

# **Lived experiences, aspirations and engagement in livelihoods of young people with disabilities in Kenya: a peer-led participatory research**

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## List of acronyms

<b>CBPR</b>	Community-based participatory research
<b>CSO</b>	Civil society organisation
<b>BA</b>	British Academy
<b>ILO</b>	International Labour Organization
<b>IDI</b>	In-depth Interview
<b>FGD</b>	Focus Group Discussion
<b>GIS</b>	Geographic Information System
<b>GPS</b>	Global Positioning System
<b>NACOSTI</b>	National Council for Science, Technology and Innovation
<b>OPD</b>	Organisation of people with disabilities
<b>UDPK</b>	United Disabled Persons of Kenya
<b>KNBS</b>	Kenya National Bureau of Statistics
<b>NCAPD</b>	National Coordinating Agency for Population and Development
<b>NCPWD</b>	National Council for Persons with Disabilities

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# Executive summary

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## Background

The International Labour Organization (ILO) defines livelihoods as ‘the capabilities, materials and social resources required for a means of living’<sup>1</sup>. These include educational and training services, social capital services and economic strengthening services. For many people living with disabilities in low- and middle-income settings, access to these resources remains limited. Many people continue to live in poverty with little access to healthcare services, education, suitable housing, and employment.

Low access to education can further limit how people engage in the labour market. In addition, people with disabilities often experience stigma and discrimination, which excludes them from full participation in economic and social activities. People with particular impairment types, multiple or severe disabilities, and other characteristics, for example women or young people, may be especially likely to experience poor livelihood outcomes.

The study sought to build the evidence base around the lived experiences, aspirations, and challenges faced by youth with disabilities in accessing livelihood opportunities in Kenya. It considered the lives that these young people envision and aspire to, and the barriers and vulnerabilities which they believe are likely to stop them from realising their aspirations. Specifically, the study sought to answer the following research questions:

1. What are the lived experiences of youth with disabilities and how are they currently engaged in livelihoods?
2. What are the aspirations of youth with disabilities in relation to access to livelihoods and what barriers prevent them from realising their aspirations?
3. How can youth with disabilities be included in policy dialogues around the implementation of Sustainable Development Goal 8: decent work and economic growth?

## Why is this study important?

This study provides vital empirical evidence on how young women and men with different disabilities in different settings envision and aspire to live, and the barriers they experience that they believe are likely to stop them realising their aspirations. Understanding their ambitions and expectations, particularly in relation to livelihood, and how they are mediated through barriers and vulnerabilities related to disability, gender, and other issues, are vital for policymakers who desire to develop inclusive education and livelihood policies and allocate resources accordingly.

The study also leverages existing partnerships to promote the inclusion of young men and women with disabilities into local and national policy dialogues around the implementation of Sustainable Development Goal 8: decent work and economic growth. Youth engagement in evidence generation policy dialogues will contribute towards Kenya's vision of enabling youth with disabilities to actively participate in social-economic life, specifically in the areas of service provision and access to employment, a key plank in the achievement of Kenya's Vision 2030 agenda.

## How did we conduct the research?

This study was conducted in informal settlements in Nairobi city and rural parts of Homa Bay County. The research followed a community-based participatory research (CBPR) methodology to data collection and analysis. We collected both qualitative and quantitative data in this study. Qualitative data was collected through 50 in-depth interviews with youth with disabilities and documentary photography. Quantitative data were collected through geographic information system (GIS).

## Study findings

This study of 50 youth with various impairments found that nearly half (22 respondents) did not have secondary education. Only seven were formally employed, and 15 were self-employed. They had diverse aspirations and a strong desire for self-reliance. However, they faced challenges in education. The challenges included learning at various levels not being disability inclusive and accessible, lack of funds to peruse further education, and not getting into science, engineering and mathematic related subjects, which undermined their ability to acquire the set of skills required for formal employment.

They also faced challenges at workplaces. These included discriminatory employment practices, inaccessible workplaces, and inability to invest in assistive devices. Environmental barriers, particularly public transport, and sexual assault were significant factors in their exclusion in livelihood activities, especially for female youth with disabilities. To improve learning opportunities and livelihoods, they suggested strengthening and mainstreaming disability inclusive education, accessible work environments, and government social protection programmes.

## Recommendations to improve livelihoods opportunities, made by youth with disabilities and stakeholders

- Strengthen accountability mechanisms for institutions, including independent commissions and quasi-government structures, such as the National Council for Persons with Disabilities (NCPWD), to ensure disability inclusion and promote disability quotas. Examine hiring practices in the public sector to ensure disability quotas are met and promote more people with disabilities into policymaking positions of leadership.
- Disability awareness should be integrated across the government agenda and made a mandatory part of the training of all civil servants.



- The public and private sector should make deliberate efforts to employ youth with disabilities over and above the relevant Kenyan employment policies.
- Implementation of the 5% employment quota for people with disabilities, which many organisations are still at the formative stages or yet to start. Even though the achievement of this percentage should be gradual, some organisations are doing the bare minimum to be seen to be complying.
- Efforts to improve the accessibility of public transport need to be made, with a focus on making it safe for women.
- Document and promote inclusive employment. For example, accessible and inclusive interviews practices, disability awareness amongst employees and employers, and flexible working hours.
- The government should roll out information management systems that cater to the diverse accessibility needs of youth with disabilities. They need to increase awareness of the availability of grants and loans, and create an accessible, transparent application system. Government commitments around inclusive education need to be met and upheld by ensuring modern, adapted learning materials are available and accessible.
- The government should promote increased integrated education. Integrating learners with and without disabilities would enable them to learn and appreciate each other and, subsequently, eliminate existing stereotypes about disability, which leads to stigma and discrimination.
- The government should increase its bursaries for learners with disabilities, promote awareness about them, and make the application system simpler.

## Introduction

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The International Labour Organization (ILO) defines livelihoods as ‘the capabilities, materials and social resources required for a means of living’<sup>2</sup>. These include educational and training services, social capital services and economic strengthening services. For many people living with disabilities in low- and middle-income settings, access to these resources remains limited. Many people continue to live in poverty with little access to healthcare, education, suitable housing, and employment<sup>3,4</sup>. Low levels of education and disability stigma can further limit how people with disabilities engage in the labour market and livelihood activities<sup>5</sup>. People with severe disabilities, specific types of impairments and women with disabilities are particularly disadvantaged in accessing economic and livelihoods opportunities<sup>6</sup>.

There are few reliable data on the employment status of people with disabilities in Kenya. A national survey conducted in 2015/16 found that 54.7% of people with disabilities in Kenya experienced difficulties in engaging in economic activity, and people in rural areas reported more difficulties than those in urban areas<sup>7</sup>.

The key barriers that have been linked to low employment rates of people with disabilities in the country include low educational attainment, lack of relevant skills, negative attitudes of employers, and a lack of supportive legislations and reasonable accommodation<sup>8</sup>. Because of these challenges, many people with disabilities are forced to work outside the formal labour market and engage in low-skilled, low-waged jobs with few opportunities for career progression<sup>9</sup>. The situation is often worse for youth with disabilities.

The 2019 Kenya Census estimated prevalence of disability at 2.2%, which means 0.9 millions of Kenyans live with some kinds of disability<sup>10,11</sup>. The national survey of people with disabilities conducted in 2007 reported that:

- 67% of participants had primary school education only
- 19% had secondary education
- 2% had university degrees
- 39% of those who had dropped out of school reported that they had no money to continue education.

With regards to economic activity:

- 16% of people with disabilities surveyed worked for pay
- 33% worked in family business
- 24% did not work at all

The proportions of those who worked for pay were particularly low among women (7.5%), people in rural areas (9%) and people aged 15-24 years (8%)<sup>12</sup>.

The findings were similar to the studies in other settings, which suggested that youth with disabilities and women experienced significant challenges in accessing employment opportunities<sup>13,14</sup> and were often unemployed and dependent on others<sup>15,16</sup>.

The Kenyan government has adopted a number of progressive legislative and policy frameworks that aim to address the economic, social, cultural, political, and civil rights of people with disabilities. These include the ratification of the United Nations Convention on the Rights of Persons with Disabilities (CRPD<sup>17</sup>) in 2008<sup>18</sup>, followed by the amendment and enactment of the CRPD principles in the Kenya Persons with Disabilities Act (2003)<sup>19</sup>, the Kenya Constitution (2010)<sup>20</sup> and other policies<sup>21</sup>. For instance, the Persons with Disability Act calls for the prevention of discrimination, provision of reasonable accommodation, and a 5% employment quota for people with disabilities in both the public and private sectors<sup>22</sup>.

The Employment Act 2007 (revised edition 2012) recognises disability and prohibits discrimination on the grounds of disability for employees and prospective employees in both the public and private sectors<sup>23</sup>.

Despite their existence, the impact of these policies and legislative frameworks on the employment of people with disabilities appears to be limited. People with disabilities, including youths, continue facing significant challenges in accessing



educational and training services<sup>24</sup> and quality employment<sup>25</sup>. Access of people with disabilities to social protection schemes such as cash transfers also continues to be a challenge<sup>26</sup>.

## Study rationale

Several studies have documented the experiences of people with disabilities in accessing health, education and social protection services. However, there is limited evidence on the lived experiences of youth with disabilities in relation to access to livelihood opportunities. They are often excluded from national discourses on opportunities for social and economic inclusion<sup>27,28</sup>.

Just like their peers without disabilities, youth with disabilities gauge their dreams alongside a national yardstick; and it is critical that their aspirations are properly understood, acknowledged, and meaningfully addressed.

The study presented here aimed to provide empirical evidence on how young women and men with disabilities living in rural and urban settings in Kenya envision and aspire to live, and the barriers that they believe prevent them from realising their aspirations. Understanding young people's ambitions and expectations in relation to livelihoods, and how they are affected by barriers and vulnerabilities related to disability, poverty, and gender, is vital for policymakers who desire to develop inclusive education and livelihood policies and allocate resources accordingly.

The study also leverages existing partnerships to promote the inclusion of young men and women with disabilities into local and national policy dialogues around the implementation of Sustainable Development Goal 8: decent work and economic growth<sup>29</sup>. Youth's engagement in evidence-informed policy dialogues will support Kenya's vision of sustainable and equitable socio-economic growth articulated in Kenya's Vision 2030 agenda<sup>30</sup>.

## Aims and objectives

This study aimed to understand the aspirations, lived experiences, and challenges of youth with disability in accessing livelihood opportunities in Kenya. It also explored how they can be included into policy dialogues around the implementation of Sustainable Development Goal 8: decent work and economic growth.

Specifically, the study aimed to:

1. Understand the lived experiences and current engagements of youth with disabilities in relation to livelihood.
2. Understand aspirations of youth with disabilities in relation to livelihoods and determine barriers to realising those aspirations.
3. Explore inclusive ways of sharing these lived experiences, aspirations, and current engagements with local decision-makers.

## Research methodology

### Study locations and rationale for their choice

This study was conducted in informal settlements in Nairobi city and rural parts of Homa Bay County in Western Kenya. Sightsavers has been implementing a range of development programmes in health, education, and disability inclusion in these locations. It has long-standing partnerships with relevant government ministries and existing relationships and networks with civil society organisations (CSOs) and organisations of people with disabilities (OPDs). The two study locations were, therefore, selected based on existing relationships and collaborations already developed in these areas.

Figure 1. Map of study locations in Kenya



### Theoretical background

The study roots from relativist ontology<sup>31</sup>, a theoretical paradigm based on the belief that reality is a subjective experience and nothing exists outside our thoughts. Epistemologically, it is grounded in the principles of constructivism<sup>32,33</sup>, which argues that meaningful reality is contingent upon human practices, being constructed in and out of interaction between human beings and their world, in a social context<sup>34</sup>. This

study did not intend to ‘discover’ one unitary set of meanings or objective truth, as study participants were encouraged to construct meanings in their unique individual ways. This theoretical perspective is driven by the critical theory approach,<sup>35</sup> which initiates action in the cause of social justice.

## Study design

The research had a mixed-method design and deployed community-based participatory research (CBPR) methods<sup>36,37</sup>. Data were collected using in-depth interviews (IDIs), geographical information systems (GIS) mapping, and documentary photography.

