Participants discussed how their physical disability has affected their career aspirations. According to some participants they could not achieve their

ambitions or career aspirations because of their disability. The following quotes were stated by some participants

For example, a 24-year-old boy who had his disability about 2 years ago disclosed that

It (physical disability) has affected me badly; because of my disability my dreams have been shattered. I wrote exams and was about to go to tertiary school when I had sickness and paralyzed, now everything has stopped, by now I should be completing school; my ambition of becoming professional teacher has stopped.

A 40 year married woman mentioned that:

I was under training to become a seamstress and a better designer when I had my disability. I was asked to leave because my master thought my disability will be a hindrance to me. Now my ambition of become fashion designer did not come true.

Responses from both participants seemed to suggest the same. They expressed that they could not achieve their future career after their disability.

#### **4.2.4 Lack of access to credit**

Most financial institutions and banks use income levels as collateral to grant loans and credits. Low income sometimes affects disabled persons ability to access loans and credits facility to expand their business to improve their living standards. With regards to this, a 42 old man also said;

There are a lot of competitors who produce different shoe designs. They have access to bank credits and available market to produce many designs and due to their income levels; these make them have many customers compared to me. Society negative attitude toward disability affects patronage of my shoes and consequently my income



making me unable to secure credit. These challenges affect my income. There will be time where there will be no sale.

According to 53-year-old man who is unemployed mention that

After my disability I needed money to help me buy weedicide to clear my farm since I could not weed but nobody was ready to assist me financially. I sold two of my cars to take care of myself. Now I have become burden to my family. All my food crops have rotten. I have lost the land to relatives

#### **4.2.5 Effects on personal well-being**

Participants expressed how their personal well-being was affected because of their disability. Some expressed their frustrations due to lack of money to attend some functions. With regards to this, a 35 old woman also said;

After my disability I am jobless. I cannot attend functions and places because I do not have money. I only depend on my husband for everything.

Another 44-year-old man expressed his view

I was rich before my disability because I was into trading. I used some of the money to support my junior brother through secondary education to tertiary and was respected in my community, but now I have used all my saving to pay for hospital bills. My disability has adversely affected my personal well-being since I do not enjoy life currently. I do not attend functions or ceremonies like funerals, weddings and others because I do not have money.

A 24 year unemployed man also mentioned that,

My parents are not rich so after secondary school I needed to work to get money to further my education. I was working with Cocoa Research Institute but they deal with cashew processing. I was with experiment or grafting Department. I was paid very well so it helps me to accumulate money which will help me personally through my tertiary education, so after my disability I could not work there anymore. Now I have used all my saving for medical treatment.

### **4.3 EFFECTS ON THE LIVELIHOODS OF FAMILY MEMBERS**

Participants who were family members discussed how their livelihoods are affected because of physical disability in the family. The discussions generated two themes: financial burden and emotional stress.

#### **4.3.1 Financial burden**

Participants shared their views on how their livelihoods have been affected because of over burden and excessive financial demands. All participants agreed that families experience household financial interruptions but they experience the challenges in different ways. For example, a 30-year-old woman stated that her mother had her disability one week after her father received his retirement money or benefits and majority of his pension money was used to rehabilitate her mother. According to the participants, money for food is sometimes difficult since her father is on retirement and mother has disability. She also disclosed that her father has sold his car to pay for other bills and always seeking for loan from his friends to manage the house and it becomes difficult to repay. She shared the view that her mother's disability has created financial discomfort in the family.

My mother had her disability one week after my father received his pension benefit. He has used more than half of his pension money on my mother. Now money for food is

sometimes difficult. My father is always seeking for loan from his friends to manage the house and his cocoa farm. When the loan is due for payment, he hides and turns into liar. She has become burden to the family; my father has spent his pension money and also sold his only taxis to pay bills

Also, a 52-year-old man indicates that his wife who was the back bone of the family became disabled and subsequently, had her trading business collapsing. He expressed that, he needs to work extra hard to generate income to support the house and repay bank loan that was secured from bank by his wife.

The family is highly affected because my wife was the bread winner in the family. She was well known trader in the community, her business has collapsed because we have used all the money to pay hospital bills. When she had her disability she was using bank loan for her business, now the bank is demanding the family for repayment. You can imagine how it feels when someone was supporting you and now she cannot. Now the family building project has been stopped. I am old but need to work extra hard to generate enough income for the family.

A 38-year-old uneducated woman married to physically disabled man said that “After his disability, he cannot perform his duty and responsibility as a father in the house. He earns less income from his shoe making. He quarrels with us when we ask money from him. We are sleeping in darkness because we cannot pay light bills. Our rent will be due next three months and it will be difficult to pay.”

Effects on children education because of financial challenges was identified as a massive problem hampering the family livelihoods. Money to support children education was mostly channeled to settle hospital bills due to nature of their disability making it difficult to continue providing financial support for the family. Family’s plans

and dreams for the future were given up in some cases. For example, a 23-year-old girl lamented that her

My mother's disability has affected my education and siblings' education badly. I had admission to tertiary school but I abandoned it because my single parent who is physically disabled could not finance my admission fees. My siblings have moved to government or public schools to reduce money paid as school fees.

For a 49-year-old married man, his wife was supporting him financially. After her disability the children quality education has been compromised.

He lamented that:

I used all my saving to pay her hospital bills. I have sent my children to government schools to reduce the financial burden.

#### **4.3.2 Emotional Stress**

It was observed that relatives were emotionally stressed because of depression associated with extra care responsibilities provided for family members who are disabled. Care-taking responsibilities and extra financial issues create emotional stress on the family systems such that there is uncertainty about the cost to rehabilitate the disabled person, about the future, about the needs of other family members and about whether a member is providing enough assistance.

A 45-year-old married woman mentioned that:

Before my husband's amputation, he promised me startup capital to do business but it did not happen. After his accident he sold his chain saw and used his saving to pay his medical bills at Komfo Anokye teaching hospital in Kumasi. Now my children cannot continue their education because of financial difficulty. Two of my younger children



have become stubborn because they are idle in the house. I have been diagnosed hypertensive because of continuous thinking of how to pay bills. I cannot remember the last time I bought new cloths; this can tell you the impact on me personally (A 45 married woman).

Another participant who is farmer and a brother to a physically disabled person stated that,

He had his disability three days after he got admission to Teacher Training College. His disability has affected us so much. Apart from effect on the family livelihoods, he was pursuing career that will benefit him and the family. We have spent all our money on him. I have to abandon my farm to take care of him. Care-taking responsibility is very stressful since he is paralyzed and cannot walk. My elder brother who is teacher went for bank loan for us. Our parents are weak they cannot go to farm anymore. We all depend on our elder brother for our livelihoods. I have abandoned my wife and children to take care of him. We are highly depressed and emotionally stressed up because his disability was sudden.

A 48-year-old woman expressed her view that her brother's wife divorced her brother after his disability and this created emotional stress in the household. She mentions that she needed to take the responsibility to care for her brother including to her own family. She expressed that,

His disability has affected the family emotionally. His wife who was needed to take care of him divorced him after his disability. Since he was staying in Accra and Techiman was our hometown, we brought him home for adequate care. Now additional responsibilities are required for his rehabilitation.

#### **4.4 COPING MECHANISMS ADOPTED BY DISABLED PERSONS**

Participants discussed various mechanisms adopted by them to cope with disability effects on livelihoods. After disability, it becomes necessary for the disabled person to develop mechanisms and strategies to handle the effects on his or her standard of living. These mechanisms depend on sex, age, type of disability and many more. Some accept the situation at an early state and develop coping mechanisms while others delay. Most of the participants adopted more than one coping mechanism, while others adopted one mechanism.

