# 2024

# KCDC MAPPING SURVEY REPORT



#### **SURVEY BY KCDC**

Compiled by : Okonda Samwel

Ikhabi

8/6/2024

#### Contents

Cł	napter One	3
Int	roduction	3
Ok	ojectives of the Survey	3
Вс	ıckground Context	5
Cł	napter Two: Data Description	7
Ar	nalysis	8
	Distribution of respondents per sub-county, disability types, gender distribut	ion.8
	Disability types in Kakamega County	8
	Gender Distribution	8
	Age distribution	9
	Gender Distribution Across Education Levels	15
	Marital status	17
	Registration with Disability Groups	18
	Top 10 Organizations based on number of PWDs registered	19
	DISABILITY DATA	20
	Statistics on levels of difficulty in seeing	20
	Statistics on levels of difficulty in hearing	21
	Statistics on levels of difficulty walking or climbing stair cases	22
	Statistics on levels of difficulty remembering or concentrating	23
	Levels of Difficulty in Self-Care	24
	Table: Levels of Difficulty in Self-Care	25
	Difficulty Communicating Due to Physical, Mental, or Emotional Health  Condition	25
	Types of Disabilities Reported	26
	SECTION B: ACCESSIBILITY AND HOME OWNERSHIP DATA	27
	House ownership	27
	Challenge in accessing place of residence	30
	Effort Required to Get In and Out of Where You Live	30
	Challenges Accessing Public Buildings	31
	Challenges Accessing Public Buildings	31



Difficulty Accessing Public Services
SECTION C: SOCIAL INTERACTION
Interaction with people33
SECTION D: SUPPORT
Children Dependents34
Aide Support35
Person providing support36
Experience managing own care37
SECTION E: ECONOMIC STATUS
Employment Stats
Public Opinion impact on working39
Does Public Perception About You Stop You From Working?
Promotion Opportunities40
Public Perception impact on learning new things40
Safety Assurance in Neighborhoods41
Safety in public places43
Specify How You Were/Are Treated44
Safety at Home – Has the respondent ever felt unsafe at home 44
PERSONAL OPINIONS
Chapter Three47
Findings47
Chapter Four49
Recommendations49
Appendix51
Specific disability table51



#### Chapter One

#### Introduction

This report provides a comprehensive analysis of the support needs, accessibility challenges, and social experiences of persons with disabilities (PWDs) in Kakamega County. The primary purpose of the report is to offer an in-depth understanding of the current state of support systems, accessibility, and social inclusion for PWDs within the county. It aims to identify existing gaps and areas for improvement, with a particular focus on home ownership, ease of access to public services, social interactions, and the availability of support. The scope of the report encompasses a detailed exploration of various aspects of the lives of PWDs, highlighting the unique challenges they face and proposing recommendations for enhancing their quality of life and integration into the broader community.

#### Objectives of the Survey

The survey conducted in Kakamega County aims to achieve the following detailed objectives, with a focus on understanding and addressing the unique needs of Persons with Disabilities (PWDs):

#### 1. Create a Comprehensive Database of PWDs:

Establish an accurate and comprehensive database of PWDs across Kakamega County. This database will facilitate the identification of PWDs, enable efficient service delivery, and inform referrals for emerging opportunities, thereby ensuring that PWDs are included in various community activities and programs.

# 2. Assess Participation in Socioeconomic Activities:

 Evaluate the extent to which PWDs participate in socioeconomic activities compared to persons without disabilities. This assessment aims to identify barriers to participation, understand the challenges



faced by PWDs in accessing economic opportunities, and explore ways to promote inclusive participation in the county's socioeconomic life.

#### 3. Identify Special Needs and Service Gaps:

Document the specific needs of PWDs, including healthcare, education, employment, and social services. The goal is to identify gaps in current service provisions and to develop targeted programs and interventions that cater to the diverse and unique needs of PWDs.

### 4. Enhance Service Delivery:

o Inform the development and implementation of tailored services and programs that address the identified needs of PWDs. This objective focuses on ensuring that PWDs have equitable access to services and resources, enhancing their quality of life and overall well-being.

#### 5. Support Policy Development and Advocacy:

 Provide a factual basis for advocating for the rights and inclusion of PWDs in all aspects of community life. The data collected will support policy-making, resource allocation, and the development of legal frameworks that protect and promote the rights of PWDs in Kakamega County.



#### **Background Context**

In Kakamega County, Persons with Disabilities (PWDs) face a range of challenges that impact their daily lives and overall well-being. These challenges can be categorized into four main areas: barriers to access, existing support systems, accessibility issues, and cultural and social perceptions.

- 1. Challenges Faced by PWDs: PWDs often encounter significant barriers in accessing education, healthcare, employment, and social services. These barriers are further compounded by physical, attitudinal, and systemic obstacles that limit their full participation in society. Social isolation, discrimination, and a lack of opportunities for engagement are common issues faced by PWDs in the county.
- 2. Existing Support Systems: While Kakamega County has support systems provided by both governmental and non-governmental organizations, their reach and effectiveness are often limited. There is a notable gap in resources and support services available to PWDs. Additionally, the general population and service providers may lack awareness and understanding of disability issues, which affects the quality and availability of support.
- 3. Accessibility Issues: Physical accessibility remains a significant concern for PWDs in the county. Many public and private facilities lack essential accommodations, such as ramps, accessible restrooms, and transportation options. These deficiencies restrict the mobility and independence of PWDs, making it challenging for them to access necessary services and participate fully in daily life.
- 4. **Cultural and Social Perceptions**: Cultural beliefs and social stigmas surrounding disability further marginalize PWDs. Negative attitudes and misconceptions contribute to their exclusion from social, educational, and economic opportunities. These perceptions not only affect the self-esteem



and mental health of PWDs but also hinder efforts to create an inclusive and supportive environment.



#### Chapter Two: Data Description

#### • Section A: Personal Information

 Age, gender, marital status, group affiliations, academic qualifications.

#### • Section B: Disability Data

 Types of disabilities, difficulties in daily activities, accessibility challenges.

### • Section C: Accessibility and Home Ownership Data

 Home ownership status, accessibility challenges at home, public service access.

#### • Section D: Social Interaction

o Level of interaction with the community, desire for social interaction.

#### Section E: Support Systems

 Types of support received, sources of support, ease of managing personal care.

#### • Section F: Economic Status Data

 Employment status, impact of public perception on employment and learning, chances of promotion.

#### • Section G: Discrimination and Abuse Data

o Experiences of discrimination, feelings of safety, experiences of abuse.

#### • Section H: Personal Opinions

o Self-efficacy, independence, perception of equality in treatment.



Analysis

Distribution of respondents per sub-county, disability types, gender distribution.

