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**DEPARTMENT OF SOCIOLOGY AND SOCIAL WORK**  
**FACULTY OF ARTS**

**IMPLEMENTATION OF THE DISABILITY POLICY: VIEWS ON PHYSICAL  
ACCESSIBILITY, ECONOMIC EMPOWERMENT AND VOCATIONAL TRAINING BY  
MEMBERS OF TUJINUE SUPPORT GROUP.**

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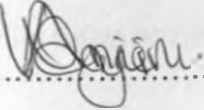
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## DECLARATION

This is my original work and it has not been presented for an award in any other University.

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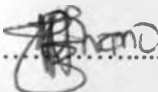
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## **DEDICATION**

**I dedicate this work to my parents, Mr Wambugu Tumuti and Mrs. Njeri Wambugu.**

**This work is also dedicated to all those in pursuit of academic excellence in the field of disability and disability rights activists.**

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## **ABBREVIATIONS AND ACRONYMS**

<b>APDK</b>	<b>Association of the physically disabled</b>
<b>AUB</b>	<b>African Union of the Blind</b>
<b>CBR</b>	<b>Community based rehabilitation</b>
<b>DPO</b>	<b>Disabled Persons Organization</b>
<b>FGD</b>	<b>Focus group discussion</b>
<b>ICRPD</b>	<b>International Convention on the Rights of Persons with Disability</b>
<b>IGAS</b>	<b>Income generating activities</b>
<b>INGOS</b>	<b>International Non Governmental Organizations</b>
<b>KNSPWD</b>	<b>Kenya National Survey for Persons with Disability</b>
<b>LANGOS</b>	<b>Local Non Governmental Organizations</b>
<b>MGSCSS</b>	<b>Ministry of Gender, Culture and Social Services</b>
<b>NCAPD</b>	<b>National Coordinating Agency for Population and Development</b>
<b>PAP 's</b>	<b>Poverty alleviation Programmes</b>
<b>PDA</b>	<b>Persons with Disability Act</b>
<b>PWD</b>	<b>Persons with Disability</b>
<b>SARPV</b>	<b>Social assistance and rehabilitation for the physically disabled</b>
<b>SHAP</b>	<b>Self Help Association of Paraplegics</b>
<b>UN</b>	<b>United Nations</b>
<b>UNCPWD</b>	<b>United Nations Convention on the Rights of Persons with Disability</b>
<b>UNESCO</b>	<b>United Nations Educational, Scientific and Cultural Organization</b>
<b>UPIAS</b>	<b>Union of the Physically Impaired Against Segregation</b>
<b>WHO</b>	<b>World Health Organization</b>

## ABSTRACT

People with disability, have often been marginalized and faced difficulties as a result of their disability. The government of Kenya recognizes that disability cuts across all sectors of development and should be an integral part of all national planning. The government has therefore continued to create a conducive environment for different players to enable them incorporate disability issues into policies and programmes. The purpose of this study was to establish the views of persons with disability on the implementation of the disability policy. The research objectives were to find out the accessibility of the physical environment, the availability of economic empowerment programs and availability of vocational training services to persons with disability.

The target population was the persons with physical disability, characterized by mobility limitations. The respondents were drawn from Tujiinue support group in Kibera. Snowballing sampling technique was used in selection of study respondents. Four key informants were used to supplement the study findings. Two were from the ministry of Gender and Sports, Culture and Social Services while two were from the national council of persons with disability. The data collection methods that were used were schedule-structured interviews, a focus group discussion and case studies.

The study findings showed that most of the respondents felt that accessibility of the physical environment to persons with disability continued being a challenge with a majority of the respondents (92%) saying that they experienced problems while trying to access buildings that had not complied with the adjustment order cited in the disability act. The study revealed that persons with disability were yet to be economically empowered. The 5% job reservation stipulated in the disability act for persons with disability was yet to be achieved. The financing institutions also were yet to begin advancing loans to persons with disability as capital to create self employment hence lead to self reliance. The study also showed that a high proportion (90%) of the respondents indicated that they had not gone through any form of vocational training to help them gain skills in starting own business or securing employment. The findings indicated that there was need for increased access to technical, vocational, entrepreneurial and professional training opportunities for persons with disability as stipulated in the disability act. The study concluded that despite the Disability Act having been enacted in 2004, persons with disability felt that the implementation of the policy needed to be fast-tracked especially concerning the physical accessibility, economic empowerment and provision of vocational training for the persons with disability.

It is recommended that the government should ensure adjustments and modifications are implemented as the Disability Act stipulates in order to have a physical environment that will be more disability friendly. Secondly, 5% of job opportunities stipulated in the Disability Act should be availed to the persons with disability to ensure that persons with disability are able to earn a livelihood and help themselves. The study finally recommends that vocational training should be more accessible to persons with disability as this will promote gainful employment and self-employment.

# **CHAPTER ONE**

## **INTRODUCTION**

### **1.1 Background**

Around the world concern is growing about the participation of persons with disability in national development. This concern is rooted both in humanitarian and human rights issues and the need to ensure that people with disability are empowered to take their rightful place in the society. There should be protection of the rights of persons with disability irrespective of gender, age, or type of disability (GOK, 2007). There is need to initiate various activities, programmes and projects intended to improve the well being of persons with disability. Both international and national efforts are required to bring disability issues to the fore-front of policy considerations.

Globally, people with disability, are often marginalized and face difficulties as a result of their disability (Oliver, 2006). The government of Kenya recognizes that disability cuts across all sectors of development and should be an integral part of all national planning. The government has therefore continued to create a conducive environment for different players to enable them to incorporate disability issues into their policies and programmes. Nevertheless, the majority of persons with disability remain invisible to policy makers and efforts are needed to integrate their participation into national development initiatives (Bickenbach, 1993).

The level of services for persons with disability in Kenya today raises certain concerns that the government regards as requiring policy action which later culminated in the development of a draft National policy on disability. Colin (2003) adds that when we see the plight of persons with disability as a national concern as opposed to a national welfare, then there will be importance of having a policy in place. The government has made significant strides in implementing activities that enhance inclusion, empowerment, participation and enjoyment of rights by all citizens in all aspects of development, and that includes persons with disability. Towards this commitment the government has taken

progressive steps towards incorporating disability issues and concerns into national institutions and programs. Bickenbach (1993) notes that governments should integrate the issues of the vulnerable persons in their endeavour to enhance aspects of development. At the national level, the government has made significant strides to address disability as reflected in various developments. To start with, the national policy on disability is in place. The policy seeks to eliminate disparities in service provisions and also ensure that services are available to all citizens with disability.

The government of Kenya has also gone ahead and facilitated the enactment of the Persons with Disability Act in 2003 whose main objective is to provide for the rights, rehabilitation and equalization of opportunities. This Act has since established the National Council for Persons with Disability (NCPWD) in 2004. One of the council's mandate is to formulate and develop measures and policies designed to co-ordinate services provided in Kenya for the welfare and rehabilitation of persons with disability and to implement programmes for vocational guidance and counseling (GOK, 2003).

The government of Kenya signed and ratified the convention on the rights of persons with disability in March 2007 and May 2008 respectively. This CRPD mainly addresses the rights of persons with disability which include equality and non-discrimination, accessibility, economic empowerment and access to vocational training. The government also celebrates the International Day of PWDS every 3<sup>rd</sup> December whose overall objective is to promote an understanding of disability issues and mobilize support for the dignity, rights and well-being of persons with disability . This has continued to show the government's commitment in addressing disability issues. There has been enhanced collaboration and networking between Government and DPO's at national and grassroots' levels in the provision of skills and assistive devices to PWDs. Groce (1998) adds that any government is solely responsible in dealing with disability and recognizing the needs and coming up with policies addressing disability.

Helander (1993) notes that empowerment and mainstreaming is vital for development especially with vulnerable groups which include persons with disability. The government of Kenya has facilitated the establishment of the national development fund for PWDs aimed at promoting business entrepreneurship for persons with disability (GOK, 2007). This is to ensure that the persons with disability are economically empowered and that they are dependent. These government efforts, complemented by other interventions have been very instrumental in getting disability to be at the core of national development. Bickenbach (1993) notes that while putting a policy in place, the commitments should be aimed at ensuring that persons with disability live in dignity to enjoy their human rights and overcome barriers that exclude them from full and equal participation in society. In light of this commitment, the government recognizes that exclusion of PWDs retards growth while equality is an issue of development. In this view, a national disability policy was found to be the way forward.

The disability policy should have principles which could be summarized as equalization of opportunities, mainstreaming, human rights, accessibility and gender (Bickenbach, 1993). In the Kenyan Disability Act, among the key components of the policy are awareness and public education, early identification and intervention; rehabilitation; education; and training, economic empowerment and accessibility. It can therefore be noted that the government has done remarkable progress in addressing the concerns of persons with disability by having the Disability Act in place and also integrating the stated issues in the Disability act.

Collin (2003) notes that successful implementation of the policy would require strong administrative structures, adequate resources, review of existing policies and legislation, formulation of new policies enhanced local and international collaboration. This in turn had to be grounded in a solid implementation base. This recognition is what led the government of Kenya, to enact the persons with disability act which was gazetted in June 2004. The role and responsibility of Disability Act is to plan, develop strategic policy, allocation of funding, provision and monitoring services for people with disability. Disability Act works with people with disability, families, and friends to create good

lives. The disability act also sheds light on businesses and community organizations in order to improve the ways and acknowledge that people with disability are part of the community. The Disability Act ensures that all people with disability, achieve what they want to achieve, live how they choose to live, and are valued as full and equal members of the community.

## **1.2 Problem statement**

Oliver (2006) notes that ideally, people with disability have the right to secure equal opportunities and equal rights, they have the right to accessibility and safety in transportation, architecture, and the physical environment, equal opportunities in independent living, employment, education, and housing, and freedom from abuse, neglect, and violations of patients' rights. Disability is an issue that has lately dominated the UN Conventions of Human rights. It has been discussed that persons with disability have constantly been educationally marginalized, have had no reasonable access to health care, public utilities and other individual's requirements. The purpose of these conventions is to promote, protect and ensure the full and equal enjoyment of all human rights and fundamental freedoms by all persons with disability, and to promote respect for their inherent dignity.

The Government acknowledges disability as a phenomenon that cuts across all spheres of society and which requires support from all sectors. It continues to provide services, grants and at the same time providing enabling environment for input and initiatives by different players in the sphere of disability. It is evident that the government of Kenya, through its ratification and endorsement of international policies concerning the disability issues, is keen on involving persons with disability in development initiatives. Kenya came up with the Disability Act (2003) which was assented to on 31<sup>st</sup> December 2003 and came into force on 16<sup>th</sup> June, 2004 through Legal Notice No.64 of 2004. The policy on disability is keen on ensuring that people with disability in Kenya are integrated in mainstream development, that they have their human rights respected, are rehabilitated accordingly and that there is equalization of opportunities (GOK, 2003).

The successful implementation of the disability policy in Kenya remains the responsibility of all stakeholders with the Ministry of Gender, Children and Social services taking the lead towards ensuring a society fit for all (MDSCSS, 2006). Bickenbach (1993) notes that even after having a policy in place concerning persons with disability , implementation is still key in overcoming the challenges that continue to exclude people with disability from mainstream society.

This study therefore seeks to collect the views of persons with disability on the implementation of the disability policy. Since the disability act was gazzeted in 2004, the government and other stake holders have been implementing the disability policy and for the purpose of this study, the researcher will review three of the areas provided for in the disability act which are accessibility of the physical environment, availability of economic empowerment programmes and provision of vocational training services to persons with disability.

### **1.3 Research Questions**

The following are the research questions that will guide the objectives of this study.

- 1) Has the physical environment been accessible to persons with disability?
- 2) Are economic empowerment programmes available to persons with disability?
- 3) Are vocational training services provided to persons with disability in the community?

### **1.4 Goal and Objectives**

#### **1.4.1 General objective**

The general objective of the study is to establish the perception of persons with disability on the implementation of the disability policy.



#### **1.4.2 Specific objectives**

- 1) To assess the physical accessibility of persons with disability
- 2) To find out the economic empowerment programs availed to persons with disability
- 3) To find out the provisions for vocational training available to persons with disability

#### **1.5 Scope and limitations**

The study was confined in only finding out the views of persons with disability on the implementation of the disability policy from members of Tujiinue support group. Since the disability policy covers various provisions, the study evaluated only three provisions which were physical accessibility, vocational training and economic empowerment of persons with disability.

Under the physical accessibility, the study looked at the accessibility to physical environment which included site environment, public buildings and the public transport. In vocational training, the study looked at apprenticeship, entrepreneurial training, formal and informal training while in evaluating economic empowerment programs available to persons with disability , the study focused on employment, support on cottage and home based industries and provision of loans from financing institutions.

