



BINDURA UNIVERSITY OF SCIENCE EDUCATION

FACULTY OF SOCIAL SCIENCES

DEPARTMENT OF SOCIAL WORK

STUDENT REG NUMBER:

B200247A

PROGRAMME:

Bachelor of Honours Degree in Social Work

**TOPIC: IMPACT OF DISABILITY ON MARRIAGE FORMATION AMONG
YOUNG ADULTS (18-35). A CASE STUDY OF EASTVIEW REDROOF**

June 2024

APPROVAL FORM

Supervisor

I hereby certify that this dissertation has been prepared under my guidance and meets the requirements for the Bachelors of Social Work Honours Degree and recommend proceeds for examination.

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DECLARATION AND RELEASE FORM

I, studying for Bachelors of Social Work Honours Degree, hereby declare that this dissertation, Impact of disability on marriage formation on young people, submitted in partial fulfilment of the requirements for the degree of Social Work, is my original work.

DEDICATION

To my beloved family, whose unwavering support and encouragement have been a constant source of inspiration throughout my academic journey. Your love and sacrifice have made this achievement possible.

To my sister, who has been my rock and confidant throughout this journey? Your patience, understanding and unwavering belief in me have kept me going.

And to all those who have supported me along the way, thank you for your kindness, encouragement and expertise. This dedication is a small token of my gratitude.

ACKNOWLEDGEMENT

I would like to express my sincere gratitude to the following individuals and organisation for their support and contribution to this research

I would like to direct my sincere gratitude's to my supervisor Ms Muregi, for her guidance, expertise and support throughout the research.

Special thanks to all the participants are in this study, who shared their experiences and perspective with me. It would have been possible if it was not for them giving up their time and shared their personal experience.

I would like to express my gratitude to The Musha Wedu organisation for providing access to resources and data and allowing me to have time with their client who shared valuable information on how disability impact marriage formation.

My colleagues and peers who offered encouragement and assistance.

Thank you all for your contribution to this research. Your support has made a significant difference in the completion of this dissertation.

ABSTRACT

People with disabilities face attitudinal barriers which include stereotypes and low expectation. Non-disabled may doubt that PWD can be fulfilling partners in any adult relationship. This dissertation investigates the effects of disability on marriage formation among young people. The objectives of the present study was to assess the willingness of nondisabled to engage in a love relationships trying to understand why non-disabled do not want to engage in a relationships so that we can highlight the barriers and raise awareness for the disability inclusion. The other objective was to explore societal attitudes towards marrying PWD this was try to understand how society can be a hindrance factor in marriage formation. Using a qualitative approach, the study examined the experiences and perspective of young people with disabilities and their non-disabled peers. The findings reveal significant disparities in marriage formation rates, with PWD facing substantial barriers to finding partners and forming lasting relationship. Social stigma, lack of access to social opportunity and limited support network emerge as key factors hindering PWD marital prospects. The study highlight the crucial role of social support, self-advocacy and inclusive social events in facilitating successful marriage formation. The research contributes to the development of disability inclusive relationship education and support programs.

ABBREVIATIONS AND ACRONYMS

ADA	- American Disability Act
ACHPR	- African Commission on Human and Peoples Rights
CRPD	- Convention on the Rights of Persons with Disability
CEDAW	- convention on the Elimination of All Forms of Discrimination against Women
ICCPR	-International Covenant on Civil and Political Rights
IFPA	- International Federation of Persons
GBV	- Gender Based Violence
PWD	- Persons with Disability
NGO	- Non Governmental Organisation
WHO	- World Health Organisation
SSDI	- Social Security Disability Insurance
UPIAS	- Union of the Physically Impaired Against Segregation
UNCRPD	- United Nations Convention on the Rights of Persons with Disabilities

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CHAPTER ONE: INTRODUCTION

1.0 INTRODUCTION

For a person to function well, according to Maslow's hierarchy of needs, they need, among other needs, affection and a sense of belonging in order to fulfil their social needs. The formation of healthy, long term relationships is a vital aspect of all young people including those with disabilities development and well-being. Though young people with disabilities face added challenges as they try to form relationships, such as stigma related with disability and lack of support. The goal of this dissertation is to explore the impact of disability on building relationships that will lead to marriage. This research will provide valuable insights into the challenges faced by young people with disabilities in marriage formation as well as the factors that can promote positive outcome. The chapter presents background of barriers to marriage for the people living with disabilities. The study outlines the problem statement, aim of the study, objectives, significance of the study, assumption, and limitation of the study. The chapter contribute to the broader field of disability research.

1.1 BACKGROUND OF THE STUDY

The right to marry has long remained documented as one of the key human right around the world. In the vein Article 23 of the Convention on the Rights of Persons with Disability (CRPD) require States Parties to "eliminate discrimination against persons with disability in all matters relating to marriage, family, parenthood and relationship on an equal basis others". Yet, despite the CRDP provision, persons with disabilities across the world face barriers to marriage, relationship and intimacy. Globally the rights of PWD to marry and start family are not always protected. The United Kingdom have laws that identify the right to marry and it

had more focus on protecting the rights of people with disabilities and there is greater social acceptance of people with disabilities getting married. Even though there are laws that protect the right to marry they are disadvantages as they will not be able to receive Supplemental Security Insurance which they rely on the government as a matter of policy reduce or rescinds SSI benefits if they marry.

Regionally the rights of persons with disabilities to marry are being violated in Kenya people with disability are completely left out the Marriage Bill (now Act) 2014 has clearly discriminated and clearly rejects people with disabilities from obtaining their right to marry. The Marriage Act 2014 does not disrupt Kenya's duty only but it interrupts the Constitution of Kenya 2010 Article 27 which proscribes discernment grounded on disability. In Zimbabwe, the right of PWD to marry and have marriages is documented in the Constitution and the Marriage Act. However there are still many barriers to marriage for people with disabilities this includes stigma and discrimination. The World Health Organisation approximations that there are over one billion people with disabilities in the world and they are characterized among the poorest and most downgraded populations. This means that they are at a greater danger of being deprived of their rights to marriage and family.

In Zimbabwe there are little traces of researches done on the barriers of disability on marriage, one of the inspirations of this research, individuals with disabilities have the same romantic, sexual and emotional needs as anyone else, and thus deserve equal rights, protection, and choices in their sexual lives (Drupas, 2015). However, research suggests that people with disabilities face significant obstacles in exercising their choices regarding sexual relationships and intimacy (Gill, 2015). Henceforth more research is required on the impact of disability on marriage formation; generally, there is partial body of literature that specifically address interest of people with disability to marriage.

1.2 STATEMENT OF THE PROBLEM

Many people are of the notion that persons with disabilities are not interested or capable of forming intimate relationships. People with disabilities have been historically omitted from research and policy discussion about marriage and relationship. The ZIMSTAT also noted that there is lack of data on people with disability in general this shows that in Zimbabwe they mainly form policies that support persons with disability in terms of employment and school but had neglected the need of getting married. The intersection between disability and marriage remains a taboo in our society (Shakespeare, 2014), this research remains under researched and under theorized, resulting in major gaps in understanding sexual needs and experience of disabled people (Liddiard 2011, 2015). The experience of people with disability in the context of marriage are under researched and poorly understood, which can lead to the marginalization and exclusion of this group. There is need for further research to better understand the specific challenges and needs of this population and develop effective policies and intervention to support them.

1.3 AIM OF THE STUDY

The study aims to explore the impact of disability on marriage building among young people

1.4 RESEARCH OBJECTIVES

1.4.1 To assess the willingness of non-disabled youth to engage in intimate relationships with persons with disabilities.

1.4.2 To explore societal attitudes towards marrying persons with disabilities.

1.2.3 To encourage the inclusion of young persons with disabilities in marriage building initiatives.

1.5 RESEARCH QUESTIONS

1.5.1 Why are non-disabled youths willing or not willing to engage in intimate relationships with PWD?

1.5.2 What are the societal attitudes towards marrying PWD?

1.5.3 How to encourage the inclusion of young PWD in marriage building initiatives?

1.6 ASSUMPTIONS

The study assumes that all participants have the same knowledge of the topic being studied and persons with disabilities have desire to get married and start a family. The families and communities in Zimbabwe have a dearth understanding and awareness of disability issues. The research assumes that the existing laws and policies on disability and marriage in Zimbabwe are not fully realised or do not successfully safeguard the rights of people with disability. It also accepts that PWD have valuable understandings and recommendations to share on the topic of disability and marriage.

1.7 SIGNIFICANCE OF THE STUDY

Disability and marriage issues are not stated, and important information about them is not captured and they are mostly not involved in Zimbabwe. This study will identify and provide solution to challenges people with disability face. It will lead to more in-depth research of disability. Therefore the study will lead to the understanding of the barriers people with

disability face in Eastview. The importance of the study is that it improves the rights and welfare of persons with disabilities in Zimbabwe by emphasising the barriers they face and making recommendation for change and increasing awareness and understanding of disability issues among families and communities. It can provide new perceptions and perspectives on the topic of disability and marriage that could inform future research and policy development. Learning straight from them will be treasured experience. The results can be used by NGOs and government to assist persons with disability to understand the barriers in marriage thereby assisting in formulation of policies which can address the question of the study.

1.8 DELIMITATIONS OF THE STUDY

The research is restricted to a small town in Harare which is Eastview Redroof. The research does not cover the whole province due to limited resources. The study will focus on people with physical disability. It will also focus on people with disabilities who are at the age of 18 and above.

1.9 LIMITATIONS OF THE RESEARCH

Due to economic disaster within the country challenges in terms of transport and other cost may be faced. The research is to be carried with individuals living with disabilities which can act as a barrier as some will not be able to participate due to physical impairment and some will be unable to explain as the issue of marriage is emotional to them. The participant might fail to see the relevance of their participation

1.10 DEFINATION OF KEY TERMS

Disability – according to Young (2010), disability is defined as the limitations and barriers that people with impairment face, leading to their exclusion and marginalized from full participation in society, including social, economic, and political activities, resulting in disadvantage and restriction.

Marriage – marriage is a social, cultural and legal institution that binds two people together in a relationship

Adult – adult is a person who has reached the age of majority, which is typically 18years and is considered legally responsible for their actions.

1.11 ETHICAL CONSIDERATIONS

Research ethics involves applying moral principles and professional standards to ensure the responsible and respectful conduct of research, including the collection, analysis, and dissemination of information about individuals, who deserve to be treated with dignity, respect and protection from harm and exploitation (Babbie, 2016).

1.11.1 Confidentiality

Maintaining confidentiality is crucial in research, as it ensures participants that their personal information and data are secure with the researcher. Participants need to be aware that all study records will remain confidential, and identifying information will be replaced with numerical codes or pseudonyms, as recommended by Seidman (2015). To guarantee confidentiality, the researcher will explicitly inform participants that their shared information

will be kept strictly confidential, and the use of pseudonyms will further assure them that their names will not be disclosed in any publications.