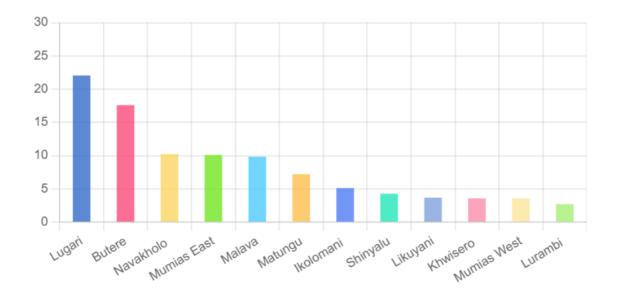
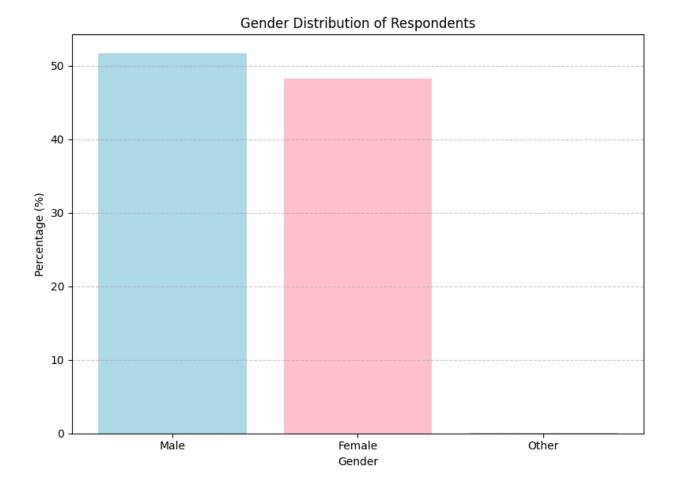


Figure 1 Distribution of respondents per sub-county

"The bar chart illustrates the distribution of survey respondents across various subcounties in Kakamega County. Lugari has the highest percentage of respondents at 42.7%, followed by Navakholo at 37.76%. The data indicates a varied representation from different regions, highlighting the geographical diversity in the survey. This distribution helps identify the areas with the highest concentration of PWDs and can guide resource allocation and targeted interventions."

Disability types in Kakamega County Gender Distribution





#### Figure 2 Gender Distribution

The bar chart shows the gender distribution of the respondents. Males constitute 57.03% of the surveyed population, while females make up 42.97%..

# Age distribution

This data provides a detailed overview of the age demographics among the Persons with Disabilities (PWDs) in the county. It shows that the largest groups are young adults (18-35 years), followed by middle-aged individuals (35-50 years) and



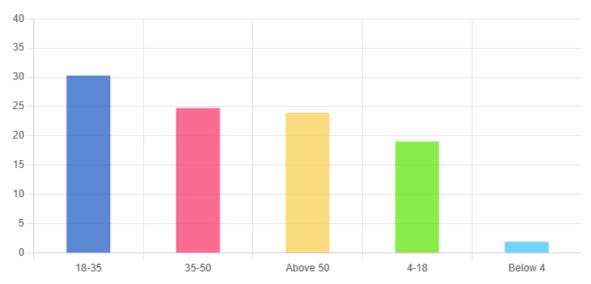


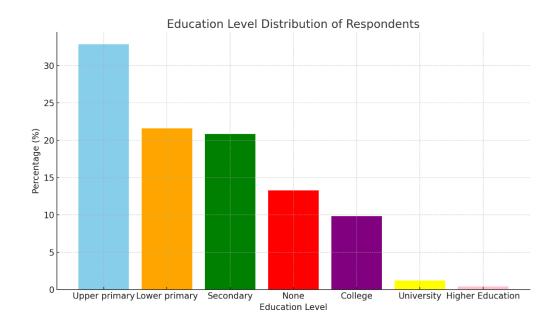
Figure 3 Age distribution

older adults (above 50 years). The distribution also includes children and adolescents, indicating a broad representation across all age groups.

Age Group	Quantity	Percentage
18-35	1240	30.31
35-50	1013	24.76
Above 50	980	23.96
4-18	779	19.04
Below 4	79	1.93

# Educational attainment.





The data shows that the majority of respondents have attained an education level of Upper Primary, followed by Lower Primary and Secondary education. A significant portion of the respondents, 13.27%, reported having no formal education. A smaller percentage pursued higher education, with 9.83% reaching college, 1.22% university, and only 0.42% achieving higher education beyond university.

This distribution highlights the varying levels of educational attainment among respondents, indicating a need for educational support and opportunities for those with lower levels of formal education.

Education Level	Frequency	Percentage
Upper primary	1343	32.83
Lower primary	884	21.61
Secondary	852	20.83
None	543	13.27

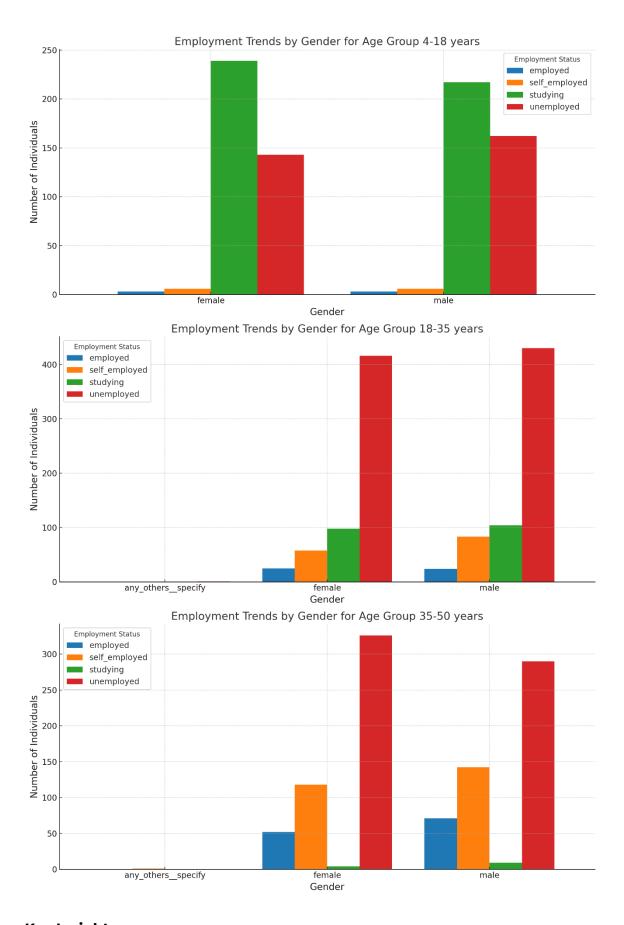
Education Lovel Erequency



Doroontago

College	402	9.83
University	50	1.22
Higher Education	17	0.42





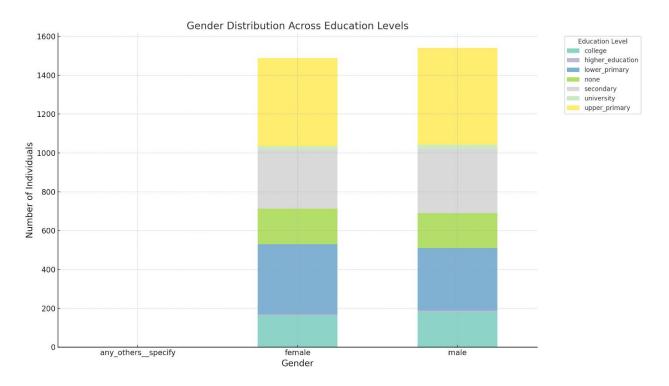
# **Key Insights**



- Gender Parity in Employment: The near-equal numbers of employed males and females suggest that gender disparities in access to formal employment may be minimal in this age group. However, the slightly higher number of unemployed males indicates that they might face more significant barriers in securing jobs.
- Entrepreneurial Activity: The higher number of self-employed males compared to females could point to cultural or societal factors that encourage men to pursue entrepreneurship more actively. It might also reflect differences in risk tolerance, access to capital, or support networks between genders.
- 3. **Continued Education**: The substantial number of individuals still studying in this age group underlines the importance placed on education as a pathway to better job opportunities. It also suggests that many in this age group are likely to be entering the job market later, which might contribute to the observed unemployment rates.
- 4. **High Unemployment Rates**: The unemployment figures are concerning, especially given the critical role that youth employment plays in economic growth and stability. This high level of unemployment may lead to negative outcomes such as increased dependence, mental health issues, or reduced lifetime earnings.



