

**DISABILITY AND ACCESS TO SOCIAL SERVICES AMONG WOMEN IN
BUGAMBI SUB COUNTY SIRONKO DISTRICT**

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J23/MUC/BSW/043

**A DISSERTATION SUBMITTED TO THE SCHOOL OF SOCIAL SCIENCES IN PARTIAL
FULFILLMENT OF THE REQUIREMENTS FOR THE AWARD OF A DEGREE OF BACHELOR
IN SOCIAL WORK AND SOCIAL ADMINISTRATION OF UGANDA CHRISTIAN UNIVERSITY**

October, 2024



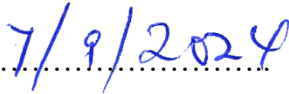
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DECLARATION

OI, MUDAMBO MANUEL, hereby declare that this work is my own original creation, free from plagiarism, and has not been submitted to any other institution for any academic award.

Signature: 

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APPROVAL

I hereby certify that the study titled "Disability and access to social services among women in Bugambi Subcounty, Sironko District" was carried out under my close supervision and is now ready for submission in fulfilment of the academic requirements for examination.

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Date: *02/9/2024*

DEDICATION

This research is dedicated to my family; especially my wife Nabukwasi Zulufat, my children Neumbe Trinity, Neumbe Charity and Nasio Tracy, whose unwavering support and encouragement have been the foundation of my journey. To my parents, My Mother Mrs Neumbe Mary and my Father Wolimbwa Wilson for their endless love and sacrifices, and to my siblings, for always believing in me. This work is a testament to your enduring influence on my life.

ACKNOWLEDGEMENTS

I would like to express my deepest gratitude to my research supervisor, Mr. Watuwa Anthony Khauka, for his invaluable guidance, insightful feedback, and unwavering support throughout the course of this research. His expertise and encouragement has been instrumental in shaping this study.

I am also grateful to Uganda Christian University for providing the necessary resources and facilities, including access to research materials, which were crucial in completing this work. Additionally, I extend my thanks to Bugambi Subcounty, Sironko District for their special provisions that greatly facilitated my research.

Finally, I would like to acknowledge my family and friends Namugabwe Lillian, Rev. Namonyo Moses, and Magale Aaron for their constant support and encouragement, which sustained me through this academic journey. Thank you all for believing in me.

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LIST ACRONYMS

ADA	Americans with Disabilities Act
CVI	Content Validity Index
EMPO	Employment Opportunities
FSES	Family Socioeconomic Status
GCAP	Global Call to Action Against Poverty
IDD	Intellectual and Developmental Disabilities
IDMD	Index of Disability-Related Multiple Deprivation
MGLSD	Ministry of Gender, Labour and Social Development
SPSS	Statistical Package for Social Sciences
SWIG	Sisari Women Initiative Group
UBOS	Uganda Bureau of Statistics
UK	United Kingdom
UN	United Nations
UNDP	United Nations Development Programme
UNFPA	United Nations Population Fund
WHO	World Health Organization
WWD	Women With Disabilities

ABSTRACT

This study examined the impact of disability on access to social services among women in Bugambi Sub County, Sironko District. The research aimed to investigate how disability affected access to healthcare services, employment opportunities, and community support networks. A mixed-method approach was employed, utilizing questionnaires and interviews to collect data from women with disabilities, healthcare providers, employers, and community support organizations. Regression analysis was applied to assess the relationship between disability-related factors and access to social services. The analysis revealed a strong correlation ($R = 0.683$) and indicated that disability-related variables explained 46.7% of the variance ($R^2 = 0.467$) in access to these services. The findings showed that disability greatly influenced access to healthcare, with respondents highlighting the need for specialized training for providers and a reduction of societal stigma. Employment opportunities for women with severe disabilities were often limited, with education and financial support identified as critical factors in improving outcomes. Access to community support networks was found to be variable, underscoring the necessity for inclusive and tailored support mechanisms. These findings emphasized the importance of targeted interventions to address discrimination, enhance training, and improve infrastructure to better support women with disabilities in accessing essential social services.

CHAPTER ONE

INTRODUCTION

1.0 Introduction

This chapter presented the background of the study, outlines the problem statement, and defines the study's objectives and research questions. It also provided the rationale and justification for the research, highlighted its significance, and delineated the study's scope. Additionally, the conceptual framework is discussed, followed by the definition of operational terms of the study.

1.1 Background of the study

The global context of disability and access to social services proves severe disparities impacting women with disabilities. According to Matin et al. (2021), women with disabilities face a myriad of challenges in accessing essential services, including healthcare, education, and employment, due to socio-economic and structural barriers. In the United Kingdom, despite having advanced healthcare and social support systems, women with disabilities encounter significant hurdles. Approximately 37% of women with disabilities report difficulties in accessing healthcare services, attributed to barriers like inadequate facilities, lack of trained staff, and persistent discriminatory attitudes (Matin et al., 2021). Employment opportunities are similarly constrained; the World Bank (2022) indicates that the employment rate for women with disabilities is 29% lower than their non-disabled counterparts. Although legal frameworks like the Equality Act 2010 aim to ensure equal access, Development Pathways (2019) notes that implementation gaps and societal biases continue to obstruct the full inclusion of women with disabilities in the UK.

In the United States, women with disabilities encounter notable challenges in accessing healthcare and family planning services. Research indicates that these women are 38% less likely to receive adequate reproductive health care compared to their non-disabled peers, primarily due to issues such as physical inaccessibility of healthcare facilities, limited availability of specialized services, and a lack of provider awareness about their specific needs (Mosher et al., 2017; Matin et al., 2021). Despite the presence of robust disability rights laws like the Americans with Disabilities Act (ADA), which aims to ensure equal access to services, a significant gap persists between policy and practice. The World Bank (2022) highlights that 44% of women with disabilities report encountering barriers that

prevent them from obtaining essential health services, underscoring the ongoing challenges in achieving full inclusivity and access.

In the Middle East, women with disabilities face significant barriers to accessing social services due to socio-cultural norms and weak legal frameworks. Approximately 70% of women with disabilities in Jordan report facing substantial challenges in accessing education, healthcare, and employment opportunities (Disability Rights Promotion International, 2014). Patriarchal societies in the region often marginalize these women, compounding their difficulties. Additionally, poor enforcement of disability rights exacerbates these issues, with around 60% of women with disabilities in the Middle East indicating that legal protections are inadequately applied (UNFPA, 2018). The combination of socio-cultural barriers and insufficient legal enforcement results in high levels of social exclusion for women with disabilities, severely restricting their participation in various aspects of public and private life (World Bank, 2022).

In Africa, the situation for women with disabilities is particularly dire, marked by severe marginalization and exclusion from essential social services. Socio-economic factors, cultural stigmas, and underdeveloped infrastructure significantly impede their access to healthcare, education, and social protection services (Matin et al., 2021). A recent study focusing on Kenya, Mali, and Ghana highlights that over 65% of women with disabilities face major challenges in accessing the services they are entitled to, including healthcare and education (Global Call to Action Against Poverty, 2021). The lack of comprehensive policies to safeguard and promote the rights of people with disabilities contributes to widespread discrimination and neglect (Development Pathways, 2019). Additionally, poverty exacerbates these issues, with approximately 75% of women with disabilities in Africa living below the poverty line, further limiting their access to social services (World Bank, 2022).

In East Africa, women with disabilities encounter numerous challenges in accessing social services due to poverty, inadequate infrastructure, and socio-cultural barriers. In countries like Kenya and Tanzania, around 75% of women with disabilities report difficulties accessing education and healthcare services, primarily due to stigma and the lack of accessible facilities (Global Call to Action Against Poverty [GCAP], 2021). Moreover, legal frameworks in many East African countries, such as Kenya, are often poorly enforced, leaving women with disabilities vulnerable to discrimination and exclusion, with about 60% of these women experiencing barriers due to insufficient legal protections (UNFPA, 2018). Economic

constraints further exacerbate the issue, as approximately 70% of women with disabilities in the region live in poverty, limiting the resources available for inclusive services (Development Pathways, 2019).

In Uganda, women with disabilities face significant barriers to accessing healthcare, education, and employment. According to the World Bank (2022), around 80% of women with disabilities in Uganda report challenges in accessing these services, rooted in socio-cultural stigmas, poverty, and inadequate infrastructure. Despite the existence of policies like the Persons with Disabilities Act (2020), which aims to promote their rights, implementation remains weak, with about 65% of women with disabilities experiencing discrimination and exclusion (GCAP, 2021). Economic constraints also play a role, with approximately 85% of these women living below the poverty line, further limiting their access to essential services (World Bank, 2022).

In Bugambi Sub County, Sironko District, the challenges faced by women with disabilities reflect broader regional issues. The area suffers from limited access to healthcare and social services due to underdeveloped infrastructure and socio-economic challenges. Approximately 70% of women with disabilities in this region report exclusion from education and employment opportunities, with significant barriers in accessing social protection programs. Cultural stigmas and a lack of community support exacerbate their marginalization, making full societal participation difficult (GCAP, 2021).

It's upon this backdrop that the researcher carried out a study on the impact of disability status on access to social services among women in Bugambi Sub County, Sironko District. This was because the situation in Bugambi Sub county highlighted the urgent need for targeted interventions to improve the inclusion and access to services for women with disabilities in rural Uganda (World Bank, 2022).

1.2 Problem Statement

In Bugambi Sub County, Sironko District, women with disabilities face substantial barriers to accessing essential social services such as healthcare, education, and employment. Statistics reveal that approximately 70% of women with disabilities in this region encounter significant difficulties in accessing these services due to inadequate infrastructure, cultural stigmas, and socio-economic constraints (Uganda Bureau of Statistics [UBOS], 2021). Around 65% of these women report being excluded from educational opportunities and about 60% struggle to

access necessary healthcare services, highlighting a severe gap in support and accessibility (Ugandan Ministry of Gender, Labour and Social Development [MGLSD], 2019). This exclusion is further compounded by the region's economic challenges, with about 75% of women with disabilities living in poverty, which limits their ability to seek and benefit from available services (World Bank, 2022).

Despite efforts to address these issues, such as the implementation of policies like the Persons with Disabilities Act (2020), the effectiveness of these measures remains limited. Although these policies aim to promote the rights and access of women with disabilities, their impact has been insufficient. Implementation gaps and weak enforcement have resulted in continued discrimination and exclusion. Recent reports indicate that approximately 60% of women with disabilities in Bugambi Sub County still experience significant barriers to accessing social services, reflecting the inadequate reach and effectiveness of existing interventions (UBOS, 2021; MGLSD, 2019). These persistent issues underscore the need for more robust and targeted strategies to improve access and support for this vulnerable group.

While general studies highlighted the challenges faced by women with disabilities across Uganda and East Africa, there is limited detailed research on the specific context of Bugambi Sub County. This research filled this gap by examining the specific barriers and evaluating the effectiveness of current interventions.

1.3 Objectives of the study

1.3.1 General Objective

To assess the impact of disability status on access to social services among women in Bugambi Sub County, Sironko District

1.3.2 Specific Objectives:

- i. To examine how disability affects access to healthcare services among women in Bugambi Sub County, Sironko District.
- ii. To assess the impact of disability on access to employment opportunities for women in Bugambi Sub County, Sironko District.
- iii. To evaluate the influence of disability on access to community support networks among women in Bugambi Sub County, Sironko District.

1.4 Research Questions

- i. How does disability affect access to healthcare services among women in Bugambi Sub County, Sironko District?
- ii. What is the impact of disability on access to employment opportunities for women in Bugambi Sub County, Sironko District?
- iii. How does disability influence access to community support networks among women in Bugambi Sub County, Sironko District?

