# INCLUSIVE DEVELOPMENT PROJECT AND EMPOWERMENT OF PEOPLE WITH DISABILITY IN RWANDA

# A CASE STUDY OF HANDICAP INTERNATIONAL IN NYAMASHEKE DISTRICT

# **NIYITEGEKA JEROME**

MPAM/2014/79266

A Research Project Submitted in partial Fulfillment of the Requirements for the Degree of Master in Public Administration and Management

(Community Development and NGO Management Option)

of Mount Kenya University

**NOVEMBER 2017** 

# **DECLARATION**

This research thesis is my original work and has never been presented to any institution. No part

of this research should be reproduced without author's authorization or that of Mount Kenya University. Student Name: Niyitegeka Jerome Signature...... Date ..... **Declaration by the supervisors** This research thesis has been submitted with our approval as the Mount Kenya University Supervisors: 1. Name: Anyama Charles Signature...... Date ...... 2. Name: David Nyambane, PHD

Signature ......Date .....

# **DEDICATION**

To my beloved wife Batamuriza Marie Alice, My Children Niyitegeka Bruce Cedric, Niyitegeka Nganza Brian and Niyitegeka Isimbi Melissa who used to straighten my personality and to consistently grease the screaming of my life, this work is dedicated.

## **ACKNOWLEDGEMENT**

Completion of this research was a result of both direct and indirect support of many people to whom I owe acknowledgement. I owe profound gratitude to my supervisor Mr. Anyama Charles, for these constructive comments, suggestions and encouragement that made the production of this research proposal possible. Secondary, sincere appreciation to my parents Ntawiheba Frodouard and Mukabatsinda Emerance for the outstanding sacrifices they have made over time and the persistent support they have given me without which the contribution of this study to the existing body of knowledge would not have taken place. Thank you for being such great parents. I am also a very grateful to my classmates for the encouragement, moral support, motivation and love and finally, I am also grateful to all questionnaire respondents, Nyamasheke District and Handicap International representative for their support to accomplish this work. I am also indebted to all the entire academic staff at Mount Kenya University for being cooperative and willing to help whenever I requested for their support.

## **ABSTRACT**

People with disabilities usually have a higher rate of unemployment than the rest of the population. Face a greater risk of becoming unemployed for longer periods, and have fewer chances of promotion, this may be due to lack of adequate education or training, lack of motivation, preconceived ideas about people with disabilities on the part of employers, lack of physical accessibility to the workplace, and lack of adequate transportation. Despite a large number of NGOs operating in Rwanda, various views witness that they have not reached the community involvement standard. In fact the evidence base for a relationship between NGO characteristics and better outcomes is weak and the project effectiveness agenda is driven by what donors say they ought to do. It is for this reason that the researcher wanted to assess the contribution of Handicap international inclusive development project on empowerment of people with disability of Nyamasheke District with objective of assessing the implementation of inclusive development, assessing the level of empowerment of people with disability and establishing the relationship between inclusive development project and empowerment of people with disability in Nyamsheke District. The target population of this study was 435 beneficiaries of Handicap international inclusive development project from three sectors namely Ruharambuga, Kagano, and Kanjongo sector of Nyamasheke District, Yamane formula was used to get a sample size of 208 respondents where stratified sampling technique was used to get sample size from each sector, simple random sampling also was used to get calculated sample size from each sector. Descriptive statistics namely mean, percentage and standard deviation were used for first and second objective analysis and cross tabulation and chi square were used for analyzing third objective. The implementation of inclusive development project was implemented in two domain namely education activities and social economic activities, and participants reported that inclusive development project was well implemented. It was revealed that there is difference between empowerment level before and after inclusive development project where before the implementation of inclusive development project, respondents reported that they had almost critical economic conditions before the intervention of inclusive development project. The living condition of people with disability have improved after the implementation of inclusive development project where an increase of 56% of people with disability are able to attend schools, an increase of 30% of people with disability to be able to buy necessity for life such food and clothing was reached. 196 (94%) the respondents reported that inclusive development project had provided teaching and learning aid like maps books, and other school materials to people with disability, 183 (88%) of participants reported that Handicap international trained parents and teachers association about right of people with disability. By comparing the living condition of people with disability before and after the implementation of inclusive development project in terms of saving there is an increase of 43% of people with disability able to make savings in microfinance this can be attributed to the implementation of inclusive development project. 92% (177/193) reported that they are able to buy necessity such as food and clothing compared to 8% (16/193) participants who reported that they are not able to buy necessity for life such as food. The Government should continue to work with International NGOs like Handicap International and monitor their interventions' sustainability. In partnership with local leaders at grass root level, disabled people should work together with inclusive development projects and benefit for the provided trainings for self resilient.

# TABLE OF CONTENTS

DECLARATION	ii
DEDICATION	iii
ACKNOWLEDGEMENT	iv
ABSTRACT	v
TABLE OF CONTENTS	vi
LIST OF FIGURE	x
LIST OF ABBREVIATIONS AND ACRONYMS	xi
DEFINITION OF KEYS TERMS	xii
CHAPTER ONE: INTRODUCTION	1
1.0. Introduction	1
1.1. Background of the Study	1
1.2 Problem Statement	2
1.3. Objectives of the Study	3
1.3.1. General Objective	
1.3.2. Specific Objectives	4
1.4. Research questions	4
1.5Significance of the Study	4
1.6Limitations of the Study	5
1.7 The Scope of the study	5
1.7.1 Content Scope	6
1.7.2 Geographic Scope	6
1.7.3 Time Scope	6
1.8 Organization of the Study	
CHAPTER TWO: LITERATURE REVIEW	7
2.0 Introduction	7
2.1 Theoretical Literature	7
2.1.1 Handicap International	7
2.1.2 Project of Handicap International in Nyamasheke district	8
2.1.3 Disabling barriers experienced by people with disabilities	10

2.1.4 The Concept of Development	12			
2.1.5 The Concept of Inclusive Socio-Economic Development				
2.1 .6 Empowerment of people with disability	15			
2.1.7Principles of Inclusive Socio-Economic Development	16			
2.1.8 Benefits of Inclusive Socio-Economic Development	19			
2.2 Empirical Literature	21			
2.3 Critical Review and Research Gap Identification	23			
2.4Theoretical Framework	24			
2.4.1 Social oppression theory	24			
2.4.2 Critical theory	25			
2.4.3 Functionalist theory	25			
2.5 Conceptual framework of the Study	26			
2.6 Summary	27			
CHAPTER THREE: RESEARCH METHODOLOGY	28			
3.0 Introduction	28			
3.1 Research Design	28			
3.2 Target Population	28			
3.3 Sample design	29			
3.3.1 Sample Size	29			
3.3.2 Sampling technique and procedures	30			
3.4 Data Collection Methods	31			
3.4.1. Data Collection Instruments	31			
3.4.1.1 Questionnaire	31			
3.4.1.2. Documentary	31			
3.4.2 Administration of Data collection instruments	32			
3.4.3 Reliability and Validity	32			
3.5 .Data Analysis procedure	32			
3.6 Ethical consideration	33			
CHAPTER FOUR: RESEARCH FINDINGS AND DISCUSSION				
4.0 Introduction	34			
4.1 Demographic characteristics of respondents	34			
4.2.1 Implementation of inclusive development project	36			

4.2.2 Empowerment level of beneficiaries of inclusive development project	42
4.2.3 Relationship between implementation of inclusive development project and empowerment of beneficiaries	44
CHAPTER FIVE: SUMMARY, CONCLUSIONS AND RECOMMENDATIONS	48
5.0 Introduction	48
5.1 Summary of Findings	48
5.1.1 Implementation of inclusive development in Nyamasheke district	48
5.1.2 Level of empowerment of people with disability in Nyamasheke district	49
5.1.3 Relationship between implementation of inclusive development project and empowerment of pewith disability	•
5.2 Conclusions	51
5.3 Recommendations	52
5.3.1 To Government of Rwanda	52
5.3.2 To Nyamasheke District and Local Community in general	52
5.3.3 To Handicap International	52
5.4 Suggestions for Further Studies	53
REFERENCES	54
APPENDICES	60
APPENDICE A: AUTHORIZATION TO CONDUCT RESEARCH FROM MOUNT KENYA	
UNIVERSITY	
APPENDIX B : AUTHORIZATION TO CONDUCT RESEARCH FROM NYAMASHEKE DISTR	
APPENDIX C: QUESTIONNAIRE FOR BENEFICIARIES OF INCLUSIVE DEVELOPMENT PROJECT	63
APPENDIX D · TRANSI ATED OUESTIONNAIRE	68

# LIST OF TABLES

Table 3.1: Sample size	. 30
Table 4.1: Distribution of respondents by age	34
Table 4 2: Distribution of respondents by their occupation	. 35
Table 4 3 : Distribution of respondents by education level	. 35
Table 4 4 Distribution of respondents by gender	. 36
Table 4.5: Implementation of ID in education activities	. 38
Table 4.6 Implementation of ID in social economic activities	40
Table 4.7 Empowerments of people with disability before inclusive development	42
Table 4.8 Empowerments of people with disability after inclusive development	43
Table 4.9 Empowerments of people with disability before and after implementation of ID	45
Table 4.10: Cross tabulation between implementation of ID and empowerment of people with	
disability	. 46

# **FIGURE**

Figure 2	) 1 Cancantual	framowark	20
rigure 2	z.i conceptual	. Halliework	 . 21

#### LIST OF ABBREVIATIONS AND ACRONYMS

**CRPD** : Committee on the Rights of Persons with Disabilities

**CSO** : Civil Society Organization

**DDP** : District Development Plan

**EDPRS** : Economic Development and Poverty Reduction Strategy

**EFA** : Education For All

**ESP** : Expending Social Program

**GDP** : Growth Development Program

**HI** : Handicap International

**IDDC** : International Disability and Development Consortium

**ILD** : Inclusive Local Development

**INGO**: International Non-Government Organization

**IPAR** : Institute of Policy Analysis and Research

**JADF** : Joint Action District Forum

**MDGs** : Millennium Development Goals

**MINALOC** : Ministry of Local Government

**NCPD** : National Council for People with Disability

NGO :Non-Government Organization

**NISR** : National Institute of Statistic of Rwanda

**UNDP** : United Nations Development Programs

**WVR** : World Vision Rwanda

## **DEFINITION OF KEYS TERMS**

**Community Capacity Building**: Any formal or informal training of community member to achieve a particular knowledge that will lead the improvement of service delivery and income from the work done, generally leading to a transformational and self-resilient development.

**Development** in this study means grow and change in wellbeing by accessing education, housing, training, employment, health services or other supporting services.

**Empowerment** is defined in this study as to enable people with disability to participate in, negotiate with, influence, control, and hold accountable institutions that affect their lives.

**Inclusive Development** is defined in this study as techniques which ensures that all marginalized and excluded groups are stakeholders in development processes, means that people are not excluded from development because of their gender, ethnicity, age, sexual orientation, disability or poverty.

**Non-Governmental Organization**: it is defined in this study as an independent voluntary Association of people acting together on continuous basis for some common purpose for wellbeing of vulnerable people.

**People With Disability** is defined in this study as an umbrella term for impairments, activity limitations, and participation restrictions which make difficulty for someone to do the things that other people do.

## **CHAPTER ONE: INTRODUCTION**

#### 1.0 Introduction

This chapter contains the back ground to the study, statement of the problem, research objectives, and research questions, significance of the study, limitations of the study, and the scope of the study and Organization of the study.

