





## Article

# "I'm Not Asking for Special Treatment, I'm Asking for Access": Experiences of University Students with Disabilities in Ghana, Ethiopia and South Africa

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**Abstract:** It is often challenging for youth with disabilities to access university education in Africa, and for those who manage to make it to university, while there, their experiences are still not barrier-free. The purpose of this study was to uncover the experiences of the barriers and facilitators to inclusion for youth with disabilities in universities in South Africa, Ghana and Ethiopia. This qualitative project applied a critical, participatory research approach to exploring youth experiences. Youth with disabilities and their colleagues conducted seven focus group discussions, with an average of five students in each focus group, and we used a qualitative descriptive method to analyze data. The findings uncovered similarities and differences in the barriers and facilitators to inclusive education among students with disabilities across all sites. Participants noted limited financial support and university services, and how inaccessible spaces and harmful attitudes are all barriers that hinder their access to education and inclusion. The identified facilitators include support systems and self-directed facilitation. Although the students self-advocated and reported some support to assist in their inclusion in university, it was still insufficient. Notably, some universities are making a concerted effort toward inclusion and accessibility, but more work needs to be done.

**Keywords:** disability; education; inclusion; university; accessibility



**Citation:** Abrahams, D.; Batorowicz, B.; Ndaa, P.; Gabriels, S.; Abebe, S.M.; Xu, X.; Aldersey, H.M. "I'm Not Asking for Special Treatment, I'm Asking for Access": Experiences of University Students with Disabilities in Ghana, Ethiopia and South Africa. *Disabilities* **2023**, *3*, 114–128. <https://doi.org/10.3390/disabilities3010009>

Received: 31 December 2022

Revised: 22 February 2023

Accepted: 23 February 2023

Published: 1 March 2023



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## 1. Introduction

Access to education is an internationally recognized right for persons with disabilities [1]. According to the World Health Organization [2], there are over one billion persons with a disability in the world, that is, about 15% of the world's population. In Africa, the proportion of disabled people is estimated at approximately 40%, including 10–15% who are school-age children [2]. This roughly translates into 300 million people with disabilities in Africa.

In most parts of the world, persons with a range of disabilities constitute underrepresented minorities [3], disenfranchised by "able-bodied" principles encoded into large social structures [4]. They are often denied equal opportunity to access common resources. This lack of equity is evidenced in higher education, and it comprises a variety of dimensions that, along with disability, include gender and socio-economic background [5]. There has been a significant increase in access to higher education for many across the globe; however, such access for people with disabilities continues to be fraught with barriers. Students with disabilities face physical, social, and emotional barriers in their postsecondary education [6]. Such barriers include marginalization and exclusion that affect their education and are reflected in their low graduation rate [7]. For example, researchers found that the graduation rates of students with disabilities in the United States consistently lag behind

their peers without disabilities [8,9]. Interestingly, amongst students with disabilities, there were no significant differences in university degree completion rates by race or ethnicity, gender, disability category, or parents' household income [7].

Understanding disability in Africa involves an array of interpretations [10]. For example, some people believe disability happens due to witchcraft [11,12]. According to the department of higher education and training in South Africa, such belief systems have unwittingly infiltrated institutions of higher learning as divergent *modus operandi* [13]. The same beliefs can affect the statistics of persons with disabilities, as they would not likely disclose and self-declare their disabilities. For example, in Ethiopia, there is a lack of up-to-date data on disability, and the available numbers differ widely, depending on the source [14,15].

In an effort to ensure inclusive education, many countries have endorsed policy agendas that include ratifying the United Nations Convention on the Rights of Persons with Disabilities (CRPD) and introducing national inclusive education policies. Among the key principles in inclusive education is the need to address issues of social justice, equity, and the particular accommodations for a diverse group of learners with specific needs. These are crucial to ensuring that all learners are supported and given an equal opportunity to a quality education [16]. In our research, we are particularly interested in three African countries: Ghana, South Africa and Ethiopia. In Ghana, there is the Persons with Disabilities Act [17], the Ghana National Disability Policy [18], and the Republic of Ghana's Constitution [19]. All these documents specify that educational institutions should not discriminate against or disadvantage students with disabilities. Such policies might have contributed to a rising number of students with disabilities who now complete high school and enroll in tertiary education [20]. Despite these advances in educational policy, little is understood about the experiences of people with disabilities in accessing higher education in Ghana [1].

South Africa has developed further to pre-ascertain the nature of prospective students who apply to study in universities. Institutions are to consider the Strategic Policy Framework on Disability for the Post-School Education and Training System [13] in line with the CRPD. The policy framework seeks to create an enabling and empowering environment for the inclusion of students and staff with disabilities in all aspects of university activities, including academic studies, culture, social life, sport, and accommodation. Despite these existing policies, the structures of support services for disabled students appear contradictory in relation to rights, benevolence, and the social model of disability [21]. This is evidenced by inadequate measures to identify challenges pertinent to accessible higher education for students with disability [22]. While inclusion policies enable access for all students to universities in South Africa, inequitable practices nevertheless exclude students with disabilities from being admitted to university programs [22].