1.5 Justification of the study

This study addressed the significant research gap regarding the challenges faced by women with disabilities in Bugambi Sub County, Sironko District, by examining specific barriers to accessing social services.

The study offered new perspectives on the challenges and opportunities unique to this region, contributing to a more comprehensive understanding of disability and access to services.

Government authorities might benefit from the findings as they informed policy improvements and targeted interventions designed to address the needs of women with disabilities in Bugambi Sub County.

Local authorities might find the study relevant as it provides specific data to advocate for and implement localized solutions.

The research may help in tailoring community-based initiatives and support systems that directly address the barriers faced by women with disabilities in their locality.

The completion of this study led to the award of a Bachelor in Social Work and Social Administration, signifying a thorough investigation into an under-researched area. This contributed to the academic field and supported practical applications in policy and program development.

1.6 Significance of the Study

This study significantly contributed to the field of social work and social administration by providing in-depth insights into the specific barriers faced by women with disabilities in Bugambi Sub County. By addressing the gap in research related to disability and access to social services, the study informed policy development and enhanced the effectiveness of

local interventions. The findings offered valuable data for improving infrastructure, services, and support systems tailored to this vulnerable group. Furthermore, this research contributed to the completion of the researcher's Bachelor in Social Work and Social Administration, marking an important academic and practical achievement in the field.

1.7 Scope of the study

1.7.1 Geographical Scope

This study was confined to Bugambi Sub County in Sironko District. This specific location was selected due to its representative characteristics within the district, which comprised 32 sub counties and 10 town councils. Bugambi Sub County was strategically positioned, bordered by Bukiiyiti Town Council to the west, Bunyata Sub County to the north, Buteza Town Council to the east, and Mbale District to the south. This location provided a comprehensive view of the regional dynamics affecting disability and access to social services. The results were applicable for designing targeted interventions and policy recommendations that addressed the specific needs of women with disabilities in this context.

1.7.2 Time Scope

The time scope of this study spanned from 2021 to 2023. This three-year period was chosen to allow for a comprehensive examination of disability and access to social services among women in Bugambi Sub County, Sironko District. The timeframe enabled the collection of current and relevant data, as well as the assessment of recent policy changes and interventions. It provided sufficient duration to evaluate the effectiveness of existing programs, track changes over time, and consider socio-economic and cultural dynamics that may have influenced service access.

1.7.3 Content Scope

This study thoroughly investigated disability and access to social services for women in Bugambi Sub County, Sironko District. It focused on identifying the specific barriers and challenges these women faced in obtaining essential services such as healthcare, education, and employment. The research also evaluated the effectiveness of current policies and interventions, analyzed socio-economic and cultural factors that contributed to their exclusion, and suggested improvements to enhance service accessibility and inclusivity in the region.

1.8 Conceptual framework:

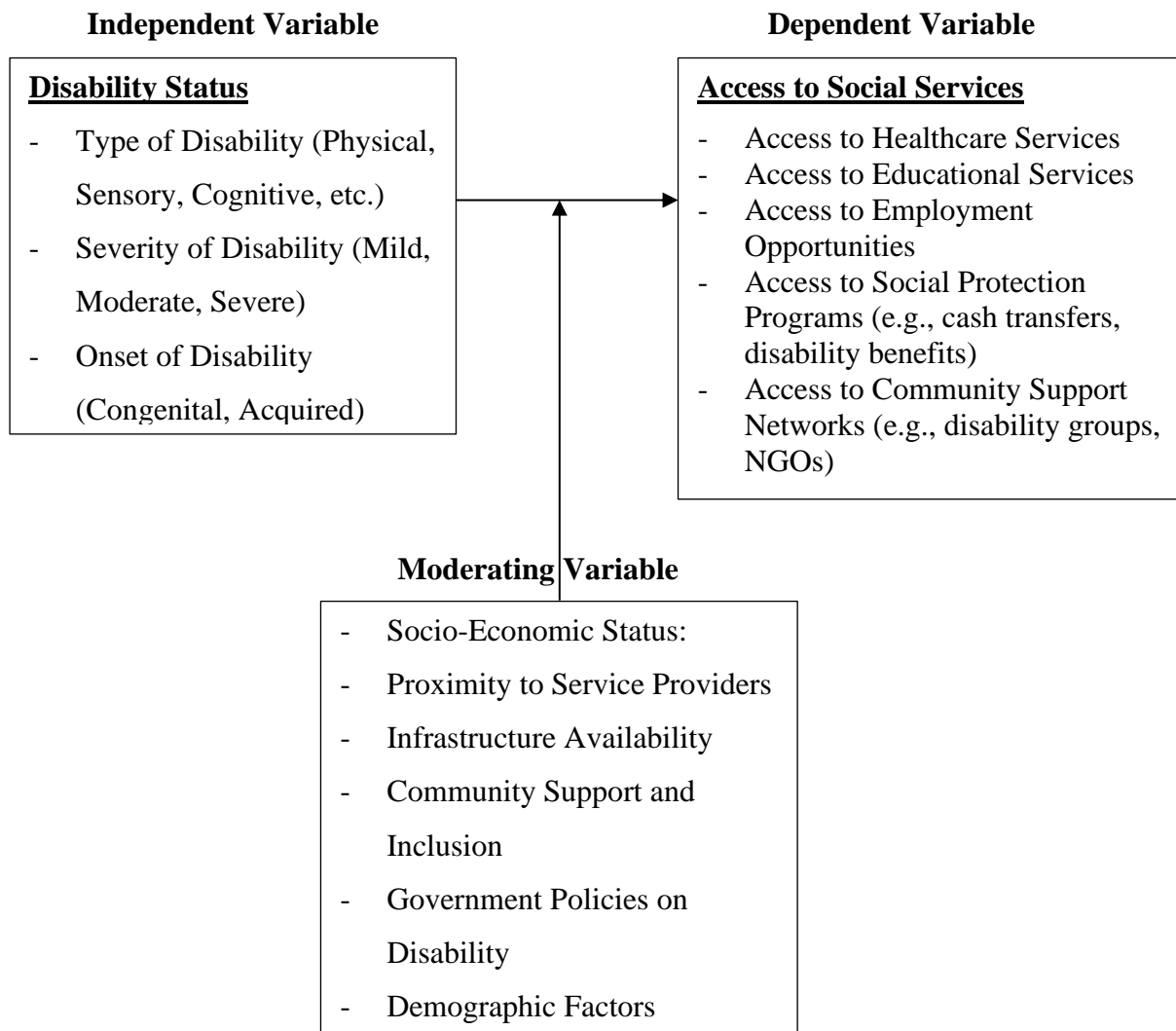


Figure 1.1 Showing the Conceptual Framework

The Independent Variable, disability status, which included the type, severity, and onset of disability, was significantly influenced by the Dependent Variable, access to social services such as healthcare, education, and employment. Individuals with severe or multiple disabilities often faced greater barriers, potentially limiting their access to essential services (World Health Organization [WHO], 2011). The relationship between these variables was influenced by several Moderating Variables. For instance, higher socio-economic status could improve access, while proximity to service providers and infrastructure availability played critical roles in determining service utilization (Mitra, Posarac, & Vick, 2013). Additionally, community support, inclusion, and government policies could either enhance or hinder access to these services (Groce et al., 2011).

1.9 Operational Terms

Disability: Disability refers to any physical, mental, or sensory impairment that significantly impacts a person's ability to perform daily activities and participate in society. In the context of Bugambi Sub County, this term encompasses conditions such as mobility impairments, cognitive disabilities, and sensory impairments affecting the ability of individuals to access local resources and services (World Health Organization [WHO], 2020). In Bugambi, these disabilities often result in substantial barriers to participating fully in community life.

Access to Social Services: Access to social services involves obtaining and utilizing support systems provided by government and local organizations, including healthcare, education, and employment services. In Bugambi Sub County, access to these services is crucial for improving residents' quality of life. However, challenges such as inadequate infrastructure and socio-economic barriers often hinder the ability of women with disabilities to benefit from these services (United Nations Development Programme [UNDP], 2021).

Women with Disabilities: Women with disabilities are female individuals who face both gender-specific and disability-related challenges. In Bugambi Sub County, these women often experience compounded difficulties in accessing social services due to the intersection of their gender and disability status. This includes increased barriers to healthcare, education, and employment, which are exacerbated by local socio-cultural and economic factors (United Nations [UN], 2019).

CHAPTER TWO

LITERATURE REVIEW

2.0 Introduction

This chapter presented a review of the existing literature on disability and access to social services among women, structured according to the specific objectives. The review incorporates insights from recent textbooks, journals, and organizational documents, encompassing both theoretical and empirical perspectives, and highlights the gaps that this study seeks to fill.

2.1 How disability affects access to healthcare services among women.

A review of the empirical studies on how disability affects access to healthcare services among women reveals a variety of approaches, analyses, findings, and conclusions, each shedding light on the unique challenges faced by women with disabilities (WWD) in accessing healthcare. The studies employed different methodological approaches, ranging from systematic reviews to qualitative and cross-sectional studies.

Matin et al. (2021) conducted a systematic review of qualitative studies, analyzing barriers to healthcare access for WWD globally. This approach allowed the authors to synthesize a wide range of findings across various contexts, providing a comprehensive understanding of the barriers faced. Ganle et al. (2016) used a qualitative approach, gathering data through semi-structured interviews with disabled women in Ghana to explore their challenges in accessing maternal healthcare. This method was effective in capturing the lived experiences of these women. Similarly, Natukunda et al. (2022) employed a community-based cross-sectional study in Uganda, using questionnaires and focus group discussions to examine maternal healthcare-seeking behaviour among disabled women.

The analysis techniques varied across the studies, but each was tailored to the specific research questions and data types. Matin et al. (2021) utilized thematic analysis to identify key barriers to healthcare access, categorizing them into sociocultural, financial, and structural factors. Ganle et al. (2016) applied Attride-Stirling's thematic network framework to analyze the qualitative data, focusing on themes such as healthcare providers' insensitivity and the negative perceptions of society toward disabled women. Natukunda et al. (2022) used

both quantitative (Chi-square and logistic regression) and qualitative (content analysis) methods, offering a mixed-methods perspective on the factors influencing maternal health-seeking behaviour.

The studies consistently found that women with disabilities face significant barriers to accessing healthcare services. Matin et al. (2021) highlighted that sociocultural factors like negative attitudes and low health literacy, alongside financial and structural obstacles, severely limit healthcare access for WWD. Similarly, Ganle et al. (2016) reported that disabled women in Ghana struggled with unfriendly physical health infrastructure, healthcare providers' lack of knowledge, and societal misconceptions about their sexuality. Natukunda et al. (2022) found that maternal healthcare-seeking behaviour among disabled women in Uganda was influenced by factors such as age, number of pregnancies, distance to health facilities, and the friendliness and availability of healthcare providers.

The studies concluded that addressing these barriers requires targeted interventions. Matin et al. (2021) recommended training healthcare workers to be more respectful and attentive to WWD, while advocating for greater family and community involvement in promoting healthcare access. Ganle et al. (2016) emphasized the need for disability-related cultural competence training for healthcare providers and the development of disability-friendly healthcare infrastructure. Natukunda et al. (2022) called for a multi-sectoral approach to improve healthcare-seeking behaviour among disabled women.

While these studies provide valuable insights, several gaps and observations arise. First, there is a need for more context-specific research that considers the unique challenges in different regions, particularly in low-income countries. Second, the reliance on self-reported data in qualitative studies may introduce biases, suggesting the need for more mixed-methods research that combines qualitative and quantitative data for a more robust analysis. Lastly, while the studies recommend training and infrastructural improvements, there is limited discussion on the long-term sustainability and effectiveness of such interventions, indicating a gap in the evaluation of implemented strategies.