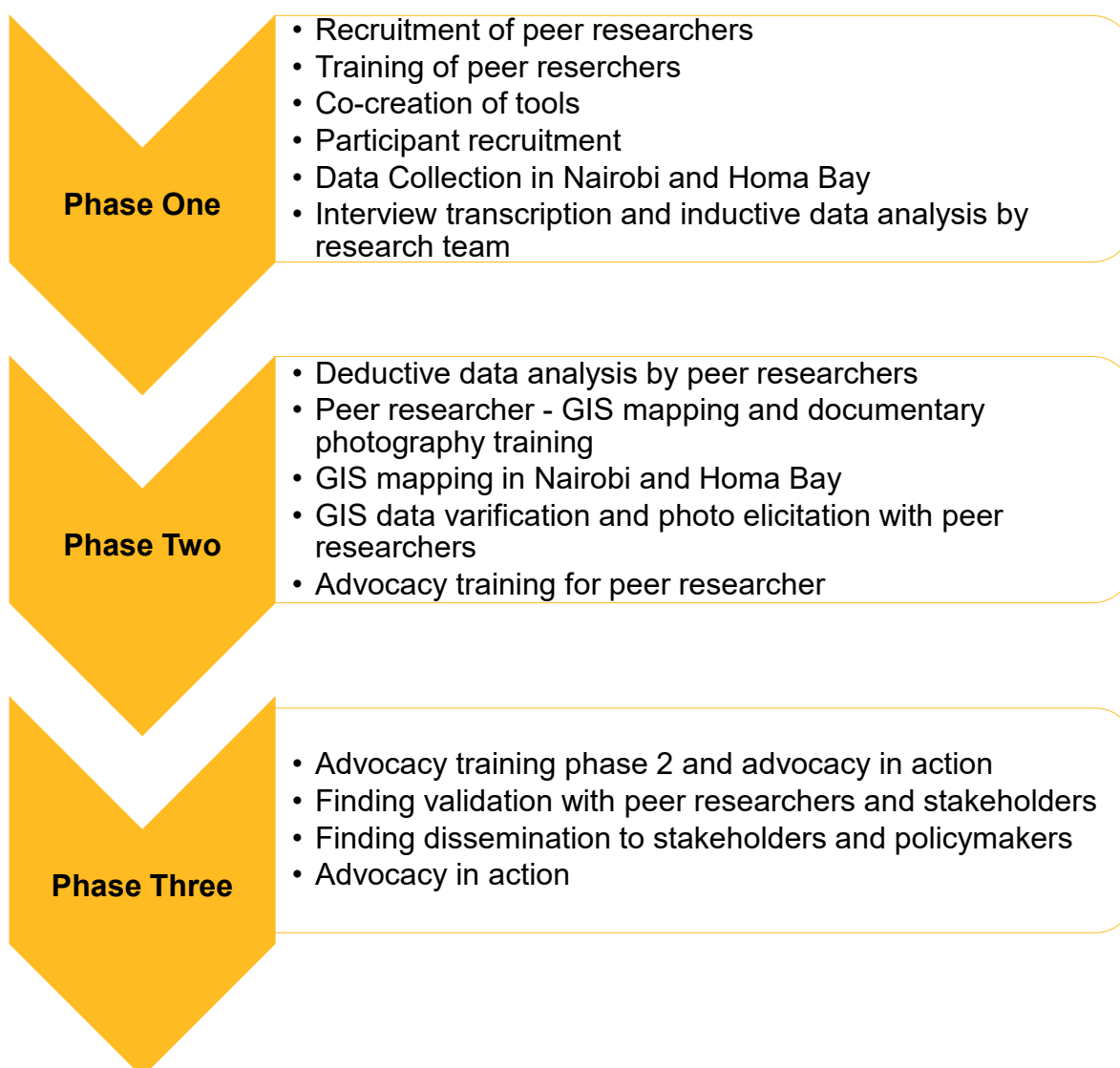
CBPR is a collaborative research approach that is designed to ensure and establish structures for participation by communities affected by the issue studied in the research process and subsequent social change<sup>38,39</sup>. CBPR refers to research activities carried out in local settings in which community members actively collaborate with professionally trained researchers<sup>40</sup>. It is a research approach that involves community members in research planning, data collection, data analysis, and finding dissemination where possible<sup>41,42</sup>. CBPR often involves recruiting community or peer researchers, involving them in planning and offering them training to undertake interviews and observations in their context<sup>43</sup>.

A peer researcher is a person who has similar characteristics and can identify with the participant group in a research study<sup>44,45</sup>. A peer research approach promotes the notion of expertise by experience which reflects the idea that identity and lived experiences produces knowledge<sup>46</sup>. Using this method, community members are viewed as both participants and co-researchers with the understanding they are experts in their own lives. This approach aligns with the concept of meaningful participation based on the disability movement principle ‘nothing about us without us’<sup>47</sup>. It also reflects the idea that services and policies should be developed and implemented through the engagement and participation of groups and communities affected by them. Additionally, engagement of peer researchers in CBPR often minimises the power imbalances between professional researchers, who are often socially located in positions of power and privilege, and research participants<sup>48</sup>. The aim of using a peer research approach in this research was to increase the voice and agency of youth with disabilities in the research activities and findings.

Additionally, the study was also designed to explore the inclusive ways of sharing these lived experiences, aspirations, and current engagements with local decision-makers. This was done through finding validation workshop with peer researchers and stakeholders and providing advocacy training to peer researchers and engaging them in advocacy campaigns in different local and national platforms. Some of these platforms included peer researchers’ representation as panellists in dissemination events; peer researchers sharing their research journey and research findings in advocacy campaign videos; and attending and engaging in a question-answer session during the International Visual Sociology Association conference in Nairobi, where a lead researcher presented the study.

The study was implemented in three phases described in Figure 2.

**Figure 2. Flow diagram showing research process at different phases.**



## Recruitment of peer researchers

We recruited 20 youth with disabilities as peer researchers: 12 in Nairobi (the urban sample) and 8 in Homa Bay (the rural sample). We attempted to recruit peer researchers with a diverse range of impairments (see Table 1) in order to best represent people with different experiences.

We recruited an equal number of male and female peer researchers. The youngest peer researcher was aged 20, the oldest one was 35 years old. Peer researchers had relatively high levels of education: five had university education, eight had diploma/certificate training, and six were in post-secondary training at the time of the study. Only 1 peer researcher had completed secondary education only.

**Table 1. Impairments experienced by peer researchers.**

Category	Male	Female
Blind	2	0
Low vision	0	1
Multiple impairments (albinism/low vision)	2	2
Physical impairment (uses crutches)	5	2
Physical impairment (wheelchair user)	0	1
Bipolar	0	1
Hearing impairment	1	2
Epilepsy	0	1
<b>Total</b>	<b>10</b>	<b>10</b>

## Training of peer researchers

The peer researchers were taken through a one-week in-depth training programme at the beginning of the study. The training was designed and led by the principal investigators and other members of the research team experienced in the CBPR approach. It covered the project overview, disability awareness, interview techniques, ethical considerations for research involving people with disabilities, data collection procedures, and data management. During the training, peer researchers also collaboratively designed and piloted an IDI topic guide.

Peer researchers received another a weeklong training at the beginning of Phase 2 where they were engaged in deductive data analysis and were taken through GIS mapping and documentary photography training. Both trainings were participatory and inclusive in nature, including presentations, small group discussions, role plays, mock interviews and GIS mapping and documentary photography data collection practices. The trainings were delivered in an accessible format and sign language interpreters were deployed to assist the training and data collection and analysis.

## Study population and sampling

The study population was youth with disabilities living in informal settlements in Nairobi and rural areas of Homa Bay County. The Kenya National Youth Policy defines youth as people between the ages of 18 and 35 years<sup>49</sup>.

We used a snowball sampling to recruit 50 young people with different impairments, genders, and socioeconomic backgrounds: 25 participants were from Nairobi, 25 were from Homa Bay. Snowballing is a sampling method in which researchers ask the participants to identify and invite other participants with similar characteristics<sup>50</sup>. Peer researchers in this study also used their social networks and OPDs to identify and recruit eligible respondents. To capture the diversity of lived experiences, we asked peer researchers to purposively select youth with various types of impairments and of different genders.

## Data collection

Data collection was conducted in two phases as described below.

### Phase 1: in-depth interviews

The first phase of data collection, in July 2021, involved IDIs with youth with disabilities to explore their lived experiences, aspirations, and current engagements in livelihoods. In general, interview questions sought to understand young people's goals and aspirations, their current opportunities, and barriers in livelihoods.

We conducted a pilot exercise for one week. Peer researchers were paired and asked to conduct at least two interviews each. The pilot enabled the peer researchers to familiarise themselves with the data collection tools, interview techniques and informed consent procedures. We held debriefing meetings to discuss peer researchers' experiences and to resolve any issues emerging in the field.

During the data collection, a number of accessibility adaptations were employed. Peer researchers with hearing impairments were accompanied by sign language interpreters, while peer researchers with visual impairments were paired with sighted peer researchers with other impairment types and were also accompanied by guides.

In-depth interviews were conducted at locations convenient for respondents, usually in their homes or workplaces, and lasted for approximately one hour. Informed consents for an interview and audio recording were sought in all cases prior to the interview. Nairobi interviews were conducted in English or Kiswahili while interviews in Homa Bay were conducted mainly in Dholuo.

### Data management and analysis

Eight Nairobi-based peer researchers transcribed interviews from Nairobi. Two members of the research team trained and supervised the process. Interviews from Homa Bay were transcribed by a professional transcriber as the peer researchers did not have capacity to transcribe.

All 50 transcripts were imported to Nvivo12<sup>51</sup> – a qualitative software that is used for data management and analysis. The data were then analysed thematically, applying inductive and deductive analysis approaches<sup>52,53</sup>. The first stage of the data analysis process involved inductive analysis of 34 transcripts. A research assistant based at Kenyatta University led the data analysis process and was supported by two experienced qualitative researchers from the research team.

Inductive analysis involved reading and familiarisation with the data, assigning labels (codes) to the emerging themes, and coding transcripts. As the coding process progressed, new themes (codes) were added and existing codes were refined. The final stage of the data analysis process involved identifying patterns in the data and interpreting them.

At the end of the inductive data analysis, a participatory deductive analysis workshop with peer researchers and members of the research team was held where peer researchers were engaged to coding and analysing 16 transcripts. Participatory deductive analysis in this research ensured inclusion of peer researchers in coding and analysing the data they had collected. For peer researchers with vision impairments, transcripts were shared using screen readers and braille copies for those who did not use computers. Sign language interpreters were present throughout the workshop to support peer researchers with hearing impairments.

During this workshop, we discussed emerging themes from the initial analysis of the 34 transcripts and asked peer researchers to deductively analyse the remaining 16 transcripts. Peer researchers worked in groups and presented the results of their analysis in a plenary session. During plenary discussions, themes and sub-themes that had been identified during the inductive analysis were re-evaluated and re-coded, where necessary.

## Phase 2: GIS mapping and documentary photography

The second phase of data collection during November/December 2021 involved participatory GIS mapping combined with documentary photography. Participatory GIS mapping is used to enable local people to create their own maps and conduct their own research on topics of importance to them<sup>54</sup>.

GIS also involves spatial analysis to generate more accurate output that can be used for decision-making and is directly related to enhancing the community's understanding of place and developing awareness about their surroundings<sup>55</sup>. This approach promotes the use of accessible modern technology such as mobile phones. This allows community members to collect geographical coordinates to construct maps that contain items of importance to them, which may be neglected in traditional maps. These maps and models can be used in the communication with government organisations, politicians, and corporations, with the purpose of the assertion of rights, conflict resolution, and in reversing power relations<sup>56</sup>.

Alongside participatory GIS mapping, this study also captured photographic documentation of images representing reported livelihood experiences and aspirations. Topics identified through the IDIs (Phase 1) were used to identify appropriate images, and GPS of the location of the photograph were also captured. Documentary photography, as outlined by Wang and Burris in the 1990s, is one of the three pillars of the photovoice methodology: the other two pillars being empowerment education and feminist theory<sup>57,58</sup>. Photovoice is a research method that centralises the voices of marginalised populations using photography and critical dialogue to record, reflect, and communicate their lived experiences<sup>59</sup>. Documentary photography in this study provided a participatory and accessible way to capture, make sense, and articulate individual and relational experiences of peer researchers.

During the participatory GIS training, we drew on the themes that emerged from inductive and deductive analysis, to create a simple survey. We used an open-source platform called CommCare<sup>60</sup> to build our mobile devices application that

contained all the questions of the survey related to the themes and requested to record the real-time location and to take a photograph.

Peer researchers were trained on the use of CommCare to capture GIS data and photographs and were supported by members of the research team during the exercise. The mapping exercise aimed to capture locations/places and images representing the reported experiences and emerging findings on barriers and enablers in achieving participants' livelihood dreams and aspirations. In addition, it aimed to capture places where people felt socially excluded due to negative attitudes or discriminatory practices. It also captured data on locations that supported youth with disabilities to access livelihood opportunities. All data collected were uploaded to a GIS analysis software, used to create large and accessible maps, which were analysed with peer researchers.

## **Covid-19 risk mitigation measures during the training and fieldwork**

Covid-19 posed a massive challenge and delayed the original data collection plans. When Covid-19 restriction on movement was lifted, all in-person training sessions and data collection required Covid-19 preventative measures. We ensured that the Kenya's Ministry of Health Covid-19 risk mitigation measures were strictly adhered to. We provided face masks, including clear masks for those who lip-read, and sanitisers for peer researchers to carry and wear during research interactions. They were also advised to maintain social distance during all face-to-face interactions, wash hands, and use hand sanitisers regularly. All researchers were trained to conduct a Covid-19 risk assessment.

## **Ethics approval**

Ethical clearance to conduct this study was received from Kenyatta University Institutional Ethics Review Committee (PKU/2222/11366) and followed by clearance from the National Commission for Science, Technology and Innovation (Licence Number: NACOSTI/P/21/10589).