#### Education levels attained



#### **Gender Distribution Across Education Levels**

Here is the summarized tabular data showing the gender distribution across different education levels:

Gender	Lower Primary	Upper Primary	Secondary	College	Higher Education	University	None
Female	299	284	303	164	4	19	183
Male	275	325	331	182	6	21	180
Other	0	1	0	0	0	0	1

# **Key Findings**

# 1. **Primary Education**:

 Lower Primary: Both males and females have a strong representation in lower primary education, indicating that early education is accessible to both genders. The distribution is quite balanced, with a slightly higher number of females.



 Upper Primary: Similar to lower primary, upper primary education shows a balanced distribution between males and females. This reflects continued educational engagement through the primary years.

# 2. Secondary Education:

 Secondary education is a critical stage where many individuals either continue to higher education or enter the workforce. The data shows a relatively equal distribution between males and females, suggesting that both genders have similar access to secondary education.

#### 3. Higher Education:

 Fewer individuals have attained higher education, with males slightly outnumbering females. This indicates that while both genders have access to higher education, there may still be challenges that limit female participation.

#### 4. University Education:

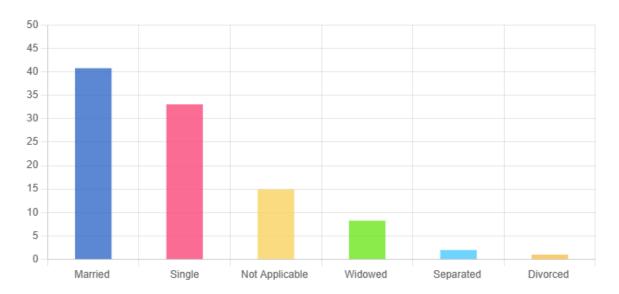
 University-level education is less common, with more males than females represented. This disparity may reflect barriers such as financial constraints, societal expectations, or other factors that disproportionately affect female access to higher education.

#### 5. No Formal Education:

 A significant portion of both males and females have no formal education. This highlights ongoing challenges in ensuring that all children, regardless of gender, have access to basic education.



#### Marital status.



The bar chart visualizes the marital status distribution among respondents in Kakamega County. The data indicates that 40.75% of the respondents are married, 33.05% are single, and 14.91% fall under the "Not Applicable" category. Smaller percentages are observed for widowed (8.26%), separated (2.00%), and divorced (1.03%) individuals.

Status	Frequency	Percentage
Married	1667	40.75
Single	1352	33.05
Not Applicable	610	14.91
Widowed	338	8.26
Separated	82	2
Divorced	42	1.03

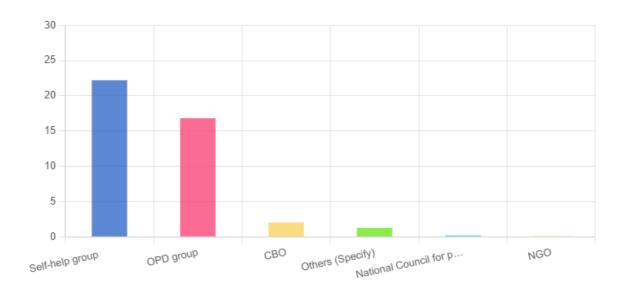


#### Registration with Disability Groups

### Registration status to NCPWD

Category	Count
On process/In process	1100
NA	715
Waiting card	572
Registered(Has NCPWD Number)	268

The chart indicates that 40.99% of respondents are registered with each group type, including OPD groups, self-help groups, CBOs, NGOs, the National Council, and other groups.



The data shows that a significant portion of the respondents, 22.2%, are members of self-help groups. These groups likely provide critical peer support and resources for individuals facing similar challenges. Following closely, 16.82% of respondents are part of OPD groups, indicating an active involvement in organizations focused on the advocacy and support of Persons with Disabilities (PWDs).

A smaller number of respondents are associated with Community-Based Organizations (CBOs) at 2.03%, reflecting a localized effort to address community-



specific issues. The category labeled "Others (Specify)" includes 1.27% of respondents, highlighting various other groups not specifically categorized.

Only a minimal percentage of respondents, 0.22%, are registered with the National Council for People with Disabilities, suggesting a potential gap in formal recognition and support at the national level. Similarly, a very small fraction, 0.10%, is associated with Non-Governmental Organizations (NGOs), possibly indicating a limited presence or engagement with larger, external entities.

The table elaborates more and provides an aggregation of the OPD and Self Help groups as they are all considered OPDs.

Value	Frequency
Self-help group	908
OPD group	1596
СВО	83
Others (Specify)	52
NGO	4

Top 10 Organizations based on number of PWDs registered

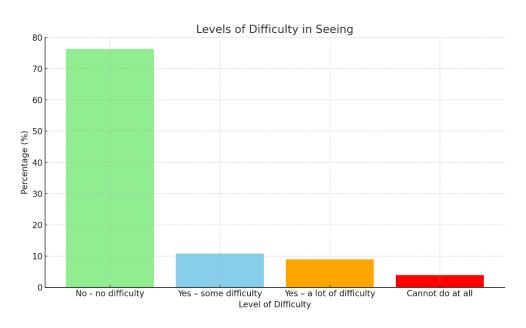
Group Name	Frequency	Percentage (%)
Navakholo Disability Initiative Group	265	6.48
Disability Grassroots Agenda	52	1.27
KHAUNGA JIPE MOYO NETWORK GROUP	50	1.22
Mulimani Special School for Hearing Impairment	49	1.20
Simmbako Disability Group	40	0.98



Tujiinue Disability Self Help Group	32	0.78
Mumias Deaf Youth Group	20	0.49
Musanda Ward Disable Group	24	0.59
Buracho Disabled Group	20	0.49
Various Table Banking Groups	60	1.46

#### **DISABILITY DATA**

# Statistics on levels of difficulty in seeing

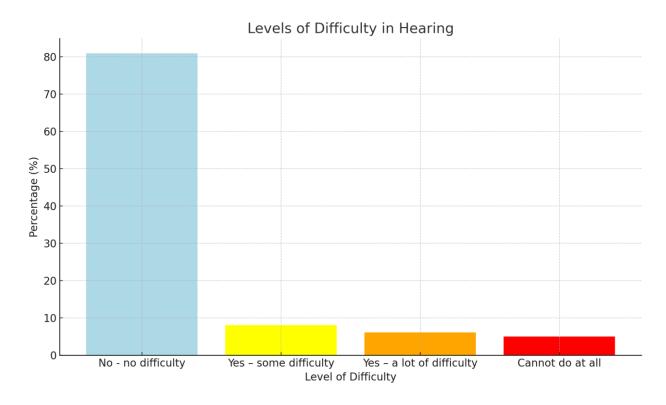


Level	Frequency	Percentage
No - no difficulty	3121	76.29
Yes – some difficulty	443	10.83
Yes – a lot of difficulty	368	9
Cannot do at all	159	3.89



The majority of respondents reported no difficulty in seeing, accounting for 76.29% of the population. However, a significant portion indicated experiencing some level of difficulty: 10.83% reported some difficulty, 9.00% experienced a lot of difficulty, and 3.89% could not see at all. These statistics highlight the prevalence of vision-related challenges among respondents, indicating a need for vision care services and support for those with varying levels of difficulty in seeing.

