

# Empowering Persons with Disabilities to Reduce Poverty: A Case Study of Action on Disability and Development, Ghana

Augustina Naami<sup>1\*</sup> and Ayisha Mikey-Iddrisu<sup>2\*</sup>

<sup>1</sup>Department of Social Work, University of Northern Iowa, Cedar Falls, USA

<sup>2</sup>Gender Program Advisor, CARE TAMALE SUB-OFFICE, Ghana

## Abstract

Poverty is a global phenomenon, defined to include material, non-material, and a myriad of socio-cultural and political factors. Persons with disabilities (PWD) are among the poorest in most parts of the world. The link between poverty and disability is attributed to capitalism and socio-cultural factors such as discrimination. Development literature highlights the need for empowerment programs in changing the situation for PWD.

The study combined emancipatory and case studies research approaches to gain in-depth understanding of Action on Disability and Development's (ADD) empowerment programs to reduce poverty among PWD in Ghana. Data was collected from a total of four focus groups and six semi-structured individual telephone interviews from two districts (Saboba and Jirapa) in the Northern and Upper West regions respectively, and agency records.

Evidence from the study shows that ADD's empowerment programs have given PWD a voice to challenge the injustices, vulnerability, marginalization, social exclusion, powerlessness, and for that matter, the poverty they encounter in their daily lives. The study suggests that ADD's programs have result in increased socio-economic and political participation of PWD. However, the study also suggests that, although PWD understand that they are their own change agents and must challenge the injustices they encounter and hence poverty; they also persistently seek to meet their immediate basic needs, given their poverty situation. Therefore, the need for complementary efforts in development work is imperative, especially, in developing countries where safety net programs are virtually non-existent, and there is practically no accessible transportation, information, and education and health care facilities.

**Keywords:** Empowerment; Ghana; Action on disability and development; Poverty

## Introduction

### Poverty and disability

Poverty is a major issue confronting billions of people in the world. In 2008, The World Bank [1] estimated 1.29 billion people were living in absolute poverty, i.e., they live on less than \$1.25 a day. About 22% of this population lives in developing countries, in addition to 43% who live on less than \$2 a day. The World Bank admits that extreme poverty is still a global challenge experienced in all parts of the world.

There are different approaches to defining poverty. Absolute poverty defines poverty in terms of the lack of basic necessities of life, while relative poverty is based on the notion that some people are unable to live, financially or socially, the minimum standard in accordance with customs and values of a given society [2,3]. Other definitions of poverty embrace its multifaceted dimensions: material, non-material, and the myriad of socio-cultural and political aspects of the phenomenon that keep people vulnerable, powerless, isolated and excluded from participating in the socio-economic and political development [3-5].

The United Nations defines poverty as the denial of opportunities and the violation of human dignity. Its human development index is a measure of poverty based on indicators such as literacy, education, health care and other basic necessities [6]. For example, according to the 2007/2008 Human Development Index (HDI), Ghana has 0.532 HDI, hence ranked 136 out of 177 countries [6]. This rating reflects Ghana's poor performance in meeting the health, education, employment, and nutritional needs of its citizens.

Ghana Statistical Service's report in 2003 indicates that a total of 32.4% of Ghanaian children, under the age of five, experienced stunted growth resulting from malnutrition [7]. The three Northern regions

(Northern, Upper East and Upper West-study location; Figure 1) reported slightly lower figures of 30.9%. However, for some districts within those regions, for example, Saboba district, the figure was as high as 39.8%. Also, while the national rate of youth literacy (age 15-24) was estimated at 64.1% that of the three Northern regions was estimated at 42.3%. According to the Ghana Statistical Service, poverty rates reached 84% in the Upper West, 64% in the Upper East, and 42% in the Northern regions in 2005-2006. The report further states that literacy rates in the northernmost regions (Upper East, Upper West, and Northern) are well below the national average with huge gender differences. The overall literacy rate for women is 46%, compared to 67% for men [8]. Poverty is therefore geographically bound, with the people of the study area experiencing endemic poverty.