2.2 The impact of disability on access to employment opportunities for women.

The relationship between disability severity and access to employment opportunities for women is complex and influenced by various socio-economic and structural factors. This review critically examines the approaches, analysis, findings, and conclusions of some studies in this area, with a focus on understanding how disability severity affects employment access for women.

The study by Qiu et al. (2023) employed a quantitative approach to examine the relationship between the Index of Disability-Related Multiple Deprivation (IDMD) and Employment Opportunities (EMPO) among women with disabilities, while also exploring the moderating role of family socioeconomic status (FSES). The analysis focused on the interaction between IDMD and FSES, providing insights into how these factors jointly influence employment opportunities. The study utilized regression analysis to explore the effects of IDMD and FSES on employment opportunities. The findings revealed that higher levels of disability-related deprivation significantly reduced employment opportunities, with family socioeconomic status playing a critical moderating role. The interaction between IDMD and FSES highlighted the compounded disadvantages faced by those with both high disability-related deprivation and low family socioeconomic status.

The study concluded that disability-related deprivation significantly hinders employment opportunities for women with disabilities. Family socioeconomic status can mitigate some of these effects, suggesting that support at the family level is crucial for improving employment outcomes for disabled women. The study advocates for a paradigm shift in addressing disability-related deprivation by focusing on family-level interventions rather than individual assistance alone. This approach could help break the poverty trap and improve employment opportunities for women with disabilities (Qiu et al. 2023).

Another study by Naami (2015) Utilizing an exploratory quantitative design, investigated the intersection of disability, gender, and employment in Northern Ghana. The study gathered data from 110 individuals with disabilities, exploring the barriers they face in accessing employment, with a particular emphasis on women. Data analysis involved descriptive statistics to identify key trends and barriers in employment for women with disabilities. The study found that women with disabilities were disproportionately affected by unemployment and were often confined to low-paying, unstable jobs. Discrimination and negative societal

attitudes were identified as significant barriers to employment. The findings indicated that women with disabilities in Northern Ghana face severe barriers to employment, including discrimination, low educational attainment, and limited access to resources. These barriers contribute to the cycle of poverty experienced by many women with disabilities. The study underscores the need for targeted educational and financial interventions to support women with disabilities in gaining meaningful employment. Addressing societal attitudes and providing adequate resources are crucial steps in reducing the employment gap for disabled women (Naami, 2015).

In Mgonela (2010)'s dissertation, he adopted a qualitative approach using the Women's Law Approach, which involves gathering primary and secondary evidence to analyze the challenges faced by disabled women in accessing employment in Tanzania's public civil service. The study provided a deep dive into the lived experiences of disabled women within a patriarchal society. The qualitative analysis focused on thematic content analysis to explore the various challenges faced by disabled women in the public civil service. The study identified systemic discrimination, lack of supportive infrastructure, and negative attitudes from colleagues as significant obstacles to equal employment opportunities for disabled women in Tanzania. The study highlighted the pervasive nature of gender-based discrimination in the Tanzanian public civil service, where disabled women face multiple layers of marginalization. The study recommended legal reforms and public awareness campaigns to improve employment access for disabled women. The dissertation emphasizes the importance of legal reforms and institutional support to ensure equal employment opportunities for disabled women in Tanzania. Public awareness and gender-sensitive policies are essential for creating an inclusive work environment (Mgonela, 2010).

The studies reviewed collectively emphasize the multifaceted challenges faced by women with disabilities in accessing employment opportunities. Qiu et al. (2023) provide a nuanced understanding of how family socioeconomic status can influence employment outcomes, suggesting that interventions at the family level could be more effective than individual-level assistance. Naami (2015) and Mgonela (2010) highlight the critical role of societal attitudes and systemic discrimination in perpetuating employment disparities. These studies suggest that addressing these barriers requires comprehensive policy reforms, educational initiatives, and public awareness campaigns to create a more inclusive labor market for women with disabilities. Additionally, the intersection of gender and disability exacerbates these

challenges, underscoring the need for targeted interventions that address both gender and disability-related barriers to employment.

2.3 The influence of disability on access to community support networks among women

The study by Horner-Johnson et al. (2021) utilized a multiple-category focus group design to explore the experiences of women with disabilities in accessing and receiving contraceptive care. This approach is significant in understanding the broader context of how disability onset influences access to community support networks among women. The study recruited 17 women with different types of disabilities, such as physical disabilities, intellectual and developmental disabilities (IDD), blindness or low vision, and deafness or hard-of-hearing, to understand their unique challenges. The focus groups were organized according to the type of disability, allowing for a nuanced analysis of how each group experiences and navigates access to essential healthcare services, including community support.

The content analysis of focus group transcripts revealed three main thematic areas: Accessibility and Accommodations, Clinician Attitudes, and Health Insurance (Horner-Johnson et al., 2021). These themes are critical when considering how disability onset affects access to community support networks. The study highlighted that women with disabilities often face systemic barriers rooted in an assumption of an able-bodied norm. This analysis aligns with broader literature indicating that women with disabilities frequently encounter inaccessible infrastructure and services, which can limit their ability to participate fully in community life and access necessary support (Bailey et al., 2022; Morris et al., 2021).

The findings from Horner-Johnson et al. (2021) underscore the significant challenges women with disabilities face in obtaining adequate contraceptive care, a proxy for accessing broader community support networks. Participants reported that physical barriers, such as inaccessible clinic rooms, and attitudinal barriers, such as negative clinician attitudes, significantly hindered their ability to receive appropriate care. This mirrors findings from other studies that emphasize how disability onset disrupts access to community support, particularly when social and healthcare systems are not adequately equipped to accommodate the needs of disabled individuals (Morris et al., 2021). The study also pointed out that health insurance limitations further compounded these challenges, highlighting the systemic nature of the barriers faced by women with disabilities.

The study by Horner-Johnson et al. (2021) concludes that the infrastructure and processes of contraceptive care, and by extension other community support services, are largely built on able-bodied norms. This reliance on normative assumptions excludes women with disabilities, making it difficult for them to access essential services and support networks. The findings suggest a need for systemic changes to improve accessibility and equity in healthcare and community services for women with disabilities. These conclusions align with other studies that call for a more inclusive approach in the design and delivery of community support services to ensure that women with disabilities are not marginalized (Bailey et al., 2022; Morris et al., 2021).

The project by the Sisari Women Initiative Group (SWIG), funded by the Commonwealth Foundation, focused on empowering young women living with disabilities in Kakamega County, Kenya, to participate actively in decision-making processes related to healthcare services. The project adopted a community-based participatory approach, aiming to address the structural, institutional, and cultural barriers that these women face in accessing healthcare (Commonwealth Foundation, 2023). This approach involved training young women as civic educators and policy advocates, establishing scorecard committees to assess healthcare access, and engaging local stakeholders in advocacy forums.

The analysis within this project emphasized the importance of involving young women with disabilities in governance processes to enhance their access to community support networks, particularly in healthcare. By training these women as civic educators and policy champions, the project sought to bridge the communication gap between service providers and the disabled community, thereby improving the overall quality of healthcare services. This participatory approach was critical in shifting the power dynamics that often exclude women with disabilities from decision-making processes, aligning with other studies that highlight the need for inclusive governance to improve access to support networks (Morris et al., 2021; Bailey et al., 2022).

The project's findings were anticipated to demonstrate significant improvements in the involvement of young women with disabilities in healthcare policy discussions, leading to better access to healthcare services. Additionally, the project aimed to reduce stigma and discrimination by fostering community acceptance and respect through sensitization efforts. These outcomes were expected to contribute to more equitable healthcare services and increased access to community support networks for women with disabilities

(Commonwealth Foundation, 2023). These findings were consistent with the broader literature, which underscores the importance of inclusive policies and community engagement in addressing the barriers faced by women with disabilities (Horner-Johnson et al., 2021).

The initiative by the Sisari Women Initiative Group highlights the potential of community-based participatory approaches in improving access to community support networks for women with disabilities. By addressing both the structural barriers and societal attitudes that limit access, this project provided a model for similar initiatives aimed at enhancing the inclusion of disabled individuals in policy-making and community life. The conclusions drawn from this project align with other empirical studies that advocated for more inclusive and participatory approaches to governance and service delivery for marginalized groups (Morris et al., 2021; Bailey et al., 2022).

2.4 Literature gap

The research gap identified from the empirical studies was the need for more context-specific and longitudinal research on the impact of disability on women's access to healthcare, employment, and community support networks. While existing studies highlighted significant challenges, they often relied on self-reported data and lacked comprehensive mixed-methods approaches that combined qualitative and quantitative insights. Additionally, there was limited evaluation of the long-term sustainability and effectiveness of interventions. Addressing these gaps required more nuanced, region-specific research and rigorous assessment of implemented strategies to ensure they effectively met the needs of women with disabilities over time.

CHAPTER THREE

METHODOLOGY

3.0 Introduction

This chapter outlined the methodology for the study, detailing the research design, study area, population, sample size, sampling techniques, data collection methods and tools, as well as the validity and reliability of the study instruments. It also addressed data collection procedures, analysis techniques, ethical considerations, and the limitations of the study.

3.1 Research Design

According to Kothari (2012), research design served as a general plan to address a research question, integrating various components, strategies, and methods for data collection and analysis. It outlined the framework for conducting the research. For this study, a mixed-methods approach was employed, combining descriptive research design with explanatory sequential methods to provide a comprehensive understanding of the research problem.

Mugenda and Mugenda (2019) explained that a quantitative approach yields measurable data, while a qualitative approach captures non-quantifiable information. By integrating these methods, the study benefited from the strengths of both approaches—quantitative data for statistical analysis and qualitative insights for in-depth understanding. This mixed-methods design was suitable for directly engaging with respondents and examining the complexities of disability and access to social services without manipulating variables..

3.2 Population of the Study

According to Ogula (2015), a population referred to any group of institutions, people, or objects that share common characteristics. This meant the number of people in a given area who met specific inclusion criteria. For this study, the population consisted of 150 individuals and groups in Bugambi Sub County, including 60 women with disabilities, 30 healthcare providers, 23 educational staff, 22 employers, and 15 community support organizations. This diverse population was selected to ensure a comprehensive understanding of the challenges and opportunities faced by women with disabilities in accessing social services, thus providing a detailed perspective on the barriers and facilitators impacting service access in the region.

3.3 Determination of Sample Size

Sample size refers to the number of respondents chosen from the study population for the purposes of conducting a survey (Kombo & Tromp, 2016). It represents a smaller, manageable subset of the overall population, selected to provide insights and make inferences about the larger group.

To determine the sample size from a population of 150 using Slovin's formula, the researcher applied the following equation:

$$n = \frac{N}{1 + N(e)^2}$$

Where: n represents the sample size,

N is the total population (150 in this case),

e is the margin of error, typically set at 0.05 for a 95% confidence level.

Substituting the values:

$$n = \frac{150}{1 + 150(0.05)^2} = \frac{150}{1 + 150 \times 0.0025} = \frac{150}{1 + 0.375} = \frac{150}{1.375}$$

$$\therefore n \approx 109.09$$

Rounding to the nearest whole number, the sample size required was approximately 109. Thus, to achieve a 95% confidence level with a 5% margin of error, the study used a sample size of about 109 from a population of 150.