##### **4.4.1 Membership of Disabled Persons' Organisations**

Some of the participants expressed how becoming members of Society of Physically Disabled Association has contributed emotionally in achieving their livelihoods. A married man who had his disability 8 years ago said he becoming a member of the society of physically disabled has helped him to become emotionally strong because when he compares himself to other disabled, he feels he is better than others. This has encouraged him to concentrate on his work and not to be distracted by negative perception from the community about him.

A 42-year-old shoe maker mentioned that

Joining the society of physically disabled has helped me to become emotionally strong because when I compare myself to other disabled, I feel I am better than others. This has encouraged me to work to provide livelihood for myself and family.

Similarly, a 48-year-old widow mentioned that the association has given her hope and self-determination in terms of providing livelihood for herself and her family. According to her, she is motivated by one of the goals of the association which is

selfdetermination and it has encouraged her to put much effort to work to generate income.

I have decided to join the Ghana Society of the physically disabled; the society has taught me to have self-determination in terms of providing livelihood personally and for my family.

#### **4.4.2 Financial management**

Participants discussed how reducing their expense has helped them manage effects of disability on their livelihoods. A 44-year-old married man expressed the view that he has reduced his expenses drastically. He mentioned that he only attends functions or ceremonies like funerals, weddings of close relatives. Again he does not visit drinking spots anymore.

I don't go to places where I used to go previously. This helps me to save money. Again since I cannot afford transport fees for my children, I use my tricycle to school to send to school. I stay indoors most of the time to prevent trouble and avoid spending unnecessary. Again I have reduced by personal expenses significantly to financially manage by income (42-year-old amputated man)

A 65-year-old man provided this comment:

I save little I get every day from my lottery business. Again I encourage people to patronize lottery because that is where I get my income. I do not often go to functions that I will pay money, like funeral, weddings and others. I have relocated to cheaper accommodation. I have stopped some habits like smoking cigarette and drinking, these help me to manage my finances (65-year-old married man)

## **4.5 COPING MECHANISMS ADOPTED BY FAMILY MEMBERS**

After disability in a family, the family develops adaptive capacity to manage the effects of the disability on the family's livelihoods. According to the participants family life is altered, often in major ways.

### **4.5.1 Financial management**

According to the participants, reduction in expenditure was adopted by most participants to manage financial burden they encountered. A 49-year-old man mentioned that he has sent his children to government or public schools to reduce financial burden. Again, his children sell sachets water after school hours to support the house.

I have spent majority of my savings on my wife's disability, due to that, I do not have enough money to pay for private school fees for my children. I have moved my children in government or public schools to reduce financial burden. After school hours my children sell sachet water on the street to support the house.

A 38-year-old married woman expressed the view that, they are managing their finances very well. She and her husband have moved their children to school that is closer to their house to reduce payment of transportation fees.

A 27-year single lady also expressed her views.

Now we have reduced our expenses and manage to live within our means. As a lady I used to buy extravagant things at end of every month, I have stopped because I need to support the family financially to cater for my other siblings. We plan monthly like pocket money, fees, and bills when it is not enough we seek for overdraft

Another woman also said that her family has relocated to my husband's family house to reduce payment of rent. They have also reduced their children pocket money for school.



#### **4.5.2 Savings**

According to the participants, savings was adopted by all participants to manage financial burden they uncouncted. Some participants expressed that they decided to save some profit from their income to manage future bills. A 45-year-old self-employed woman mentioned that

I have adopted savings in local bank from my sachet water business which helps us to plan for the future. I save ghc 5 every day in microfinance in the community. When the saving becomes enough, I redraw it and use it to pay school fees and support the households.

A 30-year-old lady expressed her view that,

My father saves ghc 25 as' susu' from proceeds of his taxis every day. We buy medication every month, so this enables him buy such medication and provide other special servicers such as rehabilitation.

#### **4.5.3 Collective effort of family members**

According to some participants, collective effort of family members both in the community and outside the community contributed to manage the effects of the disability in the household. Some members even seek bank loans to support rehabilitation of disabled persons, and this reduced financial challenges in the family.

A 46-year-old married man who is a farmer expressed the view that,

My senior brother who is professional teacher has secured bank loan for him to purchase calipers. Sometime our in- laws support us financially and this help reduce depression we face. Since I have used all my savings and our parents are aged and weak, we depend solely on our elder brother who is a teacher for financial support.

A 48 woman expressed that,

Our senior brother who is doing business in abroad support us money every month for his rehabilitation services and feeding. This helps us to manage challenges in the family.

#### **4.6 MECHANISMS TO PROMOTE THE LIVELIHOODS OF PHYSICALLY DISABLED PERSONS**

Having access to livelihood opportunities is one of the key factors in promoting quality life. Work is the means by which an individual can escape poverty and secure the necessities of life.

However, there seemed to be disagreements among some participants regarding mechanisms to promote their livelihoods. Some of the participants claimed that financial assistances will help them; responses from other participants suggested skills development, while others seemed to suggest both. For example, an unemployed man who had his disability about 2 years ago expressed that

They (physically disabled persons) should be given financial support to develop themselves to reduce burden on their family and nation as whole. Some disabled persons were self-employed before their disability, when they have assistance they can develop their business and improve their livelihoods.

A 48-year-old woman shared her views on how financial support can improve her livelihoods.

Financial assistance can help those who are into trading. This assistance can help physically disabled person to compete in the market. Again physically disabled person should be given flexible bank loans to aid their livelihood.

However, a 35-year-old woman appears to contradict the above assertions. She claimed disabled persons must be given skills development to improve their livelihoods

Physically disabled should be given skill training. This is better than given them money as in the case of common fund.

She indicated that when disabled persons have access to a range of training opportunities and acquire marketable skills and decent work (waged employment or self-employment) their livelihood opportunities will better enhanced.

However, two other participants appeared to agree with both suggestions made.

We should give them skills training and after that give them startup capital to begin their own business. Person with disabilities should be prioritized to receive loans to undertake activities to earn income. (53-year-old married man)

Disabled persons should be given adequate training services and provide capital so that they will self-employed. Those into trading should be given necessary financial support to enable them to be independent. (40-year-old woman)

#### **4.7 Conclusion**

This chapter presented the findings from the study. The areas discussed were demographic characteristics of participant, effects of physical disability on the livelihoods of disabled persons and family members, coping mechanisms of both disabled persons and their family member as well as mechanisms to promote physically disabled livelihoods. It can be deduced from the findings that both physically disabled persons and their families suffer negative effects of the disability and they were coping because they have adopted financial management. However, most of them believed that

with financial support and skill development their livelihoods may be improved. The next chapter will discuss the findings for policy making.

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## **CHAPTER FIVE DISCUSSIONS**

### **5.0 Introduction**

This chapter provides discussion on the findings of the study in relation to the relevant literature. This chapter presents discussions of the findings and their implications for policy making.

### **5.1 Characteristics of participants (physically disabled persons)**

The influence of disability on individuals' livelihoods may depend on different Socio-demographic characteristic of participants. Livelihoods challenges due to disability occur mostly over a period of time such as treatment and rehabilitation services. Some studies seem to suggest that the coping mechanisms that will be adopted by disabled persons are determined by a number of factors such as gender, age, type of disability, period of disability and so on. For instance studies have tried to demonstrate how gender differences can determine how disabled persons cope with livelihoods difficulties (Arthur, 1998; Rijavec & Brdar, 1997). Mature disabled persons have difficulty in coping because of number of dependences while middle persons find it



easy. It was revealed that all the participants had their disability one year and above. It is also imperative to state that participants are likely to experience financial challenges due to long stay in the hospital, home and securing rehabilitation services and this adversely affect the livelihoods of the disabled persons.