The aspects assessed in this study were therefore three namely; physical accessibility, economic empowerment and vocational training hence could not be used to generalize the findings to reflect the perceptions of persons with disability on the implementation of the entire disability act.

The limitation of this study was that the researcher relied on word of mouth from the government officials on the process of implementation.

## 1.6 Definition of key terms

**Perception** refers to constructing an understanding of the social world from the data we get through our sense (Myers, 2004). Thus, perception “refers to the process by which we form impressions of other people’s traits and personalities and phenomena.

**Disability Policy** according to Nagi (1965) is the guideline that has been laid down, that governs behavior that involves situations of long term or continued impairments that are associated with functional limitations in a society. The disability policy addresses the inability or limitation in performing socially defined roles and tasks expected of an individual within a socio-cultural and physical environment characterized by mobility. A policy can be written or intention.

**Disability Act** is a piece of legislation enacted by parliament to deal with issues relating to persons with disability. The Disability act provides for the rights of persons with disability as well as the mechanisms for their rehabilitation and seeks to achieve equal opportunities for them (GOK, 2003).

**Economic empowerment** is an on-going process, which enables an individual to fulfill and be accountable for his or her duties and responsibilities and protect his or her rights in the society. Part of the process is to provide people with the resources, opportunities, knowledge and skill needed to increase their capacity to determine their own future and fully participate in community life (Helander, 1993).

**Persons with Disability** include those who have long-term physical, mental, intellectual or sensory impairments which in interaction with attitudinal and environmental barriers may hinder their full and effective participation in society on an equal basis with others (Handicap International, 2010). For the purpose of this study persons with disability will mean those with physical disability characterized by mobility limitation. These are persons who use assistive devices to walk i.e. wheelchairs and crutches.

**Physical accessibility** is the ability to move freely and easily either vertically or horizontally around physical features within premises or externally (Handicap International, 2010). Physical accessibility for the purpose of this study will also include accessibility to public service vehicles.

**Vocational training** is defined as training for a specific career or trade. It prepares trainees for jobs that are based on manual or practical activities, traditionally non-academic, and totally related to a specific trade, occupation, or vocation. Rothman (1971) refers vocational training as technical education where the trainee directly develops expertise in a particular group of techniques or technology. He further notes that it focuses on practical applications of skills learned, and is generally unconcerned with theory or traditional academic skills.

## **CHAPTER TWO**

### **LITERATURE REVIEW**

#### **2.1 Understanding disability**

According to the Kenya Persons with Disability Act (GOK, 2003), disability is defined as physical, sensory, mental or other impairments including any visual, hearing, learning or physical incapacity which impacts adversely on social, economic or environmental participation.

How do scholars conceptualize disability? There are six distinct models that define disability.

These six models are a) morality model; b) medical model; c) rehabilitation model; d) disability model; and e) human rights or equality model; e) Social model. Each perspective or approach generates different understandings and political/policy responses. These range respectively from charity, sympathy, pity, surgery, rights and entitlements.

#### **2.2 Models of disability**

##### **2.2.1 The morality model**

This is the oldest model and it regards disability as the result of sin. Disability is viewed as the outward manifestation of inner evil or depravity. Erving Goffman (1963) describes the stigma of disability as the bodily signs designed to expose something unusual and bad about the moral status of the signifier depicts that the disabled person is a blemished person, to be avoided. Moreover, historically, rendering someone disabled as a punishment for a crime or perceived crime was standard practice (Goffman, 1963). Within many cultures, this practice has continued into the twenty first century.

### **2.2.2 The medical model**

During the mid-1800's, with developments in the medical and rehabilitation fields, the medical model emerged. Boorse (2010) notes that the primary aim of the medical model is to correct and cure. Under this model, the problems that are associated with disability are deemed to reside within the individual and therefore, the individual with a disability is a sick person. When people are sick, they are exempted from the normal obligations of society such as going to school, getting a job or taking on family responsibilities. They are also expected to come under the authority of the medical profession in order to get better. Thus until recently, most disability policy issues, have been regarded as health issues, and physicians have been regarded as the primary authorities regarding policy on the matter.

### **2.2.3 Disability model**

This model regards disability as a normal aspect of life, not as a deviance and rejects the notion that persons with disability are in some inherent way “defective”. Most people will experience some form of disability, either permanent or temporary, over the course of their lives. Given this reality, if disability were more commonly recognized and perceived in that environments or our systems are designed, it would not be so abnormal.

Altman (2001) adds that the disability model recognizes social discrimination as the most significant problem experienced by persons with disability and as the cause of many problems. Further the disability model holds it that other problems include the dominating attitude by professionals, inadequate support services as well as attitudinal, sensory, cognitive and economic barriers, the strong tendency for people to generalize about all persons with disability overlooking the large variations within the disability community.

### **2.2.4 The Charity Model**

This is perhaps the other oldest model that has been used to understand disability. Driven largely by emotive appeals of charity, this model treats people with disability as helpless

victims needing 'care' and 'protection'. As the term 'handicap' implies, derived as it is from the image of a beggar with a 'cap in hand', this model relies largely on the goodwill of benevolent humanitarians for 'custodial care' of the disabled. There is an imperative of social responsibility that is derived from charity and benevolence, rather than justice and equality. The notion of charitable, privilege has its roots in the English Poor Laws, which primarily protected drain on social resources and created criteria to limit claims to rights. In other words, the charity model was based on an assumption that claim to rights is valid on certain grounds and invalid on certain others. Disability was perceived as a disqualification and perhaps for this very reason the expression 'invalid' became synonymous with persons with disability. Davis (2002) adds that the charity model engineered stringent criteria for groups declared invalid ensuring their exclusion from social arrangements and services in the public domain. It justified their exclusion from mainstream education and employment, and other rights and privileges enjoyed by citizens who fitted into the criteria of valid holders of rights.

The charity model driven interventions, which are intended to be beneficial can actually compromise their beneficiaries' rights. Since entitlement to rights is often substituted by relief measures, over which the groups declared invalid have little control or power to bargain, the charity model creates an army of powerless individuals dependent on either State sponsored charities or arrangements maintained by benevolent individuals outside mainstream development and mechanisms of social support. Special schools, sheltered workshops and protection homes for persons with disability were established throughout the world by religious and other philanthropic agencies (Harris and Enfield 2003).

### **2.2.5 Human Rights Model**

This is the most recent model that the activists have been advocating for. The human rights model positions disability as an important dimension of human culture, and it affirms that all human beings irrespective of their disability have certain rights which are inalienable. By emphasizing that the disabled are equally entitled to rights as others, this model builds upon the spirit of the Universal Declaration of Human Rights, (UN,1948)

according to which, 'all human beings are born free and equal in rights and dignity.' In the recent convention on the rights of persons with disability, it extensively talks about all the rights that a person with disability should have.

### 2.2.6 The social model

The social model of disability has been called 'the big idea' of the British disability movement (Hasler, 1993). Developed in the 1970s by activists in the Union of the Physically Impaired Against Segregation (UPIAS), it was given academic credibility via the work of Vic Finkelstein (1980, 1981), Colin Barnes (1991) and particularly Mike Oliver (1990, 1996). The social model has now become the ideological litmus test of disability politics in Britain, used by the disabled people's movement to distinguish between organizations' policies, laws and ideas which are progressive and those which are inadequate.

The core definition of the British social model comes in the UPIAS document, Fundamental Principles of Disability, an edited version of which is reprinted in Oliver (1996), and which is quoted here at length:

*"... In our view, it is society which disables physically impaired people. Disability is something imposed on top of our impairments by the way we are unnecessarily isolated and excluded from full participation in society. Disabled people are therefore an oppressed group in society. To understand this it is necessary to grasp the distinction between the physical impairment and the social situation, called 'disability', of people with such impairment. Thus we define impairment as lacking all or part of a limb, or having a defective limb, organism or mechanism of the body and disability as the disadvantage or restriction of activity caused by a contemporary social organization which takes little or no account of people who have physical impairments and thus excludes them from participation in the mainstream of social activities." (Oliver, 1996)*

According to Grant Carson (2009), the social model was created by disabled people themselves as a result of the society's response to them and their experience in health and welfare system that made them isolated and oppressed. Through the social model, disability is understood as an unequal relationship within the society which the disabled

persons' needs are given little or no consideration. People with impairments are disabled by the fact that they are excluded from participating in the society's activities as a result of the physical or organizational barriers which prevent them from gaining equal access to education, employment and other social functions that they would otherwise access (Carson, 2009).

As noted by Davis (1996) disabling barriers often time have nothing to do with the individual disabled bodies but rather the barriers are created by people and are hard to remove. He goes further to affirm that disabled people, irrespective of their nature of impairment, they all share a commonality of sorts;

*"A person who is hearing-impaired may have no difficulty boarding public transport, whilst a paralyzed wheelchair-user would most likely be prevented from sharing the same journey. By contrast, the paralysed person may have no difficulty in making her or his intentions known at a booking office, whilst the deaf person might be totally unable to carry out the same activity"* Ken Davis (1996). In his paper, 'the social model of disability-setting terms of a new debate' Ken Davis (1996) recognizes that if disabled people are to join the mainstream society, which is their human right, then it is necessary to change the way the society is organized.

According to Carson (2009), the implications on information provisions for the model of disability is that by providing satisfactory and reasonable adjustments, barriers can be overcome thus positively impacting the lives of disabled persons. This way, discrimination can be eliminated by eradicating the barriers with support from the non-disabled persons within the society. This model therefore claims that disabled people are an oppressed social group. It distinguishes between the impairments that people have, and the oppression which they experience. And most importantly, it defines disability as the social oppression, not the form of impairment.

### **2.3 Cultural Dimensions of Disability**

Culture has many faces and its definitions are diverse. Culture is dynamic and so are interpretations. Disability exists throughout the world, without respect to national, ethnic



or cultural boundary. The history of the treatment of persons with disability has been one of ignorance and isolation. And the road toward understanding, accepting persons with disability has been an arduous journey in many African countries that is not yet complete (Carson, 1996).

Social perceptions on disability arise as a result of cultural beliefs and practices existing in communities (Helander, 1995). Some societies perceive disability as incurable illness (Ingstad, 1991). The Somali people, for example, regard disabled as ill and impaired and in Mali, a disabling condition for a woman is to be ugly (Kotut, 1995). Ingstad, (1995) further argues that all aspects of disability are located in a network of social relations and dependent on social resources of various kinds. These perceptions which focus on stigma and severe maltreatment of PWDs may be a product of lack of understanding of other fundamental social processes that shape the lives of the disabled persons (Ingstad, 1995).

According to Groce (1989), cultural beliefs about disability are strongly influenced by religion, socio-economic status and education background. In turn, these beliefs about disability affect how PWDs are treated in each culture. Attitudes are built upon beliefs, but can be shaped by experience and encounters with PWDs. Overall people with handicapping conditions from developing countries are victimized by neglect, superstition, inaccurate stereotyping and exploitation and excluded from the community (McConkey & O'Toole, 1995). As a result, obtaining appropriate education and training, entering the workforce, and being accepted in society are difficult to achieve when disabled people are viewed negatively or marginalized in the society. This is because, until very recently, disability-related issues, which are now considered development issues, have remained "the least prioritized and inadequately factored section of the national budget" in Kenya and other African countries (UN, 2005).

#### **2.4 Accessibility of physical environment to persons with disability**

The concept of accessibility is supported in the Convention on the Rights of Persons with disability that aims at enabling persons with disability to live independently and participate fully in all aspects of life. Bickenbach (1993) notes that State parties should

take appropriate measures to ensure to persons with disability access, on an equal basis with others, to the physical environment, to transportation, to information and communications, including information and communications technologies and systems, and to other facilities and services open or provided to the public, both in urban and in rural areas. These measures should include the identification and elimination of obstacles and barriers to accessibility and should apply to buildings, roads, transportation and other indoor and outdoor facilities, including schools, housing, medical facilities and workplaces. An accessible physical environment is required for all. However, persons with disability require certain adjustments to enable them move freely despite their disability or the assistive devices they utilize (Altman, 2001). Accessibility is about giving equal access to everyone. An accessible physical environment benefits everyone, not just persons with disability (Oliver, 1996). Barriers to persons with disability may include stairs, where a person with a physical disability may find it impossible to use. Oliver (1996) further states that the physical environment must be friendly to all Access to buildings, roads and other social amenities must be barrier free. Basnett (2001) adds that assistive devices or equipment must be provided to assist the movement of persons with disability.