1.11.2 Avoidance of any harm

Every precaution will be taken to ensure the safety and well-being of participants, protecting them from physical and emotional harm, embarrassment, offense, or distress. In accordance with the British Psychological Society's guidelines (2010), special care will be taken when working with vulnerable populations to avoid causing harm. Recognizing that the target group is vulnerable, the researcher will exercise extra caution and sensitivity to ensure their safety and dignity are respected and protected throughout the study.

1.11.3 Informed consent

Informed consent is the process of obtaining participants' agreement to participate in research after they have been fully informed of the essential details (Seidman, 2015). This involves using consent forms that outline the study's purpose, benefits, duration, and potential risks. Participants will be fully briefed on the research objectives, and their permission will be sought before proceeding with interviews. To ensure informed consent, participants will be required to sign consent forms, as emphasized by Denscombe (2017), ensuring they understand the research and their involvement.

1.11.4 Voluntary participation

Participants will be informed that their involvement in the study is entirely voluntary, and they have the right to withdraw at any point without obligation or penalty (Newman, 2016;

Seidman, 2015). The researcher will respect participants' autonomy and decisions regarding their participation, ensuring that they are not coerced or pressured to continue if they choose to withdraw. Although participants will be made aware of the significance of their contribution to the study, which aims to shed light on the impact of disability on marriage and potentially benefit others in similar situations, their freedom to choose their level of involvement will be respected and prioritized.

1.12 PROPOSED CHAPTER OUTLINE

The research will be structured as follows:

1.12.1 Chapter one- introduction and background

This chapter will provide an overview of the study's scope, offering a concise summary of the research and its key aspects, including the focus on disability and marriage. The chapter will also articulate the research hypothesis; outline the methods used to achieve the study's objectives, provide context and background information, and present preliminary research findings that informed the study's design. Essentially, this chapter will set the stage for the research that follows, clarifying the study's purpose, parameters, and significance.

1.12.2 Chapter two- Literature review

The literature review chapter will provide a comprehensive survey of existing scholarship on the topic, synthesizing the insights and findings of various scholars. Through the theoretical framework, the researcher will introduce and apply a relevant theory that helps explain the underlying reasons for the research problem being investigated. This chapter will also involve

a critical analysis of relevant publications, summarizing and discussing their key points, identifying gaps and limitations in current research, and evaluating the significance and contributions of the research topic, ultimately setting the stage for the current study.

1.12.3 Chapter three- Research methodology

This chapter will outline the research design, which outlines the plan to address the research question, and the methodology, which describes the strategies used to execute the plan. Specifically, this chapter will cover the introduction, research design, methodology, population and sample selection, ethical considerations, and other relevant factors that detail how the study will be conducted. In essence, this chapter will provide a comprehensive overview of the research plan, explaining how the study will be carried out to achieve its objectives.

1.12.4 Chapter four- Data analysis and presentation

In this chapter, the researcher will first present the findings of the study, followed by a discussion that interprets and explains the results, addressing the research questions posed. This chapter will summarize the data collected, outline the statistical analyses and treatments used, and provide an interpretation of the results, highlighting their significance and implications, and ultimately answering the research questions that guided the study.

1.12.5 Chapter five- Summary of findings, conclusions and recommendations

This final chapter will provide a comprehensive summary of the research conducted from chapters one to five, distilling the key findings and implications. Building on the research outcomes, the researcher will also offer practical recommendations and suggestions for future

research directions, highlighting potential avenues for further exploration and application of the study's discoveries. In essence, this chapter will synthesize the research journey, distill the main takeaways, and provide a roadmap for future investigations and practical applications.

CHAPTER TWO: LITERATURE REVIEW

1.0 INTRODUCTION

Marriage is important in one's lifetime; it can have a major impact on the health and welfare of individuals. However people with disabilities may face unique challenges when it comes to forming healthy relationship. This literature review will examine the state of the present literature on the topic of marriage and disability, including the prevalence of marriage among people with disabilities, the barriers of forming health marriages. The literature will be examined through the lens of the social model of disability.

THEORATICAL FRAMEWORK

2.1.1 The Social Model

The social model of disability emerged in the 1960s and 1970s as a response to the limitations of individualized models, with UK activists seeking to redefine disability as a socially constructed concept rather than a solely biological phenomenon (Thomas, 2010). Oliver (1990) argues that the medical model falls short by neglecting the wider social, economic, political, cultural, and environmental barriers that contribute to disability, emphasizing the need for a more comprehensive understanding. Lang (2007) explains that the “social model shifts away from consideration of the shortage of the functional, physiological

and cognitive abilities of the impaired individual, to the ability of society to systemically oppress and discriminate against disabled people, and the negative social attitudes encountered by disabled people throughout their everyday lives.” Consequently, society inadvertently creates a catalyst for change by perpetuating barriers and constraints within its social, economic, political, cultural, and environmental structures, which disproportionately affect individuals with disabilities. Lang (2007) suggests that culture plays a significant role in distinguishing between impairment and disability, highlighting the importance of cultural awareness in understanding and addressing the social and environmental factors that contribute to disability. “what it means to have an 'impairment' and involvement 'disability' is therefore, by suggestion, culturally defined and will differ between societies.” Like Lang (2007), argues that “disability is defined by culture” and that the term itself is subject to numerous meanings and understandings. The social model show that disability is triggered by the society around us, people with disabilities they have always wanted to get married but it is the society that prevents them from getting in a relationship because of the expectations from the society. The people with disabilities they develop a fear and low self-esteem because of the way they are treated. The social model is relevant for this topic as it points out that it is the society that is to blame for persons with disabilities to face barriers when it comes to marriage. In the 1970s, UPIAS (1976) defined *impairment* as “lacking part or all of a limb, or having a defective limb, organism or mechanism of the body” while *disability* was defined as “the disadvantage or restriction of activity caused by contemporary organization which takes little or no account of people who have physical impairments and thus excludes them from the mainstream of social activities” (Lang, 2007). so disability is defined by the society because of the disadvantage they impose to PWD and beliefs and they restrict them from getting married.

The social model emphasizes that individuals with disabilities are the experts on the barriers they encounter in society (Ebenso & Eleweke, 2016). Bara (2015) views disability as a social issue, rather than a medical one. This perspective highlights the societal restrictions and discrimination people with disabilities face, including cultural and social barriers to marriage. The social model reveals that economic barriers and societal discrimination, rather than disability itself, are the primary obstacles to marriage and independence (Ahmed et al., 2014). Economic stability could enable people with disabilities to get married, but they are often among the poorest in society, making marriage less likely. To promote full participation and independence, governments must enact policies and laws that support disabled individuals, enabling them to live and work autonomously.

The social model of disability is relevant to this study as it emphasizes the need for society to be more inclusive and accessible to people with disabilities and emphasizes the need for people with disabilities to have control over their own lives and decisions concerning getting into love relationship.

2.2 LEGAL FRAMEWORK ON DISABILITY AND MARRIAGE

Throughout history and across different parts of the world, it has been widely expected for young people to transition into marriage and family life. This expectation has been recognized by both national and international policies, which have declared these transitions as important human rights. The Universal Declaration of Human Rights in 1948 was a significant revolutionary in affirming that every adult has the right to marry. It also acknowledged that family life is a crucial building block of society and should be safeguarded, as further emphasized by following international human rights laws such as the UNCRPD in 2006. This legislation specifically states that disabled individuals should not

face discrimination in issues related to marriage, family, parenting, and interactions. These aspects of life are considered important milestones in the journey from childhood to parenthood.

2.2.1 United States legal framework on disability and marriage

In the United States, numerous sections of legislation are pertinent to the subject of marriage and disability. The Americans with Disabilities Act (ADA) is a state law that forbids discrimination on the foundation of disability in employment, communal accommodations, and additional areas. Title II of the ADA forbids discrimination on the foundation of disability in all features of marriage, which is right to marry, right to divorce, and right control one's personal finances and legal affairs.

If a person with a disability marries, they risk losing their benefits, as the government expects their partner to assume responsibility, unless both partners have disabilities. This policy reinforces the assumption that individuals with disabilities are a burden on others, rather than recognizing their autonomy and agency. The ones with non-disabled partners, the procedures of the program stress the other partner to care for their disabled spouse physically and monetarily. Except the partner is rather wealthy there is no way they would be capable of supporting their disabled partner if the facilities they had cater for expensive things people with disabilities need, such as home, health care and medication.

When people with disabilities have to decide on among their basic requirements and marriage, they have no choice than to choose to live alone, which leads to marry the people they do not love. This perpetuates the harmful stereotype that individuals with disabilities are uninterested in relationships, lack sexuality, and do not have the same desires for love, intimacy, and family as non-disabled people, reinforcing a false and damaging narrative that

dismisses the emotional and romantic aspirations of people with disabilities. This is highlighted by the point that Social Security can make the willpower that a couple living as married cut services like SSI and SSDI, where there is a marriage or not. The legislation in America prevents the disabled people from getting married as they will not marry because of poverty and cost of living.

Although there is some legislation in place that safeguards the rights of people with disabilities to get married and make their decisions, there are many challenges that people with disabilities face in marriage formation. For example, people with disabilities may face humiliation and discernment in the society, and they may also struggle in accessing resources and provision they need to have positive marriages and relationships. In addition, some people with disabilities may not be conscious of their rights below the law, or they may have troubles accessing the legal system. There is still much work needed to be done to agree that people with disabilities have the equal rights and chances when it comes to marriage and family life.

2.2.2 Kenya legal framework on disability and marriage

In Kenya, there is an absence of legislation that addresses the matter of marriage and disability. Though, there are certain laws that are pertinent to the matter, such as the Persons with Disabilities Act of 2003 and the Marriage Act of 2014. The Persons with Disabilities Act offers some protections for PWD in terms of accessing education, employment, and healthcare. But, it does not exactly address the matter of marriage or the rights of PWD in this area. The Marriage Act addresses certain matters connected to marriage, but it does not definitely address the rights of PWD or the challenges they may face in this area.

The Marriage Act 2014 in Kenya has elicited varied responses from the public, but individuals with intellectual disabilities have been conspicuously excluded from the discussion. The law explicitly excludes people with psychological disorders from exercising their right to marry, with Section 11(2)(b) requiring permission to be denied if a party has a mental disorder, and Section 73 allowing a spouse to seek annulment if the other partner experiences "repeated attacks of insanity". This dissertation argues that the Marriage Act 2014 not only contravenes Kenya's international obligations but also violates the Constitution of Kenya 2010's Article 27(4), which prohibits discrimination based on disability. By denying people with mental disorders the right to marry, the law perpetuates discrimination and contravenes international treaties ratified by Kenya, including the ICCPR, CEDAW, ACHPR, and CRPD, which uphold the right to marriage.

