

**FACTORS INFLUENCING ACCESSIBILITY OF SOCIAL SERVICES IN
INFORMAL SETTLEMENTS. A CASE OF CHILDREN LIVING WITH
DISABILITIES IN KASARANI SUBCOUNTY, KENYA.**

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DECLARATION

This research project report is my original work and has not been presented anywhere for consideration for the award of a degree in any other University.

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This research project report has been submitted for examination with my approval as the University supervisor.

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DEDICATION

This research project I dedicate it to my late mother Mary Njeri for her self-belief in the power of a holistic education despite herself not having any formal education, my spouse Nancy Monyangi and my three daughters Jane, Angela and Blessings for their support amidst challenging times.

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LIST OF ACRONYMS AND ABBREVIATIONS

| | |
|---------------|---|
| AIDS | Acquired Immuno Deficiency Syndrome |
| ASP | Area Strategic Plan |
| CBO | Community Based Organization |
| CDC | Center for Disease Control |
| Con. | Constitution |
| HIV | Human Immunodeficiency Virus |
| KHRC | Kenya Human Rights Commission |
| KPHC | Kenya Population and Housing Census |
| NIP | Nairobi Integrated Program |
| PLWD | People Living With Disability |
| PWD | People With Disability |
| SES | Social Economic Status |
| SPSS | Statistical Package for Social Services |
| UNDP | United Nations Development Program |
| UNICEF | United Nations Children’s Fund |
| UNCHS | United Nations Center for Human Settlements |
| WHO | World Health Organization |

ABSTRACT

This study was initiated on the need to establish the factors influencing accessibility of social services in informal settlements a case of children living with disabilities in Kasarani sub county, Kenya. The Kasarani sub county in Kenya acted as the place for conducting the study. The caregivers of children with disabilities, stakeholders working with children with disabilities, Funding agencies targeting children with disabilities and Community based organizations working with Children with disabilities in the informal settlements areas acted as the target population. The target sample of 200 was selected out of a population of 2000 individuals. Data collection was performed through questionnaire while data coding and analysis was performed through SPSS and presented. Descriptive and regression analysis was used to analyze the data. Tables, Figures and Regression model was used to summarize the data. The study established that participation of stakeholders influences much on accessibility of social services for children with disability in Kasarani Sub County. The study further found out that funding influence to a great extent accessibility of social services for children with disability. Also it found that a unit increase in capacity of caregivers leads to an increase in accessibility of Social Services in the informal settlement. Based on the findings this study recommended that more homecare should be established in the informal settlements in the country so as to help those children with disability and also the government, as a policy intervention, should review the funding of homecare program by fully extending the support to all local community organizations in informal settlements.

CHAPTER ONE

INTRODUCTION

1.1 Background of the study

With the population growing older at the global perspective the disability figure is expected to rise. Eighty percent of people with disability reside in developing countries conferring to UNDP. World Bank assesses that twenty percent (20%) of the world poorest people have specific kind of disability and are regarded in their own communities as the utmost underprivileged. In the United states, one out of every five adult grown up's has a disability, according to a new study, prevalence of Disability and Disability types among adults,2013,published by CDC. The most commonly and functional disability being mobility limitation, followed by disability in memory or thinking, self-care, Vision and independent living.

In Africa the number of people living with disability is increasing due to increased violence, HIV/AIDS, poverty indexes, Malnutrition and environment degradation. In developing countries it is approximated that ninety eight percent (98%) of children with physical and intellectual disabilities are not enrolled in school and that less than ten percent (10%) of all children with disabilities do not attend school (Nair, 2010). In the year 2006, the World Health Organization estimated that a hundred and fifty (150) million children aged fifteen (15) years and below had disability and that only a partly three percent (3%) of these children were enrolled in special need education in developing countries. In Somali a country ravaged by civil strife for two decades has left many disabled children at the mercy of extremist according to Amnesty international research 2015.

Under Vision 2030, Kenya hopes to turn out to be a worldwide modest and flourishing nation with a great eminence of life. Thus the Vision 2030 provides a long-term framework of development as well as wits aimed at supporting rapid economic growth and tackling poverty. The plan follows soon after the operation of the Economic Recovery Strategy (ERS), 2003-2007. In Kenya, out of a total population of forty (40) million, it is estimated that ten percent (10 %) (3,942,326) have disabilities and more than one and half percent (1.6%) (554,440) people have physical disability. In addition, education access to a child with disability in the country has remained elusive with a partly two percent (2%) of them having access to education (Association for the Physically Disabled Person of Kenya 1999, Malinda 2005). This is contrary to (Con.2010) that gives right to every individual to access social services as a right not as a privilege. In the year 2004, out of estimated seven hundred and fifty thousand (750,000) children with disabilities in Kenya only twenty six thousand (26,000) were enrolled in special needs education. It's even worse as some school refuse to enroll children with disabilities due to their vast needs. When it comes to education they are left with two choices either to join an integrated school or a special school. But due to poverty and discrimination many caregivers cannot afford to place their children in that education set up and thus prefer to have them at home. This thus denies them an opportunity to acquire education that can liberate them from the shackles of poverty and despair.

In Kasarani Subcounty where several informal settlement areas are located including Korogocho, Kariobangi and Mathare most children with disabilities are left on their own as their caregivers are busy looking for informal jobs. This then exposes them to sexual and physical abuse. Cases of rape and children with disabilities giving birth are rampant.

Nairobi Integrated Program (NIP), a program addressing the challenges of both people with and without disabilities has been assisting such children since its inception in 1998 through support from ChildFund Kenya. The program has been providing rehabilitation (occupational and physiotherapy) service to these children in order to facilitate their chances of getting enrolled. Rehabilitation plays a pivotal role in early interpolation and operation of limbs that are later trained in school activities like scribbling to prepare the child for school work. Up to date the program has been able to fully rehabilitate over three hundred (300) children with various types of disability such as cerebral palsy, delayed milestones secondary to rickets and spinal bifida among others.

1.2 Statement of the problem

Disability affects 10% of every population according to the WHO. Hundreds of millions of families are affected by disabilities in developing countries. According to Kenya National Disability Survey 2008, five (5%) percent of the Kenyan population have one or other form of disability. Depending on the form of disability survey results indicate that persons with disability in Kenya meet a range of handicapping situation. The survey unveiled that person with disability access to infrastructure and services such as health, education and economic assistance (social support) is a big challenge. In regard to access to rehabilitation services and assistive aids, the findings revealed that majority of people with disability have problems in accessing these needed services and aids respectively. In deed only thirty two (32%) percent of those surveyed were using assistive aid. In 2014, Kenya National Human Right Commission found that the educational policy environment is theoretically supportive of education of learners with disability. However it faces resounding bottlenecks in its implementation (KNHRC, 2014).

The Nairobi Integrated Programme (NIP) area of coverage (Kasarani Sub county) has a disability prevalence rate of 5.3% which is higher than the national figure of 4.6% according to the baseline survey conducted in the year 2013 by an independent consultant (NIP Outcome Survey, 2013). The survey further revealed that children with disability in the County did not receive the same treatment as their counterpart without disability. The survey revealed that there is only one organization that works for the wellbeing of children with special needs in the County (NIP Outcome Survey, 2013). In addition, the survey indicated that the County lacked special unit for children with Physical and Mental impairments in both public primary and secondary schools. Furthermore, the existing special unit in the neighboring Sub counties charges exorbitant fees which were not affordable to caregivers of these children owing to their poor economic status. Furthermore the survey revealed that children with special needs suffered neglect due to the economic status of the household they came from and special education access is not the only challenge faced by children with disabilities for them to lead an independent and dignified life but also gainful employment after graduating from special schools (NIP Outcome survey, 2013).

The success factors and success criteria played a pivotal role in defining the road of this research problem under study. To get to that point the study employed some social development theories propounded by Albert Bandura and Karl Marx.

1.3 Purpose of the study

To study factors influencing accessibility of social services in the informal settlements. A case of children living with disabilities in Kasarani Sub-county, Kenya.

1.4 Objectives of the study

The following four objectives were the subject of discussion of the project research.

- i. To examine the role of stakeholder participation on accessibility of social services for children with disability in Kasarani Sub county.
- ii. To determine the influence of funding on accessibility of social services for Children with disability in the informal settlements in Kasarani Sub county.
- iii. To assess the capacity of caregivers of children with disability on the accessibility of social services in the informal settlement.
- iv. To investigate the influence of other local community organizations on accessibility of social benefits for children with various disabilities.

1.5 Research questions

- i. What is the influence of stakeholder participation on accessibility of social benefits for children with various disabilities?
- ii. How does funding influence accessibility of social benefits for children with various disabilities?
- iii. To what extent does the capacity of caregivers of children with disabilities influence accessibility of social services?
- iv. How other local community does based organization influence accessibility of social services for children living with disability?

1.6 Significance of the study

The study provides the state and non-state actors and the public with a summary of the most recent demographic and social figures on the population with disabilities in Kasarani Sub County. The study also has provided a body of knowledge on how to handle social issues affecting children with disabilities hailing from the informal settlement areas.

A close look on how the Government approaches social services delivery contributes to the mitigation or escalation of accessing the social services. The state actors in this case was the department of Children services, Directorate of adult education and Ministry of Education. The study also provided the Non state actors who included stakeholders in the formal sectors that is the banks, insurances and informal sectors or the Juakali artisans to design modalities of assistance through their corporate social responsibilities on how to fund or assist communities and in this case children with disabilities in the informal sectors.

1.7 Delimitation of the study

The study was undertaken in Kasarani Sub county informal settlement areas. Study participants were stakeholders working with Children with disabilities, caregivers of children with disabilities, Funding agencies and other community based organizations.

1.8 Limitations of the study

The anticipated challenges were resources and by resources I meant time and Money. Given the constraints of turnaround time of which results were anticipated to be delivered, some delays were experienced. Money by it attribute was a limited resource and this was a fact one could not shy off with.