Persons with disabilities are among the poorest in most parts of the world, especially in developing countries [9-14]. The link between poverty and disability, though multifaceted, is attributed to capitalism on one hand [10,15,16], and socio-cultural factors on the other hand

**\*Corresponding author:** Augustina Naami, Ph.D., Assistant Professor, Department of Social Work, Sabin 255, University of Northern Iowa, Cedar Falls, IA 50614-0405, USA, Tel: 319-273-7485; Fax: 319-273-6976; E-mail: [augustina.naami@uni.edu](mailto:augustina.naami@uni.edu)

Ayisha Mikey-Iddrisu MA, Gender Program Advisor, CARE TAMALE SUB-OFFICE, P.O. Box 1785, Tamale, NR, Ghana, Tel: +233(0)372025700; Fax: +233(0)372025680; E-mail: [ayishetu.mikeyiddrisu@co.care.org](mailto:ayishetu.mikeyiddrisu@co.care.org), [ayishetu.mikeyiddrisu@co.care.org](mailto:ayishetu.mikeyiddrisu@co.care.org)

Received May 27, 2013; Accepted July 02, 2013; Published July 08, 2013

**Citation:** Naami A, Mikey-Iddrisu A (2013) Empowering Persons with Disabilities to Reduce Poverty: A Case Study of Action on Disability and Development, Ghana. J Gen Pract 1: 113. doi: [10.4172/2329-9126.1000113](https://doi.org/10.4172/2329-9126.1000113)

**Copyright:** © 2013 Naami A, et al. This is an open-access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited.

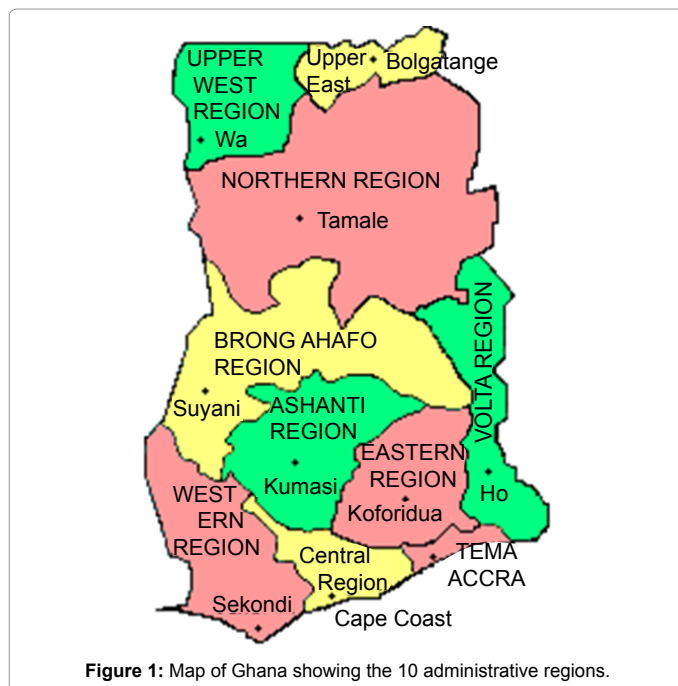


Figure 1: Map of Ghana showing the 10 administrative regions.

[10,12,15,17,18]. For example, the United Nations Enable indicates that the unemployment rate among PWD is as high as 80% in some countries. The high unemployment rate is attributed to employers' negative perceptions about PWD.

Similarly, Naami et al. [15] found that, in Ghana, employers' stereotypical behavior towards PWD and their unwillingness to provide accommodations for them, as well as the exclusion of PWD from funding opportunities contribute to their unemployment. These authors also found that negative societal attitudes about the capabilities of PWD (e.g., discrimination) contribute to their unemployment. Another cause of poverty among PWD is the insufficient or the lack of safety net programs, especially, in developing countries [11,18]. Given the prevalence of poverty among PWD and the fact that poverty is a human right issue, development literature highlights the need for empowerment programs in addressing the situation [19-23]. Hence the need to highlight Action on Disability and Development's empowerment programs to reduce poverty among PWD in Ghana and their impact.

### Action on disability and development

Action on Disability and Development (ADD) is United Kingdom based non-governmental organization. Established in Ghana in 1985, ADD works with Disabled People's Organizations (DPOs) in the three Northern regions, due to the severity of poverty in these regions. Action on Disability and Development also works with the national DPOs in the capital of Ghana, Accra. The two main objectives of ADD are: (1) to help build strong disability organizations to advocate for PWD and to challenge the injustices they encounter in their daily lives, as well as influence social policy, and (2) to support the inclusion of marginalized groups within the disability organizations.

