‘WELCOME TO MY LIFE!’ PHOTOVOICE: NEEDS ASSESSMENT OF, AND BY, PERSONS WITH PHYSICAL DISABILITIES IN THE KUMASI METROPOLIS, GHANA

Mandy M. Tijm*, Huib Cornielje **, Anthony Kwaku Edusei

ABSTRACT

Persons with physical disabilities face many architectural and social barriers to community participation. This research employed the ‘Photovoice’ method. The aim was to gain insight into the daily lives of persons with physical disabilities, and to assess their needs in the Kumasi metropolis. Participants in this study were trained and instructed to photograph their everyday activities, so as to document their struggles and concerns, to promote critical dialogue and to reach policymakers. Results indicated a number of concerns, such as poor accessibility to public toilets, transport and buildings, as well as a need for attitudinal change and equal opportunities. Other needs which were raised by the participants included economic empowerment, marketable vocational training, accident prevention, affordable and quality rehabilitation, and the establishment of emergency shelters. It was concluded that the most pressing needs of persons with disabilities were related to overall social, employment and accessibility issues. Finally, the ‘Photovoice’ methodology offered a suitable, structured, and participatory way to assess the needs of persons with disabilities. It gave this marginalised group a voice through photographs, and formed an excellent way of disseminating the findings of this study to the stakeholders involved.

Key words: Photovoice, person with disabilities, participation, policy makers

INTRODUCTION

It is known that in most developing countries, including Ghana, persons with disabilities comprise an impoverished marginalised group and, both in social and economic terms, belong to the poorest of the poor (1,2). In addition to being among society’s poorest and most excluded people, they also encounter many disadvantages in different spheres of life. On a daily basis, persons with disabilities face multiple challenges, and have to show tremendous resilience to achieve great heights in all spheres of human endeavour (3).
In Ghana, individuals with physical disabilities are not only at a disadvantage because of physical barriers like inaccessible public buildings, or the lack of adequate or appropriate means of public transport, but social barriers might also be present. Individuals may have to deal with negative attitudes in society, such as stigmatisation and neglect. Even though their rights are enshrined in national law and legislation, persons with disabilities are often excluded from public and political discussions, and positions of leadership. As a result, they might have little influence on planning and decision-making in society, and therefore their needs are neglected (4).

Research has shown that among persons with disabilities, disabled women are more discriminated against and disadvantaged than men with disabilities (5). Women with disabilities are often underprivileged on account of gender and disability; they may experience physical and emotional abuse; they may live in more disadvantaged conditions; and they are more likely to be victims of violence and sexual assaults, than men with disabilities.

Moreover, various forms of oppression faced by women with disabilities reinforce one another, subsequently leading to unequal opportunities between women and men with disabilities. For instance, men with disabilities are stated to have more years of education and are twice as likely to have jobs, whereas some women with disabilities do not have control over their lives, and therefore are more vulnerable and marginalised in society (6).

**Disability policies in Ghana**

In 2006, the government of Ghana signed the Persons with Disability Act, which guaranteed persons with disabilities access to public places, education, employment and transportation (p24 (7)). As cited in the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD), ‘the full and equal enjoyment of all human rights and fundamental freedoms by all persons with disabilities should be promoted, protected and ensured, and respect for the inherent dignity of persons with disabilities should be promoted’ (8). Although disability policies exist on paper, implementation is very limited, and awareness of the Disability Act in Ghana is low, not only in society, but also among persons with disabilities themselves (3). In addition, national policy development aimed at improving living conditions in general, and among persons with disabilities in particular, is dependent on the availability of quality data. Experiences in high-income countries demonstrate that information about persons with
disabilities and their living conditions, has the potential to contribute towards an improvement in the situation faced by this group (9). In Ghana, like many low-income countries, this quality data is lacking (10).

**Disability studies at Kwame Nkrumah University of Science and Technology**

In the near future, another initiative that may contribute towards ensuring better integration and creating equal opportunities for persons with disabilities in Ghana, is the establishment of the Centre for Disability and Rehabilitation Studies (CEDRES), at the campus of the Kwame Nkrumah University of Science and Technology (KNUST) in Kumasi. Citing the project manager, the Centre aims at ‘finding ability in disability’ through capacity building, which is sought to be realised through the establishment of advanced education capacity in disability and rehabilitation in Ghana and the creation of research and development capacity in the field of disability and rehabilitation.’ CEDRES has strong links with local and national Disabled People’s Organizations (DPOs). Besides offering graduate and undergraduate courses, short courses are also offered for members of DPOs (11).