Table 13.1: Showing the Sample Size of the Study

Category	Population	Sample Size	Sampling Technique
Women With Disabilities	60	48	Stratified Sampling
Healthcare Providers	30	20	Purposive Sampling
Educational staff	23	16	Purposive Sampling
Employers	22	15	Purposive Sampling
Community Support Organizations	15	10	Purposive Sampling
Total	150	109	

Source: Research 2024

3.4 Sampling Techniques and Procedure

According to Amin (2015), sampling involved selecting a subset of elements from a population to ensure that this subset accurately represented the entire group under study. In this research, two sampling techniques were employed to achieve this:

3.4.1 Stratified Sampling

This technique was specifically applied to the group of women with disabilities. The population was divided into strata based on different types of disabilities or severity levels. By sampling within these strata, the research ensured that all sub-groups within the women with disabilities were adequately represented, providing a detailed understanding of their specific challenges and needs.

3.4.2 Purposive Sampling

This method was used to select individuals from healthcare providers, educational staff, employers, and community support organizations. Purposive sampling focused on selecting key informants and experts with relevant experience or specialized knowledge about the issues concerning disability and access to social services. This approach helped gather in-depth insights and specific information from those directly involved or impacted by the study's focus areas.

3.5 Data Collection Methods

Kothari (2012) described data collection methods as systematic approaches used to gather information from various sources to answer research questions or test hypotheses. These methods involved collecting and recording data in a way that ensured its accuracy and relevance to the study's objectives. In this research, two specific data collection methods were utilized:

3.5.1 Questionnaire Method

This quantitative technique was used to collect data from various categories, including women with disabilities, healthcare providers, educational staff, employers, and community support organizations. Structured questionnaires with predefined questions were distributed to these groups to gather standardized information on their experiences, perceptions, and barriers related to accessing social services. This method enabled the collection of comparable data across these groups, facilitating statistical analysis and generalizable findings.

3.5.2 Interview Method

This qualitative technique was applied to key informants and experts within the same categories, specifically targeting healthcare providers, educational staff, employers, and representatives from community support organizations. Semi-structured interviews allowed for in-depth exploration of personal experiences and perspectives, providing detailed insights into the challenges and effectiveness of existing policies and interventions.

3.6 Data Collection Tools

Research instruments refer to the tools used by researchers to collect data essential for their study (Kothari, 2013). For this study, questionnaires and interview guides were employed as follows:

3.6.1 Questionnaire

A questionnaire consists of a series of printed or written questions designed for a survey or statistical study. In this research, structured questionnaires were used, divided into three sections: Section A gathered biodata of the respondents; Section B, C and D collected data related to the study's variables across each objective. The questionnaire utilized a 5-point Likert scale with statements to facilitate analysis. This approach was chosen for its efficiency in reaching a large sample quickly and its cost-effectiveness.

3.6.2 Interview Guide

An interview in qualitative research involves a dialogue between the interviewer and the interviewee, where specific questions are asked to gather detailed information (Creswell et al., 2012). The interview guide was used to supplement the data obtained from the questionnaires, focusing on key informants. This method was selected to explore emerging themes and provide in-depth insights (Rubin & Rubin, 2015). The guide allowed for probing and follow-up questions as needed, with each interview session lasting approximately 30-45 minutes.

3.7 Validity and Reliability of Instruments

Validity refers to how well a measurement tool assesses what it is intended to measure (Mugenda & Mugenda, 2017). Reliability refers to the consistency of the measurement results (Leedy, 2017). For this study on disability and access to social services among women in Bugambi Subcounty, Sironko District, the following approaches was used:

3.7.1 Validity of Instruments

According to LoBiondo-Wood and Haber (2012), validity referred to the extent to which an instrument measured what it was intended to measure and whether it did so accurately. The accuracy of the instruments was assessed by computing the Content Validity Index (CVI), which indicated the level of accuracy.

$$CVI = \frac{\text{Number of items declared valid}}{\text{Total Number of items}}$$

The CVI formula by Amin (2015) applied will be;

$$CVI = \frac{VR + R}{K}$$

After computing the CVI, the researcher interpreted the results based on George and Mallery's (2013) rule of thumb: (A) 1 - 0.9 = Excellent, (B) 0.89 – 0.80 = Good, (C) 0.79 – 0.70 = Acceptable, (D) 0.69 – 0.60 = Questionable, (E) 0.59 – 0.50 = Poor, and (F) 0.49 – 0.00 = Unacceptable.

3.7.2 Reliability of Instruments

The reliability of the instruments was assessed through a split-half reliability method, where test items were divided into two groups for comparison (Amin, 2005). The results were evaluated using Cronbach's Alpha coefficient with SPSS, aiming for a reliability score above 0.75, indicating sufficient consistency in the measurement.

3.8 Data Analysis

Data collected for the study on disability and access to social services among women in Bugambi Subcounty, Sironko District, was analyzed as follows:

3.8.1 Quantitative Data Analysis

Data gathered through questionnaires was edited and coded before being entered into the Statistical Package for Social Sciences (SPSS) version 20. The analysis involved presenting the data using descriptive statistics, including percentages, counts, and means, to address the key variables in the study (Creswell, 2012). The Pearson product-moment correlation coefficient was used to examine the relationships between socio-economic factors (e.g., household income, environmental factors) and access to social services. Regression analysis was also performed to determine the impact of each independent variable on the dependent variable.

3.8.2 Qualitative Data Analysis

Qualitative data obtained from interviews was reviewed to identify and correct any incomplete or inaccurate responses, enhancing the overall quality of the data. Content analysis was conducted to categorize the data according to the major themes of the study. The findings were presented in narrative form, supported by meaningful quotations from the interviews, consistent with Creswell's (2012) approach, which emphasizes the importance of short quotations in qualitative research.

3.9 Ethical Considerations

Several ethical principles were rigorously upheld. Participants' confidentiality was ensured by anonymizing data and securely storing information to prevent unauthorized access. Informed consent was obtained from all participants, clearly outlining the study's purpose, procedures, and potential risks. Assent was sought from participants who were minors or unable to provide full consent independently, ensuring that guardians were also informed and agreed. The research adhered to integrity by maintaining transparency in data collection and analysis, avoiding any form of manipulation or bias. Benevolence guided the research process, aiming to maximize benefits for participants while minimizing any potential harm. Ethical challenges, such as ensuring honest reporting and managing sensitive information, were addressed through strict adherence to ethical guidelines, regular consultations with ethics review boards, and implementing safeguards to protect participant rights and well-being.

CHAPTER FOUR

DATA ANALYSIS, PRESENTATION AND INTERPRETATION OF FINDINGS

4.0 Introduction

This chapter presented the results derived from the study's data collection, with the analysis and interpretation shaped by the research objectives. Descriptive and inferential statistics were utilized to provide insights into respondent characteristics and the relationships between variables. The chapter was organized to address the response rate, the demographic profiles of respondents, and an analysis aligned with the study's specific objectives.

4.1 Response Rate

The study aimed for a sample size of 109 individuals. Questionnaires were distributed to all 109 respondents, and each questionnaire was fully completed. This reflects an excellent response rate.

4.2. Demographic characteristics of the Respondents

4.2.1. Sex of the respondents

For quantitative data collection, the study included both genders in varying proportions, as detailed in Table 4.1.

Table 4.1 Showing the Sex of the Respondents

	Frequency	Percentage (%)	Valid percentage	Cumulative percentage
Male	32	29.4	29.4	29.4
Valid Female	77	70.6	70.6	100.0
Total	109	100	100	

Source: Primary Data, 2024

The findings in Table 4.1 reveal a notable gender distribution among respondents in the study; with 70.6% of the respondents being female, the study predominantly reflects the experiences and perspectives of women, which aligned with its focus on disability and social services for this group. The 29.4% male representation, while smaller, was still significant

and provided valuable insights into gender-specific differences in perceptions and access to services. This gender balance ensured a comprehensive understanding of the issue, capturing both female and male viewpoints and helping to identify any disparities in the challenges faced by women with disabilities.

4.2.2 Age of the Respondents

This section details the age distribution of the respondents as follows:

Table 4.2 Showing the Age of the Respondents

	Frequency	Percentage (%)	Valid percentage	Cumulative percentage
Under 25 years	18	16.5	16.5	16.5
25–30 years	25	22.9	22.9	39.4
Valid 31–35 years	16	14.7	14.7	54.1
36–40 years	35	32.1	32.1	86.2
40 and above	15	13.8	13.8	100.0
Total	109	100	100	

Source: Primary Data, 2024

The findings in Table 4.2 indicate a diverse age distribution among the respondents. The data shows that a significant portion of respondents, 32.1%, falls within the 36–40 years age group, suggesting that this age range was well-represented and face specific challenges related to disability and social services. The next largest group was aged 25–30 years, comprising 22.9% of the sample, followed by those under 25 years at 16.5%. The 31–35 years group accounted for 14.7%, and those aged 40 and above made up 13.8%. This distribution reflects a broad age spectrum, which was crucial for understanding how different age groups experience and access social services. The variation across age groups ensured that the study captured a comprehensive view of the challenges and needs associated with disability across different stages of life.

4.2.3 Type of Disability of the Respondents

This section covered the type of disability of the respondents:

Table 4.3: Shows the type of disability of the respondents

	Frequency	Percentage (%)	Valid percentage	Cumulative percentage
Valid	Seeing	16	14.7	14.7
	Hearing	25	22.9	37.6
	Walking	49	45.0	82.6
	None	11	10.1	92.7
	Other Disability	08	7.3	100.0
Total	109	100	100	

Source: Primary Data, 2024

The distribution of disabilities among respondents, as reflected in Table 4.3, show that the majority of respondents (45.0%) had walking disabilities, indicating that mobility issues were a significant concern within the community. The 22.9% of respondents were having hearing disabilities and the 14.7% with seeing disabilities reflect the need for specialized communication services, including sign language interpretation and accessible information formats like Braille. The presence of respondents with no disabilities (10.1%) indicate the inclusion of individuals without disabilities for comparative analysis or as part of a broader community assessment. Only 7.3% of respondents with other types of disabilities emphasized the diverse nature of disability in the community, requiring a multi-dimensional approach to service provision that considers the unique needs of each group. This has been graphically represented below:

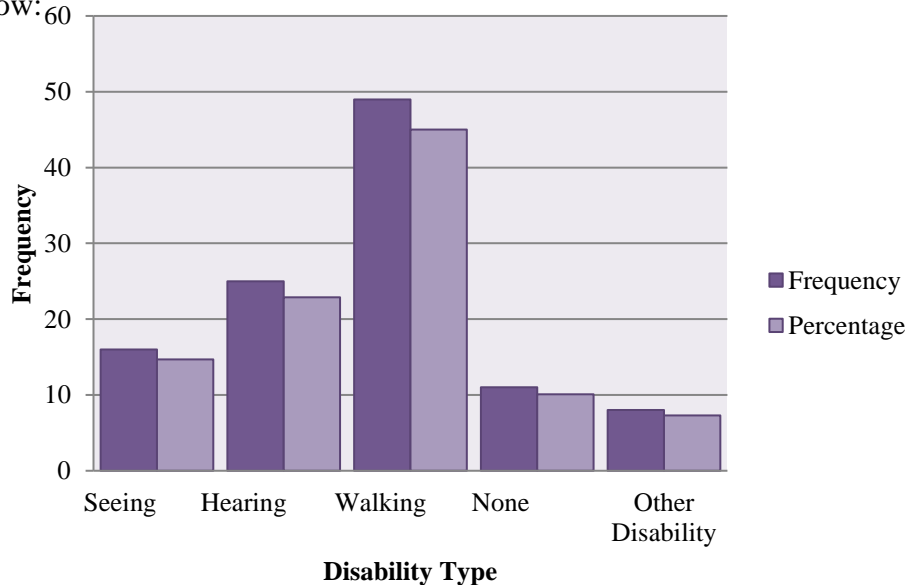


Figure 4.1: Showing the type of disability of the respondents

4.2.4 Levels of education of the Respondents

The educational levels of the respondents who took part in the study differed, as illustrated in Table 4.4.