## 1.1 Background of the Study

The United Nations estimates that 10 to 12 per cent of the world's population, over 600 million people has some form of disability and total of 80 per cent of them live in low-income countries, people with disabilities are highly over-represented among the poor; about 82 per cent of them live below the poverty line, WHO define disability as an umbrella term for impairments, activity limitations, and participation restrictions. Poverty is considered both a cause and a consequence of disability (World Bank, 2013). People with disabilities usually have a higher rate of unemployment than the rest of the population. And when they do work, they tend to do so for longer hours and lower incomes, face a greater risk of becoming unemployed for longer periods, and have fewer chances of promotion, this may be due to lack of adequate education or training, lack of motivation, preconceived ideas about people with disabilities on the part of employers, lack of physical accessibility to the workplace, and lack of adequate transportation. It is estimated that 80 per cent of all people with disabilities of working age are unemployed.

World Bank (2003) defines a Non-Governmental Organization (NGOs) as an Independent voluntary Association of people acting together on a continuous basis for some common purpose than achieving Government Office, making money or illegal activities.

International Non Government Organizations are organizations that work in many different fields, but the term is generally associated with those seeking social transformation and improvement in quality of life. Task oriented and driven by people with a common interest, NGOs perform a variety of service and humanitarian functions, bringing citizen's concerns to Government advocating, monitoring policies and encouraging political participation through provision of information. These organizations enable and guide the communities in development processes. Their intervention contributes to the inclusive development of the citizens in their respective operational areas. It is in this regard that NGOs brings experience and capital resources to power and energy infrastructure projects in various stages of the development cycle.

Rwanda witnessed a national tragedy, the 1994 Tutsi Genocide that devastated the country, amplified poverty status, destroyed development initiatives and disrupted the entire community. From then, many people, government and non-Government and Organizations started with relief programs and later concluded that the sustainable socio-economic development should be achieved if the citizens are motivated and engaged in that process. The Intervention of Non-Governmental Organizations were centralized and not known by citizens who confused the NGOs and their intervention (Institute of National statistics of Rwanda, 2012)

#### 1.2 Problem Statement

Inclusive Socio-Economic Development consists of ensuring that all marginalized and excluded groups are stakeholders in development processes. Therefore, many people are excluded from development because of their gender, ethnicity, age, sexual orientation, disability or poverty. The effects of such exclusion are staggering, increasing inequality across the world. Rwanda is

poverty stricken country in a period of transition from emergency to sustainable development. The poverty of the population shows that 67% of poor people are in the rural areas. The poverty situation attracted the attention of INGOs to help the poor through projects(World Bank ,2003) .Handicap international started working in Rwanda since 1994. In partnership with the Civil Society Organizations and public institutions, HI sought to promote and support policies and initiatives of the public levels and the civil society aiming at preventing causes of vulnerability and disability and striving for the protection and inclusion of vulnerable persons. Despite a large number of NGOs operating in Rwanda, various views witness that they have not reached the community involvement standard. In fact the evidence base for a relationship between NGO characteristics and better outcomes is weak and the project effectiveness agenda is driven by what donors say they ought to do. In addition there are no studies conducted to quantify the contribution of NGOs in Inclusive Development in Nyamasheke district. To carry out this research, through Handicap International in Rwanda, Nyamasheke District, the researcher wanted to identify the contribution of Inclusive Development project of Handicap international on empowerment of people with disability of Nyamasheke district supported by Handicap International.

# 1.3. Objectives of the Study

#### 1.3.1 General Objective

The general objective for this research project was to establish the contribution of handicap international inclusive development project on rural disabled people empowerment in Nyamasheke District.

#### 1.3.2 Specific Objectives

This study focused on the following specific objectives:

- (i) To assess the implementation of inclusive development project in Nyamasheke District
- (ii) To establish the level of empowerment of people with disability in Nyamasheke District
- (iii) To establish the relationship between inclusive development project and empowerment of people with disability in Nyamasheke District.

#### 1.4 Research questions

- (i) How inclusive development project was implemented in Nyamasheke District?
- (ii) What is the level of empowerment of people with disability in Nyamasheke District?
- (iii) What is the relationship between inclusive development project and empowerment of people with disability of Nyamasheke District?

#### 1.5 Significance of the Study

This study will be significant to:

# 1.5.1 Handicap International

The findings of this study show the success or fail of Handicap International Inclusive Development Project on empowerment of people with disability of Nyamasheke District, recommendation which are given according to the finding are taken as lesson learnt.

# 1.5.2 Local leaders of Nyamasheke District

To be informed about the success or fail of the handicap international inclusive development project on empowerment of people with disability based on the findings, recommendation of the sustainability of the project are taken.

#### 1.5.3 The researcher

This study helps the research to get his master's degree

# 1.6 Limitations of the Study

In the course of carrying out this study the researcher accounted some constraints which limited the findings of this research. They include among others the following: Inclusive Development in Rwanda is new policy and there is still little literature about the subject matter. No major studies have been done linking the inclusive Development project and empowerment of people with disability. To address this issue, the researcher has been obliged to consult the staff of Handicap International at the head office where the project is based for any available literature and also link it to other projects outside the country that are similar in nature. Secondly, coupled with unexpected appointments or unavailability of some respondents, the researcher should arrange appointments in advance and also make follow up with the respondents to ensure that they are available on the scheduled date.

# 1.7 The Scope of the study

The findings from this research assessed the effect of handicap international inclusive development project on empowerment of people with disability.

#### 1.7.1 Content Scope

The content of the scope contains the conceptual framework with two parts, one part as independent variable is handicap international inclusive development project, and the dependent variable is empowerment of people with disability.

#### 1.7.2 Geographic Scope

In terms of geographic coverage, this study was carried out in three sectors namely Kanjongo, Kagano and Ruharambuga among 15 sectors which form Nyamasheke District of western province. Those sectors have been chosen because they are application fields of Handicap in Nyamasheke District.

#### 1.7.3 Time Scope

As far as time is concerned, the study analyzed the effect of Handicap International Inclusive Development Project on rural disabled people empowerment of Nyamasheke District from 2013 up to date of data collection. This time scope has been chosen because this is the operational period of Handicap International in Nyamasheke District.

#### 1.8 Organization of the Study

The rest of this study was organized as follow: chapter two describes various literatures relating to the topic which a researcher had gone through. That includes conceptual definitions; theoretical literature review and empirical literature review, abroad and local studies; conceptual and theoretical framework, chapter three discusses various elements of research methodology, chapter four discussed the finding and chapter five established the conclusion and recommendation based on the findings.

# **CHAPTER TWO: LITERATURE REVIEW**

#### 2.0 Introduction

This chapter covers different literature. It is divided into six parts: the first is the theoretical literature, the second part is the empirical literature, the third parts is critical review and research gap identification, the fourth is theoretical frame work, the fifth is concept frame work and the last part is summary.

#### 2.1 Theoretical Literature

# 2.1.1 Handicap International

According to Handicap International Federal Information Rwanda Country Card, 2016 report, Handicap international started working in Rwanda since 1994 in partnership with the Civil Society Organizations and public institutions, HI sought to promote and support policies and initiatives of the public levels and the civil society aiming at preventing causes of vulnerability and disability and striving for the protection and inclusion of vulnerable persons

From 1994 to 1996, Handicap International intervened alongside numerous other NGO's to provide emergency relief to a population in extreme distress following the 1994 genocide that killed more than 800,000 people in 100 days.2. From 1996 to 2000, a period marked by the return to relative social, political and administrative stability, Handicap International decided to refocus on long-term activities and provide vulnerable people and people affected by HIV/AIDS, with support to improve their living conditions. Since 2001, the organization has been working to support the development of Rwanda and conducts violence prevention activities through community-based approaches, education for all, community-based rehabilitation,

7

training of occupational therapists, reduction of sexual violence especially in relation to children with disabilities, and cares for people with epilepsy (Handicap International, 2016)..

From 2013 to 2016, Handicap International in Rwanda focuses on the following 3 domains:

Prevention, health and rehabilitation program with objectives of preventing and fighting against chronic and disabling diseases, detection and early prevention and promotion of mental health through a community based approach (Handicap International, 2016).

Social, economic inclusion and citizen's participation program whose aim is for promoting social, cultural and economic citizen's participation for the vulnerable persons; ensuring access to education for all; providing an institutionalized expertise and support and enhancing representation and competences of vulnerable persons through their associations (Handicap International, 2016).

Protection against gender, age and disability based violence program, Handicap International seeks to prevent the occurrence of gender, age and disability based violence in an effort to initiate actions that empower vulnerable persons and mobilize local, national and international stakeholders for an owned engagement in the promotion and respect of rights of vulnerable persons facing gender, age and disability based violence. It is committed to searching and providing reliable data on identification of vulnerable populations and mitigation of the underlying risk factors (Handicap International, 2016).

#### 2.1.2 Project of Handicap International in Nyamasheke District

The aim of handicap international in this program is to help the government of Rwanda to develop the flexibility and inclusiveness of its education system to provide all children with a

suitable learning environment, and enhances the inclusion of vulnerable children, particularly children with disabilities, in mainstream schools. Handicap International aims at applying national norms and standards to the new curriculum in order to ensure it is adapted to children with disabilities. In addition Handicap International works with key education actors to ensure the education system is accessible to all children, including children with disabilities. To achieve this, Handicap International helps train public authorities and teachers, raises public awareness and conducts advocacy targeted at decision-makers (Handicap International, 2016).

The beneficiaries of this program include: 2,771 schools including five model schools, 13 children's friends schools, 25 cluster schools, 8,958 children with disabilities, more than 3,800 teachers and other actors in the education sector and 540 parent members of school psychoeducational committees. These beneficiaries are living in 13 districts of Rwanda namely Nyamasheke, Ruhango, Nyarugenge, Ngororero, Kayonza, Rulindo, Bugesera, Gasabo, Rusizi, Rubavu, Rwamagana, Burera and Kamonyi. (Handicap International, 2016)

## **Community-based rehabilitation program**

The aim of this program is the promotion of mental health and the fight against gender-based violence through a community approach and individual by strengthening beneficiaries through development of professional skills, good mental health, self-confidence and awareness of their rights and collectively by strengthening associations through training in association and project management in good governance and advocacy, the provision of material and financial resources at the level of structures and activities, and by creating or strengthening frameworks for dialogue with local actors.

Handicap International Rwanda thus ensures the accumulation and dissemination of pilot actions and best practices to promote their replication and proposes the mobilization of skills and expertise, within HI but also through our network, accompanying partners wishing to implement an inclusive approach of their actions. (Dorothea, 2006).

#### 2.1.3 Disabling barriers experienced by people with disabilities

#### Poorer health outcomes

People with disabilities experience poorer levels of health than the general population. Depending on the group and setting, persons with disabilities may experience greater vulnerability to preventable secondary conditions, co-morbidities, and age-related conditions. Some studies have also indicated that people with disabilities have higher rates of risky behaviors such as smoking, poor diet and physical inactivity. People with disabilities also have a higher risk of being exposed to violence. Unmet needs for rehabilitation services (including assistive devices) can result in poor outcomes for people with disabilities including deterioration in general health status, activity limitations, participation restrictions and reduced quality of life (WHO,2011).