Issues of disability in Ethiopia are widely reflected in a variety of policy documents, plans and commitments. For example, the Ethiopian government is a party to the UN Convention on the Rights of the Child [23], the CRPD [24], and the African Charter on Human and Peoples Rights [25]. All recognize the rights of disabled people to equal treatment. While Ethiopia's constitution gives due recognition to the issue, they have other specific policies and plans to embody the provisions on rights and opportunities for the disabled. For instance, the Growth and Transformation Plan II (2015/16 and 2019/20) [26] establishes the need to ensure the participation of disabled people in political, economic, and social activities, including creating wider educational opportunities.

In addition to country-specific policies, Ethiopia, Ghana, and South Africa subscribe to the Sustainable Development Goals (SDGs) that facilitate equal access to all levels of education for people with disabilities via global educational policy directives. Fundamentally, the human rights model wrestles with critical concerns of equality for all [13], thus posing questions that this study attempts to answer within the area of universities: What are the key barriers and facilitators to education accessibility experienced by students with

disabilities in tertiary education in Ethiopia, Ghana, and South Africa? Moreover, how do these experiences align and differ across cultural contexts?

Due to a lack of current scholarly work, institutional actors struggle to understand the learning experiences of students with disabilities in universities from the students' own perspective [27–29]. The researchers have failed to study the experiences of students with varying disabilities in higher education and to listen to the students' own voices. This study explores the experiences of students with a disability who have transitioned successfully from high school to tertiary education institutions. We aim to understand factors and circumstances that facilitate or hinder positive educational experiences. This knowledge could contribute to removing the barriers or inhibiting factors, and facilitate providing the necessary support for students with disabilities to succeed.

## 2. Materials and Methods

In alignment with this study's participatory approach, we developed and carried out the research in partnership with youth with disabilities. We conducted focus groups with youth with disabilities who attended university in three countries: Ethiopia, Ghana, and South Africa. Research team members with disabilities moderated the focus group discussions in collaboration with other researchers on the team. This study received approval from the appropriate ethics boards: the General Research Ethics Board of Queen's University in Canada, the Institutional Review Board of the University of Gondar in Ethiopia, the Institutional Review Board of Asheshi in Ghana, and the Human Research Ethics Committee of the University of Cape Town in South Africa.

Participants were 18 to 35 years of age, attended the university and self-identified as having a motor, communication, vision, hearing, or mental health disability. We chose the specific age criteria with the maximum age of 35 years in accordance with the African Youth Charter, which defines "youth" as under 35 years old. Participants were excluded if they were outside the targeted age range or were not attending the university. Participants in this study included 10 youth from South Africa, 15 from Ethiopia, and 13 from Ghana. Table 1 provides more details about the participants.

**Table 1.** Study participants by country and disability.

Factor	Total	Ethiopia FG * 1	Ethiopia FG 2	Ghana FG 1	Ghana FG 2	South Africa FG 1	South Africa FG 2	South Africa FG 3
Gender								
<i>n</i>	38	7	8	6	7	3	3	4
Female	17	4	2	3	3	1	1	3
Male	21	3	6	3	4	2	2	1
Disability Type								
Physical	11	4	1	2	2	1	1	0
Visual	17	3	7	2	4	0	1	0
Hearing	4	0	0	2	1	0	1	0
Other **	6	0	0	0	0	2	0	4

\* FG = Focus group; \*\* psychosocial, mental, neurodevelopmental.

In each country, a research site coordinator worked with local universities, community-based rehabilitation (CBR) programs, and disabled persons organizations (DPOs) to identify potential participants. Local partner organizations in the respective countries informed the potential participant about the study. Upon agreement, the individual's contact information was shared with the study coordinator, who then called or met with the participant to confirm eligibility, provide further details about the study, answer any questions, and invite the individual to participate in a focus group discussion.

We conducted three focus groups in South Africa, two in Ethiopia, and two in Ghana, and aimed for a diverse representation of a type of disability and gender within each focus group. The number of participants in each group ranged from 3 to 8. The duration

of discussions ranged from 90 to 120 min. Focus groups were conducted remotely via video call or in person, depending on the need for safety via social distancing during the COVID-19 lockdown. Specifically, South Africa conducted all three of their focus groups online, and Ghana and Ethiopia conducted focus groups in person while following all local public health agencies' COVID-19 guidelines (e.g., masking, pre-screening, and social distancing). Researchers used a semi-structured focus group guide to help shape conversations around the research questions. The participants were asked to discuss their experiences at the university, including barriers and facilitators to attending and participating in university-related activities. We also asked the participants to share their suggestions and ideas on how to better support students with disabilities to succeed in higher education.