Article 23 of the Convention on the Rights of Persons with Disabilities (CRPD) explicitly requires governments to eliminate discrimination against persons with disabilities in all aspects of marriage. The CRPD also mandates the repeal of laws that contradict this right. Furthermore, Article 5 ensures that persons with disabilities are treated equally to others, while Article 12 guarantees equal recognition before the law. Therefore, the Kenyan government is obligated not only to repeal discriminatory laws but also to refrain from enacting laws that deny persons with disabilities equal recognition before the law. The Marriage Act 2014 clearly violates these international obligations, and its provisions perpetuate discrimination against persons with disabilities.

2.2.3 Zimbabwe legal framework on disability and marriage

In Zimbabwe, there is some legislation that addresses the rights of people with disabilities, but there is no specific legislation on the issue of marriage and disability. The Constitution of Zimbabwe, as amended in 2013, includes a section on the rights of people with disabilities.

This section includes the right to marry and start a family, and the right to be protected from discrimination. However, there is no specific legislation that addresses the specific challenges faced by people with disabilities in relation to marriage and family life. Some people have called for the enactment of specific legislation to address this issue.

In addition to the Constitution, there are a few other pieces of legislation that may be relevant to the issue of marriage and disability in Zimbabwe. The Domestic Violence Act of 2006 includes provisions on protection from domestic violence for people with disabilities. The Marriages Act of 1982 includes some provisions on the right to marry, but does not exactly address the rights of people with disabilities. There are also a few pieces of legislation that address the rights of children with disabilities, such as the Children's Act of 2005. However, there is still a need for more specific legislation on the issue of marriage and disability.

In addition to legislation, there are also a number of organizations and initiatives in Zimbabwe that are working to address the issue of marriage and disability. For example, the National Disability Board of Zimbabwe is working to support the rights of people with disabilities and to ensure that they are included in the society. There are also a number of NGOs and civil society organizations that are working on this issue, such as the Zimbabwe National Association of the Deaf. These organizations are working to raise awareness and to advocate for the rights of people with disabilities in relation to marriage and family life.

One of the challenges in addressing the issue of marriage and disability in Zimbabwe is the lack of data and research on this issue. It is difficult to understand the extent of the problem and to develop operative policies and programs to address it. More research is needed on the experiences of people with disabilities who are trying to marry and start families, as well as on the challenges they face. This research can help to inform policy and program development and to advocate for the rights of people with disabilities in this area.

2.3 SOCIETAL ATTITUDES TOWARDS MARRYING PEOPLE WITH DISABILITIES.

The concept of disability is complex and challenging to define (Wasserman et al., 2016). Cultural differences influence how disability is perceived, measured, and experienced, leading to varying levels of inclusion or exclusion from significant socio-economic activities (Eskay et al., 2012; Bunning et al., 2017). Young (2010) defines disability as the restrictions or barriers faced by individuals with impairments, resulting in their marginalization and exclusion from mainstream social, economic, and political opportunities. The World Health Organization (1990) views disability as a constraint or inability to perform activities due to societal barriers, rather than solely physical or mental impairments. Disability can also be seen as a physical or mental difference perceived as impairment, leading to individual or social restrictions (Wasserman et al., 2016). Since the 1970s, the understanding of disability has shifted from a medical model, which equates disability with impairment, to a social model, which recognizes that social barriers and environmental factors contribute to disability (IFPA, 2007).

2.3.1 Lack of opportunity

The society does not give opportunity to individuals with disability to show case their capabilities that they can have successful marriages but instead the society stand as a stumbling block as they look down upon persons with disabilities. A 2018 study by the National Centre for Health and Statistics found that people with disabilities in the United States are less likely to get married due to limited social opportunities and restricted access to

social networks. Societal and physical barriers often disempower individuals with disabilities, denying them economic and social opportunities, security, and autonomy (Wiman et al., 2002). Negative stereotypes and stigmatizing images of people with impairments persist in Eastern and Western cultures, perpetuating harmful preconceptions and making it difficult for individuals with disabilities to achieve social norms and be perceived as independent from these stereotypes (Almaz, 2011). Furthermore, people with disabilities face significant marginalization in terms of sexual and reproductive health, with limited access to related materials and services (WHO 2009; Meza et al., 2017). While many individuals with disabilities desire marriage and family, stigma, discrimination, and lack of access to resources hinder their ability to do so. Research by Goodall et al. (2017) suggests that people with disabilities, especially women, face significant disadvantages in employment, education, and relationships during the transition to adulthood.

2.3.2 Intesectionality: Gender, Race and Disability

Gender norms and cultural expectations influence how people with disabilities perceive themselves, as well as the possibilities and constraints they confront. Women with disabilities are among the most vulnerable and marginalized populations in today's society. Disability stereotyping, along with gender-role dynamics, has resulted in double discrimination against women with disabilities in a variety of settings (Eleni, 2016; Mostert, 2016). A study of Intersectional Exclusion (2019) by the journal of Gender and Disability found that disabled women face exclusion and discrimination including GBV, lack of access to education and social isolation. They face significant barriers to marriage, including racism, ableism and socioeconomic disparities. When a person gets married in the society they are expected to do gender roles and the society perceive that individuals with disabilities are not capable of

conducting those roles. It is then the society that hinder individual from forming relationships because of gender role and what is expected in the marriage.

2.3.3 Societal attitudes in United States

In the United States, cultural attitudes on marrying people with impairments have shifted throughout time. Historically, people with impairments were frequently classified as invalids or incompetents, incapable of marrying or taking on adult duties. However, perceptions regarding persons with disabilities have shifted over the last decade, with many now recognizing them as equal members of society with equal rights. The American with Disabilities Act (ADA) of 1990, which forbids disability discrimination in employment, education, and other spheres of life, has helped to encourage this trend. The Association for Retarded Citizens (ARC) National Centre for Family Support offers information to help people with impairments find a partner.

2.3.4 Societal attitudes in Ethiopia

Naturally, the birth of a disabled child has remained cited as a source of embarrassment, dispute, and divorce in some families. There is a prevalent perception that people with disabilities are weak, helpless, reliant, unable to learn, and the recipients of charity (Eleni, 2016). People with disabilities are frequently excluded from society in Ethiopia since it is widely believed that disabilities are the result of a punishment (Mesfin, 1999). They are unable to execute bodily tasks. Because of their incapability to do physical work, PWD are regarded as problems to their instant families as they are not able to pay back to the family's revenue (Almaz, 2011). In Ethiopia, huge numbers of individuals believe that disability is the outcome of interaction with evil spirits or bad eye. The household of the leper person is also

called a cursed household and no one of “able bodied” had concern to have marital relationship with a family with a leper person (Beide, 2018)

2.3.5 Societal attitudes in Zimbabwe

Zimbabwe attitudes towards people with disabilities have been gradually shifting, but there is still long way to go. Historically people with disabilities have been regarded as other and have often faced discrimination and exclusion from the society. There is strong stigma associated with disability in Zimbabwe and this can be a barrier to people with disabilities forming relationships and starting families. In many cases PWD are still seen as inferior and not considered to be capable of having a successful marriage or being a good parent. Study by University of Zimbabwe (2013) reveals that most people living with sensory disabilities in Zimbabwe are sexually active.

There are different societal attitude globally, regionally and national in some countries there are positive attitude such as America this may be due to economic stability, laws and bills that protects persons with disabilities and more understanding of disability as a whole. Regionally there are negative attitudes associated with persons with disabilities and in Zimbabwe there are also negative attitudes this may be due to poor economy and lack of political will. The difference in economy makes PWD vulnerable to the extent that they face many challenges in choosing their partner.

2.4 FACTORS THAT INFLUENCE THE WILLINGNESS OF NON DISABLED YOUTH TO ENGAGE IN RELATIONSHIPS WITH PWD

Every individual is unique, and their willingness to engage in a relationship may depend on a combination of factors which includes:

2.4.1 Perception of compatibility

Non-disabled individuals may be more likely to consider a relationship with someone with a disability if they perceive compatibility, shared interests, and common goals. They may also consider factors like shared values and life inspiration. Many people select a partner if they share same goal and religion can be an important factor as it influence ones decision to form relationships with individuals with disability. The theory of homogamy suggests that people tend to choose partners who are similar to themselves in terms of beliefs, social status, and other characteristics (Van Leeuwen & Maas, 2019). However, some scholars argue that this can lead to a bias against people with disabilities, viewing them as unsuitable partners. Another factor that may contribute to this bias is the fear of becoming a caregiver for a disabled partner, which can be a daunting prospect for some individuals. (Savage & McConnell, 2016).

2.4.2 Personal experience and interaction

Personal experience and interaction refer to the direct involvement and engagement with individuals with disabilities, which can shape one's attitudes, beliefs, and willingness to engage in relationships with them. Many people who interact with individuals with disabilities are more likely to be willing to be in a love relationship with individuals with disabilities. Through personal experience and interaction, non-disabled youth can Challenge stereotypes and biases gain knowledge and skills for interacting with disabled individuals which will build confidence and comfort in engaging with disabled individuals, recognize the capabilities and strengths of disabled individual. Personal experience and interaction can humanize disability and help non-disabled youth view disabled individuals as peers, rather than solely as individuals with disabilities. This can lead to increased willingness to engage in

relationships and a more inclusive and accepting attitude. A study by Kathryn, 2017 findings highlight that Participants in the contact condition reported more positive attitudes towards disabled people compared to the control condition. Contact increased empathy, reduced anxiety, and improved willingness to engage in social interactions with disabled individuals. Personal experience and interaction can improve attitudes and increase willingness to engage in relationships with individuals with disabilities. Contact can break down stereotypes and build bridges between non-disabled and disabled individuals. This study demonstrates the power of personal experience and interaction in promoting inclusion and acceptance.

2.4.3 Support systems

In Ethiopia, research on the willingness of non-disabled youth to involve in a love relationship with PWD is comparatively new. A 2019 study done by Addis Ababa University found that even though some young people support the idea of being in a relationship with somebody with a disability, there are still several blocks that want to be overcome. For instance, respondent in the study mentioned lack of support from family and peer, anxiety of being excluded and the stigma related with a person with a disability. The study likewise found that there is an increasing approval of disability. Some families do not support their children if they decide to marry a person with disability and in some cases they look for suitable partners for their children.

2.4.4 Cultural and societal factors

According to a 2016 study conducted by the University of Zimbabwe and the International Federation of Red Cross and Red Crescent Societies, most non-disabled young people in Zimbabwe would not be willing to engage in a romantic relationship with a person with a disability. The study that this was due to a variety of factors, including lack of understanding

about disability, negative societal attitude towards people with disabilities and fear of being judged or rejected by the family and friends. One of the biggest factors that affect the willingness to engage in intimate relationship with people with disabilities is the lack of understanding. Many non-disabled people in Zimbabwe hold the misconception about people with disabilities such as the belief that they are incapable of having fulfilling romantic relationship or they are unable to have children.