#### Lower educational achievements

Children with disabilities are less likely to start school than their peers without disabilities, and have lower rates of staying and being promoted in schools. Education completion gaps are found across all age groups in both low-income and high-income countries, with the pattern more pronounced in poorer countries. The difference between the percentage of disabled children and the percentage of non-disabled children attending primary school ranges from 10% in India to 60% in Indonesia. In secondary education the difference in attendance ranges from 15% in

Cambodia to 58% in Indonesia. Even in countries with high primary school enrolment rates, such as those in Eastern Europe, many children with disabilities do not attend school (Filmer ,2008)

#### **Less economic participation**

People with disabilities are more likely to be unemployed and generally earn less even when employed. Global data from the World Health Survey show that employment rates are lower for disabled men (53%) and disabled women (20%) than for non-disabled men (65%) and women (30%). A recent study from the Organization for Economic Co-operation and Development (OECD) showed that in 27 countries working-age persons with disabilities experienced significant labour market disadvantage and worse labour market outcomes than working age persons without disabilities. On average, their employment rate, at 44%, was over half that for persons without disability (75%). The inactivity rate was about 2.5 times higher among persons without disability 49% and 20%, respectively (Organization for Economic Co-operation and Development, 2010).

#### **Higher rates of poverty**

People with disabilities experience higher rates of poverty than non-disabled people. On average, persons with disabilities and households with a disabled member experience higher rates of deprivations, including food insecurity, poor housing, lack of access to safe water and sanitation, and inadequate access to health care and fewer assets than persons and households without a disability. People with disabilities may have extra costs for personal support or for medical care or assistive devices. Because of these higher costs, people with disabilities and their households are likely to be poorer than non-disabled people with similar income. Disabled people in low-income countries are 50% more likely to experience catastrophic health expenditure than non-disabled people (WHO, 2009).

# **Increased dependency and restricted participation**

Reliance on institutional solutions, lack of community living and inadequate services leave people with disabilities isolated and dependent on others. A survey of 1505 non-elderly adults with disability in the United States found that 42% reported having failed to move in or out of a bed or a chair because no one was available to help. Residential institutions are reported to be responsible for a lack of autonomy, segregation of people with disabilities from the wider community, and other human rights violations. Most support comes from family members or social networks. But exclusive reliance on informal support can have adverse consequences for caregivers, including stress, isolation, and lost socioeconomic opportunities. These difficulties increase as family member's age. In the United States members of families of children with developmental disabilities work fewer hours than those in other families, are more likely to have left their employment, have more severe financial problems, and are less likely to take on a new job (Kaiser Family Foundation ,2003)

#### **2.1.4** The Concept of Development

The term development means a process on general improvement in level of wellbeing together with decreasing inequality of income distribution and the capacity of sustaining a continuous improvement over time. Inevitably, there must be certain arbitrariness in choosing the components to be included and then relative, set would consist of, income improvement, education, health and nutrition, food security, shelter and support services such as water supply, transport and social protection (Streeten, 1997).

Clever (2001) defines development as the process of improving the quality of all human lives. He gave the aspects that raising people's living levels in their income, consumption levels and education through relevant economic growth processes and creating conditions conducive to the

growth of people's self-esteem through the establishment of social, political and economic systems and institutions which promote human dignity and respect as well as increasing people freedom to choose by enlarging the range of their choice variables like increasing varieties of consumer's goods and services.

Attack (1999) argues that development is a complex phenomenon comprising many dimensions-social, political, economic, administrative and cultural. It is relative term based on values than description. Development will not be defined to universal satisfaction. It is described a multi-dimensional process involving changes in structures, attitudes and institutions as well as the acceleration of the economic growth, the reduction of inequality and the eradication of the absolute poverty. He argues that development is a process of societal transformation from a traditional society to a modern society and such transformation is also associated to modernization, while the Brandt commission report also indicates that development is now widely recognized as involving a profound transformation of the entire economy and social structure.

Briefly, development is a process of change towards the improvement of the well-being of people. It is about raising the standards of living of the people, improving their education as well as opening them to a new and equal opportunity for a richer and more varied life. This should be applied with a sustainable way that should involve community and/or planers on a balanced scorecard in service delivery (Attack, 1999).

# 2.1.5 The Concept of Inclusive Socio-Economic Development

Inclusive Socio-Economic Development consists of ensuring that all marginalized and excluded groups are stakeholders in development processes. Disability-inclusive development means

ensuring that all phases of the development cycle (design, implementation, monitoring and evaluation) include a disability dimension and that people with disabilities are meaningfully and effectively participating in development processes and policies. Disability-inclusive development is founded upon the three key principles of participation, non-discrimination and accessibility. (Adesena, 2007). Inclusive development is based on a twin-track approach that implies both (1) actions to mainstream disability in all programs, and (2) actions specifically targeting people with disabilities to enable them to participate and benefit from programs on an equal basis with others. Inclusive socio-economic development consists of ensuring that all marginalized and excluded groups are stakeholders in development processes. (JICA, 2003)

UNDP maintains that many groups are excluded from development because of their gender, ethnicity, age, sexual orientation, disability or poverty. The effects of such exclusion are rising levels of inequality around the world. Development cannot effectively reduce poverty unless all groups contribute to the creation of opportunities, share the benefits of development and participate in decision-making. The goal of inclusive development is to achieve an inclusive society, able to accommodate differences and to value diversity. Disability-inclusive development, as defined by IDDC, refers to "ensuring that all phases of the development cycle (design, implementation, monitoring and evaluation) include a disability dimension and that persons with disabilities are meaningfully and effectively participating in development processes and policies". Inclusive development also implies a rights-based approach to development, understood in terms of a framework for human development as a process firmly grounded in international human rights standards and focused on the promotion and protection of human rights. (United Nations Development Program, 2012)

In other words, inclusive development: ensures that persons with disabilities are recognized as rights-holding equal members of society who must be actively engaged in the development process irrespective of their impairment or other status such as race, color, sex, language, religion, political or other opinion, national, ethnic, indigenous or social origin, property, birth, age or other status, policies and programs must take into account and be assessed in accordance with their impact on the lives of persons with disabilities, and consistent with the promotion and protection of internationally recognized human rights(Adesena ,2007).

# 2.1 .6 Empowerment of people with disability

According to the Department for International Development (DFID) report, for the British government department whose responsible is to promote the development and the reduction of poverty, Swedish Disabled International Aid Association(SHIA) had elaborated five basic principles, a rights-based approach to sustainable development for persons with disabilities, these five basic principles are as follows:

#### **Social Protection**

People with disabilities should have access to basic social protection, defined as housing, health care, rehabilitation services and access devices. These include artificial limbs, wheelchairs, hearing aids, Braille machines, and so on.

# Accessibility

People with disabilities should have access to education, credit, information, and income earning opportunities.

#### Consciousness

People with disabilities are conscious of their own needs and rights. They are aware of the consequences of neglecting and discriminating attitudes in the society.

#### Influence

People with disabilities are entitled to have equal opportunities to influence decision and policy making through processes of participation.

#### **Control**

People with disabilities are entitled to take initiatives to assert their influence, and promote awareness of their rights. This enables increased control over the distribution of resources and benefits. SHIA seeks to advance these principles through support to the development and strengthening of organizations of disabled people in developing countries. It prioritizes programs that enable people with disabilities to speak for themselves and which, in turn, strengthen their human rights (DFID, 2000).

#### 2.1.7 Principles of Inclusive Socio-Economic Development

Inclusive Socio-Economic Development is based on three principles: participation, non-discrimination and accessibility (World Bank, 2003)

#### **Participation**

Participation is essential to ensure the relevance and sustainability of any development action. The active involvement of people with disabilities is particularly important to overcome their isolation and invisibility. Overcoming barriers, especially social barriers, is only possible if there is a proactive effort to include people with disabilities. This requires positive action and the implementation of reasonable accommodation.

The Convention on the Rights of Persons with Disabilities (CRPD) contains an obligation to "closely consult with and actively involve persons with disabilities, including children with

disabilities, through their representative organizations, in the development and implementation of legislation and policies to implement the present Convention, and in other decision-making processes concerning issues relating to persons with disabilities (CRPD Article 4.3). The participation requirement is also reflected in the following reference to inclusive development: "partnership with relevant international and regional organizations and civil society, in particular organizations of persons with disabilities" (Handicap International ,2016)).

#### **Non-discrimination**

Discrimination is the key concept of the CRPD, which it aims to eliminate. There are two basic types of discrimination:

#### **Direct discrimination**

Direct discrimination is denying a person to access what is allowed based on his status or other condition, this can be seen like treating a person less favorably than another in a comparable situation (for example, refusing to include some children in a program because of their disability) (World Bank, 2003).

#### **Indirect discrimination**

Occurs when something that is apparently "neutral" results in a particular disadvantage for people with disabilities (for example, a water program for all is excluding people with disabilities if pumps or wells are inaccessible or cannot be maneuvered easily). Denying a reasonable accommodation is hence a form of indirect discrimination.

Non-discrimination is related to the concept of equal opportunities. It is essential to ensure an equal chance for all to access an opportunity, taking into consideration that people do not have the same starting point. Disability-inclusive development, therefore, means to ensure that no action contributes to creating new barriers: an education project involving the construction of inaccessible schools, with a teaching pedagogy that is not adapted or staff that are not trained to include children with disabilities (World Bank, 2003).

#### Accessibility

An essential implication of non-discrimination is to systematically consider accessibility issues. Accessibility must "enable persons with disabilities to live independently and participate fully in all aspects of life". The CRPD requires States Parties to take "appropriate measures to ensure to persons with disabilities access, on an equal basis with others, to the physical environment, to transportation, to information and communications, including information and communications technologies and systems, and to other facilities and services open or provided to the public, both in urban and in rural areas (Handicap International, 2016).

Inclusive development implies that the needs of the majority are taken into consideration, for example by applying the principles of Universal Design, and that reasonable accommodation, i.e. the necessary adjustments, be made to enable individuals to participate on an equal basis with others. The experience of Handicap International in difficult environments has shown that "small" actions and adjustments can do much to enhance participation of people with disabilities (World Bank, 2003).

#### 2.1.8 Benefits of Inclusive Socio-Economic Development

There are so many benefits of inclusive development such us: Benefits of Inclusive Education, Economic Growth, Productivity and Employment, Social cohesion, peace and state-building

The benefits of inclusive education are numerous for both students with and without disabilities.

#### **Benefits of Inclusive Education**

Friendships; Increased social initiations, relationships and networks; Peer role models for academic, social and behavior skills; Increased achievement of IEP goals; Greater access to general curriculum; Enhanced skill acquisition and generalization; Increased inclusion in future environments; Greater opportunities for interactions; Higher expectations; Increased school staff collaboration; Increased parent participation; Families are more integrated into community. Meaningful friendships; Increased appreciation and acceptance of individual differences; Increased understanding and acceptance of diversity; Respect for all people; Prepares all students for adult life in an inclusive society; Opportunities to master activities by practicing and teaching others; Greater academic outcomes; All students' needs are better met, greater resources for everyone (Combaz, 2014).

#### **Benefits of Inclusive Economy**

Another benefit of inclusive development is Economic Growth, Productivity and Employment, there are substantial and credible conceptual and historical analyses on the positive relationship between inclusive institutions and long-term growth, but highly contested, mixed findings from empirical quantitative, cross-country evidence on the effect of institutions on growth.

There is mounting evidence of the impact of inclusive growth approaches on reducing poverty and inequality, when excluded groups gain greater access to education, employment and business opportunities. Also emerging evidence exists of the positive relationship between diverse workforces and company profitability. There is more limited evidence of the impact of inclusive approaches on employment rates, and the economic benefits of disability-inclusive development approaches, but some positive case studies. Some quantitative evidence indicates that extending services may boost economic growth but few in-depth case studies look at this. A small evidence base shows that participatory development projects more broadly have limited impact on income poverty. There is overwhelming evidence of the positive impacts of social protection on growth at the household level and at the local level, but evidence of macro aggregate effects on GDP is more limited. There is a growing consensus that social protection's role in reducing inequality is positive for economic growth. (Combaz, 2014).