Action on Disability and Development works within the framework of social model of disability. This model is premised on the belief that irrespective of their impairment, PWD have the same fundamental human rights as everybody else, and above all, they have the right

to determine their own future and control decisions that affect their lives. Central to ADD's approach to empowerment is that PWD must empower themselves in their quest to reduce poverty with resources from ADD. The role of ADD can be summed up as supporting DPOs through capacity building training, skills enhancement, and giving technical and financial support for their advocacy efforts. But, we need to know the effects of ADD's empowerment programs on PWD it serves.

### Purpose of the study

The study sought to determine:

- How ADD is working towards empowering PWD to reduce poverty
- How ADD's empowerment programs impact the lives of PWD
- And to make recommendations to improve on ADD's programs to better serve PWD

### Materials and Methods

#### Research design

The study combined emancipatory and case studies research approaches. Emancipatory research was used in recognition of the call for approaches to disability research which accrues benefits to the advancement of PWD and ensures full accountability to them and their organizations [24,25], instead of the traditional scientific approaches which reflect the oppressive power relationship PWD experienced in their daily lives [22,24]. The researchers' ontological perspective is premised on the notion that disability, and for that matter poverty, is caused by society. Our epistemology is based on the assumption that PWD are the experts of their own experiences. Thus, the use of qualitative approaches to allowed more scope for PWD to take control over their words, as well as influenced the direction of the research.

Case study approach was used because of its uniqueness in offering richness in studying complex issues, while retaining the holistic characteristics of real-life events [26]. Case studies specialize in providing 'thick description' information (whether investigating single subject or small groups) based on specific contexts that can give research results a more human face. A case study is often associated with a location, for example, an organization or a community [27]. Thus, this study employed case study as an approach to gaining an in-depth understanding of ADD's empowerment programs in reducing poverty among PWD in the three Northern regions.

Action on Disability and Development was selected primarily based on the researchers' link with the organization as former employees. Other contributory factors to the choice of ADD are its good track record of working with PWD internationally. Having worked with PWD in the Northern regions of Ghana since 1985, ADD provides a unique setting in achieving the researchers' objectives.

#### Procedure

The principal investigator sought for and obtained permission from the research ethic committee of her institution. All ethical standards laid out by this committee were followed to ensure voluntary participation, confidentiality and that no harm was done to the participants during the research process. Before the research began, we sought for permission and discussed the research topic with both leaders of DPOs and the country representative of ADD-Ghana program. We sought for their consent for participation and assured

them of the confidentiality of the research. We also recruited PWD to facilitate the focus group discussions in line with the emancipatory research principle which suggests the need for PWD to have control over the direction of disability research [20]. Six PWD were recruited and trained to assist the researchers. The training was organized by two ADD program officers to discuss the research agenda [26]. Finally, we pre-tested the research questions in Wa (the capital of Upper West region), using four people in a focus group discussion facilitated by our research assistants.

### Data collection

The study used both primary (focus group discussions, semi-structured individual telephone interviews) and secondary (agency records) sources of data. Unlike other forms of group interviews which seek to explore wide thematic areas, focus groups emphasize on in-depth exploration of specific themes and topics [27]. They are therefore useful to achieving the objective of examining how ADD's empowerment programs are addressing poverty among PWD.

In addition, the researchers were more concerned about data that express the views of PWD as a group, and not so much about individual views. This latter view is important because ADD works with groups of PWD and not individuals. Besides, the study topic is about the collective experience of PWD as beneficiaries of ADD's programs.

A particular strength of focus groups within emancipatory disability research is the enormous control it allows participants over the research process as compared to individual interviews. Thus, they "can be a transformational act, raising consciousness and empowering participants, rupturing rather than reproducing underlying relations of exploitation and domination" [22].

The semi-structured individual telephone interviews were conducted with PWD who also facilitated the focus group discussions. This was done as a follow-up to focus group discussions since the researchers were not present in the field. The principal investigator conducted the phone interviews, after the focus group interviews. This technique was used because it provided a relatively cheap and effective means of making follow-ups as compared to face-to-face interviews. Secondly, the invisibility of the researchers could reduce bias associated with personal characteristics or the mere presence of the interviewer as in face-to-face interviews [27]. Both interviews were recorded with participants' permission.

The final source of data is agency records, which was the first point of contact for the researchers and was used throughout the research process. Important sources of secondary data collected were newsletters, quarterly and annual action plans and reports, as well as evaluation reports of both ADD and the DPOs.