The nature of work and economic situation available in the Municipality is such that individual with mobility impairment is likely to encounter livelihoods difficulties. Study findings revealed that, only one had the disability in the upper limb, the rest had it in the lower limb and this is likely to influence ability of the disabled person to work and generate income for the household.

Evidence from the study also revealed that six out of nine participants were employed and those working were not generating enough income to mitigate the influence of disability on their livelihoods. Again the study also revealed that all the participants were above twenty-four years and were in the working population and male participants were five as against four females. When disability occurs earlier and in the middle stage an individual's life, the impact or effect on the family's livelihood is greater. In this situations more livelihoods adjustments need or require to be made and for longer periods of time to sustain the living conditions of the households. The situation becomes more challenging when one parent is physically disabled. In this situation the other parent needs to work extra hard to generate income to fill the financial gap created by the disabled person and the burden will be on members of the family to perform such responsibility created by disabled persons. According to the findings of Murphy (1982), the effect of disability on disabled persons depends on many factors, such as gender, area of disability; extend of disability and many more.

## **5.2 Characteristics of participants (family members)**

To manage with the effects of disability on family's livelihoods depends on personality characteristics of the family members; their educational level, problemsolving skills, and employment status (Abbott & Meredith, 1986; Bailey & Smith, 2000; Minnes, 1988). Willingness of none disabled parent to support the livelihoods of disabled person depends on strong martial relationship and social support (Abbott & Meredith, 1986; Kwai-sang Yau & Li-Tsang, 1999). How the family members think about disability may have a great deal to do with how they feel about it. Changing the way, they think about disability may help them develop additional strength to cope more successfully with and/or improve the situation.

Evidence from the study revealed that, eight out of nine were employed and participants pointed out that a big problem was high prices for medical treatment and this created financial instability at the households. Work efficiency is likely to go down because working hours may be reducing to attend to their needs of the disabled person.

## **5.3 Low income level**

Physically disabled persons need enough income to secure a stable livelihood. To earn adequate income to meet their needs, access to financial services and support must be available to them. Also positive attitude of the society towards the disabled person must be encouraged. These supports and attitudes of the society when provided will enable physically disabled persons generate income to support themselves and contribute to their family's income.

The findings of the study indicated that participants acknowledged the need to sustain and improve their livelihoods by making funds available and changing the negative

attitudes of the community to enable them earn enough income. However, study findings indicated that there is discrimination and negative societal attitude in the market settings which affects their income level in terms of productions and marketing. Access to finance needed to enable them compete with the market to earn adequate income to improve their livelihoods was not available. It was revealed by one participant that, the society does not see the quality of work he does but his disability and this reduce the income he earns from his services. The society and lack of proper legal system influence the participants' ability to generate enough income. Lack of faith of banking institutions in disabled people's ability denies them (disabled persons) credits. This adversely influenced their ability and capability to produce enough to generate income.

Many studies (Chambers & Conway 1992; Opini, 2010; DFID 2000; Greely, 1994, Turmusani, 2003) have revealed challenges and importance of income generation for disabled persons to improve their livelihoods. Findings from these studies corroborate the fact that the lack of income generation limits the ability of physically disabled persons to maintain and develop their livelihoods (Turmusani, 2003). Society and financial institutions may be blamed for the challenges revealed by the participants. Also lack of full implementation of convention on the rights of Person with Disability may have caused the outcome of stated by participants.

The study agrees that the outcome need for greater attention to address stigma, discrimination and availability of funds to support the income of physically disabled persons to enhance their livelihoods.

Thus the implications of not providing effective support and protection in income generation for physically disabled persons may significantly affects the living standard of the disabled persons.

#### **5.4 Limitation on employment opportunities**

Employment is needed to improve the well-being of an individual. Limited employment opportunities will therefore, seriously affect the livelihoods of disabled persons. Evidence from the study reveals that reasons for limited employment opportunities may be due to negative attitudes regarding the ability of disabled persons to work, lack of financial assistance and overall expenses by working, which might discourage disabled person from remaining in the open labour market and lack of funds.

These reasons may influence employment opportunities available to disabled persons in the community. Governments, employers, and other civil society stakeholders have a crucial role in developing suitable training for disabled persons to enhance their capacity for working effectively. Evidence from the study reveals that physically disabled persons often felt that the skill training did not address all their concerns and interest. However, disabled persons recognized that skill training were helpful in securing opportunities for developing interpersonal and social skills. Evidence revealed that, it is not only skill training that matters, but financial assistance or capital to start a business after learning skills to become self-employed was major concern. Selfemployment in the informal sector seems to be ordinary option for many disabled persons who want, or have, to work. In the short term, informal sectors jobs may help physically disabled persons meet their immediate livelihoods needs.

However, in the long term, informal employment composite insecurity and leaves disabled persons even more helpless to volatility in market conditions and other risk factors such as health-related hazards under working conditions. Social contacts are necessary to the success of any form of self-employment. Yet, physically disabled



persons tend to have fewer opportunities to socialize. The above mentioned barrier creates challenges disabled persons face when engaging in self-employment.

Lack of access to subsidized credit hampers the potential of those who want to engage in self-employments (ILO, 2002). This confines many working age disabled persons to the home and this affects individuals' livelihood. Access to wage employment should also be considered as an option for disabled persons who are looking for work. Wage employment may occur in both formal and informal sector. Disabled persons with necessary education must be given opportunity to work in the formal sector. Physically disabled persons should be considered for wage employment because of their skills and what they can bring to a job, and not out of charitable concern. For this reason, comprehensive skills training and education might be of vital importance. Appropriate laws and policies are needed to promote the employment of disabled persons in regular jobs, including quotas, positive employment measures, antidiscrimination, measures job retention or return-to-work measures and alternative employment policies to help them sustain their livelihoods.

Many studies (Barron & Amerena, 2007; ILO, 2002; UN, 2011) have revealed the importance of employments to enhance the livelihoods of disabled persons. Findings from these studies corroborate the fact that the lack of employments affects the livelihoods of person with disabilities. Additionally, Turmusani, (2003) stated that limited formal or informal employment opportunities are major challenges for disabled people's livelihoods.

### **5.5 Effect on career plan**

Career development is vital in maintaining and sustaining individual life as it enables people to be independent and achieve livelihoods. The study finding that some

physically disabled persons were not able to achieve their career plans suggests inadequate preparation on the part of the Social Welfare Department to develop policies and regulation to support disabled person's livelihoods. It also possibly explains why most of the physically disabled persons cannot attain better livelihoods due to lack of proper plan and why many are poor. Ability to continue career aspiration was restricted because of external factors and was beyond their control. This is supported by Giddens (1991) who argues that choice for some disabled persons is more constrained than it is for others due to the external environmental structures that define the way we live in society. However, lack of career development can make the disabled person to become a burden to the family, society and nation as whole. It is therefore necessary to take into consideration career aspiration of disabled person when taking decisions. Physical disability can lead to frustration in some cases, which adversely degenerate to disabled person not being able to actualize his or her aspirations (Crisp, 2002).