**Photovoice principles**

Photovoice is a participatory action research methodology based on the idea that people are experts on their own lives (12,13). It employs photography and group dialogue as a means for marginalised individuals to deepen their understanding of a community issue or concern. The visual images and accompanying stories are the tools used to reach and influence policy and decision makers (14). The three main goals of Photovoice are:

1) to enable people to record and reflect their community’s strengths and concerns;

2) to promote critical dialogue and knowledge about personal and community issues, through discussions and photographs; and

3) to reach and influence policy makers (15).

The Photovoice methodology was used for the first time by Wang and Burris (15) in the early 1990s. It was developed to ‘create opportunities for those who are marginalised, as it allows them to actively participate in enhancing their communities by giving them the chance to tell their stories and have their voices heard. Equipped with a camera, individuals can create photographic evidence and symbolic representations to help others see the world through their eyes’ (16).
Apart from providing insight into their lives, taking photographs has an empowering effect on participants. Photovoice asks community members – in the present study, persons with disabilities – to take on the role of photographer, who not only has the responsibility of capturing photographic evidence, but also becomes co-researcher, responsible for data collection, data analysis and sharing of research findings (13).

Although Ghana passed the Disability Act, and is a country with a large number of NGOs and DPOs which are active in the field of disability, persons with disabilities still face many barriers that affect their daily lives. Lack of quality data contributes to the difficulty in developing national policies aimed at improving living conditions in general, and among persons with disabilities in particular. A better understanding of the difficulties encountered by persons with disabilities, would enable policy makers and other stakeholders to develop disability policies aimed at removing or reducing barriers that limit their activities, and restrict participation in society. This study was initiated to gain an understanding and appreciation of the struggles of persons with disabilities, in the metropolitan area of Kumasi, Ghana.

**METHOD**

**Research Design**

The research was a cross-sectional study and was conducted in the urban areas of Kumasi, Ghana. Ten individuals with physical disability were selected, to allow for in-depth discussion and critical analysis of the situation by the study population (14, 17). The group consisted of five women and five men, to take into account gender differences between men and women with disabilities (5).

**Research Process**

During a two-month period, the ten participants attended three half-day Photovoice workshops, that were conducted by at least two facilitators. Major phases of the project included workshop preparation, implementation, data analysis and dissemination.

**Workshop preparation**

Preparation for the workshops included fundraising, and purchasing materials in the Netherlands. For the project, six Samsung ES15 cameras were available.
This type of camera was chosen because of its affordability and practical use. Other materials included ten memory cards, which enabled every participant to use his or her own memory card, so as to avoid confusion about the authorship of photographs (18). Activities in Ghana encompassed the practical arrangements regarding the location of the workshops, as well as training of facilitators to guide the research process.

**Workshop implementation**

The first workshop started with an introduction about Photovoice and the ‘Welcome to my Life!’ project. Examples of previous Photovoice projects were shown, to illustrate that participants were required to take photographs, as well as write accompanying texts to complement the meaning of the visual images (14). After the participants signed consent forms, ethical issues and the use of digital cameras were discussed. It was explained that all activities in the project should be done in a fair, respectful and ethical way. Ethical issues like the safety of participants, as well as respect and privacy, and the fact that carrying a camera implied authority and responsibility, were highlighted (19). The last part of the meeting involved basic lessons in photography. One digital camera was made available for every two people, allowing participants to practise among themselves. Finally, every participant was provided a file with all necessary information about the project and staff, financial compensation for time and travel costs, and sufficient number of forms to obtain the written consent of fellow persons with disabilities or relatives who might be photographed. Participants were given instructions to photograph people, places or things that could convey daily life experiences from their perspectives in the community, including a focus on either problems or strengths. It was stressed that their pictures should represent the difficulties and challenges they personally encountered in daily life, and also be representative of the barriers in society for persons with disabilities as a whole (14, 19).

The second workshop involved separate meetings for men and women, in which experiences with photographing were discussed, along with gender issues. Participants were asked to write down the challenges they encountered as a person with physical disability in the Kumasi metropolis.