#### 2.1.9 Benefits of Inclusive Governance

There is inconclusive cross-country quantitative evidence on the relationship between a country's democratic status and poverty reduction and other development outcomes. Deeper measures of political inclusion (e.g. political competition) are likely to be significant.

There is evidence of cases where women and girls' education and economic empowerment has contributed to postponed marriage, lower fertility and improved health and education outcomes for future children. There is an established body of evidence that women's increased income control and role in household decision-making improves their own and their children's health and wellbeing. Moreover there is some evidence increased women's political participation can further political concerns to improve family daily life (McLaughlin, 2014).

Evidence suggests inclusive political settlements and broader political processes are essential for fostering peaceful societies. Inconclusive evidence exists on whether more inclusive peace processes and agreements make political settlements more inclusive and/or more sustainable. There is little robust evidence of the causal connections between gender-inclusive interventions and peace building and state-building goals. Some qualitative studies find a positive correlation between women's empowerment in post-conflict contexts and broader societal outturns; others that levels of gender equality are correlated with the prevalence of conflict (Combaz, 2014).

#### **2.2** Empirical Literature

Handicap International (HI) Cambodia/Thailand implemented the initiative of Towards Sustainable Income Generating Activities (TIGA), during the period 2008-10 in Cambodia. The project targeted 560 persons with disabilities and their family members. It aimed at reducing social exclusion and poverty among persons with disabilities in Battambang province by increasing livelihood opportunities through access to health and rehabilitation services, and through access to vocational and business skills development opportunities.

The project faced a number of challenges, mainly linked to the very low level of education and skills of the target group and working experience and opportunities. To address these challenges, the project looked at creating rural entrepreneurship opportunities. It acknowledged that being a successful entrepreneur requires diverse skills. These include technical skills, professional skills, soft skills (such as self-esteem, communication, negotiation), and business management skills. It also recognized that most people in rural areas generate income in the informal economy.

discussion, discussions with families, group and community activities. It built on existing networks and resources, such as local officers to conduct training, in order to maximize resources and support the sustainability of the project. The success was then replicated and beneficiaries were followed up after the training and provided with additional support. The project also provided refresher courses and a platform for people with disabilities involved in similar activities to share good practices and challenges they encountered. (Kaplan, 1993)

The objective of that project was achieved since after three years, 560 people with disabilities participated in the project of which 70 per cent were mine and war victims and 49 per cent were women. Seventy-five per cent of participants increased their income, 87 per cent improved their quality of life, and food insecurity decreased for all project beneficiaries. The China Disabled Peoples' Federation (CDPF) conducted a baseline survey on the training needs of persons with disabilities in agro production and techniques in 1995. In response to the survey, two national policy guidelines were formulated. Heilongjiang province was chosen to be a pioneering province in implementing the policies and the government of Heilongjiang province provided ad hoc financial and administrative support. A Training Project was initiated to improve farming practices and farmers" agriculture skills. The local Ministry of Education, Ministry of Human Resource and Social Security, Ministry of Agriculture and CDPF collaborated in implementing the project. With financial support from the government, 63,000 training sites, 19,000 stations for apprentice-type training, 15 million textbooks and more than one million sets of audio-visual teaching materials were created. That project of CDPF helped to increase the number of people with disabilities who were trained from 2,357 persons in 1996 to 20,405 in 2000. Eighty-seven per cent of the 80,600 persons with disabilities trained by the program rose out of poverty while

some nine per cent became relatively rich, the project also demonstrated that the enforcement of government policies and legislation can improve the economic conditions of people with disabilities in rural areas by increasing access to mainstream training courses, and by diversifying training programs so that they are responsive to the unique opportunities of a geographic area, i.e. natural resources and market opportunities (ILO, 2011).

#### 2.3 Critical Review and Research Gap Identification

Literatures that have been reviewed by the researcher give the relevant information about how inclusive development projects have played important role in empowerment of people with disability, for example Handicap International (HI) Cambodia/Thailand implemented the initiative of Towards Sustainable Income Generating Activities (TIGA), during the period 2008-10 in Cambodia. The project targeted 560 persons with disabilities and their family members. It aimed at reducing social exclusion and poverty among persons with disabilities in Battambang province by increasing livelihood opportunities through access to health and rehabilitation services, and through access to vocational and business skills development opportunities. The beneficiaries of the project gained technical skills, professional skills, soft skills (such as selfesteem, communication, negotiation), and business management skills. It also recognized that most people in rural areas generate income in the informal economy. The TIGA project offered a variety of technical training to improve skills according to each individual's need. The individual approach included talking directly to the target group, peer discussion, discussions with families, group and community activities in addition at the end of the project, 75% of participants increased their income, 87 per cent improved their quality of life, and food insecurity decreased for all project beneficiaries.

Another example can be seen in the implementation of the project of China Disabled People's Federation (CDPF) in Heilongjiang province of Chine where the project of CDPF helped to increase the number of people with disabilities who were trained from 2,357 persons in 1996 to 20,405 in 2000. Eighty-seven per cent of the 80,600 persons with disabilities trained by the program rose out of poverty while some nine per cent became relatively rich, the project also demonstrated that the enforcement of government policies and legislation can improve the economic conditions of people with disabilities in rural areas by increasing access to mainstream training courses, and by diversifying training programs so that they are responsive to the unique opportunities of a geographic (ILO, 2011).

The gap identified is that there is no empirical research done in Nyamasheke district showing whether Handicap international inclusive development project has empowered the people with disability of Nyamasheke district, this is the gap that the present study will fill.

#### 2.4 Theoretical Framework

This study was based on three theories namely social oppression theory, critical theory and functionalist theory.

#### **2.4.1 Social oppression theory**

According to this theory disability is understood as a social and political issue rather than a medical one, and this leads to critical questioning of medical interventions which attempts to cure impairments or to restore normal bodily functioning. Instead, social and political solutions are sought, to challenge disabling discrimination, and impairment is the functional limitation within the individual caused by physical, mental or sensory impairment; disability is the loss or

limitation of opportunities to take part in the normal life of the community on an equal level with others because of physical and social barriers (Oliver,1996).

#### 2.4.2 Critical theory

Critical theory sees disabled people's problems explicitly as the product of an unequal society. It ties the solutions to social action and change. Notions of disability as social oppression mean that prejudice and discrimination disable and restrict people's lives much more than impairments do. So, for example, the problem with public transport is not the inability of some people to walk but that buses are not designed to take wheelchairs. Such a problem can be "cured" by spending money, not by surgical intervention, assistive computer technology, or rehabilitation. This theory has raised political awareness, helped with the collective empowerment of disabled people (Campbell, 1996).

#### 2.4.3 Functionalist theory

Functionalism confuses impairment and disability with the sick role. By failing to recognize that disabled people do not necessarily have "something wrong with them," it simply reproduces discriminatory norms and values, instead of addressing the cultural and economic forces that precipitate them. The crucial problem is that disabled people, regardless of the type or severity of their impairment, are not a homogeneous group that can be accommodated easily within a society that takes little account of their individual or collective needs. As with the whole population, disabled people differ widely in terms of ethnic background, sexual orientation, age, abilities, religious beliefs, wealth, access to work, and so on. Clearly, their situation cannot be understood or, indeed, transformed by any policy based on narrow theories of conventional normality or uniformity (Oliver, 1998).

#### 2.5 Conceptual framework of the Study

A conceptual framework is a diagrammatical research tool intended to assist the researcher to develop awareness and understanding of the situation under scrutiny and to communicate this; a conceptual framework is used in research to outline possible courses of action or to present a preferred approach to an idea or thought. It can be defined as a set of broad ideas and principles taken from relevant fields of enquiry and used to structure a subsequent presentation (Kandampully, 2008).

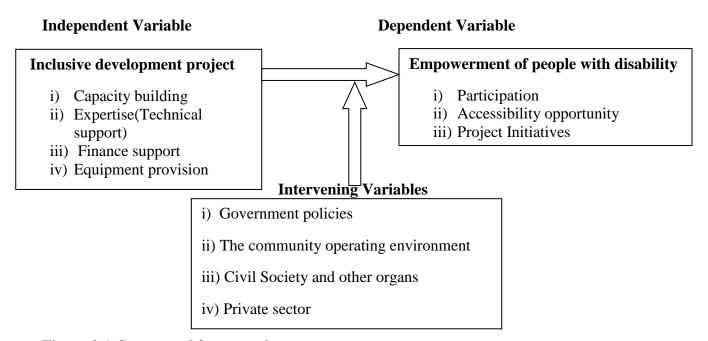


Figure 2.1 Conceptual framework

Source: The Researcher, 2017

The independent variables inclusive development project which included beneficiaries training on capacity building, decision making and beneficiaries participation in a project, provision of equipment, income generating activities, the dependent variable is rural people with disability empowerment which included: access to education, health care services, participation in community events. The intervening variables are: Government policies, NGOS and Private

sector, community operating environment. The independent variable was assumed to have a direct relationship (effect) on the dependent variables and the intervening variables are the external factors which help to link the independent with dependent variables.

#### 2.6 Summary

This chapter focused on exploring in brief the literature that guided this research, where many researchers established that disabling barriers experienced by people with disabilities are poorer health outcomes, lower educational achievements, less economic participation, higher rates of poverty, increased dependency and restricted participation, it was for that reason handicap international brought inclusive development project with aim of improvement level of wellbeing together with decreasing inequality of income distribution, strengthening the capacity of sustaining a continuous improvement over time of people with disability in Nyamasheke district. Literature reviewed show that different inclusive development projects of NGOs have improved the wellbeing of people with disability, therefore this study seek to establish the contribution of Handicap international inclusive development project on empowerment of people with disability of Nyamasheke district by assessing if people with disability have access to education, health services, income generating activities as the objective of the project was to bring those services to people with disability of Nyamasheke district and raising the awareness of right of people with disability.

#### **CHAPTER THREE: RESEARCH METHODOLOGY**

#### 3.0 Introduction

This chapter is concerned with the methodology that was used to conduct this research. This chapter describes the methods and techniques that were used to carry out this research. It comprises the practical part of the study and discusses the design of the study, target population, sample design, data collection and the data processing that were used.

#### 3.1 Research Design

Research design is a plan of the study that organizes observations in such a way as to establish a sound logical basis for causal influence. That is a plan of action adopted by the researcher in carrying out the research. It is a plan of how the research has been carried out. This study has followed the descriptive survey design to the role played by handicap international project in contributing to rural people with disability empowerment of beneficiaries in Nyamasheke district as the focus of the research. It will involve both quantitative and qualitative data collection (Larry, 2010)

The design as defined by Orodho (2003) is a method of collecting information by interviewing or administering a questionnaire to a sample of people .The main characteristic of research survey design is to describe specific feature of a large group of persons or object through questionnaires (Joeger, 1988). The research design is a case study.

#### 3.2 Target Population

The study population is a group of persons who was a source of inquiry throughout the study It consisted of a group of people or items that have a common character .Amin (2005) defined

population as a group or category of human being or other things that have one or more

characteristics in common as the target population of the universe.

The target population of this study was 435 beneficiaries of Handicap international inclusive

development project from three sectors of Nyamasheke district

3.3 Sample design

This research has a sampling plan for each sector, to choose the element to be included in the

sample. The study used stratified sampling and simple random sampling technique by selecting

the number of respondents on the sampling plan in order to get 208 people from 435

beneficiaries of Handicap international inclusive development project in Nyamasheke district.