## **Results**

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### **Demographic characteristics of study participants**

We conducted in-depth interviews with 50 youths in the two study locations (34 in Nairobi and 16 in Homa Bay). We recruited an equal number of men and women. The median age of youths interviewed was 25 years, with the youngest being 18 and the oldest 34. Over half of youths interviewed (29/50) did not have any post-secondary level qualification and the majority (33/50) were not married. We interviewed youth with a range of impairments (see Table 2). 14 participants said that they had multiple impairments. Most participants described their health conditions resulting in disability as congenital and a few said that their condition developed after birth.

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**Table 2. Demographic characteristics of study respondents**

Categories	Number of youths (50 per category)	Percentage
<b>Impairment type</b>		
Visually impaired	8	16%
Multiple impairment	14	28%
Cerebral palsy	5	10%
Physical impairment	11	22%
Hearing impairment	3	6%
Short stature, autism, bipolar (1 each)	3	6%
Albinism, down syndrome, mental health condition (2 each)	6	12%
<b>Marital status</b>		
Never married	35	70%
Currently married	13	26%
Cohabiting with a regular partner	2	4%
<b>Education level</b>		
Graduate	10	20%
Diploma	11	22%
Secondary complete	9	18%
Secondary incomplete	2	4%
Primary complete	5	10%
Primary incomplete	10	20%
No education	2	4%
Special education	1	2%
<b>Employment status</b>		
Formally employed	7	14%
Self-employed	14	28%
Unemployed	29	58%

## Goals and aspirations

All participants were asked about their aspirations in relation to livelihoods. The responses varied and have been categorised into the following themes.

### Further education and vocational training

When asked about their dreams and aspirations, most youth with disabilities stated further education or university degree as their aspiration. Youth with secondary or post-secondary school qualifications expressed their desire to go back to studies and advance their careers. For example, a female with bipolar disorder from Nairobi explained that she had stopped her education due to financial constraints but wanted to go back to 'resit the exam and continue with study to higher level'. This situation was typical for many study participants.

Many believed that higher levels of education would improve their chances of finding better jobs, which would make them more self-reliant. Some participants also said that education opportunities would enable them to provide practical support to other people with disabilities, and they could act as a role model to inspire others to achieve their dreams. For example, a male respondent with cerebral palsy from Nairobi stated:

“In college, I want to do mass communication and do it up to Ph.D. I want to show people that being disabled cannot be a deterrence to what you aspire to do. I want to motivate and help other people with disabilities to achieve their dreams.”

A similar view was expressed by a male respondent with albinism and physical impairment from Nairobi:

“I long to continue with my education and, in ten years, I would like to be in a leadership position in some organisation where I can help people.”

Participants who did not have any formal education wanted to do vocational training, as it was their route to gaining skills and qualifications. Those who were unemployed wanted to attend vocational training centres for making shoes or clothes, knitting, hairdressing, motor vehicle mechanics, and art and design. They argued that such opportunities would enable them to acquire technical skills and help access jobs or become self-employed. For example, a female respondent with a physical impairment from Homa Bay described the training she aspired to undertake:

“Considering my level of education, I wish to get an advance level training in making clothes so I can set up my own shop. Other women who have received that training are now running their own tailoring business and I want to do the same.”

Hairdressing is an example of a skill mentioned by participants as an aspiration and pathway to financial independence.



A young man with a physical impairment from Nairobi expressed a similar view:

“I want to do shoe-making training and open my own shop. This will give me an opportunity to earn my living in my hometown.”

A female with a physical impairment from Nairobi wanted to do vocational training in management and administration:

“I want to get training on operating computers so, despite my disability, I can sit in an office and do an administration job.”

Most respondents who aspired to get vocational training argued that it would help them engage in labour markets within their locality. They said that they will not need to worry about travel arrangements, as they were already familiar with their local environment.

## Formal employment

Study participants, and particularly those with tertiary level qualifications (graduates), expressed their desire to get a formal, permanent job and to earn an income and become financially independent. This is how a female with a physical impairment from Homa Bay described her desire to find a job and place to stay:

“I would like to get a permanent job and somewhere comfortable to stay without worrying about how and where to live.”

A male respondent with a physical impairment from Nairobi also described how job stability and continuity was important to him:

“I desperately want to get a permanent job because changing job every three-four months makes me feel insecure about my

livelihood. I have two degrees; people hire me but then tell me they don't need me anymore after working for 4 months.”

Some study participants argued that formal employment would help them feel more confident, as they will be able to pay taxes and contribute to the growth of their society:

“For me, my desire to get formal employment is not only to be able to earn my livelihood, but also to be able to pay tax and contribute to my country as a responsible citizen. It is important for persons with disabilities to be recognised as equally contributing citizens and to exercise all citizenship rights.”



An example of a workplace where youth with disabilities aspire to get formal employment and be recognised as equally contributing citizens.

Across both study sites, the majority of participants were flexible around the type of jobs they were prepared to take. The key requirement was to have a regular and stable job and to be financially independent and be able to take care of themselves and their families:

“I am looking for any regular job, even though I did communication media studies. Anything to do with communication or media, or anything to do with humanity, any community service work, basically any job will do.”

## Informal employment and farming

Informal employment and subsistence farming were also popular livelihood aspirations among participants from rural areas of Homa Bay. Youths, mostly female, from these settings aspired to own a small farm and raise animals or grow and sell crops:

“I want to own some land so I can grow crops to sell in the local market. I know how to grow vegetables and maize that I can easily sell by the roadside or in the market to earn money. I can also raise animals and sell them to make my living.”

Some youth with disabilities aspire to run an animal farm to make their living.



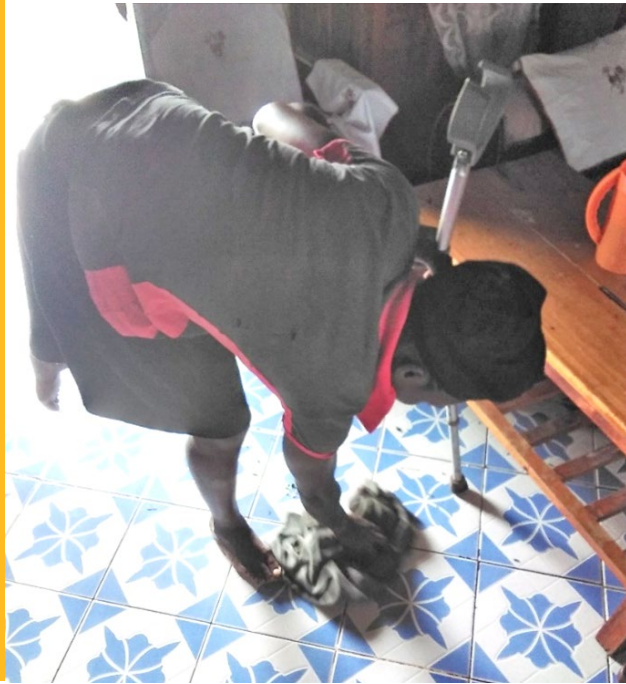
Some female participants from Nairobi shared that they wanted to get occasional jobs, such as cleaning offices or homes or providing laundry services:

“I would like to get a job like cleaning offices, or even washing staircases in commercial buildings.”

A male respondent with a hearing impairment from Nairobi expressed similar views:

“Office cleaning job is easy for me, if I get one, as it doesn’t require engagement with many people. You can go and clean before or after workday starts for others.”

Many youth with disabilities aspire to do home or office cleaning jobs because they do not require any formal education or training and support their livelihood.



## Owning a business

Interviews in both study sites found that many unemployed young people were keen to start their own business. Those with already established businesses expressed a desire to expand and be able employ other people with disabilities, as a female respondent with multiple disabilities from Homa Bay noted:

“If I get money for more sewing machines, I can supply more communities and, in the next ten years, I would be able to employ at least five people more. At the moment, I only supply a small area, but one day I aspire to supply the whole county.”

A female with a physical impairment from Nairobi also talked about her dreams to expand her business:

“I also want to venture into handbags. Currently, I’m only doing bracelets, but I want to venture into shoes, Maasai shoes, then necklaces and handbags accessorised with beads.”



Many youth with disabilities aspire to own a shop/market stall to support their livelihood.

## Relationships and marriage

In addition to employment and career goals, many young people interviewed talked about their desire to get married and start a family. Study participants argued that being in a stable, happy relationship was as important to them as having a career or a successful business. In their communities, a fulfilling family and social responsibility is an equally important aspiration as achieving higher education or getting employed. This was linked to citizenship, fulfilling social norms, and being perceived as established within their communities. This is how a young man with a visual impairment from Nairobi described his dreams:

“I’d love to get married and have kids that are dependent on me. I want to be someone with a family, established in my community and at workplace, and contribute as equal citizen to my country.”

A female participant with a physical impairment from Homa Bay described how she wanted to get married, have children and be a housewife:

“I just want to get married and manage household work. Having a good family, looking after family members and children, and keeping everything good at home is equally important like working outside.”

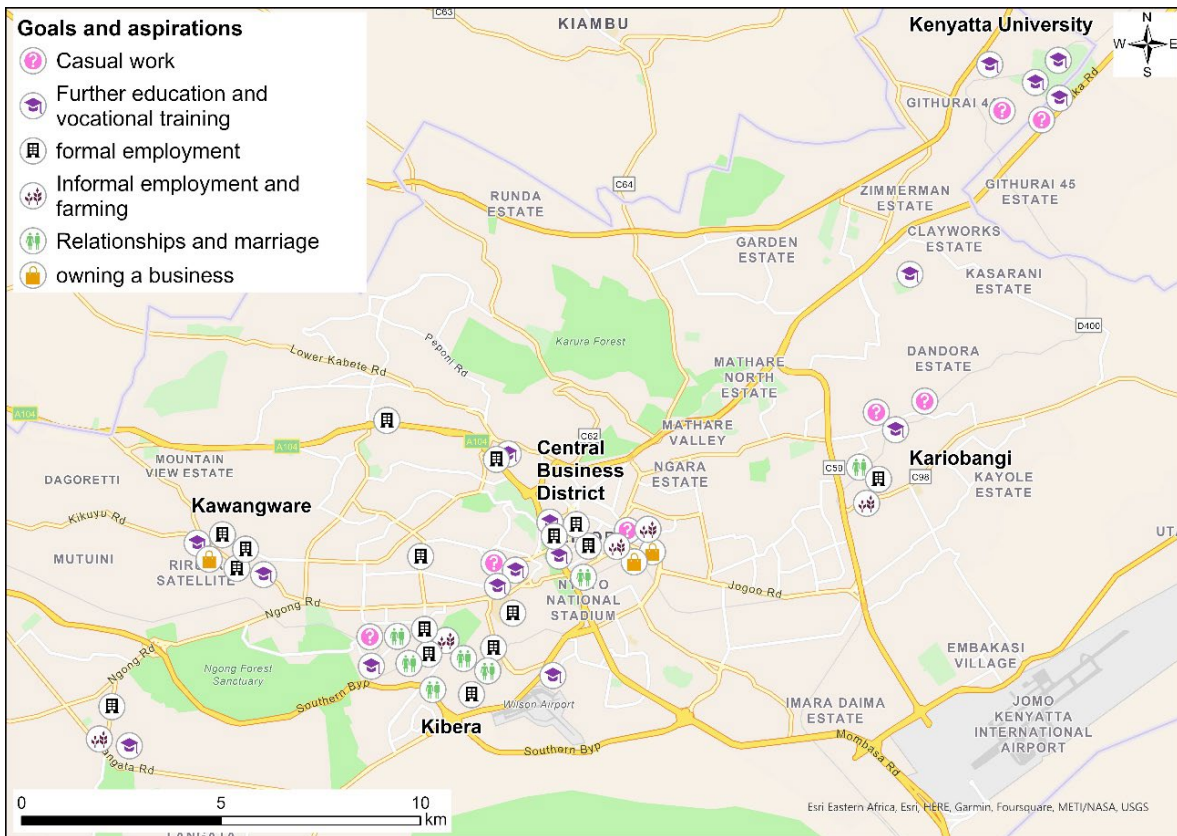
Another female participant with autism expressed a similar view:

“I wish to get married and have a husband and children. I feel good when I am doing housework with family members at home and taking care of them.”

Getting married and having a family is important to youth with disabilities because these are the social norms and expectations of their communities.