1.9 Basic Assumptions of the study

I assumed that there was a positive buy in of the idea to interrogate the problem within the structures of leadership of the targeted informal settlement areas. Also there was a major assumption that the questionnaire was filled properly so as to depict the myriad of challenges facing people living with disabilities.

1.10 Definition of terminologies used in the study

Capacity of caregivers: Caregivers are the parents or guardians of children with disabilities who primarily takes care of the affected children. Capacity is the ability and skill to meet the needs both physical, Spiritual and Moral without so much strain.

Disability accessibility to social services: Disability is the impairment on the body of a person that can be physical or mental impairment which may hinder someone from accessing basic amenities at ease.

Funding: is providing financial resources to finance a need, project or Program in order to achieve a desired objective.

Informal settlement areas: These are areas deprived of physical infrastructures like roads, housing that access to important social services. The areas are characterized by low economic status, shanty

houses and environmental degradation, loosely termed as ghettos.

Infrastructure:

These are the basic amenities to support life and interactions within a community, bridges and roads are best examples.

Local Community organization:

These are non-state actors who come in to provide services ostensibly meant to be provided by Government in the areas of Education, Health and Economic empowerment to the communities.

Stakeholder participation:

A stakeholder is anyone who has an interest in the project; therefore participation of stakeholder is the process by which an organization involves people who are directly or indirectly engaged with the project or program.

Social services:

These are services provided by the government for the benefit of the community, such as education, medical care, and housing.

1.11 Organization of the Study

This research project was structured in five chapters on which Chapter one focused on Introduction, this is more in the background of situations affecting children with disabilities in the informal settlement schemes. The idea is to bring out the double tragedy of one having disability and living in squall conditions.

Chapter two reviewed the literature scholarly and information available in supporting the study subject. Chapter three described the research methodology of the study and also shows the sample size of the research. Chapter four examined the data collection and analysis and in conclusion chapter five delivered on the findings of the study and recommendations which state and non-state actors can implement to reduce the shocks and tensions children with disabilities face as they access social services in the informal settlement areas.

CHAPTER TWO

LITERATURE REVIEW

2.1 Introduction

This provides the literature review on this body of knowledge for this research. A conceptual framework was generated in this body of knowledge to show the variables to be considered in this project. Various studies were reviewed in this research study to bring out the broad perspective on the challenge affecting disabled children within deprived infrastructures in the informal settlement areas of Kasarani Subcounty.

2.2 Empirical review

Ten percent (10%) of every population according to World Health Organization (WHO) have one or multiple disability. An estimated six hundred and fifty (650) million people worldwide have disability of which two hundred (200) million are children. Disability has for a long time been viewed simply as the result of impairment (WHO, 2010). However, most pooled forms of disability currently are associated with chronic respiratory diseases, cancer, diabetes, malnutrition, HIV AIDS, other infectious diseases and injuries such as those caused by road accidents, falls, land mines and violence among others (KHRC, 2010). The number of people living with disabilities has continued to rise owing to such factors as population growth and aging. This has increased the call for education, rehabilitation and health amenities for this needy populace which is often overlooked in the Agenda of developing nations. On the other hand children and youth with special needs are vulnerable to abuse, exploitation and neglect (UNICEF, 2014). In addition the frequent institutionalization of children with special needs denies them the right to grow up in family environment thus further complicating their capacity to grow their full potential and hence increasing their vulnerability (UNICEF 2014).

2.3 Role of stakeholders participation on accessibility of social services for Children with Disability in the informal settlement areas

Resourceful stakeholder administration can help managers settle many forms of moral dilemmas conferring to (Harrison & St. John, 1996). Engagement of stakeholder and participation is central to positive and long-lasting change in social care, and it is central in achieving personalized services. Altogether fruitful disparity engages a wide network of stakeholders, including other social and health care organizations. Different stakeholders hold some level of answerability within their geographical areas of coverage. Some come in through corporate social responsibilities and some as part of their mandate and in this case the government and non-government organizations.

The early identification of children with disabilities will enhance the survival of children. As of this standpoint, managing contending stakeholder appeals is truly a key management affair (Ansoff, 1984). Furthermore; it also makes it easy through their assistance for children with Disabilities to have an easy access to health and education services in the County. On the other hand, the transition of those in school to lead an independent life through access to higher education/ vocational training skills will improve the economic capacity hence their economic access to health and education and consequently their capability to bargain for their future life. This research project in its wholeness strived to establish stakeholders effect on enhancement of the quality of life of children with disabilities in Kasarani Sub County through improved access to health, rehabilitation services, and enrollment in both basic and secondary education and economic empowerment and more importantly to caregivers of the bed ridden children who may not be able to join any learning activity due to their medical prognosis.

Conversely pursuing the objectives of this Approach necessarily will involve a wide range of players, across sectors seeking and discipline seeking engagement. The Rural Development sector paper for World Bank's 1975 gives five paragraphs to the importance of local participation and briefly acknowledges some impediments on participation. According to (Donaldson and Preston, 1995) the theory of stakeholder has a forthcoming ground for the business and society discipline. The tactic is appropriate to all agencies who are tangled in developing and implementing public policy and implementing services and programs that include those involved in addressing the economic, environmental, and social determinants of health of children with disabilities and to all those concerned with supporting research through funding, coaching and offering infrastructure and exploring new methodologies for improving the nexus of research. Participation in this research was open to all those who had an interest and who can contribute in some way to improve on learning and providing information related with research. One issue of central concern in this research is to try to establish the social responsibility of stakeholders as most might be seen to pursue economic gains where others are seen to do so for intrinsic value or merit (Donaldson & Preston, 1995).

2.4 Influence of funding on accessibility of social benefits for children with various disabilities

Delivery and Funding of social services is increasingly under pressure. According to (Weisbrod, 1988) one theory is that charities presence alleviates this pressure by delivering supplementary services. In search of public donation to augment fees for services when the market and state fail to meet beneficiaries' needs. Alternatively, charities may partner with government to provide complementary services (Salamon, 1987) or deliver on their own. The question of how citizens' welfare is funded is a structural one that is contextually and historically informed and against which policy choices can be analysed.

The establishment of a welfare state is an illustration of a country's norms, values and social goals (Kildal & Kuhnle, 2005). Therefore, the welfare funding is a normative issue that not only asks what the state should do, but also what it can do. In analyzing in US context these issues, Weisbrod (1988) postulates a strong state, while Salamon (1987) argues for state-charity partnerships. As potential users cannot be excluded from using public goods (Falk, 1992), government classically provides such commodities, because for-profit firms cannot charge sufficient fees for services to assist them in meeting their objectives. Charities also fund (and provide) services that may be supplementary responses to state failure (Weisbrod, 1988), or on the other hand, partners or work with the government to provide social services which are complementary (Salamon, 1987). Notwithstanding tax policy implications, the relationship between the state and charitable sectors is complex. Abramson et al. (2006) note that government and charitable funding relationships for the delivery of social services have been both supplementary and complementary.

It is common to find in the in the most informal settlements not just in Kasarani Sub county but also in other areas that the government relies on other charitable organizations to curb the gaps of social delivery by organizing and bringing together key players. The relationship history between public and private funding of social services has been complex and long, as well as important (Tennant, 2007). As this funding is typically grants provided by the government, with the benefit of private and public funding charities were able to pursue their own aims (O'Brien, Sanders, & Tennant, 2009).

Government funds local establishment through devolution. According to Dacks (1990), handover of power to from a higher level to lower level of governance is termed as devolution. It occurs when a regional or a local government formally receives either broad

powers over a specific territory or more limited powers over a specific jurisdiction. He describes devolution as a type of administrative decentralization. On this matter the governments devolve functions; transfer powers for decision making, finance and management to independent units which are independent of local government with corporate status. Devolution transfers responsibility for services provision to municipalities that elect their own leaders. The author notes that the devolution concept has its basis in self-determination and democracy precepts. Principle number one is pegged on the premise that the policies or provision of effective services cannot be made by large governments to distant communities with special climates, economic systems, geographical and cultures. He asserts that only governments closer to the people can make and supply better services. The autonomy principle grasps that distinctive communities control those political, social and economic institutions that impact on their way of living culturally and regionally.

2.5 Capacity of caregivers of children with disability on the accessibility of social services in the informal settlement

Taking care of a child with a disability is considered as belittling to a parent or caregiver, though if well accepted it can be rewarding. The pressure confronted by caregivers on a daily basis cannot be wished away. Feeding, Toileting, bedtime and grooming which are considered as day to day routing activities can be extremely thought-provoking and complex particularly if the child needs complex attention. Many people in such situation are not able to work as the responsibility may be a round-the-clock affair for the child with disability may be a full time. Home-based care has been recommended and increasingly anyone who is suffering from any health conditions in hospital are being discharged from hospital as soon as possible to continue their rehabilitation at home (Bonita et al.1987).

A continuous caregiving is continuously required most importantly if the case is of a parent who is the solitary caregiver, this then dramatically changes not only the life of the parent but that of the entire family. Particularly as other children live in the home, they as well feel like their wants are not or not enough time and attention is focused to them. In a marital relationship similarly the spouse may suffer as one may spend a lot of time with the disabled child and not as much with the other on matters of time and attention in the relationship. Caregivers of children with disabilities designate low self-esteem due to negative responsive and dysfunctional health matters.

Relieve and emotional care can be provided by the caregiver to the members of the family who are engaged in the care. Numerous studies on the boredom and lack of stimulation which these children face has involved pet visitation to nursing homes. According to (Beck and Katcher, 1984) the precise long-lasting outcomes of these caregiver services are difficult to define, particularly since many of these children suffer from severe medical problems and senility that limit functioning, and they cannot be rehabilitated. As the caregiver run errands the parent can rest a bit and this way they gain more energy to keep on going and accommodating the disparaging situation but if such lacks then its energy draining, Whenever the parents begin to feel out of energy and stressed a caregiver trained to work with children with disabilities and their families can as well provide a shoulder to lean on. The vast responsibilities and demands that accompany taking care of a child with disability can be difficult for members of the family to handle on their own. A special needs caregiver can reinforce the structure with competent and specialized external help despite the fact that the family is a supportive structure.

