

WITS SCHOOL OF GOVERNANCE



UNIVERSITY OF THE WITWATERSRAND, JOHANNESBURG

**Catalysts and constraints influencing the integration of people with disabilities in
the Msunduzi municipal area.**

Roberts, Anton Bernard [9110974D]

Master of Management

**A research report submitted to the Wits School of Governance in partial fulfilment of
the requirements for the degree of Master of Management in the field of Monitoring
and Evaluation.**

Supervisor: Dr Kholiswa Malindini

October 2025

ABSTRACT

This study describes the catalysts and constraints influencing the integration of persons with disabilities (PWD) into the Msunduzi municipal area. The study aimed to identify and analyse the systemic, institutional, and societal factors that either enable or hinder the integration of Persons with Disabilities (PWD) in Msunduzi. By examining these factors, the research sought to provide actionable insights and recommendations to policymakers, businesses, and advocacy groups, thereby advocating for a more inclusive and equitable economic environment for PWD in the Msunduzi Municipality. The study used a qualitative approach and gathered data from sixteen participants. The said data was then analysed thematically. The findings suggest that there are few catalysts but a range of constraints that influence their integration. Some of these included a lack of awareness by government officials about policy and implementation, physical barriers such as inaccessible and poor infrastructure, poor communication, and the absence of an affordable, and accessible transport system in addition to social stigma and discrimination. The research makes a number of recommendations for stakeholders to affect the inclusion of PWD in the Msunduzi Municipality particularly in terms of Involving PWD in decision making structures and consulting them about possible municipal decisions that could have an impact on PWDs lives.

DECLARATION

I declare that this report is my own, unaided work. It is submitted in partial fulfilment of the requirements of the degree of Master of Management in the field of Monitoring and Evaluation. at the University of the Witwatersrand, Johannesburg. It has not been submitted before for any degree or examination in any other University.



Anton Bernard Roberts

October 2025

ACKNOWLEDGMENTS

I would like to acknowledge Saint Dunstons Association for war blinded veterans for their generosity in paying for my tuition and constant moral support through this difficult journey.

The Board, Gareth, Andrea, and Linda require a special mention in this regard.

To my sister Athena and my brother-in-law Albert Botha for their love and who fetched me on numerous occasions and put me up in their home without asking for any payment. To add to this a special thank you goes to my sister Athena who has given up hours of her time after spending 12-hour days at her demanding job as Information Architecture Head at FNB Commercial to assist me with the technical aspects of producing this report.

To my son Keagan who has helped me immensely particularly during the search for empirical evidence and during the data collection and transcription phase of the research.

To my loving wife who always supports me through thick and thin and has to carry a big load on her shoulders while I have been busy doing this degree.

To my supervisor Kholiswa who has stuck with me through this long journey, for her wise counsel and, who has given me so much insight into how I can improve my writing.

Finally, to the participants in this study who gave up their valuable time to talk to me about their integration into the Msunduzi municipality.

TABLE OF CONTENTS

Abstract.....	ii
Declaration	iii
Acknowledgments.....	iv
Chapter One: Introduction and Background	1
Introduction	1
Background and Context.....	2
Problem Statement.....	11
Purpose Statement.....	12
Research Objectives.....	13
Significance of the Study.....	14
Chapter Outline	16
Chapter One: Introduction:.....	16
Chapter Two: Literature review	17
Chapter Three: Research methodology	17
Chapter Four: Data presentation and Analysis.....	17
Chapter Five: Recommendations and conclusion	17
Conclusion	18
Chapter Two: Literature Review	19
Introduction	19
The medical and social models of disability	23

The Medical model	23
The Social model	23
Conceptual framework	24
Theoretical framework	26
Social ecological theories of the environment	27
Empirical Evidence	29
Conclusion	31
Chapter Three: Research Methodology	33
Introduction	33
Research approach	33
Reflections on the literature review	34
Reflection on the Models and Empirical Evidence	34
Research design	36
Research Tools and their application	37
Sampling Technique	38
Target population and sample size	39
Recording and transcription	40
Process of Analysis	40
Positionality	41
Validity and Reliability	41
Ethical Considerations	41

Limitations	42
Gender Imbalance	42
Sample size	42
Geographic location	42
Generalisation	43
Conclusion	43
Chapter Four: Data Presentation and Analysis	44
Introduction	44
Presentation of Data	44
Participant profile	45
Thematic analysis and evaluation	50
Theme 1 Systemic factors that influence the integration of PWD in the Msunduzi municipal economy	50
Theme 2 Institutional factors that influence the integration of PWD in the Msunduzi municipal areas economy	54
Theme 3 Social factors that influence the integration of PWD in the Msunduzi municipal areas economy	56
Conclusion	58
Chapter Five: Recommendations and conclusions	59
Introduction	59
Summary of the Study	60

Systemic factors influencing the integration of PWD in the Msunduzi municipal area	60
Policy Implementation.....	60
Leadership and Stakeholder Attitudes	60
Partnerships and Collaboration	61
Lived Experiences and Advocacy.....	61
Monitoring and Accountability	61
Institutional factors influencing the integration of PWD in the Msunduzi municipality .	61
Barriers to Services and Opportunities	61
Social factors influencing the integration of PWD in the Msunduzi municipal area.....	62
Recommendations.....	62
Recommendations for Inclusion	62
Recommendations for future research.....	63
Conclusion	64
References.....	65
Appendices.....	75
Appendix 1: Questionnaire	75
Appendix 2: Informed Consent Letter	85

LIST OF FIGURES

Figure 1 Participant gender distribution.....	45
Figure 2 Participant age distribution	45
Figure 3 Participant marital status distribution	46
Figure 4 Participant biological children and family response	46
Figure 5 Participant Income.....	47
Figure 6 Participant race distribution.....	47
Figure 7 Stage of onset of participant disability	48
Figure 8 Participant level of functioning based on Washington Group short set enhanced	49

LIST OF TABLES

Table 1 Acts and guidelines developed by the Department of Labour	6
Table 2 Policies and acts added to the social security framework.	7

CHAPTER ONE: INTRODUCTION AND BACKGROUND

INTRODUCTION

This descriptive research study focuses on understanding the challenges and catalysts influencing the integration of persons with disabilities (PWD) in the Msunduzi municipal area. It draws on South Africa's historic transition from apartheid to democracy, which left many marginalized groups, including PWD, facing economic exclusion despite the political and legal advancements intended to correct these inequalities. South Africa's post-apartheid policy framework, including legislation like the White Paper on the Integrated National Disability Strategy (INDS) (Republic of South Africa, December 1997), aimed to integrate PWD into society and the economy. However, despite these efforts, individuals with disabilities continue to experience significant barriers to full integration and economic participation.

The importance of this research lies in addressing the persistent systemic inequalities that PWD face, which are rooted in historical and structural barriers. Although policies like the Employment Equity Act (EEA) (Republic of South Africa, 2001) and the White Paper on the Rights of Persons with Disabilities (WPRPD) (Republic of South Africa, December 2015) exist, they are often inadequately implemented or enforced, leaving many PWD marginalized, especially in the rural and peri urban areas of municipalities like the Msunduzi municipality. The Msunduzi Municipality provides a descriptive picture for examining how these barriers manifest in local economies, where issues like lack of accessible infrastructure, persistent stigmas, and policy inefficiencies still hinder the integration and economic participation of PWD.

The research addresses the continued marginalization of PWD in South Africa, despite the development of comprehensive legal frameworks intended to promote their inclusion. The barriers they face are amongst others both physical (infrastructure) and social (discrimination), and these factors limit their access to employment, education, and services that are essential for economic independence. The research seeks to identify these barriers in detail and propose actionable solutions to enhance the inclusion of PWD in the economy.

This study fills a critical knowledge gap by focusing on localized catalysts and barriers to integration, and sets out a set of recommendations for policymakers, businesses, and advocacy groups to consider in order to drive systemic change. By understanding these specific challenges and opportunities in Msunduzi, the research aims to contribute to broader national and international efforts toward an Inclusive society for PWD.

BACKGROUND AND CONTEXT

“An image the world will remember of the first democratic elections in South Africa in 1994 is that of thousands of disabled people queuing at voting stations across the country under the hot African sun. They came to exercise their right to vote under the most difficult of circumstances. They came in wheelchairs, on crutches, navigating their way by means of white canes, in wheelbarrows and even carried physically on the backs of relatives and friends. Why did they come? They came because they knew that the policy and practice of apartheid had only served to compound their experience of discrimination, indignity, and poverty because of society’s response to their differentness. They came to participate in one of the most empowering experiences ever. They came because they had a vision of a better dispensation under new conditions of liberation and democracy” (Mbeki, 1998, p.46).

According to Cole and van der Walt (2014), South Africa's transition from “Apartheid” to democracy in 1994 was beset with elevated levels of inequality amongst previously disadvantaged groups (Cole & van der Walt, 2014; Taylor, 2002). This inequality, both in society in general and in terms of work was exacerbated by the absence of, or inadequate legislation to facilitate the integration of previously disadvantaged groups into the economy. With the adoption of the South African Constitution in 1996, Persons with Disabilities (hereafter referred to as PWD) were designated as a previously disadvantaged grouping in South Africa who required significant support to be integrated into society at large and into the economy (Cole & van der Walt, 2014). This in effect meant that government had to develop non-discriminatory legislation and actualising measures such as affirmative action targets, to integrate PWD into the economy. Subsequently, the authors indicate that there was an urgent need to identify the prevalence of disability in South Africa to understand the magnitude of the problem integrating persons with disabilities into the South African economy. Citing the 1996 population census figures, the authors highlighted that “6.7 per cent of the South African population was disabled.” (Cole & van der Walt, 2014, p.510)

In the July of 1997, The Community Agency for Social Enquiry (Hereafter CASE) submitted a proposal and was awarded the tender to conduct a national baseline study in South Africa. The tender circulated in December 1996 by the Department of Health required that CASE present the Department of Health with data on several issues. These include among other things, the review of literature which aims to establish working definitions of disabilities while analysing their prevalence and causes across various age groups and regions. It also examines the funding sources, amounts for disability services, and evaluates both the availability and accessibility of resources. Additionally, the study looks into the service needs

of people with disabilities and service providers, highlighting the need for assistive devices for independent living.

The study conducted by Case revealed that there was a prevalence of between 5.7 and 6.1 percent of persons with moderate to severe disabilities in the 9260 households surveyed in the nine Provinces in South Africa. The study also unearthed PWD's experiences of being disabled in South Africa. This data exposed that PWD and parents of children with disabilities were experiencing a great deal of marginalisation in areas such as access to education, access to employment, access to transport, access to welfare grants and access to assistive devices amongst other issues (Schneider et al., 1998). The study also found that even though marginalisation and discrimination were experienced by all race groups, that Black disabled women more acutely experienced it, and significantly amongst the Black, Coloured, and Indian previously disadvantaged groups. Living in rural areas was identified as another variable that compounded this experience. (Schneider et al., 1998)

Following the findings, the White Paper on the Integrated National Disability Strategy (hereafter referred to as INDS) was launched in 1997 (Republic of South Africa, 1997; Watermeyer et al., 2006; Crow, 2015). Touted as “one of the most comprehensive and progressive disability strategies in the world...” (Crow, 2015, p.1), the INDS sought to integrate disability issues into government policy and implementation to redress an inaccessible South African environment, as well as the discrimination and marginalization experienced by PWD during the Apartheid era (Crow, 2015). The INDS highlighted inaccessible areas in the South African environment for PWD that needed to be tackled. Some of these include poverty, employment, education, access to the built environment, assistive devices, communication, health, housing, social security, an inaccessible transport system, and inaccurate statistics (Republic of South Africa, 1997).

The Bill of Rights in Chapter 2 of the South African Constitution of 1996 contains three clusters of South African citizen Rights namely civil and political, socio-economic, and Cultural rights. Based on these clusters of rights, the government was mandated to develop a suite of social security legislation and policy to facilitate the integration of PWD into the economy (Olivier et al., 2004; Taylor, 2002). The social security framework could not only be developed as a curative measure that provided compensation but also had to include policy measures to address social exclusion and marginalization. In addition, the compensatory measures had to be accompanied by “measures aimed at preventing human damage (such as employment-creation policies, health and safety regulation, preventative healthcare) and remedying or repairing damage (e.g. re-skilling or re-training, labour market and social integration)” (Olivier et al, 2004, p.19).

In addition to this requirement for an extension to the concept of social security, the Right to Equality and Non-discrimination, two of the cornerstones contained in the Bill of Rights in the South African Constitution adopted in 1996 had to be included in legislation and policy (Republic of South Africa, 1996). A key piece of legislating the Promotion of Equality and Prevention of Unfair Discrimination Act trickled down from the Bill of Rights in the Constitution (Republic of South Africa, 2000). In line with this Act other pieces of legislation had to be developed to promote equality in the workplace and prevent discrimination towards South Africans and particularly persons with disabilities (Gathiram, 2007; Schneider, 2006). The Department of Labour responded by developing several pieces of legislation codes and guidelines to facilitate the integration of persons with disabilities into the economy.

TABLE 1 ACTS AND GUIDELINES DEVELOPED BY THE DEPARTMENT OF LABOUR

Act / Guideline	Purpose
Labour Relations Act 66 of 1995	Protection is provided for both employees and jobseekers against unfair discrimination based on their disability, particularly in the areas of unfair dismissal and hiring practices
Employment Equity Act, 55 of 1998 (hereafter EEA)	Promote equal opportunities and fair treatment in employment, through the elimination of unfair discrimination and by implementing affirmative action measures to redress disadvantages in employment experienced by people with disabilities
Code of Good Practice Key Aspects on the Employment of People with Disabilities (2015)	This document outlines guidance to employers and emphasizes the importance of not equating disability with ill health.
Technical Assistance Guidelines on the Employment of People with Disabilities (2007)	It sets out practical guidelines and examples for employers, employees, and trade unions on how to promote equality, diversity, and fair treatment in employment through the elimination of unfair discrimination.

Additions to the social security framework are listed in Table 2.

TABLE 2 POLICIES AND ACTS ADDED TO THE SOCIAL SECURITY FRAMEWORK.

Act / Policy	Purpose
Preferential Procurement Policy Framework Act No. 5 of 2004	To Stimulate the participation of disadvantaged individuals and small-, medium- and micro-enterprises in the public tendering system. Tenders are awarded to previously disadvantaged persons affected by unfair discrimination using a points system. .
Broad Based-Black Economic Empowerment Act No 52,2003 (BEE)	“To provide opportunities for the transfer of ownership, management and control of the country's financial and economic resources to previously disadvantaged groups, including disabled people” (Gathiram, 2007,)
The Skills Development Act No. 97 of 1998	“Provides a framework for improving the skills of the South African workforce through national and local workplace strategies. Various forms of assistance are offered to people with disabilities, including an expanded number and range of learnerships leading to recognized occupational qualifications” (TMDDT, DPSA, HSRC, 2006, 6).
The Skills Development Levies Act 1999	“Prescribes the way in which employers should contribute to the National Skills Fund. The fund is to be used to provide job creation, small business development and special assistance for youth, women,

Act / Policy	Purpose
	rural people, and people with disabilities.” (TMDDT, DPSA, HSRC, 2006, 7)
United Nations Convention on the Rights of Persons with Disabilities (UNCRPD 2006)	Article 1 The purpose of the Convention is to promote, protect and ensure the full and equal enjoyment of all human rights and fundamental freedoms by all persons with disabilities, and to promote respect for their inherent dignity. Persons with disabilities include those who have long-term physical, mental, intellectual, or sensory impairments which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others.