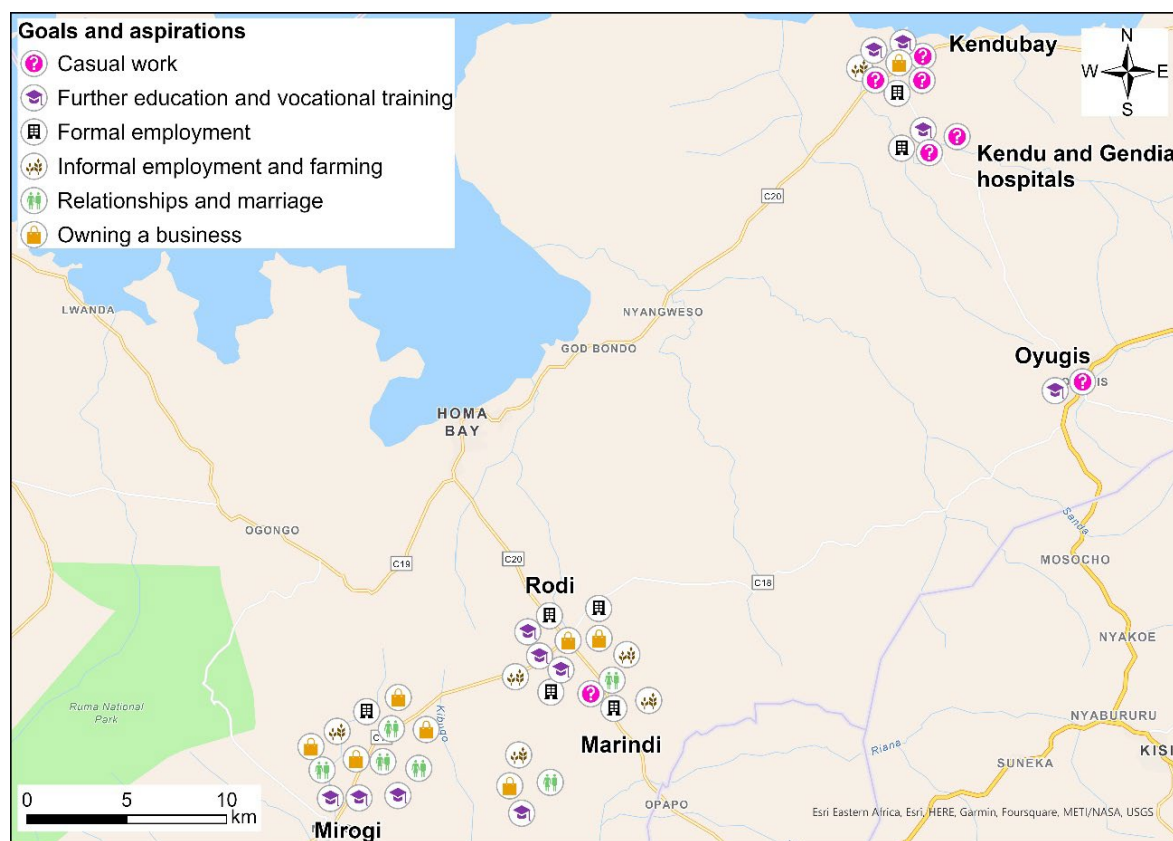


**Map 1. Nairobi mapping representing goals and aspirations of youth with disabilities from local communities.**





**Map 2. Homa Bay mapping representing goals and aspirations of youth with disabilities from local communities.**



## Current lived experiences and livelihoods

Most of the youths interviewed perceived that their health condition and resulted disability had a direct impact on their daily activities and livelihoods. Those with physical impairments, for instance, reported that they were unable to engage in manual labour to the same extent as individuals without physical impairments, while those with hearing impairments experienced difficulties with communication and were often left out of local opportunities.

When asked about current engagement in livelihood activities, over half (29/50) of the youths interviewed said that they were unemployed and 14 were self-employed. In the absence of any meaningful economic activities, most of these youths relied on their families and others for support:

“Sometimes my relatives support me by sending little money, so I use that to meet the school requirements for my children. Sometimes I sell the poultry that I keep, to pay for the school requirements. That is how I have been managing.”

Some respondents, particularly those living in rural areas, reported that they earned their living from subsistence farming, which they engaged in with the help of other family members, as a female respondent with visual impairment from Homa Bay described:

“I do subsistence farming and sell the produce to buy books or pay the little levies in school. I cannot do large scale farming because I lack the means and the farms are far away and I can’t walk that far.”



Despite having land, a lack of resources means youth with disabilities are forced to abandon farming.

Several participants said that they had irregular informal jobs, such as providing laundry services or weeding other people’s farms for a fee. A few reported that they were engaged in a government-sponsored programme known as ‘Kazi kwa Vijana’ that provided casual work to youths.

Those who were not engaged in any gainful livelihood activities recounted the challenges they had in taking care of themselves and their families. Many lived in poverty and were not able to afford essential goods, as a female with albinism from Nairobi pointed out:

“I can’t afford things I require on a daily basis like transport to places, school fees, and the rent.”

Out of the 50 respondents interviewed, only seven were formally employed. They worked as teachers, government and human resource officers or company clerks. But even those participants were often doing jobs that did not meet their aspirations, qualifications, or skills. For example, some university graduates worked as telephone operators or desk officers, as a young musician with multiple disabilities noted:

“I had graduated with a diploma in music, but I had to take the job as a front desk officer because there is no job opportunity in music for a disabled person.”

Another male respondent with a physical impairment from Nairobi shared how he was asked to change his role in the company because of disability related stigma among company clients:

“I was initially in front office and then moved to human resources. Even though I was good with external customers, helped them and answered all the calls, I was told my disability was not liked.”

14 young people resorted to being self-employed. They were engaged in small-scale businesses such as the sale of second-hand clothes and shoes, beauty salons, or beadwork.

## Barriers to participation in livelihood activities

Study participants identified a number of barriers that, in their views, prevented them from meaningful engagement in livelihood activities and from realising their potential and aspirations. These were grouped under a number of subthemes.

### Inaccessible local infrastructure

Inaccessible local environments were consistently cited by participants as significant factors leading to their social exclusion.

Many young people interviewed lived in rural areas and informal settlements with poor road networks, unpaved walkways, and no drainages and sewer systems. These infrastructure challenges made movement of many people with mobility difficulties very challenging. Study participants explained how difficult it was for them to travel to their businesses or move around in search for jobs. Those with multiple and severe disabilities described how such inaccessible environments made them totally dependent on others for assistance.



Youth using wheelchairs or with multiple disabilities feel their independence and capacity to move and socialise is curtailed due to inaccessible community space in neighbourhoods.

Many study participants pointed out that asking for assistance or travel support was very costly and, therefore, unaffordable for many people with disabilities, as they were expected to pay out of pocket without any government support. People with mobility difficulties incurred high costs when paying for private transport such as

motorbikes or hiring aides to move around. A female respondent with short stature from Nairobi said:

“I can’t do heavy work or walk a long distance to do my daily activities. I have to pay others for assistance to help with my daily chores and need to pay to use a motorbike or vehicle, costing me money that I lack.”

In addition, many young people with disabilities did not have access to assistive devices, such as wheelchairs, white canes, low-vision devices and hearing aids. Moving around and looking for jobs independently for these youths was almost impossible.



A lack of access to appropriate assistive devices has left this youth with a disability unable to independently seek for employment opportunities.

Study participants also pointed out that most buildings (including government offices) were not disability accessible and young people with disabilities were limited in their choice of premises, where they could work or run businesses, as a young woman with low vision from Nairobi noted:

“The infrastructure is poorly designed for people with disabilities, making accessing and moving around much more difficult and time-consuming. All buildings and services should be designed to accommodate all forms of disabilities. For example, ramps for wheelchairs, visual and hearing device support, or easy access toilets for all. Then only we can work and contribute fully as equal citizens.”



An inaccessible learning centre where youth with most types of disabilities lack access.

Many participants also noted challenges with public transport (matatu). They argued that the vehicles were inaccessible and often unsafe. Driving and speeding practices were rough, putting people with disabilities at risk of injury, as a female respondent from Nairobi who regularly uses churches pointed out:

“We often need to run to board the public transport because they want commuters to get on while they are still mobile. They compete to get most passengers. It is impossible for me to safely board a bus or matatu that is on the move.”

It was also argued that public transport was often unsafe for young with disabilities, due to sexual harassment, which made it very difficult for them to accept jobs far from their homes:

“People touch you in private parts when the buses and matatus are packed. One time, one man kept rubbing himself against my back while I was standing on the bus. I was carrying my cane so he should have known I was blind.”

## Low levels of education and limited opportunities for further education and training

As discussed in the previous section, the majority of young people with disabilities wanted to undertake further education courses and gain professional qualifications. But many study participants had low levels of education, which prevented them from the enrolment to such programmes. Many respondents explained that they had been withdrawn from education because their local schools could not accommodate their needs and the parents could not afford paying for specialist schools, as a male respondent with hearing impairment from Nairobi described:

“I wanted to become a teacher and teach children with disabilities. But I did not get an opportunity to complete my studies because our local school said they cannot provide suitable education to me, and my parents did not have money to send me to a school that could teach me.”

Similar experiences were shared by a female respondent with epilepsy from Homa Bay:

“I wanted to be a 'sister' (nurse) or a policewoman. But they [my family] stopped my education. I cried, begging my family to let me continue with education and prayed to God for it. I am still heartbroken that I did not get chance to finish my studies.”

School fees and other costs associated with education were the key factors that led to the low levels of education among people with disabilities. Study participants described how their families faced competing family priorities and very limited financial means. Many families could not afford schools fees for all of their children and often sacrificed education of children who had disabilities, as a man with multiple disabilities from Homa Bay described:

“I felt bitter towards my family when they didn't pay my school fee and stopped my school because of money problems. Everyone went to school up to form four level [completed secondary] except me. I understood money was a challenge, but I was the only child discriminated because I had disability and other children didn't.”

A closed school gate symbolises how learning opportunities are closed off or limited for pupils with disabilities whose parents are not financially capable to afford the fee.



Many participants further explained that, although there was a government programme that provided bursaries for children with disabilities, getting funds from this programme was, in reality, very difficult. Some study participants believed that there was no transparency in the distribution of the programme funds and the application process was long and cumbersome, as one female participant explained:

“The government should also look at the education sector. Some of us almost dropped out of school because of the school fees. I applied for a school loan at the National Council when I was in form three. I am at the end of form four now and I still haven’t received that money. I feel their system is very slow.”

A female respondent from Nairobi also described her frustration with the application process:

“Can’t the offices be devolved? When I applied for support, they sent me to Nyayo House. When I went to Nyayo House, they told me to go to Thika office. I’m from Nairobi, going to Thika and Nairobi back and forth was tiresome. I had given up hope, but finally they paid the fee without which I would have dropped out of studies.”

Study participants who had completed school education spoke about challenges they faced in schools, including inaccessible, broken, or insufficient learning resources, and insufficiently trained teachers. These challenges were most frequently mentioned by youth with visual impairments, who argued that the textbooks available in schools were in small print and the majority of schools lacked braille machines and tactile materials, as a male participant from Nairobi explained:

“At [my] school, subject-specific books were scarce, so we were forced to share, and we had limited numbers of braille machines to

share. We were told braille machines costed 80,000 Kenyan Shillings, so schools could not buy more. Using braille machines was also stressful because they were very bulky, made noise, would break regularly, and would not be repaired promptly. Other braille writing materials were scarce too, so writing down lessons was always challenging.”

A braille writing/typing machine provided at a school that many learners with vision impairments must share. They are often inefficient (cannot save what is typed for later), noisy and broken, making learning slow and difficult.



A female respondent with a visual impairment from Homa Bay who is still in secondary education shared similar experiences with inaccessible learning resources:

“We only have some old braille machines at school. We are often scolded for making noise while using a braille machine, especially during exams, but we cannot do anything about it. We are told to type slow to reduce noise disturbance to other students, but the teachers do not give us additional time to finish answering the question paper.”

A female student with a visual impairment who was a student at the University of Nairobi highlighted high costs associated with using accessible educational tools, particularly those related to sciences:

“Studying science and mathematics at secondary level and at the university is extremely expensive. For example, a talking calculator costs 30,000 to 60,000 Kenyan Shillings, whereas a normal scientific calculator would only cost around 1,500 Kenyan Shillings. At the secondary school and university, we are discouraged from studying science, engineering or math-related qualifications. We are only told to study humanities subjects, which often is not useful to find employment.”

Youth with hearing impairments also reported that they experienced communication difficulties at their schools, which negatively affected their education prospects. For instance, due to the lack of sign language interpreters in their schools, many



students were forced to rely on using handwritten notes from their fellow students, which were difficult to understand, as a male respondent with hearing impairment from Nairobi explained:

“The issue was communication. I could not hear so [I] did not understand what was being taught in the classroom. I often copied the notes from my classmates who lived in my neighbourhood, but it was difficult to understand what they had written without understanding what was said in the classroom. There were four deaf children in our school, and we all did poorly during our exams because of the communication barrier.’

A learner with a hearing impairment who has to spend time after school with fellow students to get notes on what has been taught during lesson that day.



A few respondents who aspired to do vocational training or professional qualification courses also experienced multiple difficulties, often due to disability stigma among teaching staff, as a respondent from Homa Bay noted:

“I wanted to, and was qualified to study courses like nursing or clinical medicine, but I wasn’t allowed because of my disability. I knew I could do it because I had passed all exams without any challenge. It really saddens me seeing my classmates take these courses, yet I wasn’t allowed to, all because of poor attitude of the people at the college where I wanted to get the training.”

A female respondent with Down syndrome from Nairobi shared similar experience of being declined from studying a computing course:

“I wanted to do computing training so I could get a job in office administration. But I was rejected admission, saying my shaky hands because of my disability would not be good for using a computer at the speed required to do the training. I thought the government supported youth with disabilities getting vocational and technical trainings, but no one I had spoken to was clear about if and how the

Commission for Higher Education considered one's disability status when allocating courses.'