2.6 Roles of other local community based organizations on accessibility of social benefits for children with various disabilities

CBOs commonly known as Community-based organizations as their mandate is based at the community are nonprofit making agencies on a local and national level, they assist the community efforts for community growth by providing services or funding to ease the poverty tension. They work through people-centered modes through provision of micro finance and community participation to improve over time health education in community and infrastructures of development for a period of time.

The rationale of CBOs is to plan, realize, and oversee economic and social development programs while providing both financial and technical help to the communities. The process of rural change is positively influenced by CBOs through increase in income, improvement in health, nutrition and literacy status of the populations. Some of the programs that can bring lasting change at the community level is the availability of micro-finance for micro-enterprise, education and health, animal husbandry, safe water and sanitation and sustainable agriculture.

The significance of CBOs have been highlighted by a couple of researchers and the contribution these organizations make in national economic and social development in rural communities in particular. Non-Governmental Organizations [NGOs] are regarded as non for profit organizations that are concerned at grass roots to empower the disadvantaged segments of the population (Clark, 1999). According to (Berg, 1987) the role of NGOs in the management and planning of rural development ventures has been investigated. Consequently (Uphoff's, 1984) has suggested five key areas of activity in which NGOs contribution can be extrapolated, that is the natural resources management, rural infrastructures,

agricultural development, non-agricultural enterprise and human resources development. Concurring with (UNCHS, 1986), majority of the most deprived rural people are locked into a cycle involving inadequacy and exploitation by the middle men, (Mullen, 1991). Some NGOs around the world are using effective modes of transport for the delivery of rural services. (Clements, 1995), studied that transport and technology communications improvements, has enabled rural communities to attract small scale and flexible economic activities. Many authors setup relationship on local community's initiatives and road construction, this is because the duo play significant role in rural development and scarcity lessening (Ahmed and Anwar Hussain et al, 1994).

2.7 Theoretical Framework

The study was informed by two social theories; Social learning theory and Conflict theory. By definition a theory must clarify to some degree why something happens and it is an all-purpose statement about the actual world where indispensable scientific method support evidence obtained.

2.7.1 Social learning theory by A. Bandura

The Social learning theory by (Bandura, 1977) postulates that even in the nonexistence of motor reproduction or direct reproduction learning is a cognitive process that takes place in a social context and can occur purely through direct instruction and observation. According to social learning theory Human behaviour is learned as individual interact with their environment. What organisms have learned from the environment learning theory explains the behavior on the basis of that. The gradual shaping of new behavior which stem from this theory are through positive and negative strengthening, stress management, modeling,

biofeedback, cognitive restructuring, relaxation techniques, imagery and systematic desensitization methods.

2.7.2 Conflict theory by Karl Marx

It is important to note that community development workers use this theory to comprehend clients who are facing oppression in some form or another in our capitalist society as this theory draws notice to dominance, oppression and conflict in social life. Individual and groups try to advance their own welfares over the interests of others. Some groups dominate others and power is unequally divided. Social command is based on the control of non-dominant groups over dominant group and influence. Social change is propelled by conflict, and thus lack of clear conflict is a sign of exploitation with occurrences of variation interrupting long periods of stability.

2.8 Conceptual Framework

Independent Variables

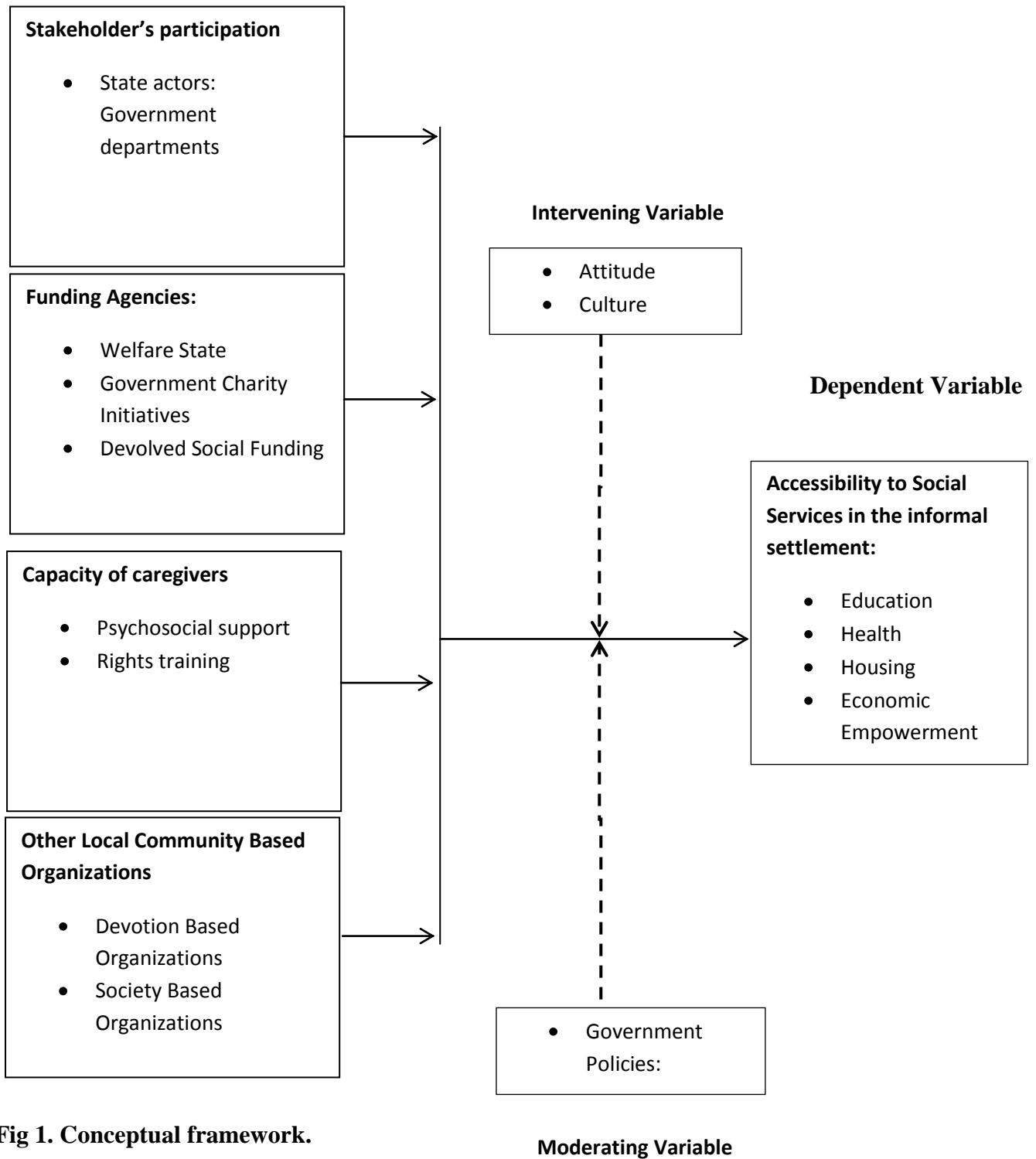


Fig 1. Conceptual framework.

2.9 Research Gap

This chapter reviewed the existing literature on accessibility of Social benefits for children with various disabilities living in the informal settlement areas. It also presents a number of relevant studies done to support the study and also a conceptual frame work. The literature review provided a road map through which the body of knowledge was reviewed on a global and local perspective as the issue of disability and accessibility of social services affects both the rich and the poor.

According to (KNSPLWD, 2008) factors such as aging, medical advances and population increase advances that preserve and prolonged life leads to growth of the number of people living with disabilities. This in turn amplifies the demand for health and rehabilitation services. Disability is mostly perceived as both a consequence and cause of poverty. Around 80% of the world's persons with disabilities live in low income countries where they experience social and economic disadvantages and denial of rights. The way society reacts and behaves to disability issues affect the lives of children living with disability. Subsequently environmental barriers and poor policies exacerbate the impact of disability. Even though there has been different efforts in Kenya to determine the disability status through census and surveys by civil societies, NGOs and Government, these efforts have not been conclusive and lack the ownership from the perspective of policy makers and implementers. Lack of evidence-based data on the nature and extent of disabilities as well as other factors that affect Kenyan PWDs has posed challenges in terms of planning for this segment of the population. The available data from small-scale studies and special rehabilitation/educational institutions has never been adequate to give a complete picture of Kenya's PWDs. The Kenya National Survey for Persons with Disabilities intended to change that scenario, and to provide stakeholders with up-to date information for planning,

monitoring and evaluating the various activities, programmes and projects geared towards improving the wellbeing of persons with disabilities.

Given the irregularity in the results to date, further research is required to clarify whether aging increases, reduces, or maintains earlier inequalities. The purpose of this study was to identify reasons for the inconsistent results and examine Black/White differences in disability trajectories over time. To well comprehend the inconsistent results, we find it imperative to note that there are theoretical or conceptual frameworks that support either amplification or reduction of the gap. Disability gap in later life is premised upon a cumulative disadvantage viewpoint according to (Dannefer, 1987).

2.10 Chapter Summary

It is expected through the existing legal legislations industrious and civilized work enables people with disabilities to comprehend their aspirations, participate more dynamically in the society and improve their living conditions. Among the factors that provide greatly to the reduction of poverty and to the social and economic presence of people living with disabilities in Kenya of which this is not happening as expected is ensuring a disability perspective in all aspects of policy and labour legislation, effective implementation of existing disability laws and policies and providing for equal employment opportunities and training are. Lack of political goodwill and institutional frameworks to support the same has grounded and eroded the efforts to secure a conducive space for Children and Persons with disability access at equal measure social services in the informal settlements.