#### Statistics on levels of difficulty in hearing

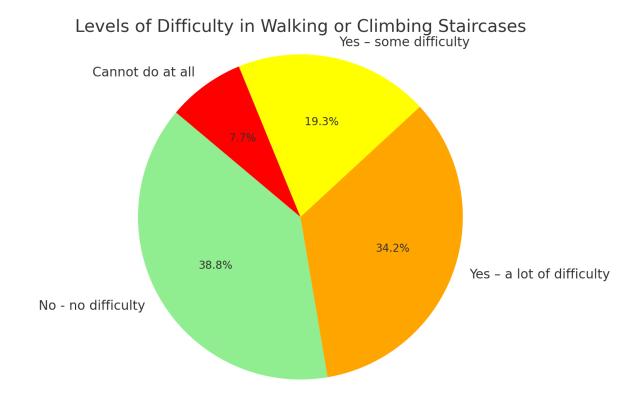


Level	Frequency	Percentage
No- no difficulty	3309	80.88
Yes – some difficulty	328	8.02
Yes – a lot of difficulty	250	6.11
Cannot do at all	204	4.99



The majority of respondents reported no difficulty in hearing, accounting for 80.88% of the population. A notable portion of respondents, 8.02%, reported some difficulty, while 6.11% experienced a lot of difficulty. Additionally, 4.99% of respondents indicated that they could not hear at all. These statistics highlight the prevalence of hearing difficulties within the community and suggest a need for auditory support services and accommodations.

# Statistics on levels of difficulty walking or climbing stair cases



Value	Frequency	Percentage
No- no difficulty	1587	38.79
Yes – a lot of difficulty	1398	34.17
Yes – some difficulty	791	19.34
Cannot do at all	315	7.7

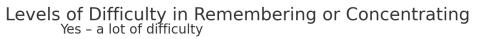


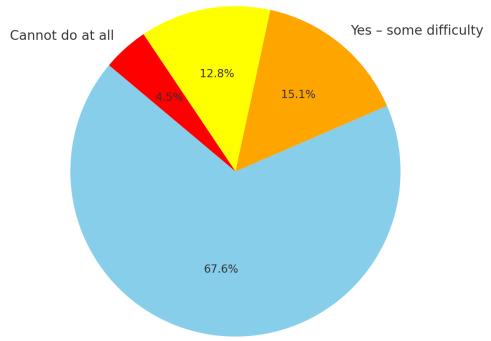
The data shows that a significant portion of respondents, 38.79%, reported no difficulty in walking or climbing staircases. However, a large number, 34.17%, indicated experiencing a lot of difficulty. Additionally, 19.34% reported some difficulty, and 7.70% of respondents stated that they could not walk or climb staircases at all. These statistics highlight the prevalence of mobility challenges within the community, suggesting a need for accessible infrastructure and support services.

#### Statistics on levels of difficulty remembering or concentrating

The majority of respondents, 67.42%, reported no difficulty in remembering or concentrating. However, a notable portion, 15.08%, indicated experiencing some difficulty, while 12.76% faced a lot of difficulty. Additionally, 4.47% of respondents stated that they could not remember or concentrate at all. These statistics highlight the prevalence of cognitive challenges within the community, underscoring the need for mental health support and resources to assist individuals with varying levels of difficulty.





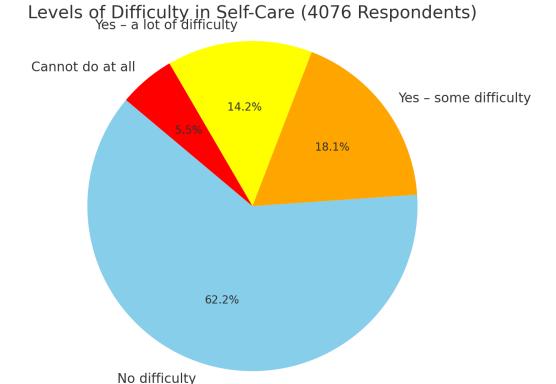


No - no difficulty

Value	Frequency	Percentage (%)
No - no difficulty	2758	67.42
Yes – some difficulty	617	15.08
Yes – a lot of difficulty	522	12.76
Cannot do at all	183	4.47

# Levels of Difficulty in Self-Care





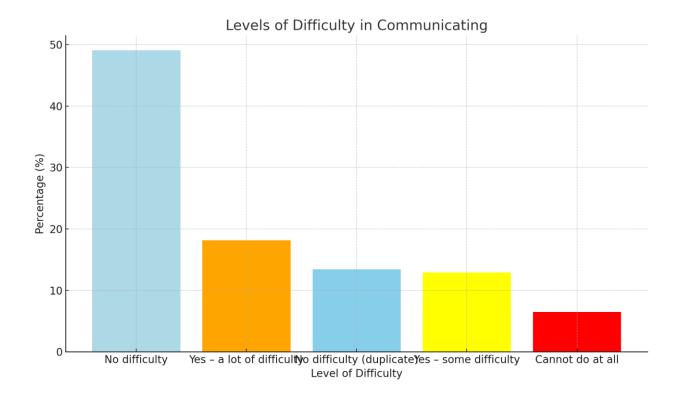
The majority of respondents (61.99%) reported no difficulty in self-care tasks. However, a significant portion indicated experiencing some level of difficulty, with 17.99% reporting some difficulty and 14.18% facing a lot of difficulty. Additionally, 5.48% of respondents stated that they could not perform these tasks at all. These statistics highlight the need for support services to assist those with varying levels of difficulty in self-care.

Table: Levels of Difficulty in Self-Care

Value	Frequency	Percentage (%)
No difficulty	2536	61.99
Yes – some difficulty	736	17.99
Yes – a lot of difficulty	580	14.18
Cannot do at all	224	5.48

Difficulty Communicating Due to Physical, Mental, or Emotional Health Condition



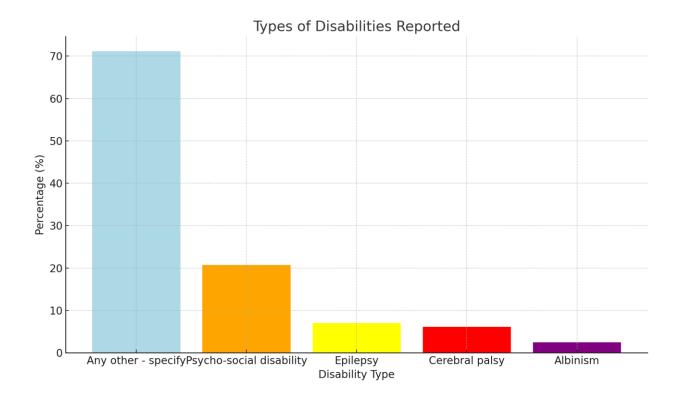


The bar chart shows the distribution of difficulty in communicating among respondents. Nearly half of the respondents (49.06%) reported no difficulty, while 18.16% faced a lot of difficulty, and 12.91% reported some difficulty. There is a notable data entry error with a duplicate "No difficulty" entry. The chart emphasizes the need for communication support for individuals with physical, mental, or emotional health conditions affecting their ability to communicate.

Value	Frequency	Percentage (%)
No difficulty	2007	49.06
Yes – a lot of difficulty	743	18.16
No difficulty (duplicate)	548	13.40
Yes – some difficulty	528	12.91
Cannot do at all	265	6.48

# **Types of Disabilities Reported**





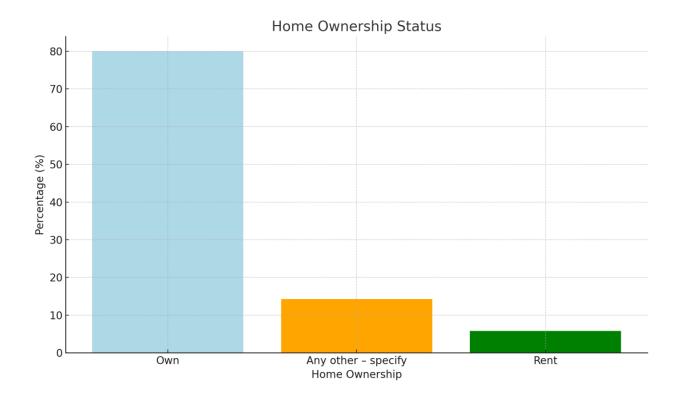
The majority of respondents (71.11%) reported disabilities that were not specifically categorized, while psycho-social disabilities were identified by 20.73% of respondents. Other disabilities such as epilepsy, cerebral palsy, and albinism were reported by smaller percentages. This data highlights the diverse range of disabilities present within the community.