**Data Analysis**

At the third meeting, participants first individually and later in small groups, described and analysed the content and context of their photographs. Since the
Photovoice methodology was used as a needs assessment, the process involved three phases (14, 15, 17):

1. Selecting - In the first phase, each participant was provided with small prints of the pictures he or she had taken, and was asked to select five photographs that were most important, most significant or most liked because they best indicated the struggles of living as persons with disabilities in society. To gain a deeper understanding of the selected pictures and stimulate the participants to critically analyse the content of their pictures, the participants were asked to write down what message they wanted to get across with their pictures, using a structured analysis technique called ‘SHOWeD’: What do you See here? What is really Happening here? How does this relate to Our lives? Why does this strength or problem/ concern exist? What can we Do about it? (14).

2. Contextualising or storytelling - Secondly participants, in small groups, showed selected photographs and presented the accompanying stories which conveyed the meaning of their images. The facilitators encouraged participants to relate their individual photographs to collective experiences, by asking the question: ‘The issue you have captured in your pictures, to what extent and how do you think other persons with disabilities encounter the same?’ This resulted in a blackboard full of strengths and concerns that the participants wanted to raise with their pictures.

3. Codifying - In the final phase, participants identified different types of dimensions that arose from the group discussions: issues, and themes or theories. During a plenary group discussion, participants codified issues (concerns for action that were pragmatic and the most directly applicable), and themes or theories (recommendations that were grounded in data that had been systematically gathered and analysed in collective discussion) (15).

**Dissemination**

A half-day seminar was organised, in which the results of the investigations were presented. Pictures made by the participants were shown in the form of a 30-minute compilation, to voice out and present the needs of persons with physical disabilities in the Kumasi metropolis. CEDRES invited influential stakeholders to attend this seminar. Local government and traditional authorities, the national press, relevant departments of the KNUST and different DPOs were present at the dissemination meeting.
Ethical considerations
In Ghana, ethical approval to conduct this study was obtained from the Committee on Human Research Publication and Ethics, of the School of Medical Sciences of the KNUST. Three kinds of informed consent were central to the study: participation, being photographed in an identifiable way, and publication of the photographs (14, 17). As the photographs included personal information, the results of this research project would therefore be used for study purposes only after informed consent was obtained. To compensate for any costs incurred during the process, every participant received a financial (travel) compensation after every meeting.

RESULTS
Project details
Five men and five women with physical disabilities participated in the project. The men’s ages ranged from 33 to 59 years, and those of the women from 22 to 39 years. In total, the ten participants photographed 584 pictures. The number of pictures taken ranged between 21 and 379 per person.

The needs of people with physical disabilities in the Kumasi metropolis
Analysis of the photographic data during the third meeting resulted in the establishment of eleven needs:

1) Accessibility to public toilets
Participants took photographs in their own house, explaining ‘Toilet facility made to suit my accessibility’ (V), and photographs of public toilets. The pictures of the public toilet showed a man in a wheelchair in front of the stairs leading to the entrance. The accompanying text stated: ‘At the public place of convenience a physically disabled person using the wheelchair will have to get down from the wheelchair and crawl on the ground to the toilet. Some of these public toilets are not hygienic for a person using the bare hand crawling on the ground and later using the same hand to eat. Therefore some disabled people wrap their hands with plastic bags in order not to soil their hands with toilet’ (F).

2) Accessibility to public transport
One participant had herself photographed while boarding a bus with her crutches. She explained that the picture portrayed many difficulties that persons
with disabilities face when using public transport. Entering the bus may be a challenge, and it needs to be done quickly as well. This image was also recorded by another participant and described by: ‘This is the daily struggle of physically disabled people from one point to the other using the public minibus, called Trotro’ (F). During group discussions, the issue of neglect and lack of sensitivity by drivers towards persons with disabilities, was raised and recognised by the other participants. When the participants discussed the representation of a man in a wheelchair who, with help of the driver, was trying to access a taxi, they agreed that there was urgent need for a special transport service, such as accessible vans or buses, for persons with disabilities.