CHAPTER THREE

RESEARCH METHODOLOGY

3.1 Introduction

The chapter provides information about the applied research process intended for the research project. This includes research design, population targeted, size of the sample and procedures of sampling. It also includes research instruments, data collections procedures, data analysis techniques.

3.2 Research Design

Descriptive survey research design was used. The design is used to attain information concerning current status of the occurrences to describe what exists with respect to variables or conditions in a situation, it allows the researcher to illustrate record, analyze and report conditions that occurs or occurred Kothari (2005). According to (Borg and Gall, 1989) it is intended at finding out "what is," so observational and survey methods are frequently used to collect descriptive data as well as from the body of knowledge from (Kothari, 2005). It is mainly conducted when researcher wants to gain deeper understanding of a topic. Concurrently it encompasses gathering of data that describe events and then organizes, depicts, tabulates, and describes the data collected (Glass and Hopkins, 1984).

Quantitative research was used to check on the accessibility of social services in the informal settlement areas. Questionnaire was used to collect and categorize Descriptive in the field using questionnaires. The most important purpose of descriptive research design is the description of contemporary state of affairs as it exists at this day and age (Kothari, 1999).Conclusions were drawn as the study progresses. The study also studied both principal data acquired over questionnaires, individual and central informant interviews and secondary

data referenced from journals, baseline / assessment research and strategy reports by different agencies, text and electronic books and other related materials.

3.3 Target Population

This research targeted caregivers of children with disabilities, stakeholders working with children with disabilities, Funding agencies targeting children with disabilities and Community based organizations working with Children with disabilities in the informal settlements areas in Kasarani Subcounty. According to (Mugenda and Mugenda, 2003), the target population is labeled as the complete set of units for which the survey data is to be used to make extrapolations. Kasarani Constituency had a population of 200,984(Kenya census 2009), occupying an area of 152.60 squarer kilometer.

3.4 Sampling Procedure and Sample size

For this study purposive and snowball sampling methods was employed as according to Kerlinger (1986) purposive sampling is non-probability sampling method, which is categorized by the use of prudence and a considered effort to obtain representative samples by taking account of typical areas or groups in the sample, and this was the focus of this research project. On the other hand Mugenda and Mugenda (2003) remarks that purposive sampling permits the researcher to use instances that have the prerequisite facts with reverence to the study intentions. In snowball sampling desired respondents were identified through purposive sampling and were used to name other persons that had the required characteristics. Through snowballing a respondent were optionally requested to nominate another caregiver of child with disability living in the locality of Kasarani Subcounty. This was done this way due to the fact that many caregivers of children with disabilities tend to hide their children due to myriad misconceptions associated with cultural beliefs and misconceptions that the conditions may be caused by witchcraft or certain unmatched taboos.

The survey covered three major wards within an area of 29.4 square kilometers from Garden City, namely; Kasarani, Mwiki and Claycity. According to the Kenya Population and Housing Census (2009), these areas fall under the larger Kasarani Constituency which has a population of 100,472. Due to its proximity to Garden City; Kasarani informal settlements were chosen for the detailed household questionnaire administration. These settlements have a combined population of 2000 (KPHC, 2009) households with cases of disabilities led by mature people who are expected to be the key informants. The sample size was calculated owing to submission of Cochran formula for determination of the sample. Conferring to (Mugenda and Mugenda 2004), 10% of the population is good sample to be used for research and in this case the 10% of the research sample size to be administered the questionnaire was 200 households.

Cochran formula for calculating sample size:

$$S = \frac{n}{1 + (n/p)}$$

Where S is the Sample size

n is the numeral of preferred portions

P is the total population of children with disabilities.

The sample size of 200 was categorized into four major sections as outlined in the table below and as per the focus of the research objectives, where proportion of each section was randomly sampled as per the male and female categories. Out of population of 200 there was 60 stakeholders in the area which translates into 30% of the sampled population; For the funding agencies in the area, there was 60 corporate and capital agencies that translated into 30% a total Funding agencies; The caregivers and other local community based organizations were at 20% respectively representing 40 caregivers and Local community Based organizations.

Table 3.1: Sample size respondents

| SN | Kasarani Sub county | Total | % of the sampled population | Total |
|-----------|--|--------------|------------------------------------|--------------|
| 1 | Stakeholders(State and Non state actors) | 200 | 30% | 60 |
| 2 | Funding agencies | 200 | 30% | 60 |
| 3 | Caregivers of children with disabilities | 200 | 20% | 40 |
| 4 | Other local Community Based organization | 200 | 20% | 40 |
| Total | | | 100% | 200 |

3.5 Research Instruments

This body of knowledge used both primary and secondary data, thus the review used both open ended and close ended questions. Questionnaire was the main source of primary data because it is assumed to provide detailed individual feedback which gave accurate picture of accessibility of social services by children with disabilities in the informal settlement areas. Other sources which included libraries and government archives provided resultant data.

3.5.1 Pilot testing

The focus on this subject matter targeted 10% of the total sample population to undertake pilot study, this translated into 20 household as our sample population was 200. This was done to evaluate feasibility of the study and make necessary adjustments if need be. The research focused the pilot testing in Githurai which is located outside the geographical study area.

3.5.2 Validity of the Research Instruments

The researcher worked in collaboration with the supervisor to achieve the desired results under Validity. The role of supervisor was to affirm that the argument under this research project was valid if and only if the fact of its grounds necessitated the fact of its deduction and each step or logical operation in the case was acceptable. The corresponding conditional of a valid argument is a logical truth and the negation of its corresponding conditional is a contradiction.

Getting results that accurately reflect the concept being measured is what Validity is all about and thus instituting validity for a survey testing centers on the usage to which the instrument is put but not on the survey itself (Tashakkori, & Teddlie, 2003). The questionnaire was used to test and improve validity of the results a pre-test exercise.

Mugenda and Mugenda (2003), defines validity as the correctness and significance of inferences which are founded on the research outcomes. Validity refers to the correctness, relevance and, effectiveness of evidence that is used to support the explanations (Cooper & Schindler, 2003). Validity is correctness and reasonability of data.

3.5.3 Reliability of the Research Instruments

Split half reliability test at 0.7 reliability confidence level was used. This is following the understanding that dependability is the degree to which a questionnaire, test, reflection or any other measurement technique generates the same repeated trials; it is the steadiness or uniformity of scores over time or across raters (Michael, 2010). (Mugenda and Mugenda 2003), defines reliability as the degree to which a research instruments yields consistent results or data after repeated trials.

3.6 Data Collection

Data was amassed using questionnaire. The questionnaire was administered to all the four targeted key informants under the study objectives.

3.7 Data Analysis and Presentation

The research used both quantitative and qualitative statistics. After collection of the data it was subsequently cleaned and examined for wholeness and readiness for analysis. The data collected from the field was coded as per the themes researched on. The qualitative data was analyzed using descriptive statistics percentages.

A multiple regression model was utilized to find the relationship between the four independent variables considered under this research. The various elements under the dependent variable, namely Stakeholder's participation, Funding Agencies, Capacity of caregivers and Other Local Community Based Organizations, will be reduced to a single value through computing a composite value by use of weighted average method. The regression equation was in the following form;

$$Y=a+b_1x_1+b_2x_2+b_3x_3+b_4x_4 +e$$

Where;

Y= Dependent variable representing Accessibility to Social Services in the informal settlement

a=the constant of regression;

b_1 , b_2 , b_3 and b_4 = are the regression coefficients/weights of the respective independent variables;

x_1 = Stakeholder's participation

x_2 = Funding Agencies

x_3 = Capacity of caregivers

x_4 = Other Local Community Based Organizations

e = error sum.

3.8 Ethical Considerations

The participants' names or projects involved in this research project were not disclosed and participation was on a voluntary basis paying much tribute on matters of confidentiality and respecting respondent's opinion and informed consent. Before filling of the questionnaire the respondents were assured on adherence of identity protection and their consent approval to participate in the research project was prime.

3.9 Operationalization of Variables

Operational definitions are specific ways in which real cases can be classified into categories of the concept ones wants to use in research.

Table 3.2: Operational Definition of Variables

| Objective | Variables | Indicators | Measurement | Scale | Data Collecting method | Data Analysis |
|---|---|--|---|--------------|-------------------------------|--|
| Accessibility of social services | <u>Dependent Variable</u> Social services | Infrastructure records, Roads, Hospitals, Schools | No. of physical structures Schools, Hospitals, Roads | Ordinal | Questionnaire | Regression Analysis |
| To examine the influence of the role of stakeholder participation on children with disability accessibility of social services in Kasarani Subcounty. | <u>Independent Variable</u> Stakeholders participation | -Stakeholders list | -Number of stakeholders | Ordinal | Questionnaire | Descriptive Analysis and Regression Analysis |
| To determine the influence of funding on Children with disability accessibility of social services. | <u>Independent Variable</u> Influence of Funding | -Funding Proposal -Reports | -Source of Funding -Available funding | Ordinal | Questionnaire | Descriptive Analysis and Regression Analysis |
| To assess the influence of the capacity of caregivers of children with disability on the accessibility of social services. | <u>Independent Variable</u> Capacity of caregivers | -Training Manual | -Number of caregivers | Ordinal | Questionnaire | Descriptive Analysis and Regression Analysis |
| The influence of the local community Based organization on accessibility of social benefits for children with various disabilities | <u>Independent Variable</u> Other Local Communal Based organization | -Local Community based organization data | -Number of local communal based organizations | Ordinal | Questionnaire | Descriptive Analysis and Regression Analysis |

CHAPTER FOUR

DATA ANALYSIS, PRESENTATION AND INTERPRETATION

4.1 Introduction

This chapter provides data analysis of the findings obtained from the field. It further outlays the contextual knowledge of the respondents, results of the investigation based on the objectives of the study. Descriptive statistics and regression analysis provided the outcome finding of the report.