Value	Frequency	Percentage (%)
Any other - specify	2909	71.11
Psycho-social disability	848	20.73
Epilepsy	286	6.99
Cerebral palsy	251	6.14
Albinism	101	2.47

#### SECTION B: ACCESSIBILITY AND HOME OWNERSHIP DATA

#### House ownership





The majority of respondents, 79.96%, reported owning their homes. A smaller percentage, 14.28%, indicated other forms of housing not specified in the provided categories. Additionally, 5.77% of respondents reported renting their homes. This data highlights the prevalence of home ownership among the surveyed population, with a significant portion also utilizing other housing arrangements.

**Table: Home Ownership Status** 

Value	Frequency	Percentage (%)
Own	3271	79.96
Any other – specify	584	14.28
Rent	236	5.77





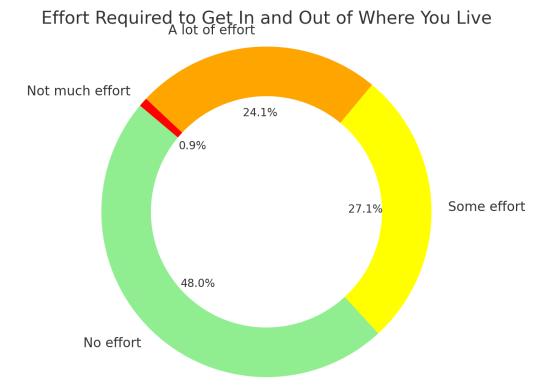
In this visualization, "Family" and "Home" are the most prominent, suggesting that many respondents live with family members or in a family home. Other notable arrangements include "Under parental care," highlighting the dependency on parents for housing. Smaller words, such as "Grandmother," "Grandparents," and "Well wisher," indicate less common but still significant arrangements where respondents live with extended family or individuals offering support.

# **Other Housing Arrangements**

Value	Frequency	Percentage (%)
Family	243	5.94
Home	209	5.11
Under parental care	44	1.08
Family land	19	0.46
Grandmother	9	0.22
Grandparents	5	0.12
Physically	3	0.07
Well wisher	3	0.07
Various other categories	1	0.02



# Challenge in accessing place of residence



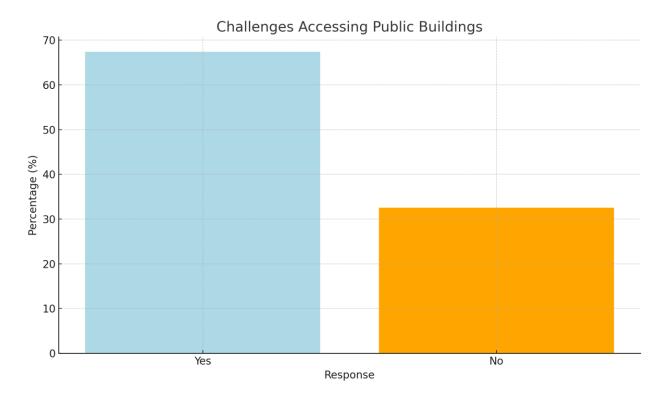
The data indicates that nearly half of the respondents (47.96%) report needing no effort to get in and out of their homes. However, a significant portion, 27.11%, requires some effort, while 24.05% experience a lot of effort. A small percentage, 0.88%, reported needing not much effort. This distribution suggests that while many respondents face minimal barriers to accessing their homes, a considerable number encounter challenges that require varying levels of effort, highlighting the need for improved accessibility.

#### Effort Required to Get In and Out of Where You Live

Value	Frequency	Percentage (%)
No effort	1962	47.96
Some effort	1109	27.11
A lot of effort	984	24.05
Not much effort	36	0.88



# **Challenges Accessing Public Buildings**



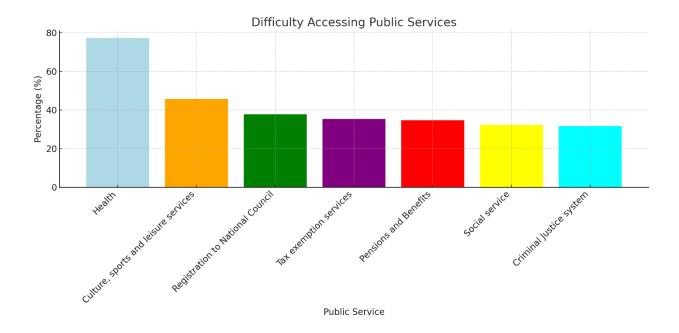
The data reveals that a significant majority of respondents (67.37%) report facing challenges when accessing public buildings. In contrast, 32.51% of respondents do not experience such challenges. This indicates that a large portion of the population encounters accessibility issues, which may include physical barriers, inadequate facilities, or lack of supportive infrastructure. The high percentage of respondents facing difficulties emphasizes the need for public buildings to become more accessible, ensuring that all individuals can access these spaces with ease and dignity.

#### **Challenges Accessing Public Buildings**

Response	Frequency	Percentage (%)
Yes	2756	67.37
No	1330	32.51

#### **Difficulty Accessing Public Services**





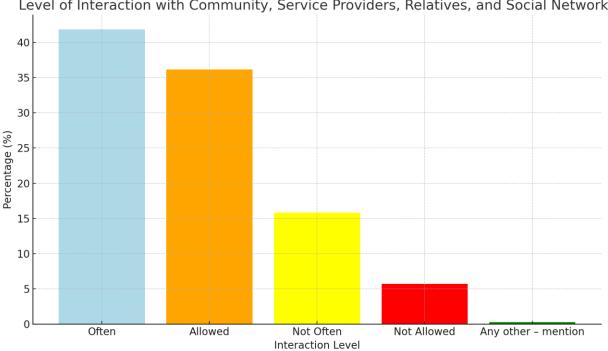
A significant proportion of respondents reported difficulties accessing public services. The highest percentage of difficulty was reported for accessing health services (77.24%), followed by challenges in accessing culture, sports, and leisure services (45.71%). Other areas with notable difficulties include registration to the National Council, tax exemption services, pensions and benefits, social services, and the criminal justice system. This data indicates widespread challenges in accessing essential public services, highlighting the need for improvements to ensure equitable access for all individuals.