2.5 KEY ASPECTS OF INCLUSION TO ENHANCE FULL PARTICIPATION OF PERSONS WITH DISABILITIES.

PWD are the largest marginal group globally comprising of 1 billion people (15%) (UN Factsheet, 2020; World Health Organization [WHO], 2018). In the EU countries, approximations suggest that disability disturbs about 50 million (14%) of the working-age populace (EC Eurostat, 2017).

2.5.1 Accessibility

Accessibility refers to the design and implementation of products, services, and environments that are usable by people with disabilities. The goal of accessibility is to provide equal access and opportunities for individuals with disabilities to participate fully in society. There should be physical accessibility such as Ramps, elevators, wide doorways, and accessible restrooms so that individuals with disabilities are able to access all buildings for them to enhance full participation. Accessibility is essential for ensuring equal opportunities, independence and participation for individuals with disabilities. Increased accessibility may also lead to increased marriage formation of individuals with disabilities as they will be able to look after themselves.

2.5.2 Education

The education of persons with disabilities in Zimbabwe has adopted an inclusive education policy that promote right to education for all. The policy aims to ensure that students are enrolled in schools and received appropriate support. Zimbabwe has a network of specials schools that cater specifically to student with disability. The goal is to provide inclusive education opportunities where student with disabilities can learn alongside their non-disabled peer (Harry, 2017). It provides appropriate accommodation, support services and specialised instruction to meet diverse needs of students with disabilities. Inclusive education promotes social interaction and development skills which help in marriage formation. However the implementation of inclusive education practises in mainstream schools is still work in progress

2.5.3 Employment

NASCOH (2013), in Zimbabwe, unemployment ranges had been above 80% for PWD and merely a paltry 2% - 7% of PWD in formal sector. Employment of People with Disabilities (PWDs) in Zimbabwe faces various challenges, despite the country's efforts to promote inclusive and accessibility. Zimbabwe has a legal framework that protects the rights of PWDs, including the Disability Act (1992). The government has set a 10% employment quota for PWDs in the public sector, but implementation remains a challenge. Many workplaces and public buildings lack accessibility features, making it difficult for PWDs to access employment opportunities. PWDs face stigma and discrimination in the workplace, limiting their career advancement opportunities. Limited access to education and vocational training hinders PWDs' ability to acquire skills and compete in the job market. The government has initiated programs like the National Disability Fund and the Disability Empowerment Program to support PWDs' employment and entrepreneurship. While progress

has been made, more needs to be done to address the systemic barriers and attitudes that hinder PWDs' employment in Zimbabwe.

2.5.4 Health and well-being

Obstacles in access to healthcare are more for PWD in low and middle-income countries (Prynn et al. 2021). The health and well-being of People with Disabilities (PWDs) in Zimbabwe face various challenges, including Limited access to healthcare services, lack of disability knowledge among healthcare providers, inadequate health facilities and equipment and high costs of healthcare and assistive devices. Efforts are being made to address these challenges, including National Disability Policy (2021) and Disability-inclusive health initiatives. Despite these efforts, more needs to be done to address the systemic barriers and attitudes that hinder PWDs' access to quality healthcare and well-being in Zimbabwe. The accessibility of People with Disabilities (PWDs) in Zimbabwe is limited by various physical, social, and economic barriers, including Inadequate infrastructure (e.g., lack of ramps, elevators, and accessible restrooms Economic barriers: High costs of assistive devices and technologies Limited access to education and employment opportunities These barriers limit PWDs' access to education, employment, healthcare, transportation, public spaces and buildings. Despite these efforts, more needs to be done to address the systemic barriers and attitudes that hinder PWDs' accessibility and inclusion in Zimbabwe.

2.6 GAPS IN THE LITERATURE REVIEW

Modern disability research and disability law and policies continue to emphasis on education, employment, welfare and healthcare as a main concern, providing slight credit to the significance of family and romantic relationship in the lives of PWD today. Even though there are less studies on disability issues, and more than for previous periods, they evidently

demonstrate the negative impact of disability on the development and sustainability of romantic relationship and families, either officialised by marriage or not. For example, disabled people have lower relationship chances and are likely to stay single as grown-ups or to live in their parents' houses compared to their non-disabled colleagues (Fujiura,2014; Sandström et al.,2020).

Most studies are cross sectional, making it difficult to understand the dynamics of disability and marriage over time. Studies often overlook cultural and contextual factors influencing disability marriage formation. Limited consideration of the voice and agency of people with disabilities, research often looks the perspective and experiences of people with disabilities themselves.

2.7 CHAPTER SUMMARY

In conclusion, the literature review reveals a complex and multifaceted landscape. The research highlight various dimensions related to disability and its influence on individuals decisions and experiences in forming marriage. The next chapter is going to consist of methodology, this section outlines the research design, approach and methods used to collect and analyse data.

CHAPTER THREE: RESEARCH METHODOLOGY

3.0 INTRODUCTION

Methodology refers to the systematic and structured approach used to conduct research investigation. It encompasses the methods, procedures and techniques employed to collect and analyze data. This chapter aims to provide a transparent and detailed account of the methodology used, allowing readers to evaluate the study validity and reliability. By outlining the research design, methods and procedures, this chapter will demonstrate how the data was systematically collected and analyzed to answer the research questions.

3.1 RESEARCH APPROACH

A research approach refers to the overall strategy or perspective used to conduct research. It encompasses the researcher philosophical stance and methodological choices. The research approach guides the entire research process, from formulating research questions to data collection and analysis. This research will use the qualitative research as the researcher seeks

to understand the response of young people living with disabilities on the effects of disability on marriage formation and that of the society respectively. This approach aims to gain a deeper understanding of phenomena, experiences and meaning rather than quantifying or generalizing findings. Choosing an appropriate research approach is crucial as it impact the validity and reliability of the research findings.

3.2 RESEARCH DESIGN

A research design is a comprehensive plan and a framework for conducting research, outlining the overall approach, methods and procedures to answer the test hypotheses. It serves as a road map for the research process, ensuring a systematic and organized approach. The study is going to use case study, a case study is a research methodology that involves an in-depth examination of a single case, typically involving a detailed analysis of a particular event or situation. Case study aim to provide a rich contextual understanding of the case and often involves a holistic approach, considering multiple perspective and data sources. Through the use of a case study the researcher objectives is to understand the impact of disability on marriage formation on young people living with disabilities, the benefits of this type of research is that it is flexible and dynamic; though, it lacks numerical and risk of bias and subjectivity.

3.3 TARGET POPULATION

According to Dooley (2015), population is “the whole set of entities that decisions relate to”. The target population will be young people who are living with disabilities in Eastview. The research also seeks to gather information from Eastview community, which consists of the individuals who live with the disabled individuals within close proximity and families of young people who live with disability namely non-disabled, mothers, and aunts amongst

others. This is so because of the need to understand how marriages are being viewed by those around them and to understand what is being done to assist them. The target group therefore is mainly young people who are not married living with disabilities, their families and the society.

3.4 DATA SAMPLING

Data sampling is the process of selecting a subset of data from a larger population or dataset, known a sample, to represent the characteristic of the entire population. The goal of sampling is to make inferences about the population based on the sample dat, while minimizing cost, time and resources. The researcher used simple random sampling which is a probability sampling techniques where each member of the population has an equal chance of being selected for a sample. This method is used to reduce bias and ensure that the sample is representative. This will guarantee that the population coverage is represented well as the researcher will be working with young people with several disabilities. The participants are going to be those who are non-disabled, persons with disabilities and people who are in the community to shed light on the topic. The researcher is using the sample size of 15 people in East view.

3.5 DATA COLLECTION METHODS

Data collection is the process of gathering and measuring information or data from various sources. Data collection methods are techniques used to gather data from various sources (Punch, 2006). Here are some data collection methods:

3.5.1 in depth interviews

It involves a detailed one on one conversation between a researcher and a participant. It is used to gather rich, nuanced insights into a person's thoughts, experiences and behaviors. The goal is to gain a deeper understanding of a person's perspective providing valuable insights for research product development. The researcher will interview at least 12 young people with disability facing challenges to form marriage due to disability, at least five parents of the disabled individuals.

3.5.2 Focus Group Discussion

It is a research method that involves a small diverse group of people gathered to discuss a specific topic, guided by a moderator. Focus group discussion is used to learn more about opinion on a designated topic and guide decision making. They are a good way to gather together people from similar backgrounds or with similar experience. It is a method to gather qualitative data through open discussion and observation.

3.5.3 Key informant

A key informant is an individual who possesses specialized knowledge, expertise or experience related to a particular research study or project. They are often consulted or interviewed to provide valuable insights, information or perspective that can help inform or shape the research.

3.6 DATA COLLECTION TOOLS

Moore and Llompart (2017) purports that data collection tools are instruments or methods used to gather and collect data. The researcher pursues to collect data by contacting with PWD and those in the community through the use of interview guide.

3.6.1 In-depth interview guide

An in-depth interview guide is a tool used to conduct comprehensive, one on one interviews with individuals to gather detailed, qualitative data on a specific topic. Using an in-depth interview guide helps to gather rich, detailed insights into attitudes, opinions and experiences. It also develops a deep understanding of the research context.

3.6.2 Key informant guide

A key informant guide is a tool used in qualitative research to guide interviews or conversation with individual who have expertise or in-depth knowledge about a particular topic. The guide outlines the topics and questions to be explored, ensuring that the conversation stay focused and relevant. Key informant guide helps to ensure consistency across interviews and increase data reliability and validity.

3.6.3 Focus group discussion guide

A focus group discussion guide is a tool used to facilitate a structured conversation among a small group of individuals typically 4-12, to gather insights on a specific topic. FDG help to encourage open and honest discussion and gather rich and detailed insights.

3.7 DATA PRESENTATION AND ANALYSIS

Data presentation and analysis in research refers to the various methods and techniques used to organize, visualize, and interpret data collected during a research study. It is a crucial aspect of the research process, as it allows researchers to effectively communicate their findings and draw meaningful conclusions from the data. Here are some key aspects of data presentation and analysis in research: Organizing data into a structured format, such as tables, to facilitate efficient storage, retrieval, and analysis. Categorizing and labelling data to

ensure clear and consistent understanding of the variables and their relationships. Interpreting the results of the data analysis in the context of the research questions and existing knowledge. Identifying the key findings, limitations, and implications of the research. Presenting the data, analysis, and interpretation in a clear and concise manner, often in the form of a research paper, report, or presentation.

Data presentation and analysis in research serves several important purposes. It helps researchers to explore and understand the data collected during the study. It allows researchers to communicate their findings effectively to other researchers, policy-makers, or stakeholders. It supports the validation and replication of research studies by providing a transparent and reproducible approach to data analysis. Overall, data presentation and analysis is a critical component of the research process, as it transforms raw data into meaningful insights that can advance our understanding of the world around us.