Focus groups were conducted in English in Ghana and South Africa and in Amharic in Ethiopia. The focus groups were audio-recorded and transcribed verbatim. The Amharic transcription was translated into English and checked by a third party for accuracy.

A group of academic and youth researchers with disabilities analyzed the data concurrently within and across focus groups to identify themes [30]. First, each research site used open and focused coding of the transcripts from their location and developed initial categories specific to the country. Second, the international team reviewed site-specific findings as well as similarities and differences across sites. Next, a team including members from all study sites and Canada worked together to complete the analysis across sites, using the initial site-specific findings, and reached a consensus as to the central findings. We used the NVivo software (Version 12, QSR International, Burlington, MA, USA) to assist with data organization, as well as in creating and tabulating codes and themes during data analysis.

### 3. Results

The participants discussed many barriers and facilitators to their success at the university. Some were tangible, such as financial resources, scholarships and funding, or physical spaces that were more or less adapted to be inclusive of all abilities, such as having or lacking accommodations such as elevators and ramps. However, the youth also talked about non-physical factors supporting or inhibiting their participation at university, such as a social network of family who assisted the disabled student in getting to classes and managing their health with caregiving, or friends who motivated and supported them. They also mentioned university staff who adapted learning materials to improve their inclusion, as well as unsupportive educators. We have organized the study findings into four themes that reflect the barriers and support to education as identified by university students: self-directed strategies, supportive people, system-related factors, and inaccessible spaces and practices. Table 2 presents the themes and subthemes. To protect the participants' confidentiality, the names associated with the quotes are pseudonyms.

**Table 2.** Themes and subthemes.

Themes	Subthemes
Self-directed strategies	<ul style="list-style-type: none"> <li>• Self-determination and advocacy</li> <li>• Sources of strength</li> </ul>
Supportive people	<ul style="list-style-type: none"> <li>• Don't give up</li> <li>• Lecturers, I am asking for access</li> </ul>
System-related factors	<ul style="list-style-type: none"> <li>• Financial supports</li> <li>• University services</li> <li>• Insufficient resources</li> </ul>
Inaccessible spaces and practices	<ul style="list-style-type: none"> <li>• Inaccessible spaces</li> <li>• Harmful attitudes</li> </ul>

### 3.1. Self-Directed Strategies

Participants expressed that they attributed much of their successful inclusion in education to their own actions, which they referred to as “personal facilitation”. Students discussed how they needed to rely on themselves, as external support was either rare or unreliable. They placed much emphasis on how they supported themselves with self-determination, advocating for themselves, and navigating social circles, and they discussed their inner sources of strength.

#### 3.1.1. Self-Determination and Advocacy

Participants emphasized the importance of a self-driven approach and taking charge of their situation and responsibility to be in control, as expressed by Fredrick:

*“I will say that if someone is counselling you for you to do something, the counselling that you can give to yourself is even more than what someone will give to you. So when I started school, I tried to counsel myself that no matter what comes, so I have to accept it and move on. I again told myself that before people or the society will accept me again, they would need to see that I’m doing something.”* (Male, Ghana)

The students expressed that having a strong sense of self-discipline and self-determination was vital for their inclusion and success, as they would not receive much motivation or support elsewhere. Hannah said *“What has motivated me is, let me say, self-determination. I was determined to still achieve what I want. So it is self-determination . . . self-discipline”*, (Female, Ghana). Another student, Annie, stated that she had to learn how to advocate for her needs in order to gain the assistance she needed, because without her doing so, she would often struggle. *“I had to advocate for myself, especially in undergrad because things were quite inaccessible”*, (Female, South Africa).

Students shared how they overcame multiple barriers or limitations they encountered at university, which were related to either the physical environment or the system/organizational support (i.e., resources, supports), and were in the way of their learning:

*“I became extremely obsessed with learning the routes to get around campus. So if the lift is broken, you have to find another way around it. Our upper campus is built on a mountain, so you need lifts and ramps always. So, like we would just have to figure out our own way . . . I had to advocate for myself to get help or ask lecturers for something or ask the disability unit and make relationships with volunteers to help me.”* (Female, South Africa)

#### 3.1.2. Sources of Strength

The discussion focused not only on the multiple strategies that participants developed over the years, but also on various sources of individual strength, which helped them to cope with challenges and adversities. These included spiritual beliefs and religion, physical exercise, connecting with family and friends and finding motivating people and role models. Troy said:

*“(I’m coping) only by the grace of the Lord, because I’m a big Christian. I go to the gym, it really helps with exercising. I know, once in a while, I call my friends from home and I call my family. I have a nice picture of my mom, here on my desk in res. I know that I’m working hard for her.”* (Male, South Africa)

Other strategies that worked for participants included keeping a journal or going out to the community to be among people or meet others, as captured by Ray:

*“So on days when I find that my [disability] is impacting my mental wellbeing, then I start to journal. I’ve learned by going out more often, even going to eat out with someone, or going out window shopping. It does help a lot. So I’m making use of my social circle, my friends and my family.”* (Female, South Africa)

### 3.2. Supportive People

Participants discussed the assistance provided by various people who enabled them in their academic journey. They also mentioned people who were unsupportive and hindered their academic progress. Participants described supportive social circles comprising friends, peers, colleagues, university staff, and family who assisted the disabled student with inclusion. They also discussed how some instructors and university staff did not understand and support their needs, which created barriers to their engagement in academic work and education.

#### 3.2.1. “Don’t Give Up”

Students spoke about people who were instrumental to their success and perseverance, and those who encouraged them. They included both the family members and university personnel. Nel spoke about how he appreciated that his brother was allowed to live with him in the campus residence housing, as he could not live alone due to his epileptic seizures. *“My disability is a condition of epilepsy. I have my brother who used to stay with me here in the city to help me if I get fits”*, (Male, South Africa).

Other students expressed how they had lecturers who were understanding and concerned for the student’s success and well-being. They made an effort to accommodate their needs and assist as necessary. Joel said: *“Sometimes the teacher will come to you and go like ‘oh, continue. Don’t give up. Always continue what you are doing’”*, (Male, Ghana), and Hannah noted: *“My good experience was the fact that my lecturers understood the type of disability I had and then they were ready to help me with my learning materials”*, (Female, Ghana).

Participants also discussed the vital role of family encouragement. One student expressed how their mother would place much importance on education and encourage them to stay determined to complete their studies. They were told that education is especially important for disabled persons as disabled people can only make a living through professional jobs, rather than labor-intensive physical jobs. Belay said:

*“My mother told me, ‘I have nothing to offer you, but school is the only way for you to get out of poverty’. She also said, ‘you must take your education seriously because a disabled person like you cannot make a living through other means’.”* (Female, Ethiopia)

#### 3.2.2. “Lecturers, I Am Asking for Access”

Participants discussed extensively how some lecturers and teachers were not supportive and were unwilling to provide accommodations to include disabled students. The students said that they often had to ask and battle lecturers and staff to provide accommodations such as lecture notes on time, awareness of disability, recorded lectures, deadline extensions and assignment exemptions. Participants noted that it often led to them having to rely on peers for assistance, which was uncomfortable and unreliable, as noted by Hannah:

*“Sometimes, some of the lecturers don’t want to provide their lecture notes to you. So, when that happens, you need to rely on friends and other colleagues to be able to get what was taught. You go to someone, they’ll tell you they can’t give you soft copies, then you will have to go and print it. Some of them, they won’t even give you printed ones too. So, it becomes a very big challenge.”* (Female, Ghana)

Participants shared how the lecturers did not understand their health condition, and challenged them to rely on their weaknesses rather than accommodate, building on their strengths and discussing options with students. Lloyd indicated:

*“I think lecturers are narrow minded when it comes to disability. In my first year, that’s how I developed an anxiety to speak in public because they did not understand my needs and kept making me speak in front of the class, especially when I kept having to tell them I prefer not to and that they should speak up for my hearing. The lecturers just don’t understand your condition because they don’t give extra time for tests, or notes before and after class. So, I addressed the issue in third year. But then the lecturer will comply*

*for like 2 weeks then just stop making accommodations. She just made a decision to stop and did not ask me. It affects my learning process, I needed her notes, but she stopped. The disability unit can only do so much too. I'm not asking for special treatment; I'm asking for access. So yeah, my issue mainly lecturers, they are like 'just take it or leave it'.*" (Male, South Africa)

The need for education about disability was identified by the participants, as captured by Emmanuel: *"Our teachers were not well-trained either. Teachers at all levels are not trained for special needs education"*, (Male, Ghana). Recognizing that students may learn best in different ways and need extra time to study was also discussed by the participants. Matilda said:

*"Next, some of the lecturers, the lecture notes, they give it to you so late. Because I use my eye to see the interpreter, I cannot be taking notes at the same time. Yes, for the hearing people, they will listen and then write, but for me, I use my eye to listen, so, I will not be able to write at the same time. Sometimes, when you ask lecturers to give you lecture notes to read, it becomes a problem. It comes late, and when the lecture notes come late, it makes exams difficult. It makes me worried a lot and it affects my exam."* (Female, Ghana)