# **Table: Difficulty Accessing Public Services**

Service	Frequency	Percentage (%)
Health	3160	77.24
Culture, sports and leisure services	1870	45.71
Registration to National Council	1547	37.81
Tax exemption services	1444	35.30
Pensions and Benefits	1420	34.71
Social service	1318	32.22
Criminal Justice system	1296	31.68

**SECTION C: SOCIAL INTERACTION** 





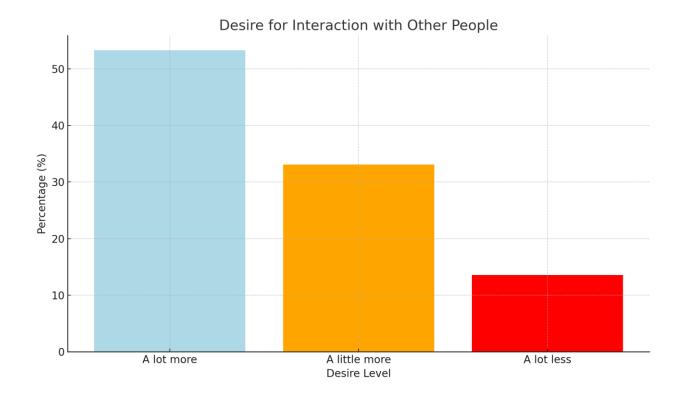
Level of Interaction with Community, Service Providers, Relatives, and Social Networks

The data reflects the frequency and nature of interactions that respondents have with various groups, including the community, service providers, relatives, and social networks. The majority of respondents (41.82%) reported frequent interactions ("Often"), indicating active engagement with these groups. A significant portion (36.15%) indicated being "Allowed" to interact, suggesting permissions or opportunities to engage. On the other hand, fewer respondents reported interactions as "Not Often" (15.84%) or "Not Allowed" (5.7%), suggesting less frequent engagement or restrictions in interactions. The "Any other - mention" category, though minimal, indicates unique or less common interaction experiences.

Interaction Level	Frequency	Percentage (%)
Often	1711	41.82
Allowed	1479	36.15
Not Often	648	15.84
Not Allowed	233	5.7
Any other – mention	12	0.29

#### Interaction with people



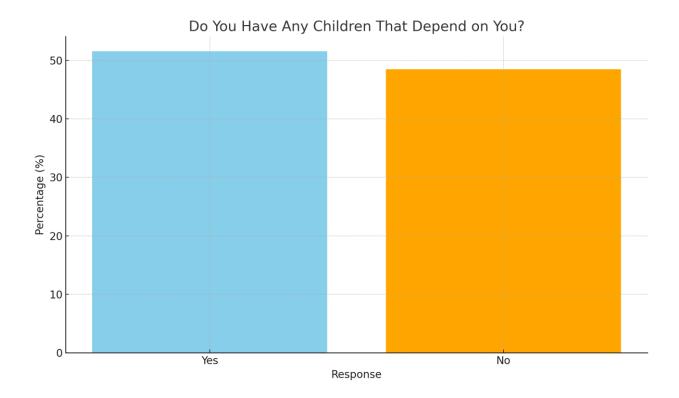


The majority of respondents expressed a desire to increase their interactions with others, with 53.24% wanting "A lot more" and 33.1% wanting "A little more" interaction. This suggests a strong interest in greater social engagement and connectivity. A smaller portion, 13.54%, indicated a preference for "A lot less" interaction, potentially reflecting contentment with their current level of interaction or a preference for less social engagement.

**SECTION D: SUPPORT** 

#### **Children Dependents**



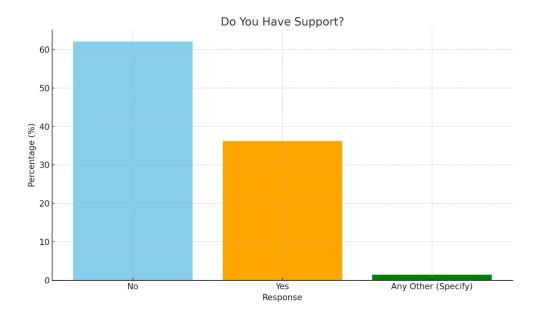


The bar chart shows that 51.53% of respondents have children who depend on them, while 48.47% do not. This indicates a fairly even split between those with and without dependent children. The average number of dependents per person was 3.

# **Aide Support**

A significant majority of respondents (62.04%) reported not having support, while 36.23% indicated they receive some form of support, such as an aide, guide, or sign language interpreter. A small portion (1.44%) specified other types of support, indicating diverse needs and arrangements.





The specific types of support mentioned include:

Support Type	Frequency	Percentage (%)
Crutches	23	39.66
Wheelchair	11	18.97
Glasses	3	5.17
Other	21	36.21

The free text responses provide insight into the variety of support types utilized by respondents. The most common supports are scratches and wheelchairs, followed by crutches and glasses. Other unique forms of support mentioned include communication assistance and caregiving by family members. These responses highlight the diverse range of needs and the importance of providing tailored support services.

### **Person providing support**

The data indicates that the vast majority of respondents receive support from family or friends who live with them, accounting for 91.69% of the responses. A smaller portion, 6.14%, receive support from family or friends who do not live with them. Additional support comes from neighbors, paid support, nurses, or other professionals (1.03%) and other unspecified sources (1.15%). This distribution highlights the critical role of immediate family and close friends in providing support, with a minority relying on external or professional assistance.

Table: Who Provides the Support for You?



Value	Frequency	Percentage (%)
My family or friends that live with me	3751	91.69
My family or friends that don't live with me	251	6.14
Any other - mention	47	1.15
Neighbors, Paid support, nurses or other professionals	42	1.03

## Experience managing own care

The majority of respondents (65.12%) reported that managing their own care is "Very difficult." This significant percentage indicates that a large portion of the population faces substantial challenges in independently handling their daily needs. Conversely, 28.99% found managing their care to be "Quite easy," suggesting a notable number of individuals have a relatively manageable experience. A smaller group (4.35%) indicated they do not manage their own care, relying on others for assistance. Only a minimal portion (1.54%) described their experience as "Very easy."

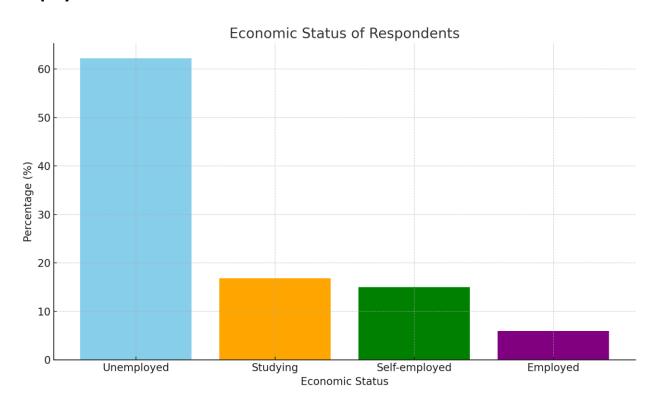
### Table: Experience Managing Own Care

Value	Frequency	Percentage (%)
Very difficult	2664	65.12
Quite easy	1186	28.99
I don't manage my own care	178	4.35
Very easy	63	1.54



#### **SECTION E: ECONOMIC STATUS**

### **Employment Stats**

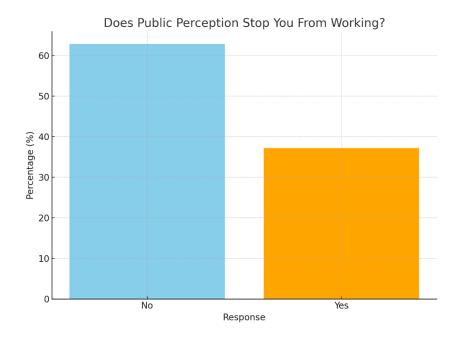


The data indicates that a significant majority of respondents (62.21%) are unemployed, highlighting a prevalent issue of joblessness within the community. A notable portion of respondents (16.84%) are currently studying, reflecting an investment in education, possibly as a means to improve future employment opportunities. Meanwhile, 15.01% of respondents are self-employed, suggesting entrepreneurial initiatives among some individuals. A smaller fraction (5.92%) are employed, indicating a relatively low level of formal employment among the respondents.