4.1.1 Response Rate

A sample size of 200 respondents from which 157 responded which constituted 78.5% was pursued. The rate of feedback for the study was proved to be satisfactory. The response rate was representative as according to Mugenda and Mugenda (2003), a response rate of 50% is adequate for analysis and reporting; a rate of 60% is good and a response rate of 70% and over is excellent. Centered on the proclamation, the response rate was considered to be excellent.

Table 4.1 Response Rate

| | Questionnaires Administered | Questionnaires filled & Returned | Percentage |
|-------------|------------------------------------|---|-------------------|
| Respondents | 200 | 157 | 78.5 |

4.2 Demographic Characteristics of Respondents

This section analysis the demographic knowledge of the individual respondents and their respective agencies. The aim of doing this was to enhance understanding of the background information of the respondents and their personal ability to provide relevant data sought for under this study.

4.2.1 Gender distribution

The study pursued to find out the respondents gender. The findings are presented in table 4.2 below.

Table 4.2: Gender distribution

| Stakeholder participation | Frequency | % Frequency |
|----------------------------------|------------------|--------------------|
| Male | 50 | 32 |
| Female | 107 | 68 |

From the findings, 68% of the respondents were female while only 32% of the respondents were male. This implies that the female gender were the predominant.

4.2.2 Age of the Respondents

The researcher also wanted to determine the age bracket that the defendants fell in.

Table 4.3: Age of the Respondents

| Age bracket | Frequency | % frequency |
|--------------------|------------------|--------------------|
| Below 18 | 21 | 13.38 |
| Between 18-35 | 56 | 35.67 |
| Between 36-49 | 43 | 27.39 |
| Over 50 | 37 | 23.57 |

On respondent's age category, the study discovered that majority of the defendants as shown by 35.67% were aged between 18 to 35 years, 27.39% of the respondents were aged between 36 to 49 years and 23.57% were over 50 years whereas only 13.38% of the respondents were below 18 years. This suggests that defendants were well distributed in terms of their age.

4.2.3 Level of Education

The respondents were inquired to postulate their level of education. The Table 4.4 below summarizes the responses.

Table 4.4 Level of Education

| Years of Experience | Frequency | % Frequency |
|---------------------|-----------|-------------|
| Never enrolled | 6 | 3.8 |
| Tertiary | 87 | 55.4 |
| Secondary | 54 | 34.4 |
| Primary | 10 | 6.4 |

According to the findings most (55.4%) of the respondents indicated tertiary as their highest level of education, 34.4% indicated secondary 6.4% held primary certificate while 3.8% never enrolled to school. These findings infer that majority of the respondents were qualified educationally and therefore familiar with their duties.

4.2.4 Years of experience

The researcher sought to determine the years of experience of the respondents. The Table 4.5 below summarizes the responses.

Table 4.5 Years of experience

| Years of Experience | Frequency | % Frequency |
|---------------------|-----------|-------------|
| 1 to 5 years | 32 | 20.4 |
| 5 to 10 Years | 46 | 29.3 |
| 10 to 15 years | 44 | 28.0 |
| Over 15 years | 35 | 22.3 |

From the results majority (29.3%) of the respondents indicated that they had worked as caregivers and stakeholders of children with disabilities for 5 to 10 years, 28% had worked for 10-15 years while 22.3% and 20.4% had worked for over 15 years and 1 to 5 years respectively. Productivity in works was in need of on knowledge that is acquired preceding to

entry to the labour market or immediate in the career. This implies that most of the respondents of this study had worked for an ample time thus they were up-to-date with the facts that the study sought pertaining to their organization.

4.3 The role of stakeholder participation on accessibility of social services for children with disability in Kasarani Sub County.

4.3.1 Influence of stakeholder participation.

The study pursued to find out whether the respondents are conversant with the influence of the stakeholders on accessibility of social benefits for children with various disabilities. The findings are presented in table 4.6 below.

Table 4.6 Influence of stakeholder participation

| Stakeholder participation | Frequency | % Frequency |
|----------------------------------|------------------|--------------------|
| Yes | 132 | 84 |
| No | 25 | 16 |

From the result majority (84%) of the respondent settled with the statement that participation of stakeholder influence accessibility of social services for children with disability in Kasarani Sub County whereas only 16% disagreed with the statement.

4.3.2 Effect of stakeholder participation on accessibility of social services for children with disability

The study required to find out whether the respondents are conversant with the effects of the stakeholders participation on accessibility of social benefits for children with various disabilities. The results are exhibited in table 4.7 below.

Table 4.7 Effects of stakeholders' participation

| Statements | Strongly disagree | Disagree | Moderate | Agree | Strongly agree | Mean | Std deviation |
|--|-------------------|----------|----------|-------|----------------|------|---------------|
| Stakeholder's involvement and participation is crucial to successful and lasting change in social care. | 1 | 10 | 3 | 60 | 83 | 4.36 | 0.24 |
| Effective stakeholder management can help resolve many types of ethical dilemmas. | 11 | 1 | 3 | 57 | 85 | 4.30 | 0.24 |
| All successful change engages a wide network of stakeholders, including other health and social care organizations | 4 | 5 | 2 | 99 | 47 | 4.15 | 0.27 |
| The early identification of children with disabilities will enhance the survival of children. | 1 | 2 | 8 | 86 | 60 | 4.29 | 0.25 |
| Managing competing stakeholder interests is a primary management function. | 4 | 6 | 1 | 71 | 75 | 4.32 | 0.24 |

The study wanted to prove the degree to which respondents agreed with the above statements relating to the effect of stakeholder participation on accessibility of social services for children with disability. From the study results, majority of the respondents agreed with statement that Stakeholder's involvement and participation is essential to fruitful and lasting change in social care as shown by mean of 4.36, they also agreed that effective stakeholder administration can

help managers make a decision on many types of ethical dilemmas as shown by a mean of 4.30, another issue was that early identification of children with disabilities enhance the survival of children as shown by a mean of 4.29. The respondent also agreed that managing opposing stakeholder concerns is a key organization function as shown by a mean of 4.32 and finally most of respondent also agreed with the statement that all successful change engages a wide network of stakeholders, including other health and social care organizations as shown by a mean 4.15. The results of this scholarly work correspond with those of (Bandura, 1977) who suggest Stakeholder’s contribution and participation is fundamental to flourishing and enduring change in societal care.

4.4 The funding influence on accessibility of social services for Children with disability

The respondents were asked to specify the degree to which funding influence accessibility of social services for children with disability in Kasarani Sub County. Majority (52.2%) indicated that funding influence accessibility of social services for children with disability to a great extent, whereas only 1.9 % said it affects to a low extent. The table 4.8 below outlines the outcome.

Table 4.8 Responses on Funding influence

| Rating | Frequency | % Frequency |
|-------------------|-----------|-------------|
| Very great extent | 66 | 42.0 |
| Great extent | 82 | 52.2 |
| Moderate extent | 5 | 3.2 |
| Low extent | 3 | 1.9 |
| No extent at all | 1 | 0.6 |

4.4.1 The effect of funding on accessibility of social services for children with disability

Funding provides the ability to execute and implement activities or improves the service delivery.

Table 4.9 Effects of Funding

| Statements | Strongly disagree | Disagree | Moderate | Agree | Strongly agree | Mean | Std deviation |
|---|-------------------|----------|----------|-------|----------------|------|---------------|
| Charities can partner with government to deliver complementary services. | 12 | 12 | 27 | 66 | 40 | 3.70 | 0.14 |
| Funding of welfare is a normative issue. | 11 | 12 | 12 | 57 | 65 | 3.97 | 0.17 |
| Potential users cannot be excluded from using public goods. | 4 | 5 | 14 | 99 | 35 | 3.99 | 0.25 |
| Government funds local establishment through devolution | 11 | 12 | 8 | 86 | 40 | 3.84 | 0.21 |
| Charities fund services that may be supplementary responses to state failure. | 10 | 6 | 1 | 71 | 69 | 4.17 | 0.23 |

From the finding majority agreed with the above statements that charities associate with government to provide balancing services as shown by mean of 3.7, funding of welfare is a normative issue as shown by mean of 3.97, potential users cannot be excluded from using public goods as shown by mean of 3.99 and charities fund services that may be supplementary responses to state failure which is shown by a mean of 4.17. All the above cases were reinforced by a near to the ground standard mean of deviation which denotes that respondents were of alike judgment.

4.5 Capacity of caregivers of children with disability on the accessibility of social services

Capacity is the ability to handle the needs of children with disabilities. The ability is through learning or acquiring a skill.

4.5.1 The influence of capacity of caregivers on accessibility of social services.

Table 4.10 capacity of caregivers

| Responses | Frequency | % Frequency |
|-----------|-----------|-------------|
| Yes | 100 | 63.7 |
| No | 57 | 36.3 |

The finding shows that majority (63.7%) of the respondent agreed with the statement that capacity of caregivers influence accessibility of social services for children with disability in Kasarani Sub County whereas (36.3%) said capacity of caregivers does not influence.

4.5.2 The effect of capacity of caregivers on accessibility of social services for children with disability

Learning and having ability can have a great impact. The impact can be positive or negative depending on how ones use the skill or knowledge.