3.8 ETHICAL CONSIDERATIONS

Ethical considerations in research are the principles and guidelines that researchers must adhere to in order to ensure the protection of participants, the integrity of the research, and the responsible conduct of the study. Some key ethical considerations in research include, Respect for Persons and Obtaining informed consent from research participants, ensuring they understand the study and their right to withdraw. Another ethical consideration is to protect the privacy and confidentiality of participant data, respecting the autonomy and dignity of research participants and maximizing the potential benefits of the research while minimizing potential harms or risks to participants. Ensuring the research design and methods are appropriate and minimize potential harm. Adherence to these ethical principles is crucial

for maintaining the trust and credibility of the research community, protecting the rights and wellbeing of research participants, and ensuring the responsible conduct of research.

Overall, this chapter provides a comprehensive overview of the research design, data collection methods, and analytical approaches employed in the study, thereby establishing the methodological rigour and transparency of the investigation.

CHAPTER FOUR: DATA PRESENTATION, ANALYSIS AND DISCUSSION OF FINDINGS

4.0 INTRODUCTION

The chapter focuses on presenting and analysing the data that was collected from the respondents which were the non-disabled, persons with disabilities and the key informant. The data was collected from 5 non-disabled and 6 persons with disabilities and 2 key informants who were the chairman and secretary of Musha Wedu organisation.

4.1 DEMOGRAPHIC DATA

Table 1

Participant	Disabled/non-disabled	Gender	Age	Educational level	occupation
1	Non-disabled	F	20	FORM 4	Maid

2	Non-disabled	F	26	university	
3	Non-disabled	M	30	college	Builder
4	Non-disabled	M	27	Form 4	Soldier
5	PWD	M	30	institute	Piece jobs
6	PWD	M	26	primary	Vendor
7	PWD	F	31	ZJC	N/A
8	PWD	F	21	Did not went to school	N/A
9	PWD	M	52	College	Chairperson
10	PWD	F	45	College	Secretary

4.2 FACTORS THAT INFLUENCE WILLINGNESS OF NON DISABLED YOUTH TO ENGAGE IN INTIMATE RELATIONSHIPS WITH PERSONS WITH DISABILITIES

People are different and unique in their own way, the issue of the willingness of non-disabled youth to engage in love relationship with persons with disabilities is diverse some of them are not willing to have a relationship due to various reasons which can be discussed below. Some non-disabled youth are open to the idea of forming intimate relationship with PWD; there are still significant issues that need to be addressed. The most common barrier is lack of knowledge about disability and what it means to have a disability. Many non-disabled youth have misconception about what it means to have a disability and these misconceptions can create fear and uncertainty about forming relationships with Persons with disabilities. The first participant was not willing to engage in intimate relationship and does not consider marry someone with a disability.

4.2.1 Economic burden

Some of the non-disabled people might not be willing to engage in a relationship with PWD because of financial constraints. The financial can create tension and resentment and the other partner may feel unfairly burdened. Many people are struggling with their own life they will be more disadvantage if they engage in a relationship with someone who cannot work.

“I am not open to have a love relationship and marry someone with a disability because he is not able to work for me,

“PWD may have limited access to financial resources which can make it difficult to pay bride price and living cost, health challenges, PWD may have complex in health needs that make it difficult to manage relationships and household chores. PWD face challenges in obtaining support in their families and communities.”

Concerns about taking on additional financial burden such as medical expenses or caregiving cost can deter non-disabled individuals from pursuing relationship. The economic burden can lead to reduced financial stability, making it difficult for non-disabled partners to maintain their own financial independence and it can lead to increased stress.

4.2.2 Discrimination

Discrimination is the unfair or unjust treatment of an individual or group based on certain characteristics. Many people feel ashamed to be in a love relationship with PWD because of their appearance.

“I am even ashamed to walk with the person because am not disabled and people will look down upon me and will not feel comfortable with him because persons with disabilities are labelled as sick and they need special attention”

From the above response discrimination is the main barrier to the formation of marriage of persons with disability. Non-disabled people do not want to engage with persons with disability because of the financial status, this is derived from the view that men are the ones who take care of the family so if a person had an impairment they do not want to engage in an intimate relationship. But sometimes people with disability are able to work so one can argue that the main barrier to marriage is that people do not actually know what it means to have a disability. This is in line with the social model of disability; it is the society which discriminates PWD. The point above is similar to a point in the literature review which highlighted that the PWD are shunned and discriminated leading to a lack of value in a variety of social contexts (Santuzzi, 2011).

4.2.3 Fear of being caregivers

Fear of being a caregiver refers to the anxiety an individual has when considering or taking on a caregiving role for a loved one. This fear can stem from various concerns such as emotional burden.

“I am willing to engage in a love relationship with someone with a disability but I do not consider to marry one because persons with disabilities they need more attention and there are a lot of expenses and they are unable to work and then I am forced not to go to work taking care of him and I would consider someone who is able to work for himself.”

From the above response non-disabled youth are not comfortable marrying a person with a disability because they feel that marrying a person with a disability is a burden, this is another barrier to marriage as they do not want to take responsibility for someone but non-disabled women they are the ones who need to be taken care of. This view is derived from the

patriarchy society but woman can also provide in the family. The response is in consistent with social model of disability the main barrier is the society we live in. the current study align with the study of (Rothman, et al, 2017) caregivers reported fear and anxiety about their ability to provide care and fear of the emotional and physical burden of care giving.

4.2.4 Personal experience and interaction

Personal experience can affect love relationship between PWD and non-disabled as partners who have experienced disability themselves may have greater empathy and understanding of the challenges and experience of their partner.

“I am comfortable to be in a relationship with a person with a disability because, I grows up with someone with a disability. My father had Cerebral Palsy and my mother in non-disabled and they lived a happy life so am willing to marry a person with a disability”

“Some of the non-disabled people are willing to engage in relationships with PWD due to various factors such as social contact, an increase contact with the disabled people this can reduce fear, children of parents with disabilities are likely more to marry people with disabilities because they are comfortable with them and they had a lot if interaction and they have knowledge about the capabilities and needs of PWD. Religious and moral values can also influence the willingness;

From the above responses it appears that peoples willingness to engage in relationships with persons with disabilities is often based on their understanding of disability and their level of exposure to people with disabilities from the responses above those who did not live with someone with a disability does not want to get married to them but one of the participant whose father had an impairment agreed to marry someone with a disability because she

understand and know the capabilities of a disabled person. People's willingness to engage in relationships with disabled people may be influenced by their perceptions of the challenges and rewards of the relationship. The willingness is influenced by various factors. Correlations were found in the present study and a study by Kathryn, (2017) findings highlight that Participants in the contact condition reported more positive attitudes towards disabled people compared to the control condition.

4.2.5 Experiences of PWD who were in a relationship with non-disabled

PWD have various perspectives on the willingness of non-disabled youth to engage in relationships with them. Some PWD feel that non-disabled youth are generally willing to engage in a relationship, while others feel that there is still a lot of stigma and misconception that need to be addressed. The researcher was able to have first-hand information with persons with disabilities who shared their experience with non-disabled people during focus group discussion. Some say that non-disabled people are willing to engage in love relationships and some of them are not willing. The group shared their different experiences they had encountered,

a) Rejection

Rejection is an act of dismissing or turning down someone often resulting in feelings of disappointment and inadequacy. Feeling rejected or undervalued as a person can lead to low self-esteem and self-doubt.

"I faced resistance and discrimination from the non-disabled and if one agrees to be in a relationship with me she often takes advantage of me. I said the boy I dated was non-disabled and she took advantage of me that I can't walk and I gave her money and she would date other people and give them my money because I work as a vendor in town

and she eloped to another guy and the aunt of the girl suspected that the pregnancy was mine.”

Rejection can lead to internalised shame, self-blame and social isolation. Feeling like their disability defines them and rejection confirm negative self-perception and questioning their worth and abilities. Continued rejection may lead PWD to not involve in love relationship with non-disabled. Miller et al, (2009) discovered that there is a desire to have a personal relationship with PWD considering the severity of disability those with severe disability face rejection this is in connection with the present study.

b) Viewed as asexual beings

This can refer to the refusal of one's own sexual feeling and needs or the dismissal of someone else's sexual desire and boundaries. Non-disabled people may assume that PWD does not want sexual activities.

“I also faced resistance from my boyfriend as I heard that the boy had married another girl and when I asked him why he had done that he said that you were not going to give me the kids that I wanted as you had many complication and the burden of taking care of you and I felt pity for you and I felt like I would have done a sin to God as I felt like I was using you and how can I have sex with you I will feel like am hurting you.”

Non-disabled view people with disabilities as childlike or asexual; assuming sexual intimacy with someone with a disability is too difficult or risky. This might be because of lack of representation, absence of PWD in sexual and intimate roles in media and culture. These findings are in concurrency with (WHO, 2009) which states that PWD are the most marginalized in sexual activities.

The other girl highlighted that she does not have any experiences as she said

c) Abuse

Abuse refers to the mistreatment or harmful behaviour towards an individual often resulting in physical, emotional and psychological harm. PWD face abuse because they are most marginalized group and they are at risk of being abused and exploited.

“When my mother put me outside to play with others there was a certain boy who fondled my breast and I was unable to tell anyone because those people would not want to interact with me again.”

These people showed fear about being in a relationship with non-disabled as fear of being taken advantage of and abandonment.

The last girl had intellectual disability highlighted that non-disabled usually take advantage she said

“if a boy just come with biscuits I would sleep with him but nowadays they do not want to have sex with me and I usually help myself her mother said that one day I went with her to the farm I then later food her unconscious with a hole inside her vagina”

From the above responses People with disabilities experience innumerable barriers to form relationship and family life (Bahner 2015). The barriers include living arrangements that are not conducive for people with disabilities to maintain romantic relationships and experience sex (Eastgate et al. 2012). The area where the researcher collected data had only persons with disability who lives there and cannot interact with others, a consistent lack of access to sex education workers and family members who may struggle finding a balance in letting people with disabilities make their own decisions regarding their married lives the respondent highlighted that his mother wanted to look for a wife for him and the experience of growing

up with negative messages about their sexualities and consequently developing negative beliefs and attitudes towards sexuality . Altogether, these barriers that people with disabilities face have actual consequences on their sexualities as “repeated experiences of exclusion, discrimination, and their ability by non-disable youth can impact one’s self-esteem and belief in one’s self as a sexual being” (Jungels and Bender 2015). As Shakespeare (2000) has noted, “being sexual demands self-esteem yet disabled people, are systematically devalued and excluded by modern Western societies.” One could argue that such devaluation and exclusion can have an impact on the erotic habits of people with disabilities, including their willingness and ability to auspiciously “play the field.”

Those who work with persons with disabilities generally believe that non-disabled youth are willing to engage in relationships with persons with disabilities but there are a number of barriers that need to be addressed. They also believe that there is a growing trend of acceptance and inclusion of people with disabilities and with continued education and advocacy the willingness will continue to increase. The research manages to have information from two key informants from Musha Wedu organisation.

4.2.7 Arranged marriages

Arranged marriage is a marital union where the couple’s families, rather than the couple themselves participate in selecting a partner. The prevalence and nature of arranged marriages have evolved over time.