### **5.6 Effect on personal wellbeing**

Personal wellbeing of disabled persons is one of many ways in measuring and assessing well-being programme of Person with Disability. It includes income level, saving level, employments and peoples' own view about their living conditions. Wellbeing is the one of the most determinants of a person's health; it basically affects social inclusion, behavior, social cohesion, and prosperity (ONS, 2013). Monitoring personal well-being will enable to show how disabled persons feel their quality of life changes in respect to their circumstances. It will also show how disabled people in the community evaluate their lives compared to people without disability. The personal well-being domain involves the four personal wellbeing questions on life stipulated by Office for National Statistics (ONS). It includes satisfaction, happiness, worthwhile and anxiety. Personal wellbeing is also about disabled persons evaluating their own lives. These include

asking disabled persons to evaluate how satisfied they are with their life overall, asking if they feel they have purpose and meaning in their life, and asking about their emotions during securing livelihoods.

It has been established that, disabled persons were not able to connect with people in the community because of lack of income and employments to generate money to attend functions such as weddings, funeral and other ceremonies to interact with friends, colleagues and other well-known people in the community. This claim is consistent with study by New Economic Foundation in United Kingdom. Findings revealed that personal well-being can affect quality of life such as employment and household income. In 2008, the New Economic Foundation was commissioned to Foresight project on wellbeing and mental capital to review the inter-disciplinary work. The aim was to establish a set of evidence-based actions to enhance and assess wellbeing, which people would be motivated to build into their daily lives. They came up among others was 'connection'. They revealed that it includes connecting with friends, colleagues and people in your local community. The study suggested that lack of connections due to circumstances such as disability will adversely affect individuals' personal wellbeing. It is therefore imperative to state that physical disability affects the personal wellbeing of disabled person.

### **5.7 Financial burden on the families**

Adequate finance in a family is vital as it enables members in the family secure a stable livelihood. However, the study found that families did not have enough money to support the livelihoods of the family members. This was due to extra care responsibility and financial gap created by the effects of the disability. This financial burden was as a result of getting rehabilitation services and paying hospital bills, education for children, and social services and transportation for the disabled person. Many of these financial

items may be paid or reimbursed by the family members. The financial gap created by disabled persons also affected the livelihoods of family members especially, in a situation where the disabled person was a bread winner in the family.

Lack of access to entitlements and limited employment opportunities also force disabled persons to depend upon family to meet their livelihoods. This created financial instability in the family such that other members need to work extra hard to finance the household needs. Physical disability in a family can consume a disproportionate share of a family's resources of income or money, so that other family members needs go unmet. Children in family suffer mostly because financial resources for education may be diverted to support the disabled person. Due to financial challenges in the family, there may be interruption of social role especially when there is inadequate time, money, or energy to devote to disabled person in the family. This affirms Murphy (1982)'s argument that disability places a set of extra demands or challenges on the family system; most of these demands last for a long time. This view is consistent with study by Singhi et al. (1990) which suggest that family system faced financial difficulty due to disability in the family. Continuous financial burden in the family as a result of disability subjects the family to poverty.

### **5.8 Coping mechanisms by disabled persons**

After disability, a disabled person begins to develop coping strategies to mitigate livelihoods challenges. For most of the cases, mechanisms adopted differ with respect to the disabled person, period of disability, area of disability age of the person and many more. Coping strategy becomes necessary when individual accept his or her disability and begins to adjust his or her demands to meet his financial level (Stewart & Knight, 1991).



Generally, in situations where a person with disability is not able to cope with livelihoods challenges, poverty may be experienced by the individual. Evidence from the study revealed that, when some disabled persons joined the Ghana Society of the Physically Disabled, it motivated them to be emotionally strong to work to improve their livelihoods. The association challenged them to be financially independent by engaging in skill training and self-employment in the community. Time management was also revealed by the participants as a strategy used by them to manage their livelihoods activities to generate enough income.

Additionally, reduction in expenditure and financial management were adopted by some participant to manage their livelihoods challenges. It was revealed that some functions such as funerals, weddings and others were not attended by some participants to reduce their expenses. To some individuals, some habits such as smoking and drinking were stopped and these helped them reduce their expenditure and manage their incomes. When disabled persons focus on solving challenges or doing something to change the source of the stress associated with securing livelihoods, it helps them develop mechanisms to mitigate the challenges (Carver and co-workers ,1989). For example, proper managements of income generated to meet expenses. This helps reduce financial challenges that individuals face. Disabled persons develop mechanism to handle their livelihoods because it becomes necessary for them to reduce financial burden they impose on their family members (Stewart & Knight, 1991; Halmhuber &Paris, 1993; Andersson & Hägnebo, 2003; Jemtå et al., 2007).

### **5.9 Coping mechanisms adopted by disabled's family members**

Coping strategies adopted to handle livelihoods challenges created by disability differ from one family to another depending on financial status of the family. Some families

accept the livelihoods challenges associated with disability in the early stages and develop mechanisms while others wait until it becomes a major problem. The study revealed that almost all families adopted reductions in expenditure to reduce financial burden on the households. It also possibly explains why some children were sent to governments schools to reduce financial burden. While one family relocated to cheaper accommodation another reduced purchase of material things and channeled the money to support the family. Financial challenges which were major issues among family members created a lot of discomfort in the family setting. But when members in the family adopted financial managements they coped with livelihoods situation.

Studies by Abbott and Meredith, (1986), Bailey and Smith (2000) and Minnes (1988) found that, families' ability to cope with disability depends on personality characteristics of the family members, their financial status, educational level, problemsolving skills, and spirituality all influence. Reduction in expense to cope with livelihoods challenges sometimes become unpleasant especially when you are depriving from what you love to do, eat or where to visit.

Evidence also revealed that, family members adopted saving to mitigate the financial challenges. However, because most of the family members were employed they adopted saving mostly in local microfinance in the community. This saving was used mostly to pay school fees since children education was considered as priority by family members.

**5.10 Mechanisms to promote the livelihoods of Physically Disabled Persons** The pursuit of livelihoods is needed to help restore dignity and economic independence of physically disabled persons. Economic empowerment of disabled persons is the key to independent living and social participation (CBM, 2012). Mechanisms are needed to

enhance the livelihoods of disabled persons. Thus the findings that physically disabled persons had challenges in securing their livelihoods may be due to lack of appropriate mechanisms to promote the livelihoods of disabled persons.

The study found that key components in promoting the livelihoods of disabled persons may include access to financial assistance and skill development and both wage and self-employment. It was revealed that, to enhance livelihoods of disabled persons, access to employment, income generation projects, skills development and financial support and other livelihood opportunities must be available to them (disabled persons).

The findings showed that access to skill development activities cannot alone improve disabled persons livelihoods but financial supports such as flexible loans, grants and credits can help them (physically disabled persons) comprehensively improve their living conditions. To enable disabled persons have opportunities to end the cycle of poverty and also contribute towards poverty reduction, it is necessary to give them skills and start-up capital to start business to enhance their living conditions (DFID, 2000). According to the twin track approach (DFID, 2000), specific skill developments such as vocational training and business development skills are needed to empowerment disabled persons to enable them get employment to contribute to their livelihoods. Selfemployment gives the main opportunity for disabled persons in low- income countries to earn a livelihood (ILO, 2010). Self-employment activities such as production like sewing, trading or providing a service can help disabled persons acquire employments to improve their livelihoods in the community. Self-employment can be in both formal and informal economy. The study revealed that, even though some prefer wageemployments, majority suggested that self-employment can help them contribute economically to their families and communities.

### 5.11 Conclusion

The findings from the study suggest that physically disabled persons and their family members' livelihoods were affected. This was as a result of lack of income, limited employment opportunities, lack of access to credit, effects on personal wellbeing and lack of career plan for disabled persons. The situation has caused the disabled persons to be a burden to their families. In addition, financial burden was identified as effects on the families of disabled persons. These findings are consistent with other research on challenges disabled persons and families face in securing and maintain their livelihoods in Ghana and other countries.





