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CHALLENGES FACED BY PEOPLE WITH PHYSICAL DISABILITIES IN THEIR DAILY LIVES: THE CASE STUDY OF MOGADISHU CITY

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ABSTRACT

According to World Health Organization (WHO) (2011) World Disability Report, there are about 650 million people with disability in the worldwide. And more than 80 percent of persons with disabilities live in developing countries including Somalia. Persons with disabilities in developing countries are often marginalized and face challenges because of their disability. This study's aim was to find out the challenges faced by people with disability in their daily lives. The qualitative study was conducted in Mogadishu city, capital of Somalia. The data were collected from April to June 2017. The participants comprised of 25 people with physical disabilities and 20 of their family members. The data were collected through face to face interviews with the people with physical disabilities and their families. To analyze the data, content analysis was used. The study found out that majority of people with physical disabilities have limited or no access to health services, education, and employment, and often experience social and economic stigma and discrimination, which consequently prevents them from obtaining a better quality of life. It can be concluded that disability awareness and formulation of disability policies can make it easy for the people with physical disabilities to be included in the larger community.

Keywords: Disability, health service, educational challenges, economic challenges, environmental challenges, social challenges, people with physical disabilities.

Tezin Adı: Fiziksel engelli bireylerin günlük yaşamlarında karşılaştıkları zorluklar: Mogadishu şehri örneği

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ÖZET

Dünya Sağlık Örgütün'ün (DSÖ) (2011) dünya engellilik raporuna göre, dünya çapında yaklaşık 650 milyon insan engelilik ile yaşıyor ve bu bireylerin % 80'ninden fazlası Somali de dahil olmak üzere gelişmekte olan ülkelerde bulunmaktadir. Gelişmekte olan ülkelerde engelli kişiler genellikle marjinal duruma düşerler ve engelliliklerinden dolayı zorluklarla karşılaşmaktadırlar. Bu çalışmanın amacı fiziksel engeli olan bireylerin günlük yaşamlarında karşılaştıkları zorlukları ortaya çıkarmaktadır. Bu çalışma nitel bir araştırmadır ve Somali'nin başkenti Mogadişu şehrinde yapılmıştır. Çalışmada veriler nisan-haziran 2017 tarihlerinde toplanmıştır. Katılımcılar 25 fiziksel engelli ve 20 bu bireylerin aile üyeleri olmak üzere toplam 45 kişiden oluşmaktadır. Veriler, fiziksel engelliler ve aileleri ile yüz yüze görüşülerek toplanmıştır. Elde edilen veriler üzerinde içerik analizi yapılmıştır. Çalışmada, fiziksel engelli bireylerin çoğunluğunun sağlık hizmetlerine, eğitime ve istihdama sınırlı ya da erişimlerinin hiç olmadığı ve çoğunlukla sosyal ve ekonomik olumsuz algı ve ayrımcılık deneyimlediği ve dolayısıyla daha iyi bir yaşam kalitesini elde etmelerini engellediği bulunmuştur. Engellilik bilincinin ve özürlülük politikalarının oluşturulmasının, bedensel engellilerin daha geniş bir toplumsal yaşama dahil edilmesini kolaylaştırabileceği sonucuna varılabilir.

Anahtar Kelimeler: Engellilik, sağlık hizmeti, eğitim zorluğu, ekonomik zorluk, çevresel zorluk, sosyal zorluk, fiziksel engelliler.

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DEDICATION

To my lovely wife **Fardowso Mohamed** and beloved son **Muhsin Aweis**: This work would never have been possible without their unwavering love, patience, support and sacrifice. Fardowso, I would like to thank you for teaching me to never give up and encouraging me to always strive for excellence. You are a pillar of strength. Thank you Muhsin - you may not understand it now but you played your part- for brightening my days and giving me the strength to finish this work.

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TABLE OF CONTENTS

Abstract i

Özet ii

Acknowledgement iii

Dedication iv

LIST OF TABLES viii

List of Acronym x

CHAPTER ONE: INTRODUCTION 1

1.1. Background of the problem 1

1.1.1. Disability definition 1

1.1.2. Models of disability 3

1.1.3. Classification of disability 3

1.2. Problem 4

1.3. Objectives 6

1.4. Significance of the study 7

1.6. Scope of the study 8

1.7. Inclusion and Exclusion Criteria 8

1.8. Definitions 8

CHAPTER TWO: LİTERATURE REVİEW AND THEORETİCAL FRAMEWORK 9

2.1.1. Theoretical Framework 10

2.1.1.1.The overview of the ecological systems theory 10

2.2. Health service challenges faced by people with physical disabilities 11

2.3. Educational challenges faced by people with physical disabilities 13

2.4. Economic challenges faced by people with physical disabilities 14

2.5. Environmental challenges faced by people with physical disabilities 15

2.6. Social challenges faced by people with physical disabilities 17

2.6.1. Stigma 17
2.6.2. Discrimination 19
2.6.3. Effect of disabilities on marriage decision 20
2.7. Emotional challenges faced by people with physical disabilities 20
2.8. Disability Policies and Rights 21
2.8.1. Convention on the Rights of Person with Disability 21
2.9.1. Reactions of the family 25
2.9.2. Impacts of person with disability to his/her family 26
2.9.3. Community perceptions about family who have person with physical disability 27
2.10. Hopes and Dreams of People with Physical Disability 27
2.11. Studies related to the topic 27
CHAPTER THREE: METHODOLOGY 30
3.1. Research Method 30
3.2. Data collection 30
3.4. Reliability of the study 31
3.5. Sampling 32
3.5.1. Purposive Sampling and Snowball Sampling 32
3.5.2. Participants 33
3.6. Ethical Considerations 39
3.6.1. Voluntary Participation 39
3.6.2 No Harm to Participants 40
3.6.3. Anonymity 40
3.7. Data Analysis and Reporting 40
3.8. Limitations of the study 41
CHAPTER FOUR: FINDINGS 42
4.1. Findings related to the types of disability, time occurred and their causes 42

4.1.1. Findings related to the types of disability 42

4.1.2. Findings related to the time the disability occurred 43

4.1.3. Findings related to the causes of disability 44

4.2. Findings related to the challenges faced by people with physical disabilities 45

4.2.1. Findings related to the health service challenges faced by people with physical disabilities 45

4.2.2. Findings related to the educational challenges that faced by people with physical disabilities 52

4.2.3. Findings related to the economical challenges that faced by people with physical disabilities 60

4.2.4. Findings related to the environmental challenges faced by people with physical disabilities 64

4.2.5. Findings related to the social challenges faced by people with physical disabilities 68

4.2.6. Findings related to the emotional challenges faced by people with physical disabilities 77

4.2.7. Findings related to the disability policy and rights 80

4.2.8. Findings related to the impact of disability on the family life 82

4.2.9. Findings related to the community perceptions about the families haves people with physical disability 83

4.2.10. Findings related to the hopes and dreams of people with physical disabilities 84

CHAPTER 5: DISCUSSIONS 86

CHAPTER 6. CONCLUSION AND RECOMMENDATIONS 92

6.1. Conclusion 92

6.2. Recommendations 92

References 94

APPENDIXES 104

Appendix I: Interview Guides 104

Appendix II: Consent form 116

LIST OF TABLES

Table 1. Participants by Gender……...33
Table 2. Participants by age group……...34
Table 3. Participants' educational level……35
Table 4. Participants' occupation……35
Table 5. Participants' father's level of education……36
Table 6. Fathers' occupation……36
Table 7. Participants' Mothers' level of education……..37
Table 8. Mothers' occupation……..37
Table 9. Participants' Marital status ……38
Table 10. The breadwinner of the houses ……38
Table 11. Distribution of participants by their relationship to disabled person ……..39
Table 12. Types of disability ……...42
Table 12a. Time the disability occurred ……..43
Table 12b. Causes of disability ……...44
Table 13. Health service needs ……...45
Table 13a. Availability of health services ……...47
Table 13b. Usage of available health services ……47
Table 14. Presence of challenges that prevent or discourage the seeking of health services…….....49
Table 14a. Common challenges that prevent or discourage the seeking of health services…….50
Table 15. Availability of educational institutions for persons with disabilities ……52
Table 16. Attended/attending any educational institution (Normal schools)……...54
Table 16a. Type of the school attended/attending ……...54
Table 16b. Reasons for not attending schools ……55
Table 17. Educational institutions meet the needs of the disability ……57
Table 18. Educational effects on the lives of the people with physical disabilities ……59
Table 19. availability of Job opportunities for people with physical disability …….60

Table 20. Effects of disability on chances of finding a job ……63
Table 21. Suitability of home design ……...64
Table 22. Problems for accessing to public sectors ……65
Table 22a. The problem for accessing public transportations……..65
Table 22b. The problem existing in the roads ……66
Table 22c. The problem for accessing public buildings……..67
Table 23. Thinking about family behaviors……68
Table 24. Thinking about Friends behaviors ……...69
Table 25. Thinking about Community behaviors ……70
Table 26. Ever participated in social activities ……71
Table 26a. Reasons why you have not participated ……...72
Table 27. Participating social activities ……..73
Table 27a. Reasons not participating……73
Table 28. Effects of disability on marriage decision ……...74
Table 29. Effects of disability after marriage ……..76
Table 30. Ever been teased or called names ……77
Table 31. Emotional feelings after learning of disability ……79
Table 32. Getting support ……...79
Table 33. Knowledge about the legal rights of people with disabilities ……81
Table 33a. Priorities and rights of people with physical with disability given by Somali constitution ……..82
Table 34. Impacts of disabilities on the family life ……82
Table 35. Community perceptions on the family ……84
Table 36. Hopes and plans of family members with disabilities ……84

LIST OF ACRONYM

WHO: World Health Organization

ICIDH: International Classification of Impairment, Disability and Handicap

UNCRPD: United Nations Convention of Rights on Persons with Disabilities

UK: United Kingdom

ADA: Americans with Disability Act

UNICEF: United Nations Children's Fund

UNESCO: United Nations Educational, Scientific and Cultural Organization

ILO: International Labour Organization

US: United States

BBC: British Broadcasting Corporation

CHAPTER ONE: INTRODUCTION

This chapter presents the background, statement of the problem, objectives, significance of the study, assumptions, scope of the study, inclusion and exclusion criteria, and definition of terms.

1.1. Background of the problem

1.1.1. Disability definition

In order to understand the people with physical disabilities we need to understand meanings and definitions of disability, disability models and types of disability. Disability is a condition that affects and impacts all human being (World Health Organization [WHO], 2011). The term disability according to Oxford Dictionary is a physical or mental phenomenon, in which one cannot utilize part of the body, like limited movement or difficult learning (Sultan, 2010). It is a condition that can be permanent or temporary, reversible or irreversible, progressive or regressive; someone can be impaired from birth or after birth (WHO, 2001). According to scholars, mental or physical disability often arises from the socio-environmental factors which is a combination of activities, factors and interrelationships; therefore even physical or mental disability does not exist without the availability of social factors (Bickenbach, Chatterji, Badley, & Üstün, 1999). According to Oliver (1996) from mid twentieth century there has been an effort to give an advanced conceptual schema to identify and describe the link between illness, impairment, disability and handicap. The International Classification of Impairments, Disabilities and Handicaps (ICIDH) of the World Health Organization (WHO) (1980) defines impairments, disability and handicap as the following:

Impairment is “any loss or abnormality of anatomical body structure or physiological functions, which can cause disturbance in the way organs functions; these may include defects, loss of limb or loss of mental function” (WHO, 1980, p. 14).

Disability is defined as “a restriction or inability to do daily life activities in the way which is considered as normal manner for a human being, that mostly result from impairment” (WHO, 1980, p. 14).

Handicap is the result of impairments and disabilities which limits or restricts person’s ability to fulfill roles that are regarded as normal, depending on age, social and cultural factors” (WHO, 1980, p. 14).

There is another term used for people with disability that is special educational needs. In 1981 the term was first recognized in the Education Act, and includes children with learning difficulties which might have resulted from physical or sensory impairment or from emotional or behavioral problem or it can be from developmental delay (United Kingdom Strategy Unit, 2005).

United Nations Convention on the Rights of Persons with Disabilities (United Nations, 2006) defines People with Disabilities as persons who have long term physical, mental, intellectual or sensory impairments, who face different challenges that may prevent or limit their full and successful contribution or participation in society on an equal opportunity with people without disability (Nokrek, Alam, & Ahmed, 2013). In the UK, people with disabilities are defined as those who have a physical or mental impairment which has a significant and long-term negative impact on their power to fulfill and perform a normal day life activities (Kitching, 2014). Similarly, Americans with Disabilities Act (ADA) (1990), describes disability as a physical or mental impairment that largely restrict an individual to do one or more of the major daily life activities (Sultana, 2010).

1.1.2. Models of disability

There are two models that have been established to define disability namely: medical and social model (Schalock, Lucksson, & Shogren, 2007). In the last twenty years the idea of disability has progressed from medical model of disability which is giving more regard to the individual's impairments to social model of working and contribution that focuses on person's inability to perform his or her daily life activities and limit participation in social activities (Ingstad & Grut, 2007). In the medical model disability is observable deviations from biomedical norms of body structure and function that directly comes from an trauma, infectious diseases, or another health problems, by which persons with certain physical and mental conditions are referred as abnormal and that status cause all restriction of daily activities (Bickenbach et al., 1999). The UN's Convention of Rights on Person with Disabilities (2006) reflects a shift from medical to social model of disability, Burchardt (2004) defined social model "as in contrast to the individual model in which limitations in functioning or participation in society are seen as the direct result of medical condition" (p.2). The difference between the two models is important because they influence the way a person with disability is defined (Kitching, 2014).

1.1.3. Classification of disability

Most of the studies have categorized disability into seven types, namely mental retardation, mental illness, blindness, low vision, hearing speech and locomotors while the census has categorized it into five groups, namely mental, visual, hearing, speech and physical disability (Mishra & Gupta 2006). Kitching (2014) has categorized disability into five major groups namely: physical, sensory, mental illness or disorder, cognitive and intellectual or developmental. Another study said that disability can be classified as mentally defected, blind, hearing impaired, inarticulate people and physical

(orthopedic) disabled people (Mülayim, 2009). This study focuses on people with physical disability only.

Physical disability is the condition that encompasses a wide variety of conditions that may impact a person's mobility, stamina, and/or functioning (Farbus, 2009). Physical disabilities "can involve difficulties with sitting and standing, use of hands and arms, sight, hearing, speech, breathing, bladder control, muscle control, sleeping, fits and seizures" (Pacer Center, 2004, p.1). The most common causes of physical disability can be congenital /heredity (Monk & Wee 2008; Nepal Government, 2006).

1.2. Problem

Disability is one of the leading issues in the world. According to the WHO (2011) the number of people with disabilities is significantly growing due to a number of multiple factors; The growth is significant if compared to records in the 1970s; 10 percent of the world population was said to constitute disabled people while; by 2011 that number has grown to 15 percent, that is more than 1 billion people. Although there are no signs that this growth will soon reverse, a greater concern is that of the total number of persons with disabilities, about 80 percent of them live in developing countries (Ingstad & Grut, 2007). In 2012, research conducted in Myanmar stated that 2.3 percent of Myanmar population have some forms of disability, and majority of people with disabilities are physical disabled people (Bawi, 2012). In Turkey, according to the report by Turkish Statistical Institute, there are approximately 4 million 882 thousand 841 persons living with different types of disabilities (TUIK, 2011).

In 2011, Swedish International Development Cooperation Agency released a report named 'Disability Rights in Somalia' which declared that in Somalia there is a growth of number of people with disabilities by 20 people daily, and further suggests that 12-15 percent of the population are people living with some types of disability (Somali Disability Empowerment Network, 2016). In Kenya alone, 3 million people have different forms of disability (James, 2014). The figure could be even higher in Uganda, where 19 percent of the population consists of people with disabilities

(Abimanyi-Ochom, & Mannan, 2014). A study conducted in Mexico revealed that disabled people preferred access to education than job training. This need is in line with needs of people without disabilities (Groce, 1999). Some studies stated that in the world, more than 180 million young people are living with different types of disabilities like physical, sensory, intellectual and mental disabilities (Groce, 2004), and most of these people are living in developing countries and they face some challenges which impact their daily lives. A survey done in UK estimated that there are more than 11 million adults living with disabilities and 770,000 children with disabilities (United Kingdom Strategy Unit, 2005). Majority of families with disabled children perceive disabled children as a burden to the family as they depend on the family for food, shelter and clothing, therefore to relieve themselves from this burden, most girls living with disability are forced to marry abusive partners (Human Rights Watch, 2015). The adverse effect met by people with disabilities imposes remarkable economic, education and social costs on the people with disabilities themselves and their families and friends and on the community at large (United Kingdom Strategy Unit, 2005). Other studies explained that it is difficult to estimate the number of young people with disabilities because young people living with disabilities are usually categorized together with children or adults and there is lack of agreed definition of disability (Groce, 2004).

A report on disability produced by World Health Organization and World Bank stated that over one billion people in the world are living with disabilities (WHO, 2011). People living with disability in Somalia face with great challenges; some of the challenges include; forced marriage, violence and rape (Amnesty International, 2015). The 2011 World Health Organization's disability report expressed that people with disabilities face with several challenges including poor health, lower education achievement, unemployment, and poverty as compared to people without disabilities, and also this report has outlined some evidence about what can help ~~to~~ overcome some of the obstacles faced by people living with disabilities (WHO, 2011). People living with disability in Somalia face with the stigma and discriminations from the community (Somalia Disability Empowerment Network, 2016). A report by James (2014) entitled

"Disability challenges in Rural environment: The Case of Coastal Kenya" focused on the challenges faced by people with disabilities. Challenges include limited access to medical services, education, employment, as well as discrimination arising from economic, social and cultural prejudices (James, 2014). Another report by the Ministry of National Education in Turkey (2011) titled "Engelli Bireylerde Toplumsal Uyum (Social Cohesion in Disabilities)" discussed problems such as poverty, transportation, education, physical environment and housing, rehabilitation, employment, disabled family and private life that are faced by people with disabilities. This research will add to above mentioned and similar research conducted for knowledge creation, and more importantly it will fill the gap that exists about challenges faced by people with disabilities in countries with conflicts like Somalia. Thus the study will look at the challenges faced by people with physical disabilities in their daily lives in Mogadishu city, the capital of Somalia. This study focuses on the following challenges: Health services, Education, Economic, Environmental, Social and Emotional challenges.

1.3. Objectives

This study aims to find out the challenges faced by people with physical disability in their daily lives. For this general aim, the following questions will be answered:

1. What are the health service challenges faced by people with physical disabilities?
2. What are the educational challenges faced by people with physical disabilities?
3. What are the economic challenges faced by people with physical disabilities?
4. What are the environmental challenges faced by people with physical disabilities?
5. What are the social challenges faced by people with physical disabilities?
6. What are the emotional challenges faced by people with disabilies?
7. How does the disability policy help the people with physical disabilities to overcome the challenges they face on daily basis?
8. What are the impacts of person with physical disabiliy on his family life?
9. How does the community treat the family who have person with physical diability?

10. What are the dreams and hopes of people with physical disabilities and their families?

1.4. Significance of the study

The purpose of the study is to find out the challenges faced by people with physical disabilities in Mogadishu, the capital of Somalia. There is no research done on the challenges faced by people with disabilities or related topics in Somalia except some articles written by UN agencies (Amnesty International, 2015). This gap in research gives the researcher more interest to highlight the main challenges faced by people with disability living in Mogadishu city. The finding and recommendation of the study will help policy makers and academicians. This research may be significant in a number of ways as explained below.

1.4.1. Policy makers

The study might add to the existing body of knowledge about disabilities in Somalia. The information resulting from the study will guide policy makers, social workers, psychologist and other professionals who work with people with disability and their family.