“Many PWD they face rejection from the family they are supposed to get married to as they reject the bride claiming that she cannot perform duties of a daughter in-law and gender roles that are expected in the community. Non-disabled are scared to be in a relationship with someone with a disability because of the view that disability is

hereditary, they may fear that the children may also be disabled so they try to avoid that, non-disabled youth think that disabled people cannot conceive and does not want to be in a love relationship with them.”

4.2.8 Religion

Religion can have both positive and negative effects on relationship, shared values and beliefs can create sense of community, strengthening bonds between partners and family members. Religious differences can create tension and even separation.

“Religion support equality and dignity of all people are more likely to view disabled people as potential partners. PWD face many challenges when it comes to marriage such as stigma, discrimination, prejudice which can make it difficult for PWD to find a partner.”

From the above responses there is lack of understanding and acceptance of persons with disabilities in general, which can lead to the unwillingness of non-disabled to engage in love relationship. There is an issue of stigma and discrimination, lack of accessible infrastructure and transportation can make it difficult to form relationships. Religion plays a major role in influencing the willingness in some cases it view as PWD as not eligible to marry, this is due to the belief that disability is a sign of sin or punishment and this can lead to lack of self-confidence and reluctant to peruse relationships. On the other hand religious belief actually empower them, some find comfort and hope in the belief that God loves all people. Financial security is the main obstacle to marriage as persons with disabilities are among the most poorest in the world, so even some of them want to be in a relationship they do not have money that can sustain that relationship. PWD face disability face many health challenges which make non disable people fear for the uncertainty.

4.3 SOCIETAL ATTITUDE TOWARDS MARRYING PEOPLE WITH DISABILITY

Society attitude towards PWD marrying has changed over time. In the past people with disabilities were considered unfit for marriage this was due to misconception about capabilities and quality of life. However there has been a shift in societal attitude. There are now more acceptances of people with disability as equal member of the society. There is still stigma and prejudice associated with disability and the belief that PWD are not capable of forming healthy and loving relationships and the assumption that a person with disability would not be able to provide for a family or take care of a partner

4.3.1 Stigma and stereotypes

Stigma refers to negative attitudes, belief directed towards an individual based on perceived characteristics. This can lead to social exclusion, prejudice and unfair treatment.

“The society had a negative attitude towards marrying someone with a disability there is discrimination in the society as they say whom will he marry with their disability and how will she take care of the family when they do not work. And if non-disabled is to be married to a person with disability they may be considered as old age and ugly to make such a decision”

Society still hold negative attitude towards the persons with disabilities, the society discriminate PWD as they are seen as people of no value. It still holds to the belief that they are unable to take care of a family but they are also capable of taking care of a family and make duties that are expected of them. Society is the main hindrance for persons with disabilities to form relationships. The findings go counter those of Staniland (2009), who discovered that, views towards persons with disabilities has changed individuals are now less

likely to perceive people with disabilities as uncomfortable or hindrance. On the other hand, they are more inclined to believe that they are like everyone else.

4.3.2 Gender roles

Gender roles are social and cultural expectation and norms associated with being male and female in a society. These gender roles can influence an individual behaviour, attitudes, responsibilities and opportunities.

“There are many perceptions of persons with disability that can influence my decision to marry someone with a disability, persons with disabilities are looked down upon and viewed as cursed and I will be also looked down upon. The society judge PWD who try to be in a relationship as they need care and they are viewed as if they cannot fit the gender roles expected in the society and they can be a burden to the community to look after the children. The society also view non-disabled youth who try to be in a relationship as someone who want to use PWD to perform some sort of ritual and”

From the above response one can note that societal perceptions cause the non-disabled people not to marry PWD as they will fear to be judged by the community and how the family react as some families are still attached to the tradition and might not want to be associated with PWD so the family reaction is the one of the biggest obstacle to marriage. The fear of being judged by the community some may view non-disabled who try to be in a relationship want to use them for ritual for one to get wealth. Almaz, (2011) discovered that young people stated that they were afraid of how their families would react.

4.3.3 Lack of family support

Lack of family support can have significant impact on individual decision to marry. The absences of a strong family network can significantly one emotional feeling over time.

“some parents in the surrounding area does not want their children to be associate with me as they will be saying what does he give you and would you walk around during family gathering with him and they are afraid that I can rape their children even small children do not want to be around me. I find many challenges when it comes to find a partner such as discrimination, poverty and physical appearance, at some point my mother looked a girl for me to marry but the girl refused to get married.”

This means that as long as the society does not change persons with disabilities will always be disadvantaged as the society does not want their children to associate with persons with disabilities so how will they interact and form a relationship when there is pressure from the community. The issue of arranged marriage is another challenge as the family are involved in the process of marriage. The present study is different from a study by Rothman et al, (2017) which concludes that 60% of the family members were supportive.

4.3.4 Cultural beliefs

Many cultures harbour negative attitude towards PWD viewing them as incapable of being good partners or parents. This can lead to PWD being seen as undesirable or unfit for marriage.

“There are general attitude of society towards PWD getting married such as looked down upon, laughed at and discrimination. They do not want to associate with PWD as they fear they can also be disabled and calamity might befall them as they believe that disability is as a result of sin and a curse from God. The do not want to associate with PWD because they are short tempered at some point they can just beat you and poverty is another factor that influence societal attitudes many persons with

disabilities are poor because they cannot work for long hours. Some misconception about marrying someone with a disability is people they think that PWD do not have feelings.”

People still hold to the view that PWD are not marriage material or they are less than other people. This can be due to factors such as ignorance about the capabilities of PWD and fear of the unknown. Additionally there is a belief that persons with disabilities are less likely to fulfil gender roles or they will be a burden to their spouse, this definitely leads to discrimination. The present study is similar to study by Garcia et al (2019) cultural beliefs and values significantly impacted caregiving experience and formation of marriage.

4.3.6 Lack of support from the legal systems

Many persons with disabilities are disadvantaged because there are no legal systems that support them and strict policies and punishment to those who had violated the rights of persons with disability.

“The marriage Act of Zimbabwe does not explicitly prohibit PWDs from getting married but require both parties to a marriage must be of “a sound mind”. This excludes people with intellectual disabilities. Marriage Act does not provide any specify protection or accommodation for PWD who want to get married. This means that PWD may have to navigate a legal system that is not designed to meet their needs”

There is a growing acceptance of the idea PWD should be able to have meaningful relationship and marriage. This has been driven by disability right movement which has pushed for greater recognition of the rights of persons with disability and more people with disabilities are getting married. This is due to societal awareness and acceptance of PWD. The decision to marry for PWD is complex, which is shaped by individual, societal and

religious factors. While some PWD may encounter obstacle others have been able to find relationships this is due to persistence and resilience, PWD face many challenges but some have challenged the societal attitude through resilience and self-confidence. The above point is in consistent with the study by Burton et al (2019) PWD faced legal barriers, including difficulty accessing benefits and lack of legal recognition.

4.4 MEASURES TO PROMOTE THE INCLUSION OF YOUNG PERSONS WITH DISABILITIES

Inclusion of young people with disabilities is important as it helps to break down stereotypes and misconception about people with disability and their capabilities. It also ensures that people with disabilities have access to the same information and resources as everyone else as when it comes to relationships. By including young persons with disability in these studies and discussions, we can create a more inclusive and accepting society for everyone.

4.4.1 Awareness campaigns

An awareness campaign is a coordinated effort to increase public knowledge, understanding and attention around a specific issue.

“There should conduct public awareness and educating the people with disabilities so that they will feel comfortable engaging in a relationship”.

“there are number of ways to educate the public about the right of PWD, use of mass media campaign to raise awareness this could include radio and television ads, social media campaign and other forms of outreach. Education material such as pamphlets and posters can be distributed to schools, hospital and other public places. Another way is to involve PWD in the process; this could include having persons with disabilities speak in public events. It is important to involve the government and

organisation in educating the public about rights of people with disabilities to marry; this could include incorporating information about disability rights into national curriculum or developing training programs for government officials and other professions. One effective way to shift societal attitudes is to promote positive role models, this include featuring PWD in the media who are successful in their personal life. Include visibility to PWD in public spaces such as schools, work place and social events. This can help to normalize the presence of PWD. The most important recommendations are to consult with PWD by consulting them in development policies and program and ensuring their voice are heard.

Awareness campaigns are very important, many non-disabled people they do not understand what it means to have a disability and they just assume that PWD they do not want to get married. If there is much education they will become to know what disability means. There should also be role models who will set as an example to PWD that they can actually do it because some of them they are afraid to be in a relationship.

4.4.2 Increase interaction

Interaction is the exchange of information, ideas or messages between individuals or groups. This can be the social and emotional connection between people.

“Schools and institution can help PWD to develop relationship by mixing them with non-disabled youth. Media also play a role as it is a centre of interaction and they will be able to interact with many people and they will see their role model as shown by the social learning theory”

Educating the community and PWD may boost their confidence and create more understanding of the term disability. School and other institution are of greater importance

many people with disabilities do not go to school or have formal employment, but if there are schools which allow PWD to associate with non-disabled can lead to a number of marriage formations because of increased interaction.

4.4.3 Access to sex education

Sex education is the process of providing individuals, particularly young people with information, skills and guidance related to human sexuality. It is important as it can help to have knowledge and understanding.

“For us to have long lasting relationships there is need for sex education of people with disabilities, I do not know how to have sex that much and I need to know the best sex position that does not affect my condition and how I can take care of a pregnancy with my conditions.”

Sex education is of great importance as it boost one self-esteem to be in a relationship knowing that one is able to perform all duties despite their disability

The boy said that

“it is true to have sex education because there are some of the things which I do not know and I do not have access to on-line platforms as I do not have money.”

Sex education should be tailored to their specific needs, abilities and developmental stages and should be provided in accessible formats and through specialised resources and services.

4.4.4 Resources allocation and employment creation

They also points out that they are resources that can be helpful when it comes to find a relationship such as food clothes shelter and employment.

“The main reason that am not married is that am poor the government should help us to find employment so that we cannot be a burden to the one that I love”

There is need for the government to create programs that helps PWD to have resources that they want for example building houses and food. The government should create employment for PWD and monetary assistance per month so that they cannot be a burden to someone.

4.4.5 Enact legislation and develop inclusive policy

It is important for the government to support persons with disabilities as they are the most advantaged group by enacting legislations and develop inclusive policy.

“The government should create a bill on the rights of persons with disabilities to be specifically included on matter pertaining to marriage and strict laws on those who had dated PWD and turned down their proposal after a long time in a relationship. Most effective ways to educate public is through social media creating dating sites and where people can interact together and whatsapp groups. Educate nurses in clinics so that they can also educate PWD sex education and do not discriminate them when they want Sexual Reproductive Health Services. Post fliers and public awareness to educate the community on what it means to be disabled. PWD should be included in different programs in the country and consider them in development and all sphere of life and there should be certain percentage included in the cabinet and other programs.”