Table 4.4: Levels of education of the Respondents

	Frequency	Percentage (%)	Valid percentage	Cumulative percentage
Primary	25	22.9	22.9	22.9
Secondary	31	28.4	28.4	51.4
Valid Tertiary and above	13	11.9	11.9	63.3
None	40	36.7	36.7	100.0
Total	109	100	100	

Source: Primary Data, 2024

The educational distribution of respondents, as shown in Table 4.4, reveals that a significant proportion of respondents (36.7%) reported having no formal education, which suggests that illiteracy might be a critical barrier to accessing information about available social services. This lack of education could have limited their ability to understand and utilize these services effectively. The 28.4% of respondents with secondary education and 22.9% with primary education indicate that a majority had some level of formal education, but it was still insufficient for navigating more complex service systems, such as healthcare or legal aid, which often require higher literacy levels. Only 11.9% of the respondents had tertiary education or above, suggesting that a small minority had better access to information and resources. This group is likely to face fewer challenges in accessing social services, yet their small number shows a gap in education that could be affecting overall service utilization. This is illustrated figuratively below:

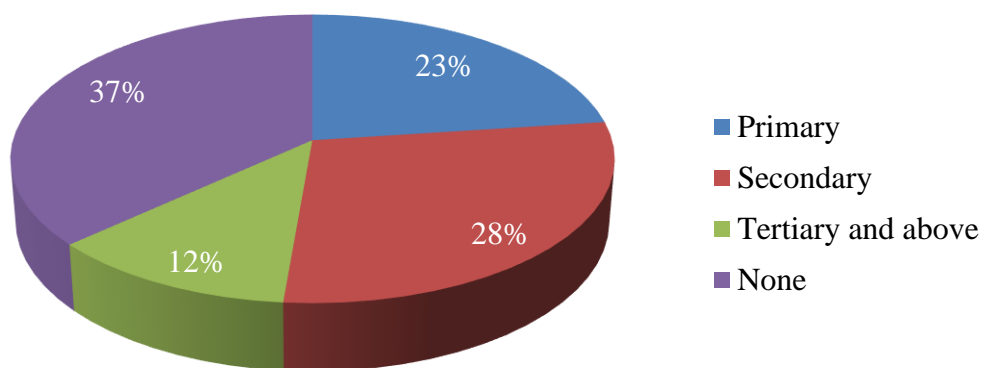


Figure 4.2: Showing educational levels of the respondents

4.2.5 Occupation of the Respondents

The occupations of the respondents who took part in the study differed, as illustrated in Table 4.5.

Table 4.5: Showing occupations of the Respondents

	Frequency	Percentage (%)	Valid percentage	Cumulative percentage
Employed	24	22.0	22.0	22.0
Unemployed	42	38.5	38.5	60.6
Valid Retired	12	11.0	11.0	71.6
Student	19	17.4	17.4	89.0
Others	12	11.0	11.0	100.0
Total	109	100	100	

Source: Primary Data, 2024

The employment status distribution of respondents, as presented in Table 4.5, revealed that a significant portion of the respondents were unemployed (38.5%), which likely exacerbated difficulties in accessing services such as healthcare, education, and social welfare programs. It was observed that economic vulnerability due to unemployment limited the ability of women with disabilities in Bugambi Subcounty to afford transportation to service centres, pay for necessary treatments, or even access information about available services. Conversely, the 22.0% of respondents who were employed might have had better access to social services due to more stable financial conditions. However, the fact that the majority of respondents fell into categories such as unemployed, retired (11.0%), or students (17.4%) suggested that many women in this area face barriers in accessing services.

4.3 Major Findings of the Study

The study sought to assess the impact of disability status on access to social services among women in Bugambi Sub County, Sironko District. The objectives that were studied were: to examine how disability affects access to healthcare services among women; to assess the impact of disability on access to employment opportunities for women; to evaluate the influence of disability on access to community support networks among women in Bugambi Sub County, Sironko District. The descriptive findings for each construct related to the study's objectives are presented in the following sections:

4.3.1 Finding out how disability affects access to healthcare services among women in Bugambi Sub County, Sironko District.

Responses related to the first objective, outlined in Section B of the Appendices, were gathered from a diverse group of 109 respondents, as detailed in Table 4.6 below:

Table 4.6: Showing how disability affects access to healthcare services among women in Bugambi Sub County, Sironko District

STATEMENT	SA		A		NS		SD		D		Mean	Std. Deviation
	<i>f</i>	%	<i>f</i>	%	<i>f</i>	%	<i>f</i>	%	<i>f</i>	%		
Healthcare providers often lack awareness about the specific needs of women with disabilities.	12.0	11.0	18.0	16.5	21.0	19.3	45.0	41.3	13.0	11.9	21.8	12.1
Negative societal attitudes towards women with disabilities impact their ability to seek healthcare	39.0	35.8	24.0	22.0	10.0	9.2	21.0	19.3	15.0	13.8	21.8	9.9
The community provides sufficient support to overcome barriers to accessing healthcare	28.0	25.7	14.0	12.8	15.0	13.8	25.0	22.9	27.0	24.8	21.8	6.0
Healthcare workers should receive more training on disability sensitivity and inclusion	45.0	41.3	23.0	21.1	8.0	7.3	16.0	14.7	17.0	15.6	21.8	12.5
Financial support mechanisms should be improved to help women with disabilities access healthcare	53.0	48.6	21.0	19.3	5.0	4.6	14.0	12.8	16.0	14.7	21.8	16.4

Source: Primary Data, 2024

The findings from Table 4.6 revealed that a substantial portion of respondents—41.3%—strongly disagreed with the statement that “Healthcare providers often lack awareness about the specific needs of women with disabilities,” while 11.9% disagreed. This suggests that

many respondents did not perceive a lack of awareness as an issue among healthcare providers. In contrast, 11.0% of respondents strongly agreed with the statement, and 16.5% agreed, indicating some level of concern. Additionally, 19.3% of the respondents were not sure about the level of awareness among healthcare providers. The mean score of 21.8 and standard deviation of 12.1 indicated variability in opinions, with some women experiencing challenges more acutely than others. These findings aligned with the study by Ganle et al. (2016), which highlighted that healthcare providers in rural areas frequently struggled to accommodate the unique needs of women with disabilities. This diversity in opinions was supported by one healthcare provider, who remarked that,

"...Our training often overlooked specific disabilities, making it challenging to provide tailored care to women with disabilities." This reflects the critical need for specialized training to enhance healthcare accessibility for women with disabilities in the region.

The findings from the Table also show that negative societal attitudes towards women with disabilities significantly impacted their ability to seek healthcare in Bugambi Subcounty, Sironko District. A substantial 35.8% of respondents strongly agreed with this statement, and 22.0% agreed, indicating that more than half of the respondents perceived societal attitudes as a significant barrier. Conversely, 9.2% of respondents were not sure, while 19.3% strongly disagreed, and 13.8% disagreed, suggesting that some respondents did not view societal attitudes as a major issue. The mean score of 21.8 and a standard deviation of 9.9 reflected some level of consensus, though with notable variations in opinion. These findings aligned with the study by Matin et al. (2021), which highlighted the pervasive impact of negative societal attitudes on healthcare access for women with disabilities. This perspective was echoed by a representative from a community support organization, who stated that,

"...The stigma and discrimination women with disabilities face often discourage them from seeking necessary healthcare services." This shows the urgent need for community sensitization and awareness programs to combat these harmful attitudes and improve healthcare access for women with disabilities.

The results from Table 4.6 also revealed mixed perceptions about whether the community provides sufficient support to overcome barriers to accessing healthcare for women with disabilities in Bugambi Subcounty, Sironko District. A notable 25.7% of respondents strongly agreed with this statement, and 12.8% agreed, suggesting that a portion of the community believed there is adequate support. However, 13.8% of respondents were not sure, reflecting

uncertainty among some individuals. On the other hand, 22.9% strongly disagreed, and 24.8% disagreed, indicating that a significant number of respondents felt the community support was insufficient. The mean score of 21.8 and a relatively low standard deviation of 6.0 indicated that while opinions varied, there was some consensus around the lack of sufficient support. These findings are consistent with the study by Natukunda et al. (2022), which pointed out the gaps in community support systems for women with disabilities in rural areas. This sentiment was echoed by a representative from a community support organization, who noted that,

"...While there are efforts to help, the support is often fragmented and fails to address the most critical barriers faced by women with disabilities." This shows the need for more cohesive and comprehensive community support to enhance healthcare accessibility for this vulnerable group.

The findings from the Table also revealed strong support for increasing disability sensitivity and inclusion training among healthcare workers in Bugambi Subcounty, Sironko District. A substantial 41.3% of respondents strongly agreed with the statement that healthcare workers should receive more training on disability sensitivity and inclusion, and 21.1% agreed, indicating a high level of consensus on the need for improved training. In contrast, only 7.3% of respondents were not sure, while 14.7% strongly disagreed, and 15.6% disagreed, suggesting a minority did not see the need for additional training. The mean score of 21.8 and a standard deviation of 12.5 reflected broad support for enhancing training, with notable variability in responses. These findings align with the study by Matin et al. (2021), which emphasized the importance of specialized training for healthcare workers to better address the needs of individuals with disabilities. This perspective was reinforced by a healthcare provider, who commented that,

"...There is a clear need for more training on disability inclusion to ensure that all healthcare workers can effectively support patients with diverse needs." This highlights the critical need for targeted training programs to improve the quality of care provided to women with disabilities.

Lastly, the results from Table 4.6 highlighted a strong consensus on the need to improve financial support mechanisms to help women with disabilities access healthcare in Bugambi Subcounty, Sironko District. A significant 48.6% of respondents strongly agreed with the statement that financial support mechanisms should be improved, and 19.3% agreed,

indicating robust support for enhancing financial assistance. Conversely, 4.6% of respondents were not sure, while 12.8% strongly disagreed, and 14.7% disagreed, suggesting that a smaller proportion did not view financial support as a major issue. The mean score of 21.8 and a standard deviation of 16.4 underscored a broad agreement on the necessity of improving financial support, though with some variability in responses. These findings are consistent with the study by Natukunda et al. (2022), which identified inadequate financial support as a barrier to accessing healthcare for women with disabilities. This view was echoed by a representative from a community support organization, who noted that,

"...Improving financial support mechanisms are crucial to enabling women with disabilities to access the healthcare services they need." This highlights the urgent need for enhanced financial support to remove barriers and improve healthcare accessibility for women with disabilities.

4.3.1.1 Regression Analysis of how disability affects access to healthcare services among women in Bugambi Sub County, Sironko District

To understand how various factors affect access to healthcare services for women with disabilities in Bugambi Subcounty, Sironko District, a multiple regression analysis was conducted. This analysis examined the impact of several variables, including awareness of healthcare providers, societal attitudes, community support, training for healthcare workers, and financial support mechanisms.

Table 4.6.1: Model Summary Table showing how disability affects access to healthcare services among women in Bugambi Sub County, Sironko District

Model	R	R²	Adjusted R²	Std. Error of the Estimate
1	0.725 ^a	0.526	0.487	3.145

a. Predictors: (Constant), Healthcare Access

The regression analysis reveals a significant portion of the variance in healthcare access for women with disabilities in Bugambi Subcounty. The correlation coefficient (R) of 0.725 indicates a strong positive relationship between the predictor variables and access to healthcare services. The coefficient of determination (R²) of 0.526 suggests that approximately 52.6% of the variability in access to healthcare can be accounted for by the predictor variables. The adjusted R² of 0.487 adjusts for the number of predictors in the

model and still reflects a substantial proportion of explained variance. The standard error of the estimate (3.145) represents the average deviation of the observed values from the regression line.