1.4.2. Academicians

This study will be significant to academicians as it will enrich the existing literature on challenges faced by people with physical disability and the outcome of the study may help researchers who are willing to research more on the challenges faced by people with physical disabilities.

1.5. Assumptions

The study assumed that the participants provided the best response.

1.6. Scope of the study

This study intends to focus on the challenges faced by people with physical disabilities among residents in Mogadishu city, Somalia. Participants of the study included people with physical disabilities. The data were collected from April to June 2017.

1.7. Inclusion and Exclusion Criteria

The information related to challenges faced by people with physical disability in their daily lives in this study is only limited to the data collected from people with physical disabilities and their family members.

1.8. Definitions

Challenges: are something that needs a lot of skills energy, great mental or physical effort to be done or achieve (Cambridge's online dictionary, n.d)

Disability is defined as "an umbrella term covering impairments, activity limitations, and participation restrictions" (WHO, 2011, p.4).

Physical disability is a condition or problem that substantially limits person's physical functions and to do physical activities in the life like walking, running, climbing stairs, carrying, or lifting (Mitchell & Syncher, 1997).

CHAPTER TWO: LITERATURE REVIEW AND THEORETICAL FRAMEWORK

While some people are born with disabilities, many others become disabled because of multiple factors including diseases, accidents, malnutrition, and absence of preventive health care, conflicts, and landmines. Also, any of these factors can increase the rate of people with disabilities. Conflicts, landmines, famines and wars can damage the health care system preventing people from accessing preventive health care, likewise war can also alter the distribution of food exposing people to malnutrition and diseases, that make people become disabled (Groce, 1999). In Mogadishu, decades of conflict have left many persons with disabilities, although it's difficult to quantify the number of people suffering from disabilities since there is no civilian casualty tracking system (Amnesty International, 2015). Furthermore, Amnesty International discussed that people with disabilities face numerous challenges in their daily lives due to failure of the state to provide special health services. People with disabilities like people without disabilities have needs and such needs are similar except people with disabilities have special needs in addition to general needs. In the world, many of the people who are living with disabilities do not get equal opportunity to reach health care centers, education and opportunity to get work, and, they cannot access the basic services that they need, because of these experiences they become excluded from daily live activities (WHO, 2011).

There are many challenges faced by people with physical disabilities including: attitudinal challenges (either among people with disabilities themselves or among employers, health professionals and service providers), political challenges which result from the way policy was designed and implemented without considering people with disabilities, physical challenges coming from the design of the built environment, transport and those related to the environment (WHO, 2011). These challenges arise mainly when people with disabilities are not involved and their voices are not heard (United Kingdom Strategy Unit, 2005). The effects of these challenges can marginalize

and exclude people with disabilities from mainstream society as well as employment, hence the elimination of these challenges can lead to empowering of people with disabilities and offering them equal opportunity to take responsibilities just like people without disabilities (WHO, 2011).

2.1. Theoretical Framework

Theoretical framework is made up of a set of interrelated concepts such as a theory, perspectives and models that guide a research study and also help in making assumptions about the likely outcome of the study (Sevilla, Ochave, Punsalan, Regala, & Uriarte, 1992). The theoretical framework would cover the major founders of the theory, its overview and the application of the theory to the research topic. This study aims to employ ecological systems theory that the psychologist Uria Brenfenbruner (1917-2005) has developed in 1979 (Darling, 2007).

2.1.1. Ecological Systems Theory

2.1.1.1.The overview of the ecological systems theory

The ecological system theory describes how human development is impacted by different kinds of environmental systems. Brenfenbruner has structured the theory into five interrelated environmental systems, namely microsystem, mesosystem, exosystem, macrosystem and chronosystem (Ettekal & Mahoney, 2017)

The microsystem is the structure that is close to the child and which interacts with the child directly. These include family, neighbors, friends, teachers, classmates and childcare environment (Ryan, 2001). Ryan also discussed that in this level there is bi-directional influences which means that the relationships have impact in both ways from child and towards child. Mesosystem involves process that occurs between microsystem for example relationship between family and school. The exosystem involves other places and individuals in which the child has not been directly embedded, but still has an effect on child's life for example parents' workplace (Ettekal & Mahoney, 2017). Macrosystem is made of beliefs, values and norms based on culture,

religious and socioeconomic phenomena in a particular society. The last system is chronosystem which explains traditional role in the person's life such as aging and death (Ryan, 2001).

2.2. Health service challenges faced by people with physical disabilities

Better health status is central to human happiness and well-being and it is very important to have quality of life, contribution to economic progress, self sufficiency and full participation in social activities (Drum, Krahn, Culley & Hammond, 2005). According to the Groce (2004) "The availability of rehabilitative care, prosthetic devices and the age appropriate health care need to be singled out both because of significant lack of such services and because of all foten social and economic discussions about disabled people are side tracked by their presumed medical or rehabilitative needs" (p.11).

The United Nation's Convention on the Rights of Person with Disabilities' article 26 declares the rights of persons with disabilities to participate social activities and accessing rehabilitation services. It also indicates that utilization to available health services is a general human right enshrined in the CRPD (United Nations, 2006).

Most American citizens with disabilities have poor health and are more likely to meet early death and chronic diseases, as well as, they experience difficultly finding and paying appropriate health care (Drum et al., 2005). The Equal Right Center (2011) states that they receive each year different numbers of complaint coming from people with disabilities for different challenges faced in the healt centers including environmental barriers like structural barriers in health care facilities, economic barriers such as inaccessible medical equipment, and social barriers including policies and procedures that create barriers for patients with disabilities. According to the World Health Organization's World Report on Disability and Rehabilitation (2011) "Households with a disabled member are more likely to experience material hardship – including food insecurity, poor housing, lack of access to safe water and sanitation, and inadequate access to health care" (p.10).

The UN's Convention of Rights on People with Disabilities' article 25 states that persons with disabilities have the rights to get highest level of health services without discrimination on the basis of disability (United Nations, 2006). According to the World Report on Disability (WHO, 2011) 15% of world population have different types of disabilities, physical disability being most prevalent and number of persons with disabilities become high due to population growth, chronic disease and other factors that create demands for health services which are very difficult to meet especially in low income countries (Cited in Mlenzana, Frantz, Rhoda, & Eide, 2013). Smith (2000) explained that the prevalence of disabled people is increasing because of the progress of technology arising from people surviving more serious accidents and diseases and the ageing population. Analysis of access to health care services in America found out that there are a lot of barriers including environmental and structural barriers, process barriers (this is related to the way providers delivers services) and organizational barriers like doctor's appointment, waiting list and so on (Scheer, Kroll, Neri, & Beatty, 2003). Some disabilities require extraordinary medical intervention and support, another may require adoptive or assistive equipment like wheelchair, prosthesis arm or leg, hearing aid, Braille, sticks and so on while some people with disabilities need intensive behavior interaction (Technical Assistance and Training System**,** 2009).

According to the Australian government, 56% of the people with disabilities found that sometimes service can be a barrier rather than facilitators to their participation in society, it is worth nothing that a democratic and wealth country like Australia still battles with such a challenge (Deane, 2009). People with disabilities are more susceptible to meet deficiencies in services such as medical or surgical care, rehabilitation and assistive devices (WHO, 2011). Advancing awareness and preventing negative attitude can generate more accessible conditions for the people with disabilities and moreover, discrimination has been stated to cause disabled people not to seek medical support because they are afraid to be treated negatively by the community members as showed by a research conducted in Finland by Aromaa, Tolvanen, Tuulari, and Wahlbeck (2011).

2.3. Educational challenges faced by people with physical disabilities

People with disabilities have a legal right to educational opportunities without isolation just like people without disabilities stated United Nations International Children's Fund (UNICEF, 2013). United Nations Educational Scientific and Cultural Organization (UNESCO) (2005) stated "*Everyone has the right to education*" according to Article 26 of Universal Declaration of Human Rights (1948) which guarantees the right to education be protected without any discrimination and must be provided on the basis of equality. Joubish and Khurram, (2011) stated that the majority of people with disabilities do not attend educational institutions; many of individual living with disabilities have never got benefits from school or reached until primary. This indicated and agrees with the UNESCO's estimation on the literacy of people with disabilities, and found out that the literacy rate for people with disabilities in the world is only 3 percent while the rate for woman with disabilities in comperaing with men with disabilities hovers closer to 1 percent (Joubish & Khurram, 2011).

In UK people with disabilities are less likely to have educational certificate when compared with people without disabilities due to their disability (United Kingdom Strategy Unit, 2005). Similarly, in Mogadishu, children with disability do not go to school because of their disability and lack of special education schools (Somali Disability Empowerment Network, 2016). There are number of barriers for the inclusion of person with disability in ordinary schools such as negative attitude of society to education of person with disabilities, physical barriers creating inaccessibility to student with physical disabilities, rigid, inflexible and centrally imposed curriculum, abilities and attitudes of teachers, socioeconomic factors, lack of funding for infrastructures and teaching material and educational policies for the country (UNESCO, 2011). Similarly, UNICEF reported that there are many barriers that impede access of young persons with disabilities to education which include discriminations, stigma and prejudice coming from some teachers, parents and children without disabilities, physical inaccessibility (UNICEF, 2013). Furthermore, some parents give more priority for person without

disabilities for educational opportunities than for young people with disabilities because they think that education will be less important for the young persons with disabilities (WHO, 2011).

2.4. Economic challenges faced by people with physical disabilities

Persons with disabilities typically face extraordinary challenges in finding job opportunities or job training because of their disabilities (Potts, 2005). WHO Report on Disability in 2011 noted that although people with disabilities do perform as any other individuals without disabilities at work when given the opportunity; there is systematic discrimination for them in employment. This is contrary to article 27 of the United Nation's Convention on the Rights of Persons with Disabilities to work on equal basis without discrimination. Thus it is evident that the convention is against all form of discrimination and consequently argues for equal and fair access to job opportunities and the preparation of the means to accessing employment as they desire (United Nations, 2006). International Labour Organization (ILO) (2013) states that out of the over one billion people with disabilities, 785 million of them are in their working age. Generally, people with disabilities are less likely to find employment than people without disabilities in all countries around the world (Wolbringe, Mackay, Rybchinski, & Noga, 2013).

A USA Department of Labor news release in April 2013 stated that 80.5% of half of people with disabilities who were interviewed in 2012 reported that they were unemployed because of their disability, 14.1% identified lack of education, 11.7% lack of transportation as the cause of unemployment (Bureau of Labour Statistics U.S Department of Labour (2013). In Australia, many people with disabilities face discrimination in employment as employers think that modification of work place for disabled employees would increase cost. Moreover, negative beliefs about the efficiency of people with disabilities serve as barrier to employment (Out, 2009). People with disabilities faced many obstacles including access to employment opportunities in Russia, as stated by Human Rights Watch (2013). The report added that the government

of Russia found that only 20% of people with disabilities are employed and the mayor of Moscow reported that only 86,000 from 150,000 people with disabilities in the city are employed (Mazzarino, 2013).

In UK, currently most of people with disabilities are unemployed and they are more likely to live in poverty because the income of person with disabilities is less than half of that received by people with disabilites, that is why people with disabilities are more likely to be poor, and only two in five young persons with disabilities are currently employed, if compared to non-disabled young people where four out of five are employed (United Kingdom Strategy Unit, 2005). The economic limitations for the people with disabilities lead them to loss their houses or not getting the housing needs and cause inappropriate, inaccessible public transportation (WHO, 2011).

2.5. Environmental challenges faced by people with physical disabilities

The built environment is an important factor that can either promote or retard accessibility of persons with disabilities to education, health, leisure and employment facilities. Thus, ensuring that people with disabilities have access to the built environment facilitates their access to educational and employment opportunities stated Christian Blind Mission (CBM, 2008). The United Nations Convention on Rights of Persons with Disabilities specifies the need for access to the built environment in all sectors so that disabled people can access all places as they desire. There is a need for access to all built environment because access in one sector and inaccessibility to another will put a limit to opportunities of people with disabilities (United Nations, 2006). In Australia over 27% of disabled respondents submitted that lack of access to buildings and facilities is an obstacle to full participation while 29% said lack of access to transportation is an obstacle to their inclusion in community (Out, 2009).

Gray, Gould and Bickenbach (2003) stated in their article that often buildings hinder the opportunity of people with disabilities. This is similar to Barnes and Mercer's view (as cited in Wilson, 2003) that society can be responsible for many of the problems faced by people with disabilities especially if the built environment is not friendly to the

special needs of people with disabilities. Such environments have negative consequences especially to the children with disabilities in the context of housing and building designing (as cited in Clarke, 2006). Accessibility is often taken to mean wheelchair user's ability to access building through ramps and similar devices like elevators while this is not limited only to the impaired mobility but also including blind people, deaf people or people with coordination deficits and other kinds of disabling conditions like chronic diseases (Soles, Randall, Waygood, Williams, & Holden, 2003).

The designing and quality of housing has effects on an individual's wellbeing and life experience, thus for people with disabilities their accommodation conditions can be specially difficult as they do not have suggestions to select from because impairment is not considered to be part of domestic habitations (Hemingway, 2011). A study conducted in some regions in US found that people with disabilities are often denied their suggestion for acceptable and accessable accommodations needed to make them easily accessable to the available houses (Turner, Herbig, Kaye, Fenderson, & Levy, 2005). Person's environment has large effect on the experience and extent of disabilities and inaccessible environment can cause barriers for the people with disabilities to be included and limits their social participation. For instance people with hearing impairments, without sign language interpreter, a physical disabled person living in a house without suitable bathroom and person with visual impairment who is using a mobile without screen reading software are examples of negative impact of the environment (WHO, 2011).

Scheer et al. (2003) defined access as the use of some services that are related to the important need for care; lack of access happens when there is a demand to use the services, but is not utilized. Most families who have a disabled person are complaining that they have experienced problems with housing and transportation (United Kingdom Strategy Unit, 2005). Transportation is one of the causes of social exclusion for the people with disabilities because of the difficulty in accessing transport. Awareness rising had a little impact on lives of people with disabilities, because it is difficult for them to

be treated equally and also there is still environmental barriers which make it difficult for their social integration (Hendriks, 1995).

2.6. Social challenges faced by people with physical disabilities

Globally, it is recognized that the main barriers faced by young persons with disabilities is stigma, discrimination and isolation while in general, people with disabilities may have met only stigma and prejudice and females are more prone to these problems (Groce, 2004). A survey conducted in UK found out that many people with disabilities have been challenged with issues of isolation, discrimination etc. Also, the family of the disabled people can meet negative attitudes, prejudice, poverty, and they can be excluded from social activities (United Kingdom Strategy Unit, 2005).

2.6.1. Stigma

Stigma is an "overarching term including difficulties associated with knowledge (ignorance or misinformation), attitudes (prejudice—namely, affective distancing), and behaviour (discrimination, eg; exclusion from normal forms of social participation) (Lasalvia et al., 2013, p.1). Socio-cultural beliefs may contribute to the stigmatization of persons with different types of disabilities and this may act as a challenge to their access to study, work and their recovery (Lam et al., 2010). Lam et al. (2010) also discussed that cultural attitudes impact disabled person's decision for seeking help and consumption of available services.

According to the Jorm and Reavley (2013) "Stigmatising attitudes, either their own or those of other people, are often nominated as an important issue of concern by individuals with mental disorders and can have several adverse effects, including delayed help seeking, diffi culties with personal relationships, and disruption to educational and vocational goals" (p.1).

Attitudes vary from one person to another and from one group to another, and change over time. Attitudes are a constellation of held beliefs, values and ideas that

determine their mode of behavior or feelings towards people and situations (Aiden & McCharthy, 2014). Similarly, in 2011 WHO reported that negative attitudes, beliefs and prejudices experienced by persons with disabilities might be part of barriers to attend education institution, get job, use available health services, and social participation (WHO, 2011).

In line with the above, a survey conducted in Ireland in 2011 to measure the level of prejudice found that different subgroups with or without disabilities have positive attitudes towards disabled people, however older people were found to have more negative attitudes towards people with disabilities (Hannon, 2006). According to a research conducted by British Broadcasting Corporation (BBC) in 2003, there is evidence that many people favor the appearance of people with disabilities on television and up to 61 percent of respondent asked that disabled people be featured more on shows (Sancho, 2003). In many communities in the world where girls are valued less than boys, access to education, health services or employment and training are mainly available to males with disabilities (Groce, 2004), and those communities are less willing to enroll the girl child with disabilities than disabled boys.

A 2014 report stated that two-third of British public servants are not comfortable in talking to people with disabilities (Aiden & McCarthy, 2014), in fact the other report added that people with disabilities are usually seen as people who must be dependent on others for help; this shows the degree of prejudice against people with disabilities as dependent and unproductive people in the society (United Kingdom Strategy Unit, 2005). People become more prejudice to people with disabilities especially if the latter hold public offices or are the boss at work (Staniland, 2009). Similarly, Dinos, Stevens, Serfaty, Weich, and King, (2004) conducted a qualitative study in England and found out that people with disabilities and families become unwilling to search for support or participate in social activities because of stigma. And also they discussed that stigma can lead persons with disabilities to poor adherence, stress and uncomfortable conditions.

2.6.2. Discrimination

Hendriks (1995) defined the term discrimination as treating other people usually the minority less than others, and it is also linked to misinformation, rejection, inferiority and dominance towards those one considered as different. Most people with disabilities have experienced discrimination and isolation from non-disabled people, and that may limit access to their choices and rights including studying, working, and creating family (Horner et al., 2002). Disability based discrimination comes from either under or overestimating the importance of human variations and involves arbitrary denial or restriction of equal human rights and can be a violation of the principle of equality (Hendriks, 1995). A study done in UK (2005) found out that stigma and discrimination are the main reasons for the exclusion of people with disabilities (United Kingdom Strategy Unit, 2005), and most non-disabled people confirmed that people with disabilities face prejudice and do not receive equal opportunity whether it is education or employment as compared to non- disabled people. Furthermore, a study conducted in China found out that discrimination is the main challenge faced by people with disabilities from the community they are living with as they are discriminated against, chances to access to work, study and heath are limited (Human rights watch, 2013).

In addition to the unavailability and/or inaccessibility of social and economic institutions or opportunities by persons with disabilities, they are further disadvantaged and challenged by discriminatory beliefs and attitudes in society (Kett, 2012). Such prejudices are not just limited to the UK or the developed world, but they are part of stories of all disabled people especially in developing countries including Somalia. In Somalia, disabled people are usually seen as liabilities who cannot be independent or productive, thus educational or job opportunities are limited or not even available for them (Amnesty international, 2015). A 2009 report issued by the Australian government has shown that people with disabilities faced daily challenges in their lives; one of these challenges is social exclusion which is so prevalent in society that 56% of respondents reported experiencing discrimination. Arthur and Zarb (1995) noted that discrimination is a big obstacle to the wellbeing of people with disabilities, such discrimination is often

compounded by race , sex, age, and so on, and appears that all people with disabilities face discrimination but women could be discriminated due to gender stereotypes. In the United States, people with disabilities met some violence and abuses from society (Crowell, Foote & Petersilia, 2001).

2.6.3. Effect of disabilities on marriage decision

Sometimes being a disabled person may affect the decision to get marry because of the negative attitudes of societies toward the disabled people (Groce, 1999). Person with disabilities have a physical maturation and they desire to get marry and to create their own families just like non-disabled persons (Groce, 2004). Human rights and laws give all people with disabilities the right to marry and have their own family (Groce, Gazizova, & Hassiotis, 2014). Some people have negative attitudes towards ability of the people with disability to marry and they have some views including that persons with disability have no interest in sex, or are interested but unable, or sexually interested but to be feared (Hallum, 1995).