### Research participants

Purposive sampling technique was utilized in selecting study participants for both the focus groups and semi-structured telephone interviews. A total of four focus groups (four women and four men in each group, two groups in each district) and six semi-structured individual telephone interviews (three men and three women) were conducted in two districts of the Northern (Saboba) and Upper West (Jirapa) regions. Participants were all members of the various organizations of PWD (Ghana Association of the Blind, Ghana Society of the Physically Disabled, and Ghana National Association of the Deaf) in the selected districts. The sample is purposive because the researchers and research assistants used their first-hand knowledge

of the population in selecting participants who could best provide the needed data. The unit of analysis is the programs ADD implement in the three Northern regions of Ghana.

### Data analysis

The analysis began by transcribing the interviews. The individual telephone interviews were transcribed and analyzed separately from the focus group interviews, which were also transcribed and analyzed separately, as well as the agency record analysis. The analyses were done by using the questions posed to guide the study as outline. We read through the responses to each question several times to identify themes that shed light on the topic in each analysis. These themes were put under their respective questions. After that, we read through the summaries of the four focus groups to identify themes that cut across questions and focus groups. Themes emerging from focus groups, individual interviews, and agency record analyses were then compared and contrasted to find common themes and to make conclusions about the impact of ADD's programs in reducing poverty among PWD. The social model of disability, poverty and empowerment perspectives were and used to evaluate and interpret themes emerging from the data. All names used in this report are pseudonyms.

## Results

### Rights not charity

The common themes running through ADD's guiding principles were "Rights not charity" and "facilitating not doing" [28,29]. Consistent with the social model of disability, study findings suggest that ADD believed that the oppression and injustice PWD experience is a human right issue and hence the need to empower them to advance their well-being. Data from ADD indicated that its main aim is to "facilitate the process of building the structures of DPOs to advocate for themselves" [29,30]. Therefore, ADD provided technical and other necessary support to enable PWD engage in effective advocacy.

### Breaking the mould of poverty

The Dutch Coalition on Disability and Development notes that "A good self-image and a good knowledge of one's disability – disability awareness – is an important precondition for the ability of PWD to grow, both individually and as a group" [31]. Good self-image is required in challenging the social exclusion, marginalization, vulnerability, powerlessness, and isolation PWD encounter [5]. Persons with disabilities have been marginalized for a long time and have, therefore, become acquiesced with inferiority positions in the society. Acquiescence to their marginalization exacerbates their low self-image and hinders their full participation in mainstream society [14]. It is therefore imperative for ADD's empowerment programs to boost the self-confidence of PWD to increase their representation and full participation in mainstream society in order to create awareness about their issues. Evidence from the study revealed that PWD have gained some confidence from ADD's empowerment programs and they are using the skills to challenge the causes of their oppression, marginalization, and poverty as discussed in the next section.

### PWD challenge their exclusion, vulnerability, powerlessness, and marginalization

**Breaking down socio-cultural barriers and marginalization:** Study participants confirmed that ADD's empowerment programs have given them a voice to challenge negative socio-cultural practices, oppression, and marginalization which they believed accounted for

their poverty. This is evident from the following scenarios from both the individual and focus group interviews:

**Kwame:** “In the past as a disabled man, you could not become a chief in your community because culturally, it is believed that a chief must be whole, without any mental or physical impairment. But now, though I still have a physical disability, I have been made a sub-chief in my community”.

**Ayi:** “I was given out for marriage without my husband being asked to pay dowry [referring to bride price], because my parents felt by marrying me, my husband had relieved them of a burden. Through ADD’s confidence building training, I felt this was not right. I threatened my husband with divorce if he did not pay the dowry as a result of which he went back to my parents and paid it”.

**Saboba 2:** “Before we were beggars. We were happy to receive food aid and second hand clothing. In fact, we believed that those who gave us these things were God-sent. We were referred to literally as sick people. Now, we don’t sit for government to bring, we go and ask for it. We are now able to reject the use of impairment as our names. We have names and insist to be called by them”.

**Jirapa 1:** “When we saw that a credit union building under construction here was not accessible, we went to talk to the manager to make it accessible because we will also do business there. The building is now complete and accessible”.