According to the persons with disability act on 'accessibility and mobility' persons with disability are entitled to a barrier-free and disability-friendly environment to enable them to have access to buildings, roads and other social amenities, and assistive devices and other equipment to promote their mobility. Physical access is basically the ability to move freely and easily either vertically or horizontally within premises or externally. An accessible physical environment goes a long way in ensuring that persons with disability can access information and services like any other person in society (Altman, 2001). He further notes that this is important in ensuring independence and self reliance as a person with disability and also promotes participation and involvement in issues and activities within the society. Oliver (1996) states that accessibility includes a whole journey comprising of the means and an unlimited movement without any hindrance. According to the disability act, (GOK, 2003) accessibility to buildings by persons with disability should be made possible by all stakeholders in the construction industry. Every public

building should be made accessible to persons with disability. Government offices, businesses and other places open to the public are required to ensure that disabled persons have full and equal access to their property, goods and services.

As a provision in the persons with disability act, businesses are required to eradicate physical barriers that make it difficult for a disabled person to access the property or enjoy its goods or services. Removing a barrier may be required, however, if it's too difficult or expensive to do so, alternative methods of providing the services may be offered if they're cost effective and can be put into place quickly. The disability act further states that when building houses the switches, cooking slabs, kitchen sinks, kitchen cabinets and taps shouldn't be too high such that disabled people cannot reach.

Oliver (1990) notes that the most economical way to cater for the disabled in any building is to ensure that all the facilities they require are provided for on the ground floor. While it may be difficult to find apartments with low level kitchen cabinets and electricity switches, developers are advised to consider adjusting such facilities for the disabled to make them user friendly. Accessible sanitation need to be designed to address the requirements of people with a variety of impairments and it is important that disability friendly toilet facilities are provided in all buildings. Where space is restricted, rather than trying to squeeze in both disabled and non-disabled facilities, an accessible cubicle could be provided for use by everyone (Davis, 2002). The support of personal assistants should also be considered. The construction and building environments pose many difficulties in physically accessing public buildings, roads and other infrastructure to persons with physical impairments. Davis (2002) notes that most building codes, physical planning laws and standards are unresponsive to the needs of the disabled. Disability act (GOK, 2003), further states that, premises which members of the public visit, are subject to adjustment orders if the council considers them not friendly for the use by persons with disability. The council may then issue an adjustment order in respect to such premises.

Oliver (1996) therefore argues that measures should be taken to develop guidelines to eliminate obstacles and barriers and make all public facilities accessible for persons with disability. Government should amend building codes, physical planning to ensure the full participation of persons with disability in the society. This may include the provision of ramps into buildings and functional lifts. This should be conducted with involvement of persons with disability throughout the entire process and be delivered in both public and private settings (Bickenbach 1993). This review is informed by the social model of disability, the view that society disables people with impairments through the construction of social and environmental barriers (Barnes and Mercer, 2003).

#### **2.4.1 Public transport**

Heiser (1995) defines transport disability as ‘the unnecessary exclusion of disabled people from current forms of transport’. Transport includes both public transport (buses, trains, taxis, aircraft and ferries) and private individual transport (cars and bicycles), as well as walking (Mitchell, 1997). Accessible transport enables disabled people to live independent lives. It means having transport services, going where and when one wants to travel; being informed about the services; knowing how to use them; being able to use them; and having the means to pay for them” (Ling Suen & Mitchell, 1998). Education and business are the greatest reasons for using public transport (Bellerby, 2000), and if disabled people are to access employment, education and services they need access to transport. Porter (2002) suggests that ‘those involved in policy and research into transport disability always have to place transport in the bigger picture.

The design of trains, buses and taxis present major obstacles to their use by persons with disability (Grosbois, 1998). Effective accessibility to the vehicles could include low entry steps, sufficient grab rails at entrances and inside the vehicles. He further states that wide door openings and wide aisles would promote easy maneuvering inside the public vehicles. The Kenya disability act states that an operator of a public service vehicle shall adapt it to suit persons with disability in such manner as may be specified by the council. It further states that all operators of public service shall comply with the adjustment of the public service vehicles ought to have been complete within two years after the

disability act came to operation. Going by this provision, measures should have been taken to develop guide principles to ensure the public service vehicles are modified to cater for persons with disability.

## **2.5 Economic empowerment of Persons with Disability**

UNESCO, ILO (2004) observes that, there is a strong correlation between disability and poverty. Poverty leads to increased disability and disability, in turn leads to increased poverty. In the year 2000, UN Member States set the Millennium Development Goals, wherein eradication of poverty was top on the list. The effect of poverty on people with disability is unbelievably huge and devastating (Signoriello, 1991). Helander (1993) defines empowerment as "an on-going process, which enables an individual to fulfill and be accountable for his or her duties and responsibilities and protect his or her rights in the society. Part of the process is to provide people with the resources, opportunities, knowledge and skill needed to increase their capacity to determine their own future and fully participate in community life. Empowerment of persons with disability therefore, refers to giving them a variety of opportunities to discover themselves, understand their environment, be aware of their rights and take control of their lives and partake in important decisions that lead to their destiny. Economic empowerment of the vulnerable groups helps change attitudes of people and restores self-dignity especially in persons with disability (Oliver, 1996).

The Government of Kenya is committed to the observance of international standards that promote employment and human dignity in the place of work for persons with disability (GOK, 2003). It is aware of the recommendations of the ILO Convention on employment of disabled persons. Davis, (1996) states that provisions on the right to decent work, social security, and measures for the promotion of employment opportunities for PWDs and the quality of treatment and protection against degrading work practices should be put in place to guarantee empowerment of persons with disability. Oliver, (1996) recognizes the importance of rights of persons with disability and states that provision for monitoring mechanisms, promotion of awareness of rights, and participation of NGOs, employers and workers organizations in matters relating to disability should be ensured.

Closely related to this at the national level are the provisions of the persons with disability act, which among other things provides for an affirmative action in job placement and in securing employment. It provides for incentives to those who employ and adapt work places to accommodate the needs of employees with disability. Kenya's economic growth has not generated enough employment opportunities for all those who need to work. There exists stiff competition in the open labour market to the disadvantage of persons with disability with limited education and training. Many persons with disability need assistance into the informal sector (GOK, 2007).

Economic empowerment of PWDs is very crucial in raising their status (Stewart, 1994). However, this cannot be achieved without the involvement and participation of all stakeholders: the government, members of the community, the labour market and PWDs themselves. The disability act needs to increase sensitization of the public on disability issues and rights of PWDs. Also, innovation and increased support for economic integration activities is necessary; as well as implementation of realistic and results-oriented plans in order to achieve successful empowerment of PWDs through disability act (GOK, 2007).

### **2.5.1 Cottage and home based industries**

Cottage Industry is a specialized form of small scale industry where the production of the commodity takes place in the homes and the labor is supplied by the family members only. The machineries or means utilized for the production of the commodities generally are the common ones used at homes. The basic characteristic feature of cottage Industry is that it is basically unorganized in nature and come under the group of small scale industry type. Helander (1993) notes that encouraging development of cottage and home-based industries are important as a means of generating income. This not only makes the persons with disability independent but also creates employment opportunities. The governments should ensure that funding is allocated to support these home based industries because they can be a means of livelihood.

### **2.5.2 Financing services availability to persons with disability**

Helander (1993) notes that the objective of empowering the persons with disability is to improve access to loans and credit facilities for self-reliance and economic development and also to improve equal access to open employment opportunities for Persons with Disability . He adds that this can only be achieved by taking measures in collaboration with stakeholders to ensure people with disability are availed work, tools, and money to enable them improve their economic situations. Promoting the removal of barriers and implementation of enabling and inclusive mechanisms within existing and proposed micro, medium and large enterprises is equally important (Oliver, 1996). This can be by providing access to business loans for both men and women with disability.

He further notes that PWDs who have successfully graduated from vocational training and have not been able to secure wage-earning jobs need to be supported to set up workshops or suitable income generation activities (IGAs), in order to earn a living. In Tanzania where the implementation of the disability act is under way, loans are determined by the client's disability condition, nature of the business and economic situation of the PWD/family, among other requirements. PWDs whose IGAs require substantial capital are given part grant and part loan. A world survey conducted to determine the success and failure of vocational training and livelihood programmes confirm that, PWDs supported with both grant and loans, are likely to succeed better than those who only have access to loans (Caswell, 2003). Experience with supervising the economic integration scheme in Kenya shows that it does not necessarily take large sums of money to make a difference in the lives of majority of PWDs living in the rural areas (GOK, 2010). Sources of funds for support of PWDs willing to start income generating activities could come from the government's Poverty Alleviation Programmes (PAPs), community banks, philanthropists, local non-governmental organizations (LNGOs), international non-governmental organizations (INGOs), members of the community and disabled peoples families.

Therefore, the goal of a disability policy is creating opportunities for PWDs to access funds for business purposes and also to answer the question: what difference has credit made, to the lives of PWDs who have receive (Rukia 2010).

### **2.5.3 Employment of persons with disability**

Article 23 (1) of Universal Declaration of Rights by UN states that: everyone has the right to work, to free choice of employment, to just and favorable conditions of work and to protection against unemployment" (UN, 1948). On the contrary, ILO estimates that the unemployment rate among PWDs in the developing world is an overwhelming problem - up to 80% in some countries (ILO, 2003). Caswell (2003) observes that: even though there exists legislation for quota system favoring employment of PWDs, unfortunately, this legislation is either underutilized or not enforced. Many PWDs may have brilliant ideas to contribute towards development of their communities and indeed their nation, through public service; but generally they are not allowed the opportunity to do so due to their disability (ILO, 2001). In addition, facilitating the development and implementation of legislation on employment equity to protect job seekers and workers with disability against discrimination by promoting an inclusive work environment that accommodates diversity should be paramount. Goffman (1963) states that if PWDs have to be involved, then they must be fully represented by way of employment in all government ministries and offices. Most governments and some NGOs in Africa do, to some extent, provide sheltered employment for PWDs (ILO, 2001). Goffman, (1963) however states that although this arrangement caters for their special needs, it also encourages social exclusion, increases stigma and denies them their right to equal employment opportunities as enjoyed by other able-bodied persons.

Oliver (2000) notes that the negative attitude of the public towards PWDs is one of the biggest challenges for implementation of disability programmes. On the other hand, he notes that PWDs on their part have to work hard to turn this picture around, through hard work and credible performance in any given job opportunity. The government should ensure and facilitate employment of persons with disability in leadership positions to enable them to take advantage of such opportunities to develop themselves and use their initiatives in handling their responsibilities. Employers should also allow PWDs under employment, to join in labour unions to enable them express their views and feelings concerning general problems and issues affecting their lives. Disability programmes can encourage open employment of PWDs through creating awareness on the need for equal



opportunities for PWDs, educating the public on their capabilities and encouraging them to get involved in the political process, by forming pressure groups capable of influencing government policies. Goffman (1963) adds that employers should be encouraged to comply with the provision of the disability policy in place, in order to provide necessary adaptive equipment to enable men and women employees with disability to do their jobs effectively.

Helander (1993) finally argues that promoting adaptation of work premises to guarantee safe access for employees with disability and maintaining a gender disaggregated data bank on potential employees with disability and match this with job placement to facilitate increased employment would be really ideal in economically empowering persons with disability especially in employment.

#### **2.5.4 Self-directed employment of persons with disability**

Albright (1993) observes that, self directed employment is an option that is of increasing interest to people with disability both in economically developed and developing countries. This could be a strong tool for economic empowerment of persons with disability; not only because they take the initiative, but also because they play a leading role in their structural set up and day-to-day decision making and management process. Self-directed employment includes running small business enterprises, and working in cooperatives controlled by disabled persons.

Toit (1991) cites the Self-Help Association of Paraplegics, (SHAP) in Soweto, Republic of South Africa, as one of the good examples of self-directed efforts to empower, develop, and create employment opportunities for young persons with physical disability SHAP operates a factory, which employs 130 disabled people working on a sub-contract basis, doing packaging and assembly work, repairing sophisticated mechanical and electronic devices, such as cameras and calculators etc. This association wins the admiration and support of government and indigenous companies in their fundraising efforts for self-support.

Another good example of self-directed effort worthy of mention is the project made by the social assistance and rehabilitation for the physically vulnerable (SARPV) initiative in Chakoria, Bangladesh. Founded in 1989, by Mr. Shahidul, who is physically disabled SARPV runs a skill development and credit programme called, build own small enterprise project, to empower and support poor disabled persons in the district, who want to be successful entrepreneurs but are lacking relevant skills and funds to realize their dreams. Although Caritas-Netherlands and UN largely fund SARPV, its ability to integrate its activities to suit the culture and needs of the people in this area makes it original. Business skills are taught to members and loans provided to groups of disabled members after successful graduation. Members of the association are encouraged to work together with family members and other able-bodied persons in the community in carrying out respective economic activities.

In Mombasa, Kenya, the APDK (Association for the Physically Disabled, Kenya) project runs a community based employment creation programme where 360 micro-enterprises have been established, of which 80 percent are running successfully. Implementation of the disability policy programmes in relation to economic empowerment should encourage similar initiatives in other counties in Kenya, to enhance economic empowerment of PWDs.