2.7. Emotional challenges faced by people with physical disabilities

Having a disability does not mean that all people with disabilities have psychological challenges, but these challenges come when the person with disability face physical challenges such as mobility or accessibility barriers, or lack of educational or employment opportunity, or negative attitudes from the society that leads the people with disabilities to stress, depression or loneliness (Thompson, 2002). The biggest problem that person with disabilities face is misperception from the society that ignore the ability of disabled people, and teasing or calling names to the persons with disability make them ~~to~~ feel excluded from the community (Gobalakrishnan, 2013).

Normally, most disabled people's life is dependent on other people including family members, friends and others. When persons with disabilities want to do some activities in the home like bathing, dressing, or walking outside of the house like going

to educational, job or health services, they need to ask help from others which make them to feel shy or dependent on others (Hallum, 1995).

2.8. Disability Policies and Rights

The World Programme of Action Concerning Disabled Persons was the first to recognize the right of people with disabilities; it clearly outlined the principle of equal rights (Hendriks, 1995), and the principle of equal rights is where by the needs of everyone is met and it include careful planning as well as provision of the needed resources in order for all individuals to have access to available opportunities.

In the 1960s and 70s, there emerged disability right movements, at a time when many of the education of people with disabilities happened in different separated places helped by churches, mosques and certain charitable organizations (Metts, 2000). After the 1970s, the reaction to disability started to be changed by self-organization of people with disabilities and by the developing tendency to look at disability as human right issues (WHO, 2011).

2.8.1. Convention on the Rights of Person with Disability

The national and international initiatives like United Nations Standard Rules on the Equalization of Opportunities of Person with Disabilities have integrated the human rights of People with disabilities in 2006 with the acceptance of the United Nation's CRPD (Metts, 2000). Adopted on 13th December 2006, the United Nations Convention on the Rights of Person with Disability (CRPD) has brought much hope for the people with disabilities and those concerned with rights as it is the first universal legal instrument to address their fundamental rights (United Nations, 2006). The convention is reputed for being first of its kind in the signatures it attracted in its launching. As of 2007, it had more than 120 signatures excluding its optional protocol which has 60 signatures (Kayess & French, 2008).

The convention has been founded on eight main principles namely; respect for human dignity and independency, anti discrimination, participation and inclusion in society, acceptance of persons with disabilities, equality, accessibility, gender equality, respect for identities and capabilities of children with disabilities (United Nations, 2006). The convention recognizes that persons with disabilities have a right to move everywhere they need to, get the highest attainable level of health, education and works; have rights to marry and found family; and have rights to obtain an adequate standard of living and participation in social activities (Megret, 2008).

The formulation and implementation of disability policies have taken a center stage in many countries around the world. For instance Botswana, a model for good governance in Africa adopted the National Policy on Care for People with Disabilities in 1996. The policy has outlined the roles each ministry has to play in the lives of people with disabilities. The policy advocates for equality, employment, education, and good health of people with disabilities. It led to establishment of special education and inclusive education under the ministry of education. It also made sure that the needs of people with disabilities are provided for by the welfare department. Disabled people are provided with food and disability allowance every month (National Policy on Care for People with Disabilities 1996, 2017). Both Kenya and Zambia amongst others in Africa have adopted similar policies for people with disabilities (Persons with Disabilities Act 2003, 2012). Similarly, in United States of America, the American with Disabilities Act of 1990 has clearly stated that people with disabilities are normally faced with certain challenges in their daily lives, which include discrimination and unemployment just to mention a few. For this reason, the Act calls for fair treatment of the people with disabilities as they also have rights. It has also outlined that people with disabilities should be employed, free to worship the religion of their choice, free to attend school and they should be housed just like people without disabilities (Americans with Disabilities Act of 1990, 2016).

Furthermore, the UK serves as an example for the implementation of disability policies in Europe. The Disability Discrimination Act (1995) of 1995 was the first

nondiscrimination legislation about disabled people. It manifests in the law that disabled people have legal rights to contribute social activites (United Kingdom Strategy Unit, 2005). Meanwhile the constitution of India also advocates for equality, dignity and freedom of all individuals. It also promotes social inclusion for the people with disabilities. The National Policy for Persons with Disability in India is a valuable human resource for each and every country; hence it seeks to provide an environment that will help them to develop socially, psychologically and physically (National Policy for Persons with Disabilities1993, 2017).

However, Somalia has been a latecomer in disability policies as it was only on the 8th of October 2015 that the cabinet of Somalia approved the disability policy that will enable people with disabilities to secure their rights (Somali Disability Empowerment Network, 2016). This came after the government of Somalia was troubled by the non-transparent activities of nongovernmental disability organizations that were allegedly collecting funds for people with disabilities yet they never delivered the aid to them for a longtime. It was argued that the policy will help people with disabilities to have access to certain services like employment, education and health just like people without disabilities (Somali disability Empowerment Network, 2016).

Although this has been regarded as a giant step, the constitution of Somalia has mentioned the word disability three times only (Somali Constitution, 2012). The first one was mentioned two times in chapter two: *fundamental rights and the duties of the citizen*, on the title "General Principles of Human Rights, article 11: Equality", where it is stated that "people with *disabilities* will not be discriminated against and they shall have same rights and duties like people without *disabilities*, and also they shall have equal access to the available services". The second is mentioned in the same chapter but under the title "Rights, Basic Personal Liberties and Limitations, article 27: Economic and Social Rights", where it is stated that "people with *disabilities* shall be provided with appropriate economic support to reduce some of the challenges they face" (Somali Constitution, 2012).

2.9. Person with physical disabilities and his/her family

Family can be defined as parents or primary care givers for children with disabilities as well as for the siblings, grandparents or other family members (Bailey et al., 2006). Being an affective parent is not an easy task and the families are under a great responsibility to care their children (Baykoc, 2010). The birth of child is a sign of faith and hope, promoting expectations of continuity and preparation (Kandel & Merrick, 2007). During the pregnancy period the parents prepare themselves psychologically for the change of family structure and the responsibility that comes with the change. Also, they have plans and wishes for their unborn babies, imagining good future scenario and the child's advancement such as going to nursery schools, elementary, college and so on; however when a handicapped child is born, all expectations and hopes are dashed (Kandel & Merrick, 2007).

Raising a child with disability can improve certain aspects of parenting and it can also challenge parenting. This can also be influenced by the child's age at diagnosis; type of disabilities and the culture of the family are most effective factors that may influence family's functioning. Disability can be diagnosed at birth or may be one or two years old while some people become disable when they are old (Technical Assistance and Training System, 2009). According to the 2000 census done in America, there is more than 20.9 million American families who had at least one member with disabilities (Wang, 2005). These families are faced with certain difficulties, for example balancing normal parental tasks in different ways like treatment program, extra physical duties needing adjustment emotionally to their child not living up to their expectation (Paster, Brandwein & Walsh, 2009).

Families who have person with disability are faced with certain problems while caring for their relatives with disabilities, these problems include stress, inability to give care for the other children without disablities and to manage household tasks, insufficient time and lack of social participation due stigmatization form sociaty (Smith, 2000). Mostly enlarged families have at least one disabled member, and many people

without disability carry on responsibility for helping and giving care to their relatives and friends with disabilities (Mishra & Gupta, 2006).

2.9.1. Reactions of the family

Families of children with disabilities may experience sequences of emotional feelings, the first years after learning about the child's disability and as they grow and coping with their child (Technical Assistance and Training System, 2009). Some family members might have negative feelings like anger, anxiety, guilt, stress, despair or even depression. Although there are natural emotions faced by all people in daily lives, for the families which have members with disabilities it is more for them and the persistence of these feelings can decrease positive coping, adaptation and enjoyment of their life (Bailey et al., 2006).

Some studies found out that there is high level stress among families who have a child with disability as compared with families who do not have a child with disability (Paster et al., 2009). Majority of the families with children living with disabilities reported that taking care of a child with disability is burdensome, stressful and frustrating (Schiling, Gilchrist & Schinke, 1984). Some researchers stated that parents who have a child with disability may suffer from psychotic breaks, neurosis or even dissolution of marriage because of stress and depression caused by the presence of disabled child in the home (Hallum, 1995).

2.9.2. Impacts of person with disability to his/her family

Families who have a member with disability may experience some emotional feelings including shock, sadness, and anger; and this cause some psychological problems which may lead to loss of friends (Paster et al., 2009). Although having a person with disability can be challenging if the family members are equipped with suitable coping techniques, these problem can be easily resolve because they will know how to behave when certain condition arise (Paster et al., 2009).

In some families, having a child with disability has given a new perception about what is important to them in their future lives. Sometimes it can progress the family relation when family members come together to talk about common causes or important issues concerning the health of child with disabilities (Bailey et al., 2006). Prolonged care for a child with disability can have impact on the parent's life style, especially when the parents become retired (Hallum, 1995).

Controversially, the disabled child may have positive impact on the family as he/she can affect parent's confidence and competence. A challenging behavior, special health care needs or difficulties in eating or sleep disorder faced by some disabled may force the parents to change their home environments or parent's behavior to make it suitable for their child's special needs (Bailey et al., 2006). Some researchers argued that finding a child with disability may increase parent's cohesion, conflict resolution, independence and active reaction of participation (Hallum, 1995). Positive and good relations with other families, neighbors, the communities and early childhood program can improve family's positive adaptation (Bailey et al., 2006).

2.9.3. Community perceptions about family who have person with physical disability

Community attitudes and perceptions vary according to the type of disability, a study conducted in Australia found out that the community members have positive perception towards families who have persons with disabilities, in the sense they were respectful, non-discriminatory and sympathetic, and the study also stated that minority of the community have prejudice views from family who have person with physical disability (Thompson, Fisher, Purcal, Deeming & Sawrikar, 2011). Similarly, a study conducted in China (2016), found out that negative perception of the community regarding people with physical disability and their families can lead to lack of opportunity and work, low self-esteem and isolation, as well as frequent stigmazation and discrimination to the family can create substantial social burden (Zheng et al., 2016). The study also indicated that positive perception of the community towards family who have person with disability can help the family to accept and cope with their person with physical disability as well as, reduce family's emotional problems

2.10. Hopes and Dreams of People with Physical Disability

People with physical disabilities have hopes and dreams like people without disabilities, as indicated in a study by Hallum (1995), the study found out that most people with physical disabilities hope to get education, job opportunities, be independent from other's help and get their own family. World Vision International (2015) interviewed different children with disabilities in the world by asking their dreams and hobbies in the future, and they answered dreams like being doctor, teacher and helping others.

2.11. Studies related to the topic

Joubish and Khurram (2011) conducted a research entitled "Adolescent and Youth with Disability: Issues and Challenges" in Pakistan, and discussed different issues

and challenges that can face adolescent and youth living with disabilities, like educational barriers, misconception and prejudice of society against disabled youth and their capabilities, as well as problems of marriage. They also revealed challenges faced by disabled young in regard to employment, health services and rehabilitation. Finally they concluded that inclusion of young people living with disabilities in all educational, social and health programs benefit all members of community.

Powers and Oschwald (2004) did a study on "Violence and Abuse against People with Disabilities: Experiences, Barriers and Prevention Strategies" and they found out that abuse, barriers and violence are more serious problems for persons with disabilities. And also, women with disabilities are faced with more abuses and challenges than men with disabilities. They also discussed forms of violence such as physical abuse, sexual abuse, verbal or emotional abuse, neglect or withholding support, financial abuse, manipulation of medication and destroying or disabling equipment. Finally, the researchers suggested some strategies to prevent and stop violence and abuse faced by people with disabilities by highlighting certain key points: violence management, empowering of persons with disabilities and good design system that make it easy for the people with disabilities to access resources that will improve their lives.

In 2009, study entitled "Shut Out: the Experience of People with Disabilities and their Families" was conducted by Deane in Australia, whose aim was to identify the main barriers faced by people with disabilities, their families, friends and caregivers, to their full participations in the economic, educational and social life of the community they life in. The research found out that there are a lot of challenges such as discrimination, lack of social service and support, less job opportunity, inappropriate environmental designing and poor educational system which can cause exclusion and limit participation of people with disabilities and their families. Finally the researcher suggested some recommendation to reduce these challenges like disability awareness.

Ministry of Education of Turkey (2011) released a report entitled "Social Cohesion in People with disabilities" which discussed the quality of life of person with disability and problems faced by people with disabilities and their families such as

poverty, transportation, employment, education, physical environment and housing and disabled person and their private life.

Bawi (2012) conducted a study entitled "Understanding the Challenges of Disability in Myanmar". The main purposes of this study was to investigate the challenges faced by people with disabilities and the services available for people with disabilities and their families, and also to identify social and rehabilitation services for people with disabilities. The study found that PWDs experienced many challenges including lack of inclusive education, inadequate health services, poor environmental buildings and lack of social participation due to discrimination.

James (2014) did a research named "Disability Challenges in a Rural Environment: The Case of Coastal Kenya". The research focused more on disability issues in Kenya, especially in rural areas, and on how poverty generate barriers like physical environment, communication, economic, education and health problems for the people with disabilities. The study found that people with disabilities have met challenges when they are benefiting from basic services such as health, education, and employment.

Groce (2004) conducted a study on "Adolescent and Youth with Risabilities: Issues and Challenges" and found that majority of young people with disabilities are excluded from the most educational, economical and socio-cultural opportunities, and also they are among the poorest and most marginalized of all the world's young people.

CHAPTER THREE: METHODOLOGY

This chapter covers material and methodology of the study which include the research design, sampling, data collection, pilot of the study, reliability of the study, data analysis and interpretation, ethical consideration, and limitations of the study.

3.1. Research Method

This study used qualitative research method to investigate the social, educational and economic challenges people with disabilities experience living in Mogadishu. Hiatt (1986) defined the qualitative research as "a method of data collection that focus on discovering and understanding the experiences, perspectives, and thoughts of participants—that explores meaning, purpose, or reality" (p.148). This method has been chosen because it gives the richness of data not possible with quantitative data since it helps the researcher to find more information on the topic being researched (Babbie, 2011).

As for research design, this study adopted Case study design. "A case study is defined as in-depth, multifaceted investigation using qualitative research methods of a single social phenomenon" (Feagin, Orum, & Sjoberg, 1991, p.2). This research design is appropriate because the study addressed the challenges faced by disabled people and data was collected from different groups of people with disabilities in Mogadishu.

3.2. Data collection

The data collection technique that was used in this study was face to face interview. In-depth interviewing is a data collection method used to find out rich, detailed information through open-ended questions asked flexibly (Rubin, Chatterjee & Canda, 2010). Majority of the interviews were conducted at the participant's homes, while some interviews took place in different places like mosques and hospitals. The researcher was guided by the interview guide.

There were two different interview guides for people with physical disabilities and their family members. The interview guides were written in English and Somali which were the two main languages used in Somalia. The interviews were conducted at Mogadishu Somalia. The researcher asked the respondents questions and voice recorder was used to record the answers at the same time.

3.3. Data Collection Tools

Interview questions were taken and/or developed from previous studies (James, 2014; Ingstad & Grut, 2007; Şanlıurfa Kalkınma Derneği, 2014). After preparing the interview questions, they were reviewed by supervisor and other three lecturers who specialized in the field of study. Later on the interview questions were modified as some questions were added and some were rearranged. After revisions, researcher did a pilot study in Trakya University Hospital, where the researcher met three people who had different physical disabilities, and their families. After a brief introduction they granted the researcher an interview to test if the interview questions are coherent and understandable or not. At the end of each interview, all interviewees were also asked whether the questions were offending, whether they liked the questions, which questions they liked most or least, whether there were someone which to make addition, and whether there were some to delete. The pilot study revealed some problems in the some of drafted interview guides. After the pilot study was done, the interview questions were revised again and the final interview format that was used. (See Appendix I, for the interview guides).

3.4. Reliability of the study

There are three types of reliability as stability, accuracy and reproducibility also called inter-coder agreement (Campbell, Quincy, Osserman & Pedersen, 2013). This study used Inter-coder reliability. Inter-coder reliability is where by two or more expert coders operating in isolation from each other chooses the same code for the same unit of

text (Krippendorff, 2004). Inter-coder agreement need that two or more coders are able to reconcile through discussion and negotiation whatever coding differences they may have for the same unit of text and later on agree on which code to use (Garrison, Cleveland-Innes, Marguerite, & James, 2006). The findings of the study were given to another person to code and later on the inter-coder agreement was used to reach an agreement on how the two coder's differences can be reconciled. Miles and Huberman (1994) suggested that the consistency of the coding should be in agreement at least 80% of the time for good qualitative research reliability (Cresswell, 2009). In this study, 28 open ended questions were coded by the researcher and later it was checked by another expert researcher using Miles & Hubermen inter coder reliability. The formula for percent agreement between two coders is simply the number of times they agreed divided by the total number of units of analysis. 20 of the questions the researcher and the expert obtained 100% in same code, and in 8 of the questions they differed and found that 4 questions had 55% , 1 question 45% , 3 questions 85% difference. The researcher recoded the data and the expert researcher rechecked again and they reached at least 80% of the inter coder reliability (ranging between 80% and 100%) in agreement which is the acceptable percentage according to Miles and Huberman .

3.5. Sampling

3.5.1. Purposive Sampling and Snowball Sampling

Sampling involves the choosing of a number of study units from a specific study population (Babbie, 2007). This research used non-probability sampling which is purposive and snowball sampling. According to Battaglia (2008) defined purposive sampling "as judgmental sampling or expert sampling. The main objective of purposive sampling is to produce a sample that can be considered ''representative'' of the population" (p. 524). To choose the participants of the study, snowball sampling was used as a subcategory of purposive sampling. Snowball sampling is where by the researcher first recognize appropriate participant for the study and later that participant

will suggest other people they know (Babbie, 2013). The study took place at Mogadishu city capital of Somalia. Mogadishu was the right place to conduct this study because of the availability of the participants. Total sample size of the study was 45 (25 people with disabilities and 20 family members), the number of participants was only known during data collection period. The researcher started by identifying the person with disabilities as first participant, that person's family was also selected as the participant. After interviewing the person with disability and his family, the researcher asked them if they knew any families who had persons with physical disabilities. The recommended families and their members with physical disabilities were included in the study; this became the process of finding the participants who took part in this study until a desired number was reached.

3.5.2. Participants

The participants were all the total elements/study subjects within the area of study (Babbie, 2007). The participants were people with physical disabilities and their families to further understand the challenges faced by persons with physical disabilities in Mogadishu city, Somalia. The reason for choosing family members is that if the person with disability was not able to properly express themselves for any reason, an interview with the family member was substituted. The information related to the participants is shown in tables below.

Demographic features of people with Physical disabilities.

Table 1. Participants by gender

	People with physical disabilities		**Family**		**Total**	
Gender	**f**	**%**	**f**	**%**	**f**	**%**
Male	16	64	5	25	21	46.7

Female	9	36	15	75	24	53.3
Total	25	100	20	100	45	100

Majority of people with physical disabilities which were interviewed in this study are male, which made up of 16 (64%) of the population of people with physical disabilities while female participants comprised of 9 (34%) of the study. Majority of family members who were interviewed in the study were female 15 (75%) while 5 (25%) of family members were male. Generally majority of participants (f=24) were female.

Table 2. Participants by age group

	People with physical disabilities		**Family**		**Total**	
Age group	**f**	**%**	**f**	**%**	**f**	**%**
18-24	5	20	-	-	5	11.1
25-34	8	32	1	5	9	20
35-44	6	24	7	35	13	28.9
45-54	5	20	9	45	14	31.1
55-64	0	0	2	10	2	4.4
65+	1	4	1	5	2	4.4
Total	25	100	20	100	45	100

Table 2 shows the age group of the participants. As seen in Table 2, 25-34 was the most interviewed age group at 8 (32%) the second highest interviewed groups was 35-44 age group, which comprised 6 (24%) followed by 18-24 and 45-54 were the third largest interviewed groups, and the least interviewed age group were 65+ which comprised 1 (4%). Majority of family members 9 (45%) were aged between 45-54 years, the second highest age group was 35-44 which comprised 7 (35%), followed by 55-64 which made up 2 (10%) of the participants, the least age group that were interviewed were 25-34 and 65 above which comprised 1 (5%) each. In general majority of the participants (f=14) were aged between 45-54 years.