**Involvement in decision making:** The review of ADD’s record indicated that about 50 PWD were participating in decision making at the local government level by the end of 2006 [32]. Study participants confirmed this finding and saw their involvement as a step towards promoting disability issues as well as in their communities, and development work. They indicated that they use skills gained from ADD to promote their issues in both the local government and other organizations’ programs.

**Jirapa 1:** “In the past, because we were not represented at the District Assemblies, our issues were not heard. As a result of ADD programs, we have been able to influence the Jirapa District Assembly and one disabled person has been appointed to represent us. Not much has been achieved because the Assembly members are not sensitive to disability issues but we believe with time things will change in our favor”.

**Saboba 1:** “We don’t have any disabled person on the Assembly, but through our advocacy, no meeting takes place in the Assembly without us. Our plans [Referring to DPO’s action plans] have been included in the District Assembly’s plans and we are receiving some support. A resource center was built for us and they sometimes support our vocational training and even advocacy work. We have also established links with Rural Integrated Literacy Anafo Development Centre as a result of which we are involved in literacy training”.

**Economic empowerment:** Participants identified barriers such as lack of education, start-up capital, mobility aids and inaccessible transportation as factors contributing to their underemployment, unemployment, and poverty.

**Saboba 1:** “Most of us have no sustainable sources of livelihood because we are not educated. We can engage in trade but most of us have no start-up capital. No NGO is willing to support us with micro-credit”.

**Maria:** “Non-PWD think we cannot use credit and pay back! At the banks too, the interest rates are too high for poor people like us”.

**Jirapa 2:** “When we are trading, the non-PWD expect us to sell at lower rates than the normal market price, because they think we get our money from charity. Also, lack of mobility appliances and inaccessible means of transport threaten our business”.

However, evidence from the study also demonstrates that ADD’s empowerment programs, which include apprenticeship and business management training, support PWD to earn a source of livelihood as indicated by Saboba focus group 1, “Through ADD’s business management and apprenticeship training programs, some of us own small scale businesses and are proving to non-PWD that we can really work, like them, if given the needed supported”.

Study findings also indicates that PWD have advocated for and achieved inclusion of some of their employment needs in District Assemblies and other Non-Governmental Organizations’ programs as narrated by Maria “Through our networks our District Assembly is funding a skill training program for disabled women in Saboba”.

### The involvement of persons with disabilities in ADD’s programs

Action on Disability and development has an employment policy that ensures that up to 50% of its employees are PWD. At the time of this study, seven out of its nine program officers were PWD. In addition, study participants said that many PWD are involved in ADD’s program development and implementation as noted by Yaw (individual interview) and excerpts from Saboba focus group 2; “Some of us are serving as facilitators of capacity-building training for our members”, “ADD involves us in annual and mid-year reviews. Their program officers also ask us for our suggestions during their annual planning”. Action on Disability and Development’s records [29,30] affirmed these assertions. It is evident from the above data there is high representation of PWD on ADD staff as well as in its activities. However, that does not necessary mean that PWD have much influence on ADD’s development agenda? Find below what some participants said:

**Kwame:** “But we are not involved in drawing up budgets or managing them, neither do we know the amount involved”.

**Saboba 2:** “But it is not all we say that they include in their plans. For example we need wheelchairs and school fees for our children but ADD says they do not work in those areas. They always tell us they teach us to fish but don’t give us fish to eat”.

### Diversity in ADD’s programs

**Gender in ADD’s programs:** Action on Disability and Development established the gender program in 2000. The program is devoted to empowering women with disabilities and to ensuring gender mainstreaming in ADD, its partners and other organizations’ programs and activities. According to Naami and Hayashi [14], the ADD gender program has empowered women to gain control over their lives by developing better strategies in advocating for themselves. The program has increased the visibility of women with disabilities in the disability movement and in mainstream organizations because their participation and the leadership positions they hold have improved. For example, the authors note that by December 2006, “...women held 19% of the leadership positions such as president and vice-president in the disability organizations in towns and villages in the Northern Region” (p. 45).



## Impairment and cross-disability in empowerment programs of ADD

Persons with disabilities in Ghana are generally organized according to their impairments. There are three major national disability organizations: the Ghana National Association of the Deaf (GNAD), the Ghana National Association of the Blind (GAB), and the Ghana National Association of the Physically Disabled (GSPD), with the Ghana Federal of the Disabled overseeing their activities. This approach contradicts the social model of disability, which emphasizes social factors as the cause of disability and poverty rather than individual impairment. However, while ADD draws on the social model of disability in its practice, it also recognizes the importance of paying attention to the different kinds of impairment, so do study participants (who view their impairment as relevant to their experience of poverty and other societal problems) as indicated in the narrations below, which is also consistent with the literature. Hurst and Albert [33] insisted that ignoring impairment in development programs, especially in developing countries, can be catastrophic to development.