## **CHAPTER SIX**

### **CONCLUSION AND RECOMMENDATIONS**

#### **6.1 Conclusion**

The livelihoods of physically disabled people and their family members in the study area have been seriously affected due to lack of income generation, limited employment opportunities, effects of career plan, and lack of access to credit, financial burden and emotional stress. The effect of physical disability on livelihoods mostly varies by context, as well as type and extends of disability and degree of access to services needed.

Lack of employment affected income generation and these adversely influenced their economic and social situations. These situations can greatly restrict the livelihood options open to physically disabled persons, particularly when the restrictions result from prejudice, discrimination and exclusion.

Employment opportunities were limited because of lack of financial support, negative attitude of the society and lack of physical capability. Career plans for most disabled persons were not realized by some disabled persons because of the disability. The effects of disability do not affect the disabled persons alone, but also their family members. Negative effects on physically disabled persons' family members were also identified as a major challenge. They include financial burden and emotional stress. Disability places financial challenges on the family system as the family diverts money for the households to support the disabled persons. Many of these financial challenges cut across type of disability, age of the disabled person, and type of family in which the individual lives. Another key finding from the study was that both the disabled persons and their family members developed mechanisms to handle the effects on their

livelihoods. Membership of Disabled Persons' Organisations and financial managements were coping mechanisms adopted by disabled persons to mitigate livelihoods challenges. Family members of disabled persons adopted financial management and saving to reduce financial challenges they faced when securing livelihoods. Skills development, self-employment and financial assistance were suggested as mechanisms to improve the livelihoods of disabled persons.

## **6.2 Recommendation**

The following recommendations were made to improve the livelihoods of physically disabled persons and support the livelihoods of families of disabled persons. A key finding from the study was lack of or limited employment opportunities for disabled persons. In view of this, there is need to provide sustainable employments for physically disabled persons to reduce financial burden they impose on families. One way is for the Ministry of gender, children and social protection, and other stakeholders such as NonGovernmental Organizations (NGO), to pay more attention in providing employments to support them to improve their livelihoods. In addition, there should be adequate budgetary allocations in providing comprehensive skills developments to support their career plans.

Since most of the disabled persons want to be self-employed, financial services and assistance need to be available to enable them compete in labour market (Turmusani, 2003). This will include providing subsidized or flexible loans to enable them secure raw materials for production. For those who want wages-employment, appropriate policies and legislations supporting the rights of disabled persons in both governments and private sectors must be developed and implemented (UN, 2006). Again, disabilityfriendly environments need to be provided to make working places accessible.

Again, the findings that disability adversely influence family's livelihoods, suggest urgent need to provide financial assistance to the families of disabled persons in the area. A way forward is that families can be given flexible loans to expand or support their businesses. This will help them generate more income to support the households. Again, profit gained will be used to cushion the financial difficulty the families face.

On the negative attitudes towards physically disabled persons in securing employments, the Division of Social Welfare, working in conjunction with Ghana Society of Physically Disabled, should provide the community with information on ability and capability of disabled persons. This will enhance the knowledge of employers and other business people in the society on disabled persons. This will go a long way to broaden the knowledge of the society to employ disabled persons. This will change societal attitudes and perceptions towards physically disabled persons in the community.

Lastly, since the findings identified mechanisms to improve the livelihoods of disabled persons, legislation must be supported by adequate funding and focused planning form such areas with an emphasis on physically disabled persons followed by strong and needed monitoring and evaluation. (WHO, 2010).

## REFERENCES

Abbott, D.A. & Meredith, W.H. (1986). *Strengths of parents with retarded children.*

*Family Relations*, 35, (3) 371-375.

Roulstone. A and C. Barnes, eds. (2005). *Working Futures? Disabled people, policy and social inclusion.* Bristol: The Polity Press, pp. 315-326.

Andersson G, Hägnebo C (2003). *Hearing Impairment, Coping Strategies, and Anxiety Sensitivity.* J. Clin. Psychol. Med. Settings. 10: 35-39.

Arthur N (1998). *The effects of stress, depression and anxiety on postsecondary students' coping strategies.* J. Coll. Stud. Dev. 39:11- 22.

Available at: <http://siteresources.worldbank.org/DISABILITY/Resources/280658-1172608138489/WBPovertyAssessments.pdf>

Available at: <http://opendocs.ids.ac.uk/opendocs/bitstream/handle/123456789/775/Dp296.pdf?Sequence=1ANT>

Available; <http://family.jrank.org/pages/396/Disabilities-ImpactDisabilities-on-Families.html>>Disabilities - Impact of Disabilities on Families</a>

Available at: < [http://www.ucl.ac.uk/lc-ccr/lccstaff/raymond-lang/understanding\\_disability\\_in\\_india.pdf](http://www.ucl.ac.uk/lc-ccr/lccstaff/raymond-lang/understanding_disability_in_india.pdf).>

Available at:

[http://www.dnis.org/interview.php?issue\\_id=4&volume\\_id=9&interview\\_id=190](http://www.dnis.org/interview.php?issue_id=4&volume_id=9&interview_id=190)

Available at:

[http://www.forestry.umn.edu/prod/groups/cfans/@pub/@cfans/@forestry/documents/asset/cfans\\_asset\\_202603.pdf](http://www.forestry.umn.edu/prod/groups/cfans/@pub/@cfans/@forestry/documents/asset/cfans_asset_202603.pdf)



Available at: [http://www.ilo.org/wcmsp5/groups/public/---ed\\_emp/---](http://www.ilo.org/wcmsp5/groups/public/---ed_emp/---)

[ifp\\_skills/documents/publication/wcms\\_107921.pdf](http://www.ilo.org/wcmsp5/groups/public/---ed_emp/---ifp_skills/documents/publication/wcms_107921.pdf)

Available at: <http://www.healthlink.org.uk/PDFs/Mainstreaming-disability-in-dev-India-country-report.pdf>.

Available at: <http://www.un.org/disabilities/default.asp?id=150>

United Nations, (2011). *Disability and Million Development Goals: A Review of MDG Process Strategies for Inclusion of Disability issues in Million Development Goal Efforts*, (online). (Accessed 28 June 2015)

Available at:

[http://www.un.org/disabilities/documents/review\\_of\\_disability\\_and\\_the\\_mdgs.pdf](http://www.un.org/disabilities/documents/review_of_disability_and_the_mdgs.pdf)

Babar TS, 'et al', (2004). *Students, Stress and Coping Strategies: A Case of Pakistani Medical School Education for Health*. 17: 346 – 353.

Bailey, A.B. & Smith, S.W. (2000). *Providing effective coping strategies and supports for families with children with disabilities. Intervention in School and Clinic*, 35, (5) 294-296.

Barron, T. and Amerena, P., (2007). *Introduction*. In: T. Barron and P. Amerena, eds. 2007. *Disability and Inclusive Development*. London: Leonard Cheshire International, pp.1-20.

Braithwaite, J. and Mont, D., (2008). *Disability and Poverty: A survey of World Bank Poverty Assessment and Implications*. SP Discussion Paper (085), [online]. (Accessed 25 August 2015)

Cadman, 'et al'. (1987). *"Chronic illness, disability, and mental and social well-being: findings of the Ontario child health study."* *pediatrics* 79:805–812.

Carney, D., (1998). *Implementing the Sustainable Rural Livelihoods*. In: D. Carney, ed. 1998. *Sustainable Rural Livelihoods: What contribution we can make?* London: DFID. pp. 3-23.