Table 3. Participants' educational level

	Pople with physical disabilities		Family		Total	
Educational level	**f**	**%**	**f**	**%**	**f**	**%**
None	10	40	9	45	19	42.2
Primary	-	-	4	20	4	8.9
Intermediate	2	8	1	5	3	6.7
Secondary school	5	20	4	20	9	20
University	4	16	2	10	6	13.3
Informal education	4	16	-	-	4	8.9
Total	25	100	20	100	45	100

Table 3 shows the participants' level of education, and 10 (40%) of people with physical disabilities interviewed in this study have never attended school; the second highest group 5 (20%) is secondary graduates. Participants who are university graduates comprised 4 (16%) of the participants while those who acquired informal education comprised 4 (16%) and 2 (8%) of participants are intermediate graduates. Majority of the family members 9 (45%) did not attend school, 4 (20%) of the family members are secondary school graduates, family members who are primary graduates also comprised 4 (20%) of the participants, 2 (10%) of family members are university graduates while 1 (5%) of family members' education is intermediate level. In general majority of the participants (f=19) did not attend schools.

Table 4. Participants' occupation

	People with physical disabilities		Family		Total	
Occupation	**f**	**%**	**f**	**%**	**f**	**%**
Employed	9	36	8	40	17	37.8
Unemployed	12	48	12	60	24	53.3

Student	4	16	-	-	4	8.9
Total	25	100	20	100	45	100

As seen in table 4 majority of the people with physical disabilities 12 (48%) were unemployed, 9 (36%) were employed while 4 (16%) of participants were student. Majority of the family members 12 (60%) are unemployed while 8 (40%) of the interviewed family members were employed. In general majority of the participants (f=24) were unemployed.

Table 5. Fathers' level of education

Father's Level of education	**f**	**%**
None	16	64
Secondary school	5	20
University	3	12
I don't know	1	4
Total	25	100

Table 5 displays fathers' level of education. Majority of the fathers 16 (64%) did not attend school, 5 (20%) of the fathers are secondary school graduates, and 3 (12%) of fathers are university graduates while 1 (4%) of fathers' education is unknown.

Table 6. Fathers' occupation

Fathers' occupation	**f**	**%**
Employed	18	72
Unemployed	1	4
Retired	1	4
Died/deceased	5	20
Total	25	100

As seen in Table 6 majority of the fathers 18 (72%) are employed, 5 (20%) of the fathers are deceased, and 1 (4%) of the interviewed people's fathers was unemployed and retired.

Table 7. Mothers' level of education

Mothers' Level of education	**f**	**%**
None	19	76
Primary school	3	12
Intermediate school	2	8
Secondary school	1	4
Total	25	100

Table 7 above shows mothers' level of education. Majority of the Mothers 19 (76%) did not attend school, 3 (12%) of the Mothers are Primary school graduates, 2 (8%) of mothers are Intermediate graduates and 1 (4%) of mothers are secondary school graduates.

Table 8. Mothers' occupation

Mothers' occupation	**f**	**%**
Employed	9	36
Unemployed	11	44
Retired	3	12
Died/deceased	2	8
Total	25	100

Table 8 indicates that majority of the mothers are unemployed 11 (44%) and 9 (36%) of the mothers are employed while 3 (12%) of the mothers are retired and 2 (8%) of the interviewed people's mothers are deceased.

Table 9. Participants' Marital status

	People with physical disabilities		Family		Total	
	f	**%**	**f**	**%**	**f**	**%**
Marital status						
Single	10	40	-	-	10	22.2
Married	11	44	20	100	31	68.9
Divorced	4	16	-	-	4	8.9
Total	25	100	20	100	45	100

Table 9 above shows that majority of the people with physical disabilities 11 (44%) are married while the participants who are single made up 10 (40%) of the participants and 4 (16%) of the participants were divorced. All family members interviewed in the study were married. In general majority of the participants (f=31) were married.

Table 10. The breadwinner of the houses

Breadwinner	**f**	**%**
Father	8	32
Person with disability	8	32
Husband	4	16
Brother	1	4
Son	1	4
Relatives	3	12
Total	25	100

As seen in table 10 majority of the participants 8 (32%) who were interviewed in this study stated that their fathers are the breadwinners of their houses, 8 (32%) of the participants said that they are the ones who are the breadwinners of their houses, followed by the relatives at 3 (12%) while 1 (4%) expressed that their son are the

breadwinner of their houses. Most of breadwinners 13 (52%) have private business while some other breadwinners' occupations include exchange agent, civil servant and other occupations like driving, pharmacist and so on.

Table 11. Distribution of participants by their relationship to disabled person

Relationship	f	%
Mother	9	45
Uncle	2	10
Brother	1	5
Husband	6	30
Wife	2	10
Total	20	100

Table 11 shows that majority of family members 9 (35%) have parental relationship to the person with physical disability while some of interviewed family members have a marriage relationship to the person with physical disability, that is 6 (30%) were husbands and 2 (10%) were wives, the other two family members indicated that the person with physical disability is their nephew, only one family member said that he has brotherhood relationship to the person with physical disability.

3.6. Ethical Considerations

Ethical research advance respect for wellbeing and rights of voluntary participants and its conduct, foreseeable risk should be removed and dignity maintained (Leathard & Mc Larn, 2007).

3.6.1. Voluntary Participation

This is where by a person can participate in research from his or her self-determination (Miller & Brewer, 2003). All participants who participated in this study were not forced or under pressure to do so, they did it out of their willingness.

3.6.2 No Harm to Participants

The study should not cause harm either physical or mental to the respondents (Babbie, 2011). There was no harm to participants because participation in this study was voluntary, and at the outset of each interview, the researcher introduced himself to all interviewees and informed them of the purpose of the study and significance of the study. The participants were given the consent form.

3.6.3. Anonymity

Anonymity in research means that no one should know the identities of the respondents including the researcher (Alder & Clark, 2011).

Anonymity was achieved in this research as the respondents did not identify themselves when answering the interview questions, to enhance anonymity of the participants, abbreviations which concealed identities of the participant with physical disabilities (abbreviated as PPD1, PPD2, PPD3..), and family members such as mother participants (abbreviated as M/P1, M/P2, M/P3..) Uncle participants (U/P1) brother participants (abbreviated as B/P1) Husband participants (abbreviated as H/P1, H/P2, H/P3) and wife participants (abbreviated as W/P1, W/P2) were used.

3.7. Data Analysis and Reporting

The data were analyzed using Content analysis. Content analysis is the systematic reduction of written data through the identification of the unique features of the message (Bruce, 2001). The Miles and Huberman's method contain three prcosses, which are; data reduction, data display and drawing and verifying conclusions (Miles & Huberman, 2002). Data reduction: refers to the process of selecting, focusing, simplifying, abstracting and transformation of the data that obtained from written-up field note or transcription (Miles, Huberman & Saldana, 2014). Data display: is an organized, compressed assembly of information that permits the researcher to draw conclusion and action (Miles & Huberman, 2002). Miles and Hubermen recommended

that a good display of data, in the way of tables, charts and other graphical formats is important. The last stage is concerned with conclusion drawing and verification. The data is collected at each stage of the process from the beginning of the research process, and now the researcher is able to make interpretations of the findings (Miles & Huberman, 1994). Audio taped interviews were fully transcribed into written texts. The researcher started by writing all answers for each question and for each participant from the tape recorder. The next step included selecting information that is relevant to the questions, taking into considerations the aim and objectives of the study. The responses were categorized into common categories and codes, which helped the researcher to write the findings and later interpret the findings, make recommendations and draw conclusions.

3.8. Limitations of the study

The main methodologies used in this study were qualitative, which usually take several months to conduct and interpret. However, one of the limitation of this study is lack of transferability of the result, because this study used the qualitative research method which its results cannot be generalized to the larger population because of the small sample size and the results can also be bias since the participants can take different ways when answering the questions as compared to quantitative research (Babbie, 2007). The second limitation of this study related to the lack of time because the main methodology used in this study was qualitative, which normally takes more time to collect and interpret the data (Atieno, 2009).

CHAPTER FOUR: FINDINGS

This chapter covers the findings of the study which were obtained through face to face interview.

4.1. Findings related to the types of disability, time occurred and their causes

The major types of disability that people with disabilities have, time of accurance and the causes were presented below:

4.1.1. Findings related to the types of disability

Table 12. Types of disability

		People with physical disability		**Family**		**Total**	
Category	**Codes**	**f**	**%**	**f**	**%**	**f**	**%**
Deformity of lower limbs	Deformity Both legs	12	48	11	55	23	51.1
	Deformity of one leg	5	20	3	15	8	17.8
Cerebral palsy	Deformity of upper and lower limbs	2	8	1	5	3	6.7
Spinal cord injury	Paralysis of lower part of the body	2	8	2	10	4	8.9
Amputation legs	Amputated one leg	4	16	3	15	7	15.5
Total		25	100	20	100	45	100

Majority of persons with physical disabilities interviewed in this study, have deformity of both legs (f=12) while five participants have deformity on one leg only. The remaining participants have one leg amputated (f=4), paralysis of the lower part of the body (f=2) and cerebral palsy (f=2). Majority of the family members (f=11) which were interviewed in this study, pointed out that their family members with physical disabilities have deformity of both legs while three respondents said that their family members with physical disabilities have deformity on one leg only. Three family members with physical disabilities have amputated one leg. The remaining family members with physical disability have paralysis of the lower part of the body (f=2) and cerebral palsy (f=1).

4.1.2. Findings related to the time the disability occurred

Table 12a. Time the disability occurred

	People with physical disability		**Family**		**Total**	
Time the disability occurred	**f**	**%**	**f**	**%**	**f**	**%**
0-2 years old	6	24	6	30	12	26.7
3-5 years old	7	28	2	10	9	20
6-8 years old	4	16	1	5	5	11.1
9-11 years old	8	32	4	20	12	26.7
I don't know	-	-	7	35	7	15.5
Total	25	100	20	100	45	100

The highest number of people with physical disabilities developed their disability when they were 9-11 years old (f=8) while the least number of participants (f=6) started to live with disability when they were 6-8 years old. The highest number of family members (f=7) stated that they do not know when their family member with physical

disability developed their disabilities while the least number of family members (f=1) said that his/her family member with physical disability started to live with disability when he/she was aged 6-8. In this case all the persons with physical disabilities knew the exact time occurred their disability while some family members do not know, because they do not know the childhood time of their person with physical disability like husbands or wives.

4.1.3. Findings related to the causes of disability

Table 12b. Causes of disability

		People with physical disability		Family		Total	
Category	**Codes**	**f**	**%**	**f**	**%**	**f**	**%**
Non-Human related causes	Polio	8	32	7	35	15	33.3
	Cancer	1	4	-	-	1	2.2
Human related causes	Gunshot	4	16	3	15	7	15.6
	Fire	3	12	2	10	5	11.1
	Accident	2	8	2	10	4	8.9
Unknown causes	Unknown	7	28	6	30	13	28.9
Total		25	100	20	100	45	100

Table 12b shows that 8 participants' cause of disability was polio; the second highest causative factor was unknown 7. Gunshot was the third largest identified cause followed by fire, accident and cancer. Majority of family members (f=7) said that their family member's cause of disability was polio; the second highest causative factor was unknown (f=6). Gunshot was the third largest identified cause (f=3), followed by fire and accident.

4.2. Findings related to the challenges faced by people with physical disabilities

The main objective of the study was to find out the challenges faced by people with disability on their daily lives, specially focusing on health service, educational, economic, environmental, social and emotional challenges. The researcher will discuss the challenges separately below:

4.2.1. Findings related to the health service challenges faced by people with physical disabilities

4.2.1.1 Findings related to the Heath service needs

Table 13. Health service needs

		People with physical disability		Family		Total	
Category	**Codes**	**f**	**%**	**f**	**%**	**f**	**%**
Surgery	Orthopedic surgery	11	40.8	8	36.4	19	38.8
	Neurosurgery	2	7.4	2	9.1	4	8.2
Assistive Technology	Motorcycle	1	3.7	3	13.6	4	8.2
	Wheelchair	2	7.4	1	4.6	3	6.1
	Artificial leg	3	11.1	3	13.6	6	12.2
Physiotherapy	Physiotherapy	6	22.2	3	13.6	9	18.3
Nothing	Nothing	2	7.4	2	9.1	4	8.2
Total		27	100	22	100	49	100

Note. Two persons with physical disabilities and two family members have stated

more than one need

Table 13 above shows that majority of the people with physical disabilities' disability need is orthopedic surgery (f=11), they mentioned that their only health service need is to get a well-trained and professional orthopedic doctor who can successfully do the operation they need. One participant narrated that;

"The only thing that my disability need is to get well knowledgeable orthopedic doctor, who can do operation for my legs" (PPD 10).

The second highest health service need that the participants' disability need is physiotherapy (f=6) The third most needed health service that was mentioned is artificial leg for participants who amputated their legs, they expressed that they need only artificial legs to walk as mentioned by one participant;

"This time I do not need surgery or physiotherapy but I need artificial leg to walk without any help from others" (PPD 12)

As displayed in the above table there is other participants who need neurosurgery, assistive technology like wheelchair and motorcycle, as well as those who mentioned that their disabilities do not need any health services at all. Some of the participants are stated below;

"*My health problem is polio and polio has only prevention which is vaccination, so now I do not need any health service related to my disability neither treatment nor surgery" (PPD 7).*

Also, table 13 shows that majority of the families (f=8) said that their family member's with disability need an orthopedic surgery. The second highest health service needs that was identified include physiotherapy, artificial leg and motorcycle. The third most health service needs were neurosurgery and wheelchair while some families indicated that their family member with physical disability do not need any health interventions either surgical or treatment as mentioned by one family member;

"My daughter, she does not need any treatment or surgery, because her disability is caused by polio, and it has no cure…" (M/P 11.)

4.2.1.1.1. Findings related to the availability of health services

Table 13a. Availability of health services

	People with physical disability		Family		Total	
Availability	**f**	**%**	**f**	**%**	**f**	**%**
Yes	14	60.9	8	44.4	22	53.7
No	9	39.1	10	55.6	19	46.3
Total	23	100	18	100	41	100

Table 13a shows that majority of the people with physical disabilities (f=14) said that the health service they need is available in the country while eight participants stated that the health services they need is not available in the country. similarly, majority of the family members (f=9) said that their family member with disability's health service need is not available in the country while eight participants stated that their family member with disability's health services need is available in the country.

4.2.1.1.2. Findings related to the Usage of available health services

Table 13b. Usage of available health services

	People with physical disability		Family		Total	
Usage	**f**	**%**	**f**	**%**	**f**	**%**
Yes	10	71.4	7	87.5	17	77.3
No	4	28.6	1	12.5	5	22.7
Total	14	100	8	100	22	100

Table 13b shows that majority of the people with physical disabilities (f=10) are benefiting from the available health services while four participants are not using the available health services.

Similarly, majority of the families (f=7) said that their family members with disabilities are benefiting from the available health services while one participant stated that his/her family member with disability is not using the available health services.

4.2.1.1.3. Findings related to the reasons for using the available health services

Majority of the participants used the available health services for issues related to their disabilities, (f=5) of participants visited orthopedic doctor, two participants used it to buy artificial leg and two participants used it for physiotherapy. Only one participant stated that he used it for another health problem, as he mentioned below:

"I used it for treatment of typhoid fever, because I was more than two weeks..." (PPD 4).

Similarly, all the family members for people with disabilities said that their family member with disabilities used the available health services for the purposes related to their relatives' disabilities, and most of the family members used physiotherapy while others used available health services like visiting orthopedic doctor while others said that they bought artificial leg.

4.2.1.1.4. Findings related to the reasons not using the available health services

Two participants said that the reason they could not use the available health services was because of lack of money, and one of the participant stated that he could not use the available health services due to lack of time, his response is as follows;

"I am working every day except on Friday, and I do not have a chance to go to physiotherapy" (PPD1)

The one participant expressed that the reason for not using the available health services is because he is using traditional treatment, his response is indicated below:

"I am taking traditional treatment, recommended by one traditional healer, and he advised me not to use medical or surgical therapies" (PPD 24).

And one participant stated that he could not use the available health services because of lack of time.

One family member for people with disabilities said that his/her family member with physical disability does not use the available health services due to lack of insufficient funds, and they also mentioned that their families are poor as such they cannot afford to pay the health services required by their family members. One of the responses is as follows;

"*we went to the hospital, and the doctor told us that my wife need an orthopedic surgery… the cost of the operation was said to be nine hundred dollars (900$), I could not pay it because its big amount*…" (H/P 7)

4.2.1.2. Findings related to the presence of the challenges that prevent or discourage the seeking of health services

Table 14. Presence of challenges that prevent or discourage the seeking of health services

	People with physical disability		Family		Total	
Challenges	**f**	**%**	**f**	**%**	**f**	**%**
Yes	18	72	13	65	31	68.9
No	7	28	7	35	14	31.1
Total	25	100	20	100	45	100

As seen in table 14 majority of people with physical disabilities (f=18) answered that there are obstacles to get and use health service while seven participants stated that they do not have any challenges to acquire their health services. Similarly, majority of family members of people with disabilities (f=13) stated that there are obstacles that prevent the accessibility and use of health service while seven family members stated that they are not faced with any challenges.

4.2.1.2.1. Findings related to the Common challenges that prevent or discourage the seeking of health services

Table 14a. Common challenges that prevent or discourage the seeking of health services

		People with physical disability		Family		Total	
Category	**Codes**	**f**	**%**	**f**	**%**	**f**	**%**
Economic problem	Expensive health services	7	35	6	42.9	13	38.2
	Travel expenses	9	45	5	35.7	14	41.2
Environmental	Transportation problem	2	10	2	14.3	4	11.8
	Hospital building problem	2	10	1	7.1	3	8.8
Total		20	100	14	100	34	100

Note. One family member and two persons with physical disabilities stated that they have both economic and environmental problems

As seen in table 14a majority of the people with physical disabilities stated that the only challenges that prevent them from getting the health services they need is economic problem, and nine participants expressed that they need to go to other country due to lack of availability of health service in Somalia but due to financial issues it is difficult for them to travel. Some of the responses are as follows;

"I need neurosurgery, but there is no neurosurgery doctor in Mogadishu, so, I need to go outside of the country to get operation on my spinal cord, but it need too much money" (PPD 3).

Seven participants stated that they cannot use the available services due to expensiveness and they don't have enough money;

"The services that I need is available in the country, and cannot afford it because it is expensive" (PPD 4).

Four participants stated that they were faced with certain barriers while they were using the health services, the barriers includes; transportation problem and inappropriate hospital buildings;

"To access some hospitals is difficult for me, because their buildings are not suitable to enter by someone like me" (PPD 15).

The majority of family members (f=6) who were interviewed in this study, said that the health services needs required by their relative with disability are available in the country but are very expensive. One of the respondents stated that;

"*Our son, we take him to different hospitals, more than two doctors said that our son needs an orthopedic surgery, but the operation costs were very high and because of that our son did not have the operation." (M/P 14).*

Five family members stated that the health services needed by their family members with disabilities are not available in the country, and they could not go to another country due to insufficient funds. One of the family member‘s response is as follows;

“My nephew needs neurosurgery, and there is no hospital in Mogadishu which can perform the neurosurgery, so he needs to go to another country like India, but it needs a lot of money…” (U/P 2).