Study respondents argued that low levels of education and a lack of technical skills prevented them from finding a formal job and running a business. A male respondent with a hearing impairment from Nairobi said:

"[I have] skills of making soap and cleaning products but lack business setting up and management skills."

## **Lack of jobs and discrimination at workplace**

Many participants acknowledged that youth unemployment was a major problem in Kenya, but all of them argued that the situation for youth with disabilities was worse. First, many young people with disabilities had to compete with young people without disabilities who did not face accessibility challenges and often had better opportunities for education. Second, many participants argued that employers often discriminated against applicants with disabilities. Some respondents believed that employers deliberately excluded people with disabilities from job interviews, as the quote below from a respondent from Homa Bay illustrates:

"There are some job advertisements that require you to declare whether you have a disability or not. Once you say that you have a disability, they will not give you the job. There was a time when I applied for a job as a court clerk and there was a clause like that. I was not even invited for an interview. These kinds of discrimination make me feel like every door for job opportunity is shut for me."

A female respondent with cerebral palsy from Nairobi shared a similar view:

"When I was growing up, I thought, because I had a vision, I could just finish my form four and go to university, get employed or start my own business. I was aspiring to great things. During [my] studies I was told that the government and employers support people with disability with good education to get employment. But when I started applying for employment, I realised that people with disabilities are never selected. I have tried many times but have never been successful."

Several participants who had had the experience of job interviews with potential employers argued that many companies preferred not to recruit people with disabilities for a variety of reasons. These included employers lacking confidence to hire someone with a disability or not wanting to put in place the necessary accommodations. A female respondent with a physical impairment from Nairobi recounted her experience:

"I went for an interview for a certain job in a pharmaceutical company, passed the IQ test, which eliminated 40 individuals out of

50. After the second test, only 5 of us were remaining and I was number one or two. When they called me for the orals, one of the line managers I met in my reviews told me that I answered so well, and she felt that I could do the job very well. But the challenge was I had told them that I am not dropping the crutches when I start working. She told me if I assure them of dropping the crutches in two months, she will sign the employment contract. She explained that the job entails a lot of walking, and they cannot make any accommodation for me. That is how I lost the job and I felt so discriminated because of my disability. The way the system is structured does not consider people with disability.”

A youth with a disability applying and competing for the same job opportunity as a youth without a disability where the application process is reported to be inaccessible for people with vision impairments.



Some respondents argued that employers did not believe people with disabilities could do the job as well as people without disabilities, which was particularly common among respondents applying for hard labour, manual jobs. A male respondent with a physical impairment due to polio from Nairobi shared his experience:

“People without disabilities can work anywhere, even in day-to-day manual jobs. Every morning they go to construction sites for job, and they are easily selected and paid five or six hundred. But, for us people with disabilities, no matter how early we reach the construction sites every day, we are never selected.”

Some respondents also thought that employers perceived people with disabilities as vulnerable and unhealthy, and would thus require a lot of medical attention, occasioning frequently missing work. A female respondent with multiple disabilities from Nairobi commented:

“Employers have this perception that people with disabilities will be needing to take many days off to go to hospital because they think we cannot survive without medicines. That misconception has been a challenge for me to get employment. I was repeatedly told a

person with multiple disabilities usually becomes ill and will not be a reliable worker.”

Study participants also pointed out that the Covid-19 pandemic made the situation for many people with disabilities even more challenging. Those who had small businesses and worked in the informal sector, such as cleaning, childcare, and market stalls, had lost their income during the lockdown. A young woman with a physical impairment from Nairobi shared her experiences:

“I was working in a children’s day care facility, taking care of my neighbours’ children and was getting paid weekly. When Covid was reported everywhere, my work stopped. I was told everyone was experiencing job losses.”

### **Lack of start-up capital for businesses**

The main barrier for youths who wanted to stay self-employed and open a business was the lack of start-up capital and business investments. Even those who already had businesses reported that there were very limited opportunities for enterprises run by youth with disabilities. People who did not have access to finances found it difficult to use the skills they gained through vocational training programmes, as a female respondent with vision impairment from Nairobi explained:

‘Machakos Technical Institute for the Blind taught us how to make pullovers. Some people who had money for a [sewing] machine started making pullovers for money. But because that machine was very expensive, some of us could not use the learning from the training.’

Study respondents further explained that the government in Kenya developed a number of business support initiatives, such as the National Youth Fund. It also reserved 30% of government tender procurement opportunities for economically vulnerable groups such as youth, women, and people with disabilities. However, the terms and conditions to attain this funding were stringent (applicants require a guarantor) and the application process was unclear and untransparent. It means that youth with disabilities rarely benefited from such programmes, as a male respondent with multiple disabilities from Nairobi noted:

“Even though they say that there is government support for people with disabilities, the leaders in charge of these programmes in the lower offices are never transparent with their dealings. When we explain our problems to them, they don’t tell us what help is available.”

A male respondent with albinism from Homa Bay echoed similar challenges:

“They should be transparent about the support available for youth with disabilities. We are told that there is money for the elderly and

there is money for people with disability, but I haven't heard of anyone with a disability who has ever benefitted from that money or any other support."

An empty stall where a person with a disability was unable to restock supplies to sell due to financial issues and a lack of support.



Respondents further noted that there were support grants and bank loans for women-led businesses. However, the interest rates were too high and unaffordable for women with disabilities, who often required additional support to run their businesses and thus incurred additional costs. A female respondent with a physical impairment from Homa Bay shared:

"No matter how hard I try, I am not able to function well as other women without disabilities. It takes me longer to get to the market, I cannot carry as much load as others to sell and therefore make less income. But I must pay back equally like others. Some consideration of a disabled person's limitation and therefore reduced or flexible rate of repayment would help us to sustain our business."

## Challenges in accessing government social support

Many respondents narrated their experiences of using government social support programmes designed to reduce financial hardship for people with disabilities. One such programme is the monthly stipend provided to people with disabilities through the National Council for Persons with Disability. Most respondents were aware of this programme but only a few said that they had benefited from it. The monthly amount paid through the programme was reported to be between 2,000 and 6,000 Kenyan Shillings (£11.3-£33.9) and the disbursement was perceived to be irregular, as a female with physical impairment from Homa Bay pointed out:

"The only support from the government I have received so far is 6,000 shillings in cash. I received most of that cash during the Covid-19 pandemic. I was told I would receive the cash support regularly but haven't received anything since then."

Even though some respondents reported that NGOs provided grants for people with disabilities, the majority of people interviewed had never received such support. Overall, study respondents had very limited information about either government or NGO programmes available to them. A male respondent with a hearing impairment from Homa Bay said:

“There is no information available anywhere online or in newspapers about the grant support for persons with disabilities. Sometimes we only find out about it through word of mouth because someone had received a grant. There needs to be a designated place where we can regularly check for the information.”

Some respondents did not have a government-issued disability card, which was essential for the access to support programmes targeting people with disabilities or for tax rebates. Respondents explained that accessing disability cards was a very difficult process. For example, participants from Nairobi who tried to obtain a card were asked to travel back to their birth villages, so that the local government officers could sign off their forms. Similarly, those living in rural areas had to travel to Nairobi to submit their form to the National Office, where it was processed. This is how a male respondent with physical disability from Nairobi described his experience of obtaining disability card:

“[It is] a herculean task for most youths due to bureaucratic bottlenecks that requires them to visit multiple offices to complete the paperwork.”

A male respondent with a mental health condition from Homa Bay expressed similar views:

“[It] made the process expensive and out of the reach for most people with disabilities from rural areas.”

Several participants said that the amount of money paid to people with disabilities through the government programmes often depended on the severity of disability. However, the definition of severity used by the government and the categories to determine the severity of specific conditions were limited and unclear. Many people with disabilities felt that they were discriminated against. A female respondent with a physical impairment from Nairobi shared:

“I am entitled to 2,000 [Kenyan Shillings], but if you go to the offices, you are told that the 2,000 is for the severe people [people with severe disabilities] and you wonder who is severe and if people at that office get to define the levels of severity. I have a NCPWD card and registration number to prove my disability if they need a proof. Despite following up several times, I still have not benefited from the support. I also hear that the president has released 10 million [Kenyan Shillings] for people with disabilities. I wonder where I am in the picture.”

The lack of disabilities awareness and transparency in the government social programmes were identified as major barriers to effective support of people with disabilities. Many respondents said that staff working for these programmes were not familiar with the needs of people with disabilities or how to support them. The situation was particularly challenging for people whose impairments and functional difficulties were not self-evident. This is how a female respondent with autism from Homa Bay explained her experiences of engaging with the social support programme:

“They say there is government support for people with disabilities. However, people who work in the programme offices aren’t aware of different types of disabilities. Even if you explain your problem to them, they will not help you.”

Another female respondent with a mental health condition from Nairobi shared similar experiences:

“The challenge for getting support is greater for people with invisible disabilities like mine. These officers either don’t know about mental health disorders as disability or they [ignore] it because they cannot see it.”

A building representing government offices for social support where youth with disabilities often experience barriers and challenges in accessing the support they are entitled to.



Several respondents spoke about mismanagement and corruption in the social support initiatives targeting people with disabilities. For example, many respondents felt that government procurement tenders earmarked for people with disabilities are won by individuals with connections to the people in the procurement process and the competition process is not transparent.

Similarly, the funds allocated to support youth programmes are rarely allocated to youth with disabilities and the process of application to such schemes is ‘costly and complicated’. Some respondents talked about the deliberate or indeliberate mistakes made by programme officials, which resulted in people with disabilities being denied

the benefits they were entitled to. A female respondent with multiple disability from Nairobi says:

“They rejected my application, saying my application was a duplication of a grant already approved under my name and the same personal information. I had never applied for the support before, but they said I already received the benefit.”

## **Enablers of participation in livelihood activities**

When asked about what helped young people with disabilities to participate in and benefit from livelihood activities, study participants spoke about a range of factors, which were broadly grouped under three sub-themes described below.

### **Accessible learning environments and government support to education of children with disabilities**

Study participants recognised the efforts of the Government of Kenya in developing disability inclusive policies, particularly in the education sector. For example, a number of respondents said that the policy for special needs education recognised the right of learners with disabilities to education. Government support to special schools catering exclusively for pupils with disabilities was a critical factor in the realisation of this right.

Study participants generally agreed that, despite some structural and funding challenges in the operation of special schools, these institutions were an important way to build solid foundations for the education of children with severe and complex disabilities. Several respondents said that they were able to find a gainful job or build a business only because they had attended good-quality, formal schooling that addressed their needs.

Study participants further acknowledged that the government, through agencies like the NCPWD, the National Council for Persons with Disabilities, and Association for the Physically Disabled of Kenya were crucial players in providing educational support. The support is mainly tuition fees and assistive devices, which make access of young people with disabilities to formal education easier, as illustrated by a quote from a male respondent with cerebral palsy from Nairobi:

“Assistive devices and cash transfer from the government have been key contributors for my educational achievements and successfully setting up business enterprises.”



A pair of glasses that a youth with a vision impairment was able to purchase with government funding. The glasses helped the youth to 'learn as equal as a youth without a disability'.



A female respondent with physical impairments from Nairobi described how access to a disability card and subsequent disability benefits helped her in accessing further education:

“NCPWD card helped me to get some financial support and bursary that helped me to pay for my last semester fee. With that support, I am now completing a diploma in business management at Pioneer University.”

Study participants pointed out that schools and other educational institutions in Kenya were becoming more accessible, giving more opportunities to learners with disabilities to progress to further and higher education. A respondent with physical impairments from Nairobi shared his experiences of choosing a university:

“After I finished high school, I knew a few of my colleagues with disabilities who had gone to university. So, it was easier choosing which university to go to. University was good in supporting people with disabilities. They have leadership [and] a well-laid-out plan to cater for those with disabilities in terms of learning materials and teaching methods.”

Study participants further highlighted the importance of accessible educational materials, as a respondent with visual impairment from Nairobi pointed out:

“Having access to accessible learning materials like braille machine and Orbit Reader has ensured that I finish my university education.”

Another participant who uses a wheelchair described how accessible facilities in his university boosted his morale and willingness to study:

“When I see that university has made efforts to make most parts of the university accessible, including allocated parking for persons with disabilities, I feel like my

needs are heard. I feel like I belong here, and I am welcomed here. This feeling definitely has improved my learning environment and experience.”

Wheelchair users heading to their classrooms. Their learning has been possible because of accessible facilities in and around school.



A number of participants spoke about the importance of vocational training and capacity-building courses delivered by different NGOs. It was argued that these courses did not only help young people with disabilities develop specific professional skills but also built their confidence and self-esteem.

Among the topics they favoured during such courses, respondents named disability awareness, employability skills, gender-based violence, political participation and voting, and sports for people with disabilities. Some respondents argued that these courses also helped them to develop their social networks and make friends. A female respondent with physical impairment from Nairobi narrates her experience:

“I received skills training on employability from the Association for the Physically Disabled of Kenya and also training on inclusive employability from Sightsavers. These have helped me on how to apply for jobs, how to present myself in job interview and preparing a presentation. In these trainings, I have also developed people skills, which has helped my social relations.”