Carver CS, Scheier MF, Weintraub JK (1989). *Assessing coping strategies: A theoretically based approach*. *J. Pers. Soc. Psychol.* 56: 267-283.

CBM. (2012). [Internal Document] *Strategic Plan for CBM's Work in Livelihood* 2012–2014

Chambers, R and Conway, G. R., (1991). *Sustainable rural livelihoods: practical concepts for 21st century*. IDS Discussion Paper (296), (online). (Accessed 20 August 2015)

Coleridge P., (2007). *Economic Empowerment*. In: T. Barron and P. Amerena, eds. (2007). *Disability and Inclusive Development*. London: Leonard Cheshire Disability, pp. 111-154.

Crisp R (2002). *A counselling framework for understanding individual experiences of socially constructed disability*. *Disability Stud. Q.* 22: 20-32

Creswell, J. W. (2008). *Educational research: Planning, conducting, and evaluating quantitative and qualitative research* (3rd ed.). Upper Saddle River, NJ:

Cohen, L., Manion, L., & Morrison, K. (2007). *Research methods in education*

(6thed.). London: Routledge Falmer

CRPD, (2016).accessed on 22/

1/2016,from<http://www.un.org/disabilities/default.asp?id=150>.

*Department for International Development, (2000). Disability, Poverty and Development. London: Straightway Communications.*

*Disabilities - Impact of Disabilities on Families (2015)*

(Accessed 25 October, 2015)

Disability inclusion: livelihoods-CBM International (2015)

Available; <http://www.google.com>. (Online)

(Accessed 25 October, 2015)

Ellis, F. (1998). *Livelihoods Diversification and Sustainable Rural Livelihoods*. In: D. Carney, ed. 1998. *Sustainable Rural Livelihoods: what contribution we can make?* London: DFID. Pp. 53-65.

Elzubeir MA, Elzubeir KE, Magzoub ME (2010). *Stress and Coping Strategies among Arab Medical Students: Towards a Research Agenda*. Education for Health. 23:2010.

End the Cycle. (2016.). 'Employment, Disability and Poverty.' Retrieved on 11th January, (2016) from <http://endthecycle.org.au/>

End the Cycle. (2016). 'Employment, Disability and Poverty.' Retrieved on 12th January, 2016 from <http://endthecycle.org.au/>

Folkman S, Lazarus RS (1980). *An analysis of coping in a middle aged community*

*sample*. Journal of Health and Social Behavior. 21: 219- 239.

Freedman, R., & Taub, S. (2006). *Sampling a practical guide for quality management in home and community based waiver programs*. Cambridge: Massachusetts, human services research institute.

Fritz, D. (2009). 'Making poverty reduction inclusive: Experiences from Cambodia, Tanzania and Vietnam.' *Journal for International Development*, 21, pp. 673–684

Ghana Statistical Agency, (2010); *population and housing census*, retrieved online on 10th September, 2015.

Giddens. A. (1991). *Modernity and Self-Identity: Self and Society in the Late Modern Age*

Greely, M., (1994). *Measurement of Poverty and Poverty Measurement*. IDS Bulletin, 25.2, (online). (Accessed 22 June 2015)

Available at: <<http://www.ids.ac.uk/files/dmfile/greeley25.2.pdf>>

Handicap International, (2015); *Employment for disabled persons to participate and contribute*

Halmhuber NL, Paris SG (1993). *Perceptions of Competence and Control and the Use of Coping Strategies by Children with Disabilities*. *Learning Disability Quarterly*. 16: 93-111

Helon, R. and B. Murray (2003): *Assisting Disabled Person in Finding Employment: A Practical Guide*. Asian and Pacific edition. Geneva: International Labour Organization



Hirst, M. (1991). "*Dissolution and reconstitution of families with a disabled young person.*" *developmental medicine and child neurology* 33:1073–1079.

Holland, J.L. (1997). *Making vocational choices: A theory of vocational personalities and work environments* (3 rd ed.). Lutz, FL: *Psychological Assessment Resources*.

Holland, J. L., Fritzsche, B. A., & Powell, A. B. (1994). SDS Self-Directed Search: Technical Manual. Lutz, FL: *Psychological Assessment Resources*

International Labour Organization, (2002). *Disability and Poverty Reduction Strategy- How to ensure that a person with disabilities to decent and productive work is the part of PSRP process*. In: Discussion paper on INFOCUS PROGRAMME ON SKILLS, KNOWLEDGE AND EMPLOYABILITY/DISABILITY PROGRAMME, (online). (Accessed 18 July 2015)

International Labour Organisation, (2010). *The role of international cooperation in support of the Convention on the Rights of Persons with Disabilities*, ILO Contribution, [online].

International Labour Organisation, (2007) *The employment situation of people with disabilities: towards improved statistical information*. Geneva: International Labour Organisation

Jemtå L, Dahl M, Nordahl G, Fugl-Meyer K S (2007). *Coping strategies among Swedish children and adolescents with mobility impairment in relation to demographic data, disability characteristics and well-being* Acta Paediatrica. 96: 1184–1189.

- Judge, S.L. (1998). *Parental coping strategies and strengths in families of young children with disabilities*. *Family Relations*, 47, (3) 263-268.
- Krantz, L., (2001). *The Sustainable Livelihood Approach to Poverty Reduction*, (online). (Accessed 12 August 2015)
- Krug E. ed. (1999) *'Injury: a leading cause of the global burden of disease'*. WHO, Geneva.
- Kwai-sang Yau, M. & Li-Tsang, C. W. (1999). *Adjustment and adaptation in parents of children with developmental disability in two-parent families: A review of the characteristics and attributes*. *British Journal of Developmental Disabilities*, 45, (88) 38-49.
- Lang, R., (2001). *Understanding Disability from a South Indian Perspective*, (online) (Accessed 28 September 2015)..
- Laws, S., Harper, C., and Marcus, R., (2003). *Research for Development: A Practical Guide*. London: Sage Publication.
- McCubbin, H.I. & Patterson, J.M. (1983a). *The family stress process: The double ABCX model of adjustment and adaptation*. In H.I. McCubbin, M.B. Sussman, & J.M. Patterson (Eds.), *Social stress and the family* (pp. 7-37). New York, NY: Haworth Press.
- McDonald-Wikler, L. (1986). *Family stress theory and research on family of children with mental retardation*. In J. J. Gallagher & P. M. Vietze Eds.), *Families of handicapped persons* (, (pp. 167-196). Baltimore: Paul H. Brookes
- McMillan J. A. and Schumacher S. (2001). *Research in education: A conceptual introduction* (4th Ed). Addison – Wesley Educational Publisher Inc. USA.

- Minnes, P.M. (1988). *Family resources and stress associated with having a mentally retarded child. American Journal on Mental Retardation*, 93, (2) 184-192.
- Mitra, S. (2006) '*The capability approach and Disability*'. *Journal of Disability Policy Studies* 2006; 16; 236. *Published by Hammill Institute on Disabilities and SAGE publications.*
- Mohapatra, S., (2012b). In the absence of comparable information, most of the policy planning for people with disabilities is based on assumptions. *Disability News and Information services*, 9 (4). Online (Accessed 30 October 2015)
- Murphy, M. A. (1982). "*The Family with a Handicapped Child: A Review of the Literature.*" *Developmental and Behavioral Pediatrics* 3:73–82.
- Naami, A., Hayashi, R. and Liese, H., (2012). *The unemployment of women with physical disabilities in Ghana: Issues and Recommendations. Disability and Society*, 27 (2), pp-191-204.
- National Centre for Promotion of Employment for Disabled People (NCPEDP), (2009). *Employment of Disabled People in India: Base Line report*, [online]. (Accessed 22 October 2015) Available at :<  
<http://www.dnis.org/Employment.pdf>>
- New Economic Foundation, (2008). *Economic as if people and the planet mattered*
- OECD. (2010) *Sickness, disability and work: breaking the barriers*. A synthesis of findings across OECD countries. Paris: Organisation for Economic Cooperation and Development.
- Office for National Statistics (ONS) in United Kingdom, (2013). *Personal well-being*

*survey. Measuring National Well-being programme*

O'Leary, Z. (2004). *The Essential Guide to Doing Research*. London: Sage.