Other family members stated that they faced certain challenges while they were using the health services. These barriers included; transportation problem and inappropriate hospital buildings. One of the responses is as follows

“one day we went to the hospital and the doctor’s office was on third floor, unfortunately the hospital does not have a ramp or elevator, and I was alone, my support to her was not enough, some health workers helped us to lift until we reached the third floor” (M/P12).

4.2.2. Findings related to the educational challenges that faced by people with physical disabilities

4.2.2.1. Findings related to the Availability of educational institutions for persons with disabilities

Table 15. Availability of educational institutions for persons with disabilities

	People with physical disability		**Family**		**Total**	
Educational Institution	**f**	**%**	**f**	**%**	**f**	**%**
Yes	2	8	1	5	3	6.7
No	23	92	18	90	41	91.1
I don’t know	-	-	1	5	1	2.2

Total	25	100	20	100	45	100

Table 15 shows that majority of the people with physical disabilities (f=23) stated that there are no educational institutions for people with physical disabilities while two participants said that previously, there were two schools for people with special needs, but now they are closed. Majority of the family members (f=18) stated that there are no educational institutions for people with physical disabilities while one family member said that previously, there were schools for people with special needs, but now those schools have been shut down. One family member (f=1) said that he does not have any information about availability of schools for people with physical disabilities.

4.2.2.1.1. Findings related to the types of institution are available

Those who said that there were educational institutions for people with physical disabilities stated that there were institute for training of people with special needs.

One participant indicated that Siyad Barre's government built two schools for people with disabilities; *"No government before or after Siyad Barre's government give important to the people with disabilities because that government built us schools for training of people with special needs, " (PPD 7).*

The family member who said that there was educational institution for people with physical disabilities stated that there was institute for training of people with special needs.

As one family member indicated there was school for people with disabilities; *"Previously there was institution for people with special needs, that school was very equipped school" (W/P 9).*

Both of the two participants responded that they attended that institute

One participant mentioned that *"Somali government was giving more priority for people with special needs in case far education, and they have 2 schools for people with special needs" (PPD 7).*

4.2.2.2. Findings related to the Attended/attending any educational institution (Normal schools)

Table 16. Attended/attending any educational institution (Normal schools)

	People with physical disability		Family		Total	
Attending general schools	**f**	**%**	**f**	**%**	**f**	**%**
Yes	13	52	11	55	24	53.3
No	12	48	9	45	21	46.7
Total	25	100	20	100	45	100

As seen in table 16 majority of the people with physical disabilities (f=13) said that they get benefits from normal school while twelve participants said that they did not attend normal school. Similarly, majority of the family members (f=11) said that their relatives with disabilities get or are getting benefits from normal schools while nine family members said that their relatives with disabilities did not attend normal school.

4.2.2.2.1. Findings related to the type of the school attended/attending

Table 16a. Type of the school attended/attending

	People with physical disability		Family		Total	
Type of the school	**f**	**%**	**f**	**%**	**f**	**%**

Primary & secondary school	7	53.8	6	54.5	13	54.2
Informal school	4	30.8	4	36.4	8	33.3
Commercial school	2	15.4	1	9.1	3	12.5
Total	13	100	11	100	24	100

Most of the people with physical disabilities (f=7) said that they got benefits from primary and secondary school, second highest participants (f=4) said that they attended informal schools while least participants (f=2) responded that they went to commercial school. Most of the family members (f=6) said that their relatives with disabilities got benefits from primary and secondary school, second highest family members (f=4) said that their family members with disabilities attended informal schools while least group of family members (f=4), responded that their family members with disabilities went to commercial school.

4.2.2.2.2. Findings related to the reasons for not attending schools

Table 16b. Reasons for not attending schools

		People with physical disability		**Family**		**Total**	
Category	**Codes**	**f**	**%**	**f**	**%**	**f**	**%**
Environmental problem	School buildings	8	53.3	2	22.2	10	41.7
	Transportation	3	20	2	22.2	5	20.8
Economic problem	School fee	4	26.7	2	22.2	6	25
Family problem	Misconception	-	-	3	33.3	3	12.5

Total	15	100	9	100	24	100

Note. Two family members stated that their family member with disabilities did not attend schools because of economic and school buildings.

Most of the people with physical disabilities (f=8) stated that they did not attend normal schools because of their building, as mentioned by one participant;

"I could not go to school because it's not designed to be accessed by a person with physical disability" (PPD 21).

Another participant said that most of schools do not have any ramp and elevator:

"I need to go school, but there is no school which has ramp or elevator for a person with disability" (PPD 22)

Four participants said that they did not benefit from schools for economic reason, as one participant narrated below:

"Majority of the schools are private, and they need more money for school fees, and my parents do not have enough money to pay the fees" (PPD 24)

Three participants stated that they did not attend school for transportation problem:

"There is no school near our home, therefore we have to take a bus every day, and it is not easy for me to use public transportations" (PPD 8).

Most of the family members (f=3) stated that their family members with disabilities did not attend normal schools because of unawareness of the family, and they did not believe that the child with disability need education , one family member mentioned that;

"My husband told me that all his brothers and sister went to school but he did not go to any school, this shows that the family was not aware that a child with disability can also study!" (W/P1).

Other family members stated that their family members with disabilities did not attend school, because of economic, transportation and school building problems, as mentioned by one family member;

" In our village there is no school, so he need to take a bus every day, and it's difficult to ride normal buses, for that reason he never went to school"(M/P 9).

Two family members said that their family member with disabilities did not benefit from schools for economic reason, as one family member narrated below:

"*Going to school requires transportation money and school fee, since family income was insufficient, it was hard to enroll the student…." (M/P 20).*

4.2.2.3. Findings related to the educational institutions meet the needs of the people with physical disabilities

Table 17. Educational institutions meet the needs of the people with physical disabilities

	People with physical disability		**Family**		**Total**	
	f	**%**	**f**	**%**	**f**	**%**
Yes	2	13.3	4	33.3	6	22.2
No	10	66.7	7	58.3	17	62.9
somehow	3	20	1	8.3	4	14.9
Total	15	100	12	100	27	100

Table 17 shows that majority of the participants (f=10) said that the schools do not cater for the people with disability's need and as mentioned by some participants:

"Our school's buildings contain three floors and there is no elevator! I had to go up through the stairs and it was difficulty as well as uncomfortable for me" (PPD 6).

Another participant narrated that:

"The school I graduated from and the university that I am studying now, both of them they do not have any ramp or elevator, even chairs and tables are not suitable for student with disability" (PPD 2).

Three participants mentioned that their schools have met some needs of people with disabilities like giving priority and respect as one participant said:

"My school was normal school but they give me more priority and respect" (PPD 13).

While two participants stated that their schools met the needs for people with special needs, one of them explained that:

"Our school was suitable for people with special needs because it's designed only for them and aimed at including the people with special needs" (PPD 7).

Majority of the family members (f=7) said that the schools do not cater for the people with disabilities 'need. One of the family members stated that:

"My son is going to normal school which is not suitable to children like him, the school has not ramp, or other services for people with special needs" (M/P 16).

One family member has mentioned that some schools have met some needs of people with disabilities like giving priority and respect as one participant said:

"My son's classmates like him, even the teachers and administrators, so he was happy to go to school and to study, although the school has no ramp" (M/P 1).

Four family member stated that his family member with disability's school met the needs for people with special needs, she mentioned that:

"the school where my husband graduated from was suitable for people with special needs because it was designed only for them, and aimed to give support to the people with special needs" (W/P 19).

4.2.2.4. Findings related to the educational effects on the lives of the people with physical disabilities

Table 18. Educational effects on the lives of the people with physical disabilities

	People with physical disability		Family		Total	
Educational effects	**f**	**%**	**f**	**%**	**f**	**%**
Good effect	14	93.3	12	100	26	96.3
Not bad not good	1	6.7	-	-	1	3.7
Total	15	100	12	100	27	100

As seen in table 18 majority of participants (f=14) demonstrated that education has good effect on their lives, as one participant narrated:

"*It affected me well, without education I could not imagine how I would be..!." (PPD 16).*

Another participant said that:

"It has good effect on my life, because it gives me a power to work and to continue my educational degree" (PPD 6).

Another participant explained the effect of education on his life by saying;

"It makes me to live without depending on others" (PPD 2).

Only one participant (f=1) said that education has no effect on his life as he stated:

"I went to school until intermediate level; I don't think that it has effect on my life" (PPD 17)

Oppositly, all the family members indicated that education have positive effects on their family members with disabilities' lives. As narrated by one family member;

"*my son, before he went to school, he needed a lot of support to do his daily live activities, but now he is taking care of himself without help*" (M/P 1)

Another family member said that;

"My nephew he is working, he got married, I think without education he could not have made it this far" (U/P 5).

Another family member said:

"Education has affected her well, at least she can take care of herself, and she is no longer illiterate" (M/P11).

4.2.3. Findings related to the economical challenges that faced by people with physical disabilities

4.2.3.1. Findings related to the availability of job opportunities for people with physical disability

Table 19. Availability of job opportunities for people with physical disability

	People with physical disability		Family		Total	
Areas of job opportunities	**f**	**%**	**f**	**%**	**f**	**%**
Yes	5	20	-	-	5	11.1

No	20	80	20	100	40	88.9
Total	25	100	20	100	45	100

Table 19 shows that majority of people with physical disabilities (f=20) stated that there is no job opportunity that is suitable for people with physical disabilities in the community they live in while five participants said that there are job opportunities for persons with physical disabilities. Similarly, all family members stated that there is no job opportunity that is suitable for people with physical disabilities in the community they live in.

One family member stated that in Mogadishu, there is no any job opportunity for people with physical disabilities as he narrated bellow;

"In Mogadishu, there is no any job opportunity for people with physical disabilities, because after the collapse of central government there is no public job vacancies, every opportunity is based on tribe, and no one gives a chances for people with physical disabilities" (M/P 14)

4.2.3.1.1. Findings related to the areas of available job opportunities

The majority of the people with physical disabilities (f=4) stated that there are job opportunities in every field, and there is no limitation for people with physical disability while one participant (f=1) said that the only job opportunity for people with disabilities is administration and management field. These participants' type of disability were not severe, and two of them are amputated leg, three of them they have deformity of one leg.

One participant narrated as bellow;

"People with physical disabilities are like normal people, and they have same rights to apply vacancies in all fields"(PPD1)

4.2.3.1.2. Findings related to the applying for existing job opportunities

Three participants applied for the available job vacancies, two participants have not applied for the available job vacancies. For those who applied the vacancies stated that they did not meet any difficulties when they applied for the job vacancies.

One participant mentioned as bellow:

"*I applied without difficulty, because no one do discrimination during application process" (PPD 20).*

For those participants who have not applied to the available job opportunities said that they are still students.

One participant justified the reasons that he did not apply the available vacancies and he mentioned that;

"yes there are a lot of job vacancies that person with physical with disability can do, but now I am student and I wish to apply theses job opportunities when I graduate" (PPD2).

4.2.3.2. Findings related to the taking equal salary

All people with physical disabilities (f=9) who are working stated that they are taking the same salary like normal people. One participant expressed that he/she is doing same work like other and taking same salary

"Yes I am taking same salary, because we do same work" (PPD 7)

Similarly, all of the family members said that their family members with disabilities who are working are taking the same salary as people without disabilities.

4.2.3.3. Findings related to the effects of disability on chances of finding a job

Table 20. Effects of disability on chances of finding a job

	People with physical disability		Family		Total	
Effects	**f**	**%**	**f**	**%**	**f**	**%**
Yes	13	52	11	55	24	53.3
No	12	48	9	45	21	46.7
Total	25	100	20	100	45	100

Most of the people with physical disabilities (f=13) stated that their disability have effects on their chances for finding jobs, some participants mentioned that;

"Yes it has effect because, our society have misconception about disabled people's ability to work" (PPD 13)

"*No one employs a disable person because they believe that they cannot work..." (PPD 7)*

Another participant said that: "*yes it has more effect, for example; mostly there is no job vacancies for people with physical disability, even if it's available men will get first"(PPD 10)*

Similarly, most of the family members (f=11) stated that the disability has effect on their family members with disabilities' chances of finding jobs. Some family members' responses are below;

"Disability has many effects on my son's chance to find jobs, because first he is illiterate, second he cannot access some buildings" (M/P 20).

"Most people have misconceptions about people with special needs; they believe that people with disabilities are not able to work" (M/P 14)

Another participants said that; "*yes it has effect because my brother cannot take care of himself, he is dependent on other's help so he cannot work" (B/P1).*

4.2.4. Findings related to the environmental challenges faced by people with physical disabilities

4.2.4.1. Findings related to the Suitability of home design

Table 21. Suitability of home design

	People with physical disability		Family		Total	
Home design	**f**	**%**	**f**	**%**	**f**	**%**
Yes	9	36	4	20	13	28.9
No	16	64	16	80	32	71.1
Total	25	100	20	100	45	100

As seen in table 21majority of the people with physical disabilities (f=16) said that the design of their homes is not suitable for them, especially toilets, entrance and exit of the home while nine participants said that they do not have a problem with design of their homes, and one participant mentioned:

"The design of our home is not suitable because is not based the live people with physical disabilities, specially entry and exit of the house and toilet" (PPD3)

Similarly, majority of the family members (f=16) said that the design of their homes are not suitable to their family members with disabilities while four family members said that the design of their homes are suitable to their family members with disabilities.

4.2.4.2. Findings related to the problems for accessing to public sectors

Table 22. Problems for accessing to public sectors

	People with physical disability		Family		Total	
Public sectors	**f**	**%**	**f**	**%**	**f**	**%**
Yes	17	68	15	75	32	71.1
No	8	32	5	25	13	28.9
Total	25	100	20	100	45	100

Table 22 shows that majority of the people with physical disabilities (f=17) have a problem to access the public sectors while eight participants have no problem to access public sectors. Also majority of the family members (f=15) said that their family members with disabilities have a problem to access the public sectors although five family members said that their family members with disabilities have no problem to access public sectors.

4.2.4.2.1. Findings related to the problem for accessing public transportations

Table 22a. The problem for accessing public transportations

	People with physical disability		Family		Total	
Transportation	**f**	**%**	**f**	**%**	**f**	**%**
Yes	15	88.2	14	93.3	29	90.6
No	2	11.8	1	6.7	3	9.4
Total	17	100	15	100	32	100

As seen in table 22a majority of the people with physical disabilities (f=15) said that they have a problem with using the public transport, even the drivers of public transports do not respect people with disabilities, one participant uttered that:

*"Public transports in Somalia is not suitable to be used by people with physical disabilities, furthermore, the drivers do not like us and in most cases they become impatient to wait a bit longer for us at the stops …"(*PPD 6)

Meanwhile two participants said that they do not have any problem to use public transports.

Similarly, majority of the family members (f=14) said that their family members with disabilities have problems with using public transportation:

"The minibuses are not suitable to be used by people with physical disability because wheelchair users can not ride easily, and most of drivers and assistant drivers do not show respect to the people with disabilities" (B/P 2).

While one family member said that his/her family member with disability does not have any problem to use public transports.

4.2.4.2.2. Findings related to the problem existing in the roads

Table 22b. The problem existing in the roads

	People with physical disability		**Family**		**Total**	
Roads	**f**	**%**	**f**	**%**	**f**	**%**
Yes	14	82.3	11	73.3	25	78.1
No	3	17.7	4	26.7	7	21.9
Total	17	100	15	100	32	100

Table 22b shows that majority of the people with physical disabilities (f=14) have a problem with the use of roads as narrated by one participant:

"The design of the roads is not suitable for people with disabilities whether physically disabled or blind people, especially when it rains" (PPD 6).

Similarly, majority of the family members (f=11) stated that their family members with disabilities have a problem to use roads. One participant stated that;

"*Some roads in Mogadishu are not suitable for people with disabilities, even normal people because they are very rough and poorly constructed"* (M/P 11).

4.2.4.2.3. Findings related to the problem for accessing public buildings

Table 22c. The problem for accessing public buildings

	People with physical disability		**Family**		**Total**	
Public Buildings	**f**	**%**	**f**	**%**	**f**	**%**
Yes	16	94.1	15	100	31	96.9
No	1	5.9	-	-	1	3.1
Total	17	100	15	100	32	100

Table 22c shows that majority of people with physical disabilities (f=16) interviewed in this study have a problem with accessing public buildings especially; markets, schools, and hospitals. One participant said that only Benadir hospital is suitable to be accessed by people with physical disabilities and he mentioned that:
"I cannot access most of public buildings because they do not have any ramp or elevator, except Benadir hospital which has ramps" (PPD2).

Another participant indicated that all public buildings are not disability friendly as they do no accommodate for the needs of people with disability even places of worship:

"*All public buildings like markets, schools, universities, hospitals and government offices are not designed to be accessed by persons with disability, even mosques we cannot access them easily because of the stairs"* (PPD 7).

Opposite of that, all of family members interviewed in this study stated that their family members with disabilities have a problem with accessing public buildings specially, markets, schools, and hospitals.

"Most of the public buildings either old or new buildings are not easily accessed by people with disabilities, this shows the level of non awareness by our government about the needs of people with physical disabilities" (U/P 5).

4.2.5. Findings related to the social challenges faced by people with physical disabilities

4.2.5.1. Findings related to the thinking about family behaviors

Table 23. Opinions about family behaviors

	People with physical disability		Family		Total	
Family Behaviors	**f**	**%**	**f**	**%**	**f**	**%**
Positive behavior	24	96	20	100	44	97.8
Negative behavior	1	4	-	-	1	2.2
Total	25	100	20	100	45	100

As seen in table 23 majority of the participants (f=24) indicated that their family members behave well and they supported them, as one participant narrated below:
"Every one of my family members help me and they make effort to support me 100%" (PPD 2).

Yet one participants said that some of his/her family member's hate them because of their disabilities, as one participant mentioned below:

"*Some of my family members hate me, and they are uncomfortable to help me"* (PPD 10).

Differently, all family members who were interviewed in this study believed that other family members are respecting and supporting the family member with disability as one participant narrated below:

"All family member liked him and every one strive to help him" (M/P 2).

4.2.5.2. Findings related to the friends behaviors

Table 24. Opinions about friends behaviors

	People with physical disability		Family		Total	
Friends Behaviors	**f**	**%**	**f**	**%**	**f**	**%**
Positive behavior	24	80	20	95.2	44	86.3
Negative behavior	6	20	1	4.8	7	13.7
Total	30	100	21	100	51	100

Note. Five people with physical disabilities and one family member said that friends have both positive and negative behaviors

Majority of people with physical disabilities (f=24) said that their friends behave well, and they respect them more while six participants stated that some of their friends behave badly, as mentioned by one participant:

*"Some of my friends at the work place, sometimes they abuse me because of my disability" (*PPD 7).

Similarly, majority of the family members (f=20) said that their family members with disabilities' friends behave well, and they respect them more while one family member stated that some friends of his/her family member with disability behave badly to him/her, as mentioned one by participant:

"Some of his friends when they argued about something they discriminate him because of his disability" (M/P 9).

4.2.5.3. Findings related to the community behaviors

Table 25. Opinions about community behaviors

	People with physical disability		Family		Total	
Community Behaviors	**f**	**%**	**f**	**%**	**f**	**%**
Positive behavior	23	92	20	100	43	95.6
Negative behavior	2	8	-	-	2	4.4
Total	25	100	20	100	45	100

Table 25 shows that majority of participants (f=23) said that the communities they live in are treating them well, and they respect them while two participants said that they are faced with problems from some people in the community and one participant mentioned that:

"Some of community members do not respect me, especially neighbors, who insult me sometimes for my disabilities" (PPD 10).

Similarly, all family members said that the communities they live in are treating their family members with disabilities very well, and they respect them more.