## **2.6 Vocational training for persons with disability**

An important principle for the inclusion of disabled people in development is the promotion of vocational training. Vocational training is the preparation for jobs that call for extensive practical experience and training but have few requirements for theory, technical knowledge, or liberal arts education (UNESCO, 2008).

Rifkin and Pridmore, (2001) state that education is a powerful tool for economic empowerment for people with disability. They add that education is power; people who lack information, lack power and lack choices about how to improve their lives or control what happens to them. Through educational programmes (either formal or informal), PWDs can gain knowledge and skills needed to perform functions, tasks or carry out

some socio-economic activities for personal and community development. To determine the effectiveness of these training programmes, the disability act needs to increase evaluation of impact of services provided by staff who benefit from trainings; especially how the negative attitudes are changed and the economic status of PWDs is improved.

Like non-disabled people, people with disability need skills in order to engage in economic activities (Reinders, 2000). The accessibility to vocational training is therefore seen as an avenue of empowering persons with disability. Formal, vocational training centres can either be run by government or managed by NGOs or private providers who can provide quality, certified technical training. Integrating people with disability into these centres can be an effective skills development strategy, once appropriate preparations are made (Collin et al, 2003).

There is dire need for vocational training within community-based programmes for disabled people. Groce (1998) notes that many community-based programmes are now recognizing the importance of skills training and income generation for their disabled clients and establishing technical training courses. This approach can be particularly successful if there are few other training providers, or if the training provided at existing centres is inappropriate or low quality. One way of conducting vocational training is through “apprenticeship” style training programmes (Helander, 1993). This is the informal training by experienced crafts and trades people who have a very longstanding and widespread means of developing skills. Particularly in the informal economy, it is very common for people to learn a job, trade or craft, by working with an experienced person and learning from them. Oliver, (1996) states that this kind of practical, hands-on training is particularly useful for people with disability, who face many barriers in accessing formal, centre based training. However, it is important to monitor the quality of this training to ensure that apprentices are in fact learning useful skills and are not simply ‘cheap labour’ for employers (GOK, 2003).

Helander (1993) adds that another way of vocational training is using local people with skills to give ad hoc short-term training to individuals or groups in the field. For many

income generation options, it is not necessary for people to receive formal, accredited training. They need skills, but they do not necessarily need to attend a formal training course to get them. All the communities can do is to include skilled trades and crafts people who may be very willing to provide technical training for people with disability. According to Groce (1998) many communities do not offer good opportunities for training or gaining employment. Rural communities are often based around family run informal businesses and agriculture that provide few opportunities for training or employment. Even in urban areas it can be very difficult for disabled people to access apprenticeships or jobs with mainstream employers. In that case, community programmes are often well placed to support the establishment of 'social' enterprises that can provide training and job opportunities for the persons with disability. An enterprise that supplies a necessary product or service to the community can provide very practical and relevant training for disabled people, and pay them while they also develop their skills (O'Brien, 2001).

Persons with disability can also be excellent development workers and can bring firsthand experience of disability as staff or as community volunteers (Oliver, 1990). He adds that working in development also provides an opportunity for people in more remote and rural areas to access employment where other job opportunities are often limited. Increasingly, attention has been drawn to the need for disabled people and their families to be involved in the planning and delivery of CBR and other development programmes. However, Oliver (1990) notes that there is still room for many more people with disability to be trained to work in these fields.

The Government of Kenya recognizes that many service providers lack sufficient skills to support the services they offer to persons with disability. Personnel at times rely on general perception rather than training (GOK, 2003). Equally, persons with disability lack sufficient skills to make them economically productive. The objectives are enhanced with training opportunities for service providers in disability related professional skills increased access to technical, vocational, entrepreneurial and professional training

opportunities for persons with disability . Groce (1998) suggests that this is achieved through facilitating the development of programmes to train, retrain and retain service provider personnel in disability related specialized areas and also facilitating adaptation of and provision of support mechanisms to existing technical, industrial and vocational training colleges to make them more inclusive and responsive to the needs of persons with disability.

Helander (1993) states that developing guidelines for vocational training and rehabilitation of persons with disability will be key in facilitating the integration of national norms and standards for the training, testing and certification of persons with disability at all levels of the national trade certification programme. This will enable the provision of vocational training for persons with disability in obtaining specialised and market-oriented skills.

## **2.7 Constitution of Kenya (2010)**

On 4th August, 2010 the people of Kenya voted to adopt a Constitution that contains a substantially improved Bill of Rights and represents a change in the protection of the right to equality and non-discrimination in Kenya. Charlton (1998) states that a commitment to the principles of equality and non-discrimination should be expressed throughout a Constitution with equality being listed as one of the essential values upon which governance should be based on. There is recognition of Kenya's ethnic, cultural and religious diversity with a determination to live in peace and unity in the Kenya's constitution. Bickenbach (1993) states that the expressions of principle should be given legal force which includes equity, social justice, equality, non-discrimination and protection of the marginalized.

The Kenyan constitution which defines equality as including full and equal enjoyment of all rights and freedoms guarantees equality before the law and equal protection and benefits of the law to all persons in the Republic of Kenya. The article significantly expands the list of protected grounds prohibiting discrimination on an extensive list of specified grounds namely race, sex, pregnancy, marital status, health status, ethnic or social origin, colour, age, religion, conscience, belief, culture, dress, language, birth or

disability. Oliver (1996) specifically focuses on the rights of persons with disability including the right to be treated with dignity and respect. He notes that discrimination towards persons with disability does not always mean stigma but also transcends to the limitation of basic human rights. The Kenyan constitution creates specific rights of access to educational institutions and to public places, transport and information to persons with disability . Collin et al (2003) confirms that the duty of the State should strive to ensure progressive implementation of the principle that persons with disability and ensure incorporation and implementation of the disability policy.

## **2.8. The Kenya Persons with Disability Act, 2003**

In the Kenyan government, the disability act was passed by Parliament in 2003 and came into force in 2004. It is the national law relating to persons with disability in Kenya. It recognizes that persons with disability face discrimination in various forms and that the government shall take steps to the maximum of its resources to achieve the realization of the rights of persons with disability set out in the disability act. The ‘Persons with Disability Act’ is a set of laws passed by the Kenya parliament to cater for persons with disability and it came into full force on 16th June, 2004 and Parliament, when passing the act, allowed the Minister responsible for its implementation to bring the Act into force in stages, and as of March, 2010 all the sections had been gazetted.

Bickenbach (1993) while talking of the attributes of a disability policy, notes that the components of a policy should have provisions that include the equalization of opportunities and the right to health, education, employment, and accessibility to buildings, habilitation and rehabilitation, information and services.

The Disability Act provides that no employer shall discriminate against a person with disability in relation to the provision of facilities related to or connected with employment. It continues to state that the state and other stakeholders should promote opportunities and career advancement for persons with disability in the labour market, as well as assistance in finding, obtaining, maintaining and returning to employment. Collin et al (2003) states that guidelines should be laid down so that the “persons with disability

are entitled to have a barrier-free environment to enable them to have access to buildings, roads and all other social amenities and assistive devices to promote their mobility.”

Under section 22 (1) in the Disability Act, on public buildings, proprietors shall adapt them to suit persons with disability in such manner as may be specified by the council. In recognition of the extra cost that employers may incur in modifying their buildings to be accessible or for providing reasonable accommodation for employees with disability, the Act provides for tax rebates of up to fifty percent of the direct costs of the improvements, modification or special services.

Section 23 of the Disability Act imposes an obligation upon public service vehicles providers to adopt them to suit persons with disability in such manner as may be specified by the council. Oliver (1996) argues that adjustment and reasonable accommodation should be ensured in all aspects of movement to anyone with mobility limitations. Section 19 stipulates that the NCPWDs shall work in consultation with the relevant agencies of government to make provisions in all districts for an integrated system of special and non-formal education for persons with all forms of disability and also to encourage and secure the establishment of vocational rehabilitation centres. Bickenbach (1993) also noted that in the employment act, that persons with disability should be eligible for engagement as apprentices or learners where their disability is not such as to impede their performance in particular occupations for periods for which they are hired.

## **2.9 Disability policy Implementation**

In most countries, while support for the formulation and adoption of policy has been excellent, policy implementation remains a challenge. Of particular note is the fact that there are capacity constraints that limit the effective implementation of the policy. Policy implementation issues are not addressed consistently for various reasons at different levels of governments. Collin et al (2003) gives some reasons which include limited conceptual understanding and poor championing, inadequate or inappropriate institutional arrangements and a general lack of capacity. He adds that two other factors that have contributed to the poor implementation of legislation and policies are the

definition and nature of disabled people's participation have not been adequately reviewed and articulated and that the policy requirements for disability mainstreaming are not adequately linked to performance management thereby undermining commitment too implementation. In enabling implementation Oliver (1996) states that central government agency need to be active in implementing the objectives of the disability policy.

## **2.10 Theoretical Framework**

A theory is defined as a logical-deductive system consisting of a set of interrelated concepts from which testable propositions can be deductively derived so as to present a systematic view of phenomenon by specifying relations among variables with a purpose of explaining and predicting phenomenon (Nachmias, 1996; Kerlinger et al, 1964). The following theories were adopted for the study because they guide and appropriately explain this study phenomenon.

### **2.10.1 Functionalism Theory**

According to Talcott Parsons, this is a framed work for building theory that sees society as a complex system whose parts work together to promote solidarity and stability. This approach looks at society through a macro-level orientation, which is a broad focus on the social structures that shape society as a whole. This approach looks at both social structures and social functions. Functionalism addresses society as a whole in terms of the function of its constituent elements. In the functional approach to disability, the difficulties experienced by a person are seen as arising from a mismatch between the individual's biological condition and functional capacities on the one hand and environmental and situational factors on the other. In comparison to the bio-centric model, which tries to prevent or cure the impairment, the functional model tends to treat the perceived incapacity of the disabled individual through services and supports, which are aimed at making the individual as functional as possible. This involves compensation rather than cure, in order for people to live lives that are as 'normal' as possible.



Such an understanding has been instrumental in establishing rehabilitation services for persons with disability throughout the world. Services such as physiotherapy and occupational therapy including training in daily living skills, pre-vocational skills, functional assessments, counseling and job training are some important elements of prevalent rehabilitation programmes. In the functional model, entitlements to rights are differentiated according to judgments of individual incapacity and the extent to which a person is perceived to be independent enough to exercise her/his rights. The positive contribution of this model can be seen in the development of assistive technologies and specialized services. Its failure, however, lies in linking the entitlement to rights with the ability of the disabled person to negotiate diverse environments, with the use of compensatory skills and assistive technologies.

Thus in the functional theory, the onus is on the individual to fit within the system, not on the system to include the individual. The similar treatment of dissimilar people in the functional model points to the failure of the principle of justice, which implies that people with different needs be treated differently. Moreover in the functional model the professionals remain in the centre of defining and addressing needs by virtue of their position. In many instances, the key problem with professionals' decisions taken in the 'best interests' of the disabled person is that they may actually be in contradiction with that person's own goals and life choices. This control is what may be seen in the implementation of the disability policy, whereby the process of implementation fits.