Mental health conditions were noted by participants to be especially misunderstood. Involving students in sharing their knowledge about their condition and accommodations that work for them was discussed as a strategy that could benefit both students and university teachers and staff. Ray indicated:

*"My lecturers are aware about my mental health condition, but I'm treated as if I'm a student without a mental health disability. So I feel like if we could have honest conversations with people, or staff members, so that they become more inclusive of students and be more supportive, it will be much better."* (Female, South Africa)

### 3.3. System-Related Factors

The study found that the universities provide many types of support in different services targeted to facilitate student inclusion and success. Participants mentioned services such as university disability units that specifically focus on disabled students to assist with their inclusion, mental health services such as psychiatrist and wellness care, and accommodating disabled-friendly living spaces in student housing. Students also attributed much of their inclusion to financial aid, whereby they were provided with bursaries, government support and scholarships to study at the university. Another system-related factor mentioned was how the university provided for or lacked resources to facilitate inclusion, such as assistive devices or specialized disability transportation.

#### 3.3.1. Financial Supports

The participating students from all the three countries discussed the instrumental role of the financial support they received in the form of scholarship funding for their education. This support provided an opportunity for them to attend university. Some students expressed their appreciation for and dependency on financial support systems such as social welfare, scholarships, private sponsorships, and university funding. Joel expressed that they receive financial support for university studies from private companies and initiatives such as Mastercard Foundation scholarship programs.

*"When I was in [name of school] I got a government scholarship. It was used to support me upon coming to the university and the university too- I have gotten support. The Mastercard Foundation scholarship supports me with my education. They are really doing much for me in terms of everything concerning my education. They are doing well."* (Male, Ghana)

Other students mentioned how they received funding from their university's financial support systems, such as the South African NSFAS (National Student Financial Aid Scheme)



and other local financial supports from their university. Matilda said *“So now the social welfare people have been supporting me now. So I had a very good result and so when I presented it to the social welfare, they accepted and gave the support”*, (Female, Ghana), and Rus explained *“I was able to take advantage of the educational opportunities offered by [name] University for the first time”*, (Male, Ethiopia).

### 3.3.2. University Services

A range of university services was helpful to participants to ensure accessibility and student wellbeing, especially in difficult moments. These services included the disability unit, psychiatrists, counseling services, and physical adaptations to space. Some students discussed transferring from one university to another because it was more supportive of their accessibility needs. For example, Joel from Ghana captured how he was transferred to a different university as the services offered there would be more inclusive and accommodating of his needs.

*“Fortunately, when I came here everything was in place. They have a modern kitchen where you can stand at one place and get all the things you will need without depending on anyone, aha. So in case no one is around, you can cook, wash, and you can do anything you want without the help of anybody. So it was good and my expectations was met.”* (Male, Ghana)

Students expressed that their universities have a student wellness focus, whereby the university offers free student medical wellness services such as mental health counseling. They discussed how using that service has been integral to their well-being and academic progress. Yara and Annie said:

*“Something happened as well, which now made me realize that I need to actually seek out help. And in the beginning of this year I went to a psychiatrist. I was using this private psychiatrist and also I was using some counselling services from student wellness. It’s just been quite helpful, and just been quite supportive and stuff like that.”* (Female, South Africa)

Participants also noted the help they received from volunteers. The volunteers assisted in the disability unit of the university. They supported disabled students with various tasks, including note-taking during lectures, carrying books around, and getting to class.

*“The disability unit, which was also a team of volunteers. So if I needed to, to get to a class or tutorial class, or I needed books from the library, then I would ask my team of volunteers to make my copies or take my notes.”* (Female, South Africa)

### 3.3.3. Insufficient Resources

Participants expressed the barriers that come from having insufficient financial support. They often found that they could not fund the cost of their assistive devices needed to support participation in education, their education fees and admission, or expensive specialized transportation. Emmanuel reported *“My mother has to go and borrow money from somewhere else before I was going to pay this admission”*, (Male, Ghana), and Sam added *“Moving with the transport is very expensive here, if you decide to always go by the vehicle, or by the taxi, you can’t afford. So, myself, I’ve been walking since I came to this university”*, (Male, Ghana).