3.3.1 Sample Size

This study used a sample size calculated by using Yamane formula recommended by (Yamane,

1973):

 $n = N/(1+Ne^2)$ 

Where: **n** is the size of the sample,

**N** is the population of the sample, and

e<sup>2</sup> is the probability of error. This formula will be used for sampling because of the big number

of population. Thus, the sample size for the study will be calculated according to the

recommended procedure as follows:

 $n= 435/\{1+435(0.05)^2\}=208$ 

With N = 435 and e = 5% (at 95% confidence level)

29

The sample size was 208 respondents from three sectors of Nyamasheke district and 3 sector leaders for key informant interview.

#### 3.3.2 Sampling technique and procedures

The respondents were divided into two groups namely Nyamasheke leaders and inclusive development project beneficiaries, for Nyamasheke leaders (one in charge of people with disability at district level, leader in charge of education and another employee of Handicap international) they were interviewed by key informant interview while beneficiaries of the project were given questionnaire.

Stratified sampling technique was used where a stratified random sample is a population sample that requires the population to be divided into smaller groups, called cluster or strata. Random samples can be taken from each stratum or group. All beneficiaries of handicap international inclusive development project in Nyamasheke District had an equal chance of being selected from three clusters namely Ruharambuga sector, Kagano sector, and Kanjongo sector as respondents. Stratified random sampling technique was used to select the respondents from each cluster the number of respondents was found by proportional allocation number of respondents in each strata/cluster times number of sample size divided the target population.

**Table 3.1:** Sample size

Sectors	Number of Beneficiaries	Number of respondents in sector
Ruharambuga	120	58
Kagano	170	81
Kanjongo	145	69
Total	435	208

Source: Compiled by researcher, 2017

From each sector level, simple random sampling technique was used to get calculated sample size because the beneficiaries of the project in each sector have equal chance of being selected as respondents.

#### **3.4 Data Collection Methods**

Data collection is the process of gathering and measuring information on variables of interest, in an established systematic fashion that enables one to answer stated research questions and evaluate outcomes. In this study, the researcher used questionnaires as primary tools and documentation as secondary data.

#### **3.4.1. Data Collection Instruments**

The instrument that was used in primary data collection was questionnaire and documents as already stated in data collection as secondary data.

#### 3.4.1.1 Questionnaire

The questionnaire of this study was designed in English and Kinyarwanda. The questionnaire was made up of three sections, the first one is for the demographic characteristics of respondents, the second one was about the implementation of inclusive development project, and the last one was concerned with empowerment of people with disability supported by Handicap International.

#### **3.4.1.2. Documentary**

This is being done using secondary data analysis. The information was obtained from the reports of other researchers establishing the contribution of projects on the empowerment of people with disability and Non-government report, Rwanda political report like EDPRS, VUP, District development plan and other administrative reports was consulted as secondary data.

#### 3.4.2 Administration of Data collection instruments

The respondents in the study participated voluntary after being informed the objectives of the study. After getting permission of collecting data from Mount Kenya University and Nyamasheke District, the researcher contacted participants. The respondents 'answers was kept confidential, and respondents were informed not to put their names on questionnaires.

#### 3.4.3 Reliability and Validity

The researcher with help of supervisors discussed—the interview items with colleagues basing on the Content Valid Index (CVI) which is a scale developed by computing or ranking the relevant items in the instrument or questionnaire by checking their clarity, their meaningfulness in line with all objectives stated, dividing by the total number of items. Content Validity is the degree to which an instrument has an appropriate sample of items for the construct being measured and is an important procedure in scale development, CVI greater than 0.6 is the most widely used index in the quantitative evaluation. Thereafter, based on the feedback, the researcher eliminated items that are unclear, irrelevant or redundant and the content validity using the Content Validity Index formulae (CVI) by Amin (2005) above 0.6 was calculated for validation.

To ensure accuracy, consistency and completeness, reliability of the instrument has been established using Cronbach's coefficient Alpha test (Cronbach, 1946).

#### 3.5 .Data Analysis procedure

After a successful data collection exercise, the researchers analyzed, edited, coded, and tabulate the findings. For quantitative data, the computer program, SPSS version 20 was used to analyze the data. Objective 1 and 2 were analyzed using descriptive statistics where frequencies, percentage, mean and standard deviation were used.

Objective 3 was analyzed using cross tabulation and chi square in order to establish the relationship between inclusive development project and empowerment of people with disability and make inferences. The hypothesis was tested using the P-value at a level of significance of 0.05.

#### 3.6 Ethical consideration

For ethical considerations, prior to the distribution of the study guides, the researcher got permission of collecting data from Mount Kenya University and permission of collecting data from three sectors of Nyamasheke District where Handicap international has implemented its project. Study participants were informed that the purpose of the study is academically. During these explanations, the participants were assured confidentiality where anonymity in filling questionnaire was the most important tools to ensure confidentiality. The study participants were informed that their participation in the study is a voluntary activity.

#### CHAPTER FOUR: RESEARCH FINDINGS AND DISCUSSION

#### 4.0 Introduction

This chapter presents the results of data that were collected from the field in order to respond the objectives of the study. Data presented include demographic characteristics of respondents and those responding the objectives of the study. The presentation was done in form of tables and basic descriptive statistics (frequency, percentages, mean), to perform basic analysis while advanced statistical techniques like Chi-square, was used to clarify the relationship between different variable in this study in order to find out the effect of inclusive development project on empowerment of people with disability supported by Handicap International in Nyamasheke district.

#### 4.1 Demographic characteristics of respondents

This section includes the results on different demographic characteristics that were considered in this study. Those included age, education level, occupation and gender of respondents.

Table 4.1: Distribution of respondents by age

Values	Frequency	Percent
Less than 30 years	150	72
30-40 years	33	16
40-50 years	17	8
Above 50 years	8	4
Total	208	100.0

Source: Primary data, 2017

Table 4.1 shows the distribution of respondents by their ages. Majority of participants in this study were found to be age of less than 30 years with 72%,(150) of participants while the little number of participants was found to be the one of respondents to have the age above 50 years 4% (8). This implies that respondents in adulthood and in advanced age are the most vulnerable

and their level of their poverty could be reduced by empowerment through different intervention either government or non-government.

**Table 4 2:** Distribution of respondents by their occupation

Values	Frequency	Percent	
Farming	152	73	
Local artisan	31	15	
Small business owner	25	12	
Total	208	100.0	

Source: Primary data

Table 4 2 shows the distribution of respondents by their occupation. Majority of participants in this study were found to be farmers with 73% (152) of respondents compared to 15 % (31) and 12% (25) who were local artisan and small business owner respectively. This is related to the area by which this study was conducted in Nyamasheke district where the predominant economic activity is agriculture and it is known that above 90% of Rwandan population are employed in agriculture sector.

**Table 4 3:** Distribution of respondents by education level

Values	Frequency	Percent
No education level	64	31
Primary level	119	57
Secondary level	25	12
Total	208	100.0

**Source:** Primary data

Table 4.3 shows the distribution of respondents by their educational level. Majority of respondents in this study were found to have primary education with 57 %,(119) respondents, no education level (who did not complete six years for primary) were found to be 64 (31%) and respondents to hold secondary education were found to be 25(12%). This implies that inclusive

development project was designed to empower people with disability because most of the time people with disability lose their right of education because of many barriers namely bad belief of community to let the people with disabilities to stay at home, lack of special education for people with disability, materials required for people with disability to study well, lack of curriculum which take into consideration people with disability, availability of schools which are not comfortable for people with disability, although education is among crucial indicators of socio-economic status and influencer of individuals' economic level.

**Table 4.4:** Distribution of respondents by gender

Values	Frequency	Percent	
Male	87	42	
Female	121	58	
Total		100.0	

**Source:** Primary data

Table 4.4 shows the distribution of respondents by their gender. Majority of respondents reported that they are female with 121(58%) of respondents while male were found to be 87(42%). In this study female participants were many compared to male given that in Rwanda female people are many compared to male (Nyamasheke district development plan 2013-2018).

#### 4. 2 Discussion of findings related to objectives of the study

This part of the study provides the results responding three objectives of the study which are subdivided into three categories namely those related to implementation of inclusive development project, empowerment of people with disability and lastly the effect of inclusive development project on empowerment of people with disability.

#### 4.2.1 Implementation of inclusive development project

The first objective of this study was to assess the implementation of inclusive development

project in Nyamasheke District.

Effective implementation of projects especially those that are designed for public interest requires to follow different procedures and being assured that everything related to it is done in accordance with the rules and in equity way.

Below table 4.5 shows the perceptions of participants in this study on different factors indicating the effective implementation of inclusive development project in Nyamasheke District.

The participants in this study were asked many questions in order to know the services they received from inclusive development project and how people with disability appreciate the services received from Handicap international.

All respondents reported that they know inclusive development project and they were beneficiaries of the project since the criteria of being the beneficiary of the project was based on being people with disability, selection of beneficiaries was done by the community from the cell level up to sector level.

The researcher assessed the intervention of inclusive development project in education activities, and socio economic activities, table 4.5 show the perception of respondents on different activities where inclusive development project intervened.

 Table 4.5:
 Implementation of ID in education activities

	Yes	No
Intervention of Inclusive Development in education activities	F (%)	F (%)
Provision of infrastructure development for students with disability	171 (82%)	37(18%)
Training of teachers in modernized technologies on inclusive	179 (86%)	29 (14%)
education		
Forming and training anti-drop out committees for students with	183 (88%)	25 (12%)
disability		
Provision of teaching/learning facilities for teachers and students	181(87%)	27(13%)
Community mobilization to right of education for children with	185(89%)	23(11%)
disability		
Mobilization of children to actively contribute to their education	183(88%)	25(12%)
Construction of schools	121(58%)	87(42%)
Provision of desks in schools	179(86%)	29(14%)
Provision of teaching/learning aid (maps, books, etc.)	196(94%)	12(6%)
Training of teachers on modern and inclusive methodologies	179(86%)	29(14%)
Training of parents and teachers association about right of people with	183(88%)	25(12%)
disability		
Average	177(85%)	31(15%)

Source: primary data

Under expected intervention of inclusive development project planned to accomplish in education services for empowering people with disability, there were provision of training of

right of people with disability, provision of schools materials and fees to people with disability and construction of schools.

179 (86%) of respondents reported that Inclusive Development Project had participated in training of teachers in modernized technologies on Inclusive education, while 29(14%) of respondents have disagreed the role of this project in training of teachers in modernized technologies on inclusive education. On other side, 185 (89%) of respondents have agreed that Inclusive Development Project has mobilized the community to right of education for children with disability while 23(11%) of them disagreed that there has been a great role of this project in mobilization of the community on right of children with disability in education.

Inclusive Development project had an objective of training parents and teachers associations about right of people with disability, 183(88%) of respondents agreed that this objective has been achieved while 25(12%) disagreed that it has been achieved.

196 (94%) of respondents reported that inclusive development project had provided teaching and learning aids like maps books, and other school materials to people with disability, 183 (88%) of participants reported that Handicap international trained parents and teachers association about right of people with disability.

Handicap International had also an objective of supporting schools construction for ensuring security and safety for people with disability, 121 (58%) of respondents reported that HI has intervene in school construction, according to the responses, this intervention was moderately implemented compared to other intervention in education area.