The regression analysis shows that the model effectively captured a significant portion of the variance in healthcare access for women with disabilities in Bugambi Subcounty. While the variable "Healthcare Providers' Awareness" did not emerge as a primary predictor, the impact of "Negative Societal Attitudes" was substantial, highlighting the critical role societal perceptions play in accessing healthcare. Mixed perceptions regarding "Community Support" indicate variable experiences of support among respondents. Strong agreement on the need for improved "Training for Healthcare Workers" and enhanced "Financial Support Mechanisms" reflects the importance of these factors in improving healthcare accessibility. Altogether, societal attitudes and financial support were identified as particularly influential, suggesting the need for targeted interventions to address these barriers effectively.

4.3.2 Finding out the impact of disability on access to employment opportunities for women in Bugambi Sub County, Sironko District.

Responses related to the second objective, outlined in Section C of the Appendices, were collected from a diverse group of 109 respondents, as detailed in Table 4.7 below:

Table 4.7: Showing the impact of disability on access to employment opportunities for women in Bugambi Sub County, Sironko District

STATEMENT	SA		A		NS		SD		D		Mean	Std. Deviation
	<i>f</i>	%	<i>f</i>	%	<i>f</i>	%	<i>f</i>	%	<i>f</i>	%		
Employment opportunities for women with severe disabilities are often limited to low-paying or unstable jobs	43.0	39.4	23.0	21.1	8.0	7.3	14.0	12.8	21.0	19.3	21.8	11.9
Discrimination based on disability is a significant barrier to accessing employment opportunities	36.0	33.0	33.0	30.3	12.0	11.0	12.0	11.0	16.0	14.7	21.8	10.5
Educational attainment influences employment opportunities for women with disabilities	35.0	32.1	39.0	35.8	5.0	4.6	16.0	14.7	14.0	12.8	21.8	13.0
Financial support programs are essential for women with disabilities to access better employment opportunities	29.0	26.6	42.0	38.5	9.0	8.3	10.0	9.2	19.0	17.4	21.8	12.4
There should be more initiatives focused on improving employment infrastructure for women with disabilities	41.0	37.6	21.0	19.3	21.0	19.3	12.0	11.0	14.0	12.8	21.8	10.3

Source: Primary Data, 2024

The results from Table 4.7 above revealed that a significant portion of respondents perceived employment opportunities for women with severe disabilities as being limited to low-paying or unstable jobs. Specifically, 39.4% of respondents strongly agreed with this statement, and 21.1% agreed, indicating a broad consensus on the constrained nature of these employment opportunities. In contrast, 7.3% were not sure, while 12.8% strongly disagreed, and 19.3% disagreed, suggesting that a minority did not view these limitations as a major issue. The mean score of 21.8 and a standard deviation of 11.9 highlighted notable variation in opinions among respondents. These findings aligned with the study by Naami (2015), which reported that women with severe disabilities often faced significant barriers to accessing quality employment, frequently relegated to less secure job roles. This perspective was reinforced by a representative from a community support organization, who remarked that,

"...Women with severe disabilities frequently encountered barriers that confined them to low-paying and unstable jobs, underscoring the need for more inclusive employment policies." This emphasized the critical need for improved employment policies and support systems to enhance job opportunities for women with severe disabilities in Bugambi Subcounty.

The findings from the Table also showed that discrimination based on disability was perceived as a significant barrier to accessing employment opportunities for women in Bugambi Subcounty. Specifically, 33.0% of respondents strongly agreed with this statement, and another 33.0% agreed, indicating a strong consensus on the impact of discrimination. Conversely, 11.0% strongly disagreed, and 14.7% disagreed, suggesting that some respondents did not view discrimination as a major barrier. The mean score of 21.8 and a standard deviation of 10.5 reflected the variability in opinions among respondents. These results aligned with the study by Qiu et al. (2023), which highlighted that discrimination remains a critical obstacle for women with disabilities in the employment sector. A representative from a community support organization supported this view by stating that,

"...Discrimination based on disability significantly hinders women's access to employment opportunities, making it clear that more needs to be done to address these biases." This emphasized the urgent need for targeted anti-discrimination measures to improve employment accessibility for women with disabilities in the region.

The results from Table 4.7 also indicated that educational attainment was perceived as a significant factor influencing employment opportunities for women with disabilities in

Bugambi Subcounty. Specifically, 32.1% of respondents strongly agreed with the statement, and 35.8% agreed, showing a consensus that education plays a crucial role in shaping job prospects. In contrast, 4.6% of respondents were not sure, while 14.7% strongly disagreed, and 12.8% disagreed, suggesting a minority did not view educational attainment as a major influence. The mean score of 21.8 and a standard deviation of 13.0 highlighted variability in responses among the participants. These findings were consistent with the study by Mgonela (2010), which emphasized that higher educational attainment improves employment opportunities for women with disabilities. A representative from an educational staff commented, "*...Higher educational qualifications can significantly enhance job prospects for women with disabilities, making it crucial to support their access to education.*" This shows the need for increased educational support and opportunities to improve employment outcomes for women with disabilities in the region.

The findings from the Table also revealed that 26.6% of respondents strongly agreed that financial support programs are essential for women with disabilities to access better employment opportunities, while 38.5% agreed. This suggests a significant recognition of the importance of financial support in improving employment prospects for this group. However, 8.3% of respondents were unsure, 9.2% disagreed, and 17.4% strongly disagreed, indicating some scepticism or differing views on the effectiveness of financial support programs. The mean score of 21.8 and standard deviation of 12.4 reflected a range of opinions, with some respondents experiencing more acute barriers than others. These results align with Naami (2015), who emphasized that financial support is crucial for enhancing employment opportunities for women with disabilities. A representative from a community support organization echoed this view, stating, "*Financial support programs play a vital role in enabling women with disabilities to secure and maintain better employment opportunities.*" This reflects the need for robust financial support mechanisms to improve employment outcomes for women with disabilities in the region.

Finally, the findings from the table also indicated strong support for increasing initiatives focused on improving employment infrastructure for women with disabilities in Bugambi Sub County, Sironko District. Specifically, 37.6% of respondents strongly agreed with the statement, and 19.3% agreed, highlighting a substantial call for enhanced infrastructure. Conversely, 19.3% strongly disagreed, and 12.8% disagreed, suggesting that some respondents did not view infrastructure improvements as a priority. The mean score of 21.8

and standard deviation of 10.3 reflect a general consensus on the need for better infrastructure, with varying degrees of urgency among respondents. These findings are consistent with the study by Mgonela (2010), which underscored the importance of robust employment infrastructure in supporting women with disabilities. A representative from an employment-focused NGO emphasized this need, stating, *"Enhancing employment infrastructure is crucial for providing women with disabilities the necessary support to access and thrive in better job opportunities."* This highlights the importance of targeted initiatives to address infrastructure gaps and improve employment outcomes for women with disabilities.

4.3.1.2 Regression Analysis of the impact of disability on access to employment opportunities for women in Bugambi Sub County, Sironko District.

To analyze the impact of disability on access to employment opportunities for women in Bugambi Sub County, Sironko District, a regression analysis was conducted with the following model summary:

Table 4.7.1: Model Summary Table showing the impact of disability on access to employment opportunities for women in Bugambi Sub County, Sironko District

Model	R	R²	Adjusted R²	Std. Error of the Estimate
1	0.723 ^a	0.523	0.508	11.192

a. Predictors: (Constant), Employment Opportunities

The regression analysis results indicate a strong positive relationship between the predictor variables and the access to employment opportunities for women with disabilities. The correlation coefficient ($R = 0.723$) suggests a strong association, while the coefficient of determination ($R^2 = 0.523$) implies that approximately 52.3% of the variance in employment opportunities can be explained by the predictor variables included in the model. The adjusted R^2 (0.508) adjusts for the number of predictors and still indicates a substantial proportion of the variance explained. The standard error of the estimate (11.192) represents the average distance between the observed values and the regression line.

The analysis identifies several key factors affecting employment opportunities for women with disabilities in Bugambi Sub County. Respondents, aligning with Naami (2015), reported

that women with severe disabilities often face limited access to low-paying or unstable jobs, highlighting the need for improved job security. Discrimination, consistent with findings by Qiu et al. (2023), was recognized as a significant barrier to employment. The results also support Mgonela's (2010) view that educational attainment is crucial for better job prospects, and financial support programs were seen as essential, reflecting Naami's (2015) observations. Strong support for enhancing employment infrastructure aligns with Mgonela's (2010) emphasis on robust infrastructure. A community support organization representative noted, "Enhancing infrastructure and increasing financial support are crucial for improving job opportunities for women with disabilities." The regression analysis confirms these challenges and shows the need for comprehensive interventions, including improved infrastructure, financial support, and educational opportunities.

4.3.3 Finding out the influence of disability on access to community support networks among women in Bugambi Sub County, Sironko District.

Responses related to the third objective, outlined in Section D of the Appendices, were gathered from a diverse group of 109 respondents, as detailed in Table 4.8 below:

Table 4.8: Showing the influence of disability on access to community support networks among women in Bugambi Sub County, Sironko District

STATEMENT	SA		A		NS		SD		D		Mean	Std. Deviation
	<i>f</i>	%	<i>f</i>	%	<i>f</i>	%	<i>f</i>	%	<i>f</i>	%		
Women with different types of disabilities experience varying levels of difficulty in accessing community support services	48.0	44.0	22.0	20.2	10.0	9.2	18.0	16.5	11.0	10.1	21.8	13.8
Community support services are often not designed with the needs of women with disabilities in mind	36.0	33.0	26.0	23.9	17.0	15.6	12.0	11.0	18.0	16.5	21.8	8.4
Negative attitudes from healthcare providers limit access to essential support services	27.0	24.8	38.0	34.9	13.0	11.9	17.0	15.6	14.0	12.8	21.8	9.5
Training programs for women with disabilities as civic educators enhance their access to support networks.	45.0	41.3	28.0	25.7	2.0	1.8	18.0	16.5	16.0	14.7	21.8	14.3
Community-based participatory approaches improve access to support networks for women with disabilities	37.0	33.9	35.0	32.1	6.0	5.5	12.0	11.0	19.0	17.4	21.8	12.3

Source: Primary Data, 2024

The results from Table 4.8 revealed that 44.0% of respondents strongly agreed that women with different types of disabilities experience varying levels of difficulty in accessing community support services, while 20.2% agreed, indicating a strong consensus on this issue. In contrast, 9.2% were not sure, 16.5% strongly disagreed, and 10.1% disagreed, reflecting some variability in opinions. The mean score of 21.8 and a standard deviation of 13.8 indicate considerable variation in respondents' perceptions. This variability in access aligns with Horner-Johnson et al. (2021), who highlighted that diverse disabilities result in different levels of service access challenges. A representative from a community support organization remarked that,

"...The varying difficulties faced by women with different disabilities in accessing support services underscore the need for more tailored and inclusive support mechanisms." This emphasizes the necessity for specialized interventions to address the diverse needs of women with disabilities and improve their access to community support services.