## **Access to flexible financial products using mobile finance**

Participants reported that flexible financial products, which could be accessed without a formal bank account, such as M-Pesa (mobile money) supported their livelihood activities and promoted their financial independence. Respondents who ran their own small businesses reported that M-Pesa made microfinance borrowing, loan repayments and money management much easier. This is how a female respondent with albinism from Homa Bay shared her experiences of using M-Pesa:

“Not having to walk to the bank, even to withdraw cash or save my earnings, has been exceptional help for me for buying goods in the

nearby market and selling at my food stall. Otherwise, it is painful for me to walk under hot sun with my condition.”

A female respondent with physical impairment from Homa Bay highlighted similar positive experiences with managing her finances using M-Pesa:

“I have a better control of my money now, which means I know how much loan I have, how much I need to pay back and how much money I am saving regularly. I can decide how to use my money to grow my business without having to rely on family members’ support for money management.”

Another female with a physical impairment, who uses a wheelchair, also praised opportunities given to her by mobile finance:

“Most ATMs in cities or towns are inaccessible for wheelchair users or blind persons. But being able to get money using a code from the phone has taken away that challenge. Also, it is easier to receive financial support from family members without having to travel.”

A female respondent with a physical impairment from Homa Bay shared how vocational training and start-up capital helped her to set up her own business:

“I was struggling with finding an employment before. With the training and microfinance to set up my own business, I have been able to do the work I enjoy and earn for my family.”

A youth with a disability in front of an M-Pesa centre. It has been praised as an accessible money management platform that has supported livelihoods for youth with diverse impairments.



## Inclusive public infrastructure and public spaces

Participants reported that many newly built public facilities, such as universities, government offices, pedestrian crossings and bridges were accessible to people with

disabilities. This was thought to be extremely important, as young people with disabilities could access most of these new buildings when they needed to acquire certain licences or documentation for their businesses. Study participants called for further developments in this area and for making disability adjustments in all public buildings. A male with multiple impairments from Nairobi commented:

“All infrastructure, new or old, should be designed to accommodate all types of disabilities, because we can see how much we can benefit from it with easy access to new office buildings and universities.”

A wheelchair accessible infrastructure has removed accessibility barriers for many.



A blind person using a grabrail to guide his way to a newly adapted, accessible public building.



## Inclusive employment practices

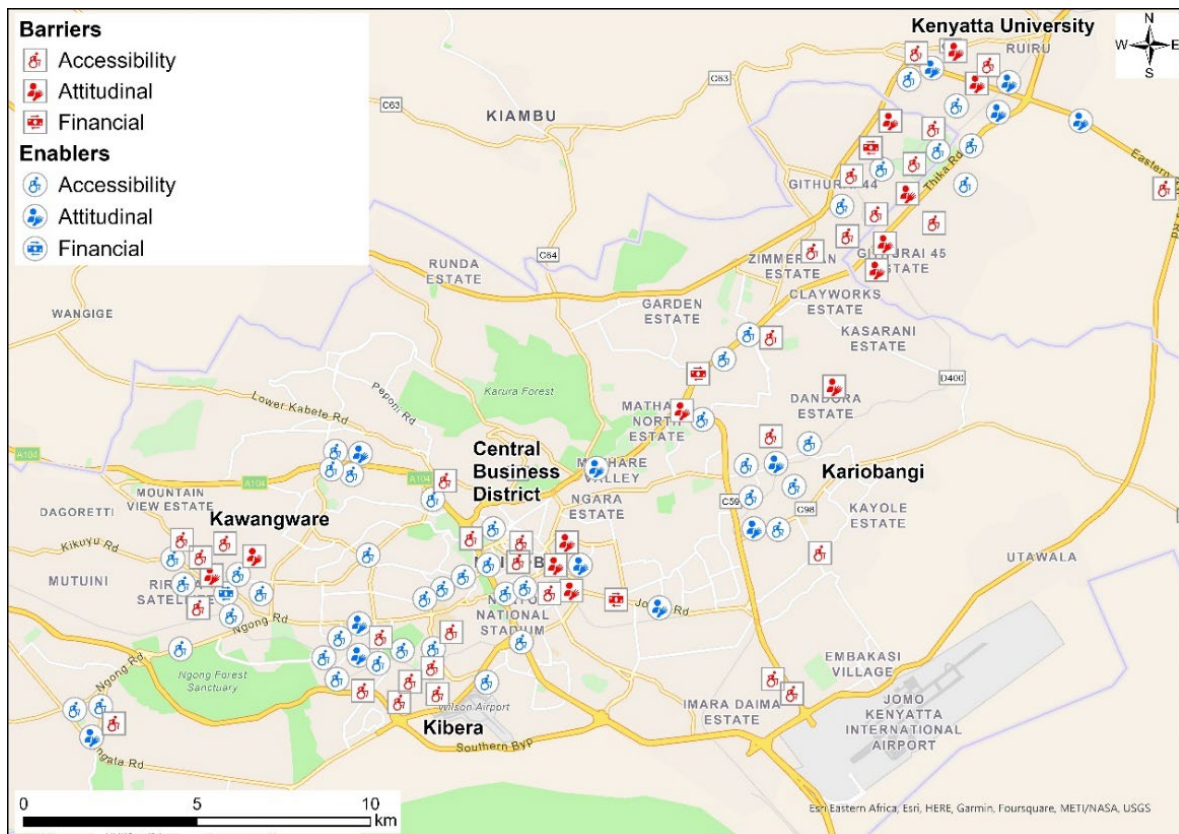
There were also reported examples of some employers adjusting their workplaces to accommodate needs of people with disabilities. For example, a male respondent with multiple impairments from Nairobi working for a large corporation described how his employer had put in place a number of adjustments, including provision of large screens for employees with low vision and transportation services for employees with physical impairments:

“Generally, I know we have the diversity and integration department that supports those with disabilities. Personally, I have been

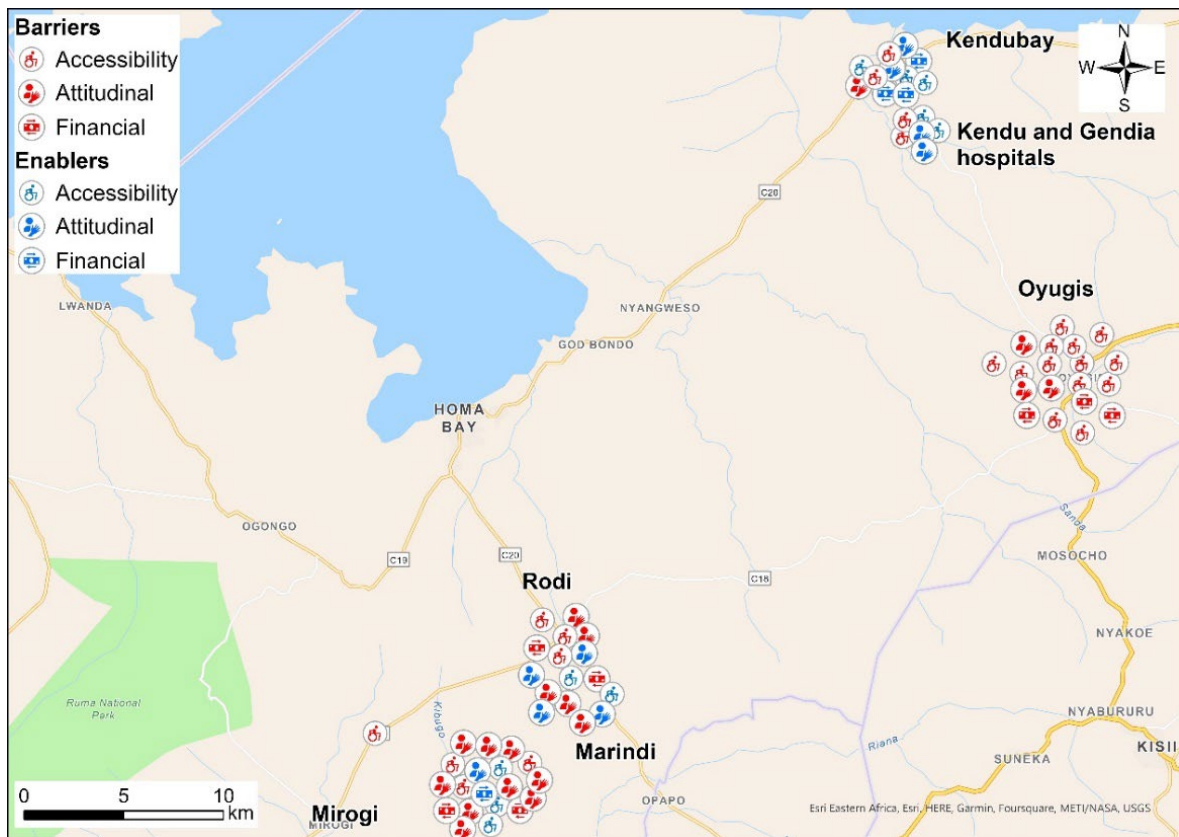
supported with a laptop that has a bigger screen and another large screen which I can use as a monitor. My medical cover has also been catered for; I am also able to get prescription glasses.”

When asked about specific inclusive practices that have enabled them to get employed and progress at work, study respondents mentioned accessible and inclusive job interviews, disability awareness training for employers and other employees, and flexible working hours.

**Map 3. Nairobi mapping representing different types of barriers and enablers in youth with disabilities’ respective communities.**



**Map 4. Homa Bay mapping representing different types of barriers and enablers in youth with disabilities' respective communities.**



## Discussion

This study provides an up-to-date snapshot of the aspirations and lived experiences of Kenyan youth with disabilities, with regards to their livelihoods. The findings provide a fascinating insight into how personal, social, and environmental factors combine to result in the opening and closing of certain options.

It also provides suggestions for changes that could be made to reduce the barriers preventing young people with disabilities from achieving their dreams. While factors linked to impairments are undoubtedly an important factor in the challenges they experience, the narratives clearly show that environmental drivers resulting from limited education opportunities, gender inequities, financial means and inaccessible locations play a huge role in the trajectory that an individual is able to follow.

### Aspirations and goals

With regards to livelihood aspirations, youths voiced a range of diverse goals and dreams for their lives. However, it became evident that all these aspirations highlight young people's desire to work and be productive members of society, counteracting a common stigmatising social perception that people with disabilities do not want to

work and are happy to be dependent on government subsidies and charitable donations.

While more education was a goal for most, young people with secondary education or above were particularly keen to garner further educational qualifications. The ultimate goal of these individuals was to become self-reliant through obtaining a position of leadership in their field of interest, normally the formal sector. This group in particular was keen to gain a position of leadership in order to help other youth with disabilities, either practically or through acting as a role model.

A second group, many of whom left school early, either in primary or early secondary, and remained unemployed, voiced a desire to gain practical skills through vocational training. Ultimately, they wanted to become self-reliant, mainly through running their own small business, or finding a skilled mid-level role in employment.

A third group often included females living in rural areas, whose main aspiration was to get married, have children and run a farm. They described this in terms of living a 'normal' life and fulfilling the expectations of society.

One of the key motivating factors common throughout the narratives was self-reliance, frequently described as allowing a person to live somewhere safe and accessible. Others described it through the notion of self-esteem or through the act of citizenship and belonging. Individuals in all groups were keen to move away from the position of dependence on others, and many wanted to be in a position where other family members were dependent on them.

While little scholarly literature exists on the subject of livelihood aspirations of youth with disabilities in Kenya or elsewhere in Africa, a study from Canada<sup>61</sup> among youth with physical disabilities aged 15 to 25 found similar results. Youths reported a wide variety of career aspirations. The study underlined the importance of understanding career aspirations as it may: "Prompt or hinder educational and career planning, guide learning, help organise life options and choices, and contribute to youth's preparations for adult life."

A survey<sup>62</sup> among 600 adults (aged 20-60) in Nigeria found that career aspirations were positively influenced by disability type and education. In turn, career aspirations were an important factor in ultimate employment opportunities (mediated by disability, gender, age, ethnic group, and basic skills). This means that aspirations are an important step on the pathways to successful livelihoods.

## **Lived experiences and barriers to aspirations**

The majority of youths participating in the study reported not yet achieving their aspirations, and they discussed their current situations and the barriers preventing them from achieving their desires and dreams.

A major barrier to further education – including vocational training – was a lack of money to pay fees. Many individuals came from families who were unable to support them, or who had prioritised the education of their siblings without disabilities over them. Although some grants and support mechanisms exist to support young people with disabilities with fees, many participants were unaware of, or could not access, them. The few participants who had used them reported them as being very slow and difficult to navigate.

Many youths had not achieved highly in school, as the education provided had not been inclusive of children with disabilities. Inaccessible infrastructure, lack of teaching aids and a lack of awareness or training among teachers were among the reasons why, despite attending school, some youths had not achieved formal qualifications, or had achieved lower than desired levels.