An Implementation evaluation report of the WPRPD was accepted in 2023. The purpose of the evaluation was to assess whether the WPRPD goals were met, emerging impacts, cost-efficiency, and areas for improvement. The scope of the evaluation included gauging implementation effectiveness, sustainability, and alignment with broader policies.

Key findings from the Implementation Evaluation Report

The WPRPD is crucial for addressing ongoing marginalization and aligns with global disability rights frameworks, though rural areas and youth voices are underrepresented.

While it generally matches international guidelines and national goals, inconsistencies in South Africa's legal framework remain, particularly between outdated medical models and a rights-based approach. Initiatives have led to observable improvements in accessibility and institutional changes, but challenges in accountability and decision-making inclusion persist, with varying perceptions of success among stakeholders. Limited financial and human resources, along with inadequate data systems, hinder implementation and create mixed evidence regarding value for money. Although the WPRPD has positively impacted employment and infrastructure, progress in areas like HIV/AIDS and economic empowerment for women with disabilities is limited. Current initiatives are resource-intensive and often unsustainable without better funding strategies, and while implementation is inclusive and collaborative, it needs improved transparency and broader stakeholder engagement.

The evaluation report concluded that the WPRPD effectively lays a foundation for disability inclusion but faces challenges in enforcement, resource allocation, and achieving uniform impact across demographics. While the policy aligns with international standards, its implementation needs more robust legislative support and broader stakeholder engagement. The report underscored the need for systemic reforms, sustained resources, and concerted efforts across sectors to achieve meaningful disability inclusion in South Africa. Please note” recommendations on how the WPRPD could be improved have been accepted by cabinet (DWYPD,2023). Furthermore, the South African Law Reform Commission is trying to establish whether the integrated National disability strategy, the UN Convention on the Rights of Persons with Disabilities and the White Paper on the Rights of Persons with Disabilities are still appropriate or whether a new law specifically focused on Disability needs to be developed (SALRC, 2024).

The Msunduzi Municipality in which this case study is based, is one of seven municipalities in the uMgungundlovu District of KwaZulu-Natal. The other municipalities are the uMshwathi, the uMngeni, the Richmond, the Mkhambathini, the Mpofana, and the Impendle Municipalities¹.

Map of Municipalities of the uMgungundlovu District, highlighting Msunduzi Municipality



Figure 1: Map of Municipalities of the uMgungundlovu District, highlighting Msunduzi Municipality

According to the 2011 Census data the Msunduzi Municipality has a population of 618000 (African= 81.1%, White = 6%, Indian/Asian = 9.8%, and Coloured = 2.9%). It has the largest population (618 536) in the uMgungundlovu District, made up of 163 993 households (Statistics SA, 2011b). The ratio of men to women is 91:100, with 45,2% of the households being female headed) (Statistics SA, 2011b). Within KwaZulu-Natal the disability prevalence

¹ https://en.wikipedia.org/wiki/Umgungundlovu_District_Municipality#Local_municipalities).

is 8.4% a larger percentage of women being disabled than men, which is partly to be expected since there are more women than men (Statistics SA, 2011a).

In the search for literature to contextualise the situation of PWD in the Msunduzi municipality only one thesis focused on people in general's experiences of social security grants in the Msunduzi municipality by Khulekani Msomi Entitled "*Perceptions of beneficiaries regarding the usefulness of social grants in the case of the Msunduzi Municipality*", was identified. Based on this gap in the literature, the context for this research is premised on my own subjective experiences of the context of a PWD living in the Msunduzi municipality. In my experience then the catalysts influencing my integration in the Msunduzi municipality are rare however the constraints are pervasive. Some of these constraints are badly maintained infrastructure, and the absence of an affordable and accessible transport system, and a lack of accessible information and inaccessible communication systems. I know as a PWD that policies exist and that the Msunduzi municipality should be implementing, monitoring, and evaluating their implementation however in my experience I see no evidence that this is occurring. I am also not aware of PWD in decision making structures nor am I aware of whether the Msunduzi municipality have partnerships with organisations who work with PWD or indeed even if the municipality consults PWD per se to develop well informed interventions that are based on PWD needs.

PROBLEM STATEMENT

Based on my own subjectivity then, I would argue that despite the growing awareness of the importance of economic inclusion, individuals with disabilities in South Africa continue to face significant barriers to full economic participation (Naidoo et al, 2023). Systemic factors often hinder PWDs ability to access employment opportunities, achieve economic independence, and contribute fully to the economy (Naidoo et al, 2023). These barriers

include inadequate policy frameworks, lack of accessible infrastructure, and persistent societal stigmas that undermine efforts to integrate people with disabilities into the workforce.

There is a critical need to systematically identify and analyse these factors to understand their impact on the economic participation of people with disabilities. As highlighted above, current research lacks comprehensive insights into the interplay of these factors and their effects on economic inclusion. Without a clear understanding of these dynamics, policymakers, businesses, and advocacy groups are limited in their ability to develop effective strategies and interventions.

Addressing these gaps in knowledge is essential for crafting targeted actions that promote a more inclusive and equitable economic environment. This study seeks to fill these gaps by investigating the systemic, institutional, and societal obstacles and enablers affecting the economic participation of PWDs within Msunduzi Municipality.

By providing actionable insights and recommendations, the research aims to drive positive change, enhance economic opportunities, and advance social equity for PWD in South Africa.

PURPOSE STATEMENT

This research study aims to identify and analyse the systemic, institutional, and societal factors that either enable or hinder the economic participation of persons with disabilities in the Msunduzi municipal area. By examining these factors, the research seeks to provide actionable insights and recommendations to policymakers, businesses, and advocacy groups, thereby advocating for a more inclusive and equitable economic environment for PWD living in the Msunduzi Municipality.

Understanding the specific challenges and opportunities faced by Persons with disabilities is crucial for developing effective strategies to strengthen their employment prospects, improve accessibility, and ensure full participation in the economy. This research addresses critical gaps in knowledge, contribute to the development of targeted interventions, and support the broader goal of boosting an inclusive economy that acknowledges and leverages the diverse talents and contributions of PWD. The research aspires to drive positive change, enhance economic opportunities for persons with disabilities, and advance social equity in the Msunduzi municipality, and more broadly, in South Africa per se.

RESEARCH OBJECTIVES

This research had one main objective and nine sub objectives. The main research objective for this study was to identify and examine factors that catalyse or constrain the integration of PWD in the Msunduzi municipal areas economy. Three sub objectives were identified. They are.

- To investigate physical, social, economic, and institutional barriers faced by PWDs in accessing services and opportunities.
- To propose actionable strategies to enhance the inclusion of PWDs, based on findings.
- To suggest mechanisms for monitoring and evaluating PWD inclusion efforts in the municipality.
- Research Question

The main research question for this study was, what are the catalysts and constraints to PWD participating in the Msunduzi Municipalities economy? In order to answer this question, the following seven sub-questions were developed to answer the main research question.

- Do current policies, programs, and initiatives aimed at PWD inclusion within the Msunduzi Municipality exist?
- If policies exist, to what extent are they disability related policies implemented and enforced?
- What are the physical, social, economic, and institutional barriers faced by PWDs in accessing services and opportunities?
- What are the perceptions and attitudes of PWD about their integration in the Msunduzi municipality.
- Are there existing partnerships, funding mechanisms, and advocacy efforts in promoting PWD inclusion?
- What is the level of participation of PWDs and disability-focused organisations in municipal decision-making processes?
- What are PWDs lived experiences and priorities for inclusion?

SIGNIFICANCE OF THE STUDY

The significance of this research study lies in its contribution to the understanding of the catalysts and constraints influencing the integration of Persons with Disabilities (PWD) in the localised context of the Msunduzi municipal area . By situating the study within the broader body of research, this section justifies its importance by highlighting gaps in existing literature and the unique insights it aims to offer.

Numerous studies have examined disability inclusion from policy, economic, and social perspectives. For example, Morwane, Dada, and Bornman (2022) used the WHO's International Classification of Functioning, Disability and Health (ICF) framework to explore barriers to PWD inclusion in the economy. Their findings highlighted environmental barriers, including negative societal attitudes and inadequate services such as health and

transportation, which are critical for economic participation. However, their study primarily focused on trends in the global south and lacked a localized perspective on municipalities in South Africa, particularly in KwaZulu-Natal.

Similarly, Botha et al. (2023) critiqued the implementation of socio-economic policies such as the Skills Development Act and the Employment Equity Act, noting stagnation in employment rates for PWD at 1.3%, despite the government's target of 2%. These findings underscore systemic constraints but do not provide an in-depth analysis at the municipal level, where economic participation is often more directly influenced by local governance and infrastructure.

While international and national studies provide valuable insights, research on the integration of PWD in South Africa at the municipal level remains scarce. As indicated in Chapter 1, the Msunduzi Municipality presents a unique case due to its demographic composition, economic structure, and local governance policies. The only identified study related to this study in Msunduzi focused on social grants rather than economic participation (Msomi, 2023). This research, therefore, fills a critical gap by examining the intersection of policy implementation, economic constraints, and social attitudes within a specific municipal context.

This study extends the application of social ecological theories of the environment (Magasi et al., 2015) by examining how structural, economic, and policy environments interact with PWD's lived experiences. Existing research has applied ecological theories to analyse employment barriers Nationally (McKinney & Swartz, 2019), but little work has been done to integrate this theoretical framework within the South African municipal context. By adopting this lens, the study advances theoretical discourse on disability inclusion and offers a nuanced understanding of localized catalysts and constraints.

Practical Significance: Informing Policy and Implementation

Findings from this study have direct implications for policymakers, and advocacy groups:

1. **Policy Implementation** – While national policies exist, their local enforcement and impact remain inconsistent. By identifying specific gaps, the study provides evidence-based recommendations for improving policy effectiveness.
2. **Municipal Engagement and Community Awareness** – The study highlights the need for PWD participation in decision-making, ensuring that their voices shape municipal planning and service delivery.

In conclusion then, this research study is significant because it moves beyond broad policy discussions to a localized, empirical analysis of the Msunduzi Municipality, offering practical recommendations for systemic change. By filling a knowledge gap, applying robust theoretical frameworks, and providing actionable insights, this study contributes to academic literature, policy discourse, and practical interventions aimed at fostering an inclusive economic environment for PWD in South Africa.

CHAPTER OUTLINE

This research report has five chapters that contain the data outlined below.

CHAPTER ONE: INTRODUCTION:

This chapter provides the reader with the background and context of the study. It contains the problem statement, the research objectives and the research questions that ground the study. It then outlines the significance of the study by outlining what other researchers have done, and the niche area that the study has identified and is addressing.

CHAPTER TWO: LITERATURE REVIEW

In this chapter the literature relating to the integration of PWD is presented and synthesised. The chapter outlines the conceptual and theoretical framework that underpins the study. The chapter then delves into empirical literature from other contexts that talks to the catalysts and constraints influencing the integration of PWD in these other contexts.

CHAPTER THREE: RESEARCH METHODOLOGY

In this chapter the research design, approach, data collection methods, sampling techniques, and analytical procedures used to ensure the study's rigor and validity are presented. Furthermore, ethical considerations, limitations, and the researcher's positionality are addressed to acknowledge potential biases and constraints that may influence the study's findings.

CHAPTER FOUR: DATA PRESENTATION AND ANALYSIS

In this chapter the collected data is collected, analysed, and interpreted to draw insights and inform the conclusion about the problem at hand.

CHAPTER FIVE: RECOMMENDATIONS AND CONCLUSION

In chapter 5 the research study is summarised and the main findings from the research reported. Based on the findings of the research, an evaluation of the extent to which PWD have been integrated into the Msunduzi municipal area is presented.

Second, the chapter then provides the reader with recommendations for decision makers to consider in terms of truly integrating PWD into the Msunduzi municipal area.

Third, some recommendations for future research that are based on the Washington set enhanced and limitations of this study are offered.

CONCLUSION

This study is significant because it not only identifies and analyses the factors affecting PWD economic participation but also provides practical recommendations for improving inclusivity. By addressing key gaps in policy enforcement, accessibility, and societal attitudes, the research contributes to long-term systemic change, promoting a more equitable economic environment in Msunduzi and beyond.

CHAPTER TWO: LITERATURE REVIEW

INTRODUCTION

This chapter provides the reader with an understanding of the terms “integration” and “Inclusion” as concepts that were used at the time of the INDS released in December 1997. The review then shows how integration and inclusion of PWD manifest in terms of participation in the economy. The review follows this discussion with definitions of the terms systemic, institutional and social factors influencing the integration of PWD which are key to clarifying the aim of the study. The review then briefly considers the medical and social models approaches to policy formulation in South Africa, pre and post “Apartheid.” The biopsychosocial model is then discussed and presented as the conceptual framework for this study. In addition, the Social ecological theory subsequently provides a theoretical framework for the study which is also discussed below.

Integration and inclusion

Inclusion and **integration** are foundational concepts in disability studies and social policy, particularly in the context of economic participation. While often used interchangeably, they represent distinct approaches to enabling people with disabilities to engage fully in society.

Inclusion refers to the proactive process of ensuring that individuals with disabilities have equal access to opportunities, resources, and decision-making in all aspects of life, including economic activities. It emphasizes *systemic change*, *universal design*, and *equity* in participation (United Nations, 2006).

Integration, by contrast, involves placing individuals with disabilities into existing structures—such as workplaces or educational institutions—without necessarily modifying

those structures to accommodate diverse needs. It often implies physical presence without full participation or empowerment (Northway, 1997) (Schuelka, 2013)

Economic Participation

Economic participation includes employment, entrepreneurship, access to financial services, and social protection. Inclusive economic systems recognize the barriers—physical, attitudinal, and institutional—that prevent people with disabilities from contributing to and benefiting from economic growth.

Inclusion in the labor market requires not only hiring individuals with disabilities but also adapting work environments, offering reasonable accommodations, and fostering inclusive workplace cultures (OECD, 2022). Integration might involve placing individuals in jobs but without addressing systemic discrimination or accessibility challenges.

Policy and Practice

Global frameworks such as the *Convention on the Rights of Persons with Disabilities* (CRPD) advocate for inclusion as a human right, emphasizing full and effective participation in society (United Nations, 2006). Inclusive policies promote vocational training, anti-discrimination laws, and accessible infrastructure.

In contrast, integration-focused policies may prioritize placement over empowerment, potentially reinforcing marginalization if not coupled with inclusive practices (Shakespeare, 2006).

In short then, disability integration in the South African economy is the comprehensive inclusion of persons with disabilities into all economic spheres, supported by constitutional rights, enabling policies, social equity models, and proactive legislative frameworks ensuring their full and equitable participation and contribution.

Systemic factors influencing the integration and inclusion of PWD.