### **2.10.2 Institutional theory**

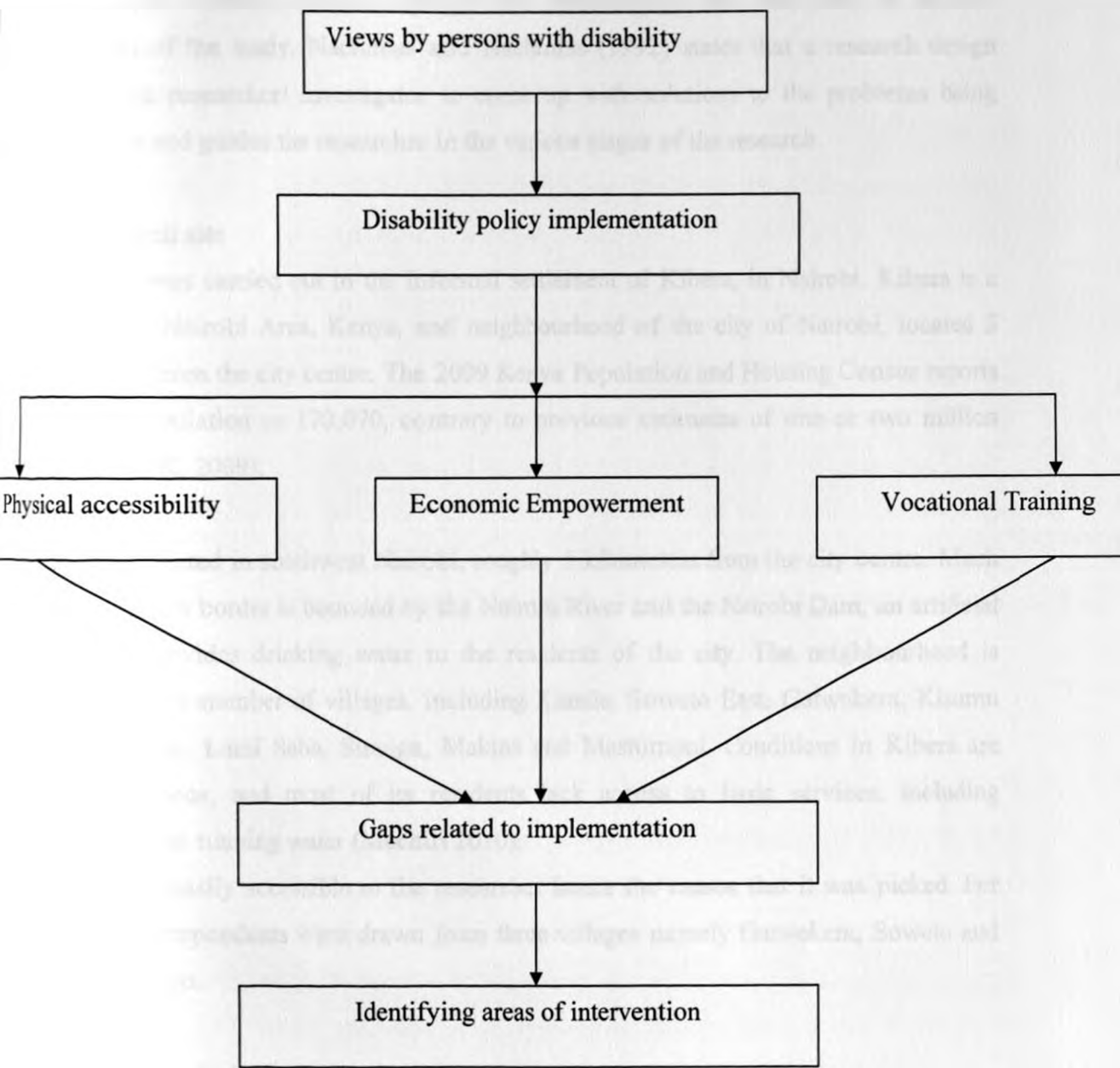
Institutional theory attends to the deeper and more resilient aspects of social structure. It considers the processes by which structures, including schema rules, norms, and routines, become established as authoritative guidelines for social behavior. It inquires into how these elements are created, diffused, adopted, and adapted over space and time; and how they fall into decline and disuse. Although the ostensible subject is stability and order in social life, students of institutions must perforce attend not just to consensus and conformity but to conflict and change in social structures (Scott, 2004).

The disability policy that was enacted in Kenya as an act is considered as authoritative guidelines that should be adapted, followed and implemented to act as a guide on dealing with disability issues, in order to obtain a stable and orderly system in the society.

A wide variety of institutional systems have existed over space and time providing diverse guidelines for social behavior many of which sanction quite arbitrary behavior, but the modern world is dominated by systems embracing rationality and these, in turn, support the proliferation of organizations. Norms of rationality play a causal role in the creation of formal organizations (Meyer and Rowan, 1977). Many of the models giving rise to organizations are based on “rationalized myths”—rule-like systems that “depend for their efficacy—for their reality, on the fact that they are widely shared, or have been promulgated by individuals or groups that have been granted the right to determine such matters” (Scott 1983). This model provides templates for the design of organizational structures, the positions, policies, programs, and procedures of modern organizations (Meyer and Rowan, 1977). This model exerts their power, not via their effect on the task activities of organizational participants—work activities are often decoupled from rule systems or from the accounts depicting them—but on stakeholders and audiences external to the organization. Their adoption by the organization garners social legitimacy. This model, therefore explains the need to have a disability policy in place and implemented in order to provide guidelines and a rule-like system in catering for the needs of persons with disability , and also in creating an orderly society.

2.11 Conceptual Frame Work

Figure 2.1: Conceptual Framework



## **CHAPTER THREE**

### **METHODOLOGY**

#### **3.0 Introduction**

This chapter contains research design and methodology that was used to achieve objectives of the study. Nachmias and Nachmias (1992) states that a research design enables the researcher/ investigator to come up with solutions to the problems being researched and guides the researcher in the various stages of the research.

#### **3.1 Research site**

The study was carried out in the informal settlement of Kibera, in Nairobi. Kibera is a division of Nairobi Area, Kenya, and neighbourhood of the city of Nairobi, located 5 kilometers from the city centre. The 2009 Kenya Population and Housing Census reports Kibera's population as 170,070, contrary to previous estimates of one or two million people (GOK, 2009).

Kibera is located in southwest Nairobi, roughly 5 kilometers from the city centre. Much of its southern border is bounded by the Nairobi River and the Nairobi Dam, an artificial lake that provides drinking water to the residents of the city. The neighbourhood is divided into a number of villages, including Kianda, Soweto East, Gatwekera, Kisumu Ndogo, Lindi, Laini Saba, Siranga, Makina and Mashimoni. Conditions in Kibera are extremely poor, and most of its residents lack access to basic services, including electricity and running water (Muchiri 2010).

Kibera was easily accessible to the researcher hence the reason that it was picked. For this study, respondents were drawn from three villages namely Gatwekera, Soweto and Kisumu ndogo.

#### **3.2 Research design**

The design of the study is the overall structure and strategy for the research study (Coolican, 2004). He further notes that social research which focuses on research in

human context is classified into the following: observational, descriptive, exploratory and experimental research designs.

The research design used in this study was survey research design. This research design is suitable in describing and portraying characteristics of an event, situation, and a group of people, community or a population which enables the researcher to acquire complete and possibly accurate information. With regard to this, the researcher found that the study type suits well with the study as it aimed at assessing the implementation of the disability policy in addressing disability. The study carried household survey and the primary data was obtained using questionnaires, interview schedules, and focus group discussion guides.

### **3.3 Sampling procedure**

Sampling is a process of selecting a sub-set of cases and draw conclusions from the active set. It is a process of selecting a number of individuals or objects from a population such that the selected group contains elements representative of the characteristics found in the entire group (Orodho, 2001). There are basically two types of designs namely probability and non probability designs. In probability sampling, all units or elements in the sampling frame have equal chances of being included in the sample while in non-probability sampling, elements in the sampling frame have unequal chances of being included (Dane,1990).

The non-probability sampling was appropriate in this study. Williams et al (1995) noted that when the likelihood of the population selection is not known non-probability method is the most appropriate. The population of the persons with disability was not known and therefore the study used purposive sampling which allowed the researcher to use his/her expert judgment to select units that were 'representative' or typical of the population study (Singleton, 1988). The whole population available was used in the study.

### **3.3.1 Selection of respondents**

The researcher with the help of a community worker identified an individual who closely worked with Tujiinue Disability group in Kibera. This is a group in Kibera whose members are all persons with disability. This individual was used as the entry point in accessing persons with disability. Linear snowballing technique was used to identify the respondents. Door to door interview of persons with disability was conducted with the help of the contact person. All the available persons with disability were interviewed.

Purposive sampling was used to select key informants. This method was seen as ideal as it only selects those who are deemed in having rich information which gives in-depth analysis of the central issue being studies. The key informants were four with two being officials in the ministry of gender, culture and social services. The other two were officials of the National council of persons with disability. The key informants were two women and two men.

### **3.3.2 Study Population**

The population of the study consisted men and women of over 18 years with physical disability characterized by mobility limitations. The persons with disability in Kibera were selected as the primary data since they had needs that ought to be addressed by the implementation of the disability policy. The study had 36 respondents who were persons with disability as its study population.

### **3.4 Unit of Observation**

Unit of observation is the subject, item or entity from which a researcher measures the characteristics or obtains data required in the researcher's study. In this study the unit of observation was persons with physical disability and key informants.

### **3.5 Unit of Analysis**

Unit of analysis is the entity around which the research seeks to make generalizations (singleton, 1988). Units of analysis can be people, social roles, positions and

relationships. It is actually what the study seeks to understand. Thus, the unit of analysis in this study was the views of persons with disability.

### **3.6 Types and sources of data**

This study used both primary and secondary data. Primary data concentrated on respondents' opinions and experiences concerning the study objectives. The primary sources of data involve collecting data through direct communication with respondents by various methods of data collection in a contrived or natural setting (Kothari, 2004). This study used questionnaires and interview guides to obtain primary data.

### **3.7 Techniques and tools of data collection**

Techniques involve the way in which the researcher will use the tools to solicit information from the respondents. Kothari (2004) defines techniques as behavior and instruments we use in performing research operations. These techniques and methods are normally determined by nature of research. In addition, factors like time, accessibility, cost limitations determine the choice of methods used. The techniques of data collection used included focus group discussion, interviews and case study. The tools used for data collection were interview guide, questionnaires and a focus group discussion guide.

#### **3.7.1 Focus Group Discussions**

Focus groups are a form of group interview that capitalizes on communication between research participants in order to generate data. According to Barker (2010), a focus group is an interview conducted by a trained moderator in a non-structured and natural manner with a small group of respondents. The moderator leads the discussion. The main purpose is to gain insights by listening to a group of people talking about a specific issue of interest. This technique was used as a quick and convenient way to collect data from several people simultaneously in group interaction. This means that instead of the researcher asking each person to respond to a question in turn, people were encouraged to talk to one another asking questions, exchanging anecdotes and commenting on each others' experiences and points of view. This method is particularly useful for exploring

people's knowledge and lived experiences. It is used to examine not only what people think but how they think and why they think that way (Morgan 1997).

In this study, the FGD was carried out in a social hall in Soweto village of Kibera. The FGD facilitator used a discussion guide which described the issues covered. The groups were set up in such a way that sessions were relaxed i.e. a comfortable setting: sitting in a well arranged order so that participants had eye contact with each other and heard each other speak. The facilitator explained that the aim of focus group was to encourage people to talk to each other instead of addressing themselves to the researcher.

This study had one focus group discussion which comprised of 8 persons with disability. The group comprised of 5 men and 3 women. Once the group of participants was assembled for the discussion, the facilitator explained the discussion topic and the FGD lasted for around one hour. Written notes were taken and later transcribed and analyzed.

### **3.7.2 Case Studies**

A case study is a detailed investigation of a single individual or group. Case studies can be qualitative or quantitative in nature. The defining feature of a case study is its holistic approach—it aims to capture all of the details of a particular individual or group, which are relevant to the purpose of the study, within a real life context (Yin,2003). In this study, the case studies were wholly qualitative. This study had 3 persons with disability as case studies and they were coded as Mars, Pluto and Jupiter. The researcher used these three persons to capture more details concerning the purpose of the study.

### **3.7.3 Key informant Interviews**

Interviews refer to getting information from an individual who is considered to be particularly knowledgeable about the topic of interest. According to Barker (2010), interview is a technique that is primarily used to gain an understanding of the underlying reasons and motivations for people's attitudes, preferences or behavior. The semi - structured interviews can be undertaken on a personal one-to-one basis or in a group, which allows the researcher to seek insights, ask questions and assess phenomena in different perspectives.



They can be conducted at work, at home, in the street or in a shopping centre, or some other agreed location. ( Barker, 2010) states that interviews have the advantage of enabling serious approach by respondent resulting in accurate information, good response rate, completed and immediate, possible in-depth questions and interviewer in control can give help if there is a problem.

Key Informant Interviews are advantageous because they are used when written records are limited or do not exist, or when there are Key informants who are accessible and have in-depth knowledge about a topic. In this study, 4 key informants were also selected. These were two officials from the Ministry of gender, children and social services and two from the national council of persons with disability. Two were men while two were women. The researcher's intention was to establish the perception of persons with disability on the implementation of the disability policy.

### **3.8 Research tools (Instruments)**

The research tool is an instrument that is used by a researcher to guide the interview process. This study used a questionnaire, a focus group discussion guide and an in-depth interview guide for the key informants. These tools contained questions arranged systematically in numbers and which were identical for all the respective respondents. To elicit differences in response, the researcher indicated instructions/explanations on various sections. Structured questions were appropriate for acquiring information on opinions and for questions that needed limited information like demographic variables that included age, sex, education level, marital status and cause of disability.

### **3.9 Quality Control**

Since some study participants were more comfortable and conversant with Kiswahili language, the questionnaire was translated from English to Kiswahili. Back translation was then done from Kiswahili to English again so as to ensure consistence.

A pre-test was done to determine the efficiency of the questionnaire. Some questions were found out as not measuring and eliciting the appropriate information hence they were appropriately amended.

### **3.10 Ethical Consideration**

One of the key responsibilities of a researcher is to ensure that, the welfare and dignity of the people involved in the research are well taken care of and that no chance is given to allow the manipulation of the study participants at their expense or on the advantage of the researcher (Nachmias,1996). Another important responsibility is for the researcher to ensure that the study is of beneficial to the target community and that no more than minimal risk is involved in the research which may invasively affect the study participants.