3) Accessibility of public buildings

Many of the participants’ photographs indicated architectural challenges faced by persons with disabilities in the metropolis of Kumasi. For instance, they showed a person with crutches climbing the stairs, a wheelchair-using individual crossing the street, as well as several public buildings like banks, micro-credit agencies, shops and churches with stairs in the entryway. One picture showed the smooth pavement of a recently constructed bridge that nevertheless was inaccessible, because of the steps that needed to be climbed at the entrance. With a series of photographs of ramps, one participant aimed to show how access to buildings could be increased. On the other hand, by photographing ramps that were steep, extremely small or had an air-conditioning system in front, he attempted to express his concerns about the exclusion of persons with disabilities in the design of buildings. “This wheelchair is parked in front of a staircase leading to the offices of Ghana Education Service where a physically disabled person has to leave the wheelchair and crawl on the staircase to get information and support from officers. Those with severe disability who cannot go on this staircase on their own will be denied the opportunity to access information and to get the needed supports in order to acquire education to support them’ (F).

4) Attitudinal change

The participants stated that the general perception towards persons with disabilities was negative. They were regarded as being of no value to the family and society, resulting in exclusion and discrimination. On their pictures, and during the discussion groups, the participants expressed their concerns about people’s attitudes towards them. For example: ‘Persons with disabilities are not allowed to take part in social events’ (S), or ‘Family members do not recognize persons
with disabilities when it comes to critical decision-making in the family’ (F). One participant shared his personal story: ‘My father had to abandon his marriage to my mother because he could not bear the thought of caring for a disabled child who he saw as a liability and a waste. The extended African family system does not help as my maternal uncles did not like the idea of my mother ‘wasting’ money on me, a ‘sick’ person’ (W). Another girl explained the difficulties she encountered in obtaining education as: ‘Most people and even parents find it very unnecessary to send their child with a disability in school and even if they are given the chance, most headmasters refuse to accept them’ (D). The negative attitude of people towards persons with disabilities also exists at work places and in churches. Managers were not willing to employ persons with disabilities, and in some churches persons with disabilities were asked to sit at the back of the church so that other people would not see them. Persons with disabilities may have to endure the negative attitude of the public, including parents, particularly in matters related to marriage and birth. People believed that women with disabilities would not be able to perform household tasks like sweeping and cooking, and doubted their fertility. One lady stated: ‘Some of the men will ask you every month, ‘Did you see your menstruation?’ because they think we cannot have children’ (A). In the same way, men with disabilities cannot escape discrimination in the choice of marriage partners, as it is thought that: ‘Men with a disability cannot perform in bed and be good husbands’ (P).

Overall, the participants agreed that stereotyping greatly limited the abilities of persons with disabilities. Therefore they felt that it was important to influence attitudes, and highlight the ability instead of the disability. Participants shared the belief that children still have a neutral perception towards persons with disabilities. For this reason, they stressed that raising awareness should start at a young age, as visualised in a photograph taken by one of the participants: ‘What is a young boy doing with a big old man in a wheelchair? He is eager trying to lend a hand. Pushing wheelchairs for persons with disability can be anybody’s business and why not? ‘(W).

People should realise that disability can happen to anybody at any time in life. One lady took a picture of a boy begging on the street and declared: ‘I like to share the story of this young man because his situation tells all able-bodies who maltreat disabled badly that they one day can also become disabled for a very long period of time.’ (M).

5) Economic empowerment

Almost all the participants photographed one or more persons with disabilities begging on the street. The explanation of one of the participants, regarding a
picture he took of a young boy close to Central Market of the Kumasi metropolis: ‘This boy needs help just to go and learn hand skills to depend for his own for survival’ (S). Often, persons with disabilities had learned a vocation, but lacked the starting capital to set up their own businesses. Although they had the skills, they were still confined to their houses. Along with the economic empowerment of persons with disabilities, the participants discussed the issues and indicated the need for financial support to parents of children with disabilities, as this would enable them to send their children to school and invest in their future.

6) Counselling and guidance centre

During the discussion, the participants agreed on the importance of having somebody to help and guide persons with disabilities, with information about services, programs and referral networks. They acknowledged the fact that interdependence was part of family and community life. One participant expressed his feeling that in life everybody needs somebody to guide and teach one, as reflected in the following text: ‘On this picture you see a father trying to help his baby to walk. Like small children, persons with disabilities need somebody to help you if you cannot do things yourself’ (D). Another participant addressed the same issue by photographing a man holding a pillar. His description was: ‘The young man is smiling; he is hiding behind the pillar. Though we cannot be sure, one thing is certain, one way or the other people with disabilities need a pillar to hold on to and to rely on. In their everyday lives they need pillars of strength’ (W). Finally, a different man emphasised the need for persons with disabilities to exhibit a positive outlook in life despite disability. He photographed a boy who, surrounded by love, support and care, was bound to succeed in life: ‘This disabled child gets a lot of supports and encouragement from the parents and siblings. The family is determined to support this child to reach the limit that the child wants to go. This child with physical disability tells his mother that he would like to be a doctor so that he can take care of his mother when she is sick. If this child doesn’t get the needed support can he realise his dream..?’ (F).