The government should create bill specifically on the matter of marriage of persons with disabilities and given full concert to exercise those rights. Social media can play a role to encourage persons with disabilities by presenting role models so that PWD will notice that it is possible to form relationships and creating dating sites for PWD which can make it easier

to find a partner. An increase in public awareness will be of great importance. Considering PWD in development can encourage them none understand PWD unless the person is also disabled if given a chance they can make good policies and programs.

4.4.6 Accessibility

The concept of accessibility is important in ensuring that individuals with diverse needs and capabilities can fully participate, engage and interact without barriers or limitation.

“Another recommendation is to implement universal design principal, which means designing environments and systems that are accessible to all people regardless of their ability. It is important to ensure that people with disabilities have equal access to resources such as education, healthcare and employment opportunities. Another recommendation is to train service providers such as healthcare providers such as healthcare providers, teachers and social workers on how to provide services. This includes training on the assertive knowledge, accessible communication. Another strategy is to create opportunities for PWD to participate in community life, this include creating accessible places for PWD to socialize.”

Education is important as it teach young persons with disabilities programs about healthy relationship and sexuality can help them to feel more confident and prepared to explore intimacy. Connecting persons with disabilities to mentors who have similar disabilities can be a powerful way for them to learn about intimacy and relationship from someone who has been through it. Creating safe spaces where people with disabilities talk openly about relationship can actually help.

4.6 CHAPTER SUMMARY

The chapter presents the results of the data analysis, exploring the impact of disability on marriage formation. Disability has a significant impact on marriage formation, with individuals with disabilities facing unique barriers and challenges. Social stigma, discrimination and lack of accessibility are significant predictors of marriage formation for individuals with disabilities. These findings provide valuable insights into the experience of individuals with disabilities in relation to marriage formation, highlighting the need for increased support and inclusivity.

CHAPTER 5: SUMMARY, CONCLUSIONS AND RECOMMENDATIONS

The issue of marriage and disability is a complex issue, the chapter is going to give a summary of the impact of disability on marriage formation and give conclusion of the findings and give recommendation for the future use.

5.2 SUMMARY

People with disabilities face many problems in forming relationship and entering into marriage. Engaging in relationship with people with disabilities is complex and nuanced issue; there is stigma and misconceptions around disability that can make non-disabled hesitant to pursue relationship with PWD. Education and increased exposure can help break down these barriers. There is need for greater social and cultural acceptance of persons with disabilities, there are still negative attitudes towards PWD this is because of the society that which is not willing to support PWD to have families of their own. There should be policies and programs that address the challenges and needs of people with disabilities to encourage the inclusion of PWD for them to enhance full participation. By working to reduce barriers and provide support, we can ensure that PWD have the same opportunities to find love and companionship as everyone else. It is important to note that disability is not a medical issue, but a social and political also. The social model of disability which recognises that the disability is created by societal barriers rather than individual impairment can help to guide policy and program development. By recognising the importance of social and political factors rights of PWD can be considered. The study findings support the existence of existing theories such as the social model; it is the society that prevents PWD to be in relationship and the barriers that are in the society. The study is supported by social learning theory this is

supported by those who were willing to engage in a relationship with PWD because they have learned it from their parents. The findings are also supported by Maslow hierarchy of needs that there is need for self-esteem and PWD had low self-esteem which has led to self-actualization. The researcher was able to gather the information of what was done because was able to answer all the objective which are the non-disabled youth are not willing to engage in love relationship with PWD due to various reason. There is a shift in societal attitude as the society now accepts PWD but they had not fully accepted them but in the next years they will accept as there is an improvement and was also able to come up with strategies to include persons with disability.

5.3 CONCLUSIONS

The dissertation explored the impact of disability on marriage formation, shedding light to the experiences and challenges faced by individual with disabilities in forming and maintaining relationship. The study reviewed that many non-disabled youth are not willing to be in a relationship because they do not understand what it means to have a disability. It also revealed that disability type and severity are significant predictors of marriage formation, with individuals with disabilities facing increased social isolation, discrimination and lack of accessibility.

The findings of this study highlight significant barriers and stigma that individuals with disability encounter in their pursuits for marriage and romantic relationship. The society still hold to negative attitudes to PWD towards marrying as they are seen as unfit and it is the society which discourage PWD to not to engage in a relationship and they start to have low self-esteem. But the attitudes are evolving over time some societies they have positive attitudes, this may be due to different financial status.

Many persons with disabilities are not included in daily activities it is then important to include PWD for them to enhance full participation. Ultimately, this dissertation aims to contribute to a more inclusive and supportive environment for individuals with disabilities, promoting equal opportunities for marriage formation. By amplifying the voice and experience, this research strives to reduce stigma and promote a more inclusive understanding of disability and relationships.

5.4 RECOMMENDATIONS

The research suggested several recommendations targeting to improve marriage formation of PWD, so that they can enhance full participation in all sectors so that it will be easy to interact with many people. So the following recommendations were made:

5.4.1. Public awareness: The most important recommendation is to increase awareness and understanding of a disability. This can be done through education and training for service providers, policy makers and the general public. There should be more widespread public education campaigns that promote understanding and acceptance of PWD.

5.4.2 Policy formation: develop and implement inclusive policies and programs that address the unique needs and experiences of individuals with disability.

5.4.3. Inclusive Social media: Representing persons with disabilities in a variety of roles, including romantic partners and those who are in marriage in popular media can help challenge negative stereotypes

5.4.4. Sex education: by providing inclusive and accessible information about sexuality, relationships and intimacy, educators can challenge negative stereotypes and empower persons with disabilities to explore their own sexuality. By discussing different abilities

and how they affect sexuality, educator can help both people with and without disabilities to understand that sexual and intimate experience can be diverse and enjoyable for PWD.

5.4.5. Improve economic level: offer support services and resources for individuals with disabilities in forming and maintaining relationship. There is also need for employment creation so that individuals with disabilities will be able to work for themselves and cater for their families.

5.4.6. Provide marriage and love channels for PWD: create online platform and social networks for individuals with disabilities to connect and form relationships. Encourage individuals with disabilities to share their experiences and stories to raise awareness and promote inclusivity. Develop programs that promote self-worth and confidence building

5.4.7. Relationship counselling: Working with a counsellor who is knowledgeable about unique challenges faced by PWD can help individuals address any fears or concerns about relationship. For individuals with disabilities, the first is to adjust their mentality and persevere happiness bravely, especially with the support and encouragement from their family and friends. At the family and social level social workers are needed to eliminate discrimination and promote the concept of marriage in keeping with the times through extensive social promotion, social policies and relevant laws. The love and marriage problems of the disabled ultimately belong to

5.4.8. Schools: schools can foster an environment of acceptance and respect for diversity. By providing opportunities for students with disabilities to interact and build relationship with non-disabled peers, schools can break down barriers.

5.4.9 Equal access to resources: Improve access to resources and support for persons with disabilities. This include increasing financial support for people with disabilities, improving access to transportation and housing

5.4.10 Social groups: There should be more services and programs that are designed for PWD such as dating services and support groups

5.4.11 accessibility: To ensure that public spaces are accessible for people with disabilities can help making dating and socializing more inclusive

5.5 AREAS FOR FURTHER STUDY

1. There are some potential areas for further study that were noticed in the study on the impact of disability on marriage formation among young people.
2. Exploring the intersection of disability with other demographic factors, such as gender, race, socioeconomic status, to understand how these intersections may shape the experiences and outcomes related to marriage formation.
3. Investigating how different types and severities of disability may differentially impact marriage formation, as the experience and challenges may vary considerably.
4. Exploring how the impact of disability on marriage formation may have changed over time, particularly in relation to societal attitudes, technological advancement and evolving policies and support system
5. Investigating the strategies and resources that young people with disabilities employ to navigate the marriage formation process and the factors that contribute to their resilience and positive outcomes.

6. These are some potential areas for further study that could build upon the existing research and provide a more comprehensive understanding of the impact of disability on marriage formation.

REFERENCES

- Abed Y, Nezhad A, Hatami H. Compatibility and marital satisfaction in disabled couples compared to healthy ones. *Iranian Rehabilitation Journal*. 2015;13(2):23–27.
- Acharya, K., Meza, R., & Msall, M. E. (2017). Disparities in life course outcomes for transition-aged youth with disabilities. *Pediatric Annals*, 46(10), e371-e376.
- Addlakha R. How young people with disabilities conceptualize the body, sex and marriage in urban India: Four case studies. *Sexuality and Disability*. 2007;25(3):111–123. doi: 10.1007/s11195-007-9045-9. - DOI
- Ahmed, A., Awad, Z. A. C. M., & Yaacob, N. M. (2014). The response of accessibility infrastructures for PWD to national disability policies in higher institutions of developing countries: Case study of Ahmadu Bello University, Zaria and University of Malaya, Kuala Lumpur. *Journal of Surveying, Construction and Property*, 5(1), 1-
- Akhtar, M. I. (2016). *Research design*. Retrieved from: <https://ssrn.com/abstract=2262445>.
- Albert, J. M. (2010). *Exploratory Case Study*. London: Sage publications.
- Aley, R. 2016. An assessment of the social, cultural and institutional factors that contribute to the sexual abuse of persons with disabilities in east Africa. *Advantage Africa*. <https://www.svri.org/forums/forum2017/Presentations/21%20September/18.%20...>
- Almaz, T. 2011. Attitudes of Ethiopian college students toward people with visible disabilities. Unpublished thesis submitted in partial fulfillment of the requirements for the Doctor of Philosophy degree in Rehabilitation and Counselor Education in the Graduate College of The University of Iowa.

- Antonak R, Livneh H. Measurement of attitudes towards persons with disabilities. *Disability & Rehabilitation*. 2000;22(5):211–224. doi: 10.1080/096382800296782. - DOI - PubMed
- Bara, F., & Bonneton-Botté, N. (2018). Learning letters with the whole body: Visuomotor versus visual teaching in kindergarten. *Perceptual and motor skills*, 125(1), 190-207.
- Beide, M. 2018. Theoretical and practical challenges of assessing disabilities in Ethiopia. *International Research Journal of Human Resources and Social Sciences* 5 (3): 25–
- Bunning, K., J.K. Gona, C.R. Newton, and S. Hartley. 2017. The perception of disability by community groups: Stories of local understanding, beliefs and challenges in a rural part of Kenya. *Plos One* 12 (8): e0182214. <https://doi.org/10.1371/journal.pone.0182214>.
- Choruma T. (2007) *The Forgotten Tribe, Experiences of People with Disabilities in Zimbabwe*. London, Progressio.
- Creswell, J. (2002). *Educational research: Planning, conducting and evaluating quantitative and qualitative research*. Upper Saddle River, NJ: Merrill Prentice Hall.
- Denscombe, M. (2017). *EBOOK: The good research guide: For small-scale social research projects*. McGraw-Hill Education (UK).
- Denzin, N.K., & Lincoln, Y.S. (2003). *Introduction: The Discipline and practice of qualitative research*. Thousand Oaks, CA: Sage.
- Division for Social Policy and Development (DSPD). 2016. *Toolkit on Disability for Africa – Culture, Beliefs and Disability*. UN.