Among those youths who had achieved some level of qualification to acquire a job in the formal sector, barriers remained, mainly linked to discriminatory attitudes and practices and an unadjusted environment at the workplace.

Participants described not being given interviews; once interviewed, not being given the job; being given a different, lower status job; and repeated experiences of being fired soon after being hired. Participants ascribed these experiences to employers' misconceptions about people with disabilities having high health needs and requiring a lot of time off work. They also felt that many employers lacked awareness and confidence to employ a person with a disability, and to make the appropriate adaptations to accommodate them to work effectively. Not only did this affect individuals' employment, but it also affected their self-esteem and led to strong feelings of resentment. This finding concurred with the literature from India<sup>63</sup> and Canada<sup>64</sup>, which reported that youth with disabilities were less likely to be selected for interviews, or indeed be hired, in comparison with their peers without disabilities.

Youth looking to start up their own business were faced with challenges relating to start-up capital. Despite the existence of a range of loans and grants available to marginalised groups, including youth with disabilities, many participants were unaware of them. Among those who were aware, they described a number of challenges with the processes of acquiring them, with fewer accessing them. Barriers to accessing the grants and support funds included difficult and complicated procurement processes, difficulties in 'proving' their disability status, and perceived corruption and nepotism among staff administering the funds. The few who had accessed grants described their influence on their livelihood's trajectory as important and having allowed them to get started in their chosen area of work. In addition to accessing the loans, access to flexible financial products such as M-Pesa further supported individuals' ability to run successful businesses, removing the need to visit banks in-person, including issues with transport and physical accessibility.

Finally, a major barrier reported by nearly all youth was physical accessibility, including the areas in which they lived, places of work, and transport to get between



the two. With many youths with disabilities living in relative poverty, many lived in areas without good infrastructure, including paved roads, thereby causing challenges for individuals with mobility challenges, and particularly those with physical and visual impairments.

Many offices are not located in locations near to where youths live, and many buildings do not have ramps, or are difficult to access otherwise. As many youths rely heavily on public transport, poor accessibility makes it difficult to get around, with many buses not being accessible for people with disabilities. This is partly because of their design, and partly because they are operated in a way where they constantly move, making it difficult for individuals to get on and off safely. Women face further challenges as these buses are often tightly packed, and sexual harassment is rife. Women with disabilities are often targeted for sexual assault as they are considered 'fair game' and less likely to report perpetrators. As a result, many women with disabilities prefer not to commute to work, which significantly limits the number of job options available to them.

The barriers reported here are very much in line with those reported in studies conducted elsewhere on the Africa continent, although notably this was among a few that used participatory approaches with the youth themselves. A scoping review<sup>65</sup> conducted in 2021 found that the majority of barriers hindering employment for adults with disabilities in low- and middle-income countries were found in the environment, with personal factors playing a minor role.

They reported that lack of infrastructure – particularly health and transport, as well as negative attitudes from employers, family, and broader communities – were the major barriers to employment. Low educational attainment and lack of skills were cited as secondary issues. In relation to experiences reported about job application and recruitment process in this study, this finding is similar to findings from other low-income countries. A study conducted in South Africa<sup>66</sup> showed that, despite progressive legislation, people with disabilities experience barriers in the integration phase of employment and experience significant challenges caused by disclosure of disability during the job application phase. A study from USA<sup>67</sup> has identified that this challenge is prevalent even in high-income countries, as disclosure of disability exposes people with disabilities to stereotypical and stigmatising attitudes during recruitment process.

## **Changing perceptions and engaging with policymakers**

Through the data analysis and dissemination workshops, peer researchers and stakeholders were able to reflect on the findings of the interviews, together with the maps and photographs collected by peer researchers. They discussed the implications of the findings and made a number of recommendations for sharing the findings, and also agreed recommendations to improve the situation for youth with disabilities, with regards to their livelihoods.

## **Disability legislation implementation and public sector accountability**

Policy stakeholders agreed that steps need to be taken to strengthen accountability mechanisms to hold institutions to account for the implementation of the disability legislation. This may also include expanding the role of the National Council for Persons with Disabilities (NCPWD) to create accountability across ministries. It may also include examining the hiring practice within the public sector to ensure disability quotas are met and promote more people with disabilities into policymaking positions of leadership.

Further to this, disability awareness should be integrated across the government agenda and made a mandatory part of the training of all civil servants.

## **Policy and legislation around formal employment**

Stakeholders agreed that both the public and private sectors should make deliberate efforts to employ youth with disabilities in compliance with the relevant Kenyan employment policies.

They called on employers, as a minimum, to effectively implement the 5% employment quota for people with disabilities but be aspired to go beyond this quota.

For people with disabilities who are currently employed, employers should commit to more inclusive work practices, specifically accessible and inclusive interview practices, disability training, and flexible working hours.

## **Government grants and loans**

Stakeholders agreed that the government procurement system for disbursing grants and loans needs to be made more inclusive and accessible. The government should roll out information management systems that cater to the diverse information access needs of youth with disabilities. They need to focus on increasing knowledge and awareness of the availability of the grants and loans, and to create an application system that is accessible and transparent.

## **Policy and legislation around inclusive education**

Government commitments around inclusive education need to be met and upheld. In particular, the availability of modern, adapted learning materials for learners with disabilities should be promoted in retail platforms. Innovation should also be encouraged through research to facilitate adoption of technology in development of learning materials to aid the delivery of the curriculum to learners with disabilities.

Some stakeholders also recommended that the government should promote increased inclusive education at basic level. Integrating learners with and without disabilities would enable them to learn and appreciate each other and, subsequently, eliminate existing stereotypes about disability which lead to stigma and discrimination.

There were also recommendations for the government to increase its bursaries for learners with disabilities, to promote awareness about them, and to make the application system simpler.

## Public infrastructure and transport

In addition to enforcing the building code and ensuring accessible public spaces, the government needs to review regulation of the public transport sector. A focus on accessibility for people with diverse needs, and safety, particularly for women, needs to be ensured.

## Reflections on study approach and methods

Although participatory research methods emphasise the inclusion of collaborators including peer researchers throughout the project, many studies claiming to use participatory approaches fail to engage peer researchers in coding and data analysis process<sup>68,69</sup>. The full inclusion of peer researchers with disabilities in this study, from inception to dissemination, has not only ensured full operationalisation of the CBPR methodology, but also crafted a disability inclusive participatory research method.

Reflectivity<sup>70,71</sup> from the initial research phase enabled lead researchers to identify issues around accuracy between what is being said by a trainer and what is being translated to peer researchers with hearing impairments by sign language interpreters. During the training sessions, we realised that bringing in new sign language interpreters every time their service was required may lead to misinterpretations and misunderstandings of research activities. Since the interpreters not involved throughout the training may introduce their own understandings and interpretations, rather than those established during earlier days of training. Therefore, the team identified the need to include the same sign language interpreters along with peer researchers throughout the study, to ensure consistency and help promote data quality, reliability, and validity.

The capture and analysis of images produced by youth with disabilities also offered insight into how digital technology and arts (documentary photography) can act as an inclusive, accessible and to some extent explicit medium for young people to elucidate certain dimensions of their identity and life.

Even though Covid-19 lockdown posed a major challenge for research activities, especially peer researcher trainings, the research team collectively worked out innovative ways of working by making use of digital technology. Several research skill development trainings were delivered virtually, and participatory instant messaging<sup>72</sup>, using WhatsApp group, was used to engage with peer researchers when in-person research activities were not possible. Whilst it lacked the benefits of in-person meetings and communication, the participatory instant messaging facilitated a unique platform for sharing learnings and challenges peer researchers experienced during training and fieldwork, with instant virtual support provided where possible.

Use of participatory instant messaging also fostered a platform for reflexivity for peer researchers and professional researchers as it provided space for documenting approach and experience of data collection, relationship with other participants and other peer researchers, and reflection on how peer researchers' impairments hindered or aided rapport building with the research participants. The research team was able to regularly reflect on points raised and make necessary adaptation.

Other identified benefits of participatory instant messaging were centred on the enhanced ease and quality of communication of a geographically distributed research team including peer researchers, and the heightened connectedness between professional researchers from the UK, Nairobi, and the peer researchers from across Nairobi and Homa Bay.

Alongside minor technical and connectivity issues, the main challenge for the professional researchers from the UK was to be available for support beyond working hours in the UK, due to the time difference between two countries and to negotiate divergent expectations regarding the extent of support that can be provided through instant messaging.

Despite these challenges and constraints, the implementation of participatory instant messaging approach was received positively by the peer researchers with different disabilities and was found to be inclusive and an accessible tool to support research activities.

## Limitations of the study

Limitations in the study are linked to delays in implementing research activities caused by Covid-19 lockdowns. The research team had to apply for a six-month no-cost extension with the British Academy in order to deliver all planned research activities. Another limitation caused by Covid-19 was the inability to bring peer researchers from Homa Bay and Nairobi to one place during the inception event and for peer researchers' training. This deprived the peer researchers from the two study locations to meet in-person at one location and share and learn together. Nevertheless, participatory instant messaging helped to minimise this barrier to some extent.



## References

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- 1 ILO. (2022) Livelihood services, online. Available at: [https://www.ilo.org/asia/WCMS\\_224123/lang--en/index.htm](https://www.ilo.org/asia/WCMS_224123/lang--en/index.htm)
- 2 *ibid*
- 3 World Health Organization (2011) World report on disability 2011. World Health Organization.
- 4 World Health Organization (2022) Global report on health equity for persons with disabilities. Geneva. Available at: <https://www.who.int/publications/i/item/9789240063600>
- 5 Rohwerder, B. (2020) Kenya Situational Analysis. Disability Inclusive Development. Available at: [https://opendocs.ids.ac.uk/opendocs/bitstream/handle/20.500.12413/15508/DID%20Kenya%20SITAN\\_June%202020.pdf?sequence=1&isAllowed=y](https://opendocs.ids.ac.uk/opendocs/bitstream/handle/20.500.12413/15508/DID%20Kenya%20SITAN_June%202020.pdf?sequence=1&isAllowed=y)
- 6 World Health Organization (2022) Global report on health equity for persons with disabilities. Geneva. Available at: <https://www.who.int/publications/i/item/9789240063600>
- 7 KNBS (2018) Kenya Integrated Household Budget Survey (KIHBS) Nairobi.
- 8 Opoku, M. P., et al. (2017) Access to employment in Kenya: the voices of persons with disabilities. *International Journal on Disability and Human Development*. 16(1): p. 77.
- 9 Leonard Cheshire (2019) Reimagining the workplace: disability and inclusive employment. Leonard Cheshire, London, UK.
- 10 KNBS (2019) Kenya Population and Housing Census. Volume II: Distribution of Population by Administrative Units. Available at: <https://housingfinanceafrica.org/app/uploads/VOLUME-II-KPHC-2019.pdf>
- 11 Ministry of Public Services, Gender, Senior Citizens Affairs & Especial Programmes (2021) Status Report on Disability Inclusion in Kenya, 2021: Implementation of the Global Disability Summit Commitments of 2018. Available at: <https://www.socialprotection.go.ke/sites/default/files/Downloads/STATUS-REPORT-ON-DISABILITY-INCLUSION-IN-KENYA-2021.pdf>
- 12 KNBS (2008) Kenya National Survey for Persons with Disability 2008. National Coordinating Agency for Population and Development and Kenya National Bureau of Statistics. Available at: <https://ncpd.go.ke/wp-content/uploads/2022/06/2007-Kenya-National-Survey-on-Persons-with-Disabilities.pdf>
- 13 Maina, P.W. (2016) Experiences of People with Disabilities in Accessing Employment In Kenya: A Case Of Nairobi County. University of Nairobi. Available at: [http://erepository.uonbi.ac.ke/bitstream/handle/11295/100421/Maina\\_Experiences%20Of%20People%20With%20Disabilities%20In%20Accessing%20Employment%20In%20Kenya,%20%20A%20Case%20Of%20Nairobi%20County.pdf?sequence=1&isAllowed=y](http://erepository.uonbi.ac.ke/bitstream/handle/11295/100421/Maina_Experiences%20Of%20People%20With%20Disabilities%20In%20Accessing%20Employment%20In%20Kenya,%20%20A%20Case%20Of%20Nairobi%20County.pdf?sequence=1&isAllowed=y)



---

14 Opoku, M.P., et al. (2017) Access to employment in Kenya: the voices of persons with disabilities. *International Journal on Disability and Human Development*. 16(1): p. 77.