7) Affordable and quality rehabilitation

Whether directly or indirectly, many of the pictures were related to the rehabilitation of persons with physical disabilities. For example, participants photographed fellow persons with disabilities who had no assistive devices, and therefore were housebound or forced to crawl on the ground. Others captured individuals who used calipers or crutches but, due to financial constraints, were not able to replace or repair them. To provide a positive view, one lady asked
somebody to take her picture and expressed: ‘Now with crutches and calipers I am movable!’ (V). In addition to availability and affordability, the participants felt that rehabilitation should, above all, be of good quality.

8) Equal opportunities

With their photographs, participants indicated a need for equal opportunities in all spheres of life, for persons with disabilities. One man took a picture of a traditional leader and asserted: ‘These traditional rulers ascend to the throne by assessing them of not having any kind of disability. These leaders do not engage in any activity which requires using physical strength but persons with disability are denied the opportunity to become a chief or king. Is this a violation of human rights..?’ (F). Another photograph showed an 8 year old boy. The accompanying text was: ‘Unlike my twin-brother, who is not a disabled, my mother has not send me to school’ (P). During the group discussions, the participants told each other about persons with disabilities who, although they had good certificates, were refused jobs because of their disability. The need for equal opportunities was also visualised by one of the participants, who took a picture of a group of people sitting under a tree and wrote: ‘Obscurity. Because a close look of this picture shows family and friends enjoying a pick nick. The gentleman in the wheelchair is almost left in the background. How long can disabled people be put on the backburner? Let us all have the same opportunities to be happy!’ (W).

9) Marketable vocational training

In some of their pictures, participants portrayed fellow persons with disabilities who ran successful businesses. During data analysis, the participants discussed factors that influenced success. For example, they reviewed a photograph showing a person with disability running a guitar business, and agreed that offering exclusive services contributed largely to success. The vocational skills training that was currently offered at rehabilitation centers, usually resulted in few job opportunities for persons with disabilities. This, according to the participants, justified a need to develop and offer marketable vocational training. The discussion was based on photographs showing fellow persons with disabilities begging on the street, and supported the need and the importance of making other marketable vocational options more attractive than begging.

10) Accident prevention

At the discussion groups and through their stories, the participants expressed their concerns about accidents as a cause of disability. In one participant’s
photograph a young boy, whose car had hit a pillar, was shown. He explained: ‘On the picture I see that the car of a young boy has hit a pillar. We have to take good care of our baby’s and never leave them alone so they do not get injured’ (D). For some of the participants their disability was due to an unfortunate accident, so they all agreed with his argument.

11) Emergency shelters

During the discussion, one of the participants expressed her concern about persons with disabilities who were homeless and on the streets. She had taken a photograph and explained: ‘Osei Kwaku is his name. Osei has no home to live in. He has no choice than to stay in the centre of Kumasi, where he sells biscuits to survive. He sleeps in front of somebody’s store, whether it rains or shines’ (D). After the group discussion, the need for the establishment of emergency shelters for persons with disabilities in the Kumasi metropolis, became apparent.

DISCUSSION

In this study, the Photovoice methodology was used in order to gain a deeper understanding of disability. Participants were asked to take pictures of their daily lives in the community, and to include both difficulties and strengths. By passing through the three phases of participatory needs analysis (selecting, contextualising and codifying), the participants shared their daily life experiences as persons with physical disabilities. Along with telling stories, participants discussed the photographs they had taken. These photographs resulted in the identification of needs of persons with disabilities in the Kumasi metropolis (14, 15, 17). The process of moving through the three phases increased critical dialogue, as well as knowledge about community issues. For example, during a dialogue about public toilets, one participant was reminded of an occasion when his crutches slid on the slippery floor, and he fell on the ground. This encouraged others to share their experiences. Furthermore, the participants realised that not only was there a need to increase accessibility of public toilets, but also the type of construction materials used needed to be examined. During the group discussions, the participants were really interested in what others had to say about their pictures. They complimented each other about the way their photographs conveyed what they intended. The accompanying text offered participants the opportunity to clarify what the image stood for. For instance, a picture presented by one lady using crutches and calipers, was called ‘African kitchen’ (V), and showed the kitchen in her community. She explained that the kitchen was not accessible to her because she could not go into
the woods to collect firewood. Another girl used a symbolic representation. She photographed a leaf and compared her feelings as a woman with disability to the condition of the leaf: ‘Life is like a leaf. When it is green it symbolises how life is full of joy, happiness and merry making. But when it dries up it shows pain, agony, sorrows and disappointment life is full of. Sometimes, I feel dry, especially when somebody is insulting on me or when nobody seems to help me in times of need’ (D).