**Saboba 2:** “We are poor because our impairment has prevented us from going to school or enjoying other services that non-PWD enjoy. Non-PWD believes God created us with impairments because we would have been wicked and destructive to society without it”.

**Jirapa 1:** “Non-PWD sees us as useless, not fit to be part of society. Most of us have become perpetually dependent on them for our livelihood because of our impairment”.

**Akonko:** “Leprosy can be cured, but in my case it has deprived me of my fingers, job, friends and family members. When I attend social gatherings people make me feel I am not supposed to be there. Thanks to ADD I can now challenge such attitudes!”

Action on Disability and Development thus supported specific programs/activities of the different disability groupings to meet their specific needs and to ensure their inclusion and overall development in the disability movement and the society as a whole. Examples are sign language training and interpretation to facilitate communication with deaf people and providing important advocacy and other materials in accessible format for the blind. Data from ADD demonstrate that this diversity related empowerment activities raised awareness about issues of the more marginalized disability groups.

The records of Action on Disability and Development also revealed that it has encouraged and facilitated the formation of cross impairment groups in most of its operational area to foster collaboration work on common issues PWD experience in the society. Issues such as society’s low expectations about their capabilities, architectural, transportation, and informational barriers, negative cultural beliefs and practices and the stigma attached to disability; which impact on their socio-economic and political development. These are all perspectives of the social model disability.

## Disability, poverty and charity

Although, participants acknowledged the importance of ADD’s empowerment programs in building their capacity to challenge injustices against them, they also believed that providing for their basic needs is paramount due to their poverty situation. However, study findings suggest that ADD’s does not support personal living expenditures such as food, shelter, healthcare and school fees for PWD and their children, which participants believed were their immediate needs. They said that ADD’s training outcome is not immediate, but

they are poor and must provide for their present basic needs as stated respectively by Naana (individual participant) and excerpts from Jirapa focus group 2, “But sometimes we have to forego our small business to stay in for training sessions. At the end of the day we get home and there is no food for us and our family members”. “The training does not bring food home neither does it pay school fees nor medical bills we so need now”. Other narrations below attest to this scenario:

**Saboba 2:** “To be both poor and disabled means a lot. It means going to sleep on an empty tummy, wearing dirty clothing, not having jobs that will earn you decent income. It is rainy season and most of us thrive on agriculture. This year the rains have failed us and we have started feeling the consequences”.

**Jirapa 1:** “Some of us have to beg to sustain our families. Most of us have not seen the four walls of a class room, but we know the importance of educating our children. We wish they could go to school, but we are not able to send them because we can’t afford the cost”.

**Ayi:** “To be poor as a disabled person means having no control over social, economic and political resources because you are denied the skills needed, you are seen as incapable of doing it”.

## Discussion

Empowerment means different things to different people. But for both ADD and DPOs, empowerment means enabling PWD to promote change through capacity building activities discussed earlier. Action on Disability and Development has been working to empower PWD to challenge the injustices they encounter in their daily lives by building stronger and sustainable DPOs. The high representation of PWD on ADD’s staff, as well as in its activities is a sign of ADD’s commitment to achieving its goal by given DPOs first-hand experience. This finding is consistent with empowerment literature which recommends a fundamental shift of the role of non-disabled professionals and development workers from having full control over the lives of PWD to putting their knowledge and skills at their disposal so they can use it in whatever ways they choose to better their lives [20].

Action on Disability and Development recognizes that building stronger and sustainable DPOs also means identifying and focusing on the more marginalized disability groups because the population of PWD consists of people with varying needs cutting across impairment, gender and other structural disadvantages. For example, studies show that women with disabilities are more likely than men to be poor [18,34,35]. Accordingly, ADD concentrates on the more marginalized disability groups to strengthen them, increase their representation, as well as mainstreaming their issues in DPO and other organizations’ development agendas. Focusing on heterogeneity among PWD has helped in developing programs to capture the most vulnerable disability groups (e.g., gender program, sign language training and interpretation to facilitate communication with deaf people as well as important advocacy and other materials in accessible format for the blind), thus, avoiding them from falling into the traps of mainstream development, where the more marginalized are usually missing out.