Systemic factors are commonly defined in disability studies and social policy literature as the embedded structures, norms, and processes—such as laws, institutional practices, cultural values, and financial mechanisms—that collectively determine whether individuals with disabilities are included in or excluded from pivotal areas of life. These factors operate at multiple, interconnected levels, impacting opportunities, participation, and lived experiences.

According to Layton et al., (2024), systemic factors “impact inclusion in disability and rehabilitation research” through the ways they “constrain or enable access, experience, and outcome” for disabled persons, making the lived experiences of people with disabilities a function of both individual impairment and the broader societal context. The World Health Organization's International Classification of Functioning, Disability and Health (ICF) similarly frames systemic factors as “environmental factors”—the physical, social, and attitudinal environment in which people live—that can serve as either **facilitators** or **barriers** for a person's functioning (WHO, 2001; Ntinda & Reed, 2024).

Crucially, the United Nations Convention on the Rights of Persons with Disabilities (CRPD) institutionalizes this approach, defining disability as “an evolving concept that results from the interaction between persons with impairments and attitudinal and environmental barriers that hinder their full and effective participation in society on an equal basis with others” (UN, 2006, Article 1); see also White Paper on the Rights of Persons with Disabilities (2015).

Institutional factors that influence the integration of PWD

Institutional Factors in Disability Integration

Institutional factors refer to the formal structures, policies, practices, and cultural norms within organizations—especially educational, governmental, and social institutions—that either facilitate or obstruct the full participation and inclusion of people with disabilities.

These factors encompass:

- **Enabling elements** such as inclusive policies, accessible infrastructure, disability support services, staff training, and inclusive curricula.
- **Hindering elements** such as inadequate resources, stigmatizing attitudes, poor communication, inaccessible environments, and lack of institutional accountability.

These factors shape the lived experiences of people with disabilities by influencing their access to education, employment, healthcare, and social participation. The effectiveness of institutional support systems is critical in promoting equity, autonomy, and dignity for individuals with disabilities. (Munjanja & Hendricks, 2025; Ndlovu & Makofane, 2025; Nene, 2019)

Societal factors influencing the integration of PWD.

Societal Factors refer to the broad social, cultural, economic, and attitudinal conditions within a community or nation that influence the inclusion or exclusion of people with disabilities. These factors operate outside formal institutions and shape public perceptions, behaviours, and systemic opportunities for individuals with disabilities. These could include Stigma, stereotypes, and discrimination.

- Social isolation and marginalization
- Cultural beliefs that devalue disability. (Charles, Gie, & Musakuro, 2023; Centres for Disease Control and Prevention, 2025)

THE MEDICAL AND SOCIAL MODELS OF DISABILITY

THE MEDICAL MODEL

Until the 1970s the understanding of integrating disability was equated with an individual's physical or mental deficits (Shakespeare, 2013; Schneider, 2006). This preoccupation with an individual's impairment and deficits is referred to as the medical model (Shakespeare, 2013; Schneider, 2006). In this model someone who has an impairment, is someone who requires medical intervention such as treatment or rehabilitation so that they can be fitted back into society (Llewellyn & Hogan, 2000, p. 158, as cited in Fischer Mogensen, 2022, p. 57). In terms of this model actors in society such as service providers, politicians and the public considered PWD to be dependent on others for their survival, persons needing care and charity, and as such, are persons who cannot contribute meaningfully toward a country's economy (Fischer Mogensen, 2022). Prior to 1997 policy formulation in South Africa around integrating PWD was based on the medical model.

THE SOCIAL MODEL

In the northern hemisphere, in the 1970's, integration policy formulation towards persons with impairments moved away from a cure and care perspective towards viewing an individual with an impairment, as a person who must function in a hostile society and barrier rich environment, and hence that it was barriers in the environment that required redress for PWD to participate equally in society (Mogensen, 2022). The barriers to equal participation in society were termed a form of social oppression (Fischer Mogensen, 2022). Today, this approach is understood to be the social model of disability (Oliver, 1983; Shakespeare, 2013; Schneider, 2006).

Using this frame of reference then, policy makers in the Northern hemisphere were encouraged to develop and implement policy that addressed physical, cultural, and

economic barriers in society (Fischer Mogensen, 2021). In 1997 the White Paper integrated National Disability Strategy, adopted this social model of disability as the accepted model to redress environmental barriers to ease the integration of PWD into the South African social fabric (Republic of South Africa, 1997; Schneider, 2006).

CONCEPTUAL FRAMEWORK

Delving more deeply into the literature produced a more complex picture in terms of understanding the integration of PWD into society. From this literature PWDs individual experiences of their disabilities were more nuanced especially in terms of their impairment and their individual experience interacting with the environment. Subsequently a search was made to identify a more holistic approach in understanding the integration of PWD into society. The search unearthed the biopsychosocial model which seemed to talk more accurately and effectively to use to tease out the complex nature of the integration of PWD and hence is presented as the preferred conceptual model used to provide a foundation to guide the study.

The International Classification of Functioning disability and Health (ICF) was released by the World Health Organisation in 2001 which Magasi et al (2015) tout as the gold standard in terms of describing and characterising disability. The ICF moves away from a strict dichotomy between the medical and social models of disability and is termed a biopsychosocial model of disability (Magasi, 2015). According to the ICF, a disability is an evolving and complex concept that "results from the interaction between persons with impairments and attitudinal and environmental barriers that hinder their full and effective participation in society on an equal basis with others" (World Health Organisation, 2001).

From the above definition it is clear that the biopsychosocial model integrates both the medical and social models by recognizing the interaction between impairments and an

individual's unique experience of said impairment and environmental barriers that can impact participation. This model provides a nuanced understanding of disability, suggesting that PWD's integration into society is not solely dependent on their physical or mental impairments but is influenced by external factors such as societal attitudes, infrastructure, and policy frameworks.

In terms of the model's application to understanding the integration of PWD, many countries, including South Africa currently use this model as a conceptual framework for gathering statistical data about PWD in their populations (Stats SA, 2022). This conceptual framework has also been applied to the development of literature reviews. For example, some Researchers such as Morwane, Dada, and Bornman (2022), using data from the Global South have identified multiple barriers to the integration of persons with disabilities (PWD) into the economy, using the WHO's framework of body function, activity limitations, and environmental factors. Morwane, Dada, and Bornman (2022) for example highlighted that environmental barrier such as negative attitudes and lack of services (such as access to health services and transport services) hinder PWD's economic participation in their economies. The authors also noted limited research on this issue, especially in low- and middle-income countries.

Magasi et al (2015), applaud the ICF for not only eliciting close personal factors to describe participation such as technology but that the framework extends to a description of environmental barriers such as the social, economic and policy environment that are sources of barriers for PWD that require redress.

Botha et al., (2023) have echoed these assertions and critiqued the effectiveness of socio-economic legislation, including the Skills Development Act and Employment Equity Act, in achieving economic integration of PWD. They revealed a stagnation at 1.3% employment

against a 2% government target. The authors emphasize the need for a comprehensive policy review and an integrated approach to the economic integration of PWD.

Magasi et al (2015) argue that, although the ICF model offers a more comprehensive approach, the model does not go far enough in terms of fleshing out the nuanced relationship between the individual and the built, social and policy environment that a person with an impairment function in. The authors assert that to understand this relationship, and to identify targets for intervention at the individual, community or societal level, use of other theories of social science of the environment, such as ecological theories of the environment should be used to facilitate a deeper understanding of this relationship. In the context of this research then focused on the catalysts and constraints influencing the integration of PWD in the Msunduzi municipality, the integration of ecological theories of the environment provides a theoretical framework for analysis to understand the various dimensions affecting the integration of PWD in the Msunduzi municipality.

THEORETICAL FRAMEWORK

Based on Magasi et al (2015) assertion above a number of theories emerged that could be used to compliment the conceptual model outlined above. Some of these included Life span theory and social capital theory however the theory that seemed to be the best fit to understand the complexity of the environment PWD interact in was the social ecological theory of the environment. The **social ecological theory** complements the biopsychosocial model by offering a broader perspective on the dynamic relationship between individuals and their environments. This theory emphasizes the role of infrastructure, public services, societal expectations, and policies in enabling or restricting the participation of PWD in various sectors, including employment and education.

SOCIAL ECOLOGICAL THEORIES OF THE ENVIRONMENT

These theories, focus on structures and processes in the environment in which an organism function. This theory provides perspectives to explain “the dynamic interaction of individuals with their environments across time and space” (Lounsbury et al., 2009, p. 213, as cited in Magasi et al., 2015). This theory assumes that there is a dynamic and constant interaction between the individual and the environment that shapes behaviour (Magasi et al, 2015). These theories were expanded to be empirically assessed by defining the variables to be studied be they at the individual, family, or social group level (Magasi et al, 2015). Wright applied these theories when researching PWD with the result that she then theorised that activity limitations and participation restrictions were not because of the impairment but because of environmental factors (Wright, 1983, as cited in Magasi et al., 2015).

Other ecological studies conducted by environmental psychologists looked to understand how environmental factors affect competence in working in an ecosystem and participation in said environment (Magasi et al, 2015). They found that individuals may or may not adapt to take part in environments but that this is affected by personal factors. If for example, the adaptation is within an individual's competence level, they would adapt easily, however, if those competencies were over and above the individual's competence individuals would not adapt to their environment but drop to a lower level of participation to survive (Magasi et al, 2015). Conversely, if the environmental expectations of PWD are low in terms of contributing to the economy their participation in the economy will be low and they may not even know that there are opportunities for them to take part in the economy (Magasi et al, 2015). This psychologist also postulated that an increase in competence levels for individuals could be eased by creating an enabling environment and that this could increase a person's participation in an environment (Magasi et al, 2015). The consequence then for PWD may

be that they will not take part because of environmental barriers or will not take part because they are avoiding taking part because of expected barriers in the environment or a combination of both (Magasi et al, 2015). The authors report that these ecological theories have been applied and confirmed empirically with vulnerable groups and that the participation of these groups including PWD are more likely to be affected by environmental factors such as environmental factors in the economy.

These theories are highly relevant to understanding the impact of environmental catalysts and constraints for PWDs integration in the Msunduzi municipality. According to social ecological models, the environment—including infrastructure, public services, and societal expectations—play a critical role in either enabling or restricting the participation of PWD in economic activities.

For example, McKinney and Swartz (2019) focused on barriers within employment processes, such as job applications, interviews, and testing, suggesting these issues stem from inadequate support and knowledge among employers. They advocate for further research on employment integration phases and call for increased state involvement to address these challenges effectively.

In line with the research sub-question on accessible transportation and infrastructure, this theory helps explain how external factors like the built environment, public services, and community attitudes and expectations either enable or limit PWD's participation in the local economy. For instance, if public transportation is inaccessible, PWD may be unable to engage in vocational training or employment opportunities, leading to reduced economic participation. This theory also provides a framework for the investigation into the economic expectations for PWD and how low societal expectations may limit their participation in the economy, as seen in the findings from environmental psychology studies presented above.

EMPIRICAL EVIDENCE

Literature from other contexts such as Grech, Weber, & Rule (2023) in their article “Intersecting Disability and Poverty in the Global South: Barriers to the Localization of the UNCRPD” presented findings from a study conducted in five countries (Kenya, Philippines, Jamaica, Guatemala, and South Africa). The authors findings showed that ratifying international human rights treaties is catalytic to opening a space for PWD integration to be realised. However, this is constrained by a lack of implementation especially in local rural areas where poverty is usually rife. They identified multiple environmental constraints that were experienced acutely by the people living in these local rural areas. Some of these barriers included a lack of awareness about policy by the government; corrupt officials; PWD who were illiterate or who had little or no education; and would not understand policy; organisations of PWD that were not united and had no financial or human resources to argue with authorities to implement or monitor and evaluate policy; and conversely people who did not recognise the people who represent PWD in these organisations as people who actually understood their circumstances (Grech, Weber, & Rule, 2023).

In Sudan, the situation of PWD integration is quite bleak. Moshoeu (2020) conducted a study in Sudan and found no catalysts but a range of attitudinal, institutional, and environmental barriers facing people with disabilities in Southern Sudan in terms of being integrated into the community. These included ongoing conflict, the absence of human rights policies, a poor health system and no programs to empower persons impaired through conflict to participate in the economy (Moshoeu, 2020).

In the context of Southern Africa and the integration of PWD into the education system Majinge and Msonge (2020) conducted a study on integrating special needs into Tanzania’s Library and Information Science (LIS) curriculum. The study found that only one university

offered special needs as an elective rather than a core subject. The authors' asserted that integration is crucial for improving library services but faced constraints such as untrained staff, lack of assistive equipment, inadequate funding, and low awareness among universities and government officials (Majinge & Msonge, 2020).

In terms of integrating PWD into employment, Mont (2004) analysed disability employment policies in OECD countries, identifying integration and income security as key goals. Findings revealed that anti-discrimination laws, supported employment, and wage subsidies promote workforce inclusion, whereas rigid cash benefits and ineffective quotas act as constraints. Recommendations suggest balancing benefits with work incentives to enhance participation in emerging economies. (Mont, 2004)

In an article entitled "From Margins to Mainstream: What Do We Know About Work Integration for Persons with Brain Injury, Mental Illness, and Intellectual Disability?" by Bonnie Kirsh and colleagues in Toronto Canada (Kirsh et al., 2009), an integrative review provided examining factors affecting work integration across three disability groups: brain injury, mental illness, and intellectual disability (ID). The findings indicate that for individuals with mental illness, work is viewed as an essential part of the recovery process. Meanwhile, in the field of ID, work is considered a planned outcome of development. In contrast, for those with brain injuries, the focus is primarily on employability and job outcomes. In Canada, common catalysts across these groups included the supported employment model, which has reportedly proven effective, and the necessity of ongoing professional and workplace support. The key constraints highlighted were workplace stigma, attitudinal barriers, and lack of effective accommodations by employers (Kirsh et al, 2009).

CONCLUSION

This chapter has offered a definition of integration that was pervasive at the time South Africa transitioned from “Apartheid:” to democracy. It has reviewed the models and empirical evidence related to the integration of Persons with Disabilities (PWD) in different contexts. It has outlined the paradigmatic shift from the medical to the social model of disability, with a strong focus on the biopsychosocial model and social ecological theories as conceptual and theoretical frameworks, respectively.

As presented above, the biopsychosocial model presented by the World Health Organization's ICF (International Classification of Functioning, Disability, and Health) integrates the medical and social models by recognizing the interaction between impairments and environmental barriers. This model provides a nuanced understanding of disability, suggesting that PWD's integration into society is not solely dependent on their physical or mental impairments but is influenced by external factors such as societal attitudes, infrastructure, and policy frameworks. The empirical evidence supports this understanding, with studies highlighting key barriers such as negative attitudes, inadequate support systems, and policy gaps that hinder the inclusion of PWD in economic and social activities.

As argued above, the social ecological theory complements the biopsychosocial model by offering a broader perspective on the dynamic relationship between individuals and their environments. This theory emphasizes the role of infrastructure, public services, societal expectations, and policies in enabling or restricting the participation of PWD in various sectors, including employment and education. The empirical studies reviewed illustrate how environmental factors, from inaccessible transportation to unsupportive employment processes, significantly shape the experiences and opportunities available to PWD.