- Eleni, N. 2016. Socio-economic challenges of women with Disability: The case of women with mobility disorder and visual impairment in Hager Tibeb Maderaja Derijit in Addis Ababa. Unpublished thesis submitted to: the department of special needs education in partial fulfillment of the requirements for the degree of Master of Arts in special needs education.
- Eleweke, C. J., & Ebenso, J. (2016). Barriers to accessing services by people with disabilities in Nigeria: Insights from a qualitative study. *Journal of Educational and Social Research*.
- Eskay, M., Onu, V. C., Igbo, J. N., Obiyo, N., & Ugwuanyi, L. (2012). Disability within the African culture. *Contemporary voices from the margin: African educators on African and American education*, 197-211.
- Gardner, T., Refshauge, K., Smith, L., McAuley, J., Hübscher, M., & Goodall, S. (2017). Physiotherapists' beliefs and attitudes influence clinical practice in chronic low back pain: a systematic review of quantitative and qualitative studies. *Journal of physiotherapy*, 63(3), 132-143.
- Grill, E., Mau, W., Meyer, G., ... & Müller, M. (2015). Development of an International Classification of Functioning, Disability and Health (ICF)-based standard set to describe the impact of joint contractures on participation of older individuals in geriatric care settings. *Archives of gerontology and geriatrics*, 61(1), 61-66.
- Haage, H. 2017. Disability in individual life and past society: Life-course perspectives of people with disabilities in the Sundsvall region of Sweden in the nineteenth century.

Department of historical, philosophical and religious studies and center for demographic and ageing research.

Haralambos, M., & Holborn, M. (2000). *Sociology: Themes and perspectives*. (5th ed). London: Collins Education.

Haruna, M. A. (2017). The problems of living with disability in Nigeria. *JL Pol'y & Globalization*, 65, 103.

Irish Family Planning Association (IFPA). 2007. *Sexuality and Disability*. Retrieved from https://www.ifpa.ie/sites/default/files/documents/briefings/disability_and_sexuality_briefing_report.pdf

Lang, R. (2007). *The development and critique of the social model of disability*. London: Leonard Cheshire Disability and Inclusive Development Centre.

Liddiard, K., & Ferrari, M. (2015). Project Re• Vision: Disability at the edges of representation. *Disability & Society*, 30(4), 513-527.

Mandipa, E. (2013) New constitution disability friendly, *Herald*, June 19.

Meza Y, Assefa B, Kebede T, McDowell M, Tenaw E. 2017. Assessment on family planning needs of people living with disabilities: Case of Addis Ababa, Ethiopia.

Miller, E., R. Chen, P. Kranz, and N.M. Glover. 2009. Willingness to engage in personal relationships with persons with disabilities: Examining category and severity of disability. *Rehabilitation and counseling bulletin* 52 (4): 211–224. <https://doi.org/10.1177/0034355209332719>.

- Moore, E., & Llompart, J. (2017). Collecting, transcribing, analyzing and presenting plurilingual interactional data. Qualitative approaches to research on plurilingual education. Research-publishing net.
<https://doi.org/10.14705/rpnet.2017.emmd2016.638>.
- Morrison, S. (2013). Ecological model of disability. Weebly Online Library.
- Mostert, M. P. (2016). Stigma as Barrier to the Implementation of the Convention on the Rights of Persons with Disabilities in Africa. *Afr. Disability Rts. YB*, 4, 3.
- Mpofu, J., & Molosiwa, S. (2017). Disability and inclusive education in Zimbabwe. SensePublishers, Rotterdam.
- Mtsetwa, E. (2011) "The dilemma of social difference: disability and institutional discrimination in Zimbabwe", *Australian Journal of Human Rights*, 18(1), pp. 169-
- Mugumbate, J. & Nyoni, C. (2013). Disability in Zimbabwe under the New Constitution: Demands and Gains of People with Disabilities. *Southern Peace Review Journal*, 2 (2), 178-195.
- Newman, A. B., Rubin, S. M., ... & Health ABC Study. (2016). Depressive trajectories and risk of disability and mortality in older adults: longitudinal findings from the health, aging, and body composition study. *Journals of Gerontology Series A: Biomedical Sciences and Medical Sciences*, 71(2), 228-235.
- Oliver, M., & Oliver, M. (1990). The social construction of the disability problem. *The politics of disablement*, 78-94.

- Patton, M.Q. (2002). *Qualitative Evaluation and Research Methods*. (3rd Ed). Sage Publications, California.
- Seidman, L. C., Zeltzer, L. K., & Tsao, J. C. (2017). Sleep quality, affect, pain, and disability in children with chronic pain: is affect a mediator or moderator?. *The Journal of Pain*, 18(9), 1087-1095.
- Shakespeare, T. (2000). The social relations of care. *Rethinking social policy*, 52-65.
- Shakespeare, T. (2014). A systematic review of the effectiveness of interventions to prevent and respond to violence against persons with disabilities. *Journal of interpersonal violence*, 29(17), 3207-3226.
- Staniland, L. 2009. Public perceptions of disabled people: Evidence from the British social attitudes survey 2009. Office for Disability Issues: HM Government.
https://www.assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/325989/ppdp.pdf.
- The British Psychological Society. (2010). Code of Human Research Ethics. Retrieved from: www.bps.org.uk/sites/default/files/document.
- Thomas, G. M. (2022). A legacy of silence: The intersections of medical sociology and disability studies. *Medical Humanities*, 48(1), 123-132.
- United Nations (2006) Convention on the rights of persons with disabilities.
- Wasserman, D., Asch, A., Blustein, J., & Putnam, D. (2016). Disability: Health, well-being, and personal relationships.

- Wasserman, D., Blustein, J., & Asch, A. 2016b. Disability: Health, well-being, and personal relationships. Encyclopedia of Philosophy.
- Who, J., & Consultation, F. E. (1990). Diet, nutrition and the prevention of chronic diseases. World Health Organization Geneva.
- Wiman, R., Helander, E., and Westland, J. 2002. Meeting the needs of people with disabilities- new approaches in the health sector.
- World Health Organization (WHO). 1990. International classification of impairments and handicaps. Geneva: World Health Organization.
- World Health Organization (WHO). 2009. Promoting sexual and reproductive health for persons with disabilities: WHO/UNFPA guidance note. <https://www.who.int/reproductivehealth/publications/general/9789241598682/en/>.
- Young, J. 2010. Critically evaluate Carol Thomas' (1999) contention that a fully rounded analysis of the experience of disablement must take a full account of the impact of 'impairment effects' on disabled people's lives. Retrieved from <https://janeyoungme.files.wordpress.com/2011/07/social-parlor>
- Young, M. (2010). The future of education in a knowledge society: The radical case for a subject-based curriculum. Journal of the Pacific Circle Consortium for Education, 22(1), 21-32.
- Zimbabwe Government (1996) Disabled Persons Act, Government Printer, Harare.

APPENDIX 1: CONSENT FORM

Consent Form

My name is Miriam Hakata I am a social work student at Bindura University and I would be your interviewer today. As a part of the requirement for the degree, the student must complete an academic research. I am kindly requesting for your participation in the interview, the findings will be used for academic purposes. This interview is part of a larger research project on impact of disability on marriage building among youth a case study of Eastview Redroof and we are hoping to learn as much as possible from you. I would like to ask some questions about your experience with marriage building. Confidentiality is assured and it is by voluntary participation and therefore no remuneration is given and you have a right to withdraw from the interview if you are no longer comfortable

AGENCY.....

GENDER.....

SIGNATURE.....

APPENDIX 2: KEY INFORMANT INTERVIEW

Key informant interview guide

Section A: willingness of non-disabled youth to engage in intimate relationships

Do you think that non-disabled people are generally willing to engage in love relationship with people with disability?

What factors influence their willingness and reluctant?

What are the challenges that people with disability face when it comes to marriage and family life?

What is your organisation experience in working with young people with and without disabilities?

Section B: exploring societal attitude towards marrying people with disability

What are general attitude of society towards people with disabilities getting married?

What are some of the factors that influence societal attitude towards marrying people with disability?

What are some misconceptions about marrying someone with a disability?

What are some of the barriers that exist in the law and policy landscape when it comes to marriage building for people with disability?

Section C: promoting the inclusion of young people with disabilities in marriage building initiatives

What does your organisation do to promote the rights of people with disabilities to marry and have families?

What do you think are the most effective ways to educate the public about the rights of people with disabilities to marry and have families?

What are the effective ways to shift societal attitude in a positive direction?

Do you have anything else that you would like to share?

APPENDIX 3: INDEPTH INTERVIEW

In depth interview

Section A: The willingness of non-disabled youth to engage in intimate relationships

1. Are you open to having a love relationship with someone with a disability?
2. Would you consider marry someone with a disability
3. What are your concerns or fears about being in a relationship with someone with a disability?
4. What would make you more likely to consider being in a relationship with someone with a disability?

Section B: exploring societal attitude towards marrying people with disability

5. What social pressure that might influence your decision to marry someone with a disability?
6. How do society view people with disabilities who try to be in a relationship?
7. How does the society view people who try to be in a relationship with people with disability?
8. What do you think about the idea that people with disabilities have special needs in a relationship?

Section C: offering safe space for young people to formulate intimate relationships without prejudice, discrimination and exclusion despite their impairment

9. What do you think is the best ways to make young people with disabilities feel comfortable exploring social relationships?
10. How do you think schools and other institution can help young people with disabilities develop social relationship?
11. What role do you think social media can play in helping young people with disability to develop relationship?
12. What message do you think people with disability need to hear about relationship and love?

APPENDIX 4: FOCUS GROUP DISCUSSION

FOCUS GROUP DISCUSSION GUIDE

Section A: willingness of non-disabled youth to engage in intimate relationships

1. Do you think that non-disabled people are willing to engage in intimate relationship with PWD?
2. What are your experiences, have you encountered any resistance or discrimination from non-disabled people?
3. What are the perceptions and attitude that you have noticed about non-disabled people?
4. What common fear and concerns about being in a relationship with a nondisabled pattern?

Section B: exploring societal attitude towards marrying people with disability

5. What negative attitude or stereotypes you noticed from the society when it comes to people with disabilities getting married?
6. What are the biggest misconceptions that society has about people with disability getting married?
7. What challenges you face when it comes to getting married such as finding a partner, getting family approval and dealing with societal norms and expectation?

Section C: To offer safe space for young people to formulate intimate relationships without prejudice, discrimination and exclusion despite their impairment

8. How do you think young PWD can best find supportive and accepting relationships?
9. What types of resources do you think are most helpful for PWD when it comes to finding and maintain relationships?
10. What advice would you give to young people with disabilities who are looking to find meaningful relationship?
11. Is there anything else you would like to share?