Students observed a stark difference in expenses of being a student with disabilities to being a student with no disabilities. They discussed how it was more costly to be disabled due to multiple financial constraints and extra expenses, such as medical health care, medical insurance fees, the need for assistive devices, and transportation expenses. Participants also expressed that not only is not having financial support a burden, but trying to access funding is also a battle. For example, Yara explained *“It’s more expensive to be the person with a disability because you just need so many more like assistive devices and things”*, (Female, South Africa). The students noted that seeking financial opportunities and securing funding was a pressure-filled process. The stress of financial burdens and seeking financial assistance often impacted their mental and physical health. Nel said



*“The difficulties of trying to get the funders add more pressure, and it’s hard when you have this condition”, (Male, South Africa) and Abai noted “I have faced a lot of economic problems; it is impossible to discuss them in such a short period of time”, (Male, Ethiopia). The participants discussed how the government bursaries were provided only for undergraduate studies, and securing private funding was necessary for postgraduate studies. Yara related this to her fears about the future “And if there’s no funding for post grad studies, I’m getting scared”, (Female, South Africa).*

### 3.4. Inaccessible Space and Practices

Students with mobility aids such as wheelchairs and crutches shared that they faced significant barriers when environmental spaces were not accessible. They experienced such barriers when there were no elevators or ramps and only stairs. This led to students not being able to access certain classrooms or spaces. The theme of practices refers to the subtheme of harmful attitudes, where students with disabilities face discrimination due to staff and peers being ignorant of disabilities and unaccommodating.

#### 3.4.1. Inaccessible Spaces

The physical environment in the university and the local community was challenging for many students with disabilities. Participants stated that the university infrastructure and environment were designed without considering the needs of people with disabilities. Participants often noted insufficient or faulty elevators as a major barrier. They expressed regret for inaccessible spaces in their university, such as inaccessible bathrooms, lecture theatres, desks, libraries, offices, dining halls, shops, and hallways. Tee said: *“Most of the washrooms of the universities are inaccessible for wheelchair users. In the students’ residential areas, there is only a single wheelchair friendly toilet seat in the entire building”, (Male, Ethiopia). Annie also expressed her concern about the university space:*

*“Some tutorial rooms were very inaccessible. I would struggle to get to a desk because so many tables were in my way, and they will see me struggling to get to a table, and then they will just sit there. Then I would be saying to my volunteer okay we’re going to go early, can you please just help me find the desk.” (Female, South Africa)*

The consequences of these inaccessible features were detrimental to youth with disabilities carrying on their daily activities, and were critical obstacles to their participation in education. Roy noted that when the designated disabled desk seating was too far from the front of the lecture theatre, they often missed out on crucial information and felt isolated:

*“So for me it was all the issue of access of my wheelchair. Transport was an issue for me, and the lecturers also standing in the disabled parking. Venues were also inaccessible, I always sat at the back far away from everyone.” (Male, South Africa)*

The participants discussed how when the elevators were faulty, they could not attend certain classes and often went back home and missed out on the learning content. The distances the disabled students had to travel by foot or using their assistive devices, such as wheelchairs or crutches, were often too far, which led to them missing classes or risking injuries and exhaustion. Joel explained:

*“So at [name], accessibility place, when it’s time for class, the stairs that you will climb to go to the class, the time you will reach there, then it is even up to 30 min, the teacher has even started for about 30 min.” (Male, Ghana)*

#### 3.4.2. Harmful Attitudes

Discriminatory attitudes towards participants with physical and/or socio-emotional disabilities were a commonly reported barrier that youth with disabilities faced at universities across the three research sites. Baryeh explained:

*"I will say that it is stigmatization. After I [became disabled], even those who saw how I walked at first were laughing at me. I could pass by and see them imitating the way I walk and I will feel sad."* (Male, Ghana)

Students with disabilities indicated that their teachers and peers tended to have negative beliefs about their academic abilities, and even their abilities to do basic things due to misconceptions and stereotypes about disability. "People started to look down on me", said Nahusenay (Male, Ethiopia), and Suzy offered this explanation:

*"The stigma is so strong, so much misinformation. And disclosure becomes a huge deal because if you want to ask for accommodations from a university or from a workplace, you have to disclose. And if you are disclosing, you are making yourself very vulnerable."* (Female, South Africa)

Participants discussed how some teachers had unprofessional attitudes towards students with disabilities, and did not show willingness to include them. Students reported that they often had to battle to gain accommodations from lecturers, as the lecturers would often treat their accommodations as a burden. Participants reported being excluded from activities and isolated from peers and services. Matilda mentioned that disabled people often get discriminated against as they are never a prime choice to be in a group project, and they see that distinction clearly with hearing and hearing-impaired peers. "When it's time for even group work, you will see that only the hearing people want to form the group and the deaf people aside", (Female, Ghana).