The photographs and captions provided participants with a way of recording their own everyday realities, as well as vividly representing life in their community. To do so, participants asked relatives to take a picture of them and explained in the captions: ‘This is me cooking my meal’ (P), or ‘In this picture I am sweeping my room’ (E). Further, they photographed fellow persons with disabilities and told their stories. To express their concerns about the living conditions of some persons with disabilities, participants photographed individuals with disabilities begging on the street. However, positive life stories pertaining to persons with disabilities running successful businesses, were also included in the photographic collection. In their pictures, participants managed to portray major difficulties encountered by persons with disabilities, such as accessibility to public buildings and transport, as well as issues like the daily struggle to cater for oneself. They were even able to capture more abstract concepts, such as discrimination and the challenges involved in getting married. The Photovoice methodology has been used in projects in other African countries too, to address circumstances affecting the lives of marginalised individuals. For example, in South Africa (20, 21, 22), Uganda (23), Congo (24) and Ethiopia (25).

In the ‘Welcome to My Life!’ Photovoice project, only individuals above eighteen years old were included. This was because of their potential to influence policies and decisions, in order to make changes and improve the lives of persons with disabilities. Moreover, involving adults was considered a strength because of their knowledge of life and ability to express themselves. During the final dissemination meeting, in addition to the movie showing the needs as defined by the group, two of the participants shared their experiences. These real-life stories were convincing and, as appeared from the discussions held at the end of the meeting, appealed to the emotions of the stakeholders who attended. In the literature review, one other Photovoice project was found. It involved persons with disabilities living at grassroots level, and aimed at increasing their influence over social policies, practices and public attitudes. The results showed the daily challenges the participants faced, and provided them with the opportunity to
express their views on changes that could and should be made, to improve the lives of people with disabilities in their society (26). The findings of this particular international study were similar to the results of this Kumasi-based project, suggesting that Photovoice is a useful method for gathering knowledge about the experiences of persons with disabilities, defining their needs, and communicating their message to those people with the ability or power to influence decisions and policies, so as to make changes that can improve the lives of persons with disabilities.

The needs of persons with disabilities in the Kumasi metropolis

The results of the ‘Welcome to My Life!’ Photovoice project indicated eleven needs. To a large extent, these needs were related to physical and social barriers. In their pictures, the participants gave evidence of the challenges persons with disabilities faced with regard to accessing information or public buildings. Stairs or other physical obstacles made it impossible, or unreasonably difficult, for people with disabilities to access goods or services. During the group meetings, participants discussed these accessibility issues and came up with recommendations that were relatively easy to implement, such as the provision of ramps or purchase of accessible vans. Social issues like negative attitudes, circumstances of discrimination, exclusion from public discussion and positions of leadership, were put forward in the photographic data and discussed during the project’s group meetings. These findings are in line with the circumstances of physically challenged persons in Ghana, as described by Kassah (4). In his article, the author also stated that ‘only few of them marry and form a family’. This difficulty in getting married and giving birth, was expressed by a majority of the participants of the Welcome to My Life Photovoice project, irrespective of gender or age, and appeared to be a major concern. Photographs of female participants for example, showed pregnant fellow persons with disabilities, or happy families, whereas male participants portrayed themselves as family men or caring fathers. While discussing the pictures, the participants spoke about people’s negative perceptions towards disability. Although society agrees that persons with disabilities can marry persons without disabilities, it is very difficult for persons with disabilities to find a husband or wife due to discouragement by family and friends (3). One of the participants asked a family member to take her photograph, while seated under a tree and thinking about the past. The accompanying text stated: ‘If I cannot get a job, nobody is willing to marry me, how can I ever cater for myself and succeed in life..? ‘(M). Apart from illustrating
her worries about settling down, her picture represents the position of women in the traditional, religious society of Ghana where they are supposed to fulfill nurturing roles as mother and wife in the household (4). In a country where a majority of the people are Christians, being unmarried is socially unacceptable and pregnancy is regarded as a blessing. In general, people believe that a woman with disability would not be capable of performing her traditional role, and this results in even more difficulties for such women to perform these roles (5).