To ensure the above, the researcher used an informed consent sheet which contained phrases indicating that the study participation was voluntary, the objectives of the study, the study procedures, the selection criteria, the anticipated benefits of their involvement, any risk, assurance of the confidentiality aspect, and privacy during interview. After the participants had read and comprehended the informed consent, the participants were requested to indicate their voluntary participation by signing the informed consent sheet.

### **3.11 Data analysis**

Since most of the data collected was qualitative, the data was analyzed using content analysis approach or technique. Nachmias and Nachmias (1996) describe content analysis as any technique used to make inferences by systematically and objectively identifying specific characteristics and messages. According to Nachmias and Nachmias (1996), content analysis is used to analyze the data through describing phenomena, classifying it and seeing how the concepts interconnect as indicated by the responses or data. This approach of analysis is preferred as it gives results that are predictable, directed and comprehensive.

Content analysis enables the researcher to sift through large volumes of responses and analyze commonality of the themes presented. This was then integrated with the findings from quantitative data.

From the interviews, themes and categories were identified in relation to the objectives of the research. The collected data was thoroughly examined and processed prior to drawing inferences through a series of operations involving editing to eliminate inconsistencies, classification on the basis of themes and similarities to relate variables. After coding the data, the refined and organized data was analyzed. The findings were then interpreted and recommendations made.

## **CHAPTER FOUR**

### **DATA ANALYSIS, PRESENTATION AND INTERPRETATION**

#### **4.0 Introduction**

This chapter presents the data findings and analysis of the research. In this study, 36 respondents with disability were interviewed. The results presented are pegged on the following research questions:

- 1) Has the physical environment been accessible to persons with disability?
- 2) Are economic empowerment programmes available to persons with disability?
- 3) Are vocational training services provided to persons with disability in the community?

#### **4.1 Socio-demographic characteristics of the respondents**

This study sought to measure the demographic attributes of the respondents which were gender, age, cause of disability, highest level of education and marital status.

##### **4.1.1 Gender of the respondents**

Overall, this study covered a total of 36 respondents. Results of the study indicated that majority (56%) of the respondents were males whereas females comprised of 44 percent of the respondents. This gender variation was not achieved by design but by the availability of the legible respondents in Kibera.

Davis (1997) explains this finding when he states that while women may be poignant about their condition, the men would be more willing to share their experiences. That could have been the reason behind more men being captured in this study.

**4.1.2 Age of the respondents**

The study respondents were over 18 years of age. This section of the study sought to describe the age distribution of the respondents.

**Table 1: Age of the respondents**

Age range	Frequency	Percentage
21-30	10	28
31-40	13	36
41-50	5	14
51-60	6	17
Above 61	2	5
Total	36	100

The results revealed that a higher proportion of the respondents (36%) were respondents aged between 31-40 years of age. This was followed by 28 percent of the respondents who were aged between 21-30 years of age. Of the respondents, 14 percent were between 41-50 years of age, while 17 percent of the respondents were between 51-60 years of age and only a few (5%) of the respondents were 60 years of age and above.

Majority of the respondents (63%) were aged between 21-40years of age. This could be attributed to the fact that the age bracket of 21-40 is an active age group willing to get involved in various activities in the community and this significantly activity reduces as people get into their 40's due to deteriorating physical energy and social participation (WHO, 2007).

**4.1.3 Cause of disability**

Nagler (1993) states that there are myriads of reasons that causes physical disability. Some people may be born with physical disability, (congenital) while some may become physically disabled later on in their life. Other causes would be health issues, accidents or even wars.

He further states that causes of disability could be classified into 4 broad categories, namely congenital, accident, unknown causes and disease.

**Table 2: Cause of disability**

Cause of disability	Frequency	Percentage
Congenital	10	28
Accident	7	22
Disease	13	36
Others	3	8
Unknown causes	3	8
Total	36	100

In this study, the highest proportion of the cause of disability was disease (36%) with polio being the major disease cited by the respondents. This was followed closely by congenital which scored 28 percent. Accident was cited by 22 percent of the respondents, while only 8 percent of the respondents cited other causes for their disability which included falls and violence. A further 8 percent however did not know the cause of their disability. They stated that they just woke up one morning and realized that they could not walk.

This study having revealed that disease was the leading cause of disability was in agreement with the report released by KNSPWD (GOK,2003) which raised concern as to why disease was a leading cause of disability yet it could be prevented . The medical model of understanding disability further agrees with this finding as it looks at disability as something that can be cured. This finding could be attributed to lack of vaccination as most respondents cited polio as the disease that caused their disability.

**4.1.4 Level of education**

Education and training is a right of every member of the society as stipulated under the education Act of Kenya (Gondi).The study therefore sought to establish the respondent’s education level. Education was an important social demographic variable because the

level of education has been found to be a significant determinant of one’s economical stability. Results are as indicated below.

**Table 3: Level of education**

Level of education	Frequency	Percentage
None	20	55
Primary	8	23
Secondary	5	14
Tertiary/college	3	8
Total	36	100

The study revealed that a majority (55%) of the respondents had not received any education at all. Of the respondents, 23 percent had attained primary school education, and 14 percent had completed the secondary school education, while only a few (8%) of the respondents had attained education at the college level. Hales .(1996) notes that most children born with disability were denied a chance to attend any form of learning. The above findings could be attributed to parents being hesitant in taking their children to school, because of stigma (Goffman, 1963). He further states that physical disability can also hinder access to the learning institutions, in terms of movement. This is likely to have attributed to the high number of illiteracy among the persons with physical disability.

**4.1.5 Occupation of the respondents**

Generally, education plays a role in empowering individuals and especially those who have physical disability (Oliver, 2007). The study therefore sought to find out the occupation of the respondents.

**Table 4: Occupation of the respondents**

Occupation	Frequency	Percentage
Shoemakers	14	36
Tailors	4	11
Hawkers	9	25
Green grocers	6	19
Beggars	3	9
<b>Total</b>	<b>36</b>	<b>100</b>

The study findings revealed that persons with disability were characterized by low education levels as shown by high degree of illiteracy implying that they could only be employed in unskilled labor which has a bearing on their economical status and the kind of social network in their everyday lives. The study showed that since most of the respondents had not attended school, they relied mostly on small scale self-employment. A high proportion (36%) of the respondents was shoe makers. This could be attributed to the fact that it was an occupation that required minimal movement, hence very ideal to persons with disability. This was closely followed by hawkers (25%) who indicated that they were selling sweets in the streets of both Nairobi city and Kibera area. Of the respondents interviewed, 19 percent of them sold groceries along the paths of Kibera. These respondents were mainly females who stated that selling groceries did not require a lot of movement, hence was also seen as an ideal venture for one with mobility limitations.

This finding could have been attributed by the fact that the undertakings of persons with physical disability are better achieved when there is favourable environment, with limited motion (Callahan, 1989). Of the respondents, 8 percent of those interviewed were beggars, who relied on alms and handouts for their livelihood. This finding is further explained by (Helander, 1993) who states that vulnerable groups including persons with disability ought to be empowered and independent otherwise they would resort to being dependent to the society. Lack of capital to start their own business could also be attributed to a life of relying on handouts (Helander, 1993).



4.1.6 Marital status of the respondents

Family is a basic unit and the persons with disability social capital and networking originates from their families. Therefore this section of the study sought to establish the marital status of the respondents.

Table 5. Marital status of the respondents

Marital status	Frequency	Percentage
Single	17	47
Married	10	28
Divorced/separated	6	17
Widowed	3	8
Total	36	100

From the findings, it was revealed that a high proportion of respondents (47%) were single. This was followed by 28 percent of the respondents who were married and 17 percent were either separated or divorced. This revelation by the study can be explained by Kupperts (2003) who argues that disability is seen as a barrier in getting partners and states that persons with disability risk being separated from their partners or shunned once a disability occurs.

4.2 Main Findings

The main findings in this paper were guided by the objectives of this study which were:

- 1) To assess the physical accessibility of persons with disability
- 2) To find out the economic empowerment programs availed to persons with disability
- 3) To find out the provisions for vocational training available to persons with disability

**4.2.1 Establishing the accessibility of the physical environment of persons with disability**

Physical access is basically the ability to move freely and easily either vertically or horizontally around physical features within premises or externally. While discussing about physical accessibility regarding persons with disability, Nagler (1993) states that physical accessibility is not only about wheelchair access, but about improving accessibility for people with a wide range of impairment.

**4.2.2 Accessibility to public buildings by persons with disability**

Persons with disability are entitled to a barrier- free and disability friendly environment to enable them to have access to buildings, roads around the environment and other social amenities (GOK, 2003). Accessibility to public buildings is the ease of movement where reasonable accommodation is extended to persons with disability (Oliver, 1996).

**Table 6: Accessibility to public buildings**

Accessibility	frequency	Percentage
Difficult accessibility	30	84
Easy accessibility	6	16
Total	36	100

The ultimate aim of inclusive physical access is that the design and layout of premises should enable everybody to be able to enter a building, use the facilities and leave safely, independently and with ease (Rothman et al, 1984).

From the findings, the study revealed that 84 percent of the respondents indicated that almost all of the public buildings that they visited in Kibera and its environs were not disability friendly. Only 16 percent of the respondents felt that accessibility was not a challenge, and this could be attributed to the fact that these respondents used crutches for their movement which did not present as much challenge as their counterparts who were

on wheelchairs. This finding is also in agreement with KNSPWD report (GOK, 2003) which indicated that accessibility is the biggest challenge of persons with disability. Oliver et al, (2002) further collaborates with this finding when he states that being confined to a wheelchair should not mean being confined to a certain setting though this was the biggest challenge that persons with disability faced. Oliver et al (2002) discusses that due consideration should be put in place to facilitate ease of movement to persons with disability.

#### Case Mars

*I had gone to Nyayo house for an official business. The service I needed was not available on the ground floor and was referred to the 7<sup>th</sup> floor, where I would get the appropriate service that I required. Unfortunately, there was no lift working that day, and since I was on a wheel chair, I could not use the stairs. I looked around for a ramp that I could use to the 7<sup>th</sup> floor but on enquiring, I was informed there was none. That meant I could not get the service that I needed since there was no way that I could not access to the 7<sup>th</sup> floor. I went back home so devastated, and without having accomplished what I intended to do.*

From this revelation, it was evident that persons with disability felt that physical adjustments had not yet been put in place as stipulated by the disability act (GOK,2003) which states that any premises to which members of the public are ordinarily admitted on payment or otherwise should have reasonable access by persons with disability .

#### Case Jupiter

*I had gone to Kenyatta hospital to visit a friend who was admitted, and as I went up, I used the lift, because I was on a wheel chair. Around 30minutes later, as I was about to descend, there was a fire alarm alert, and we were all advised to use the stairs instead of the lifts, for security reasons. I could not use the stairs, since I was on a wheel chair, and there was not a ramp on sight. I felt helpless and trapped, and had to wait for hours till it was safe to use the lift.*

From the above finding, the study revealed that even buildings like the public hospitals had also not heeded the disability act (GOK,2003) requirement which called for adjustment order for all public buildings to ensure and secure reasonable access by persons with disability to their premises. From the findings, the study revealed that almost all the public washrooms were not friendly to persons with disability with 78 percent of the respondents stating that they faced challenges while using the public washrooms. From the focus group discussion, the study revealed that the banking halls had carried out adjustments that accommodated the needs of persons with disability. Of the respondents, 65 percent of the respondents stated that some banks like the Equity bank of Kenya had heeded the adjustment order by adjusting the doors and having ramps for ease of wheelchair movement. The study also found out that in some of the banking halls, special preference was given to those using assistive devices like the clutches and wheel chair. This finding could be attributed to the fact that because the banks were a commercial institution; they would not want to lose business hence the implementation of the adjustments. This finding can be explained by Miranda (2005) who states that the reputation of any bank lies with its clients and how well they provide solutions to customers. He further states that it is essential that banks have a conducive environment where they will accommodate all the needs of their clients. It is for this reason that the banking halls were accessible to persons with disability.

#### **4.2.3 Public transport**

An operator of a public service vehicle will adapt it to suit persons with disability in such a manner as may be specified by the disability act (GOK, 2003). Fries (1997) notes that factors that might inhibit accessibility include the design of vehicles and infrastructure. He states that it is more of the design that makes the people disabled as opposed to the people's condition. He emphasizes on reasonable accommodation in the public transport in order to accommodate the needs of persons with disability.