Oliver, M. (1996) '*Understanding disability: From theory to practice*. In S. Mitra (Ed), *The Capability approach and disability*. Published by Hammill Institute on Disabilities and SAGE publications.

Opini, B. M., (2010). *A review of the participation of disabled persons in the labour force: the Kenyan context*. Disability and Society, 25(3), 271- 287.

Patterson, J. (1988). "*Chronic illness in children and the impact: on families*." in chronic illness and disability, ed. c. chilman, e. nunnally, and f. cox. newbury park, ca: sage publications.

Patton, M. Q. (2002). *Qualitative research & evaluation methods* (3ed.). Thousand Oaks, CA: S

Perrin, E.; Newacheck, P.; pless, I; drotar, D.; Gortmaker, S.; leventhal, J.; Perrin, J.; Stein, R.; walker, d.; and weitzman, m. (1993). "*issues involved in the definition and classification of chronic health conditions*." pediatrics 91:787-793.

Rijavec M, Brdar I (1997). *Coping with school failure: Development of the school failure coping scale*. Eur. J. Psychol. Educ. 12: 37-49.

Roe, A. (1957). *Early determinants of vocational choice*. Journal of Counseling Psychology, 4(3), 212-217.

Rolland, J. (1994). *Families, illness, and disability: an integrative treatment model*. New York: basic books.



Roulstone, R. and Barnes, C (2005). 'Work' is four-letter word: *disability, work and welfare*. In:

Sabbeth, B., and leventhal, J. (1984). "*marital adjustment to chronic childhood illness: a critique of the literature*." *pediatrics* 73:762–768.

Seeley, J., (2001). In Search of Healthy Life: Skeletal Fluorosis, *Disability and Rural Livelihoods Frameworks*, Asia Pacific Disability Rehabilitation Journal 12 (1).

Sen, A., (1999). *Development as Freedom*. Oxford: Oxford University Press.

Shire, (2013). *Livelihood challenges for extremely poor disabled people in the southwest coastal region of Bangladesh*

Singer, G., and powers, l., eds. (1993). *Families, disability, and empowerment*. baltimore: paul h. brookes.

Singhi, P.; Goyal, l.; Pershad, D.; Singhi, S.; and Walia, B.(1990). "*psychosocial problems in families of disabled children*." *British journal of medical psychology* 63: 173–182.

Stein, R. E. K.; bauman, l. J.; westbrook, l. E.; coupey, S.M.; and ireys, H. T. (1993). "*framework for identifying children who have chronic conditions: the case for a new definition*." *the journal of pediatrics* 122:342–347.

Stewart MW, Knight RG (1991). *Coping strategies and affect in rheumatoid and psoriatic arthritis relationship to pain and disability*. *Arthritis Care Res.* 4: 116 – 122.

Super D. (1990). "*A Life-Span Approach to Career Development*." In D. Brown & L.

Brooks (Eds.), *Career choice and development* (2nd ed., pp. 197-261). San Francisco, CA: Jossey-Bass Publishers

Super, D.E. (1983). *Assessment in career guidance: Toward a truly developmental counseling*.

Super, D.E. (1985). *Coming of age in middletown: Careers in the making*. American Psychologist, 40 (4), 405-414.

Taylor, S. E. (1983). *Adjustment to threatening events: A theory of cognitive adaptation*. American Psychologist, 38, 1161-1173.

Thomas P., (2005). *Mainstreaming Disability in Development: India country report*. Disability Knowledge and Research, [online]. (Accessed 2 October 2015)  
The Personnel and Guidance Journal, 61 (9), 555-562.

Turmusani, M., (2003). *Disabled People and Economic Needs in the Developing World: A Political Perspectives from Jordan*. Hampshire: Ashgate Publishing Limited.

United Nations, (2006). *United Nations Convention on the Rights of Persons with Disabilities*, (online). (Accessed 15 August 2015)

United Nations, (2006). *United Nations Convention on the Rights of Persons with Disabilities*, (online). (Accessed 15 June 2015)

Available at: <<http://www.un.org/disabilities/default.asp?id=150>>

United Nations. (1948). *Universal Declaration of Human Rights*. (Retrieved on 12th January 2016). From <http://www.un.org/en/documents/udhr/>

Vance, J.; Fazan, L.; and Satterwhite, B. (1980). "*Effects of nephrotic syndrome on the family: a controlled study.*" *pediatrics* 65:948–956.

Varni, J., and Wallender, J. (1988). "*pediatric chronic disabilities: hemophilia and spina bifida as examples.*" in *handbook of pediatric psychology*, ed. d. routh. New York: guilford.

VSO, 2006; *disability as recognition in the world*. Retrieved on 12 October, 2015

World Health Organization, (2010b). *CBR Guidelines: Livelihoods component*.

Geneva: WHO Library Cataloguing-in-A. -Publication Data, (online)

(Accessed 25 June 2015)

Available at:

<[http://whqlibdoc.who.int/publications/2010/9789241548052\\_introduutory\\_eng.pdf](http://whqlibdoc.who.int/publications/2010/9789241548052_introduutory_eng.pdf)>

World Health Organization, (2012) (United Nations Economic and Social Commission)

World Bank report (2011), *Global Population estimate world's population*

WHO (2009) '*Global Status Report on Road Safety, time for action*', WHO, Geneva.

Asia and the Pacific). (2008). *Training manual on disability statistics*. Thailand: Bangkok.

WHO (2001) '*International classification of functioning, disability and health*,

Geneva.

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## APPENDICES

### PARTICIPANT INFORMATION LEAFLET AND CONSENT FORM

**This leaflet must be given to all prospective participants to enable them know enough about the research before deciding to or not to participate**

**Title of Research: THE INFLUENCE OF PHYSICAL DISABILITY ON THE LIVELIHOODS OF DISABLED PERSONS AND THEIR FAMILIES IN TECHIMAN SOUTH MUNICIPALITY**

**Name(s) and affiliation(s) of researcher(s):** This study is being conducted by Mensa Bonsu Isaac a Second year Master of Science student, in Disability, Rehabilitation and Development offered at Department of Community Health, Kwame Nkrumah University of Science and Technology, Kumasi.



## **Background**

Physical disability includes any type of physical state that significantly influences one or more major life activities (WHO, 2012). According to 2010 Global Population estimate, about 15% of the world's population live with some form of disability (World Bank report 2011). Ghana Statistical Agency (2010) also confirms that 10% of the country's population suffers from a form of disability. These suggest that disability has gained recognition at all level (Voluntary Service Overseas, 2006). Employment enables physically disabled persons to participate and contribute to community life. (Handicap International UK, 2015). Nevertheless, the situation concerning employment and livelihoods for physically disabled persons depicts a poor picture. Peat (1998) argues that physically disabled persons and their families is clearly a major cohort among vulnerable populations. This means that physical disability becomes a personal and family "problem." Disability in a family may entail major economic problems at household levels'. This is because family members have to use the available resources to provide care and support to the disabled person because in poorer countries there may be no much support offered to disabled persons (WHO, 2012). When physical disabilities cause individuals to be unable to fulfill their basic needs, family members are then expected to provide these needs. When the disabled person is unable to work or have limited employment opportunities to generate income, it is often family members who are required to fill the financial gap created by the individual

**Purpose(s) of research:** To investigate the effects of physical disabilities on the livelihoods of disabled persons and their families

**Procedure of the research:** Each participant will be interviewed based on an interview guide. Each participant will be individually interviewed at an available place. The total participants will be 18

**Risk(s):** There are no risks in this research

**Benefit(s):** Results will be used to educate the society and policy makers how physical disability can affect the livelihoods of disabled persons and their families.