Table 4.11 Effects of capacity of caregivers

| Statements | Strongly disagree | Disagree | Moderate | Agree | Strongly agree | Mean | Std deviation |
|---|-------------------|----------|----------|-------|----------------|------|---------------|
| Taking care of a child with a disability is one of the most heart straining experiences a parent can go through. | 1 | 7 | 27 | 61 | 61 | 4.11 | 0.18 |
| Husband and wife relationship can suffer due to much time spend with the disabled child by one spouse. | 2 | 12 | 12 | 59 | 72 | 4.19 | 0.20 |
| The caregiver provides reprieve and emotional care for the parents and other members of the family who are involved in the care. | 4 | 5 | 14 | 90 | 44 | 4.05 | 0.23 |
| The vast demands and responsibilities that accompany Taking care of a child with special needs is difficult for members of the family to handle on their own. | 11 | 5 | 7 | 81 | 53 | 4.02 | 0.22 |
| A caregiver provides a comfort support for the parents to lean on whenever they begin to feel out of energy and stressed. | 5 | 6 | 2 | 71 | 73 | 4.28 | 0.24 |

The research examined the level at which respondents decided on the above statements relating to effect of capacity of caregivers on accessibility of social services for children with disability; Majority agreed with all the statements as shown by their means; Taking care of a child with a disability is one of the most heart injuring experiences a parent can experience,

this statement was supported by a mean of 4.11, Husband and wife relationship can suffer due to much time spent with the disabled child by either one of the spouse, this was shown by a mean of 4.19 whereas caregiver provides a comfort support for the parents to lean on whenever they begin to feel out of energy and stressed was shown by a mean of 4.35.

The study further revealed that caregiver provides reprieve and emotional care for the parents and other members of the family who are involved in the care as shown by a mean of 4.28. The study findings are in line (Bonita et al.1987), the caregiver provide reprieve and emotional care for the parents who are involved in the care taking.

4.6 influence of other local community organizations on accessibility of social benefits for children with various disabilities

The respondents were asked whether the roles played by local community based organizations influences the accessibility of social services for children with disability in Kasarani Sub County. The results show that majority (78.2%) of the respondent agreed with the statement whereas 21.8% disagreed. The figure below summarizes the result.

Table 4.12 Responses frequencies

| Responses | Frequency | % Frequency |
|-----------|-----------|-------------|
| Yes | 123 | 78.2 |
| No | 34 | 21.8 |

4.6.1 Effect of CBO's partnership on accessibility of social services for children with disability

The study wanted to find out whether the respondents are conversant on the effects of CBO partnership on accessibility of social benefits for children with various disabilities. The findings are displayed in table 4.13 below.

Table 4.13 Effects of CBO Partnerships

| Statements | Strongly disagree | Disagree | Moderate | Agree | Strongly agree | Mean | Std deviation |
|--|-------------------|----------|----------|-------|----------------|------|---------------|
| Local community based organizations work determine the effectiveness of a development intervention. | 2 | 6 | 21 | 51 | 77 | 4.24 | 0.20 |
| A good local community based organizations participation program enables interested party in, or affected by a decision, have an opportunity to influence the accessibility of social services for children with disability. | 5 | 9 | 18 | 69 | 56 | 4.03 | 0.19 |
| Satisfying key local community based organizations requirement is central to achieving access of social services. | 9 | 9 | 4 | 81 | 54 | 4.03 | 0.22 |
| Local community based organizations involvement in formulation of the strategies in the strategic plans provides invaluable support during the implementation of the activities. | 11 | 15 | 7 | 51 | 73 | 4.02 | 0.19 |

The research needed to establish the effect of CBO's partnership on accessibility of social services for children with disability. From the research findings mainstream respondents indicated that the following statement have effects on accessibility of social services; Local

community based organizations work determines the effectiveness of a development intervention as shown by mean of 4.24, good local community based organizations participation program enable concerned party to have an opportunity to influence the accessibility of social services for children with disability presented by mean of 4.03, involvement in formulation of the strategies in the strategic plans provides invaluable support during the implementation of the activities shown by mean of 4.02 and Satisfaction is central to achieving access of social services as shown by a mean of 4.03. All the above cases were supported by a low standard mean of deviation which implies that respondents were of similar opinion.

4.7 Accessibility of social services.

The study sought to find out whether the respondents are acquainted with the idea of accessibility of social services. The findings are conferred in table 4.14 below.

Table 4.14 Accessibility of Social services

| Statements | Strongly disagree | Disagree | Moderate | Agree | Strongly agree | Mean | Std deviation |
|---|--------------------------|-----------------|-----------------|--------------|-----------------------|-------------|----------------------|
| Stakeholder participation plays an important role on accessibility of social services for children with disability in Kasarani Sub county. | 3 | 5 | 7 | 77 | 65 | 4.25 | 0.23 |
| Funding influences accessibility of social services for Children with disability in the informal settlements in Kasarani Sub county to a very great extent. | 17 | 1 | 2 | 59 | 78 | 4.15 | 0.22 |
| Capacity of caregivers influences accessibility of social services for children with disability to a great extent. | 3 | 3 | 9 | 90 | 52 | 4.18 | 0.25 |
| Local community organizations highly influence accessibility of social benefits for children with various disabilities. | 12 | 2 | 7 | 89 | 47 | 4.00 | 0.23 |

The study sought to establish the extent to which respondents agreed with the above statements relating to accessibility of social services. From the study results, majority of the respondents agreed with statement that Stakeholder participation plays an important role on accessibility of social services for children with disability in Kasarani Sub County. as shown by a mean of 4.25, they also agreed that Funding influences accessibility of social services for Children with disability in the informal settlements in Kasarani Sub county to a great degree as shown by a mean of 4.15, another issue was on capacity of caregivers influence on accessibility of social services for children with disability to a countless scope, most of respondents agreed with this statement as shown by a mean of 4.18.

The respondent also agreed that local community organizations highly influence accessibility of social benefits for children with various disabilities as revealed by a mean of 4.00. The conclusions of this study settles with those of (Clements, 1995) who suggests social change is compelled by conflict, and thus lack of clear conflict is a sign of exploitation with periods of change interrupting long periods of stability.

4.8 Regression Analysis

A multiple regression model was employed to classify the factors influencing accessibility of social services in informal settlements. The study adopted the following regression equation to establish the relationship between variables $Y = a + b_1X_1 + b_2X_2 + b_3X_3 + b_4X_4 + e$; where Y = accessibility to Social Services in the informal settlement, a =the constant of regression, b_1 , b_2 , b_3 , and b_4 = are the regression coefficients/weights of the following respective independent variables; X_1 = Stakeholder's participation, X_2 = Funding Agencies, X_3 = Capacity of caregivers and X_4 = Other Local Community Based Organizations. All the four independent variables were measured using the responses on each of the variables obtained from the respondents.

The results are shown in Table 4.15 below.

Table 4.15 Regression Coefficients

| Model | Unstandardized Coefficients | | Standardized Coefficients Beta | t | Sig. |
|---|-----------------------------|------------|-----------------------------------|-------|------|
| | B | Std. Error | | | |
| 1 (Constant) | .889 | 0.36 | | 2.47 | .002 |
| Stakeholder's participation (X ₁) | .555 | .216 | 0.444 | 2.546 | .003 |
| Funding Agencies (X ₂) | .187 | .162 | 0.125 | 1.154 | .000 |
| Capacity of caregivers (X ₃) | .231 | .128 | 0.333 | 1.804 | .001 |
| Other Local Community Based Organizations (X ₄) | .117 | 0.111 | 0.345 | 1.054 | .000 |

a) Predictors: (Constant), Stakeholder's participation, Funding Agencies, Capacity of caregivers and Other Local Community Based Organizations.

b) Dependent Variable: Accessibility to Social Services in the informal settlement.

The ascertained regression equation was

$$Y = 0.889 + 0.555X_1 + 0.187X_2 + 0.231X_3 + 0.117X_4$$

The regression equation overhead has recognized that holding all factors (Stakeholder's participation, Funding Agencies, Capacity of caregivers and Other Local Community Based Organizations) constant, other factors influencing accessibility of social services in informal settlements will be 0.889. The findings also displays that seizing all other independent variables at zero, a unit surge in stakeholder's participation will tip to a 0.555 increase in the tallies of the accessibility of Social Services in the informal settlement. An entity increase in funding agencies will lead to a 0.187 increase in accessibility of Social Services in the informal settlement. Additionally a unit increase in capacity of caregivers will pointer to a 0.231 increase in accessibility of Social Services in the informal settlement and entity escalation in other local community based organizations will lead to a 0.117 increase in the scores of the in accessibility of Social Services in the informal settlement. This infers that Stakeholder's participation influences the accessibility of Social Services in the informal

settlement most followed by Capacity of caregivers, Funding Agencies and Other Local Community Based Organizations. The study also founded a noteworthy connection between the accessibility of Social Services in the informal settlement and the independent variables; Stakeholder’s participation ($p=0.003<0.05$), Funding Agencies ($p=0.000<0.05$), Capacity of caregivers ($p= 0.001<0.05$) While the coefficient for Other Local Community Based Organizations was ($p=0.000<0.05$). The regression coefficients were tested for significance at $\alpha=0.05$. Significance occurs at p-values less than 0.05. From the above results, all the predictors are good predictors for the accessibility of Social Services in the informal settlement. This finding is consistent with that of (Bandura, 1977) who found out that accessibility of Social Services in the informal settlement is dependent on Stakeholder’s participation.

Table 4.16 Regression Model Summary

| Model | R | R Square | Adjusted R Square | Std. Error of the Estimate |
|-------|--------------------|----------|-------------------|----------------------------|
| 1 | 0.863 ^a | 0.745 | 0.722 | 0.05 |

- a) Predictors: (Constant), Stakeholder’s participation, Funding Agencies, Capacity of caregivers and Other Local Community Based Organizations.
- b) Dependent Variable: Accessibility to Social Services in the informal settlement.

The report expended the R square. The R Square is called the coefficient of determination and tells us how the accessibility to Social Services in the informal settlement varied with Stakeholder’s participation, Funding Agencies, Capacity of caregivers and Other Local Community Based Organizations. The four independent variables that were deliberated on explain 74.5% of the factors influencing accessibility of social services in informal settlements as represented by R Squared (Coefficient of determinant). This consequently means that other factors not studied in this research provide 25.5% of the factors distressing

accessibility of Social Services in the informal settlement. The results of this study concur with (Clark, 1999) who found that Capacity of caregivers play a significant role in improving accessibility of Social Services in the informal settlement.