The researcher wanted to know why the intervention of schools construction was not highly appreciated by the respondents; he talked with one employee of Handicap International in Nyamasheke District and other 2 employees of Nyamasheke District one in charge people with disability and another one in charge of education at district level, they reported that HI did not intervene in construction of new schools, but it had intervened in construction of building facilities for facilitation of movement of people with disability in order ensure security and safety of people with disability in schools which enrolled the people with disability.

Implantation of inclusive development project was assessed in social economic activities; table 4.6 shows the perception of the respondents concerning intervention of inclusive development in socio economic activities.

**Table 4.6:** Implementation of ID in social economic activities

	Yes	No
Intervention of ID in Social economic activities	F (%)	F (%)
Modernization of agriculture and farmers linkage to relevant market	183(88%)	25(12%)
Community education and mobilization for off-farm activity	137(66%)	71(34%)
development		
Youth skills development	193(93%)	15(7%)
Contributing to agricultural harvest increment	162(78%)	46(22%)
Income generating activities	154(74%)	54(26%)
Average	167(80.2)	41(19.8%)

**Source:** primary data

The results shown in table 4.6 above indicated the areas of social economic activities interventions for inclusive development project, which were modernization of agriculture and farmers linkage to relevant market, community education and mobilization for off-farm activity development, youth skills development, contributing to agricultural harvest increment and income generating activities. The field survey showed among other things that modernization of agriculture and farmers linkage to relevant market accounted as the most evident inclusive development project intervention where 183 (88%) of respondents reported that inclusive development project had intervened and supported modernization of agriculture and farmers linkage to relevant market compared to 137 (66%) of respondents who reported that inclusive development project has intervene and supporting community education and mobilization for off-farm activity development.

Concerning youth skills development as well as learning about new projects that promotes the well-being of people with disability through income generating activities, 154 (74%) of respondents reported that HI had intervene in training about income generating activities.

Modernization of agriculture and farmers linkage to relevant market accounted as the most evident inclusive development project intervention compared to off famer because majority of people of Nyamasheke District take agriculture as the primary source of income, they have good land for growing crops and keeping animals. The general inference that is drawn from the results of implementation of inclusive development project is that, the inclusive development project intervention strategies are consistent with its mandate to address empowerment of people with disability thereby assisting inclusion of people with disability in accelerated development of rural people.

#### 4.2.2 Empowerment level of beneficiaries of inclusive development project

The second specific objective of this study was to assess the empowerment level of people with disability supported by Handicap International in Nyamasheke District. This objective was examined in twofold strategy where respondents provided information on that before inclusive development project and after inclusive development project.

**Table 4.7:** Empowerments of people with disability before inclusive development

Empowerment level before inclusive development project	Yes	No
-	F (%)	F (%)
I could attend school	54 (26%)	154 (74%)
I could get school fees	67 (32%)	141 (68%)
I was able to buy for necessities such as food and clothing	131 ( 63%)	77 (37%)
I was able to initiate personal investment plan and implement	67 (32%)	141 (68%)
I was able to pay health insurance	137 (66%)	71 (34%)
I was able to make savings in microfinance	50 (24%)	158(76%)
I could attend public event	71 (34%)	137 (66%)
I could do income generating activities	78 (23%)	160 (77%)
Average	79(38)	129(62)

Source: primary data

Table 4.7 shows the opinions of beneficiaries of inclusive development project on their socioeconomic conditions before implementation of inclusive development project. To all indicators used in this study respondents reported that they had almost critical economic conditions before the intervention of inclusive development project, where 54 (26%) of respondents reported having ability to attend school, 67 (32%) reported as being able to pay school fees, 131 (63%) of respondents reported as being able to buy for necessities such as food and clothing ability, 50 (24%) of respondents reported as having ability to make saving in microfinance, 137 (66%) of respondents reported as having ability to pay health services including health insurance, and ability to do income generating activities was reported by 78 (23%) of respondents. To this, it is to conclude that before receiving inclusive development project services, the empowerment level of beneficiaries of inclusive development was not good since the grand mean of participants, 38% reported as able to basic services for wellbeing. However table 4.8 shows what was provided on that after implementation of inclusive development project.

**Table 4.8:** Empowerments of people with disability after inclusive development

Empowerment level after inclusive development project	Yes No	
	F (%)	F (%)
I can attend school	171(82%)	37(18%)
I can get school fees	166(80%)	42(20%)
I am able to buy for necessities such as food and clothing	193(93%)	15(7%)
I am able to initiate personal investment plan and implement	154 (74%)	54(26%)
I am able to pay health insurance	200(96%)	8 (4%)
I am able to make savings in microfinance	139 (67%)	69 (33%)
I can attend public event	162 (78%)	46 (22%)
I can do income generating activities	152 (73%)	56 (27%)
Average	167 (80.4%)	41(19.6%)

Source: primary data

According to table 4 .8, after implementation of inclusive development project, there are changes where to the same indicators used to assess the level of empowerment before implementation of inclusive development project, there is clear advancement.

171 (82%) of respondents reported as being able to attend school, 166 (80%) reported as being able to get school fees, 193(93%) of respondents reported as being able to buy for necessities such as food and clothing, ability to make saving in microfinance was perceived by139 (67%) of respondents, ability to pay health care services with health insurance was reported by 200 (96%) of respondents. Ability to do income generating activities was reported by 152 (73%) of respondents.

In conclusion, after implementation of inclusive development project in Nyamasheke district, there have been changes in terms of empowerment of beneficiaries of inclusive development project and this was confirmed by cross tabulation between implementation of inclusive development project and empowerment of people with disability.

## 4.2.3 Relationship between implementation of inclusive development project and empowerment of beneficiaries

Comparison of empowerment of people with disability before and after the implementation of the project was done by comparing the living condition of people with disability before and after they benefit services from handicap international, this was done by assessing their living condition where the participants were asked if they can attend school, able to buy for necessities such as food and clothing, able to pay health insurance, able to make saving in microfinance, and able to do income generating activities, based on the responses provided it is clear that before the implementation of the inclusive development project the level of empowerment was low compared to the level of empowerment after the implementation of IDP.

Table 4.9: Empowerments of people with disability before and after implementation of ID

F	Before th	Before the project		After the project	
Empowerment level before inclusive development - project	Yes	No	Yes	No	
and after the project	F (%)	F (%)	F (%)	F (%)	
I can attend school	54	154	171	37	
	(26%)	(74%)	(82%)	(18%)	
I can get school fees	67	141	166	42	
	(32%)	(68%)	(80%)	(20%)	
I am able to buy for necessities such as food and clothing	131	77	193	15	
	(63%)	(37%)	(93%)	7%	
I am able to initiate personal investment plan and implement	67	141	154	54	
	(32%)	(68%)	(74%)	(26%)	
I am able to pay health insurance	137	71	200	8	
	(66%)	(34%)	(96%)	(4%)	
I am able to make savings in microfinance	50	158	139	69	
	(24%)	(76%)	(67%)	(33%)	
I can attend public event	71	137	162	46	
	(34%)	(66%)	(78%)	(22%)	
I can do income generating activities	78	130	152	56	
	(23%)	(77%)	(73%)	(27%)	
	79	129	167	41	
Average	(38%)	(62%)	80.4%	19.6%	

Source: primary data

From the table 4.9, it is clear that the living condition of people with disability have improved after the implementation of inclusive development project where an increase of 56% of people with disability of being able to attend schools was established, an increase of 30% of people with disability to be able to buy necessity for life such food and clothing was reached.

By comparing the living condition of people with disability before and after the implementation

of inclusive development project in terms of saving there is an increase of 43% of people with disability able to make savings in microfinance this can be attributed to the implementation of inclusive development project.

Overall of indicator of empowerment of people with disability, there is an increase of 42.4% (80.4% - 38%) of people with disability able to attend and get school fees, able to get foods and clothing, able to do income generating activities and able to make saving in microfinance.

## 4.2.3.1 Cross-tabulation analysis between implementation of inclusive development project and empowerment of people with disability

**Table 4.10:** Cross tabulation between implementation of ID and empowerment of people with disability

Empowerment of people with disability	Implementation of Inclusive development Chi- Project		Chi-square	
	Yes	No	Total	P value
Yes	177	16	193	0.001
No	6	9	15	
Total	183	25	208	

**Source**: SPSS Results

The relationship between implementation of inclusive development project and empowerment of people with disability was done by using cross-tabulation forms and chi-square test to confirm whether found relationship is statistically significant or not. From the table 4.10, among 193 participants who reported that inclusive development project has brought modernization of agriculture and farmers linkage to relevant market in Nyamasheke district, 92% (177/193) reported that they are able to buy necessity such as food and clothing compared to 8%(16/193) participants who reported that they are not able to buy necessity for life such food and clothing. This show that the majority of beneficiaries of inclusive development project can satisfy their basic needs due to the services received from the implementation of inclusive development project where they are able cultivate plants and breeding animals needed at market in

Nyamasheke District.

By using chi-square test analysis it was found that there was statistical association between implementation of inclusive development project and empowerment of people with disability because P- value found of 0.001 is less than the level of significance (0.05).

This finding is consistent with the finding of study done assessing the implementation of the project of China Disabled People's Federation (CDPF) in Heilongjiang province of Chine, that project of CDPF helped to increase the number of people with disabilities who were trained from 2,357 persons in 1996 to 20,405 in 2000. 87% of the 80,600 persons with disabilities trained by the program rose out of poverty while some 9% became relatively rich, the project also demonstrated that the enforcement of government policies and legislation can improve the economic conditions of people with disabilities in rural areas by increasing access to mainstream training courses, and by diversifying training programs so that they are responsive to the unique opportunities of a geographic area, i.e. natural resources and market opportunities (ILO, 2011).

RECOMMENDATIONS

5.0 Introduction

This chapter presents the summary of the research findings and forwards the recommendations,

it shows also how inclusive development project was implemented in Nyamasheke District, the

level of empowerment of people with disability supported by HI before implementation of

inclusive development project and after its implementation; the effect of inclusive development

project on empowerment of people with disability were established.

**5.1 Summary of Findings** 

The inclusive development project has done good things on well-being of people with

disability supported by HI in Nyamasheke District because by comparing the living condition

of people with disability before implementation inclusive development and after its implantation

, it has been found that after the implementation of the project people with disability can access

education services, income generating activities, health services, behavior change by increasing

their full participation in public activities, opportunities which were not possible for people with

disability before implantation of inclusive development project.

5.1.1 Implementation of inclusive development in Nyamasheke District

The findings indicate that the criteria of being the beneficiary of the project was based on being

people with disability, selection of beneficiaries was done by the community from the cell level

up to sector level.

48

The implementation of inclusive development project was implemented in two domain namely education activities and social economic activities, under expected intervention of inclusive development project planned to accomplish in education services for empowering people with disability, there were provision of training of right of people with disability, provision of schools materials and fees to people with disability and construction of schools.

196 (94%) the respondents reported that inclusive development project had provided teaching and learning aids like maps books, and other school materials to people with disability, 183 (88%) of participants reported that Handicap international trained parents and teachers association about right of people with disability.

In the area of social economic activities, which were modernization of agriculture and farmers' linkage to relevant market, community education and mobilization for off-farm activity development, youth skills development, contributing to agricultural harvest increment and income generating activities. The findings showed among other things that modernization of agriculture and farmers linkage to relevant market accounted as the most evident inclusive development project intervention where 183 (88%) of respondents reported that inclusive development project had intervened and supported modernization of agriculture and farmers linkage to relevant market compared to 137(66%) of respondents who reported that inclusive development project has intervene and supporting community education and mobilization for off-farm activity development.