Together, these models and the empirical evidence presented in this chapter provide critical insights that inform the study's methodology. The descriptive research design adopted in Chapter 3 aligns with the need to systematically assess the catalysts and constraints affecting PWD integration in the Msunduzi Municipality. The literature has guided the selection of qualitative methods, as capturing the lived experiences of PWD requires an approach that recognizes the complexity of the interaction between personal competencies and environmental barriers. Moreover, the focus on themes such as policy implementation, societal attitudes, and infrastructural challenges in the literature aligns with the study's objective to explore these issues through structured interviews.

In summary then, this literature review establishes a solid theoretical and empirical foundation for the research. The integration of the biopsychosocial and social ecological models ensures that both individual experiences and environmental influences are considered in the study's methodology, thereby offering an appropriate framework for investigating the catalysts and constraints influencing the integration of PWD in the Msunduzi Municipality.

CHAPTER THREE: RESEARCH METHODOLOGY

INTRODUCTION

This chapter outlines the research methodology employed to investigate the integration of Persons with Disabilities (PWD) in the Msunduzi Municipality. It details the research design, approach, data collection methods, sampling techniques, and analytical procedures used to ensure the study's rigour and validity. A qualitative research approach was selected to capture the lived experiences, perceptions, and challenges faced by PWD within the municipality. This chapter also discusses the alignment of the chosen methodology with the study's objectives, ensuring that the research design effectively supports the exploration of policy implementation, barriers to inclusion, and factors influencing integration. Furthermore, ethical considerations, limitations, and the researcher's positionality are addressed to acknowledge potential biases and constraints that may influence the study's findings.

RESEARCH APPROACH

The literature outlines various research approaches such as quantitative research which focuses on numerical data and statistical analysis. It employs structured tools like surveys, experiments, and secondary data analysis. Quantitative research aims for objectivity, reliability, and generalizability.

Qualitative Research which explores subjective experiences and meanings. The approach employs open-ended methods like interviews, observations, and content analysis. It emphasizes depth over breadth, seeking rich, contextual insights. Mixed methods approach which integrates both quantitative and qualitative techniques and provides a comprehensive view by combining numerical trends with in-depth narratives. (Wagner, Kawulich, & Garner, 2012).

This research used a qualitative research approach guided with consideration to the literature review. The adoption of a qualitative approach is justified by the need to examine both individual experiences and structural constraints affecting PWD's integration. This influenced the data collection methods.

REFLECTIONS ON THE LITERATURE REVIEW

In chapter two of this research study the literature review presented a well-structured theoretical and conceptual foundation for the study, primarily drawing from the biopsychosocial model and social ecological theory. These models provide complementary perspectives that guided the research design, particularly in terms of assessing the catalysts and constraints affecting the integration of Persons with Disabilities (PWD) in the Msunduzi Municipality.

REFLECTION ON THE MODELS AND EMPIRICAL EVIDENCE

Biopsychosocial Model:

The ICF framework from the World Health Organization (2001) is identified as the gold standard for conceptualizing disability. It moves beyond the traditional medical and social models by emphasizing the interaction between impairments and environmental barriers.

This model informs the study by recognizing that PWD's integration into society is not solely determined by their impairments but also by external barriers, such as infrastructure, economic opportunities, and policy support.

Empirical studies (e.g., Morwane et al., 2022; Botha et al., 2023) highlight real-world barriers, such as negative societal attitudes, inadequate support services, and policy inefficacy, reinforcing the need for a framework that accommodates multiple interacting factors.

Social Ecological Theory:

This theory situates PWD's economic participation within a broader socio-environmental context, recognizing that employment, infrastructure, transportation, and societal expectations play crucial roles.

The theory's emphasis on dynamic interactions between individuals and their environments aligns with studies like McKinney & Swartz (2019), which explore how employers' perceptions, accessibility of job application processes, and policy interventions affect employment outcomes for PWD.

Psychological and environmental studies further validate the theory, showing that PWD's participation levels fluctuate depending on societal expectations, environmental constraints, and available resources.

Qualitative methods are essential to capture PWD's lived experiences, particularly in navigating environmental barriers.

The ICF framework provides a structured way to categorize levels of functioning, ensuring that findings align with international best practices.

Social ecological theory aids in contextualizing the findings within a broader economic and policy framework, ensuring the study identifies systemic gaps and intervention points.

Therefore, the literature review establishes a strong theoretical foundation for the study, ensuring that the research methodology is robust and policy relevant. The integration of the biopsychosocial and social ecological models ensures that both individual experiences and environmental influences are considered, making the methodology comprehensive and well-aligned with the study's objectives.

RESEARCH DESIGN

The literature indicates that research can be descriptive, exploratory, or explanatory. (Wagner, Kawulich, & Garner, 2012), Exploratory research is used when a topic is new or poorly understood, and the study aims to generate initial insights source. This study does not require exploratory research since PWD integration is an established topic with existing policies and programs. Explanatory research on the other hand seeks to establish causal relationships between variables sources. Descriptive research aims to describe characteristics of a population or phenomenon being studied. The questions focus on what characteristics occurred rather than answer questions about the how, when, or why the characteristics occurred in a descriptive research data is collected without changing the environment (Wagner, Kawulich, & Garner, 2012).

This study does not aim to determine why certain policies work or fail but rather to describe and assess their implementation and whether they influence the integration of PWD in the Msunduzi municipality.

This study adopted a descriptive research design. Descriptive research is the best fit for this study because it aims to systematically document and analyse the current state of PWD integration in the Msunduzi municipality. (Wagner, Kawulich, & Garner, 2012), The study's objectives focus on identifying existing policies which participants are aware of and whether they are implemented. The objective is to identify barriers, perceptions, lived experiences, and participation levels, all of which require a detailed and structured assessment rather than an exploration of new topics or an explanation of causal relationships.

Alignment with Research Objectives

The study seeks to provide a picture of PWD integration efforts by the Msunduzi municipality, highlighting both catalysts and constraints.

It involves gathering factual, qualitative data about policies and their implementation, enforcement, participation, and challenges.

Descriptive research excels at measuring and summarising real-world conditions, which aligns with the study's objectives of identifying factors, assessing policy implementation, and analysing experiences.

Alignment with Research Questions

The study involves surveying perceptions, attitudes, and lived experiences, which fits well within a descriptive framework.

The research aims to identify and assess, which is a core function of descriptive research (Wagner, Kawulich, & Garner, 2012).

Given the above, descriptive research design is thus the most appropriate choice as it aligns with the study's goal of providing a detailed, structured, and systematic account of the catalysts and constraints influencing the integration of PWD in the Msunduzi municipality.

RESEARCH TOOLS AND THEIR APPLICATION

The literature reveals various research methods for gathering data, such as surveys, interviews, focus groups, observations, or document artifact analysis. (Wagner, Kawulich, & Garner, 2012). This research used a structured interview approach when gathering data from four face-to-face and twelve telephone interviews (Wagner, Kawulich, & Garner, 2012). A structured interview meant that the questions asked were predetermined and finalised prior to the interview (Wagner, Kawulich, & Garner, 2012). The questions included in the questionnaire were designed to gather both quantitative and qualitative data.

The questionnaire was designed to gather nominal and ordinal data such as the participants sex, age range, disability status, and level of functioning which were easy to gather through

simple yes, no nominal categories, or say 18 to 24 ordinal categories. The questionnaire then used open ended qualitative questions to gather data to meet the research objectives and to answer the research questions. These questions were focused on gathering participants' experiences of living with a disability within the Msunduzi municipality. Given that the research was attempting to understand participants' rather than a numeric understanding of these phenomena structured qualitative questions were appropriate for gathering qualitative answers.

SAMPLING TECHNIQUE

According to the literature, there are two types of sampling: probability sampling and non-probability sampling (Wagner, Kawulich, & Garner, 2012).

Probability sampling is usually associated with quantitative research. Random sampling is when subjects are selected randomly from a population to form part of the sample (Wagner, Kawulich, & Garner, 2012). Nonprobability sampling, however, is usually used in qualitative research. Convenient refers to the researcher using participants that are known to the researcher to include as part of a sample whereas snowball sampling is when the participant who is being interviewed identifies another person who could possibly participate in the study. Alternatively, purposive sampling could be utilised to extract a sample from a particular group such as a group of occupational therapists who do hand therapy (Wagner, Kawulich, & Garner, 2012).

Convenient sampling was chosen as the appropriate sampling method for this study. The reason for adopting convenient sampling was that PWD are not a homogeneous sample who are domiciled in a single abode or institution. This meant that the researcher only accessed PWD who he was aware of or was informed about (Snowball sampling).

TARGET POPULATION AND SAMPLE SIZE

This research focused on persons with disabilities within Msunduzi municipality. A person with a disability for the purpose of this research is defined as *“a person who has the loss or elimination of opportunities to take part in the life of the community, equitably with others, that is encountered by persons having physical, sensory, psychological, developmental, learning, neurological or other impairments, which may be permanent, temporary or episodic in nature. These impairments cause activity limitations and participation restrictions when interacting with attitudinal and environmental barriers.”* (Stats SA, 2022, p2)

The research used the Washington group's short set of enhanced questions to focus the research. The Washington group short set uses the World Health Organisations International classification of functioning disability and health as a conceptual framework. The Washington group short set asks questions about general health and functioning and is used to tease out disability data from populations. The short set enhance asks general health and functioning questions that identify the extent to which persons experience difficulties seeing, hearing, walking, or climbing stairs, remembering, or concentrating, self-care, communication (expressive and receptive), upper body activities, and affect (depression and anxiety). The Washington group short set enhanced has twelve (12) questions related to the eight (8) domains of functioning and participants are requested to indicate whether they have no difficulty some difficulty", "a lot of difficulty" or "cannot do at all" to each question. Participants in this study were only included if they responded positively to the categories ", " a lot of difficulty" or "cannot do at all. The Washington group short set was designed to be used with adults 18 years or older and hence adults 18 years or older who could give consent without a proxy and who identify that they have a lot of

difficulty or cannot do at all in terms of their functioning in one or more of the eight domains above were included in the sample².

This research sampled sixteen (16) persons with disabilities who indicated that they had a lot of difficulty or cannot do in terms of their functioning, living in the Msunduzi municipality located in the uMgungundlovu District of KwaZulu-Natal Province of South Africa.

RECORDING AND TRANSCRIPTION

Data responses such as sex, age and level of functioning were captured using MICROSOFT Forms which in turn collated the responses for analysis.

Interviews were recorded using a DAT recorder. These recordings were transcribed using Turbo Scribe, which generated the transcriptions into a Microsoft Word document for analysis. Each participant's transcript was then assigned a code, and the participants' names were removed from the transcript.

PROCESS OF ANALYSIS

The open-ended questions were thematically analysed in line with Braun & Clarke (2006) six-step approach to analysing qualitative data. This analysis aimed to identify themes and patterns in the data that were closely aligned with the research study objectives (Braun & Clarke, 2006). The process involved coding key themes that would then lay out the thematic areas on which the findings and discussion could be made so that these could be discussed and linked to the research questions in Chapter four of this report.

² [Home - The Washington Group on Disability Statistics \(washingtongroup-disability.com\)](http://www.washingtongroup-disability.com/)

POSITIONALITY

Given that the researcher lives in the Msunduzi municipality and is an unemployed person with a disability and does not work for government and yet is affected by the decisions made by government meant a personal stake in conducting this study. In addition, socio-economic rights, with a specific focus on access to the economy, underpinned the research position.

VALIDITY AND RELIABILITY

To ensure that the data gathered was trustworthy, the researcher generated six interpretations of six participants' transcripts. Participants were then asked to indicate whether the interpretation of their data was correct and to add data if they felt so inclined. In five instances, participants agreed that the interpretation of their interview transcript truly reflected what they had said. The sixth participant acknowledged receipt of the interpretation but made no other comment.

ETHICAL CONSIDERATIONS

This research ensured that the participants were informed about the purpose of the research and that participants were aware that their data would not be divulged to people other than the researcher (Wagner, Kawulich, & Garner, 2012). Anonymity could not be assured given that the researcher had met the participant however anonymity was assured in terms of the report (Wagner, Kawulich, & Garner, 2012). The researcher informed the participants that they could withdraw from the process at any time without fear of reprisals (Wagner, Kawulich, & Garner, 2012). The respondents were given a letter outlining the research together with its purpose and participants were asked to give their consent to gather data from them (Wagner, Kawulich, & Garner, 2012). The participants were asked to sign an informed consent form (Wagner, Kawulich, & Garner, 2012). Participants were also assured both verbally and in the informed consent letter that their hard copy data would be stored in

a safe place and that during data processing storage and retrieval that all data would be password protected (Wagner, Kawulich, & Garner, 2012). Participants were assured that their names would not be included in the research report (Wagner, Kawulich, & Garner, 2012). Given that PWDs are a vulnerable grouping, the informed consent letter provided participants with the contact details of a free counselling service that they could contact should the need for counselling have stem from taking part in the research (Wagner, Kawulich, & Garner, 2012).

LIMITATIONS

This research faced several limitations, including a gender imbalance, a non-representative sample size, and restricted geographic coverage within the Msunduzi Municipality. Additionally, the researcher's positionality as an unemployed person with a disability residing in the municipality influenced the focus on socio-economic rights and access to the economy.

GENDER IMBALANCE

Data was not gathered from white females living in the Msunduzi municipality even though some individuals were approached but did not want to participate in the research.

SAMPLE SIZE

This research accepts that the sample is not representative of the entire population living in the Msunduzi Municipality given that cost factors and time limitations negatively impact data gathering.

GEOGRAPHIC LOCATION

Data was also only gathered from PWD living in eleven of the 41 wards and hence may not reflect the views of PWD living in other wards in the Msunduzi municipality.

GENERALISATION

Due to the chosen sampling technique used in this study, the findings cannot be generalised to reflect the views of PWD living in other municipalities.

CONCLUSION

This chapter has provided a comprehensive overview of the methodological framework guiding this study. The descriptive research design was justified based on its ability to systematically document the realities of PWD integration, while a qualitative approach was chosen to capture the nuanced experiences of participants. The study utilized structured interviews to collect data from a sample of 16 individuals with disabilities, selected through convenience sampling due to accessibility constraints. Data analysis was conducted thematically to identify key patterns and trends relevant to the research objectives. Ethical considerations, including informed consent and participant confidentiality, were rigorously upheld to ensure the integrity of the study. While limitations such as sample size, geographic coverage, and researcher positionality were acknowledged, measures were taken to enhance the reliability and credibility of the findings. The methodology presented in this chapter lays the foundation for the subsequent analysis and discussion of results, ensuring a structured and insightful examination of PWD integration in the Msunduzi Municipality.

CHAPTER FOUR: DATA PRESENTATION AND ANALYSIS

INTRODUCTION

This chapter presents the participant profile, findings of the thematic analysis conducted to answer the main research question which was: what are the catalysts and constraints influencing the integration of persons with disabilities (PWD) in the Msunduzi municipal areas economy. This analysis is structured according to the three key themes that emerged from the data, aligned with the six-research sub questions the study was asking and the questions used to generate the answers from the participants in the questionnaire.