Evidence from the study also demonstrates that ADD’s empowerment programs such as apprenticeship and business management training support PWD to earn a source of livelihood. Also, some PWD have advocated for and achieve inclusion of their employment needs in Districts Assemblies and other Non-Governmental Organizations’ programs.

Poverty, as simple as it may seem, has no straightforward definition.

So the approaches to addressing it are also problematic. Poverty in this study relates to the vulnerability, marginalization, social exclusion, and powerlessness which constitute the experience of PWD, which is also consistent with the literature [2,4,5]. Study findings show that ADD has achieved some success in empowering PWD to reduce their vulnerability, marginalization, social exclusion and powerlessness and has increased their socio-economic and political participation.

However, the study also suggests that, although PWD understand that they are their own change agents and must challenge the injustices they encounter and hence poverty; their quest to meet their immediate basic needs (which could be the result of the poverty they experience) sometimes undermines this approach. Participants' demands fall in line with the charity approach which some studies claim PWD reject [17]. Participants claimed they resort to begging and other menial jobs as means of survival. This outcome validates studies which state that, in Ghana, the majority of PWD are compelled to beg on the streets due to their exclusion from the labour market [9,13,18]. This also implies that ADD provides both human and non-human resources in ways that enable PWD to determine the direction of change. Therefore, the need for complementary efforts is imperative, especially, in developing countries where safety net programs are virtually non-existent and there is practically no accessible transportation, information, and education and health care facilities. And negative societal attitudes towards PWD as well as high poverty levels that affect the quality and quantity of support PWD received from family members [15].

We also suggest that in addition to networking with other organizations to raise awareness about disability issues, ADD should build coalitions of civil society groups on disability, as well as better engage District Assemblies and other organizations. For example, ADD can empower these organizations to understand the need to include and address the educational, skills training, mobility aids, employment and other basic needs of PWD.

Additionally, we recommend ADD support PWD to move beyond fund-raising to influence policies and organizational agendas that could improve on their socio-economic and political development. One of ADD's core goals is to influence inclusive policies [29]. Although PWD, with the support of ADD, have played a key role in the passage of national disability legislation, e.g., Persons with disability Act; they appear to have little influence on the policies of other organizations in the study area. The research suggests that most of the links DPOs established with non-governmental and governmental agencies seem to mostly focus on fund-raising.

## Limitations and Conclusion

The means by which study participants were recruited (purpose sampling of 2 out of 34 districts ADD serves) might have introduced sample bias, i.e., participants might not be representative of DPOs in the ADD operational area. Also, the telephone interviews were not accessible to some PWD, especially, deaf people and those who had no access to telephones due to their poverty situation.

We must also acknowledge that our personal biases might have some influence on the study given our link to ADD as former employees. But acknowledging these biases throughout the research process helped minimize the contamination of data, analysis, and reporting. Another limitation relates to the study's external validity, given the small sample size and non-probable sampling technique. Future research could use probability sampling and a larger sample size.

While the findings cannot claim to have a wider applicability,

issues raised in the study may be relevant to development workers, especially those working with PWD in developing countries. These preliminary data offer important insights about the importance of empowering PWD to challenge the injustices, vulnerability, marginalization, social exclusion, powerlessness, and the poverty they encounter in their daily lives. Empowerment could result in increased socio-economic and political participation of PWD. However, there is a need for development workers to pay attention to the more marginalized disability groups to strengthen them so as to increase their representation, as well as mainstreaming their issues in DPO and other organizations' development agendas in order to have sustainable DPOs effectively challenging injustices against PWD.

## Acknowledgement

We are grateful to the country representative of ADD-Ghana and all the regional Program Officers for their support for this project. We also thank members of DPOs from Saboba and Jirapa, who facilitated the focus group discussions as well as participated in the study, for their time and commitment. We are particularly grateful to Dr. Alison Sheldon of the University of Leeds for her guidance and support. Finally, we express our sincere appreciation to study participants for willingly sharing their experiences with us.