15 Mugo, J., J. Oranga, and N. Singal. (2010) Testing youth transitions in Kenya: Are young people with disabilities falling through the cracks? RECOUP Working Paper 34. Available at:

[https://ceid.educ.cam.ac.uk/researchprogrammes/recoup/publications/workingpapers/WP34\\_MUGO\\_ORANGA\\_SINGAL\\_final.pdf](https://ceid.educ.cam.ac.uk/researchprogrammes/recoup/publications/workingpapers/WP34_MUGO_ORANGA_SINGAL_final.pdf)

16 KNBS (2008) Kenya National Survey for Persons with Disability 2008. National Coordinating Agency for Population and Development and Kenya National Bureau of Statistics. Available at: <https://ncpd.go.ke/wp-content/uploads/2022/06/2007-Kenya-National-Survey-on-Persons-with-Disabilities.pdf>

17 CRPD (2006) Convention on the Rights of Persons with Disabilities. United Nations. Available at: <https://www.un.org/development/desa/disabilities/convention-on-the-rights-of-persons-with-disabilities.html>

18 Ratification Status for CRPD (online) Available at:

[https://tbinternet.ohchr.org/\\_layouts/15/TreatyBodyExternal/Treaty.aspx?Treaty=CRPD](https://tbinternet.ohchr.org/_layouts/15/TreatyBodyExternal/Treaty.aspx?Treaty=CRPD)

19 NCPD (2003) Persons with Disabilities Act, 2003: Kenya. Available at:

[https://www.un.org/development/desa/disabilities/wp-content/uploads/sites/15/2019/11/Kenya\\_Persons-with-Disability-Act.pdf](https://www.un.org/development/desa/disabilities/wp-content/uploads/sites/15/2019/11/Kenya_Persons-with-Disability-Act.pdf)

20 Rohwerder, B. (2020) Kenya Situational Analysis. Disability Inclusive Development. Available at:

[https://opendocs.ids.ac.uk/opendocs/bitstream/handle/20.500.12413/15508/DID%20Kenya%20SITAN\\_June%202020.pdf?sequence=1&isAllowed=y](https://opendocs.ids.ac.uk/opendocs/bitstream/handle/20.500.12413/15508/DID%20Kenya%20SITAN_June%202020.pdf?sequence=1&isAllowed=y)

21 Khaemba, W. et al. (2017) Labour market situation in Kenya: promoting right to work and employment for persons with disabilities (PWDs). African Centre for Technology Studies.

22 NCPD (2003) Persons with Disabilities Act, 2003: Kenya. Available at:

[https://www.un.org/development/desa/disabilities/wp-content/uploads/sites/15/2019/11/Kenya\\_Persons-with-Disability-Act.pdf](https://www.un.org/development/desa/disabilities/wp-content/uploads/sites/15/2019/11/Kenya_Persons-with-Disability-Act.pdf)

23 The Employment Act 2007: Kenya

24 Bunning K., Gona J. K., Odera-Mung'ala V., Newton C. R., Geere, J. A., Hong, C. S. and Hartley, S. (2014) Survey of rehabilitation support for children 0–15 years in a rural part of Kenya, *Disability and Rehabilitation*, 36:12, 1033-1041, DOI: 10.3109/09638288.2013.829524

25 Hashemi G., Wickenden M., Bright T. and Kuper H. (2022) Barriers to accessing primary healthcare services for people with disabilities in low- and middle-income countries, a Meta-synthesis of qualitative studies, *Disability and Rehabilitation*, 44:8, 1207-1220, DOI: 10.1080/09638288.2020.1817984

26 Kabare, K. (2018) Social Protection and Disability in Kenya

- 
- 27 Wa Mungai (2008) Disability Rhetorics and Identity in Kenya in Culture, Performance, and Identity: Paths of Communication in Kenya, K. Njogu, Editor. Twaweza Communications Nairobi
- 28 Wa-Mungai, M. (2007). Bodily Contrariness: Some Preliminary Questions on Disability and Leadership in Kenya. Governance and Development: Toward Quality Leadership in Kenya ed. K. Njogu. Twaweza Communications: Nairobi.
- 29 Sustainable Development Goals. United Nations. Available at: <https://sdgs.un.org/goals>
- 30 Kenya Vision 2030. Available at: <https://vision2030.go.ke/about-vision-2030/>
- 31 Denzin, N. and Lincoln, Y. (2003) Introduction: The Discipline and Practice of Qualitative Research. The Landscape of Qualitative Research. Theories and Issues (2005): 1-45.
- 32 Crotty M. (1998) The foundation of social research: Meaning and perspective in the research process. Thousand Oaks, CA: Sage.
- 33 Moon, K., Brewer, T. D., Januchowski-Hartley, S. R., Adams, V. M., and Blackman, D. A. (2016) A guideline to improve qualitative social science publishing in ecology and conservation journals. Ecology and Society, 21(3).
- 34 Chun Tie, Y., Birks, M., and Francis, K. (2019) Grounded theory research: A design framework for novice researchers. SAGE open medicine, 7.
- 35 Kincheloe, J. L. and McLaren, P. (2011). Rethinking critical theory and qualitative research. In key works in critical pedagogy, pp. 285-326. Brill.
- 36 Israel, Barbara A., Amy J. Schulz, Edith A. Parker, and Adam B. Becker. (1998) Review of Community-Based Research: Assessing Partnership Approaches to Improve Public Health. Annual Review of Public Health, 19 (1): 173–202.
- 37 Hacker, K. (2013) Community-Based Participatory Research. London: SAGE.
- 38 Tremblay, M.-C., et al. (2018) Understanding community-based participatory research through a social movement framework: a case study of the Kahnawake Schools Diabetes Prevention Project. BMC public health. 18(1): p. 487.
- 39 Hacker K. (2013) Community-based participatory research: Sage Publications.
- 40 Goodman, M. S., Thompson V. S., and Hood S. (2018) Community-Based Participatory Research. In Public Health Research Methods for Partnerships and Practice, 1–22. London: Routledge.
- 41 Kemmis S, McTaggart R. (2005) Communicative Action and the Public Sphere. The Sage Handbook of Qualitative Research. 3:559-603.



---

42 Creswell, J.W. and C.N. Poth (2016) *Qualitative Inquiry and Research Design: Choosing Among Five Approaches*. Sage publications.

43 Greenwood, M. (2017) The capacity of community-based participatory research in relation to disability and the SDGs. *Disability and the Global South*, Vol 4, No.1, 1143-1163

44 Devotta, K., Woodhall-Melnik, J., Pedersen, C., Wendaferew, A., Dowbor, T. P., Guilcher, S. J., Hamilton-Wright, S., Ferentzy, P., Hwang, S. W., and Matheson, F. I. (2016). Enriching qualitative research by engaging peer interviewers: a case study. *Qualitative Research*, 16(6), 661–680. <https://doi.org/10.1177/1468794115626244>

45 Daly Lynn, J., Washbrook, M., Ryan, A., McCormack, B., and Martin, S. (2021). Partnering with older people as peer researchers. *Health Expectations*, 24(5), 1879-1889. <https://onlinelibrary.wiley.com/doi/full/10.1111/hex.13331>

46 Gallagher L. A. and Gallacher M. (2008) Methodological immaturity in childhood research? Thinking through participatory methods. *Childhood* 15(4): 499–516.

47 Charlton, J. (1998) *Nothing About Us Without Us: Disability Oppression and Empowerment* California Scholarship Online, 24 May 2012. Available at: <https://doi.org/10.1525/california/9780520207950.001.0001>

48 Denzin N. (2003) *The cinematic society and the reflexive interview*. Postmodern interviewing. Thousand Oaks, CA: Sage, 141–156.

49 Ministry of Public Service, Y.a.G.A. (2018) *Kenya Youth Development Policy* S.D.f.P.S. Youth, Editor. Nairobi.

50 Emerson, R. W. (2015). Convenience Sampling, Random Sampling, and Snowball Sampling: How Does Sampling Affect the Validity of Research? *Journal of Visual Impairment & Blindness*, 109(2), 164–168. Available at: <https://doi.org/10.1177/0145482X1510900215>

51 NVivo (Version 12) QRS International Party Ltd. Available at: <https://lumivero.com/products/nvivo/>

52 Braun, V. and Clarke, V. (2017). Using thematic analysis in psychology. *Quality Research in Psychology*, 2006; 3 (2): 77–101.

53 Braun, V. and Clarke, V. (2019) Reflecting on reflexive thematic analysis, *Qualitative Research in Sport, Exercise and Health*, 11:4, 589-597, DOI: 10.1080/2159676X.2019.1628806

54 Brown, G., Reed, P., and Raymond, C. M. (2020) Mapping place values: 10 lessons from two decades of public participation GIS empirical research. *Applied Geography*, 116, 102156. Available at: <https://www.sciencedirect.com/science/article/pii/S0143622819310355?via%3Dihub>



---

55 Felker-Kantor, E., Polanco, C., Perez, M. et al. (2021). Participatory geographic mapping and activity space diaries: innovative data collection methods for understanding environmental risk exposures among female sex workers in a low-to middle-income country. *International Journal of Health Geographics*, 20, 25.

Available at: <https://doi.org/10.1186/s12942-021-00279-9>

<sup>56</sup> Fagerholm, N., Raymond, C. M., Olafsson, A. S., Brown, G., Rinne, T., Hasanzadeh, K., Broberg, A. and Kytta, M. (2021) A methodological framework for analysis of participatory mapping data in research, planning, and management, *International Journal of Geographical Information Science*, 35:9, 1848-1875, DOI: 10.1080/13658816.2020.1869747. Available at:

<https://www.tandfonline.com/doi/epdf/10.1080/13658816.2020.1869747?needAccess=true&role=button>

57 Wang, C. and Burris, M. (1994) Empowerment through photo novella: Portraits of participation. *Health Education Quarterly* 21(2):171-186.

58 Wang, C., Burris, M., and Xiang, Y. P. (1996) Chinese village women as visual anthropologists: A participatory approach to reaching policymakers. *Social Science & Medicine* 42(10):1391-1400.

59 Musoke, D., Raven, R., Basnet, S., Idriss, A. Phiri, B., Ssemugabo, C., Tsey, I. H. and Ozano, K. (2022) Using photovoice to inform and support health systems to reach marginalised populations: experiences from six low- and middle-income countries, *Global Public Health*, 17:12, 3912-3930, DOI: 10.1080/17441692.2022.2092179

60 CommCare (2023) Dimagi, Inc. Available at: <https://www.dimagi.com/commcare/>

61 Lindsay, S., Cagliostro, E., Leck, J., and Stinson, J. (2021). Career aspirations and workplace expectations among youth with physical disabilities. *Disability and Rehabilitation*, 43(12), 1657-1668.

62 Melugbo, D. U., Onwuka, A. I., Okoli, J. O., Jemisenia, J. O., Ugochukwu, S. A., and Owoeye, G. (2022). Why Inclusion Matters: Understanding How Types of Disabilities, Socio-demographic Characteristics and Occupational Aspirations Influence Employment Opportunities among Persons Living with Disabilities. *Vision*, 26(4), 491–503. Available at: <https://doi-org.ez.lshtm.ac.uk/10.1177/09722629211003693>

63 Kulkarni, M. (2016). Organizational career development initiatives for employees with a disability. *The International Journal of Human Resource Management*, 27(14), 1–18. Available at: <https://doi.org/10.1080/09585192.2015.1137611>

64 Gunderson, M., and Lee, B. Y. (2015). Pay discrimination against persons with disabilities: Canadian evidence from PALS. *The International Journal of Human*

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Resource Management, 27(14),1–19. Available at:  
<https://doi.org/10.1080/09585192.2015.1072106>

65 Morwane R. E., Dada S., and Bornman J. (2021) Barriers to and facilitators of employment of persons with disabilities in low- and middle-income countries: A scoping review. *African Journal of Disability*.10:833. DOI: 10.4102/ajod.v10i0.833.

66 McKinney E. L. and Swartz L. (2021) Employment integration barriers: experiences of people with disabilities, *The International Journal of Human Resource Management*, 32:10, 2298-2320. Available at:  
<https://doi.org/10.1080/09585192.2019.1579749>

67 Madaus, J. W. (2008). Employment self-disclosure rates and rationales of university graduates with learning disabilities. *Journal of Learning Disabilities*, 41(4), 291–299. Available at: <https://doi.org/10.1177/0022219407313805>

68 Fletcher, A. J., MacPhee, M., and Dickson, G. (2015). Doing participatory action research in a multicase study: A methodological example. *International journal of qualitative methods*, 14(5), 1609406915621405.

69 Smith, L., Bratini, L., Chambers, D.-A., Jensen, R. V., and Romero, L. (2010). Between idealism and reality: Meeting the challenges of Participatory Action Research. *Action Research*, 8, 407–425. Available at:  
<http://doi.org/10.1177/1476750310366043>

70 Dodgson J. E. (2019) Reflexivity in Qualitative Research. *Journal of Human Lactation*. 35(2):220-222. Available at:  
<https://journals.sagepub.com/doi/10.1177/0890334419830990>

71 Palaganas, E. C., Sanchez, M. C., Molintas, M. P., and Caricativo, R. D. (2017). Reflexivity in Qualitative Research: A Journey of Learning. *The Qualitative Report*, 22(2), 426-438. Available at: <https://doi.org/10.46743/2160-3715/2017.2552>

72 Dawson, J., Einion-Waller, A. and Jones, D. (2021), Instant messaging: a novel means of facilitating the participation of hard-to-reach groups in sensitive topic research, *Qualitative Research Journal*, Vol. 21 No. 2, pp. 206-216. Available at:  
<https://doi.org/10.1108/QRJ-06-2020-0061>

We work with partners in low and middle income countries to eliminate avoidable blindness and promote equal opportunities for people with disabilities.

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