PRESENTATION OF DATA

Sixteen people with disabilities participated in the research. The participant demographics and levels of functioning are outlined in this section.

PARTICIPANT PROFILE

Demographics³

FIGURE 1 PARTICIPANT GENDER DISTRIBUTION

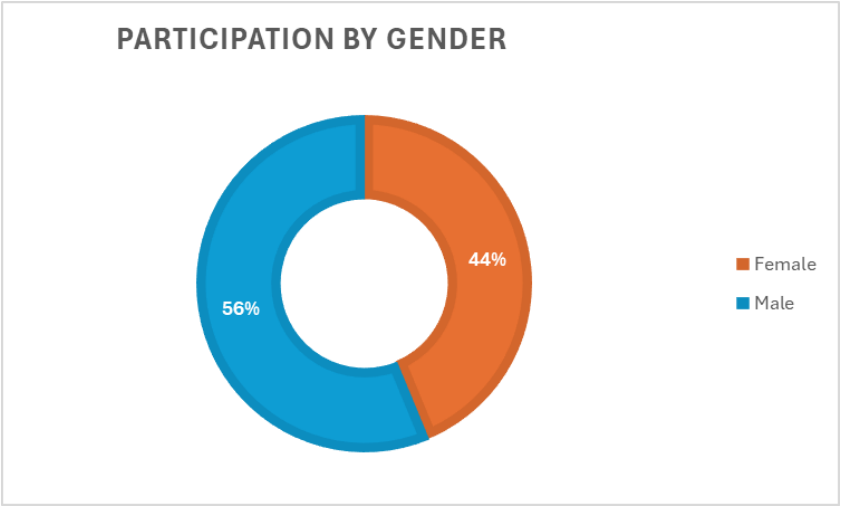
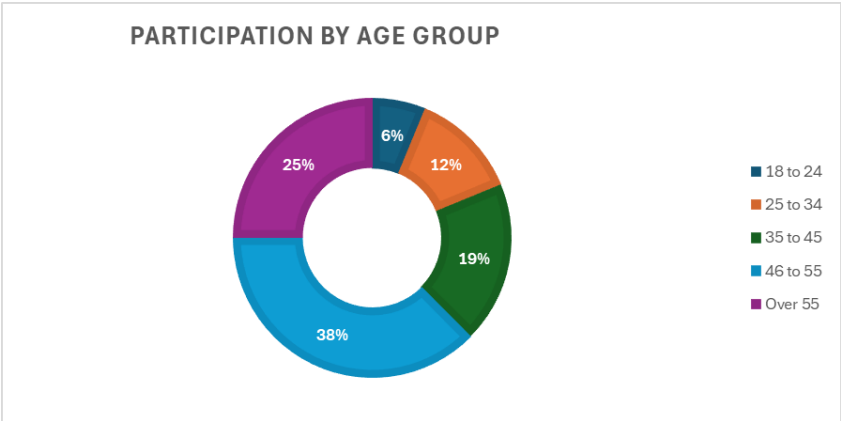


FIGURE 2 PARTICIPANT AGE DISTRIBUTION



³ The source of all graphs in this document is the Author's compilation

FIGURE 3 PARTICIPANT MARITAL STATUS DISTRIBUTION

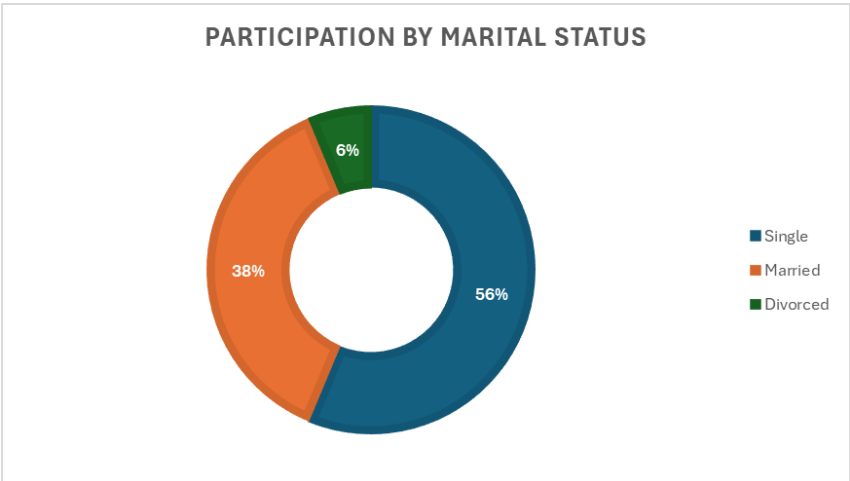
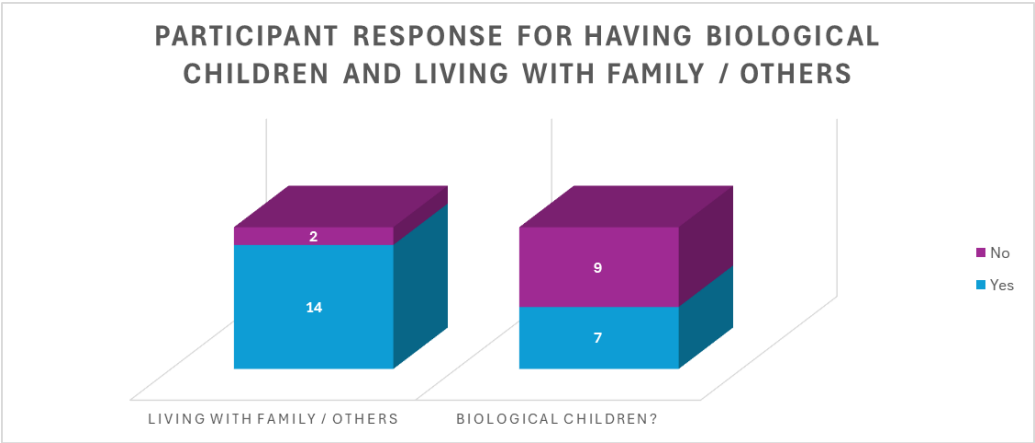
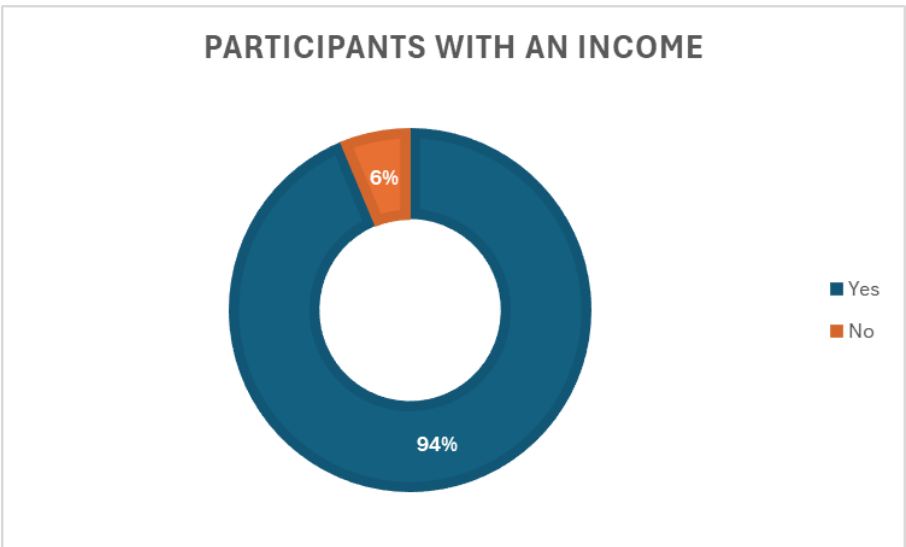


FIGURE 4 PARTICIPANT BIOLOGICAL CHILDREN AND FAMILY RESPONSE



Where the respondents have biological children, 46% indicate that they have 1 child, 46% indicated they have 2 children and 14% indicated they have 3 children. In addition, four of the respondents with biological children also look after other children.

FIGURE 5 PARTICIPANT INCOME



Of the participants that receive an income 73% provide financial support for dependents. The number of dependents range for 1 – 9 people.

FIGURE 6 PARTICIPANT RACE DISTRIBUTION

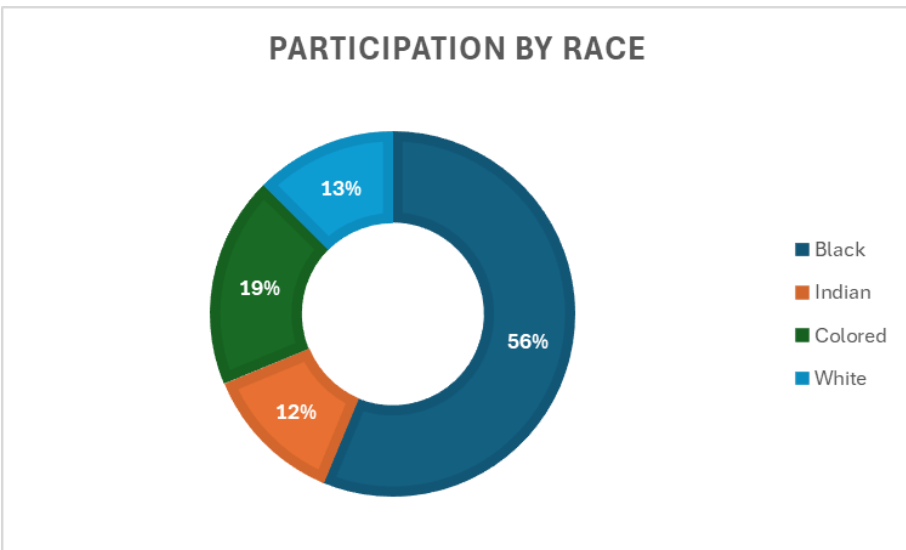
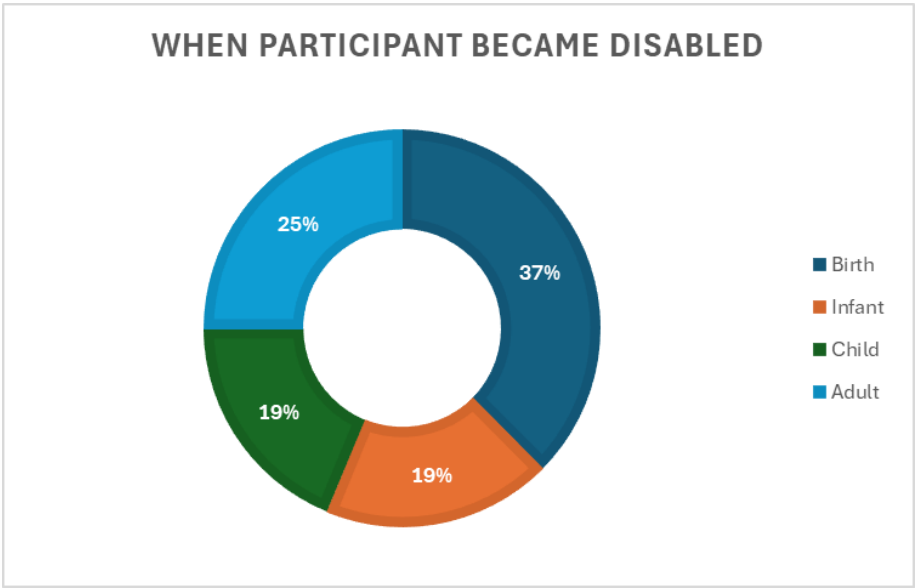


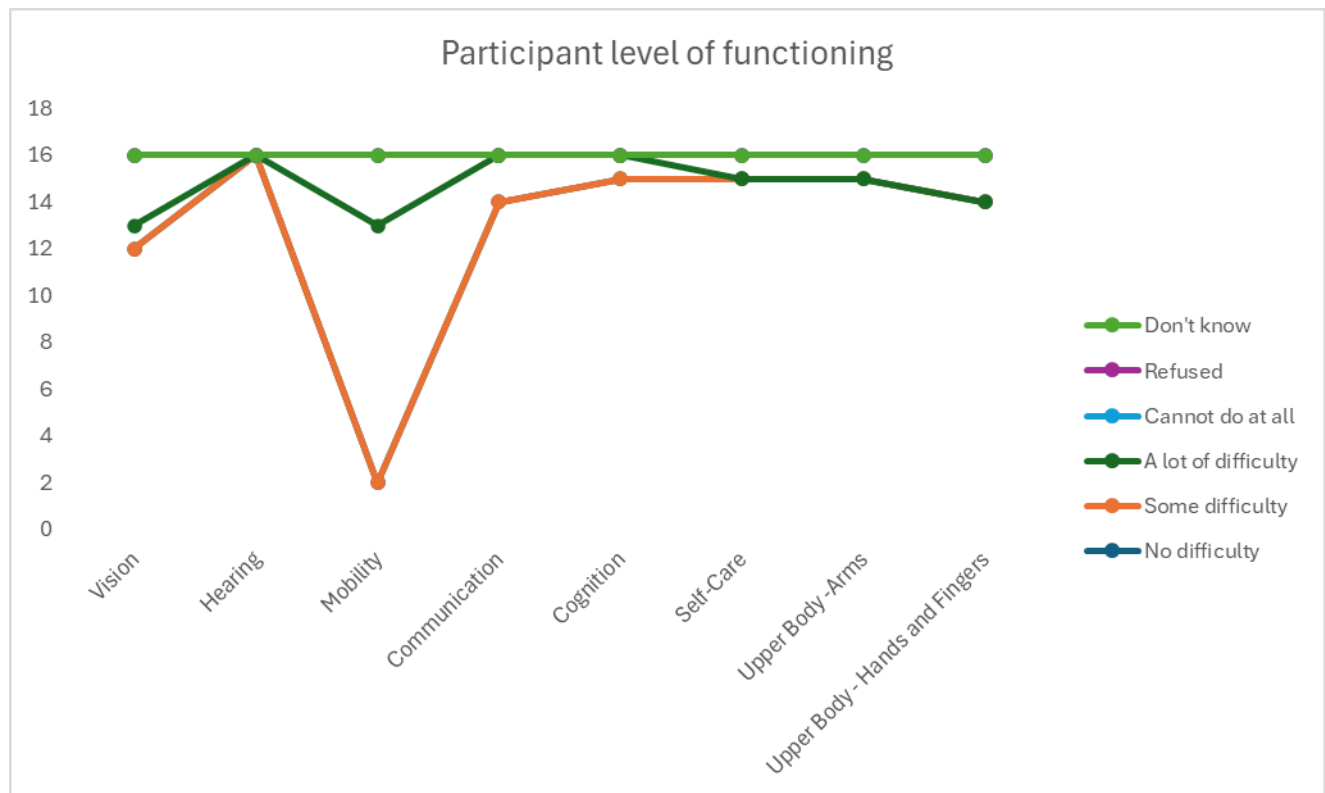
FIGURE 7 STAGE OF ONSET OF PARTICIPANT DISABILITY



The ages of participants that became disabled after birth ranged from nine months to 32 years of age.

Participant Levels of Functioning

FIGURE 8 PARTICIPANT LEVEL OF FUNCTIONING BASED ON WASHINGTON GROUP SHORT SET ENHANCED



19% of the participants indicated a lot of difficulty or could not do the function at all in more than one domain.