One family member indicated that the community they live in are giving more respect to their child with disabilities and she mentioned that:

"our community we live in specially our neighbors they respect and give support to my son and they care for him the way the do it to their children" (M/P 10).

4.2.5.4. Findings related to the participation in social activities

Table 26. Ever participated in social activities

	People with physical disability		Family		Total	
Participated	**f**	**%**	**f**	**%**	**f**	**%**
Yes	12	48	6	30	18	40
No	13	52	13	65	26	57.8
I don't know	-	-	1	5	1	2.2
Total	25	100	20	100	45	100

Table 26 shows that majority of the people with physical disabilities (f=13) have not participated in any social activities while twelve participants participated in social activities. While majority of the family members (f=13) stated that their family members with disabilities were not participating in any social activities although six family members said that their family members with disabilities were participating in social activities.

4.2.5.4.1. Findings related to the type of the social activities

Majority of the people with physical disabilities participated in competitions such as Qur'an competition, class competition, and school competition while minority of the participants participated in different activities like empowering people with disabilities, disability day, and political party activities and so on. Similarly, majority of the family members stated that their family members with disabilities participate in activities such as Qur'an competition, empowering disabled people, disability day, political party activities and so on.

4.2.5.4.2. Findings related to the sponsors of the activity

Majority of the activities that participants took part in were sponsored by universities and WHO while other participants said that government organizations, schools, NGOs

were the ones that sponsored the activities they participated in. Majority of family members interviewed in this study stated that the social activities that their family member with disabilities participated in were sponsored by universities, businessman and political party while other family members said that they do not know the sponsors' names.

4.2.5.4.3. Findings related to the reasons for not participation in social activities

Table 26a. Reasons for not participated social activities

		People with physical disability		Family		Total	
Category	**Codes**	**f**	**%**	**f**	**%**	**f**	**%**
Information reason	No invitation	9	69.2	5	41.7	14	56
Education reason	Illiterate	3	23.1	-	-	3	12
Self reason	Not needed	1	7.7	3	25	4	16
I don't know	I don't know	-	-	4	33.3	4	16
Total		13	100	12	100	25	100

As seen in table 26a majority of the people with physical disabilities (f=9) said that they did not participate in social activities, due to lack of information, three participants stated that they did not participate in the activities because they are illiterate while one participant said he/she feel there is no need to participate in social activities. Similarly, majority of the family members (f=5) said that their family members did not participate in social activities, due to lack of information, four family members stated that they do not know the reasons why they did not participate in the activities while three family members said their family members with disabilities do not like to participate in social activities.

4.2.5.5. Findings related to the participating social activities currently

Table 27. Participating in social activities

	People with physical disability		Family		Total	
Participating	**f**	**%**	**f**	**%**	**f**	**%**
Yes	2	8	-	-	2	4.4
No	23	92	20	100	43	96.6
Total	25	100	20	100	45	100

Table 27 shows that majority of the people with physical disabilities (f=23) are currently not participating to any social activities while two participants are participating in social activities. Vise verse all family members stated that currently their family members with disabilities are not participating to any social activities.

For those who are currently participating activities, one participant said that he/she is participating in arts program while other participant said that he/she is participating in conflict resolution activity. The two main sponsors for the activities that people with physical disabilities take part in, these sponsors are the government and nongovernmental organization.

4.2.5.5.1. Findings related to the reasons not participating

Table 27a. Reasons not participating

		People with physical disability		Family		Total	
Category	**Codes**	**f**	**%**	**f**	**%**	**f**	**%**
Information reason	No invitation	14	60.9	8	40	22	51.1
	No program	5	21.7	-	-	5	11.7
Education	Illiterate	2	8.7	-	-	2	4.6

reason							
Self reason	Not needed	2	8.7	3	15	5	11.7
I don't know	I don't know	-	-	9	45	9	20.9
Total		23	100	20	100	43	100

Table 27a shows that majority of the people with physical disabilities (f=14) said that they are not currently participating in social activities, due to lack of information, five participants said they are not participating because there are no ongoing activities, two participants stated that they are not participating in the activities because they are illiterate while two participants said that they do not need to participate in social activities.

While majority of the family members (f=9) said that they do not know the reasons for which their family members with disabilities were not participating in social activities, eight family members with disabilities said their family members with disabilities are not participating in social activities because of lack of invitations while three family members said that their family members with disabilities do not like to participate in social activities.

One participant mentioned he/she likes to participate to take part social activities but he/she does not know how to participate; "*I like to participate to social activities whatever are, unfortunately I did not find anyone invate me" (PPD 4)*

4.2.5.6. Findings related to the effects of disability on marriage decision

Table 28. Effects of disability on marriage decision

	People with physical disability		**Family**		**Total**	
Marriage decision	**f**	**%**	**f**	**%**	**f**	**%**

Yes	7	28	9	45	16	35.6
No	18	72	11	55	29	64.4
Total	25	100	20	100	45	100

As seen in table 28 majority of the people with physical disabilities (f=18) indicated that their disabilities have no effect on their marriage decision while seven participants said that their disabilities had an effect on their marriage decision. One participant mentioned that he lost some marriage attempts for reasons related to his disability and he said;
"I had a relationship with a girl, when we decided to marry each other, her family rejected me because of my condition"(PPD 5).

Another participant said that he will not get married because of his disability:

"… It has more effect because I cannot marry; the lower part of my body has mobility problems…" (PPD 3).

Similarly, majority of the family members (f=11) indicated that the disability of their family members have no any effect on their marriage decision while nine family members said that the disability of their family members have effect on their marriage decision. One family member mentioned that his family member with disabilities failed some marriage attempts for reasons related to his disability and she said;

"My husband told me before we married he tried to get married but he failed because of issues related to his disability" (W/P 2).

Another family member said that his/her family member with disability could not get married because his/her lower part of the body is paralyzed;

"He *cannot move or feel anything in his lower part of the body, even he could not control urine, he does not have any erection" (B/P 1)*

Other family member said that young generations have misconception about people with disabilities' ability to have sex and she mentioned that:

"These *generations they believe that people with disability do not have any demand about sex, or they think they do not have ability to indulge in sexual intercourse very well especially girls with disability" (M/P10).*

4.2.5.7. Findings related to the Effects of disability after marriage

Table 29. Effects of disability after marriage

	People with physical disability		Family		Total	
After marriage	**f**	**%**	**f**	**%**	**f**	**%**
Yes	4	26.7	1	8.3	5	18.5
No	11`	73.3	11`	91.7	22	81.5
Total	15	100	12	100	27	100

Table 29 shows that majority of the participants (f=11) stated that their disability has no effect on their lives after marriage while four participants said that their disabilities have effect on their lives after marriage, and some of them mentioned that they are divorced because of issues related to their disabilities as one participant narrated below:
"After one year of our marriage, my husband decided to divorce me for the reasons related to my disability" (PPD 9).

Another participant expressed that his/her disability has affected her badly after marriage and he/she mentioned that;

"I was divorced because the doctor told us that I will not become pregnant, after few days my husband divorced me…" (PPD 10).

While majority of the family members (f=11) stated that disability has no effect on their disabled family members' lives after marriage although one family member said that his/her family members' disabilities have effect on his/her life after marriage, and one of them mentioned that his/her family member with disability was divorced because of issues related to their disabilities as one family members narrated as below:

"She got divorce after a doctor told her she has uterus abnormality due to her pelvic problem, after that her husband decided to divorce" (U/P 1)

4.2.6. Findings related to the emotional challenges faced by people with physical disabilities

4.2.6.1. Findings related to the tease or call names for people with physical disabilities

Table 30. Ever been teased or called names

	People with physical disability		Family		Total	
Tease	**f**	**%**	**f**	**%**	**f**	**%**
Yes	22	88	18	90	40	88.9
No	3	12	2	10	5	11.1
Total	25	100	20	100	45	100

As seen in table 30 majority of the people with physical disabilities (f=22) said that they were teased and called names while three participants said that they never met any tease or nick names.

Similarly, majority of the family members (f=18) said that their family members with disabilities have been teased and called nick names while two family members said that their family members with disabilities never experienced any tease or nick names.

4.2.6.1.1. Findings related to the persons who tease or call names to the people with physical disabilities

Majority of the participants (f=14) stated that children are the ones who mostly teased or called them names while seven participants said that community teased them, followed by, three participants stated that women are mostly the people who teased or called name to them. Similarly, majority of the family members (f=10) stated that children mostly teased their family members with disabilities or called them names while eight family members said that community teased their family members with disabilities.

4.2.6.1.2. Findings related to time tease happened

Majority of the people with physical disabilities (f=11) stated that they were teased when they were at school while eight participants said that they were teased every time, followed by, three participants who stated that they were teased or called names sometimes.

Opposit of that, majority of the family members (f=10) stated that their family members with disabilities met tease sometimes while six family members said that their family members with disabilities were teased when they were at school, followed by, two family members stated that their family members with disabilities were teased or called nick names everytime.

4.2.6.1.3. Findings related to the emotional feelings after tease

Majority of the people with physical disabilities stated that they felt angry (f=5) and discriminated (f=5). Opposit of that, five participants said that they were not feeling anything while other participants said they were feeling tension (f=3) and sadness (f=4).

4.4.6.2. Findings related to the emotional feelings after learning the disability

Table 31. Emotional feelings after learning of disability

Feelings	**f**	**%**
Shock	6	17.7
Stress	9	26.5
Depression	5	14.8
Sadness	3	8.8
Anxiety	2	5.9
Guilt	1	2.9
Confuse	1	2.9
Nothing	7	20.2
Total	34	100

Note. Nine family members stated they had more than one emotional feelings

Table 31 shows that majority of family members stated they felt emotional and their emotions included stress, shock, depression, sadness, anxiety, guilt and confusion ((f=9), (f=6), (f=5), (f=3), (f=6), (f=2), (f=1) and (f=1) respectively) while seven family members stated that they did not feel any emotional feelings because they knew the condition of their spouse.

4.2.6.2. Findings related to the getting support after emotional feelings

Table 32. Getting support

	People with physical disability		**Family**		**Total**	
Support	**f**	**%**	**f**	**%**	**f**	**%**
Family	13	52	2	8.7	15	31.3
Turn to Allah	8	32	7	30.4	15	31.3
Teacher	2	8	-	-	2	4.1
Friends	2	8	-	-	2	4.1

community	-	-	8	34.8	8	16.7
relatives	-	-	6	26.1	6	12.5
Total	25	100	23	100	48	100

Note: Three family members stated that got support more than one source

Majority of the people with physical disabilities (f=13) expressed that they got support from their families when they had any emotional difficult while the lowest group of participants mentioned that they got support from their friends and their teachers.

One participant stated that he got moral support from his family members as indicated bellow:

"Every time i feel good things or thinking bad way, all my family members give me moral support, specially my mother" (PPD 24)

Differently, Majority of the family members (f=8) expressed that they got support from communities including neighbors and religion leaders while seven family members stated that when they feel difficulties, they return to Allah, followed by two family members who said that they got support from their relatives while six participants mentioned that they got support from themselves and they help each other in the family.

One family member said that they got support from imam as mentioned;

" Mashaallah, we got moral support from Imam, without his moral support we could not with coping our child" (M/P 16).

4.2.7. Findings related to the disability policy and rights

4.2.7.1. Findings related to the knowledge about the legal rights of people with disabilities

Table 33. Knowledge about the legal rights of people with disabilities

		People with physical disability		Family		Total	
Category	**Codes**	**f**	**%**	**f**	**%**	**f**	**%**
Social rights	Education	3	10.7	4	18.1	7	14
	Health	3	10.7	3	13.6	6	12
	Job	1	3.6	1	4.5	2	4
	Own family	-	-	2	9.1	2	4
Psychological rights	Support	8	28.6	3	13.6	11	22
	Respect	3	10.7	1	4.5	4	8
I don't know	I don't know	10	35.7	8	36.6	18	36
Total		28	100	22	100	50	100

Note. three persons with physical disabilities and two families stated that people with disabilities have rights more than one

Table 33 shows that majority of the people with physical disabilites (f=10) have no idea of the legal rights of people with disabilities while some participants said that they know that people with disabilities have same rights like people without disability, such as attending schools, getting health services and job opportunities. Another group of participants said they know people with disabilities have rights to get support and respect. Similarly, majority of the family members (f=8) have no idea of the legal rights of people with disability while ten family members said that they know that people with disabilities have same rights like people without disability, such as attending schools, get health services and job opportunities. Four family members said they know people with disabilities have rights to get support and respect.

4.2.7.2. Findings related to the Priorities and rights of people with physical disability given by Somali constitution

Table 33a. Priorities and rights of people with physical disability given by Somali constitution

	People with physical disability		Family		Total	
Somali Constitution	**f**	**%**	**f**	**%**	**f**	**%**
No	7	57.1	1	8.3	8	32
I don't know	6	42.9	11	91.7	17	68
Total	13	100	12	100	25	100

Table 331 shows that majority of the people with physical disabilities (f=7) stated that the Somali constitution has not given any priority and rights to the people with disabilities while six participants said that they don't have any opinion about that.

One participant indicated that Somali Constitution did not give any priority to the people with special needs, vase versa it denied their rights;

"Somali Constitution do not recognize the rights of people with special needs and do give any priority to participate social activities like political decisions…" (PPD 7).

Differently, majority of the family members (f=11) stated that they do not know the special rights and priorities that Somali constitution has given to people with disabilities while one family member said that the Somali constitution has not given any priority and rights to the people with disabilities.

4.2.8. Findings related to the impact of disability on the family life

Table 34. Impacts of disabilities on the family life

Impacts	**f**	**%**

Positive impact	10	45.5
Negative impact	8	36.4
Not impact	4	18.1
Total	22	100

Note. Two family members stated that disability has both positive negative impact on their lives.

Majority of the family members (f=10) stated that disability has positive impact on their lives, as one family member narrated below;

"After we gave birth to a child with disability, our relationship become very strong, and we made all efforts to give him all the care and support he will need so that he can live independently in the future" (M/P 13).

While eight family members said that disability has negative impact on their lives in case of financially, emotionally and life style of the family as one of the responses mentioned below;

"*It has negative impact because it changes all family member's happiness into sadness" (M/P 12)*

And other family member said;

"*disability has negative impact to our daily life, because I was working before our child become disabled, after that I stopped work and I take care of him"(M/P 9)*

The least group of family members (f=4) stated that disability has no impact on their lives.

4.2.9. Findings related to the community perceptions about the families haves people with physical disability

Table 35. Community perceptions on the family

Perceptions	f	%
Support	11	52.4
Discriminate	2	9.5
Love	1	4.8
Respect	7	33.3
Total	21	100

Note. One family member stated that community are respecting and supporting their family

Majority of the family members (f=11) stated the community are offering moral support to their families, seven family members stated that the community is respecting their family, followed by two family members who stated that the community discriminate their families because of the disability while one family member stated that the community shows love to his/her family.

4.2.10. Findings related to the hopes and dreams of people with physical disabilities

Table 36. Hopes and plans of people with physical disabilities

		people with physical disability		family		Total	
Category	**Codes**	**f**	**%**	**f**	**%**	**f**	**%**
Educational degree	PhD holder	4	16	-	-	4	8.3
	Lawyer	2	8	1	4.3	3	6.2
	Politician	2	8	-	-	2	4.2
	Doctor	-	-	2	8.7	2	4.2
	BA	-	-	1	4.3	1	2.1
Good life	Independent life	9	36	7	30.5	16	33.3
	Having own	3	12	6	26.1	9	18.8

	family						
Economic success	Have own business	4	16	2	8.7	6	12.5
Healthful	Get surgical operation	-	-	4	17.4	4	8.3
To work here after	To work here after	1	4	-	-	1	2.1
Total		25	100	23	100	48	100

Note. Three family members hoped for their family members more than one wishes.

As seen in table 36 majority of the people with physical disabilities (f=9) who were interviewed in this study had hope that they will live independently without needing any help from others, only one person was interviewed in this study said that he/she hopes to find jobs.

Similarly, majority of the family members (f=7) who were interviewed in this study had hope about their family members with disabilities to live independently without needing any help from others, the lowest group of family members (f=1) interviewed in this study said that they hope that their family members with disabilities will have educational degree from business administration and law faculties.

CHAPTER 5: DISCUSSIONS

This chapter aims to discuss the health services, educational, economical, environmental, social and emotional challenges faced by people with physical disabilities. The discussion also covers the disability rights and policy, effects of the disability on family life treatment by the community and dreams and hopes of people with physical disability.

The study revealed that majority of the participants has deformity of both legs. The participants with physical disabilities knew the specific time in which their disability occurred while majority of the family members did know when exactly the disability occurred because some of the family members were not present during their childhood. Some of the physical disability was found to be caused by polio.

The findings of the study revealed that people with physical disabilities faced with certain health services needs which includes orthopedic surgery, wheelchair, artificial legs and physiotherapy, the respondents also revealed that even though there are certain health services in Somalia it is hard to access them due to some reasons. The finding of this study is similar to the one conducted by Technical Assistance and Training System **(**2009) which also found out that some disabilities require extraordinary medical intervention and support while others may require adoptive or assistive equipment like wheelchair, prosthesis arm or leg, hearing aid, braille, sticks and so on while some people with disabilities need intensive behavior interaction.

Insufficient fund is one of the major reasons why people with physical needs cannot acquire their health service needs since the services are very expensive. Environmental factors like transportation and construction of buildings also plays a role in the accessibility of the health services by people with physical disabilities. The other reasons linked to the health services challenges included unavailability of certain health services in Somalia which normally force people with physical disabilities to consider travelling to other countries for services, which is also difficult in most cases due to funding problems. Similarly a study by Groce (2004) found out that "social, education

and economic challenges are far more pressing issues for many people with disabilities than medical issues; however the availability of health and rehabilitative care and prosthetic devices need to be singled out both due to lack of such services and social and economic discussions about disabled people are side tracked by their presumed medical or rehabilitative needs" (p.11).

In this study majority of the respondents stated that there are no available schools for people with disabilities as most of the people with physical disabilities attend normal schools which do not benefit them because they were not designed to meet their needs. Due to the fact that there are no schools designed for people with physical disabilities some of them do not attend school. In agreement with this finding, a study by Joubish & Khurram (2011) discussed that the majority of people with disabilities do not attend educational institutions; many of individual living with disabilities have never got benefits from school or reached until primary. This indicated and agrees with the UNESCO's 2011 estimation on the literacy of people with disabilities, and found out that the literacy rate for people with disabilities in the world is only 3 percent while the rate for woman with disabilities in comperaing with men with disabilities hovers closer to 1 percent.

Transport and insufficient funds were given as the reasons for why the people with physical disabilities did not attend school. Those who attended schools, it was found out that it had positive effect on them as most of them are able to live independently and also some of them have their own families. UNESCO (2011) explained that there are number of barriers for the inclusion of person with disability in ordinary schools such as negative attitude of society to education of person with disabilities, physical barriers creating inaccessibility to student with physical disabilities, rigid, inflexible and centrally imposed curriculum abilities and attitudes of teacher, socioeconomic factors, lack of funding for infrastructures and teaching material and educational policies for the country. Some family members stated that their relatives with physical disability did not attend any school because they feel that it is not important while some are not aware of the schools for people with special needs.

Similarly, UNICEF (2013) reported that there are many barriers that impede access of young persons with disabilities to education which include discriminations, stigma and prejudice coming from some teachers, parents and children without disabilities, physical inaccessibility. Furthermore, some parents give more priority for person without disabilities for educational opportunities than for young people with disabilities because they think that education will be less important for the young persons with disabilities.