#### 5.1.2 Level of empowerment of people with disability in Nyamasheke District

To this objective, it was revealed that there is difference between empowerment level before and after inclusive development project where before the implementation of inclusive development project, respondents reported that they had almost critical economic conditions before the

intervention of inclusive development project, where 54 (26%) of respondents reported having ability to attend school, 67 (32%) reported as being able to pay school fees, 131 (63%) of respondents reported as being able to buy for necessities such as food and clothing ability, 50 (24%) of respondents reported as having ability to make saving in microfinance, 137 (66%) of respondents reported as having ability to pay health services including health insurance but after the implementation of inclusive development project there is an increase in living condition of people with disability where 171 (82%) of respondents reported as being able to attend school, 166 (80%) reported as being able to get school fees, 193 (93%) of respondents reported as being able to buy for necessities such as food and clothing, ability to make saving in microfinance was perceived by139 (67%) of respondents, ability to pay health care services with health insurance was reported by 200 (96%) of respondents.

# 5.1.3 Relationship between implementation of inclusive development project and empowerment of people with disability

To this objective it was found that there is a positive relationship between the level by which inclusive development project was implemented and empowerment of beneficiaries since among 193 participants who reported that inclusive development project has brought modernization of agriculture and farmers linkage to relevant market in Nyamasheke District, 92% (177/193) reported that they are able to buy necessity such as food and clothing compared to 8%(16/193) participants who reported that they are not able to buy necessity for life such food and clothing and by using chi-square test analysis it was found that there was statistical association between implementation of inclusive development project and empowerment of people with disability because P- value found of 0.001 is less than the level of significance (0.05).

#### **5.2 Conclusions**

The findings indicate that the criteria of being the beneficiary of inclusive development project was based on being people with disability, selection of beneficiaries was done by the community from the cell level up to sector level, the implementation of inclusive development project was implemented in two domain namely education activities and social economic activities, and participants reported that inclusive development project was well implemented.

It was revealed that there is difference between empowerment level before and after inclusive development project where before the implementation of inclusive development project, respondents reported that they had almost critical economic conditions before the intervention of inclusive development project. The living condition of people with disability have improved after the implementation of inclusive development project where an increase of 56% of people with disability of being able to attend schools was established, an increase of 30% of people with disability to be able to buy necessity for life such food and clothing was reached. By comparing the living condition of people with disability before and after the implementation of inclusive development project in terms of saving there is an increase of 43% of people with disability able to make savings in microfinance this can be attributed to the implementation of inclusive development project.

#### **5.3 Recommendations**

#### 5.3.1 To Government of Rwanda

The Government should continue to work with International NGOs like Handicap International and monitor their interventions' sustainability basing on its socio-economic development strategic development direction; The Government should keep encouraging INGOs to promote community based income generating activities.

#### 5.3.2 To Nyamasheke District and Local Community in general

It is recommended to the authorities of Nyamasheke District to do the follow up of living condition of people with disability because currently people with disability in Nyamasheke District are not receiving services from inclusive development project, because it was ended. People with disability need refresh training about doing business (off farm activities) because it was established that majority of people with disability were interested in doing modern agriculture than doing small business, there is a need to change mind set of people with disability not be more engaged in agriculture and farming only, they can do business and studying technical vocation schools.

#### **5.3.3** To Handicap International

During data collection, it was established that some people with disability did not reimburse the loan received from inclusive development project and it is known that loans are a financial product and most providers charge a commercial interest rate for their service. Even when the goal of an organization may be to reach people with disabilities, and not to achieve financial sustainability, a loan provider should charge interest rates both to support its operations and also

to help the borrowers understand that loans must be repaid and that there is a price for the service. This can help the sustainability of the cooperative of people with disability.

It is recommended to Handicap International to provide technical vocation schools to people with disability in order to help them to be engaged in other business not only for agriculture.

#### **5.3.4** To Disabled people

In partnership with local leaders at grass root level, disabled people should work together with inclusive development projects and benefit for the provided trainings for self resilient.

#### **5.4 Suggestions for Further Studies**

The further study should be carried out in the following areas;

The study should be carried out on the implementation of government intervention project and empowerment of people with disability.

#### REFERENCES

- Adam, J. (1992) Foreign Policy in Transition. (Chapel Hill, North Caroline: University of North Caroline Press
- Alexander, R(1990), Financiamiento ExternoDeuda y Transformacion Productiva.

  SanSalvador, El Salvador:
- Attack l. (1999), Four Criteria of Non Governmental Organization Development, Legitimacy,
  World Development.
- BENJAMIN F. (2014), Non Government Organizations and Inclusive Development
- CAMPBELL J.(1996) Disability politics: understanding our past, changing our future. London: Routledge
- Clever (2001), Institutions, Agency and the Limitation of participatory approaches to Development, London, Oxford University.
- Combaz, E. (2014). *Donor action on women's employment*, Birmingham, UK: GSDRC, Birmingham.
- Combaz, E. & Mcloughlin, C. (2014). *Voice, empowerment and accountability*: Topic guide.

  Birmingham, UK: GSDRC, University of Birmingham.
- Cook, S. (2006). Structural Change, Growth and Poverty Reduction in Asia: Pathways to Inclusive Development. Development Policy Review 24 Development,
- Cronbach (1946), Alpha Mesurement of Internal Concistency, London
- DFID (2000), To promote sustainable Development and eliminate World Poverty, UK

  Dorothea B (2006), All the Single Ladies and All Summer Long made the New York, USA

- Filmer D (2008) *Disability, poverty, and schooling in developing countries*: results from 14 household surveys. The World Bank Economic Review.
- Foster-Carter, A.( 1967). "Neo-Marxist Approaches to Development and Underdevelopment".

  Journal of Contemporary Asia
- Frank, G. (1967) Capitalism and Underdevelopment in Latin America. (New York: Monthly Review,
- Gassmann, F (2001), Building the economic case for investments in social protection in Uganda, kampala, Uganda.
- Goldfrank, W.(1986). The World-System of Capitalism: Beverly Hills, California
- Habermas, G. (1992), Theory of Social Communication. New York: MacMillan.
- Haider, H. (2009). Community-based approaches to peace building in conflict-affected and fragile contexts. Birmingham, UK: GSDRC, University of Birmingham.
- Handicap International (2016), Socio, economic Inclusion and Citizen's participation, Kigali
  Hans, K (2005). The Imperative of Responsibility, (2<sup>nd</sup> Ed.). USA, University of Chicago Press
  Institute of National statistics of Rwanda (2012), the General index for the Second quarter 2012,
  Kigali, Rwanda
- JICA, (2003). Capacity Development and JICA's activities Layered capacity development.

  Higashi: International Development center of Japan
- Jimi O. Adesina, (2007), Social Policy and the Quest for Inclusive Development, Research Findings from Sub-Saharan Africa, Grahamstown, South Africa.
- Kaiser Family Foundation (2003) Understanding the health-care needs and experiences of people with disabilities

- Kaplan, B.(1993) Social Change in the Capitalist World. Beverly Hills, California: SAGE.
- Killing, J. (1984) *The Quest for Economic Stabilization*: The IMF and the Third World.

  London: Overseas Development Institute.
- Levy, M. (1967) Social Patterns and Problems of Modernization. Englewood Cliffs, Jersey
- Lopez, J. (1990) Deuda Externa, Politicas de Estabilizacion y AjusteEstructural en Centroamerica y Panama. San Jose, Costa Rica: CSUCA.
- Nath, B. (1990) The Sociology and Politics of Development: A Theoretical Study. London Mereten, S (2009), Inclusive growth through social protection in maternal health programs in Kenya. Nairobi, Kenya.
- Ministry of Local Government (2013), Local Democracy and Local Governance: Benchmarking Rwanda against the Aberdeen principles, Kigali, Author
- Ministry of Local Government (2013), National Strategy for Community Development and Local Economic Development, Kigali. Author
- National Institute of statistics of Rwanda [NISR] (2010), Demographic Survey, Kigali,
- National Institute of statistics of Rwanda [NISR] (2012), *The Third Integrated Household Living Condition Survey* [EICV3] 2010, Kigali, Author
- National Institute of statistics of Rwanda [NISR] (2012), *The Third Integrated Household Living Condition Survey* [EICV3] Thematic Report: Economic Activities, Kigali,
- Nikkah H.A and Redzuan (2010), *The Role of NGOs in promoting Empowerment for*Sustainable Community Development, Malaysia, University of Putra.
- Oliver M(1996), Understanding disability: from theory to practice. Basingstoke: Macmillan; The social model in context; pp.
- Oliver, M, (1998), Theories of disability in health practices and research, US, National Library

#### of Medicine, National Institute of Health

Organization for Economic Co-operation and Development, (2010) Sickness, disability and work: breaking the barriers. A synthesis of findings across OECD. Paris,

Penguin, (1998). Dictionary of International Relations; Swiss United Nations children's Fund

Perez, J.(1993) Globalizacion y FuerzaLaboral en Centroamerica. (San Jose, Costa Rica)

Pieterse J.N (2001), Trends in Development theory; Meaning of Development Overtime,

Intersectoral Cooperation, London.

Poccharel, (2000). Economic Impact of Tertiary Education of Human Capital Development in Nigeria, department of Economics University of Ibadan, Ibadan

Streeten P (1997), Non Government Organizations and Development, USA.

Stirton, F.(1994). *Inside the Volcano*: The History and Political Economy of Central America.

Sutherland A. (1981) Disabled we stand. London: Souvenir Press;

Tipps, D. (1976) Modernization Theory and the Comparative Study of Societies: New York:

United Nations Development Program (2012): Annual Report. Rwanda, Kigali

Weber, M. (1988) The Protestant Ethic and the Spirit of Capitalism. New York: Scribner.

Watson N (1995), Health promotion and physically disabled people: implications of the national health policy. Critical Public Health,

WHO (2011) world report on disability, Geneva

WHO (2009), world health Survey. Geneva, (<a href="http://www.who.int/healthinfo/survey/en/">http://www.who.int/healthinfo/survey/en/</a> World Bank (2013), *Poverty reduction in Africa*. London: New Town Square.

## **APPENDICES**

## APPENDICE A: AUTHORIZATION TO CONDUCT RESEARCH FROM MOUNT KENYA UNIVERSITY



## (MKUR) INSTITUTE OF POST GRADUATE STUDIES & RESEARCH

27th April, 2017

#### TO WHOM IT MAY CONCERN

Dear Sir/Madam,

#### MR. NIYITEGEKA JEROME- MPAM/2014/79266

This is to confirm that the above named person is a bona fide student of Mount Kenya University Rwanda. He is currently carrying out research work to enable him complete his Master in Public Administration and Management (Community Development and NGO Management Option) degree program. The title of his research is:

## INCLUSIVE DEVELOPMENT PROJECT AND EMPOWERMENT OF PEOPLE WITH DISABILITY IN RWANDA

## A CASE STUDY PEOPLE WITH DISABILITY SUPPORTED BY HANDICAP INTERNATIONAL IN NYAMASHEKE DISTRICT

The information received will be confidential and for academic purpose only.

Any assistance accorded him to complete this study will be highly appreciated.

Thank you.