Table 4.17 ANOVA of factors influencing accessibility of social services in informal settlements

| Model | Sum of Squares | Df | Mean Square | F | Sig. |
|--------------|----------------|-----|-------------|-------|--------------------|
| 1 Regression | 675.56 | 4 | 168.89 | 55.43 | .0011 ^a |
| Residual | 463.24 | 152 | 3.047 | | |
| Total | 1138.8 | 156 | | | |

This express that the regression model has a less than 0.05 likelihood (probability) of giving a wrong prediction. This thus means that the regression model has a confidence level of above 95% hence high reliability of the results. Using the F-test statistic, the sample F value had a value of 3.662 with critical f value at $\alpha = 0.05$, 5 degrees of freedom for the numerator and 7 degrees of freedom for the denominator; this implies that the regression model is statistically significant since $55.43 > 11.75$. According to Beamon (1999), this is a model that can be used for estimating purposes.

4.9 Summary

The findings from analysis of the data from the key informants are provided herein and interpretation was articulated from the four study objectives touching on Influence of stakeholders, Funding, Capacity of caregivers and other community Based organizations influence on accessibility of social services.

CHAPTER FIVE
SUMMARY OF FINDINGS, DISCUSSION, CONCLUSION AND
RECOMMENDATIONS

5.1 Introduction

The analysis and data collected depicted the summaries, conclusion and recommendations in this section. The accounts were based on the objectives of the study. The study sought to examine the role of stakeholder participation on accessibility of social services for children with disability in Kasarani Sub county, to determine the influence of funding on accessibility of social services for Children with disability, to assess the capacity of caregivers of children with disability on the accessibility of social services in the informal settlement and to investigate the influence of other local community organizations on accessibility of social benefits for children with various disabilities.

5.2 Summary of the Findings

This unit presents the key results as considered under each objective in the study. The findings on the demographic knowledge of the respondents greatly enhanced the reliability of the research findings. The study findings indicate that the mass of the respondents had a good experience on matters of children living with disabilities, coupled with the relevant education level needed to enhance the reliability of the information that they provided.

5.2.1 Stakeholder participation

The study investigated the role of stakeholder participation on accessibility of social services for children with disability accessibility in Kasarani Sub County, the research noted that participation of stakeholders influences much on accessibility of social services for children with disability in Kasarani Sub County. Further the research established Stakeholder's

involvement and participation is critical to fruitful and lasting alteration in social care and also it noted that a successful change engages a wide network of stakeholders, including other health and social care organizations. Predictions from regression model showed that a unit increase in stakeholder's participation will lead to an upsurge in the grades of the accessibility of Social Services in the informal settlement.

5.2.2 Influence of funding

Investigation on Influence of funding on accessibility of social services for Children with disability in the informal settlements in Kasarani Sub County showed that funding influence accessibility of social services for children with disability in Kasarani Sub County to a great extent. Also it was noted that funding of welfare is a normative issue as majority of the respondent said so. The study revealed further that aid organization can associate with government to deliver complementary services and also social services were noted to be so important to every individual as one cannot be excluded from using them, thus funding is needed. Predictions from regression model predicted that a unit increase in funding will lead to an upsurge in accessibility of Social Services in the informal settlement. Also the study established a significant relationship between the accessibility of Social Services in the informal settlement and the funding agencies.

5.2.3 Capacity of caregivers

The study revealed that capacity of caregiver's influences accessibility of social services for children with disability in Kasarani Sub County to a great extent, predictions from regression model predicted that a unit upsurge in capacity of caregivers will lead to a surge in accessibility of Social Services in the informal settlement. Also the study established a noteworthy affiliation between the accessibility of Social Services in the informal settlement

and the capacity of caregivers. Also the body of knowledge established that taking care of a child with a disability is one of the most heart jerking experiences a parent can go through and therefore the caregivers plays an important role of providing emotional care for those parents and other members of the family who are involved in the care.

5.2.4 Other local community organizations

Finally the study sought to investigate the influence of other local community organizations on accessibility of social benefits for children with various disabilities. From the finding the study established that the roles played by local community based organizations influences the accessibility of social services for children with disability in Kasarani Sub County, further the study noted that local community based organizations work determine the effectiveness of a development intervention. Also it was noted that local community based organizations involvement in formulation of the strategies in the strategic plans provides invaluable support during the implementation of the activities concerning care giving. From the regression model it was predicted that an increase in local community based organizations work will lead to a definite increase in the accessibility of social services for children with disability. Further the study established that there is substantial relationship connecting the accessibility of Social Services in the informal settlement and of other local community organizations.

5.3 Discussion of findings

This segment discusses the key findings as considered under each objective;

5.3.1 Stakeholder participation

This study sought to examine the role of stakeholder participation on accessibility of social services for children with disability in Kasarani Sub County. The study has revealed

participation of stakeholders influences much on accessibility of social services for children with disability in Kasarani Sub County. This finding conforms to that of (Harrison & St. John, 1996) who noted that Different stakeholders hold some level of answerability within their geographical areas of coverage. Some come in through corporate social responsibilities and some as part of their mandate and in this case the government and non-government organizations. Further the study agrees with the findings from (Ansoff, 1984) who established that stakeholder theory has a possible assimilation theme for the business and society discipline.

5.3.2 Influence of funding

According to (Salamon, 1987) funding is the undertaking of conveying financial resources, usually in the form of money, or supplementary values such as effort or time, to finance a need, program, and project, typically by an organisation or government. Usually, this word is used when a firm uses its in-house reserves to gratify its necessity for cash, while the term ‘financing’ is used when the firms acquires capital from external sources. The study establishes that unit increase in funding leads to an increase in accessibility of Social Services in the informal settlement. These findings are in line with those of (Weisbrod, 1988) who found that government and charitable funding relationships for the delivery of social services have been both supplementary and complementary.

5.3.3 Capacity of caregivers

The study revealed that capacity of caregiver’s influences accessibility of social services for children with disability in Kasarani Sub County to a great extent also it established that a unit increase in capacity of caregivers definitely leads to an increase in accessibility of Social Services in the informal settlement. These results coincide to those of (Bandura, 1977) who found that social change is driven by conflict, and thus lack of clear conflict is a sign of

exploitation with periods of change interrupting long periods of stability. Further also (Ahmed and Anwar Hussain et al, 1994) noted that the child may suffer from a permanent disability which involves ongoing assistance with activities of daily living.

5.3.4 Other local community organizations

Also the study sought to investigate the influence of other local community organizations on accessibility of social benefits for children with various disabilities. From the finding the study established that the roles played by local community based organizations influences the accessibility of social services for children with disability in Kasarani Sub County, further the study noted that local community based organizations work determine the effectiveness of a development intervention. These finding are in line with (Clark, 1999), who propounded that Community-based organizations are not for income, associations on a local and national level, facilitating community efforts for community development also (Uphoff's, 1984) who said that Road construction from end to end local communities play meaningful role in rural development as it the intention that many instigators setup connection between road construction and improvement /poverty alleviation.

5.4 Conclusions

This study has provided a comprehensive review of the factors influencing accessibility of social services in informal settlements where a case of children living with disabilities in Kasarani sub county, Kenya was used in an endeavor to respond on the research question and meet the research objective.

The study concludes that there is substantial relationship flanked by the accessibility of Social Services in the informal settlement and the Stakeholder's participation, Funding Agencies, Capacity of caregivers and the Other Local Community Based Organizations. Further the

study has established that involvement and participation of stakeholders is essential for fruitful and enduring change in social care and therefore the study clearly notes that participation of stakeholders influences much on accessibility of social services for children with disability in Kasarani Sub County.

Funding can be said to be providing financial resources to finance a need, project or Program in order to achieve a desired objective. This study establishes that a unit increase in funding leads to an increase in accessibility of Social Services in the informal settlement and therefore funding has a great influence on accessibility of social services for children with disability in Kasarani Sub County.

Further the study concludes that capacity of caregiver's influences accessibility of social services for children with disability in Kasarani Sub County to a great extent. Also it establishes that Taking care of a child with a disability is one of the most heart straining experiences a parent can go through. Local Community organization are defined to be non-state actors who come in to provide services ostensibly meant to be provided by Government in the areas of Education, Health and Economic empowerment to the communities. The study has revealed that the roles played by local community based organizations influences the accessibility of social services for children with disability in Kasarani Sub County to a great extent.

5.5 Recommendations

Grounded on the conclusions this study recommends the following;

1. More homecare should be established in the informal settlements in the country so as to help those children with disability.
2. The government, as a policy intervention, should review the funding of homecare program by fully extending the support to all local community organizations in informal settlements.
3. The government should organize more training on care giving. This will enable many people acquire skills on care giving hence enhancing the capacity of caregivers.
4. Lastly the study recommends that government should also include Local community based organizations in formulation of the strategies in the strategic plans so as for them to provide support during the execution of the activities.

5.6 Areas for Further Study

The under mentioned are proposed areas for further study:

1. More comprehensive studies should be undertaken to include a variety of informal settlements in order to ascertain whether or not the problem of children with disability as a result of socio-economic factors transcends other informal settlements as this study only covered only Kasarani Sub County.
2. Influence of misconception based on disabilities issues and accessibility to social services.

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APPENDICES

APPENDIX 1: LETTER OF TRANSMITTAL

Simon Ngacha Njeri

P.O Box 13125-00200

Nairobi.

Telephone: 0720393738

Email:snnjeri@gmail.com

Dear Participant,

My name is Simon Ngacha Njeri, Reg. No. L50/76247/2014, Am a post-graduate student at the School of Continuing and Distance Education, University of Nairobi conducting a research titled “FACTORS INFLUENCING ACCESSIBILITY OF SOCIAL SERVICES IN THE INFORMAL SETTLEMENTS IN KENYA”.