Anxiety and depression

Thirty-eight percent of the participants experience no anxiety or depression, whilst. Nineteen percent of the participants experience a little depression and 25% of the participants experience between a little and a lot of depression. Thirteen percent of the participants experience between a little and a lot of anxiety and depression and 13% experience a lot of anxiety and depression daily.

THEMATIC ANALYSIS AND EVALUATION

Three themes emerged from the data generated through the interviews of PWD in the Msunduzi municipal area. They are:

Theme 1 - Systemic factors that influence the integration of PWD in the Msunduzi municipal economy.

Theme 2 - Institutional factors that influence the integration of PWD in the Msunduzi municipal economy; and

Theme 3 - Social factors that influence the integration of PWD in the Msunduzi municipal economy.

In this section then, the themes that emerged from the data are presented and each theme is linked to the research sub questions asked at the beginning of the study stated in chapter one of this report. Furthermore, these sub-research questions are also coupled with the questions asked by participants during the data collection phase of this study and then the data analysis is presented for each theme. Each theme and its findings are then discussed in relation to the literature review presented in Chapter two of this report.

THEME 1 SYSTEMIC FACTORS THAT INFLUENCE THE INTEGRATION OF PWD IN THE MSUNDUZI MUNICIPAL ECONOMY

Systemic factors as outlined in Chapter Two, refer to broad structural and policy -level issues that shape the environment in which institutions and individuals operate.

The overall research sub questions that were asked in relation to this theme were.

- Do current policies, programs, and initiatives aimed at PWD inclusion within the Msunduzi Municipality exist?
- If policies exist, to what extent are disability related policies implemented and enforced?

- Are there financial or economic challenges that PWDs face in accessing services or opportunities in this municipality?
- What is the level of participation of PWDs and disability-focused organisations in municipal decision-making processes?

The questions asked from participants during the interviews that generated the data for this theme were:

- Are you aware of any policies or programs focused on including people with disabilities (PWDs) in the Msunduzi municipality? If yes, can you name them for me?
- Have you encountered any municipal initiatives aimed at supporting or including PWDs in the Msunduzi municipality? If, yes, can you tell me what municipal initiatives they are?
- Have you seen these policies or programs being implemented in practice? If yes how?
- Are you aware of any partnerships between the municipality and organizations that support PWDs?
- Have you seen any funding or resources allocated specifically for programs that benefit PWDs?
- Have you seen advocacy efforts or campaigns aimed at promoting PWD inclusion?
- Have you observed or heard of PWDs being involved in municipal decision-making processes?
- Are disability-focused organizations consulted by the municipality when making decisions that affect PWDs?

- Do you feel PWD voices are adequately represented in municipal policies or meetings?

The data gathered from participants that talk to systemic factors that influence the integration of PWD in the Msunduzi municipal areas economy emerged as follows:

Limited Awareness and Poor Implementation of policy

Findings indicate that while some participants were aware of policies and programs supporting PWD inclusion, awareness was low. Of the 16 participants, only six reported awareness of relevant policies, including the White Paper on the Rights of Persons with Disabilities and the Employment Equity Act. However, implementation was seen as inadequate, with participant A8 stating: *"The rights are good on paper, but the problem is the implementation"*.

Lack of Enforcement of policy and Accountability

Participants highlighted that policies exist but are not enforced effectively. A recurrent sentiment was that municipal officials lacked interest and knowledge about these policies, with participant A1 asserting, *"If the focal person is not advocating for the implementation of these policies, what is she doing in that office?"*. Additionally, corruption and budget constraints were cited as reasons for non-enforcement.

These findings show that the awareness and implementation of policies for persons with disabilities (PWDs) in the Msunduzi Municipality are limited. This resonates with the literature which highlights that despite policy formulation post-apartheid shifting towards the social model of disability, implementation has remained a challenge. The Employment Equity Act and other legislative frameworks aim to promote the inclusion of PWDs, but as noted in the literature and confirmed by the findings, there is a gap between policy and practice. Botha et al., (2023), as outlined in chapter two, critique the socio-economic policies

for being ineffective, emphasizing that the legislation alone has not achieved the desired outcomes.

Economic and Financial Challenges

LIMITED EMPLOYMENT AND BUSINESS OPPORTUNITIES

PWDs struggle to secure employment and financial support for entrepreneurship. Participant A12 noted, *"There is still a struggle in terms of getting funding or sponsorship from the municipality if a person with a disability wants to start a business"*.

INSUFFICIENT DISABILITY GRANTS AND HOUSING

Many participants highlighted that disability grants were inadequate to cover basic living expenses. *"A disability grant is very little,"* participant A10 stated. Additionally, participants suggested repurposing vacant municipal buildings to accommodate PWDs, yet no action had been taken.

The findings indicate that PWDs are economically marginalized through limited employment and inadequate disability grants, reflecting broader trends observed in the literature. Studies such as Mont's (2004), as outlined in chapter two, have shown that rigid welfare systems and ineffective policies hinder the economic integration of PWDs. Additionally, the social ecological theories discussed in the literature suggest that environmental expectations, such as low societal expectations for PWDs, further restrict their economic participation.

Participation in Decision-Making

LIMITED REPRESENTATION

PWDs and disability-focused organizations expressed frustration over being excluded from municipal decision-making processes. Structures established in 2018 to support PWDs were

reportedly non-functional, with no follow-up from the municipality. Participant A16 stated *"We are not given the chance to select another disability structure"*.

LACK OF ENGAGEMENT FROM MUNICIPALITY

Participants reported that municipal officials rarely engaged with the disability sector, leaving PWDs without a voice in policy discussions. Participant A16 expressed frustration, *"Even if you make an appointment to speak with the mayor, they don't respond"*.

The literature similarly notes the exclusion of PWDs from municipal decision-making processes, as observed in the findings. Studies like those by McKinney and Swartz (2019) emphasize the need for greater involvement of PWDs in policymaking. The literature calls for more inclusive practices that ensure PWDs are actively consulted and engaged in governance, which aligns with the frustrations expressed by participants in the study.

THEME 2 INSTITUTIONAL FACTORS THAT INFLUENCE THE INTEGRATION OF PWD IN THE MSUNDUZI MUNICIPAL AREAS ECONOMY

As outlined in chapter two, Institutional factors, in terms of the integration of PWD relate to the practices, procedures, and culture within formal organizations like municipalities, schools, and hospitals.

The overall sub-question that was asked at the beginning of this study to answer issues relating to institutional factors was: *What are the physical, social, economic, and institutional barriers faced by PWDs in accessing services and opportunities?* To answer this overall question two questions were asked during the interviews with participants. They were:

- Have you noticed any institutional processes or systems that make it difficult for PWDs to access services?
- What physical barriers (e.g. inaccessible buildings, transport) do you think PWDs face in accessing municipal services?

Data that emerged from the participant interviews that talked to institutional factors emerged as follows.

Bureaucratic and Institutional Exclusion

PWDs reported facing bureaucratic hurdles when engaging with municipal services. Some reported being sent from one office to another without resolution. One participant stated, *"They send you from one office to another until you leave it alone"* (A9).

Inaccessible Infrastructure

PWDs face significant challenges in accessing public spaces, transportation, and basic services. Issues raised included the lack of Wheelchair ramps, wheelchair-friendly pavements, inaccessible community halls, and public toilets. Participant A1 noted, *"Community halls are not accessible...PWD say we cannot go there because the hall and the toilets are not accessible, and we cannot squat on a bucket"*.

Transport Challenges

Transportation emerged as a major barrier, with a lack of accessible and subsidized public transport. Participants reported that minibuss taxis either charged extra for wheelchairs or refused to transport PWDs, particularly during peak hours. Participant A5 emphasized, *"Transport, as far as I'm concerned, for people with disabilities is non-existent"*.

The findings from the participants identified institutional challenges and the consequences of these institutional challenges. These were, bureaucratic exclusion, and inaccessible infrastructure and transportation that negatively influences their participation in the Msunduzi municipal areas economy. These findings mirror the conclusions drawn in the literature, where Morwane, Dada, and Bornman (2022) highlighted that environmental factors, such as transport, are major barriers to PWD participation in the economy. In addition, the social ecological theory discussed in the literature suggests that the interaction

between individuals and their environments shapes behaviour, explaining how infrastructural barriers in Msunduzi limit PWDs' access to opportunities in the Msunduzi municipal areas economy.

THEME 3 SOCIAL FACTORS THAT INFLUENCE THE INTEGRATION OF PWD IN THE MSUNDUZI MUNICIPAL AREAS ECONOMY

As presented in chapter two, Societal factors encompass cultural attitudes, social norms, and community-level dynamics that affect inclusion.

To elicit data to identify social factors that influence the participation of PWD in the Msunduzi municipal area one question was asked. This was:

- What social attitudes or behaviours have you observed that might make it harder for PWDs to participate in the community?

Data that emerged to answer this question was:

Stigma and Discrimination

PWDs reported encountering negative societal attitudes, including being viewed as incapable. Participant A9 shared an experience at a hospital: *"You're on a wheelchair, why did you indulge yourself in sexual activities?"*. This reflects deep-seated prejudices that impact PWDs' access to essential services.

The stigmatization and discrimination faced by PWDs are recurrent themes in the findings. The literature supports this, with multiple sources identifying societal prejudices as a major obstacle to the integration of PWDs into society. The biopsychosocial model of disability, which recognizes the influence of attitudinal and environmental barriers, is applicable here, as negative attitudes exacerbate the exclusion of PWDs from economic and social participation.

To address the negative influences on participation in the Msunduzi municipal areas, economy participants were asked to identify their priorities for inclusion

The sub-questions that were asked at the start of the research that talk to this area were:

- What are PWDs lived experiences and priorities for inclusion? The questions that were asked in the questionnaire that gave rise to the data that informed this theme were.
- What changes or improvements do you think PWDs should prioritize for better inclusion?
- Are there specific areas (e.g. transport, education, employment) where PWDs feel more inclusion is needed?

The lived experiences of PWDs in Msunduzi reflect deep dissatisfaction with the current state of inclusion. Participants emphasized the need for better housing, accessible transport, improved healthcare, and a higher disability grant. Employment opportunities, particularly in leadership roles within the municipality, were also highlighted as a key priority area. One participant stated, "The municipality needs to prioritize accessible transport, job opportunities, and public awareness campaigns".

The dissatisfaction among PWDs regarding their current state of integration in this microcosm, as highlighted in the findings, is consistent with the literature's exploration of barriers to PWD integration across different contexts. For instance, studies from the Global South have pointed to similar environmental and institutional constraints. The application of social-ecological theory in the literature provides a framework for understanding how these barriers interact to limit PWDs' full participation.

CONCLUSION

The descriptive findings of the study in this microcosm reveal significant systemic, institutional and social factors that negatively influence the integration of PWD in the Msunduzi municipal area. Gaps between policy and practice, environmental accessibility, societal inclusion, and economic opportunities for PWDs emerged from these participants living in the Msunduzi municipal area. These findings are echoed in the literature, which highlights similar challenges in other contexts. Addressing these barriers will require stronger policy enforcement, enhanced infrastructure, and active involvement of PWDs in decision-making processes. The literature's discussion of the biopsychosocial model and social ecological theory has provided a solid foundation for analysing these challenges and identifying potential solutions.

CHAPTER FIVE: RECOMMENDATIONS AND CONCLUSIONS

INTRODUCTION

In the search for literature to contextualise the situation of PWD in the Msunduzi municipality only one thesis focused on people in general's experiences of social security grants in the Msunduzi municipality by Khulekani Msomi Entitled "*Perceptions of beneficiaries regarding the usefulness of social grants in the case of the Msunduzi Municipality*", was identified. Based on this dearth of and gap in the literature, the context for this research is premised on my own subjective experiences of the context of a PWD living in the Msunduzi municipality. In my experience then the catalysts influencing my integration in the Msunduzi municipality are rare however the constraints are pervasive. Some of these constraints are poor policy awareness implementation and accountability, badly maintained infrastructure, inaccessible buildings, the absence of an affordable and accessible transport system, and a lack of accessible information and inaccessible communication systems.

This chapter has four foci:

- To summarize the research study.
- Based on the findings of the research, to assess the extent to which PWD have been integrated into the Msunduzi Municipality.
- To offer recommendations for decision makers to consider in terms of truly integrating PWD into the Msunduzi Municipality.
- To provide some recommendations for future research that are based on the Washington set enhanced set and limitations of this study are offered.

SUMMARY OF THE STUDY

This descriptive study into the catalysts and constraints influencing the integration of Persons with disabilities in the Msunduzi municipal areas economy considered Integration to be, as it defined by the Concise Oxford Dictionary and Northway (1997), involves achieving equal participation in society, blending previously excluded individuals into the broader community. Effective integration, particularly for People with Disabilities (PWD), necessitates both physical inclusion and societal acceptance, requiring reciprocal efforts to create equitable conditions. An assessment of the themes that emerged from this data found that a range of influences talked to constraints rather than catalysts to integration for PWD in the Msunduzi municipality.

SYSTEMIC FACTORS INFLUENCING THE INTEGRATION OF PWD IN THE MSUNDUZI MUNICIPAL AREA

Policy Implementation

The Msunduzi Municipality demonstrates significant gaps in implementing disability-related policies. Despite the existence of frameworks such as the White Paper on the Rights of Persons with Disabilities and international conventions, practical enforcement is inconsistent. Municipal officials' lack of awareness about these policies undermines their effectiveness, leading to a disconnect between legislation and reality.

Leadership and Stakeholder Attitudes

The municipality's leadership has failed to prioritize inclusion. Disability focal persons lack advocacy skills, while the charity model remains dominant, undermining PWD empowerment. The absence of effective coordination and genuine buy-in from leaders perpetuates systemic exclusion.

Financial and economic constraints was a key concern that emerged from the data. Limited Employment and Business Opportunities and Insufficient Disability Grants and Housing

Partnerships and Collaboration

Partnerships that are initiated by external organizations exist with the municipality but are poorly coordinated, often hindered by strained communication with municipal representatives. The lack of inclusive planning and follow-through deters stakeholders from sustaining these collaborations.

Lived Experiences and Advocacy

PWD report being excluded from decision-making processes and forums meant to represent their interests. Municipal representatives often lack training and understanding of disability issues, further alienating PWD.

Monitoring and Accountability

Weak monitoring mechanisms perpetuate a cycle of non-enforcement and unmet resolutions. The absence of consequences for failing to implement policies results in stagnation and persistent exclusion.

INSTITUTIONAL FACTORS INFLUENCING THE INTEGRATION OF PWD IN THE MSUNDUZI MUNICIPALITY

Barriers to Services and Opportunities

In addition to systemic factors PWD face institutional barriers, physical, social, and formal organisational barriers including:

- Bureaucratic exclusion
- Infrastructure Deficiencies: Inaccessible pavements, taxi ranks, public toilets, and community halls exclude PWD from full participation.
- Communication Challenges: Reliance on inaccessible communication methods such as loudhailers or WhatsApp disadvantages PWD, especially in rural municipal areas.

- **Transportation Issues:** Public transport is inaccessible, with drivers often discriminating against PWD by charging extra fees or refusing service.