## References

1. World Bank (2013) World Bank sees progress against extreme poverty, but flags vulnerabilities.
2. Jorge AC (2011) Understanding income inequality: concept, causes and measurement. *International Journal of Economics and Management Sciences* 1: 17-28
3. Instituto Nacional de Estadística (2009) Poverty and its measurement - The presentation of a range of methods to obtain measures of poverty.
4. Ghana National Development Planning Commission (2005) Growth poverty reduction strategy 2006-2009. Accra, Ghana, GNDPC.
5. Yeo R (2006) Disability, poverty and the new development agenda. In: Albert B (ed.). In or out of the mainstream? Lessons from research on disability and development cooperation. Leeds, The Disability Press, 74-87.
6. United Nations Development Program (2008) Human development report: 2007/2008 Human Development Index rankings.
7. Ghana Statistical Service (2003). Core welfare indicators questionnaire survey, Ghana. Ghana, GSS.
8. Ghana Statistical Services (2012) Gender inequalities in rural employment in Ghana: An overview.
9. Appiagyei C (2006) Report: Research into street begging by persons with disabilities in Accra and Kumasi. Accra, Ghana, Ghana Society of the Physically Disabled
10. Bereford P (1996) Poverty and Disabled People: Challenging the dominant debates and policies. *Disability and Society* 11: 553-567.
11. Department for International Development (2000) Disability poverty and development. East Kilbride, United Kingdom.
12. Elwan A (1999) Poverty and disability: A survey of the literature.
13. Kassah AK (2008) Begging as work: A study of people with mobility difficulties in Accra, Ghana. *Disability and Society* 23: 163 -170.
14. Naami A, Hayashi R (2011) Empowering women with disabilities in Northern Ghana. *Review of Disability Studies* 7: 38-47.
15. Naami A, Hayashi R, Liese H (2012) The unemployment of women with physical disabilities in Ghana: Issues and recommendations. *Disability and society* 2: 191-204.
16. United Nations Enable (2013) Fact sheet on persons with disabilities: Employment.
17. Coleridge P (1993) Disability, liberation and development. Oxfarm Press, UK.
18. Naami A, Liese H (2012) The Impact of unemployment on women with physical disabilities in Tamale, Ghana. *The International Journal of Diversity in Organizations, Communities and Nations* 2: 117-128.

19. Alsop R, Norton A (2004) Power, rights and poverty: Concepts and connections. Report from a working meeting on power, rights and poverty.
20. Oliver M (1997) Emancipatory Research: Realistic goal or impossible dream? In: Barnes C, Mercer G (eds.) *Doing disability research*.15-31. Leeds, The disability Press.
21. Sen G (1997) Empowerment as an approach to poverty.
22. Sheldon A (2001) Disabled people and communication in the twenty first century. Doctoral Dissertation. The University of Leeds. Leeds, UK.
23. Union of the Physically Impaired Against Segregation (1976) *Fundamental principles of disability*. London, UK.
24. Oliver M (1996) Defining impairment and disability: Issues at stake. In: Barnes C, Merce G (eds). *Exploring the divide*. Leeds, The Disability Press 29-54.
25. Stone E, Priestly M (1996) Parasites pawns and partners: Disability research and the role of non-disabled researchers. *British Journal of Sociology* 47: 699-716.
26. Yin RK (2003) *Case study research: design and methods* (3rd edn). UK: Sage Publication
27. Bryman A (2004) *Social research methods*. (2nd edn), Oxford, Oxford University Press.
28. Sheldon A (2005) One world, one people, one struggle? Towards the global implementation of the social model of disability. In Barnes C, Mercer G (edn). *The social model of disability: Europe and the majority world*. Leeds, The Disability Press. 115-130.
29. Action on Disability and Development-Ghana Gender Program [ADD] (2005) Program evaluation report. Tamale, Ghana.
30. Action on Disability and Development-Ghana Gender Program [ADD] (2006) Annual report. Tamale, Ghana.
31. The Dutch Commission on Disability and Development (2013) End the exclusion.
32. Disability and Development-Ghana Gender Program [ADD] (2007) Annual report. Tamale, Ghana.
33. Hurst R, Albert B (2006) The social model of disability: human rights and development cooperation, in B. Albert (eds.), *In or out of the mainstream?* Leeds, the Disability Press.
34. Smith DL (2007) Employment status of women with disabilities from the Behavioral Risk Factor Surveillance Survey (1995-2002). *Work* 29: 127-135.
35. Randolph SD, Andresen EM (2004) Disability, gender, and unemployment relationships in the United States from the Behavioral Risk Factor Surveillance System. *Disability and Society* 19: 403-414.