Participants were particularly worried that discrimination against people with disabilities would limit their employment opportunities and career choices. Participants expressed great concern for their future and employment, as they already felt discriminated against in schooling spaces, and they worried about how they will be treated and limited in employment spaces. Sanny said:

*"I'm always anticipating the challenges that I'm going to face after school when I'm going for national service. Here is the case that when you are into the government space, they are used to discriminate a lot. So, I am anticipating that if I am going to any of these government institutions to have my service over there, I may be discriminated."* (Female, Ghana)

#### 4. Discussion

The findings of this study highlight both the strengths and perseverance of students with disabilities, as well as the multiple concerns and restrictions faced by these students at the universities. Our findings indicate that external support and assistance for youth can be present in many forms, whether from family, friends, the university's staff, or services provided. The finding about personal strategies and sources of inner strength is unique, as disabled people are often stereotyped as all-dependent and helpless, where their success and life rely solely on external support [31]. While reliance on families and friends for support may not be new [32], the spiritual source of an individual's strength captures the African context. However, what we heard from youth in the three African countries suggests that the need to rely on oneself for support is common, as external supports are rare or unreliable. The participants of our study, including those with physical disabilities and/or with socio-emotional disabilities, changed that narrative, as they placed much emphasis on how they support themselves with self-determination, getting control over the situation, advocating for themselves and navigating social circles. Participants with physical disabilities, however, believed attitudes towards them lead to socio-emotional disabilities.

When the disabled youth facilitated their own access and inclusion by doing things for themselves or learning how to engage the external support systems, this became a way of personal facilitation. Personal facilitation has been described by Jaarsma and colleagues [33] as self-supporting practices, which may include self-belief, recreational activities, self-care, fitness, and social contacts. Participants in our study reported engaging in such practices,

specifically sports, recreational activities and interactions with others, in search for strength and in lieu of formal supports. These examples of self-care activities are important as they encourage positivity and illustrate coping strategies for students with disabilities. It therefore becomes important for universities to ensure that all their extra-curricular spaces, sports/recreational and social clubs are inclusive of students with disabilities, so that they can join as members and benefit from these opportunities. Inclusive recreational and social spaces could be facilitated by providing the necessary equipment, financial support, human resource support and any other support as the need is determined [34].

Systemic, policy and practice changes are needed to deal with the issues of discrimination that university students experience, such as negative attitudes about their abilities [35], the poor provision of their accessibility needs related to their learning, and exclusionary practices. The personal strategies and coping skills employed by students were crucial in helping students in our study deal with external challenges and obstacles. Therefore, our findings suggest a need for future support of university students with disabilities in the area of self-facilitation, while simultaneously working on making the university environment more accessible and inclusive.

We found that limited access to funding was a significant barrier that affected different aspects of the lives of disabled students, and created multiple impediments. Similarly, previous studies found that a lack of funding negatively affected access to assistive devices, educational programs, transportation, food and shelter, and schoolbooks [36,37]. Without adequate funding, education becomes difficult to sustain—particularly at the university level. Many students generally struggle financially, and often have to work to put themselves through school and sustain their lives before obtaining employment [38]. For disabled students, the problem is more significant, as they require more financial support and resources to participate and be included [39]. In the current study, the youth expressed that they obtained financial support that enabled their university enrollment. Such support came from multiple sources, for example, government scholarships, university bursaries or private sources. Participants expressed that although they had financial support and scholarships that covered their university tuition, they still were in need of funds to cover other necessary expenses allowing them to participate in education, such as assistive devices, technology, textbooks, and student housing. Considering participation theories and research [40], support in accessing education alone is not sufficient; what is equally important is support in engagement and involvement in the university life, both academic and social. Thus, our study points to the urgent need for supports that go beyond tuition fees, in order to create inclusive education.

This study found that students struggled with accessing the university spaces as the campus had inaccessible lecture theatres, bathrooms, hallways, or examination rooms. The need for inclusive design and environmental accessibility has been widely recognized as crucial for the inclusion of disabled students [41,42]. However, these seemed not to be implemented at our participants' universities, as students expressed deep frustration with inaccessibility, which prohibited their attendance and involvement in university activities. Inaccessibility has affected disabled students' inclusion in university in many ways, as reported by researchers [1,41]. However, an important issue raised by participants in our study is that it negatively impacted their learning opportunities and outcomes. Participants expressed that if classes are spaced too far apart, they end up missing out on a substantial amount of the lectures. Other participants found significant discomfort in their university spaces when they had to fit in inaccessible desks or sit too far from the lecturer. Missing out on lessons, being in a state of discomfort, and coming late to sessions leads to inadequate learning opportunities, which ultimately can affect grades and success. University spaces in the three countries were found to be challenging to move through, and require a more inclusive design approach or reasonable, appropriate accommodations. Research indicates that implementing universal and inclusive design principles (e.g., Braille signage, graphic symbols, spacious hallways) improves accessibility [43,44].

Participants in our study discussed experiences related to the lack of equity, equality and social justice. They reported a need to put far more effort into their academic success than their able-bodied peers. Participants faced a shortage of the required supports and accommodations, and expressed that they had to often advocate for their rights of inclusion. Other researchers discussed similar findings, highlighting the absence of inclusive learning opportunities at universities and the restricted involvement of students with disabilities, despite the laws and inclusive policies in place [16]. While some universities have disability services that facilitate accommodations and accessibility, many universities lack these services, or disability services provide insufficient support to ensure students' rights to quality education. Morina (2017) notes that teaching and learning processes are enriched by having diverse students in the classrooms [16]. Therefore, creating a safe, inclusive space that facilitates belonging for students with disabilities is important to enhancing the quality of learning processes for all students.