Value	Frequency	Percentage (%)
Unemployed	2545	62.21
Studying	689	16.84
Self-employed	614	15.01
Employed	242	5.92



## **Public Opinion impact on working**



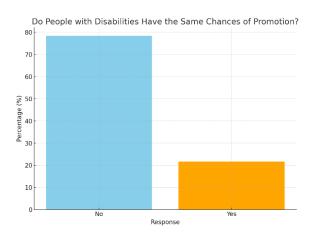
The data shows that the majority of respondents (62.8%) reported that public perception does not stop them from working. However, a significant minority (37.2%) indicated that public perception does impact their ability to work. This suggests that while a majority feel unaffected by societal views, a considerable portion of the population experiences challenges in the workplace due to public perception, potentially hindering their employment opportunities and professional growth.

### **Does Public Perception About You Stop You From Working?**

Value	Frequency	Percentage (%)
No	2569	62.8
Yes	1522	37.2



### **Promotion Opportunities**



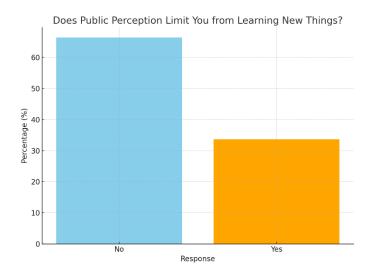
The data indicates a significant disparity in perceived promotion opportunities, with 78.34% of respondents believing that people with disabilities do not have the same chances of promotion as those without disabilities. Only 21.66% feel that they have equal opportunities. This highlights a prevalent concern about inequality in career advancement, suggesting a need for more inclusive policies and practices in the workplace.

Table: Chances of Promotion for People with Disabilities

Value	Frequency	Percentage (%)
No	3205	78.34
Yes	886	21.66

## Public Perception impact on learning new things





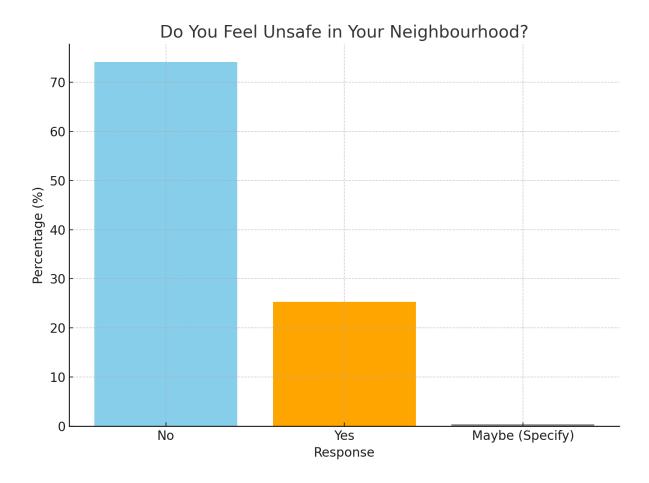
A majority of respondents (66.37%) reported that public perception does not limit them from learning new things. However, 33.63% indicated that it does, suggesting that public perception can be a barrier to personal growth and skill acquisition for a significant portion of the population. This indicates the importance of fostering a supportive and non-judgmental environment for learning and development.

Table: Does Public Perception Limit Learning New Things?

Value	Frequency	Percentage (%)	
No	2715	66.37	
Yes	1376	33.63	

### Safety Assurance in Neighborhoods





The majority of respondents (74.07%) reported not feeling unsafe in their neighborhoods, indicating a general sense of security among most individuals. However, 25.32% of respondents expressed feeling unsafe, highlighting a significant concern for a quarter of the population. Additionally, a small portion (0.42%) provided a nuanced response, indicating uncertainty or conditional feelings of safety.

Table: Do You Feel Unsafe in Your Neighborhood?

Value	Frequency	Percentage (%)
No	3030	74.07
Yes	1036	25.32
Maybe (Specify)	17	0.42

• Robbery and Gender-Based Violence: A widow feels unsafe due to heightened vulnerability to crimes like robbery and gender-based violence.



- Jealousy and Stigmatization: Some individuals experience jealousy and stigmatization when they seek to improve their life status, particularly regarding economic empowerment.
- Unknown Surroundings: Inability to move from one place to another contributes to feelings of insecurity.
- Family Issues: Some respondents mentioned being disturbed or harassed by family members.
- Hearing Impairment: Inability to hear what is happening around them,
   relying only on close family for trust.
- **Dependence on Aides**: Individuals who cannot move or perform chores independently may feel insecure due to their reliance on aides.
- Poverty: Poverty is a significant concern that contributes to feelings of insecurity.
- Lack of Awareness: Some respondents are unconscious of their surroundings or cannot understand what is happening, leading to feelings of insecurity.
- Mental Illness: Misidentification or mistreatment due to mental illness can make individuals feel unsafe.
- Lack of Guardian: Some feel unsafe due to the absence of a guardian.
- Theft: Incidents of theft contribute to feelings of insecurity.
- **Speech Impairment**: High stammering and going offline (losing touch with reality) contribute to insecurity.
- **Abuse**: Some respondents mentioned feeling unsafe due to abuse.
- Occasional Insecurity: Some respondents feel unsafe only sometimes.

### Safety in public places

A majority of respondents (64.92%) reported not worrying about being abused in public places, suggesting a general sense of security in public settings. However, a significant minority (34.93%) expressed concern about potential abuse, indicating



that public spaces can still be sources of anxiety and fear for a substantial number of individuals.

Table: Worry About Being Abused in Public Places

Value	Frequency	Percentage (%)
No	2656	64.92
Yes	1429	34.93

### **Ever Treated Badly Because of Disability**

Most respondents (71.35%) indicated they have not been treated badly due to their disability. However, 28.43% reported experiencing mistreatment, highlighting the prevalence of discrimination and negative behaviors faced by individuals with disabilities.

Table: Experience of Being Treated Badly Because of Disability

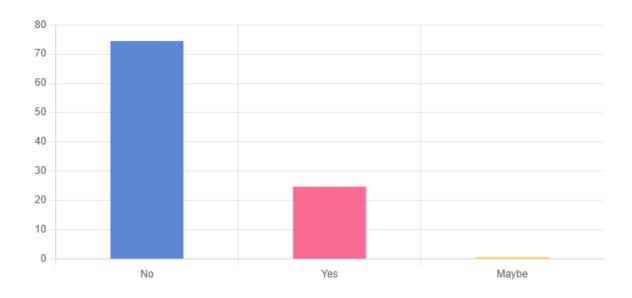
Value	Frequency	Percentage (%)	
No	2919	71.35	
Yes	1163	28.43	

## Specify How You Were/Are Treated

Value	Frequency	Percentage (%)
Isolation	398	9.73
Abuse (verbal, physical, emotional)	247	6.03
Discrimination	129	3.15
Mocking/Name-calling	51	1.25
Denied Opportunities	37	0.91
Other Negative Treatment	37	0.91

### Safety at Home – Has the respondent ever felt unsafe at home



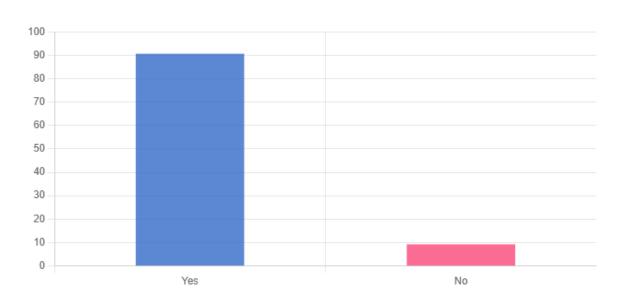


Value	Frequency	Percentage
No	3046	74.46
Yes	1011	24.71
Maybe	31	0.76

Those who said yes had the major reason being abuse.