SOCIAL FACTORS INFLUENCING THE INTEGRATION OF PWD IN THE MSUNDUZI MUNICIPAL AREA.

Following on from the institutional factors, the social factors PWD face in the Msunduzi municipal area are.

Social stigma and discrimination being a major obstacle to the integration of PWDs.

Evaluation of Integration

Integration in the Msunduzi Municipality remains superficial, focusing on tokenistic physical inclusion rather than fostering genuine societal acceptance. While some structures and policies exist, the systemic, institutional, and social barriers highlighted—ranging from poor awareness of policy, policy implementation, policy monitoring, and lack of official's accountability for implementing policy, inaccessible infrastructure to ineffective leadership—reflect a failure to achieve true integration.

Furthermore, critiques of integration as a process imposed on PWD are evident in the municipality's approach, where PWD are expected to conform to societal norms without reciprocal adjustments. This reinforces a passive role for PWD and perpetuates exclusion.

RECOMMENDATIONS

There are two primary recommendations from the analysis if the data namely, recommendations for Inclusion and recommendations for future research.

RECOMMENDATIONS FOR INCLUSION

For Policy Awareness and Enforcement consider or implement the following:

Provide comprehensive training for municipal officials on disability-related policies.

Implement consistent monitoring and accountability mechanisms to enforce policies effectively.

Inclusive Leadership and Representation - Replace ineffective focal persons with trained advocates committed to a human-rights-based approach; Empower PWD to take active roles in decision-making processes through training and representation.

Collaboration and Partnerships - Facilitate co-designed initiatives with PWD to align programs with their needs; Strengthen partnerships with organizations that have expertise in disability inclusion.

Infrastructure Accessibility - Upgrade public spaces, transport systems, and communication platforms to ensure they are inclusive of PWD.

Empowerment and Advocacy - Conduct widespread disability awareness campaigns to challenge societal stigma; Equip PWD with knowledge of their rights and resources to advocate for their needs.

RECOMMENDATIONS FOR FUTURE RESEARCH

There are two primary recommendations for future research.

Recommendations based on the Washington enhanced set of questions.

Given that six out of the sixteen participants indicated that they experienced some level of anxiety and depression as a result of poor inclusion this may indicate a need for more research to explore PWDs quality of life living in the Msunduzi municipality.

Recommendations based on the limitations of the research.

Research with a focus on white woman with disabilities may be an area that could be explored in future research given that white woman with disabilities did not participate in this study.

Research that focuses on persons with hearing impairments integration and inclusion in the Msunduzi municipality may be an area for further research given that there was an absence of this cohort in this research, and this is a gap and limitation of this study.

Research that includes participants from other wards in the Msunduzi municipality may be an area to consider for future research given that only participants from eleven of the forty-one wards in the Msunduzi municipality participated in this research and was one of the limitations of the study.

Given that the results cannot be generalised to other Municipalities in the uMgungundlovu District, research focused on the other municipalities in the uMgungundlovu District may be useful in terms of understanding the extent to which PWD are integrated and included into their municipalities.

CONCLUSION

The Msunduzi Municipality has not yet achieved meaningful integration nor inclusion for PWD. Systemic, institutional, and social barriers undermine efforts to create an inclusive environment. Addressing these challenges requires adopting a holistic, rights-based approach that prioritizes mutual adaptation, accountability, and empowerment. Only through these measures can the municipality achieve genuine integration and inclusion, enabling PWD to participate fully and equally in society.

REFERENCES

- Bevir, M (2009) 'What is Governance' in *Key Concepts in Governance*. London: Sage
- Botha M., Mogensen K. F., Ebrahim A., Brand D. (2023). *In search of a landing place for Persons with Disabilities: A critique of South Africa's skills development programme*, 2023. DOI: 10.1177/13582291231162315.
- Braun, V. and Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research in Psychology*, 3 (2). pp. 77-101.
<http://dx.doi.org/10.1191/1478088706qp063oa>
- Broad-Based Black Economic Empowerment Act 53 of 2003. (2003). Retrieved from https://www.gov.za/sites/default/files/gcis_document/201409/a53-030.pdf
- CASE (Community Agency for Social Enquiry). (1997) "*We also count – the extent of moderate to severe reported disabilities and the nature of the disability experience in South Africa*" DOH, summary report.
1. Centres for Disease Control and Prevention. (2025). Disability barriers to inclusion. *CDC Disability Inclusion*. <https://www.cdc.gov/disability-inclusion/barriers/index.html>
 2. Chappell, P. & Rule, S. (2013). "*Research Report on Disability for the 20 Year Review.*"
 3. Charles, W. P., Gie, L., & Musakuro, R. N. (2023). Barriers to the employability of people with disabilities in the South African public service. *African Journal of Disability*, 12. <https://doi.org/10.4102/ajod.v12i0.1178>
- Constitution of the Republic of South Africa. (1996). Retrieved from <https://www.gov.za/sites/www.gov.za/files/images/a108-96.pdf>
- Crow, CL. (2015). *Movements Toward Inclusion: Integrated National Disability Strategies and the Role of DPOs in Sub-Saharan Africa*. [Honors Thesis, University of North Carolina at Chapel Hill]. Carolina Digital Repository. <https://doi.org/10.17615/dyzh-1k52>

Department of Labour. (2007). *Technical Assistance Guidelines on the Employment of People with Disabilities*. Retrieved from <https://www.sun.ac.za/english/humanresources/Documents/HR%20WEB%20.%20MHB%20WEB/EMPLOYMENT%20EQUITY/2020/Technical%20Assistance%20Guidelines%20Disabilities.pdf>

Department of Labour. (2015). *Employment Equity Act 55 of 1998: Code of good practice on the employment of people with disabilities*. Retrieved from https://www.gov.za/sites/default/files/gcis_document/201511/39383gon1085.pdf

Department of Labour. (2002). *Code of Good practice: Key aspects on the employment of people with disabilities*. (19 August 2002), Republic of South Africa Government Communications.
<https://www.labour.gov.za/DocumentCenter/Code%20of%20Good%20Practice/Employment%20Equity/Code%20of%20Good%20Practice%20on%20Key%20Aspects%20on%20the%20Employment%20of%20People%20with%20Disabilities.pdf>

Department of Performance Monitoring and Evaluation. (2013) *Development Indicators 2012*. DPME, Pretoria

Department of Performance, Monitoring and Evaluation. (2014). *Twenty Year Review South Africa 1994 2014: Background paper: Disability*, Republic of South Africa Government Communications. Retrieved from <https://www.dpme.gov.za/publications/20%20Years%20Review/20%20Year%20Review%20Documents/20YR%20Disability.pdf>

Department of Social Development. (2015). *Experiences of persons with disabilities in learnerships, higher education institutions and public entities: A Pilot Study*. Republic of South Africa, DSD, Pretoria.

Department of Women, Children and Persons with Disabilities. (2011). *"Draft National Disability Policy and Implementation Guidelines June 2011."* Pretoria. DWCPD.

Department of Women, Children and Persons with Disabilities. (2013). *Baseline Country Report to the United Nations on the Implementation of the Convention of the Rights of Persons with Disabilities in South Africa.* Pretoria. DWCPD.

Department of Women, Youth and Persons with Disabilities. (2023). *Final validated consolidated improvement plan Resulting from the Recommendations of the Implementation Evaluation Report on the White Paper on the Rights of Persons with Disabilities.* Pretoria. DWYPD.

Fischer Mogensen K. (2021). *Disability Employment Support Services: A Case Study of Formal Employment for Persons with Disabilities in South Africa.* (Doctor of Philosophy). Cape Town, South Africa: University of Cape Town.

Friedman, B. D., Allen, K. M. (2014), *Systems Theory.*

<https://www.researchgate.net/publication/266615989>

Gathiram, N. (2007). Economic empowerment of physically disabled people in South Africa: challenges and prospects. *Journal of Social Development in Africa*, 22(1), 143-164.

Grech, S., Weber, J. and Rule, S. (2023). Intersecting Disability and Poverty in the Global South: Barriers to the Localization of the UNCRPD. *Social Inclusion*, 11(4), 326–337. <https://doi.org/10.17645/si.v11i4.7246>

Heap, M., Lorenzo, T. & Thomas, J. (2009). *"We've Moved Away from Disability as a Health Issue; It's a Human Rights Issue: Reflecting on 10 Years of the Right to Equality in South Africa."* *Disability & Society*. 24(7): 857–868.

- Howell, C., Chalklen, S., Alberts, T. (2006). A history of the disability rights movement in South Africa. In Watermeyer, Swartz, Lorenzo, Schneider, and Priestley (Eds), *Disability and Social Change: a South African agenda* (pp. 46-84). HSRC Press.
<https://www.hsrcpress.ac.za/books/disability-and-social-change>.
- Ka Toni, M. & Kathard, H. (2011). "We Haven't Arrived Yet, No Time for Complacency!" In: Lorenzo, T. (Ed). Intentions, Pillars, and Players. *Disability Catalyst Africa*. Series No. 1. Cape Town. Disability Innovations Africa.
- Lang, R., Schneider, M., Kett, M., Cole, E., Groce, N. (2017). Policy development: An analysis of disability inclusion in a selection of African Union policies, *Development Policy Review*, 37(2), 155-175. DOI: 10.1111/dpr.12323.
- Loeb, M., Eide, A., Jelsma J., Ka Toni, M. & Maart, S. (2008). "Poverty and Disability in Eastern and Western Cape Provinces, South Africa." *Disability & Society*. 23(4): 311–321.
- Magasi S., Wong A., Gray D. B., Hammel J., Baum C., Wang C.-C., Heinemann A. W. (2015). Theoretical Foundations for the Measurement of Environmental Factors and Their Impact on Participation Among People with Disabilities, 2015. *Archives of Physical Medicine and Rehabilitation* 2015; 96:569-77
- Maja, P., Mann, W., Sing, D., Steyn, A. & Naidoo, P. (2011). "Employing People with Disabilities in South Africa." *South African Journal of Occupational Therapy*. 41(1): 24–32
- Majinga, R.M. and Msonge, V.T. (2020). The integration of special needs for people living with disabilities into Tanzania's LIS curriculum. *SA Jnl Libs & Info Sci* 2020, 86(1). 27-37 <http://sajlis.journals.ac.za> doi:10.7553/86-1-1830

- Matsebula, S., Schneider, M., Watermeyer, B. (2006). Integrating disability within government: the Office on the Status of Disabled Persons. In Watermeyer, Swartz, Lorenzo, Schneider, and Priestley (Eds), *Disability and Social Change: a South African agenda* (pp. 85-92). HSRC Press.
<https://www.hsrcpress.ac.za/books/disability-and-social-change>.
- Mbeki, T. (1998, January 18). *Speech by Deputy President Thabo Mbeki at the official opening of the Perkins Braille Project*.
<http://www.anc.org.za/ancdocs/history/mbeki/1998/sp980116.html>. 9/3/14
- McClain Nhlapo, C., Watermeyer, B., Schneider, M. (2006). Disability and Human Rights: the South African Human Rights Commission. In Watermeyer, Swartz, Lorenzo, Schneider, and Priestley (Eds), *Disability and Social Change: a South African agenda* (pp. 85-92). HSRC Press. <https://www.hsrcpress.ac.za/books/disability-and-social-change>.
- McKinney E., Swartz L. (2019). *Employment integration barriers: experiences of people with disabilities*. DOI:10.1080/09585192.2019.1579749.
- Mitra, S. (2008). "The Recent Decline in the Employment of Persons with Disabilities in South Africa, 1998–2006." *South African Journal of Economics*. 76(3): 480–492.
- Morwane R. E., Dada S., Bornman J. (2021). *Barriers to and facilitators of employment of persons with disabilities in low- and middle-income countries: A scoping review*, 2021. DOI: 10.4102/ajod. v10i0.833.
- Moshoeu, T.I. (2022). "An investigation into political and socio-economic participation challenges faced by people with disabilities in South Sudan" (Master of Arts in

Political Studies). Potchefstroom, South Africa: North-West University.

orcid.org/0000-0002-2021-0342

1. Munjanja, E. C., & Hendricks, E. A. (2025). Views of students with disabilities on how institutional support shapes their experiences. *African Journal of Disability*, 14. <https://doi.org/10.4102/ajod.v14i0.1553>

Naidoo, D., Sibanda, M., Rainford, K., Chidley, C. (2023). *Final Evaluation Report on the Implementation of the White Paper on the Rights of Persons with Disabilities*.

Department of Women, Youth and Persons with Disabilities. Pretoria

1. Ndlovu, S. M., & Makofane, I. B. (2025). Factors inhibiting and enabling the implementation of inclusive education in selected South African primary schools. *African Perspectives of Research in Teaching and Learning*, 9(2). https://conf.ul.ac.za/aportal/application/downloads/APORT009_9_2_10_2025.pdf
2. Nene, N. N. (2019). Accessibility issues and challenges facing students living with disabilities in institutions of higher education and training: The case of the University of KwaZulu-Natal's Pietermaritzburg campus. *Master's thesis, University of KwaZulu-Natal*. <https://researchspace.ukzn.ac.za/bitstreams/cdd69c93-276b-4489-a280-6160d95bea0e/download>

Northway, R. (1997), Integration and Inclusion: Illusion or Progress in Services for

Disabled People? *Social Policy & Administration* issn 0144—5596 Vol. 31, No. 2, June 1997, pp. 157–172.

- OECD. (2022). *Disability, work and inclusion: Mainstreaming in all policies and practices*. Organisation for Economic Co-operation and Development. <https://www.oecd.org/employment/disability-work-and-inclusion-2022-9a4d4c4f-en.htm>

Office of the Deputy President. (1997). *The Integrated National Disability Strategy* [White Paper]: Republic of South Africa Government Communications.

https://www.gov.za/sites/default/files/gcis_document/201409/disability2.pdf.

Oliver, M. 1983. Social work with disabled people. BASW, London: MacMillan.

Olivier, M.P; Smit, N.; Kalula, E.R and Mhone, G. (Eds). 2004. *Introduction to Social Security*. Durban: LexisNexis Butterworths

Promotion of Equality and Prevention of Unfair Discrimination Act, 2000

https://www.gov.za/sites/default/files/gcis_document/201409/a4-001.pdf

Research Dynamics South Africa. (2000). *Situation analysis of disability integration in 18 national government departments*. Republic of South Africa Government Communications.

https://www.gov.za/sites/default/files/gcis_document/201409/disability1.pdf

Republic of South Africa. (1995). *Development Facilitation Act 67 of 1995*:

https://www.gov.za/sites/default/files/gcis_document/201409/act67of1995.pdf

Republic of South Africa. (1996). *Constitution of the Republic of South Africa*:

<https://www.gov.za/sites/www.gov.za/files/images/a108-96.pdf>:

Republic of South Africa. (1998). *Local Government: Municipal Structures Act 117 of 1998*:

[https://www.justice.gov.za/alraesa/projects/Local Government Municipal Structures Act117of1998.pdf](https://www.justice.gov.za/alraesa/projects/Local_Government_Municipal_Structures_Act117of1998.pdf).