We also found that other people, and specifically their lack of knowledge and negative attitudes towards disability, were significant barriers that youth faced in their daily academic environments. Researchers from other countries reported limited knowledge about various disabilities, especially invisible ones, and attitudes of society as well-recognized problems [45–47]. Our study adds a nuanced understanding of this issue in the African university context, illustrating the critical need for training for lecturers and teachers. Targeting the preparation/education of professionals (e.g., teachers, staff, public workers) about disability and ensuring a range of possible accommodations could increase capacity within the education sector, leading to more inclusive practices.

The barriers to inclusive education found in this study seemed to negatively affect the youth's perceptions about the future and the possibility of social participation, especially regarding chances of and hopes for employment. Their worries are substantiated as evidence indicates that employment opportunities for people with disabilities are profoundly limited [48–50], and this could lead to long-term social isolation and increased poverty, ultimately creating additional needs for more support, resources, and services.

There are several potential limitations to this study. First, there is a risk of focus group discussions being affected by social-desirability bias, where the youth with disabilities over-reported what they experienced as desirable barriers or facilitators to inclusion. Second, in each respective country, the regions included in the study were not strategically sampled, and the findings cannot be directly generalized beyond the context of the participating youth with disabilities and the universities they attended. Third, while the attempt was made for all focus groups to be undertaken in person, some focus groups occurred online. The different methods could potentially affect the discussion content; however, data collection for this study occurred during COVID-19, and researchers were obliged to follow the health safety protocols, which varied in the three countries.

Future research directions include the need for universities to create specialized funding for students with disabilities, whereby they have financial support for assistive devices, housing, assistive technology with accessibility features, and tuition. Universities also need to prioritize environmental access by updating elevators, creating bigger classrooms, and creating more accessible desks and bathrooms. More disability and diversity awareness also needs to be raised in the university space to get rid of the stigma and discrimination that students with disabilities face.

## 5. Conclusions

This study of the inclusion of university students with disabilities in the three African sites of South Africa, Ghana and Ethiopia revealed that students with disabilities in these locations face many barriers that significantly impact their education. Although the students practice self-facilitation and gain some support from others to assist in their university journey, students with disabilities need much more support in order to participate and be included.

**Author Contributions:** Conceptualization of the study: H.M.A., B.B. and S.M.A.; methodology, D.A., B.B., H.M.A., S.M.A., S.G. and P.N.; formal analysis, D.A., B.B., S.G., P.N. and X.X.; investigation, D.A., S.G. and S.M.A.; resources, H.M.A.; data curation, S.G., S.M.A. and H.M.A.; writing—original draft preparation, D.A., B.B. and P.N.; writing—review and editing, all authors; visualization, B.B. and X.X.; supervision, B.B. and H.M.A.; project administration, H.M.A. and X.X.; funding acquisition, H.M.A., B.B. and S.M.A. All authors have read and agreed to the published version of the manuscript.

**Funding:** The findings reported here are based on research conducted as part of the Queen’s University, University of Gondar, University of Cape Town, and Ashesi University project funded by the Mastercard Foundation Scholars Program Partners Research Fund.

**Institutional Review Board Statement:** The study was conducted in accordance with the Declaration of Helsinki and approved by the appropriate Institutional Review Boards or Ethics Committees: Canada—Queen’s University General Research Ethics Board 6029852, Ethiopia—UoG IRB V/P/RCS/05/2238/2020, Ghana—Ashesi IRB committee 582020, and South Africa—UCT HREC 414/2020.

**Informed Consent Statement:** Informed consent was obtained from all participants involved in the study.

**Data Availability Statement:** Data are held in a confidential repository accessible to research study team members.

**Acknowledgments:** We would like to express our sincere gratitude to the research participants for sharing their experiences with us. We would also like to thank all members of the Transitions of Youth with Disabilities in Education Systems (TYDES) team who are not listed as authors on this manuscript, including Mikyas Abera, Petra Abrosi, Raymond Ayivor, Araba Botchway, Rose Dodd, Joshua Lartey, Tewodros Leulseged, Theresa Lorenzo, Hamdia Mahama, Melkitu Fentie Melak, Nina Okorofo, and Kegniet Shitu.

**Conflicts of Interest:** The authors declare no conflict of interest. The funders had no role in the design of the study; in the collection, analyses, or interpretation of data; in the writing of the manuscript; or in the decision to publish the results.

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