A need for attitudinal changes, as well as equal opportunities and the importance of assistive devices, rehabilitation and vocational training for persons with disabilities were, whether directly or indirectly, addressed in literature (3, 4, 9). However, the need for accessible public toilets, voiced by persons with disabilities in the Kumasi metropolis, urges policy makers to consider their primary needs too.

Limitations

The ‘Welcome to My Life!’ Photovoice project has its limitations. First of all, it is not (yet) possible to say whether the policy makers who attended the dissemination meeting will use the findings of the project while making their decisions. Of those who attended, the director of the Garden City Special School was really enthusiastic about the Photovoice method as a tool to record and reflect on issues, and communicate this to a higher level. Also, the representatives of the different DPOs gave a positive response to the information about Photovoice and its potential to bring about change. If resources are available, these organisations too are ready to have their voices heard through photographs.

Secondly, the introductory workshop stressed ethical issues and explained that the safety of the participants had to be ensured above all. Nevertheless, as people are carrying and using a valuable object, they might always face some danger (19). On the one hand, freedom to take photographs provided the necessary space to really document the reality of their lives, but on the other hand it could cause some potential danger. As one of the female participants said: ‘Sometimes it was really difficult as people asked money before I could take a picture of them. Also, persons with disabilities in general were really sceptical of photographs and asked: “What are going to do with it?’ (M). For most of the participants, this was the first time they were holding a camera in their hands. For this reason, and together with the freedom they were given, it was inevitable that some participants or their family members used the camera for other purposes also.
Thirdly, to identify, represent and enhance their community, participants took pictures of both themselves and fellow persons with disabilities (14). However, as the project involved only a small group of participants, the representativeness of the findings has to be considered. The issue of representativeness also played a role during data analysis. Some issues were covered by multiple photographs and stories of different participants, and could therefore be considered important. Other concerns, like access to the public toilet, were raised by one individual’s photograph. However, during the group discussion the issue was prioritised by all participants, and might therefore still be valid.

CONCLUSION

The goal of the ‘Welcome to My Life!’ Photovoice project was to gain insight into the daily lives, and assess the needs of persons with physical disabilities in the Kumasi metropolis. It can first of all be concluded that the project, through the photographic images and accompanying texts, has provided a new view on disability and an understanding of the life experiences of persons with physical disabilities. The Photovoice methodology offered a suitable and structured participatory way to assess the needs of persons with disabilities, to give this marginalised group a voice through the photographs, and to disseminate the findings to the stakeholders involved. Secondly, many of the difficulties and challenges encountered by persons with disabilities in the Kumasi metropolis were, whether directly or indirectly, related to accessibility. Practicable steps, like installing a ramp or purchasing special transportation systems which wheelchair-bound individuals can use, are needed to improve the living conditions of persons with disabilities and to minimise the challenges they face in daily life. Further, the needs of persons with disabilities were to a large extent job-related. Although skilled and qualified, many persons with disabilities are unemployed. Sensitising companies and increasing their willingness to employ persons with disabilities, as well as encouraging businesses run by persons with disabilities, are ways that could increase employment opportunities for them. To sensitise society, the government included, and increase social participation, it is essential that parents send their children with disabilities to school, and fight against social discrimination towards the creation of equal opportunities for persons with disabilities.

*Address for Correspondence: James Wattstraat 75-339

ACKNOWLEDGEMENT

This study was conducted at the Centre for Disability and Rehabilitation Studies (CEDRES) at KNUST, Kumasi, in collaboration with the Foundation Africa Next Door (FAND) and Ghana Society of the Physically Disabled (GSPD). It was funded by the Do Dare Dream Foundation and Enablement in the Netherlands. Thanks to Mr. Jonny Osei Kofi, Mr. Yaw Poku Attakora Jnr and Mr. Francis Amedor for their valuable support and involvement in the project. The authors also thank all the individuals who participated in this study, for their time and commitment.

REFERENCES