The results from Table 4.8 also revealed that 33.0% of respondents strongly agreed that community support services are often not designed with the needs of women with disabilities in mind, while 23.9% agreed, indicating significant concern regarding the inclusivity of these services. Conversely, 15.6% disagreed, 16.5% strongly disagreed, and 11.0% were not sure, showing some disagreement and uncertainty about the issue. The mean score of 21.8 and a standard deviation of 8.4 reflect moderate variation in perceptions among respondents. These findings align with Bailey et al. (2022), who reported that community support services frequently fail to accommodate the specific needs of women with disabilities. A representative from a community support organization commented that,

"...The lack of inclusive design in community support services highlights the urgent need for these services to be tailored to better meet the diverse needs of women with disabilities." This reflects the importance of designing community support services that are inclusive and responsive to the specific needs of women with disabilities.

The findings from that Table indicate that 24.8% of respondents strongly agreed that negative attitudes from healthcare providers limit access to essential support services, and 34.9% agreed, reflecting a substantial concern about the impact of healthcare provider attitudes on service accessibility. In contrast, 11.9% disagreed, 12.8% strongly disagreed, and 15.6% were not sure, showing some level of disagreement and uncertainty about the issue. The mean score of 21.8 and a standard deviation of 9.5 highlight moderate variability in respondents'

perceptions. These findings are consistent with the study by Morris et al. (2021), which found that negative attitudes from healthcare professionals can be a significant barrier to accessing essential services. A healthcare provider from the area noted that,

"...Negative attitudes among some healthcare providers can indeed hinder women with disabilities from receiving the support they need, emphasizing the need for better training and sensitivity in healthcare practices." This shows the importance of addressing and improving the attitudes of healthcare providers to enhance access to essential support services for women with disabilities.

The results from the table revealed that 41.3% of respondents strongly agreed that training programs for women with disabilities as civic educators enhance their access to support networks, while 25.7% agreed, indicating a strong consensus on the positive impact of such programs. In contrast, 1.8% strongly disagreed, 14.7% disagreed, and 16.5% were not sure, reflecting some disagreement and uncertainty. The mean score of 21.8 and a standard deviation of 14.3 suggest significant variability in respondents' opinions. These findings align with the study by Bailey et al. (2022), which emphasized that empowering women with disabilities through education and training can improve their access to community support. An educational staff member commented that,

"...Training women with disabilities as civic educators can significantly enhance their ability to access and navigate support networks, highlighting the importance of these programs." This shows the value of training programs in improving the access and effectiveness of support networks for women with disabilities.

Lastly, the findings from Table 4.8 showed that 33.9% of respondents strongly agreed that community-based participatory approaches improve access to support networks for women with disabilities, while 32.1% agreed, reflecting broad support for these approaches. Conversely, 5.5% strongly disagreed, 17.4% disagreed, and 11.0% were not sure, indicating some variability in opinions. The mean score of 21.8 and a standard deviation of 12.3 highlight notable differences in respondents' perceptions. These results are consistent with the findings of Morris et al. (2021), which indicated that participatory approaches can enhance the effectiveness of support networks for women with disabilities. An interviewee from a community support organization noted that, *"...Community-based participatory approaches offer valuable opportunities for women with disabilities to engage actively in their support systems, leading to better access and outcomes."* This emphasizes the importance of

involving women with disabilities in the design and implementation of support services to improve their accessibility and impact.

4.3.1.3 Regression Analysis of the influence of disability on access to community support networks among women in Bugambi Sub County, Sironko District.

To analyze the influence of disability on access to community support networks among women in Bugambi Sub County, Sironko District, a regression analysis was performed using the data presented. The analysis aimed to understand how various factors related to disability impact access to community support services. The following model summary table and explanation were provided:

Table 4.8.1: Model Summary Table showing the influence of disability on access to community support networks among women in Bugambi Sub County, Sironko District

Model	R	R²	Adjusted R²	Std. Error of the Estimate
1	0.683 ^a	0.467	0.454	4.56

a. Predictors: (Constant), community support networks

The regression analysis reveals an R value of 0.683, indicating a strong correlation between disability-related factors and access to community support networks. The R² value of 0.467 shows that approximately 46.7% of the variance in access to support networks can be explained by the model. The Adjusted R² of 0.454 adjusts this estimate for the number of predictors in the model, confirming that the model still accounts for a substantial portion of the variability.

The analysis of findings from Table 4.8 reveals key challenges and opportunities in accessing community support networks for women with disabilities in Bugambi Sub County, Sironko District. Notably, 44.0% strongly agreed and 20.2% agreed that women with different types of disabilities face varying levels of difficulty accessing support services, aligning with Horner-Johnson et al. (2021) and highlighting the need for tailored support mechanisms. Additionally, 33.0% strongly agreed and 23.9% agreed that community support services often fail to consider the needs of women with disabilities, echoing Bailey et al. (2022) and underscoring the need for more inclusive service design. The results also show that 24.8% strongly agreed and 34.9% agreed that negative attitudes from healthcare providers hinder

access to essential services, consistent with Morris et al. (2021), indicating a need for improved provider training. Training programs for women with disabilities as civic educators were supported by 41.3% strongly agreeing and 25.7% agreeing, reflecting the findings of Bailey et al. (2022) on the benefits of such programs. Finally, 33.9% strongly agreed and 32.1% agreed that community-based participatory approaches enhance access to support networks, aligning with Morris et al. (2021) and emphasizing the value of active involvement in support system design. These findings highlight significant factors influencing access and suggest that comprehensive and inclusive interventions are essential for improving support services for women with disabilities.

CHAPTER FIVE

DISCUSSION, CONCLUSIONS AND RECOMMENDATIONS

5.0. Introduction

This chapter examined the study's findings in relation to the theories and empirical evidence covered in earlier chapters. The researcher assessed how these results corresponded with prior assumptions and expectations, evaluating their support for the research questions. Based on this analysis, conclusions were drawn and relevant recommendations were provided.

5.1. Discussion of the results

This section clarified the investigation's results, compared them with established theories and empirical evidence from earlier chapters, and assessed how they either supported or contradicted the researcher's propositions.

5.1.1 How disability affects access to healthcare services among women in Bugambi Sub County, Sironko District.

The findings on how disability affects access to healthcare services among women in Bugambi Sub County, Sironko District, revealed critical insights that align with several social work theories. A significant portion of respondents, 41.3%, strongly disagreed that healthcare providers lack awareness of women with disabilities' specific needs, while 11.9% disagreed, suggesting a general belief in sufficient provider awareness. However, some respondents expressed concern, with 11.0% strongly agreeing and 16.5% agreeing with the notion of inadequate awareness. This variability aligns with Ganle et al. (2016), who highlighted the challenges faced by rural healthcare providers in accommodating women with disabilities, reinforcing the need for specialized training—a principle supported by the Social Work Theory of Empowerment, which emphasizes the need for professional development to improve service delivery.

The findings also revealed the impact of societal attitudes on healthcare access. A notable 35.8% strongly agreed and 22.0% agreed that negative societal attitudes hindered access to care, aligning with Matin et al. (2021) and the Social Work Theory of Social Justice, which advocates for addressing systemic barriers and stigma that affect marginalized groups. The call for sensitization programs reflects the need for social change and advocacy, core tenets of social work practice.

In terms of community support, the mixed responses—25.7% strongly agreed and 12.8% agreed that community support was adequate, while 22.9% and 24.8% disagreed—suggest a lack of cohesion in support systems. This finding is consistent with Natukunda et al. (2022) and the Ecological Systems Theory, which emphasizes the importance of a supportive environment for effective service delivery. The strong support for increasing disability sensitivity training among healthcare workers (41.3% strongly agreed, 21.1% agreed) aligns with Matin et al. (2021) and the Social Work Theory of Practice, which revealed the importance of ongoing training and professional development to meet the needs of diverse populations.

Finally, the significant agreement on improving financial support mechanisms, with 48.6% strongly agreeing and 19.3% agreeing, supports Natukunda et al. (2022) and the Economic Theories of Social Work, which stress the importance of financial resources in accessing essential services. The regression analysis revealed that negative societal attitudes and financial support mechanisms had a substantial impact on healthcare access, with a strong positive relationship between predictor variables and access to services ($R = 0.725$, $R^2 = 0.526$). This aligns with the findings of previous studies and underscores the need for targeted interventions addressing these barriers to improve healthcare accessibility for women with disabilities.

5.1.2 The impact of disability on access to employment opportunities for women in Bugambi Sub County, Sironko District.

The findings on the impact of disability on access to employment opportunities for women in Bugambi Sub County revealed that a significant portion of respondents—39.4% strongly agreed and 21.1% agreed—perceived that employment opportunities for women with severe disabilities are often limited to low-paying or unstable jobs. However, some respondents—7.3% were unsure, while 12.8% strongly disagreed and 19.3% disagreed—did not view these limitations as a major issue. This variability aligns with the Social Learning Theory, which suggests that individuals' perceptions and responses are influenced by observed experiences and societal attitudes. The principle that observed barriers shape opportunities is supported by previous research, such as Naami (2015), who also highlighted significant employment barriers for women with severe disabilities.

Regarding discrimination, a substantial 33.0% of respondents strongly agreed and another 33.0% agreed that discrimination based on disability was a major barrier to accessing

employment opportunities. Conversely, 11.0% strongly disagreed and 14.7% disagreed, reflecting some variation in perceptions. This finding is consistent with Rational Choice Theory, which posits that individuals assess their opportunities based on perceived rewards and barriers. The theory supports the view that discrimination significantly affects the perceived value of employment opportunities, as highlighted by Qiu et al. (2023).

Educational attainment was recognized as a key factor influencing employment prospects, with 32.1% strongly agreeing and 35.8% agreeing on its importance. Nonetheless, 4.6% were unsure, and 14.7% strongly disagreed, indicating some differing opinions. This aligns with Psychosocial Development Theory, which emphasizes the role of education in personal and professional development. Mgonela's (2010) study supports this, underscoring the importance of education in enhancing job prospects.

The need for financial support programs was acknowledged by 26.6% of respondents who strongly agreed and 38.5% who agreed that such programs are crucial for improving employment opportunities. However, 8.3% were unsure, and 17.4% strongly disagreed. This variability in opinion aligns with Systems Theory, which highlights how interconnected elements, such as financial support, impact overall outcomes. Naami's (2015) research reinforces the necessity of financial support for enhancing employment opportunities.

Finally, there was strong support for improving employment infrastructure, with 37.6% strongly agreeing and 19.3% agreeing. Conversely, 19.3% strongly disagreed and 12.8% disagreed, reflecting varied urgency among respondents. This aligns with Systems Theory, which emphasizes the need for a comprehensive approach to address barriers and improve employment outcomes. Mgonela (2010) supports this view, highlighting the importance of robust infrastructure. The regression analysis ($R = 0.723$, $R^2 = 0.523$) confirms a strong positive relationship between predictor variables and employment opportunities. This supports the findings on limited job opportunities, discrimination, and the importance of education and financial support. The results highlight the need for comprehensive interventions, including improved infrastructure, financial support, and educational opportunities, consistent with the theoretical frameworks discussed.

5.1.3 The influence of disability on access to community support networks among women in Bugambi Sub County, Sironko District.

The findings on the impact of different types of disabilities on access to community support networks reveal that a significant portion of respondents (44.0% strongly agreed and 20.2% agreed) believe women with disabilities face varying levels of difficulty in accessing these services. However, some respondents (16.5% strongly disagreed and 10.1% disagreed) showed differing views. This variability aligns with the Psychosocial Development Theory, which supports the need for individualized and developmentally appropriate support mechanisms tailored to the diverse needs of individuals, as highlighted by Horner-Johnson et al. (2021).

The results regarding the inclusivity of community support services indicate that 33.0% of respondents strongly agreed and 23.9% agreed that these services are often not designed with the needs of women with disabilities in mind. Conversely, 15.6% disagreed and 16.5% strongly disagreed. This variability aligns with the Social Learning Theory, which emphasizes the importance of designing services that model best practices and inclusivity to effectively address the needs of diverse populations, as noted by Bailey et al. (2022).