### **PERSONAL OPINIONS**

# Belief in self to achieve future plans

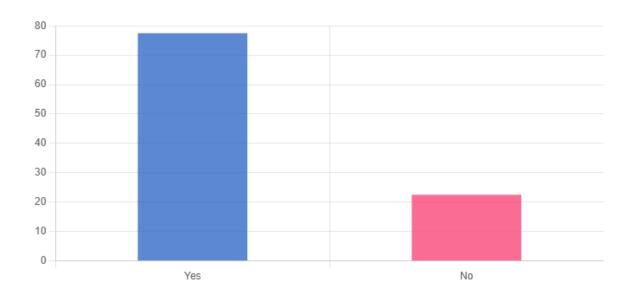


Value	Frequency	Percentage
-------	-----------	------------



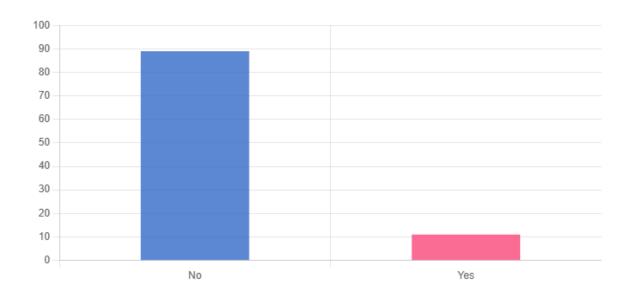
Yes	3707	90.61
No	378	9.24

# Belief in PWDs having a successful future



Value	Frequency	Percentage
Yes	3170	77.49
No	921	22.51

# Personal opinion on equality at work places





Value	Frequency	Percentage
No	3641	89
Yes	450	11

### **Chapter Three**

### Findings

### Participation in Socioeconomic Activities:

- Economic Participation: The survey found that PWDs are less likely to
  participate in formal employment compared to persons without disabilities.
   Barriers include limited access to job opportunities, lack of reasonable
  accommodations, and discrimination.
- **Social Participation:** PWDs reported lower levels of engagement in community activities and social events. Challenges include physical barriers to access and social stigma.

### **Special Needs and Service Gaps:**

- Healthcare: Many PWDs reported difficulties accessing appropriate healthcare services. Common issues include a lack of specialized medical care, inadequate transportation, and limited financial resources.
- Education: Access to quality education is hindered by insufficient adaptive learning resources and a lack of trained educators in special needs education.
- Employment: There is a notable gap in employment support services. PWDs
  often face barriers to job placement, skill development, and workplace
  accommodations.



 Social Services: The availability of social services is inconsistent, with some areas lacking basic support services and others experiencing delays in service delivery.

### **Service Delivery Enhancement:**

- Tailored Services: The survey highlights the need for more tailored services
  that address the specific needs of PWDs. Recommendations include the
  development of specialized programs in healthcare, education, and
  employment.
- Accessibility Improvements: Enhancements in physical accessibility to public spaces and services are necessary. This includes improving infrastructure and implementing universal design principles.
- Community Awareness: Increasing community awareness and reducing stigma associated with disabilities are crucial for improving social inclusion and participation.



### **Chapter Four**

#### Recommendations

### Centralized Database and Referral System:

Develop a centralized, comprehensive database of PWDs in Kakamega County to accurately track demographics, types of disabilities, and support needs. This database should be regularly updated and utilized for referrals to available services and opportunities, ensuring that PWDs are included in community activities and programs.

Create inclusive economic programs and initiatives that encourage the participation of PWDs in various economic activities. This can include providing accessible vocational training, promoting entrepreneurship among PWDs, and offering incentives for businesses that employ individuals with disabilities.

### **Enhanced Accessibility to Public Services**:

Improve the accessibility of public services and infrastructure, such as healthcare facilities, educational institutions, and public transportation. This can involve constructing ramps, widening doorways, and ensuring that public transport is equipped to accommodate PWDs.

### **Tailored Support Services**:

Design and implement specialized support services tailored to the unique needs of PWDs. This includes providing assistive devices, personal care assistance, and specialized healthcare services. Collaborate with local NGOs and government agencies to ensure comprehensive service delivery.

### Community Awareness and Sensitization:



Launch community sensitization campaigns to raise awareness about the challenges faced by PWDs and to combat negative stereotypes and stigmas. These campaigns should aim to foster an inclusive environment and promote understanding and acceptance of PWDs within the community.

### **Policy Advocacy and Legal Frameworks:**

Advocate for stronger legal protections and policies that support the rights and inclusion of PWDs. This includes lobbying for the enforcement of existing disability laws, developing new policies to address gaps, and ensuring that PWDs are represented in decision-making processes at all levels.



## Appendix

## Specific disability table

Value	Frequency	Percentag
		е
None	289	7.06
Physically	262	6.4
Physical	230	5.62
N.A	213	5.21
Mental	146	3.57
Physical impairment	135	3.3
Visual	129	3.15
Physical disabilities	128	3.13
No	119	2.91
None	99	2.42
Virtual impairment	74	1.81
Deaf	73	1.78
N/A	61	1.49
Physically handicapped	52	1.27
Physical	40	0.98
Visually impaired	36	0.88
Deaf	32	0.78
Physical Disability	31	0.76
Hearing impairment	28	0.68



	T	
Deaf and dump	26	0.64
Speech	24	0.59
Blind	23	0.56
Н	20	0.49
Hearing impaired	19	0.46
No	17	0.42
Blind	14	0.34
Physically Handicapped	14	0.34
Deaf and dumb	13	0.32
Visually impaired	12	0.29
Paraplegia	12	0.29
Visual impairment	9	0.22
Autism	9	0.22
Strock	9	0.22
NONE	9	0.22
Hearing impaired	8	0.2
Multiple physical impairment	7	0.17
Multiple physical disabilities	7	0.17
Autism	7	0.17
Handicap	7	0.17
Mental and speech	6	0.15
Dumb	6	0.15



Multiple	5	0.12
Multiple	3	0.12
Speech and mental	5	0.12
Stammerer	5	0.12
Interlectual	5	0.12
Stammerer	5	0.12
Earing impairment	5	0.12
Physical disability	4	0.1
Deff and speech	4	0.1
Left hand side paralysis	4	0.1
Physically/stamarer	4	0.1
Left hand paralysis	4	0.1
Body paralysis	4	0.1
Down syndrome	4	0.1
PH	4	0.1
Visually Impaired	4	0.1
Hearing Impaired	4	0.1
N.a	4	0.1
Hamiplagia	4	0.1
Multiple disabilities	4	0.1
Amputee	4	0.1
Mental	4	0.1
Earing	3	0.07



	T	
Physically handicapped	3	0.07
Intellectual	3	0.07
Physically impaired	3	0.07
Blind and deaf	3	0.07
NONE	3	0.07
Virtual and hearing impairment	3	0.07
Damb	3	0.07
Deaf and damb	3	0.07
Speech	2	0.05
Hydrocephalus	2	0.05
Deff	2	0.05
Handcup	2	0.05
Stamarer	2	0.05
Both limps paralysis	2	0.05
Right hand paralysis	2	0.05
Left limp paralysis	2	0.05
Down Syndrome	2	0.05
Multiple Disabilities	2	0.05
Hearing	2	0.05
PH using crutches	2	0.05
Interlectual	2	0.05



	I	1
Spinal	2	0.05
Deaf and visual	2	0.05
Deaf and speech	2	0.05
NA	2	0.05
n.a	2	0.05
Down syndrome	2	0.05
Visual and deaf	2	0.05
Pallet	2	0.05
Thoracic kyphosis	2	0.05
SA	1	0.02
Physical disability( amputee	1	0.02
_leg		
Down sydrome	1	0.02
Stroke	1	0.02
Visually impaired. Physical	1	0.02
Chyonicle	1	0.02