Republic of South Africa. (1998). *Skills Development Act 97 of 1998*.

https://www.gov.za/sites/default/files/gcis_document/201409/a97-98.pdf

Republic of South Africa. (1998). *White Paper on Local Government*:

https://www.cogta.gov.za/cgta_2016/wp-content/uploads/2016/06/whitepaper-on-loca-gov.pdf.

Republic of South Africa. (1999). *Skills Development Levies Act, 1999*:

https://www.gov.za/sites/default/files/gcis_document/201409/a9-99.pdf

Republic of South Africa. (2000). *Preferential Procurement Policy Framework Act, 2000*:

<https://www.treasury.gov.za/legislation/acts/2000/a05-00.pdf>

Republic of South Africa. (2000). *Promotion of Equality and Prevention of Unfair*

Discrimination Act 4 of 2000: <https://www.justice.gov.za/legislation/acts/2000-004.pdf>.

Republic of South Africa. (2015). *White Paper on the Rights of Persons with Disabilities*:

https://www.gov.za/sites/default/files/gcis_document/201603/39792gon230.pdf

South African Law Reform Commission (2024). *Domestication of the United Nations*

Convention on the Rights of Persons with Disabilities. Discussion Paper 163.

Project 148. ISBN: 978-1-77997-309-2. Pretoria. SALRC

Statistics S. A. (2011a). *Census 2011: Profile of persons with disabilities in South Africa*,

Report 03-01-59. Retrieved from <http://www.statssa.gov.za/publications/Report-03-01-59/Report-03-01-592011.pdf> on 25 May 2018.

Statistics S.A. (2011b). *Census 2011: The Msunduzi Municipality*. Retrieved from

http://www.statssa.gov.za/?page_id=993&id=the-msunduzi-municipality on 30 May 2018.

Statistics S.A. (2024). *Census 2022: Profiling the socio-economic status and living*

arrangements of persons with disabilities in South Africa, 2011-2022. Retrieved

<https://www.statssa.gov.za/publications/Report-No-03-01-37/Report-No-03-01-372022.pdf>

South African Human Rights Commission Act, 2013

https://www.gov.za/sites/default/files/gcis_document/201409/37253act40of2013sa-humanrightscom22jan2014.pdf

South African Human Rights Commission. (2023). *Annual Advocacy and Communications Report: 2022-2023*. South African Human Rights Commission.

https://www.sahrc.org.za/home/21/files/SAHRC_AdvoComm%20Report%202023Web%2028092023.pdf

Schneider, M., Claassens, M., Dr Kimmie, Z., Dr Morgan, R., Naicker, S., Roberts, A., and Dr McLaren, P. (2000), *We Also Count! The extent of moderate and severe reported disability and the nature of the disability experience in South Africa, Summary Report*.

Schneider, M. 2006. Disability and the environment. In B. Watermeyer, L. Swartz, T. Lorenzo, M. Schneider & M. Priestley (Eds.), *Disability and Social Change a South African Agenda* (pp.8-18). Cape Town: Human Science Research Council.

- Schuelka, M. J. (2013). Inclusive education in developing countries: A critical examination of the concept. *International Journal of Inclusive Education*, 17(8), 1–15. <https://doi.org/10.1080/13603116.2011.580461>
-
- Shakespeare, T. (2006). *Disability rights and wrongs*. Routledge.

Committee of Inquiry into a Comprehensive System of Social Security for South Africa. Cape Town. University of Cape Town.

Thabo Mbeki Development Trust for Disabled People; Disabled People South Africa and Human Sciences Research Council. 2006. *Strategies for skills acquisition and work for people with disabilities*. Available online at www.hsrc.org.za.

- United Nations. (2006). *Conventions on the Rights of Persons with Disabilities*. New York: United Nation Press.
- Vergunst R., Swartz L., Hem K.-G., Eide A. H., Mannan H., MacLachlan M., Mji G., Braathen S. H., Schneider M. (2017) Access to health care for persons with disabilities in rural South Africa, 2017. DOI 10.1186/s12913-017-2674-5.
- Watermeyer, Swartz, Lorenzo, Schneider, and Priestley (eds). (2006). *Disability and social change*. HSRC Press. <https://www.hsrcpress.ac.za/books/disability-and-social-change>.
- WHO (World Health Organization). (2001). *International classification of functioning, disability, and health*. Geneva: WHO.
- World Health Organisation & The World Bank. (2011). *World Report on Disability*. Geneva: WHO Press.

APPENDICES

APPENDIX 1: QUESTIONNAIRE

Dear Participant,

The aim of this study is to understand **Catalysts and constraints influencing the integration of people with disabilities in the Msunduzi municipality.**

PERSONAL INFORMATION

Sex	Male	☐	Female	☐
Age	<18	☐		
	18 - 24	☐		
	25 -34	☐		
	35 -45	☐		
	46 - 55	☐		
	>55	☐		
Marital status	Single	☐		
	Married	☐		
	Cohabiting	☐		
	Other	☐	Specify	
including family and others?				
Do you have biological children?	No	☐	Yes	☐
If yes, how many?				
Do you have other children that you take care of?	No	☐	Yes	☐

If yes, how many?

Do you have an income?

No

☐

Yes

☐

If yes, how many people do you support financially including yourself?

What is your race?

Black

☐

Coloured

☐

Indian

☐

White

☐

Other

☐

When did you become disabled?

At birth

☐

As
Child

a

☐

As
Adult

an

☐

If you became disabled after birth, at what age did you become disabled?

Please would you indicate the extent of your disability by responding to the following questions. The next questions ask about difficulties you may have doing certain activities.

VISION

VIS_1 [Do you/] have difficulty seeing, even when wearing [your/] glasses]? Would you say... *[Read response categories]*

1. No difficulty
2. Some difficulty
3. A lot of difficulty
4. Cannot do at all
7. *Refused*
9. *Don't know*

HEARING

HEAR_1 [Do] [you/] have difficulty hearing, even when using a hearing aid(s)]? Would you say. *[Red response categories]*

1. No difficulty
2. Some difficulty
3. A lot of difficulty
4. Cannot do at all
7. *Refused*
9. *Don't know*

MOBILITY

MOB_1 [Do] [you] have difficulty walking or climbing steps? Would you say. *[Read response categories]*

1. No difficulty
2. Some difficulty
3. A lot of difficulty
4. Cannot do at all
7. *Refused*
9. *Don't know*

COMMUNICATION

COM_1 Using [your/] usual language, [do] [you/] have difficulty.

communicating, for example understanding or being understood? Would you say... *[Read response categories]*

1. No difficulty
2. Some difficulty
3. A lot of difficulty
4. Cannot do at all

- 7. *Refused*
- 9. *Don't know*

COGNITION (REMEMBERING)

1 [Do] [you] have difficulty remembering or concentrating? Would you say. *[Read response categories]*

- 1. No difficulty
- 2. Some difficulty
- 3. A lot of difficulty
- 4. Cannot do at all
- 7. *Refused*
- 9. *Don't know*

SELF-CARE

[Do [you/] have difficulty with self-care, such as washing all over or dressing? Would you say. *[response categories]*

- 1. No difficulty
- 2. Some difficulty
- 3. A lot of difficulty
- 4. Cannot do at all
- 7. *Refused*
- 9. *Don't know*

UPPER BODY

[Do you] have difficulty raising a 2 Liter bottle of water or soda from waist to eye level?
Would you say... *[Read response categories]*

- 1. No difficulty

2. Some difficulty
3. A lot of difficulty
4. Cannot do at all
7. *Refused*
9. *Don't know*

[Do/ you/] have difficulty using [your/his/her] hands and fingers, such as picking up small objects, for example, a button or pencil, or opening or closing containers or bottles? Would you say. *[Read response categories]*

1. No difficulty
2. Some difficulty
3. A lot of difficulty
4. Cannot do at all
7. *Refused*
9. *Don't know*

AFFECT (ANXIETY AND DEPRESSION)

Interviewer: If respondent asks whether they are to answer about their emotional states after taking mood-regulating medications, say: "Please answer according to whatever medication [you were/he was/she was] taking."

ANX_1 How often [do you] feel worried, nervous, or anxious? Would you say. *[Read response categories]*

1. Daily
2. Weekly
3. Monthly
4. A few times a year
5. Never

7. *Refused*

9. *Don't know*

ANX_2 Thinking about the last time [you] felt worried, nervous, or anxious, how would you] describe the level of these feelings? Would [you/] say... *[Read response categories]*

1. A little

2. A lot

3. Somewhere in between a little and a lot

7. *Refused*

9. *Don't know*

DEP_1 How often [do you] feel depressed? Would [you she] say. *[Read response categories]*

1. Daily

2. Weekly

3. Monthly

4. A few times a year

5. Never

7. *Refused*

9. *Don't know*

DEP_2 Thinking about the last time [you felt depressed, how depressed did [you/] feel? Would you say. *[Read response categories]*

1. A little

2. A lot

3. Somewhere in between a little and a lot

7. *Refused*

9. *Don't know*

ENVIRONMENTAL QUESTIONS

Q #	Question	Yes / No response	Prompting question/s
1	Are you aware of any policies or programs focused on including people with disabilities (PWDs) in the Msunduzi municipality?		If yes, can you name them for me?
2	Have you encountered any municipal initiatives aimed at supporting or including PWDs in the Msunduzi municipality?		If, yes, can you tell me what municipal initiatives they are
3	Have you seen these policies or programs being implemented in practice?		How?
4	Do you think municipal policies supporting PWDs are enforced effectively?		If yes, why do you think so? If no, why do you not think so
5	Can you provide examples of situations where these policies have been upheld or neglected?		Please explain your response.
6	What physical barriers (e.g. inaccessible buildings, transport)	N/A to question	

Q #	Question	Yes / No response	Prompting question/s
	do you think PWDs face in accessing municipal services?		
7	What social attitudes or behaviours have you observed that might make it harder for PWDs to participate in the community?	N/A to question	
8	Are there financial or economic challenges ⁸⁷ that PWDs face in accessing services or opportunities in this municipality?	N/A to question	
9	Have you noticed any institutional processes or systems that make it difficult for PWDs to access services?		If, yes, please explain.
10	Are you aware of any partnerships between the municipality and organizations that support PWDs?		Please name and describe the partnerships.

Q #	Question	Yes / No response	Prompting question/s
11	Have you seen any funding or resources allocated specifically for programs that benefit PWDs?		If yes, can you provide examples?
12	Have you seen advocacy efforts or campaigns aimed at promoting PWD inclusion?		If yes, can you provide examples?
13	Have you observed or heard of PWDs being involved in municipal decision-making processes?		If yes, in what capacity?
14	Are disability-focused organizations consulted by the municipality when making decisions that affect PWDs?		If yes, can you name the organisations?
15	Do you feel PWD voices are adequately represented in municipal policies or meetings?		Please explain your response.
17	What changes or improvements do you think PWDs should prioritize for better inclusion?	N/A to question	
18	Are there specific areas (e.g. transport, education,		If yes, which ones? Why do you say so?

Q #	Question	Yes / No response	Prompting question/s
	employment) where PWDs feel more inclusion is needed?		

We have now come to the end of the interview, but do you have any other comments you would like to make?

Thank you for your candid responses. Once again thank you for giving up your valuable time.

APPENDIX 2: INFORMED CONSENT LETTER

Dear Sir/Madam

TITLE OF THE RESEARCH PROJECT: CATALYSTS AND CONSTRAINTS INFLUENCING THE INTEGRATION OF PEOPLE WITH DISABILITIES IN THE MSUNDUZI MUNICIPALITY

My name is Anton Roberts, and I am a Master of Management Student completing my master's in governance with a specialization in monitoring and evaluation at the University of the Witwatersrand. My supervisor is Dr Kholiswa Malindini.

You are being invited to consider taking part in a research project. I am completing my research on **Catalysts and constraints influencing the integration of people with disabilities in the Msunduzi municipality**. All participants will be Persons with Disabilities living in the Msunduzi Municipality, KwaZulu Natal. The research is being funded by me personally.

Please read the information presented here which will explain the details of this project and feel free to ask me any questions about any part of this project that you do not fully understand. Your participation is **entirely voluntary**, and you are free to say no to participating in this research. If you say no, this will not affect you negatively in any way whatsoever in terms of the research. You are also free to withdraw from the study at any point, even if you do agree to take part.

I am asking you to participate in this research because you are a disabled person who lives in the Msunduzi Municipality.

If you agree to be part of the research, I will be asking you to spend approximately 45 minutes of your valuable time to answer a few questions.

Your participation in this study is voluntary, and you may withdraw at any time. The information that you give me will be kept anonymous and at no time will I give out your

personal information. No one except myself and my supervisor will know what you have said. Your personal information will remain confidential, and your name will not appear anywhere in the articles and reports written from the study. All records from the study will be kept in a locked filing cabinet until it is captured on computer after which they will be destroyed. Records on the computer will be protected and destroyed after 5 years.

This study has been ethically reviewed and approved by the Ethics Committee approval number WSG-2024-64.

Your responsibilities will be to:

- agree to participate in this project by providing information.
- Sign a consent form and sign this form:
 - Know that even after you sign the consent form, you are under no obligation to volunteer any information if you are not comfortable in this or willing to do so.
 - Be as clear as possible with your experiences.
 - Ask me any questions about anything that you might want to know about the project and/or your participation in the project, especially if you experience any concerns whatsoever.

You will not be paid to take part in this research. Benefits of this project could be better explained by viewing it as something that may improve a person with disabilities integration into the economy and society in general.

There are no serious risks in taking part in this research. You can contact me, my supervisors or the Ethics Committee on the below contact numbers if you have any further queries or encounter any problems. You will receive a copy of this information and consent form for your own records.

If you experience any stress after having participated in this study, please contact the branch of Lifeline for support. Their telephone number is 033 342-4447. Their offices Pietermaritzburg are situated at 14 Princess Street, Pietermaritzburg, 3200, KZN. You could also e-mail them at reception@lifelinepmb.co.za

Once again, thank you for your time.

Yours sincerely

Anton Roberts

Telephone: 0605045887

Email: 9110974d@students.wits.ac.za

Supervisor: Dr Kholiswa Malindini

E-mail: kholiswa.malindini1@wits.ac.za

Declaration by participant

By signing below, I _____ agree to take part in research entitled “**Catalysts and constraints influencing the integration of people with disabilities in the Msunduzi municipality.**”

I declare that:

- I have read, or have had read to me, this information and consent form and it is written in a language with which I am fluent and comfortable.
- I have had a chance to ask questions, and all my questions have been adequately answered.
- I understand that taking part in this study is **voluntary** and I have not been pressurized into taking part.
- I may choose to leave the study at any time and will not be penalized or prejudiced in any way.
- If I have any questions regarding my rights as a participant or have any other questions relating to the research, I can contact the School of Governance Ethics Committee.

Signed at _____ on (*date*) _____

Signature _____

Declaration by the investigator

I (*name*) _____ declare that:

- I explained the information in this document.
- I encouraged him/her to ask questions and took adequate time to answer them.
- I am satisfied that he/she adequately understands all aspects of the research as discussed above.
- I have given this participant time to read, understand and question the information before giving consent. This has included time out of my presence and time to consult with friends and/or family.

Signed at _____ on (*date*) _____

Signature _____