**Table 7: Accessibility to public transport**

Accessibility	Frequency	Percentage
Easy access	4	9
Difficult access	32	91
<b>Total</b>	<b>36</b>	<b>100</b>

The reseach findings revealed that a high majority (91%) of the respondents indicated the public transport was not accessible with only 9 percent saying it was quite accessible. Most of the respondents (88%) outlined how commuting was almost impossible with the current public service vehicles. The study revealed that the seats were not adjustable and hence they presented a problem to one using a wheelchair. The study also showed that 90 percent of the respondents stated that those who work in the public transport industry were seen as insensitive and unfriendly to persons with disability . Since a person with disability, may take some time to board, they have been seen as if they are wasting time by the crew. This finding could be attributed to the fact that at times, a person with disability may need to be lifted in order to board the vehicle, and this may be found disagreeable to the crew. Rukia (2010) notes that due to lack of awareness and sensitization of the public, and especially those in the public transport, most persons with disability are discriminated.

Findings from key informants revealed that very little had been done to accommodate persons with disability in the public transport. This was however seen to be attributed to the absence of a specific authority to enforce the implementation. From the focus group discussion, the study revealed that the respondents had at one time been rendered completely immobile due to the public service vehicles failing to accommodate their needs.

**4.2.4 Site environment**

Most sewage in Kibera runs downhill in open trenches, resulting in stagnation and pooling problems that breed insects and odor (Kamau, 2010).

Since this research was conducted in Kibera Slum, the study revealed that Kibera environment was very unfriendly. This is due to the fact that there are trenches, open sewer drainages, which need a lot of maneuvering and jumping across. For one using a wheelchair or crutches would find these maneuvers almost impossible (Albrecht, et al, 2001). The study findings revealed that most respondents (91%) of the respondents stated that during extreme weather conditions like heavy rain makes the roads become impassable for those using assistive devices for mobility. Most of the roads do not have tarmac, hence gets very muddy making it difficult to move from one point to another. This is highly agreeable with Albrecht, et al (2001) who states that those persons with disability living in the informal settlements faced a lot of challenges while getting around their surroundings.

From the focus group discussion site environment was stated as a very big challenge. The participants were all in agreement that the environment of Kibera posed such a major challenge as there were so many trenches and open sewers that were difficult to maneuver while on a wheelchair or while using crutches.

#### **4.3 Assessing the availability of Economic empowerment programs to persons with disability**

Empowerment refers to increasing the spiritual, political, social, educational, gender, or economic strength of individuals and communities. Stewart, (1994) further notes that economic empowerment approach focuses on mobilizing the self-help efforts of the poor, rather than providing them with social welfare. It is also the empowering of previously disadvantaged sections of the population, which includes the persons with disability.

##### **4.3.1 Employment opportunities to persons with disability**

Equal opportunity is a stipulation in employment that all people should be treated similarly, unhampered by artificial barriers or prejudices or preferences, except when particular distinctions can be explicitly justified (Anderson, 1999).

*Following the advertisement of "kazi kwa vijana", I hopefully went to the chief's camp where recruitment was being carried out, looking forward for employment. I had always wanted to be an independent person regardless of my physical disability. I knew I would manage to get employment since the "kazi kwa vijana" initiative employs even those without academic qualifications like me. I really wanted this job because I do not have any source of income. Immediately the chief saw me, he dismissed me saying this was work for the "able-bodied" and energetic people, and that I would not be considered for it. I felt shunned and discriminated by the society, and since I want to be independent, I feel the chief should have considered me and maybe given me a task that I would manage, because you see, apart from using crutches, I can do some manual work. I want to have my own income, be independent but now those who are in the administrative posts, who are required by law to serve without favour, also ended up discriminating persons with disability.*

This finding is explained by Renders, (2000) who states that persons with disability are viewed by the society as disabled, unable to carry out any activity. This finding was also in agreement with Carson (2009) who says that persons with disability faced discrimination, no wonder in his social model of understanding disability he says that persons with disability are constantly battling with the social stigma. When asked during the focus group discussion, of the availability of the provisions stipulated in the disability policy on employment, an overwhelming majority of the respondents simply chorused that they had hardly benefited from this provision.

From the findings, the study also revealed that a great majority felt that the government had not done enough to provide employment opportunities to economically empower persons with disability. A majority of the respondents (87%) stated that they felt the government had not opened employment opportunities to persons with disability as stipulated in the disability act, which states that there should be reservation of 5 percent of all casual, emergency and contractual positions in employment in the public and private sectors for persons with disability ( GOK,2003).Through the key informants, the

study revealed that though the disability act stipulates that 5 percent of the employment opportunities be reserved to persons with disability , this had not been implemented. This was perhaps attributed to the fact that there was no qualified person with disability who applied to particular jobs that were advertised. The study further revealed that in job advertisements, the following was inserted “persons with disability are encouraged to apply.” This could be explained by Burrell, (1999) who states that persons with disability just like any other human need to have the feeling of purpose in life. From the focus group discussion, the study findings also revealed that, persons with disability suffer various forms of barriers including; access to employment, obtaining appropriate work, retaining work, receiving appropriate wages, discriminating attitude and lack of appropriate skills. This finding is in line with Oliver (1996) who argues that persons with disability continue to remain invisible even to employers.

#### **4.3.2 Provision of loans from financing institutions to persons with disability**

A loan is a type of debt. Like all debt instruments, a loan entails the redistribution of financial assets over time. It is a debt which the borrower pledges some asset as collateral (Signoriello, 1991).He further states that loans come with terms and conditions that may not be favourable to any group that may appear as disadvantaged. From the findings, the study revealed that a high proportion (79%) of the respondents indicated that they had actually approached the financing institutions for loans, in order to start a business, with 85 percent of them being turned away. They added that the financing institutions had given all sort of reasons why they could not lend them money. A high proportion (60%) of the respondents who had approached the banks indicated that they were just told out rightly that they did not qualify for the loan since they did not have collateral, security or a guarantor, hence their disqualification for the loans.



*I felt I needed capital to advance my business where I bake cakes. I had heard about the Kenya women trust fund and therefore I approached the financing institution to obtain a loan, whereby I would repay it from the proceeds from my baking business. I was referred to the manager who in turn asked me how much money I had in my account. I did not have any savings as I was engaged only in subsistence baking this supplying the cakes to my neighbours, whereby the little proceeds I got, I used for my daily needs. The manager, turned my application down, and advised me to get into an organized group, and then apply for a loan. It was very discouraging and that was the last time I approached a financing institution.*

The study findings show that persons with disability are not able to access loans and other funds that they may deem necessary for expansion of their enterprises. Oliver (1996) supports this when he states that persons with disability continue to face various forms of indirect discrimination by the community. He further states that empowerment and mainstreaming of the vulnerable groups will only be realized once the financing institutions extend their services to these marginalized groups which include persons with disability.

#### **4.3.3 Government support on cottage and home based industries**

Cottage and home based industries are initiatives that if well supported would help in empowering individuals and communities (Stewart, 1994). The study revealed that 70 percent of the respondents had initiated small ventures that generated subsistence income for their daily needs.

The study revealed that 92 percent of the respondents stated that the government did not do much in addressing the home based industries for the persons with disability. Of the respondents, 10 percent stated that they were making liquid soap which they supplied in different homes in Kibera but indicated that they however could not expand their business, and supply the soap in large scale, because the soap did not have the Kenya bureau of statistics stamp. This could have been attributed to not having large scale

production hence being unable to get the attention of the government. From the findings, a high proportion of the respondents (89%) indicated that they experienced challenges as they tried doing business along the streets of the city of Nairobi with 68 percent of the respondents citing harassment by the city council as the biggest barrier in establishing small businesses.

#### Case Pluto

*I had a sewing machine that I used to knit sweaters along river road. I could not afford a shop so I did my knitting on the corridor. One day as I went around my business, askaris from the city council came and asked me to produce a license which indicated that I was allowed to conduct business at the place. Unfortunately, I did not have any which prompted them to confiscate my sewing machine. They also took my wheel chair and put it in their truck. They later told me that if I wanted my machine back, I should go to city hall and pay the fine. I did not have any money with me and they had also taken my means of accessibility, my wheel chair, therefore I could not do as they indicated. To date I have not seen my wheel chair back nor my sewing machine. My only source of livelihood had be taken from me. Now am just depending on well wishers for my support.*

From the above finding it is evident that the persons with disability have constantly faced discrimination even from the hands of those who should be guarding them (Oliver, 1996). On government support on home based industries, key informant from National Council of Persons with disability concurred that the government had done very little in supporting ventures initiated by persons with disability . From the focus group discussion the study further revealed that the government was not committed in supporting them in terms of economy empowerment. They indicated that they were not happy begging and being dependent on others. They needed to be supported in order to support themselves (Nyerere, 1982).

#### **4.4 The provisions made for vocational training to persons with disability**

It is important for persons with disability just like other people to enroll in vocational education and training, which is an education that prepares trainees for jobs or careers at

various levels. The most common like the craft vocations are usually based on manual or practical activities, traditionally non-academic, related to a specific trade, occupation, or vocation which would really augur well with the persons with disability (Ferguson, 2001). The study findings revealed that facilities for training or re-training of the market oriented skills to persons with disability were not adequately available in the community. Of the respondents 69% indicated that the facilities were not available while 27% of them indicated they had seen or gone through polytechnics that trained persons with disability. The study showed that 4 percent of the respondents were not sure of any availability of vocational training facilities.

This finding could be attributed to the fact that these respondents were of older years, hence would not be so keen in learning. A low proportion (35%) of the respondents who had attended the informal training centers stated that they had gained skills in which they were using for their survival. The study findings further showed that the centers were now long closed. This could be attributed to lack of funds to sustain the informal centers, as is noted by Rothman (1971) who states that vocational institutions ought to be sustained in order to offer alternative skills to the marginalized groups.

Further findings from the Focus Group Discussion revealed that majority of the tailors who were in the group had acquired their tailoring skills from an informal dressmaking course which had been sponsored by an international non-governmental organization and not as a result of the implementation of the disability policy. This could be attributed to the fact that the government was perceived to have had failed on its mandate to initiate and sustain these vocational training centers leaving persons with disability with no skills to support themselves (Rothman, 1971).

#### **4.4.1 Apprenticeship training to persons with disability**

Persons with disability could go through a system of training whereby they learn under practitioners a structured competency based set of skills. This would be quite easily manageable since most of their training is done while working for an employer who helps

the apprentices learn their trade or profession, in exchange for their continuing labor for an agreed period after they have achieved measurable competencies (Fawcett, 2000).

The study revealed that a very low proportion (5%) of the respondents indicated that they had acquired their marketing skills through apprenticeship. Of the respondents 2 percent stated that they had observed their mothers prepare vegetables, hence learnt from observation.

The study findings further revealed that a majority of the respondents (95%) had not acquired any skills through apprenticeship. This could be attributed to the stigma parents face while they are raising children with disability hence their hesitance in training them through apprenticeship (Goffman, 1963).

#### **4.4.2 Entrepreneurial training among persons with disability**

It is necessary if persons with disability engaged in this training as it has programs that provide guidance and instruction on business basics (such as accounting and marketing) so that businesses improve their chances of success. This is quite essential for the advancement and sustainability of any business (Greinert, 2002). From the findings, the study revealed that there was an informal center in Kibera that trained entrepreneurial skills to women. From the study, only a low proportion (11%) of the respondents stated that they had attended an entrepreneurial course that helped women in learning how to market the liquid soap they were making. This could be attributed by the fact that the government has not stepped up in providing entrepreneurial training to the disadvantaged and minority groups (GoK 2003). The study findings further revealed that 69 per cent of the respondents indicated there was need for imparting entrepreneurial skills to persons with disability in order to boost and sustain business ventures and more so to devise modalities of trading as a block hence enjoying the economies of scale (Stewart, 1994). From the focus group discussion, the study revealed that there was very little that was being done to facilitate this training. This could have been attributed to the fact that there was not yet a body that was set aside to come up with initiatives to train persons with disability (GOK, 2003).

#### **4.4.3 Formal training to persons with disability**

It is important for all persons to go through formal training that takes place in education and training institutions, leading to recognised diplomas and qualifications. This enables one have equal opportunity while looking for employment (Silberman, 1986).

The study revealed that a low proportion (12%) of the respondents stated that they had indeed attended formal training. This could be attributed to the fact that 70 percent of those who had acquired formal training had acquired it before an accident that resulted to a disability. A high proportion (88%) of the respondents indicated that they did not have any form of formal training. It is essential for those who do not attend formal training, to have some kind of informal training, since this form of training is unstructured, unplanned, and easily adapted to situations or individuals including persons with disability (Silberman, 1986). The study revealed that a high proportion (74%) of the respondents had not been involved in any training.