Furthermore, the study revealed that the interviewed family members are of the view that there are no available job opportunities for people with disabilities while people with physical disabilities stated that there are few job opportunities. This was also proven by the study of Potts (2005) that discussed persons with disabilities typically face extraordinary challenges in finding job opportunities or job training because of their disabilities. The shortage of job opportunities was linked to the persons' disability. Those who said that there are job opportunities they take advantage of the opportunities as they stated that they do apply for the jobs in most cases. It was also found out that even though it is said that the disability has an effect on the job opportunity, people with disabilities still gets the same salary with those without disabilities. WHO report on disability in 2011 noted that although people with disabilities do perform as any other individuals without disabilities at work when given the opportunity; there is systematic discrimination for them in employment.

People with disabilities are facing some environmental challenges on daily basis. The study revealed that the homes of people with physical disabilities, the public buildings, roads and transportations are not suitable for people with disabilities because they do not cater for their needs as they do not have ramps and elevators. Similarly, Beresford (2007) argued that the problems of built environment are not just in institutions but in homes too whereby the movement of people with disabilities is usually restricted in the name of safety. The reasons given by the respondents for the poorly constructed roads and buildings is that the Somali people are not aware of the needs of the people with disabilities in general. A study conducted in some regions in US found that people with disabilities are often denied their suggest for acceptable and

accessable accommodations needed to make them easily accessable to the available houses (Turner et al., 2005).

Moreover the results have proven that the family members, neighbours and community members have good relations with people with physical disabilities. The good relations can be linked to the participation in social activities like competitions and charity works. Despite majority of the respondents saying that the relations are good, there are those who stated that negative relations do exists.

The negative relations can be linked to asocial behaviours since some of the people with physical disabilities do not take part in social activities. The disability was also found to have less effect on the people with physical disabilities before marriage and after marriage, this can be explained by the ecological systems theory under the chronosystem structure which explains that as the person transit from one stage to another there are certain factors that affect them and in this study marriage was found to be somehow affected by disability. Similarly, Hallum (1995) discussed that some people have negative attitudes towards ability of the people with disability to marry and they have some views including that persons with disability have no interest in sex, or are interested but unable, or sexually interested but to be feared.

In line with this study, a survey conducted in UK found out that many people with disabilities have been challenged with issues of isolation, discrimination etc. Also, the family of the disabled people can meet negative attitudes, prejudice, poverty, and they can be excluded from social activities (United Kingdom Strategy Unit, 2005). Similarly, in 2011 WHO reported that the attitudes of family members and teachers influence the inclusion of children with disabilities in inclusive educations. Dinos et al., (2004) conducted a qualitative study in England and found out that people with disabilities and families become unwilling to search for support or participate in social activities because of stigma. And also they discussed that stigma can lead persons with disabilities to poor adherence, stress and uncomfortable conditions.

Majority of the respondents are faced with negative emotional challenges as they are usually teased and called with bad names mostly by children almost every day.

Similarly, Gobalakrishnan (2013) stated that the biggest problem that person with disabilities face is misperception from the society that ignore the ability of disabled people, and teasing or calling names to the persons with disability make them to feel excluded from the community.

The family members also showed negative emotional reactions after they found that their relatives have disabilities some of the emotions such as anger, stress, shock and depression. Bailey et al., (2006) also discussed that some family members might have negative feelings like anger, anxiety, guilt, stress, despair or even depression. Bailey et al. also explained that although there are natural emotions faced by all people in daily lives, for the families which have members with disabilities it is more and the persistence of these feelings can decrease positive coping, adaptation and enjoyment of their life. People with physical disabilities get their support from family members, Allah ,teachers and friends while the family members get support from the community, Allah and the relatives.

People with physical disabilities and their family members' majority of them they do not have knowledge about the disability rights of people with disabilities in the Somali constitution; this could be because in Somalia disability awareness is not taken seriously. Also the Constitution of Somalia has mentioned the word disability three times only (Somali Constitution, 2012). The first one was mentioned two times in chapter two: *fundamental rights and the duties of the citizen*, on the title "General Principles of Human Rights, article 11: Equality", where it is stated that "people with *disabilities* will not be discriminated against and they shall have same rights and duties like people without *disabilities*, and also they shall have equal access to the available services". The second is mentioned in the same chapter but under the title "Rights, Basic Personal Liberties and Limitations, article 27: Economic and Social Rights", where it is stated that "people with *disabilities* shall be provided with appropriate economic support to reduce some of the challenges they face" (Somali Constitution, 2012).

The study revealed that majority of the family members are of the view that disability have positive impacts on the family because after the child was born their

relationships were strengthened while those who said disability have negative effects they stated that it is difficult to take care of the child with disability because of financial issues. Disability sometimes can create negative impact on the family relations like when the family members come together to talk about common causes of disability or important issues concerning the health of child with disabilities (Bailey et al., 2006). Prolonged care for a child with disability can have impact on the parent's life style, especially when the parents become retired (Hallum, 1995). The family members also stated that the community have positive perceptions towards their families as they show support and respect them, although some of the community members do discriminate them.

Majority of family members hope that their family members with disability will live independently and also the people with disabilities dream was to live independently and also hope that they will be able to study and obtain some degrees. People with physical disabilities just have hopes and dreams like people without disabilities, as indicated by the study of Hallum (1995), which found out that most people with physical disabilities hope to get education, job opportunities, be independent from others help and get their own family. Similarly as World Vision International (2015) interviewed different children with disabilities in the world by asking their dreams and hobbies for the future, and they answered some dreams like being a doctor, teacher and helping others.

CHAPTER 6. CONCLUSION AND RECOMMENDATIONS

6.1. Conclusion

In conclusion it can be argued that there are many challenges faced by people with physical disabilities in their daily lives, and most of the people with physical disabilities cannot obtain basic services including sufficient health services, education, job opportunities, accessibility and social participation. These have negative impacts on the people with physical disabilities and lead to exclusion from the society.

6.2. Recommendations

6.1. Service delivery

- The government should make sure that the public buildings, transportations and roads are disability friendly.
- Raise awareness about disability
- Come up with suitable hospitals and schools that cater for people with physical disabilities.
- Come up with more social activities for person with physical disabilities
- The organizations that deals with people with disabilities should make sure that all people with disabilities are invited to the social activities.
- The government should raise awareness about Polio vaccine.
- The governe should riase awarensess about the health impact of spinal cord injury and ways to avoid the causes of spinal cord injury.

6.2. Policy laws

- The Somali government should come up with disability policy

- The constitution of Somalia should review its constitution regarding people with disabilities,

6.3. Research

- Future studies should be conducted in other parts of Somalia on this topic
- In future the researchers should focus on specific challenges and possible solutions.
- Quantitative study should conduct on this topic.

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APPENDIXES

Appendix I: Interview Guides
Interview Guide for Person with Disabilities

My name is Aweis Ahmed Mo'allim Abdullahi. I am doing master in Interdisciplinary Disability Studies in Trakya University, in Turkey. I am currently conducting research on the challenges faced by people living with disability in their daily lives. I would be thankful if you could help me to make this research a success. If you are willing to participate in this study know that the information you share will be treated with the outmost confidentiality. Now I'm starting to record sound with your permission. Thank you in advance.

1. How old are you?

2. What is your father's the highest level of Education?

3. What is your father's occupation?

4. What is your mother's the highest level of education?

5. What is your mother's occupation?

6. What is your marital status?

7. What is the highest level of education you attained?

8. What is your occupation?

9. Who is the primary breadwinner in your household?

Probe9.1: What is his/her occupation?

10. What type of disability do you have?

Probe10.1: When did the disability occur?

Probe10.2: What caused this disability?

Questions for the Aim 1: What are the health services challenges that people with physical disabilities face?

1. What are your disability's health service needs?

Probe3.1: Is your health services needs covered by the available health service facilities?

Probe3.2: If it's available have you used them before?

Alternative1: What did you use the service for? Explain your answer

Alternative2: if no, why?

2. Does anything prevent or discourage you from seeking health services?

Probe2.1: if yes, explain.

Questions for the Aim 2: What are the educational challenges that people with physical disabilities face?

1. Is there any educational institutions for persons with physical disabilities in your community?

Probe1.1: if yes, what type of institution is available?

Probe1.2: Are you attending these institutions or have you attended these institutions?

Alternative1.1: If you did not attend or do not attend these educational institutions, can you explain the reasons for not benefiting from this educational institution / institutions?

2. In general, do you attended/attending any educational institution (Normal schools)?

Alternative2.1: If yes, which kind of educational institutions do you benefit/benefiting from?

Alternative2.1: If no, can you explain the reasons?

3. Does the educational institutions meet the needs of the disability?? Explain your answer.

4. How does your education affect your daily life?

Questions for the Aim 3: What are the economical challenges that people with physical disabilities face?

1. Is there any job opportunity for people with physical disabilitieswhere you live?

Probe1: if yes, have you applied?

Alternative1: If yes, have you faced any difficulties during application process? Explain.

Alternative2: if no, why have you not applied?

2. If you are working, are you paid a salary equal to people without disabilities?

3. Do you think your disability affects your chances of finding a job? Explain.

Alternative3.1: If you are not working, do you think your disability will affect your chances of finding a job?

Questions for the Aim 4: What are the environmental challenges that people with physical disabilities face?

1.1. Is your home design suitable for you? Explain.

2.Does anything interfere with your access to the public sector or do you have difficulty accessing it?

Probe1.1: Transportation? Explain

Probe1.2: Roads? Explain

Probe1.3: Public Buildings? Explain

Probe1.4: If you have any other public problems, explain

Questions for the Aim 5: What are the social challenges that people with physical disabilities face?

1.Do you think your family behaves differently around you because of your disability?

Probe 1.1: Positive behavior:

Probe 1.1: Negative behavior:

2.Do you think your friends behave differently around you vbecause of your disability?

Probe 2.1: Positive behavior:

Probe 2.1: Negative behavior:

3.Do you think your community behaves differently because of your disability?

Probe 3.1: Positive behavior:

Probe 3.1: Negative behavior:

4.Have you ever participated in social activities in the past?

Probe4.1. If yes, what kind of social activities didyou participate in?

Probe4.2. Who sponsors the activity?

Probe4.1: if no, why did not participate?

5. currently, are you participating social activities?

Probe4.1. If yes, what kind of social events do you participating in?

Probe4.1.1: Who sponsors the activity?

Probe4.1: if no, why do not participating?

6. Does (Did) your disability affect your marriage decision? Explain your answer.

7. Did disability affect your life after marriage?

Questions for the Aim 6: What are the emotional challenges facing people with disabilities?

1. Have you ever been teased or called names?

Probe3.1: If so, by who?

Probe3.2: When?

Probe3.3: how did you feel?

2. Where do you get the support when you feel emotionally troubled? Explain.

Questions for the Aim 7: What are the opinions of the people with physical disabilities about the disability rights and policy?

1. What do you know about the legal rights of people with disabilities? Explain.

Probe 1.1: Do persons with disabilities have special rights and privileges granted by the Somali Constitution?

Probe1.1.1: If so, what are they?

Questions for the Aim 8: What are the hopes and dreams of the people with physical disabilities for the future?

1. What are your dreams and plans regarding education/schooling, employment/economic support, having a family of your own?

Closing: Thank you for participating, your information will not be misused in any way since this is confidential.

Interview Guide for Family Members

My name is Aweis Ahmed Mo'allim Abdullahi. I am doing masters in Interdisciplinary Disability Studies in Trakya University, in Turkey. I am currently conducting research on the challenges faced by people living with disability in their daily lives. I would be thankful if you can help me to make this research a success. If you are willing to participate in this study know that the information you share will be treated with the outmost confidentiality. Thank you in advance.

1. How old are you?

2. What is your marital status?

3. What is the highest level of education you attained?

4. What is your occupation?

5. Who is the primary breadwinner in your household?

Probe 5.1: what is his/ her occupation?

6. What is your relationship to the disabled person?

7. What type of disability does your family member have?

Probe 7.1: When did the disability occur?

Probe 7.2: What caused this disability?

Questions for the Aim 1: What do family members think about the health services challenges that people with physical disabilities face?

1. What is your family member with physical disability's health service needs?

Probe3.1: Is your family member's health service need available here?

Probe3.2: if it's available did he/she use them?

Alternative1: if yes, what purpose did he/she use it for? Explain your answer
Alternative2: if he/ she did not use them, what is the reason?

2.In your opinion does anything prevent or discourage your family member with physical disability from seeking healthservices?

Probe2.1: if yes, explain.

Questions for the Aim 2: What do family members think about the educational challenges that people with physical disabilities face?

1. Is there any educational opportunity for your family member with physical disability in your community?

Probe1.1: if yes, what type of school is available?

Probe1.2: Is your family member with physical disability attending these institutions or has he/she attended these institutions?

Alternative1.1: If he/she did not attend or does not attend these educational institutions, can you explain the reasons for not attending?

2. In general, does your family member with physical disability attend any educational institution (Normal schools)?

Alternative2.1: If yes, which kind of educational institutions does he/she benefit/benefiting from?

Alternative2.1: If no, do you explain the reasons?

3. Does the educational institutions meet the needs of your family member with disability? Explain your answer.

4.What are the effects of education on your family member with disability's life? Explain

Questions for the Aim 3: What do family members think aboutthe economical challenges that people with disabilities face?

1. Is there any job opportunity for people with physical disabilities in this community?

Probe 1.1: if yes, in which areas are the job opportunities available ?

Alternative1: have your family member with physical disability applied?

Alternative2: if no, why did he/she not apply?

2. Is your family member with disability working, is he/she being paid a salary equal to people without disabilities?

3. Do you think that the disability affects/affected your family member with disability's chances of getting employed? Explain

Questions for the Aim 4: What do family members think about the environmental challenges that people with physical disabilities face?

1.Is the design of your house suitable for yourfamily member with physical disability? Explain.

2. Does anything interfere with your family member with disabilityaccess to the public sector or does he/she has difficulty accessing it?

Probe 2.1: Transportation? Explain

Probe 2.2: Roads? Explain

Probe 2.3: Public Buildings? Explain

Probe 2.4: if he/she has any other public problems, explain

Questions for the Aim 5: What do family members think about the social challenges that people with physical disabilities face?

1.Do you think that other family members behave differently to your family member with physical disability because of his/her disability?

Probe 1.1: Positive behavior:

Probe 1.1: Negative behavior:

2.Do you think yourfamily member with physical disability's friends behave differently towards him/her because of his/her disability?

Probe 2.1: Positive behavior:

Probe 2.1: Negative behavior:

3.Do you think your family member with physical disability's community behaves differently towards him /her because of his/her disability?

Probe 3.1: Positive behavior:

Probe 3.1: Negative behavior:

4. Has your family member with physical disability ever participated insocial activities?

Probe 4.1: If yes, what kind of social activities did he/she participate in?

Probe4.2: Who sponsors the activity?

Probe4.3: if no, why have he/she not participated?

5. Isyour family member with disability participating insocial activities?

Probe 4.1: If yes, what kind of social activities does he/she participate in?

Probe4.2: Who sponsors the activity?

Probe4.3: if no, why does he/she not participate?

6. Does (did)disability affect the marriage decision of your family member with disability? Explain your answer.

7. Does disability affect yourfamily member with physical disability's life after marriage?

Questions for the Aim 6: What do family members think about the emotional challenges that people with physical disabilities face?

1. Have your family member with physical disability ever been teased or called names?

Probe3.1: If so, by who?

Probe3.2: when?

Probe3.3: how did you feel?

2. How did you feel when you first learned that your family member had a disability?

3. Where do you get the support when youare emotionally troubled with your family member with physical disability? Explain.

Questions for the Aim 7: What are the opinions of family members of the people with physical disabilities about the disability rights and policy?

1.What do you know about the legal rights of people with disabilities? Explain.

Probe 1.1: Do persons with disabilities have special rights and privileges granted by the Somali Constitution?

Probe1.1.1 : If so, what are they?

Questions for the Aim 8: How disability impact the life of family members

1. How does the disability affect your family life?

Questions for the Aim 9: How the community treats the family who has a person with disability?

1. How does the community perceive your family?

Questions for the Aim 10: What are the hopes and dreams of the family members with physical disabilities to their persons with physical disabilities for the future?

1.What are your dreams and future plans for your family member with disability regarding his/her education, employment or starting a family?

Closing: Thank you for participating, your information will not be misused in any way since this is confidential.

Appendix II: Consent form
Organization: University Research
Sponsoring Organization: Self Sponsored

Project: Challenges faced by people with physical disabilities in their daily lives; the case study of Mogadishu city

Note: Participants will be given a copy of informed consent information sheet and certificate of consent.

SECTION 1: Information Sheet

This information sheet is planned to provide you with information on the challenges faced by people with physical disabilities in their daily lives in Mogadishu, that you have been invited to take part in as a respondent.

Purpose: The study aims to find out the challenges faced by people with disability on their daily lives.

Type of Research

The information will be received through the use of a face to face interview which will be administered to people in their homes or other places. The researcher will read the interview questions and record the answers. The interview will include questions on challenges faces the people with physical disabilities.

Voluntary Participation

You are free not to participate in this interview if you are not wishing to do so. You may also choose to stop at any time when answering the interview questions. Participation is completely voluntary; if you agree to participate you will be asked to sign a copy of the certificate of consent form (See section 2 below). No consequences will occur whether you participate or not.

Confidentiality

The information you provide will not be shared with anyone as the answers recorded will be kept in a place where no one else can access them. You will not be required to identify yourself when answering the interview questions which also promotes confidentiality.

Sharing of Research Findings

The findings of this research will be kept at the Department of Interdisciplinary Disability Studies in Trakya University.

Who to contact

If you have questions you wish to ask now or later you may contact me at +252615983180/ +90 5061778086 or my supervisor Assistant Professor. Dr. Şahin DÜNDAR at + 90 5424926560.

SECTION 2: CERTIFICATE OF CONSENT

Location_____

I understand the purpose and procedures of this study. I understand that I will be asked questions about my health service challenges, my educational challenges, my economical challenges, my environmental challenges and my social challenges, I also understand that all the information I provide in this study will be confidential. I have had

the opportunity to ask questions and any questions I had were answered to my satisfaction.

I am voluntarily participating in this study and I understand that I can withdraw from the study at any time without any negative consequences.

Signature_____

Date_____

Time_____

Waraysi Quseeyo Qofka Naafada ah

Magaceygu waa Aweis Ahmed Mo'allim Abdullahi. Waxaan Master of Interdisciplinary Disability Studies ka samaynayaa Jaamacadda Trakya ee dalka Turkiga. Waxaan hada sameeynayaa cilmi-baaris ku saabsan dadka naafanimada la caqabadaha soo food saara inta ey ku guda jiraan nolol maalmeedkooda. Haddii aad iga caawiso si ay u guulaysato cilmi-baaristaan, aad baan kaaga mahadisaan naqi doonaa. Haddii aad diyaar u tahay ka qayb qaadashada daraasaddan, waa in aad ogaataa in macluumaadka aad ila wadaagto loola dhaqmi doonaa si gaar ah. Waad ku mahadsan tahay ka hor. Mahadsanid.

1.Meqo sano ayaad jirtaa?

2. Waa maxay heerka waxbarasho ee aabbahaa?

3. Waa maxay shaqada aabbahaa?

4.Waa maxay heerka waxbarasho ee hooyadaa?

5. Waa maxay shaqada hooyadaa?

6. Waa maxay xaaladdaada qoys/xaas ahaaneed?

7. Waa maxay heerkaaga waxbarasho?

8. Waa maxay shaqadaada?

9. Waa kuma qofka biilo reerkiinna?

Baaritaan 9.1: Maxuu ka shaqeeyaa qofkaas?

10. Cuuryaannimaada waa noocee/noocee?

Baaritaan 10.1: Goormee kugu dhacday?

Baaritaan 10.2: Maxaa sabab u ahaa?