You have been nominated to form part of the study. Kindly assist by filling in the attached Questionnaire. The information given will be treated in strict confidence and will be purely used for academic purposes. Do not indicate your names or details on questionnaire. Your assistance and cooperation will be highly appreciated

Thank you

Yours

Simon Ngacha Njeri

APPENDIX 2: RESEARCH QUESTIONNAIRE

Research Questionnaire

Please answer all questions honestly according to the given instructions

Section: A: Demographic Information (Tick where appropriate (√))

1. Gender

Male () female ()

2. Age bracket

Below 18 ()

Between 18-35 ()

Between 36-49 ()

Over 50 ()

3. Please indicate the highest level of education attained? (Tick as applicable)

Primary ()

Secondary ()

Tertiary ()

Never enrolled ()

4. Work experience.

1 to 5 years ()

5 to 10 Years ()

10 to 15 years ()

Over 15 years ()

SECTION B: STAKEHOLDER PARTICIPATION

5. Does stakeholder participation influence accessibility of social services for children with disability in Kasarani Sub County?

Yes ()

No ()

If yes please explain how

.....
.....

6. Indicate your level of agreement relating to the following statements relating to effect of stakeholder participation on accessibility of social services for children with disability in Kasarani Sub County? (scale 1 = strongly disagree 2= disagree 3 = moderate, 4 = agree and 5= strongly agree)

| Statements | 1 | 2 | 3 | 4 | 5 |
|--|---|---|---|---|---|
| Stakeholder's involvement and participation is crucial to successful and lasting change in social care. | | | | | |
| Effective stakeholder management can help managers resolve many types of ethical dilemmas. | | | | | |
| All successful change engages a wide network of stakeholders, including other health and social care organizations | | | | | |
| The early identification of children with disabilities will enhance the survival of children. | | | | | |
| Managing competing stakeholder interests is a primary management function. | | | | | |

7. Suggest ways of improving stakeholder participation

.....
.....

SECTION C: FUNDING

8. To what extent does funding influence accessibility of social services for children with disability in Kasarani Sub County?

- Very great extent ()
- Great extent ()
- Moderate extent ()
- Low extent ()
- No extent at all ()

9. Indicate your level of agreement relating to the following statements relating to effect of funding on accessibility of social services for children with disability in Kasarani Sub County? (scale 1 = strongly disagree 2= disagree 3 = moderate, 4 = agree and 5= strongly agree)

| Statements | 1 | 2 | 3 | 4 | 5 |
|---|----------|----------|----------|----------|----------|
| Charities can partner with government to deliver complementary services. | | | | | |
| Funding of welfare is a normative issue. | | | | | |
| Potential users cannot be excluded from using public goods. | | | | | |
| Government funds local establishment through devolution | | | | | |
| Charities fund services that may be supplementary responses to state failure. | | | | | |

SECTION D: CAPACITY OF CAREGIVERS

10. Does the capacity of caregivers influence accessibility of social services for children with disability in Kasarani Sub County?

Yes ()

No ()

11. Indicate your level of agreement relating to the following statements on effect of capacity of caregivers on accessibility of social services for children with disability in Kasarani Sub County? (scale 1 = strongly disagree 2= disagree 3 = moderate, 4 = agree and 5= strongly agree)

| Statements | 1 | 2 | 3 | 4 | 5 |
|---|---|---|---|---|---|
| Taking care of a child with a disability is one of the most heart straining experiences a parent can go through. | | | | | |
| Husband and wife relationship can suffer due to much time spend with the disabled child by one spouse. | | | | | |
| The caregiver provides reprieve and emotional care for the parents and other members of the family who are involved in the care. | | | | | |
| The vast demands and responsibilities that accompany Taking care of a child with special needs is difficult for members of the family to handle on their own. | | | | | |
| A caregiver provides a comfort support for the parents to lean on whenever they begin to feel out of energy and stressed. | | | | | |

SECTION E: INFLUENCE OF OTHER LOCAL COMMUNITY ORGANIZATIONS

12. Does the Roles played by local community based organizations influence accessibility of social services for children with disability in Kasarani Sub County?

Yes ()

No ()

If yes please explain how

.....

.....

13. Indicate your level of agreement relating to the following statements on effect of CBO’s partnership on accessibility of social services for children with disability in Kasarani Sub County? (scale 1 = strongly disagree 2= disagree 3 = moderate, 4 = agree and 5= strongly agree)

| Statements | 1 | 2 | 3 | 4 | 5 |
|---|---|---|---|---|---|
| Local community based organizations work determine the effectiveness of a development intervention. | | | | | |
| A good local community based organizations participation program enable interested party in, or affected by a decision, have an opportunity to influence the accessibility of social services for children with disability. | | | | | |
| Satisfying key local community based organizations requirement is central to achieving access of social services. | | | | | |
| Local community based organizations involvement in formulation of the strategies in the strategic plans provides invaluable support during the implementation of the activities. | | | | | |

| | | | | | |
|---|--|--|--|--|--|
| Local community based organizations work determine the effectiveness of accessibility of social services. | | | | | |
|---|--|--|--|--|--|

SECTION F: ACCESSIBILITY OF SOCIAL SERVICES.

14. Indicate using a tick the extent to which you agree with each of the following statement about the factors influencing accessibility of social services for children with disability in Kasarani Sub County? (scale 1 = strongly disagree 2= disagree 3 = moderate, 4 = agree and 5= strongly agree

| Statements | 1 | 2 | 3 | 4 | 5 |
|---|----------|----------|----------|----------|----------|
| Stakeholder participation plays an important role on accessibility of social services for children with disability in Kasarani Sub county. | | | | | |
| Funding influences accessibility of social services for Children with disability in the informal settlements in Kasarani Sub county to a very great extent. | | | | | |
| Capacity of caregivers influences accessibility of social services for children with disability to a great extent. | | | | | |
| A local community organization highly influences accessibility of social benefits for children with various disabilities. | | | | | |

THANK YOU FOR THE TIME SPENT

APPENDIX 3: WORK PLAN

| Research Action | 2016 | | | | | | | |
|---|------|-----|-----|-------|-----|------|------|-----|
| | Jan | Feb | Mar | April | May | June | July | Aug |
| Allocation of Supervisor | | | | | | | | |
| Research Seminar | | | | | | | | |
| Approval of Topic | | | | | | | | |
| Development of Proposal | | | | | | | | |
| Defense of Proposal | | | | | | | | |
| Proposal Correction | | | | | | | | |
| Data Collection | | | | | | | | |
| Data Entry and Analysis | | | | | | | | |
| Project report writing | | | | | | | | |
| Presentation of Final Project 2 | | | | | | | | |
| Correction of final 2 Project | | | | | | | | |
| Printing, Filing and saving on external discs | | | | | | | | |
| Graduation | | | | | | | | |

APPENDIX 4: RESEARCH AUTHORIZATION LETTER



NATIONAL COMMISSION FOR SCIENCE, TECHNOLOGY AND INNOVATION

Telephone: +254-20-2213471,
2241349, 3310571, 2219420
Fax: +254-20-318245, 318249
Email: dg@nacosti.go.ke
Website: www.nacosti.go.ke
when replying please quote

9th Floor, Utalii House
Uhuru Highway
P.O. Box 30623-00100
NAIROBI-KENYA

Ref. No.

Date:

NACOSTI/P/16/75134/12712

22nd July, 2016

Simon Ngacha Njeri
University of Nairobi
P.O. Box 30197-00100
NAIROBI.

RE: RESEARCH AUTHORIZATION

Following your application for authority to carry out research on "*Factors influencing accessibility of social services in informal settlements. A case of children living with disabilities in Kasarani Sub County, Kenya,*" I am pleased to inform you that you have been authorized to undertake research in **Nairobi County** for the period ending **22nd July, 2017**.

You are advised to report to **the County Commissioner and the County Director of Education, Nairobi County** before embarking on the research project.

On completion of the research, you are expected to submit **two hard copies and one soft copy in pdf** of the research report/thesis to our office.


BONIFACE WANYAMA

FOR: DIRECTOR-GENERAL/CEO

Copy to:

The County Commissioner
Nairobi County.

The County Director of Education
Nairobi County.

APPENDIX 5: RESEARCH CLEARANCE PERMIT

CONDITIONS

- 1. You must report to the County Commissioner and the County Education Officer of the area before embarking on your research. Failure to do that may lead to the cancellation of your permit**
- 2. Government Officers will not be interviewed without prior appointment.**
- 3. No questionnaire will be used unless it has been approved.**
- 4. Excavation, filming and collection of biological specimens are subject to further permission from the relevant Government Ministries.**
- 5. You are required to submit at least two(2) hard copies and one(1) soft copy of your final report.**
- 6. The Government of Kenya reserves the right to modify the conditions of this permit including its cancellation without notice**

REPUBLIC OF KENYA
NACOSTI
National Commission for Science, Technology and Innovation
RESEARCH CLEARANCE PERMIT
10235
Serial No. A
CONDITIONS: see back page

THIS IS TO CERTIFY THAT:

MR. SIMON NGACHA NJERI
of UNIVERSITY OF NAIROBI, 13125-200
NAIROBI, has been permitted to conduct
research in Nairobi County
on the topic: FACTORS INFLUENCING
ACCESSIBILITY OF SOCIAL SERVICES IN
INFORMAL SETTLEMENTS. A CASE OF
KASARANI SUBCOUNTY, KENYA
for the period ending:
22nd July, 2017

Permit No. : NACOSTI/P/16/75134/12712
Date Of Issue : 22nd July, 2016
Fee Received : Ksh 1000

(Signature)
Applicant's Signature

(Signature)
Director General
National Commission for Science, Technology & Innovation