The study also revealed that a low proportion (26%) of the respondents had received informal training from the International non government organizations. From the key informants, the study findings showed that the government and the national council of persons with disability were still in the process of coming up with modalities that could set the facilities for formal training to persons with disability . From the focus group discussion, the study revealed that the respondents had not been engaged in either formal or informal training which would help in acquiring skills that would aid in supporting themselves as stipulated in the disability act. They cited the lack of facilities where they would attend the training sessions. This is best explained by Groce,( 1998) who states that for persons with disability to go through any training, be it formal or informal, structures need to be in place and that there has to be a functional system in order for the training to take place.

## **CHAPTER FIVE**

### **SUMMARY OF KEY FINDINGS, CONCLUSION AND RECOMMENDATIONS**

#### **5.0 Introduction**

This chapter provides a summary of key findings, discussion and draws conclusions and recommendations based on the findings. The principle purpose of this study was to find out the views of persons with disability on the implementation of the disability policy. The study was based on the following research objectives:

1. To establish the physical accessibility of persons with disability
2. To assess the availability of empowerment programmes to persons with disability
3. To find out the vocational training provided to persons with disability

#### **5.1 Summary of findings**

The following were major findings that emerged from the data analysis. Their themes were guided by the objectives of the study.

##### **5.1.1 Socio –Demographic characteristics of the persons with disability**

In the study, majority (56%) of the respondents were males whereas females comprised of 44 percent of the respondents. Respondents in the study were all in the age bracket of 18 years and above. A high proportion (36%) of the respondents was aged between 31-40 years. From the study, it was found out that the major cause of disability of the respondents was disease. Study findings revealed that persons with disability had low education levels. This was evident as most of the respondents (55%) indicated that they have never attended school. The study further indicated that all of the respondents interviewed were unemployed and engaged in business. Only a few (9%) of the respondents were beggars.

On marital status, the study revealed that 47 percent were single, those married were 28 percent while those divorced or separated were 17 percent. Only 8 percent of the respondents were widowed.

### **5.1.2 Establishing the accessibility of the physical environment to persons with disability**

The study findings showed that the physical accessibility of persons with disability continued being a challenge with a majority of the respondents (84%) stating that they experienced problems while trying to access buildings that had not complied with the adjustment order in the disability act (GOK,2003). The findings further revealed that the public transport sector was slow in adjusting the public service vehicles in order to fit the needs of persons with disability. The study findings further pointed out that the public service vehicle crew needed to be more sensitive to the welfare of persons with disability. The study also established that the public service vehicles too needed to be adjusted to reasonably accommodate also the needs of persons with disability.

### **5.1.3 Assessing the implementation of economic programmes available to persons with disability**

The study findings showed that persons with disability were yet to be economically empowered. The study also showed that despite facing limitations and challenges in some aspects of life, persons with disability do have considerable working capabilities and are competent to discharge a wide range of duties. Of the respondents, 85 percent indicated that they had been turned away from financing institutions while they approached them for loans. Most of the respondents indicated that the government was not doing much in supporting cottage and home based industries for persons with disability. On employment, the study indicated that the 5 per cent job opportunities reserved for persons with disability as stipulated by the disability act was yet to be realized.

#### **5.1.4 Finding out the provisions of vocational training available to persons with disability**

The study showed that a high proportion (65%) of the respondents indicated that they had not gone through any form of vocational training to gain skills to support themselves. The study findings indicated that increased access to technical, vocational, entrepreneurial and professional training opportunities for persons with disability should be made available as stipulated in the disability act (GOK, 2003).

The study findings also revealed that there was need for the government to ensure that persons with disability go through a system of training whereby they learn under practitioners as this would be ideal as most training is done while working for an employer who helps the apprentices to learn their trade.

### **5.2 Conclusion**

This study sought to establish the views of person's with disability on the implementation of the disability policy by members of Tujiinue disability group in Kibera.

While establishing the perception on accessibility of the physical environment of persons with disability, the study concluded that the public buildings had not yet adjusted to make their premises disability friendly. This also included the washrooms in public buildings which were found as not disability friendly. The public transport industry also had not yet adapted their vehicles to suit the needs of persons with disability in line with the requirement in the disability act (GOK, 2003). The public transport crew members were also cited as a barrier to adequate accessibility and sensitization was needed to raise awareness to the needs of persons with disability.

On assessing the views on the economic programmes, for persons with disability the study concluded that the provisions stipulated in the disability act (GOK, 2003) were yet to be felt by the persons with disability. The study also concluded that the government should spare no effort in promoting equal access for all to open employment; developing the potentials of job seekers with disability and helping the latter achieve self-reliance, independence and full integration into society. The study revealed that discrimination in



employment continued to be felt and lack of loans from the financing institutions left persons with disability to dependence and begging. Given suitable opportunities, just like everybody else, they persons with disability can also contribute to society and integrate fully into the community (Oliver, 1996).

On finding out about the views on provisions of vocational training available to persons with disability, the study concluded that these services were yet to be felt by the persons with disability. The facilities for formal training were not in place and also the modalities of having the informal trainings had not been initiated as stipulated in the disability act. Based on the findings, it can be concluded that persons with disability felt that the provisions stipulated in the Disability Act were yet to be fully implemented.

### **5.3 Recommendations**

On the basis of the above findings of the study, the following recommendations were made:

1. The study recommends that proprietors of public buildings, public institutions and public amenities to adjust and adapt their facilities to suit the persons with disability needs. Operators of public service vehicles should also adjust their vehicles to cater for the needs of persons with disability.
2. It is also recommended that the government should strive to economically empower persons with disability and ensure that the 5% of job opportunities stipulated in the disability act are taken by the persons with disability. This will ensure that persons with disability are able to earn a livelihood and be independent.
3. The study further recommends that provision of access to vocational training should be implemented in order to seek to introduce to persons with disability a wide range of vocational training and rehabilitation programmes, including job attachment opportunities which the persons with disability can be involved in.

#### 5.4 Areas of further research

1. This study was done in an informal settlement in an urban setting such that the findings may have been influenced by urban characteristics. It would be important if similar study is carried out in the rural settlements so as to find out the extent of implementation of the disability policy from another perspective.
2. Since this study only assessed a few provisions in the disability act, it would be important to explore the other provisions provided for by the disability act, and find the extent of their implementation.
3. This study focused on the extent of implementation, future studies therefore should focus on the barriers in fully implementing the disability policy.

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## **APPENDICES**

### **APPENDIX I - QUESTIONNAIRE FOR PERSONS WITH DISABILITY**

My name is Anne Wambugu. I am a student of the University of Nairobi pursuing MA in sociology (Rural Sociology and Community Development). I am currently working on my MA project paper on the views of persons with disability on the implementation of the disability policy. You have been identified as one of the respondents in this study and therefore, kindly requested to complete the following questions. The information provided will only be used for the purpose of this study and confidentiality is highly assured.

#### **Part I: Background information**

1. Gender. Male ( ☐ ) Female ( ☐ )
2. Age
3. Please indicate your cause of disability. Congenital( ☐ ) accident( ☐ ) disease ( ☐ ) unknown( ☐ )
4. Please indicate your highest level of education: primary ( ☐ ) secondary ( ☐ ) tertiary college ( ☐ ) university.
5. Please indicate your occupation
6. Please indicate: married( ☐ ) single( ☐ ) divorced( ☐ ) widowed( ☐ )

#### **Part II: Accessibility**

7. Do you think the public buildings for example banks, supermarkets, offices, hospitals, are accessible to persons with disability?  
Yes ( ☐ )                      No ( ☐ )
8. Do you think appropriate adjustment and modification would improve your movement in order to meet your needs as you move around?

9. What would you say about the accessibility and friendliness of the washrooms in the public buildings?

10. What do you think about the public transport accessibility to one with physical disability?

Yes ( ) (No)

11. In which areas do you think should be adjusted in order to enhance your accessibility in regard to public transport?

12. How do you find the public transport system in accommodating the needs of a pwd?

13. What are the challenges that you have experienced while using means of public transport?

14. What do you think can be adjusted to the physical planning of your environment to accommodate your needs?

15. What challenges do you encounter as you move around your environment?

16. How do you think the implementation of the policy would address the challenges encountered in your accessibility of the environment?

#### **Part 111: Economic empowerment.**

17. What is your view on the implementation of the disability policy concerning economically empowering persons with disability?

18. From your experience, has the government done enough in supporting cottage and home-based industries?

19. Have you ever tried to obtain a loan to start a business venture? Yes ( )

No ( )

20. What challenges in accessing loans as a person with disability did you face?
21. In your opinion, are the financing institutions doing enough in availing funds for supporting cottage and home-based industries for persons with disability?
22. What are the main economic challenges/problems that persons with disability face in this community?
23. From your experience, what specific support services do you need within the community to enable you become economically empowered?
24. How do you feel the needs of persons with disability should be included/ incorporated in the various community activities?
25. From your experience, does the community understand the economic needs of persons with disability?
26. From your experience, do you think there is discrimination on the ground of a disability within the community in terms of employment? Yes ( ) No ( )
27. How do you think the disability policy would address the issue of employment to persons with disability?

#### **Part V: Vocational Training**

28. What is your view on the implementation of the disability policy concerning vocational training?
29. What are the vocational training facilities available in your community that are aimed at training persons with disability?

29. Have you benefitted from any form of vocational training in your community?

30. Do you have access and availability of facilities that you can go to for vocational training?

31. Is there provision of support from the government aimed at training or re-training market –oriented skills to persons with disability? Yes ( ) No ( )

32. To what is technical, vocational, entrepreneurial and professional training available to pwds?

33. What form of training have you been engaged in?

34. How can vocational training contribute in improving your life ?

THANK YOU.

## **APPENDIX II**

### **INTERVIEW GUIDE FOR KEY INFORMANTS**

My name is Anne Wambugu. I am a student at the university pursuing MA in sociology (Rural Sociology and Community Development). I am currently working on my MA project paper on views of persons with disability on the implementation of the disability policy. You have been identified as one of the respondents in this study and therefore, kindly requested to complete the following questions. The information will only be used for the purpose of this study and confidentiality is highly assured.

#### **Part I: Background information**

1. Please indicate your gender. Male ( ) Female ( )
2. Age.
3. Please indicate your rank in the organization
4. Name of organization/ministry

#### **Part III: Accessibility of public buildings and public transport**

5. What is the extent of implementation of the disability policy on accessibility?
6. What do you think about the accessibility to the public buildings for example banks, supermarkets in regard to persons with disability?
7. What do you think about the public transport accessibility to one with physical disability?
8. What are the mechanisms in place to ensure that people with disability obtain suitable services in public offices on ground floors?

9. What do you think can be done to implement the adjustments provided for in the Disability Act?

10. After the Disability Act was enacted, what modifications have occurred in physical planning to accommodate needs of those with physical disability?

11. Are there any examples of adjustments that have already been implemented?

12. Where physical accessibility is reasonably difficult, what strategies for enabling alternative means are developed?

13. What are the strategies to ensure that needs of persons with disability are fully included and incorporated in the various community plans?

#### **Part 111: Economic empowerment.**

14. What would you say is the extent of implementation of the disability policy on economic empowerment to persons with disability?

15. How has the government availed work and opened employment opportunities to persons with disability ?

16. What are the laid down measures that counter challenges in accessing loans as a person with disability do you face?

17. What is the government doing in supporting cottage and home-based industries for persons with disability?

18. Which mechanisms have been put in place to respond to economical challenges that persons with disability face in the community?



19. What specific support services do you think are most important for persons with disability?
20. How do you ensure that the needs of persons with disability are included/ incorporated in the various community activities?
21. What mechanisms have been laid down to ensure that the community understands about common needs related to persons with disability?

#### **Part IV: Education and Vocational Training**

22. What is the extent of implementation of the disability policy on provision of vocational training?
23. What are the plans in ensuring that there are vocational training facilities available in the community aimed at training persons with disability?
24. What are the provisions of support from the government aimed at training or re-training market –oriented skills to persons with disability?
25. To what extent is the increased technical, vocational, entrepreneurial and professional training available to pwds?
26. Are there any strategies in ensuring that persons with disability have access to any formal or informal training?
27. Are there any guidelines put in place to ensure that vocational facilities are available to persons with disability?

THANK YOU.

## **APPENDIX III**

### **FOCUS GROUP DISCUSSION INTERVIEW GUIDE**

My name is Anne Wambugu. I am a student at the university pursuing MA in sociology (Rural Sociology and Community Development). I am currently working on my MA project paper on views of persons with disability on the implementation of the disability policy. You have been identified as respondents in this study and therefore, kindly requested to participate by answering the following questions. The information will only be used for the purpose of this study and confidentiality is highly assured.

1. What ways do you think the disability policy would have addressed the issue of physical environment?
2. How can the physical environment including buildings be adjusted to accommodate your needs in terms of accessibility?
3. What measures do you think the government should put in place to economically empower persons with disability?
4. What are the vocational training facilities available in your community?
5. What are the main benefits you think would have benefitted you if the Disability Act was fully implemented?