Su'aalo quseeyo ujeedada 1aad: waa maxay dhibaatooyinka dadka baahiyaha gaarka ah qabo ey kala kulmaan goobaha adeegyada caafimaadka?

1. Waa maxay adeegga caafimaad oo ay u baahantahay cuuryaannimadaada?

Baaritaan 1.1: Adeegyada caafimaad ee aad u baahantahay, ma jiraan xarumo caafimaad ee bixiyo?

Baaritaan 1.2: Haddii ey jiraan xarumo caafimaad, horay ma u isticmaashay?

Badiil 1.2.1:Haddii jawaabtaadu Haa tahayse, ujeeddadee u isticmaashay? Sharrax jawaabtaada.

Badiil 1.2.2: Haddii jawaabtaada Maya tahayse, sabab? Caddeey jawaabtaada?

2. Ma jiraan caqabado hortaagan in aad hesho adeegyada caafimaad?

Baaritaan 2.1: Haddii ey haa tahay, sharrax?

Su'aalo quseeyo ujeedada 2aad: Waa maxay caqabadaha ay la kulmaan dadka naafada ah ee goobaha waxbarashada?

1. Degaanka aad ku nooshahay, ma jiraan machadyo waxbarasho oo loogu talagalay dadka naafada ah?

Baaritaan 1.1: Haddii ey haa tahay, waa sidee nooca machadyo waxbarasho ?

Baaritaan 1.1.1: Adiga goobaha waxbarasho maka faa'iideysatay/faa'iideysanaysaa? Sharrax.

Badiil 1.1. Haddii aadan ka faa'iideysan/ ka faa'iideysnooyinin sabab? Sharrax.

2. Si guud ahaaneed, Ma ka faa'iidaystaa/maka faa'iideysatay goobaha waxbarasho?

Baaritaan 2.1: Haddii ey haa tahay, waa nooceemachadka waxrasho ee aad ka faa'iideysatay/ka faa'iideysanooysaa?

Badiil 2.1: Haddii ey maya tahay, sababaha ma sharxi kartaa?

3. Macaahidda waxbarsho ee aad ka faa'iideysato ma daboolaan baahiyaha dadka naafada ah? Jawaabtaada ma sharraxi kartaa?

4. Aqoonta aad ka hesho machadka waxbarasho sidee bey noloshaada u saameysay/saameeynooysaa? Sharrax.

Su'aalo quseeyo ujeedada 3aad: Waa maxay dhibaatooyinka dhaqaale ee soo food saara dadka naafada ah?

1. Halka aad ku nooshahay ma leedahay fursado shaqo oo loogu talagalay dadka naafada ah?

Baaritaan 1: Haddii ey haa tahay, goobahee ayey ka jirtaa fursadaha shaqo?

Baaritaan 2: Fursadaha shaqo ee jiro ma codsatay?

Baaritaan 2.1: Haddii ey haa tahay, ma jiraa wax dhib ah oo aad la kulantay inti aad ku guda jirto howlaha codsiga shaqo?

Badiil 2: Haddii ey jwabaatadu maya tahay, maxaad u codsan weyday? Ma sharraxi kartaa?

2. Haddii aad shaqeynooysid, mushaarka aad qaadatid mala egyahay mushaarka dadka aan naafada aheyn?

3. Ma ku fakareysaa in naafanimadaada ey saameeyn ku leedahay marki laga hadlaayo fursadaha shaqo helidda? Ma sharraxi kartaa?

Badiil 3.1: Haddii aadan shaqeynooynin, ma u maleyneysaa in naafanimadaada ey saameeyn ku yeelan doonto marki laga hadlaayo fursadaha shaqo helida? Ma sharraxi kartaa?

Su'aalo quseeyo ujeedada 4aad: waa maxaaydhibaatooyinka deegaan ahaaneed oo ey la kulmaan dadka naafada ah?

1. Naqshadda gurigiinna u dhisanyahay munaasib makugu tahay? Sharrax.

2. Ma jiraan wax caqabado ah oo kaa hortaagan inaad gasho xafiisyada ama hay'adaha dowladda ama marki aad galeeysid ma la kulantaa dhibaatooyin? Sida:

Baaritaan 1.1: Gaadiidka:

Baaritaan 1.2: Wadooyinka:

Baaritaan 1.3:. Dhismayaasha Dowladda:

Baaritaan 1.4: haddii ey jiraan dhibaatooyin kale ee la xariira gaarida goobaha/xafiisyada dowladda, ma sharraxi kartaa?

Su'aalo quseeyo ujeedada 5aad: Waa maxay dhibaatooyinka bulshadeed ee soo food saara dadka naafada ah?

1. Ma u malaynaysaa naafanimadaada awgeed in qoyskaagu kuula dhaqmaan si goonni ah?

Baaritaan 1.1: habdhaqan wanaagsan:

Baaritaan 1.2: habdhaqan aan wanaagsaneyn:

2. Ma u malaynaysaa naafanimadaada awgeed in saaxibadaada kuula dhaqmaan si goonni ah?

Baaritaan 2.1: habdhaqan wanaagsan:

Baaritaan 2.2: habdhaqan aan wanaagsaneyn:

3. Ma u malaynaysaa naafanimadaada awgeed in bulshadaada kuula dhaqmaan si goonni ah?

Baaritaan 3.1: habdhaqan wanaagsan:

Baaritaan 3.2: habdhaqan aan wanaagsaneyn:

4. Horay ma uga qeyb gashay dhaqdhaqaaqyada/hawlo bulsho?

Baaritaan 4.1: Haddii ey haa tahay, howlo noocee ah ayaad ka qeyb gashay?

Baaritaan 4.2: Yaa maalgalinaayay howshaas?

Baaritaan 4.2: haddii ey maya tahay, maxaadan uga qeyb galin? Sharrax.

5. Hadda ma jiraan wax dhaqdhaqaaq/hawlo bulsho ah oo aad ka qeyb galooysid?

İnceleme4.1: Haddii ey haa tahay, dhaqdhaaqyo noocee ah ayad ka qeyb galooysaa?

Baaritaan 4.2: Yaa maalgalinooyo dhaqdhaqaaqa?

Baaritaan 4.2: Haddii aadan ka qeyb galooynin, maxaadan uga qeyb galooynin? Sharrax.

6. Naafanimadaada, sidee bey u saameysay/ saameeynooysaa go'aankaaga guur? Jawaabtaada ma sharraxi kartaa?

7. Naafanimadaada, sidee bey u saameysay/ saameeynooysaa waqtiga guurkaaga?

Su’aalo quseeyo ujeedada 6aad: Waa maxay dhibaatooyinka dareen ee dadka naafada ah la kulmaan?

1. Weligaa ma lagu caayay/lagu jeesjeesay ama ma laguugu yeeray magacyo naaaneys ah?

Baaritaan 1.1: Haddii ey haa tahay, yaa kugu yeeray?

Baaritaan 1.2: Goormee aheyd?

Baaritaan 1.3: Maxaa dareentay?

2. Dadkee ama halkeeka heshaa caawin marka aad dareen ahaan murugto? Ma sharraxi kartaa?

Su’aalo quseeyo ujeedada 7aad: Dadka naafada ah aqoon ma u leeyahihiin sayaasadaha loogu talogalaydadka naafada ah iyo xuquuqda ey leeyihiin?

1. Maxaad ka taqaanaa xuquuqda sharciga ah ee eey leeyhihiin dadka naafada ah?

Baaritaan 1.1: Dastuurka Soomaaliya, dadka naafada ah ma siinayaa xaq gaar ah iyo mudnaan?

Baaritaan 1.1.1: Haddii ey haa tahay, maxay yihiin?

Su’aalo quseeyo ujeedada 8aad: Waa maxay rajada iyo riyada mustaqbalka ee dadka naafada ah?

1. Iyada oo la tixgelinayo/fiiro gaar ah loo yeelanayo waxbarashada / tababarka, shaqada/taageero dhaqaale, iyo in aad yeelato qooys ku gaar ah, maxeey yihiin riyooyinka iyo qorshahaaga? Iyada oo la tixgelinayo

Soo afjarid: Waad ku mahadsantahay ka qayb qaadashadaada, macluumaadka aad bixisay si qaldan looma isticmaali doono.

Waraysi Quseeyo Qoyska Qofka Naafada ah

Magaceygu waa Aweis Ahmed Mo'allim Abdullahi. Waxaan Master of Interdisciplinary Disability Studies ka samaynayaa Jaamacadda Trakya ee dalka Turkiga. Waxaan hada sameeynayaa cilmi-baaris ku saabsan dadka naafanimada la caqabadaha soo food saara inta ey ku guda jiraan nolol maalmeedkooda. Haddii aad iga caawiso si ay u guulaysato cilmi-baaristaan, aad baan kaaga mahadisaan naqi doonaa. Haddii aad diyaar u tahay ka qayb qaadashada daraasaddan, waa in aad ogaataa in macluumaadka aad ila wadaagto loola dhaqmi doonaa si gaar ah. Waad ku mahadsan tahay ka hor. Mahadsanid.

1.Meqo sano ayaad jirtaa?

2. Waa maxay xaaladdaada qoys/xaas ahaaneed?

3. Waa maxay heerkaaga waxbarasho?

4. Waa maxay shaqadaada?

5. Waa kuma qofka biilo reerkiinna?

Baaritaan 5.1: Maxuu ka shaqeeyaa qofkaas?

6. Cuuryaannimaada waa noocee/noocee?

Baaritaan 6.1: Goormee kugu dhacday?

Baaritaan 6.2: Maxaa sabab u ahaa?

6. Waa maxay xiriirka qoys ahaaneed ee aad la leedahay qofkan naafada ah?

7. Waa noocee naafanimada heysata xubin ka mid ah qoyskiina?

Baaritaan 7.1: Goormee ayuu dhacday?

Baaritaan 7.2: Maxaa sabab u ahaa?

Su'aalo quseeyo ujeedada 1aad: waa maxay dhibaatooyinka qofka naafada ah ee qoyskiina ah uu kala kulmo goobaha adeegyada caafimaadka?

1. Waa maxay adeegga caafimaad oo ay u baahantahay cuuryaannimada xubinta qoskiina ka mid ah?

Baaritaan 1.1: Adeegyada caafimaad ee ay u baahantahay xubinta naadafada ah ee qoyskiina ka mid ah, ma jiraan xarumo caafimaad ee bixiyo?

Baaritaan 1.2: Haddii ey jiraan xarumo caafimaad, horay ma u isticmaalyay?

Badiil 1.2.1::Haddii jawaabtaadu Haa tahayse, ujeeddadee u isticmaalyay? Sharrax jawaabtaada.

Badiil 1.2.2: Haddii jawaabtaada Maya tahayse, sabab? Caddeey jawaabtaada?

2. Xubinta qoyskiina ka midka ah ee naafada ah ma jiraan caqabado ka hortaagan in u helo adeegyada caafimaad?

Baaritaan 2.1: Haddii ey haa tahay, sharrax?

Su'aalo quseeyo ujeedada 2aad: Waa maxay caqabadaha uu la kulmo qofka naafada ah ee qoykiina ah ee goobaha waxbarashada?

1. Degaanka aad ku nooshahay, ma jiraan machadyo waxbarasho oo loogu talagalay xubinta naafada ah ee qoyskiina ka mid ka?

Baaritaan 1.1: Haddii ey haa tahay, waa sidee nooca machadyo waxbarasho ?

Baaritaan 1.1.1: xubinta naafada ah ee qoyskiina ka midka ah, goobaha waxbarasho maka faa'iideystay/faa'iideysanooyaa? Sharrax.

Badiil 1.1. Haddii uusan ka faa'iideysan/ ka faa'iideysnooyinin sabab? Sharrax.

2. Si guud ahaaneed, xubinta naafada ah ee qoyskiina ka midka ah, ma ka faa'iidaystaa/maka faa'iideysanooyaa goobaha waxbarasho?

Baaritaan 2.1: Haddii ey haa tahay, waa noocee machadka waxrasho ee uu ka faa'iideystay/ka faa'iideysanooyo?

Badiil 2.1: Haddii ey maya tahay, sababaha ma sharxi kartaa?

3. xubinta naafada ah ee qoyskiina ka midka ah, Macaahidda waxbarsho ee uu ka faa'iideysto ma daboolaan baahiyahiisa naafo ahaaneed? Jawaabtaada ma sharraxi kartaa?

4. Aqoonta uu ka helo machadka waxbarasho sidee bey noloshiisa u saameysay/saameeynooysaa? Sharrax.

Su'aalo quseeyo ujeedada 3aad: Waa maxay dhibaatooyinka dhaqaale ee soo food saara qofka naafada ah qooyskiina ah?

1. Halka aad ku nooshahay ma leedahay fursado shaqo oo loogu talagalay dadka naafada ah?

Baaritaan 1: Haddii ey haa tahay, goobahee ayey ka jirtaa fursadaha shaqo?

Baaritaan 2: Fursadaha shaqo ee jiro ma codsaday?

Baaritaan 2.1: Haddii ey haa tahay, ma jiraa wax dhib ah oo aad la kulmay inti uu ku guda jiray howlaha codsiga shaqo?

Badiil 2: Haddii ey jwabaatadu maya tahay, maxuu u codsan waayay? Ma sharraxi kartaa?

2. Haddii uu shaqeeyo qofka naadafada ah ee reerkiina ka tirsan, mushaarka uu qaadato mala egyahay mushaarka dadka aan naafada aheyn?

3. Ma ku fakareysaa in naafanimada qofka naafada ah ee reekiina ka tirsan ey saameeyn ku leedahay marki laga hadlaayo fursadaha shaqo helidooda? Ma sharraxi kartaa?

Badiil 3.1: Haddii uusan shaqeynooynin, ma u maleyneysaa in naafanimadiisa ey saameeyn ku yeelan doonto marki laga hadlaayo fursadaha shaqo helidooda? Ma sharraxi kartaa?

Su'aalo quseeyo ujeedada 4aad: waa maxaaydhibaatooyinka deegaan ahaaneed oo uu la kulmo qofka naafada ah qoyskiina ka tirsan?

1. Naqshadda gurigiinna u dhisanyahay munaasib maku tahay qofka naafada ah ee reerkiina ka tirsan? Sharrax.

2. Qofka naadafada ah ee reerkina ka tirsan ma jiraan wax caqabado ah oo ka hortaagan in uu galo xafiisyada ama hay'adaha dowladda ama marki uu galaayo ma la kulanmaa dhibaatooyin? Sida:

Baaritaan 1.1: Gaadiidka:

Baaritaan 1.2: Wadooyinka:

Baaritaan 1.3:. Dhismayaasha Dowladda:

Baaritaan 1.4: haddii ey jiraan dhibaatooyin kale ee la xariira gaarida goobaha/xafiisyada dowladda, ma sharraxi kartaa?

Su'aalo quseeyo ujeedada 5aad: Waa maxay dhibaatooyinka bulshadeed ee soo food saara qofka naafada ah ee qoyskiina ka tirsan?

1. Ma u malaynaysaa in qofka naadafa ah naafanimadiisa awgeed eey xubnaha kale ee qoyska ula dhaqmaan si goonni ah?

Baaritaan 1.1: habdhaqan wanaagsan:

Baaritaan 1.2: habdhaqan aan wanaagsaneyn:

2. Ma u malaynaysaa in qofka naafada ah ee qoyskiina ka tirsan, naafanimadiisa awgeed eey saaxibadiisa ula dhaqmaan si goonni ah?

Baaritaan 2.1: habdhaqan wanaagsan:

Baaritaan 2.2: habdhaqan aan wanaagsaneyn:

3. Ma u malaynaysaa in qofka naafada ah ee qoyskiina ka tirsan, naafanimadiisa awgeed eey bulshada ula dhaqmaan si goonni ah?

Baaritaan 3.1: habdhaqan wanaagsan:

Baaritaan 3.2: habdhaqan aan wanaagsaneyn:

4. Qofka naafada ah ee qoyskiina**,** horay ma uga qeyb galay dhaqdhaqaaqyada/hawlo bulsho?

Baaritaan 4.1: Haddii ey haa tahay, howlo noocee ah ayuu ka qeyb galay?

Baaritaan 4.2: Yaa maalgalinaayay howshaas?

Baaritaan 4.2: haddii ey maya tahay, maxuusan uga qeyb galin? Sharrax.

5. Hadda ma jiraan wax dhaqdhaqaaq/hawlo bulsho ah oo uu ka qeyb galooyo qofka naafada ah ee qoyskiina?

İnceleme4.1: Haddii ey haa tahay, dhaqdhaaqyo noocee ah ayuu ka qeyb galooyaa?

Baaritaan 4.2: Yaa maalgalinooyo dhaqdhaqaaqa?

Baaritaan 4.2: Haddii uusan ka qeyb galooynin, maxuusan uga qeyb galooynin? Sharrax.

6. Naafanimada, sidee bey u saameysay/ saameeynooysaa go'aanka guur ee qofka naafada ah ee qyskiina? Jawaabtaada ma sharraxi kartaa?

7. Naafanimada, sidee bey u saameysay/ saameeynooysaa waqtiga guurka ee qofka naafada ah ee qoyskiina?

Su'aalo quseeyo ujeedada 6aad: Waa maxay dhibaatooyinka dareen ee qofka naafada ah ee qoykiina ka tirsan la kulmo?

1. qofka naafada ee qoysiina weli ma la caayay/lagu jeesjeesay ama ma loogu yeeray magacyo naaaneys ah?

Baaritaan 1.1: Haddii ey haa tahay, yaa ugu yeeray?

Baaritaan 1.2: Goormee aheyd?

Baaritaan 1.3: Maxaa dareentay?

2. Dadkee ama halkeeka heshaa caawin marka aad dareen ahaan murugto? Ma sharraxi kartaa?

3. Sidee baad dareenty marka aad ogaatay in xubin qoyska ka mid ah naafo noqotay? Sharax.

4. Marki aad dareneto dhibaatoyin la xariira qofka naadafada ah ee qoyskiina, taageero ma heshay/heshaa? Qofkee ama halkeed ka heshaa? Sharax.

Su'aalo quseeyo ujeedada 7aad: Waa maxay ra'yiga xubnaha qoyska dadka naafada ah oo ku saabsan siyaasadda naafada ah?

1. Maxaad ka taqaanaa xuquuqda sharciga ah ee eey leeyhihiin dadka naafada ah?

Baaritaan 1.1: Dastuurka Soomaaliya, dadka naafada ah ma siinayaa xaq gaar ah iyo mudnaan?

Baaritaan 1.1.1: Haddii ey haa tahay, maxay yihiin?

Su'aalo quseeyo ujeedada 8aad: Naafanimada xubninta naadafa ah ee qoyska ka tirsan, sida beey u saameeyaa nolosha xubnaha qoyska?

1. naafanimada, sidee bey u saameysay nolosha reerkiina? Ma sharrixi kartaa?

Su'aalo quseeyo ujeedada 9aad : Sidee beey bulshada ula dhaqmaan qoyska leh qof naafo?

1. Sidee bulshada aad la nooshahay u arkaan qoyskaaga? Ma sharixi kartaa?

Su'aalo quseeyo ujeedada 10aad: Waa maxay rajada iyo riyada mustaqbalka ee xubnaha qoyska ka mid ah ee u rajeynaayanaa xubnaha ee naafada ah qoyska?

1. Iyada oo la tixgelinayo/fiiro gaar ah loo yeelanayo waxbarashada / tababarka, shaqada/taageero dhaqaale, iyo in uu yeesho qofka naafada ah ee qoyskiina qooys ugaar ah, maxeey yihiin riyooyinka iyo qorshahaaga? Sharax.

Soo afjarid: Waad ku mahadsantahay ka qayb qaadashadaada, macluumaadka aad bixisay si qaldan looma isticmaali doono.