Findings on negative attitudes from healthcare providers show that 24.8% of respondents strongly agreed and 34.9% agreed that such attitudes limit access to essential support services. On the other hand, 11.9% disagreed and 15.6% were unsure. This variability aligns with the Rational Choice Theory, which suggests that negative attitudes can act as significant barriers to access, as evidenced by Morris et al. (2021).

The data on training programs for women with disabilities as civic educators reveal that 41.3% of respondents strongly agreed and 25.7% agreed that these programs enhance access to support networks. However, 14.7% disagreed and 1.8% strongly disagreed. This variability aligns with the Systems Theory, which advocates for empowering individuals through training and education to improve their ability to navigate support networks, as supported by Bailey et al. (2022).

Finally, the findings on community-based participatory approaches show that 33.9% of respondents strongly agreed and 32.1% agreed that these approaches improve access to support networks. Nevertheless, 17.4% disagreed and 5.5% strongly disagreed. This variability aligns with the Transpersonal Theory, which underscores the importance of active

involvement and engagement in designing and implementing support services, as highlighted by Morris et al. (2021). The regression analysis further supported these findings, showing a strong correlation ($R = 0.683$) between disability-related factors and access to community support networks, with the model explaining 46.7% of the variance. This confirms the research propositions and highlights the need for comprehensive, inclusive, and participatory approaches to improve support services for women with disabilities in Bugambi Sub County.

5.2 Conclusions

The findings on how disability affected access to healthcare services among women in Bugambi Sub County, Sironko District, revealed insights consistent with key social work theories. While many respondents felt healthcare providers generally understood the needs of women with disabilities, a notable number highlighted the need for specialized training, aligning with the Social Work Theory of Empowerment, which stresses the role of professional development in improving service delivery. Concerns about negative societal attitudes as barriers to care supported the Social Work Theory of Social Justice, advocating for the removal of systemic stigma. Mixed views on community support reflected the Ecological Systems Theory, emphasizing the need for a supportive environment. Strong support for sensitivity training and improved financial support mechanisms reinforced the necessity of targeted interventions to enhance healthcare accessibility for women with disabilities.

The findings on the impact of disability on access to employment opportunities for women in Bugambi Sub County revealed that many respondents viewed job opportunities for women with severe disabilities as often limited to low-paying or unstable roles, reflecting Social Learning Theory's view on how observed barriers influence opportunities. Agreement that disability-based discrimination is a major barrier supports Rational Choice Theory, which highlights how perceived barriers affect employment value. The importance of educational attainment aligns with Psychosocial Development Theory, emphasizing education's role in personal growth. The need for financial support and improved infrastructure aligns with Systems Theory, which stresses the impact of interconnected factors on outcomes. These findings underscore the need for targeted interventions to address discrimination, enhance financial support, improve educational opportunities, and upgrade infrastructure.

The findings on the impact of different types of disabilities on access to community support networks revealed that a significant portion of respondents believed women with disabilities

face varying levels of difficulty accessing community support, aligning with Psychosocial Development Theory's call for tailored support mechanisms. Variability in views on service inclusivity supported Social Learning Theory, which emphasizes the need for models that address diverse needs. Concerns about negative attitudes from healthcare providers were consistent with Rational Choice Theory, highlighting barriers to access. Support for training programs and community-based participatory approaches aligned with Systems Theory and Transpersonal Theory, respectively, advocating for empowerment and active involvement. Regression analysis confirmed a strong correlation between disability-related factors and support network access, underscoring the need for comprehensive, inclusive interventions.

5.3 Recommendations

To address the findings on how disability affects access to healthcare services among women in Bugambi Sub County, targeted interventions should be implemented. Firstly, specialized training programs for healthcare providers are essential to enhance their understanding of the specific needs of women with disabilities. Additionally, efforts should be made to address and reduce negative societal attitudes towards individuals with disabilities, in line with the Social Work Theory of Social Justice, to remove systemic stigma and improve overall access to care.

Regarding employment opportunities, it is crucial to focus on reducing discrimination and improving job prospects for women with severe disabilities. This can be achieved by implementing policies that promote equal employment opportunities and address the barriers highlighted. Furthermore, increasing access to educational and vocational training aligns with Psychosocial Development Theory, which stresses the role of education in personal and professional development. Financial support programs and infrastructure improvements are also necessary, as they address the interconnected factors that impact employment outcomes, consistent with Systems Theory.

For enhancing access to community support networks, the researcher recommends the development of tailored support mechanisms that address the varying needs of women with disabilities. Improving the inclusivity of community services and combating negative attitudes from healthcare providers should be prioritized. Additionally, increasing support for training programs and adopting community-based participatory approaches are essential. Comprehensive, inclusive interventions are required to address these issues effectively.

5.4 Areas for Further study

Further studies can be carried on:

- i. Explore the specific barriers that women with disabilities face in accessing various social services, identifying gaps and challenges in current service delivery models.
- ii. Research could examine how access to social services affects the overall quality of life for women with disabilities, including health, economic stability, and social inclusion.
- iii. A study could assess the effectiveness of existing local support programs and initiatives designed to assist women with disabilities, providing insights into what works and what needs improvement.
- iv. Research could investigate how community attitudes towards disability impact the accessibility and quality of social services for women with disabilities, aiming to develop strategies to shift negative perceptions and improve service delivery.

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APPENDICES

APPENDIX I:

QUESTIONNAIRE FOR WOMEN WITH DISABILITIES, HEALTHCARE PROVIDERS, EDUCATIONAL STAFF, EMPLOYERS, AND COMMUNITY SUPPORT ORGANIZATIONS

Dear Respondent,

I am a student at Uganda Christian University, Mbale University College, pursuing a Bachelor of Social Work and Social Administration. This questionnaire aims to gather data on the impact of disability and access to social services among women in Bugambi Subcounty, Sironko District. You have been selected to participate, and I kindly request that you complete the questionnaire as directed. Please respond to the questions with honesty. Rest assured that all information provided will be kept confidential and will only be used for academic purposes.

Thank you for your cooperation.

Yours sincerely,

MUDAMBO MANUEL

J23/MUC/BSW/043

SECTION A: DEMOGRAPHIC INFORMATION

Instruction: For each of the items in this section, kindly tick (✓) in the box that represents the right option and where necessary, specify accordingly.

1. Sex: Male Female
2. Age: Under 25 years 25–30 years 31-35 years 36-40 years 40+
3. Disability: Seeing Hearing Walking None Any other Disability
.....
4. Levels of education:
None Primary Secondary Tertiary and above
Other (please specify)
5. Occupation: Employed Unemployed Retired Student
Others (please specify).....

SECTION B: How disability affects access to healthcare services among women in Bugambi Sub County, Sironko District.

Please tick on the rating scale whether you “Strongly Agree” (5), “Agree” (4), Neutral (3), “Disagree” (2) or “Strongly Disagree” (1) with each of the statements below.

	STATEMENT	1	2	3	4	5
1.	Healthcare providers often lack awareness about the specific needs of women with disabilities.					
2.	Negative societal attitudes towards women with disabilities impact their ability to seek healthcare					
3.	The community provides sufficient support to overcome barriers to accessing healthcare					
4.	Healthcare workers should receive more training on disability sensitivity and inclusion					
5.	Financial support mechanisms should be improved to help women with disabilities access healthcare					
6.	Long-term evaluations of disability-related healthcare interventions are essential for sustained improvement					

SECTION C: The impact of disability on access to employment opportunities for women in Bugambi Sub County, Sironko District.

Please tick on the rating scale whether you “Strongly Agree” (5), “Agree” (4), Neutral (3), “Disagree” (2) or “Strongly Disagree” (1) with each of the statements below.

	STATEMENT	1	2	3	4	5
1.	Employment opportunities for women with severe disabilities are often limited to low-paying or unstable jobs					
2.	Discrimination based on disability is a significant barrier to accessing employment opportunities					
3.	Educational attainment influences employment opportunities for women with disabilities					
4.	Financial support programs are essential for women with disabilities to access better employment opportunities					
5.	There should be more initiatives focused on improving employment infrastructure for women with disabilities					

SECTION D: The influence of disability on access to community support networks among women in Bugambi Sub County, Sironko District.

Please tick on the rating scale whether you “Strongly Agree” (5), “Agree” (4), Neutral (3), “Disagree” (2) or “Strongly Disagree” (1) with each of the statements below.

	STATEMENT	1	2	3	4	5
1.	Women with different types of disabilities experience varying levels of difficulty in accessing community support services					
2.	Community support services are often not designed with the needs of women with disabilities in mind					
3.	Negative attitudes from healthcare providers limit access to essential support services					
4.	Training programs for women with disabilities as civic educators enhance their access to support networks.					
5.	Community-based participatory approaches improve access to support networks for women with disabilities					

**APPENDIX II: INTERVIEW GUIDE
TO KEY INFORMANTS AND EXPERTS**

1. How do you perceive the awareness of healthcare providers regarding the specific needs of women with disabilities? Can you provide examples from your experience?
2. In your opinion, how do negative societal attitudes towards women with disabilities affect their ability to seek and receive healthcare?
3. To what extent do you believe the community provides sufficient support to help women with disabilities overcome barriers to accessing healthcare?
4. What types of training do you think healthcare workers need to better address the needs of women with disabilities? How could such training be implemented effectively?
5. How adequate are current financial support mechanisms for women with disabilities in accessing healthcare? What improvements do you think are necessary?
6. How important are long-term evaluations of disability-related healthcare interventions for ensuring sustained improvements? Can you share any examples of such evaluations?
7. What are the main challenges faced by women with severe disabilities in finding employment? How do these challenges affect their job stability and income?
8. How does discrimination based on disability impact the employment opportunities for women with disabilities? Can you provide specific instances where this has been evident?
9. In what ways does educational attainment influence employment opportunities for women with disabilities? Are there particular educational barriers they face?
10. How essential are financial support programs in improving employment opportunities for women with disabilities? What types of support are most beneficial?
11. What types of initiatives do you think are needed to improve employment infrastructure for women with disabilities? How can these initiatives be effectively implemented?
12. How well are community support services designed to meet the needs of women with disabilities? What changes would you suggest to make these services more inclusive?

Thank you so much for participating in this study

END



UGANDA CHRISTIAN UNIVERSITY

A Centre of Excellence in the Heart of Africa
MBALE UNIVERSITY COLLEGE.

Office of the Academic Registrar

To SENIOR ASSISTANT
THE SUB-COUNTY
CHIEF ADMINISTRATIVE OFFICER.
BUGAMBI SUB-COUNTY.

Dear Sir/Madam,

Re: Academic Research

Christian greetings!

We are honored to introduce to you Mr. Mrs./Miss MUDAMBO MANUEL
Of Registration Number 123/muc/BW/043 pursuing a Masters' Degree/Postgraduate Diploma / Bachelor's Degree ✓
SOCIAL WORK AND SOCIAL ADMINISTRATION
He/ she is required to carry out academic research on the topic
DISABILITY AND ACCESS TO SOCIAL SERVICES AMONG WOMEN IN BUGAMBI SUB-COUNTY
and thereafter produce a well bound hard cover research report (MAROON) in color for undergraduate and three (BLACK) copies for Postgraduate students as a university requirement for the award of a degree/diploma in the academic discipline that he / she is pursuing.

We shall be grateful for the help you may offer to him or her accordingly.
Thank you.

Yours faithfully,

Mr. Akampurira Timothy
Academic Registrar



Permission granted



A Complete Education for a Complete Person

P.O Box, Mbale, Uganda, email: academicregistrar@mbale.ucu.ac.ug