**Confidentiality:** No name of a participant who took part in the research will be recorded therefore no data collected can be linked to any particular individual in anyway. No name or identifier will be used in any publication or reports from this study.

**Voluntariness:** Taking part in this study should be out of the participant's own free will. Participants are not under obligation to. Research is entirely voluntary.

**Alternatives to participation:** No participation; this will not have any negative consequences for the person concerned.

**Consequence of Withdrawal:** There will be no consequence, loss of benefit or care to you if you choose to withdraw from the study. Please note however, that some of the information that may have been obtained from you without identifiers (name etc), before you chose to withdraw, may have been modified or used in analysis reports and publications. These cannot be removed anymore. I do promise to make good faith effort to comply with your wishes as much as practicable.)

**Costs/Compensation:** No compensation to participant was given and no cost were incurred by participants

**Contacts:** (If you have any question concerning this study, please do not hesitate to contact Mr Mensah Bonsu (Name of Researcher or PI) on 0277035959.

**Further, if you have any concern about the conduct of this study, your welfare or your rights as a research participant, you may contact:**

**The Office of the Chairman**

**Committee on Human Research and Publication Ethics**

**Kumasi Tel: 03220 63248 or 020 5453785**

The logo of KNUST (Kwame Nkrumah University of Science and Technology) is centered in the background. It features a yellow eagle with spread wings perched on a shield. Above the eagle is a black mortar and pestle with a red flame. The shield has green and red sections. A yellow banner at the bottom contains the text 'WU SANE NO BADWENNA' in black. The word 'KNUST' is written in large, light grey letters across the top of the logo.

## **CONSENT FORM**

### **Statement of person obtaining informed consent:**

I have fully explained this research to \_\_\_\_\_  
and have given sufficient information about the study, including that on procedures, risks and benefits, to enable the prospective participant make an informed decision to or not to participate.

DATE: \_\_\_\_\_ NAME: \_\_\_\_\_

### **Statement of person giving consent:**

I have read the information on this study/research or have had it translated into a language I understand. I have also talked it over with the interviewer to my satisfaction.

I understand that my participation is voluntary (not compulsory).

I know enough about the purpose, methods, risks and benefits of the research study to decide that I want to take part in it.

I understand that I may freely stop being part of this study at any time without having to explain myself.

I have received a copy of this information leaflet and consent form to keep for myself.

NAME: \_\_\_\_\_

DATE: \_\_\_\_\_

SIGNATURE/THUMB PRINT: \_\_\_\_\_

Statement of person witnessing consent (Process for Non-Literate Participants):

I \_\_\_\_\_ (Name of Witness) certify that information given to \_\_\_\_\_ (Name of Participant), in the local language, is a true reflection of what I have read from the study Participant Information Leaflet, attached.

WITNESS' SIGNATURE (maintain if participant is non-literate):

\_\_\_\_\_

MOTHER'S SIGNATURE (maintain if participant is under 18 years):

\_\_\_\_\_

MOTHER'S NAME:



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FATHER'S SIGNATURE (maintain if participant is under 18 years):

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**APPENDIX I**

**KWAME NKRUMAH UNIVERSITY OF SCIENCE AND TECHNOLOGY**

**COLLEGE OF HEALTH SCIENCES**

**SCHOOL OF MEDICAL SCIENCES**

**DEPARTMENT OF COMMUNITY HEALTH**

**INTERVIEW GUIDE SCHEDULED FOR PHYSICALLY DISABLED**

**PERSON**

**A. DEMOGRAPHIC CHARACTERISTIC**

Sex     Male female

Age     0-20     21-59 60+

Educational level	Educated	Uneducated
Marital status	Single Married	Divorce
Employment status	Employed	Unemployment
Area of Disability	Upper limb	Lower limb
Type of disability	Amputation	Deformity/contracture
Period of disability	Below 10years	11-20years      21years +

## **B. EFFECTS OF PHYSICAL DISABILITY ON THE LIVELIHOODS OF DISABLED PERSONS**

**Main:** How has disability affected your livelihoods?

**Probes:**

- What kind of livelihoods activities were you engaged before your disability?
- How did you get involved in those livelihoods activities?
- How important are these activities on your wellbeing?
- How important are these activities on the wellbeing of your family members?
- What kind of work are you engaged in after the occurrence of your disability?
- What would you consider as the factors that have influenced your livelihood issues?
- Which aspects of livelihood have the occurrence of disability affected?

- How/in what ways have the aspects of livelihood mentioned earlier been affected?

### **C.COPING MECHANISMS ADOPTED BY DISABLED PERSONS TO DEAL WITH EFFECTS OF DISABILITY ON THEIR LIVELIHOODS**

Main: How are you coping with your livelihood challenges?

Probes:

- What are the coping mechanisms developed to manage post-disability livelihood issues
- How do you manage the new coping mechanisms?
- How important are these coping mechanisms?
- How challenging are these coping mechanisms?

### **F. MECHANISM TO PROMOTE THE LIVELIHOOD OF PHYSICALLY DISABLED PERSONS.**

Main: What should be done to enhance the livelihood of physically disabled person?

Probes:

- Which sector(s) of the economy needs to be improved to enhance your livelihood?

**APPENDIX II**  
**KWAME NKRUMAH UNIVERSITY OF SCIENCE AND TECHNOLOGY**  
**COLLEGE OF HEALTH SCIENCES**  
**SCHOOL OF MEDICAL SCIENCES**  
**DEPARTMENT OF COMMUNITY HEALTH**  
**INTERVIEW GUIDE SCHEDULED FOR FAMILY MEMBERS OF**  
**PHYSICALLY DISABLED PERSONS**

**A. DEMOGRAPHIC CHARACTERISTIC**

Sex      Male female

Age      0-20      21-59 60+

Educational level      Educated      Uneducated

Marital status Single Married      Divorce

Employment status      Employed      Unemployment

**D. EFFECTS OF HYSICAL DISABILITY ON THE LIVELIHOODS OF  
FAMILY MEMBERS OF DISABLED PERSONS**

Main: What are the major sources of income for the family?



Probes:

- How important is the disabled persons so far as the family's livelihood is concerned?
- How has the disabled person's conditions affected the family's livelihood?
- Which area of the family's well-being has been mostly affected?

#### **E. COPING MECHANISMS ADOPTED BY FAMILY MEMBERS OF DISABLED PERSONS TO DEAL WITH EFFECTS OF DISABILITY ON THEIR LIVELIHOODS**

Main: How are you coping with your livelihood challenges?

Probes:

- What are the coping mechanisms developed to manage post-disability livelihood issues
- How do you manage the new coping mechanisms?
- How important are these coping mechanisms?
- How challenging are these coping mechanisms?

#### **F. MECHANISM TO PROMOTE THE LIVELIHOOD OF PHYSICALLY DISABLED PERSONS.**

Main: What should be done to enhance the livelihood of physically disabled person?

Probes:

- Which sector(s) of the economy needs to be improved to enhance your livelihood?

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