David Nyambane, PhD

Ag. DIRECTOR INSTITUTE OF POST GRADUATE STUDIES & RESEARCH

OR INSTITUTE OF POST GRADUATI

5826 Kigali-Ry

## APPENDIX B: AUTHORIZATION TO CONDUCT RESEARCH FROM NYAMASHEKE DISTRICT

REPUBLIC OF RWANDA

Nyamasheke, May 17, 2017 N°....\$\frac{1}{2}...\darksquare{1}...\darksquare{1}/2017



WESTERN PROVINCE NYAMASHEKE DISTRICT Tél.:0788405539/0788479930

Email: nyamashekedistrict@minaloc.gov.rw

nyamashekedistrict@yahoo.fr

Website: www.nyamasheke.gov.rw

**B.P:72 NYAMASHEKE** 

NIYITEGEKA Jerome Tel: 0788640274

**Mount Kenya University** 

Dear Sir,

RE: Authorization to conduct a Research Study in Nyamasheke District.

With reference to your letter of May 16, 2017 requesting an authorization to conduct a research study to enable you complete your Master in Public Administration and Management (Community Development and NGO Management Option) in 3 Sectors of Nyamasheke District. Namely Kagano, Kanjongo, and Ruharambuga on Inclusive Development Project and Empowernment of People with Disability in Rwanda. A case study of People with Disability Supported by Handicap International in Nyamasheke District.

We have the pleasure to inform you that the authorization has been granted to you, with conditions that you share with the District Social Development Unit the findings of your research and the recommendations, and make sure that the information you will receive from our District shall be used for academic purpose only.

Yours Sincerely

KAMALI Aime Fabien The Mayor of the District

<u>Cc</u>:

-Vice Mayors.

- -District Executive Secretary.
- -District Corporate Services Division Manager.
- -Director of Education
- -Director of Social Development Unit.
- -Executive Secretary of Sector (Kagano, Kanjongo, Ruharambuga)
- -JADF Officer

**NYAMASHEKE** 

# APPENDIX C: QUESTIONNAIRE FOR BENEFICIARIES OF INCLUSIVE DEVELOPMENT PROJECT

Dear Respondent,
I am a graduate student of Mount Kenya University carrying out research on 'inclusive
development project and empowerment of people with disability as a partial fulfillment for
the requirement of an award of Master degree in Public Administration and Management.
Please extend your assistance to this study by answering the following questions according to your personal observation and feelings. The information you give will be treated confidentially and used only for the purpose of this study.
Your cooperation is highly appreciated.
Niyitegeka Jerome
Do you accept to participate? Yes No
Part I: Socio Demographic Characteristic of Respondents
1. Age group of respondents
a) less than 15 years
b) 16-20years
c) 21-26 years
d) 27-31 years
e) Above 32 years
2. Gender of respondents
a) Male

b)	Female	
3. Edu	cational level of respondent	S
a)N	No education level	
b)	Primary level	
c)	Secondary level	
d)	High learning level	
4. Occ	upation of the respondents	
a)	Farming	
b)	Local artisan	
c)	Small business owner	
d)	Students	
e)	No occupation	
Part 2:	Implementation of inclusive	development project
1. Wha	t are the main developments N	GOs operating in your area?
a) . Hai	ndicap International	
b	). Strive Foundation	
1	b). World Vision	
	c). Others, specify	
2. For h	now many years have you hear	d about Handicap International? Nyamasheke intervention
	I do not know the inclusive de Less than one year	velopment project of Handicap international

c) Between 2 years and 3 years
d) Above three years
3. Education is a foundation of development. Does Handicap International, Local Inclusive development
intervenes in educational activities? Yes No
If yes, the below services were provided by Handicap International
1. Provision of infrastructure development for students with disability
2. Training of teachers in modernized technologies on inclusive education
3. Forming and training anti-drop out committees for students with disability
4. Provision of teaching/learning facilities for teachers and students
5. Community mobilization to right of education for children with disability
6. Mobilization of children to actively contribute to their education
7. Others, specify,
4a.Did Handicap International/ Local Inclusive Development contribute to sustainable children performance in schools? Yes/ No
Development program
Development program
a). Construction of schools
b). Provision of desks in schools
c). Provision of teaching/learning aid (maps, books, etc.)
d). Training of teachers on modern and inclusive methodologies.
e). Training of parents and teachers association about right of people with disability
f). other educational development activities. Explain,
5. Does Handicap International intervene in your area's socio-economic development?
No Yes
If your answer is yes, the following services have been provided by Handicap International
1. Capacity building

2. Community involvement in development program planning
3. Community involvement in need assessment
4. Study tours
5. Providing start up kits for trained groups in skills development
6. Community mobilization and facilitation for off-farm activities
7. Others, specify
Part 3: Empowerment of People with disability
A . Empowerment of People with disability before the implementation of the project
Show your views concerning the questions below before you receive any services from HI
a. I was able to send my children to school early
b. I could be able to provide for necessities such as food and clothing to my family
c. I was able to initiate personal investment plan and implement it for the family
d. I was able to pay health insurance for my family
e. My family was able to make savings in microfinance
B . Empowerment of people with disability after the implementation of HI project
1. Handicap International, LID has started to operate in Nyamasheke District since 2012, it has
assisted, initiated and promote various development and socio-economic activities.
a. What do you think it has achieved with the community: Yes: 1 No:2
1.Modernization of agriculture and farmers linkage to relevant
Market
2. Community education and mobilization for off-farm activity
development
3. Youth skills development
4. Contributing to agricultural harvest increment

5.Oth	ers/Specify
2	. How do you appreciate the role of Handicap International Non Government Organization in
In	clusive Development? or How is the Project helping you in socio-economic development?( tick
or	le)
f.	I am able to send my children to school early
g.	I can be able to provide for necessities such as food and clothing to my family
h.	I am able to initiate personal investment plan and implement it for the family
i.	I am able to pay health insurance for my family
j.	My family is able to make savings in microfinance

# APPENDIX D: TRANSLATED QUESTIONNAIRE (IBIBAZO BIJYANYE N'UBUSHAKASHATSI)

#### Ibibazo bigenewe abagenerwabikorwa ba gahunda y'iterambere ridaheza

Ibibibazobigeneweabagenerwabikorwabagahunday'Iterambereridahezaishyirwa mu bikorwa n'Umuryango Handicap International mu karerekaNyamasheke.

n'Umuryango Handicap Internation	nal mu kar	rerekaNyamashel	ĸe.	
Uyumudugudu, akagari, ishuriniha	mwe mu			
hatoranyijwen'umushakashatsikuha	akoreraub	ushakashatsibufit	teintegoyokume	enyaUruharerw'Imir
yangoitabogamiyekuriLetaby'umw	ihariko H	andicap Internation	onal mu	
gutezaimbereimiberehomyizay'aba	turagebin	yuzemurigahunda	ay'Iterambereri	daheza.Gusubizaniu
bushakekanditurabizezakoamakuru	muduhaaz	zakoreshwagusa 1	mubushakashats	si.
Uremeragusubiza ?	Yego		Oya	
<u>AMABWIRIZA</u>				
Gutangaamakurukuriububushakash	atsiniubus	shake		
Subizaigisubizonyakuricyij	yanyeniby	owemerauvivura	ahajyanyenigis	ubizocyawe.
IGICE CYA I: Amakurukubasul	biza			
1. Igitsina				
1 Gabo 2 Gore				

#### 2. Imyaka

1	Munsiy'imyaka 20
2	Hagatiya 20 na 30
3	Hagatiya 30 na 40
4	Hejuruy'imyaka 40

#### 3. Irangamimerere

1	Sinigezenshaka	
2	Narashatsemuburyobwemewen'amategeko	
3	Mbananumugabotutasezeranye	
4	Natandukanyen'umugabo	
5	UmugabowangeyitabyeImana	

### 4. Amashurinarangije

1	Sinigezeniga	
3	Narangijeamashuriabanza	
4	Narangijeicyicirorusange	
	Narangijeayimyuga	
2	Narangijeicyicirocyamberecyakaminuza	
3	Narangijeicyicirocyakabiricyakaminuza	
4	Narangijeicyicirocyagatatucyakaminuza	

5.	Ibijyanyen'akazi	
	a) Ntakazimfite	
	b) Ndiumuhinzi	
	c) Ndiumworozi	
	d) Ndiumudozi	
	e) Umubaji	
	f) Umwubatsi	
	g) Rwiyemezamir	imo 🗀
	h) Ivindimirimov	Mige

### IGICE CYA KABIRI :Ishyirwamubikorwary'umushingaudaheza

1. Ni iyihemiryangoitabogamiyekuriLetaikoreramuri aka gacemutuyemo?
a). Handicap International
b). Strive Foundation
c). World Vision
d). Indi, yandike
International/Gahunday'Iterambereridahezaikoreramuri aka karere?
a) Mu nsiy'umwaka
b) Hagatiy'umwakaumwen'ibiri
d) Hejuriy'imyakaibiri
3. Ubureziniishingirory'iterambere, Handicap International
murigahundayayoy'Iterambereridahezayabaifasha mu iteramberery'uburezi mu buryobukurikira?
a) Guhuguraabarimuk'uburyobushyabwogutangauburezibudaheza
b) Kubakaibikorwaremezobyimakazauburezibudaheza
c) Guhugurakomitezokurwanyaumucowokuva mu ishuri
d) Gutangaibikoreshobyifashishwa mu burezibudaheza
e) Gukanguriraabaturagekwitak'uburezibw'abana
f) Gukanguriraabanakugirauruhare mu burezibwabo

g) Ibindi, bivuge		
4. Handicap International/Iterambereridahezaigirauruhare mu mitsindirey'abanyeshuri?		
Yego oya		
1 .Nibaariyego, sobanuraukobikorwa		
5. Handicap International		
yabayaragizeuruharemumirimoitezaimbereimiberehomyizay'abaturgeikorerwahanomutuye?		
a) UbuhinzibwaKijyambere		
b) Ubucuruzibuciriritse		
c) Gukoranan'ibigoby'imarin'amakoperative		
d) Ubukorikori		
e) Ubwikorezi		
e) Ibindi, bisobanure		
6. Handicap International yabayaragizeuruharemunmirimoy'iteramberemukoraikurikira		
1. Kongereraubushoboziabaturage		
2. Gufashaabaturagegukoraigenamigambi		
3. Gufashaabaturagegusesenguraibibazobyabo		
4. Kubakoreraingendoshuri		

5	5. Guhaibikoreshoby'ibanzeabamazeguhugurwa
6 7	5. Gukanguriraabaturagekwitabiraindimirimoidashingiyek'ubuhinzi  7. Ibindi, bisobanure
Igicec	yagatatu :Iteramberery'abantubabanan'ubumuga
1.	Handicap International/Iterambereridahezayatangiyegukorera mu karerekaNyamasheke mu mwakawa 2012, yagizeuruharemubikorwabitezaimbereimiberehomyizay'abaturage
uteker	ezakoyafashijeabaturagekugerahomuriibibikurikira?
	Yego Oya
a)	Gutezaimbereubuhinzi no guhingaibikenewekuisoko
b)	Gukanguriraabaturagegukoraimirimoidashingiyek'ubuhinzigusa
c)	Kubyazaumusaruroimpanoz'urubyiruko
d)	Kugirauruhare mu kugezaabahiinzi ho inyongeramusaruro
e)	Ibindi, bisobanure,
2.	Ubonaguteuruharerwa Handicap International mu
	gutezaimbereIterambereridahezahanomutuye? Nibahariicyoyagufashijekugeraho,
	watangaingero?
	1. Ubu nshobora kujyana abana banjye mu ishuri
	2. Nfite ubushobozi bwo kubagaburira no kubambika
	3. Ubu nshobora gutegura umushinga uciriritse mu
	rwegorwogutezaimbereumuryangowanjye
	4. Nshoborakuvuzaumuryangowanjye

Murakozecyanek'ubw'umwanyawanyumwaduhaye