

Disability Mobility in the Church:

A Qualitative Study of Accessibility Promotion in the Presbyterian Church of Ghana, Accra Trinity Congregation

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Abstract

The research was set to explore the experiences of Persons with Disabilities (PWDs) in the Presbyterian Church of Ghana. Specifically, the study highlighted the doctrinal, structural, institutional, transport, financial and regulatory impairments encountered by PWDs in their quest to be fully involved in the worship activities of the Church. The objective is to explore accessibility to PWDs in the Christian religious organization.

Using the qualitative research method, four persons with disabilities, comprising participants with varying education and economic backgrounds, and three leaders of the Presbyterian Church in the Ga Ministry were selected to participate in the research. In-depth interviews were used to collect data, and the Braun and Clarke's (2006) thematic analysis was then employed for data analysis. Only PWDs who are domiciled in the Accra metropolis and have worship services with the Presbyterian Church of Ghana were selected to be part of this research.

The result of the study indicates that PWDs in the Ga Presbytery find it difficult navigating church facilities in the due to the unfriendly nature of the architectural designs of pavements and the location of consultation rooms and other church offices on storey buildings. It was also revealed that transportation glitches have significantly accounted for the reluctance of PWDs in the district to go to the Church. Finally, discrimination against PWDs is pervasive in the Church, often dissuading victims from going back to the hospital. This was evident in the exclusion of PWDs from decision-making processes and leadership positions, and the content of sermons preached by pastors in the Church. However, having recognized the problem, the Presbyterian Church has developed a Policy on Disability to protect the welfare of PWDs in the Church.

Based on the findings mentioned above, the research recommends more stringent monitoring of church facilities to ensure that they comply with the provisions of the Disability Act 2006 (Act 715). Owners of religious organizations must ensure that their employees are compliant with all regulations of the Disability Act and the innate worth and dignity of PWDs duly respected. Most importantly, the government of Ghana must endeavour to educate the public on the provisions of the Disability Act across all institutions, particularly in the religious sector, to prevent the inhumane treatments meted out to PWDs by congregants.

Keywords: Disability, Disability Act, Church, Inclusion, Institutional barriers, Structural barriers, Physical barriers.

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Dedication

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List of Abbreviations

CRPD Convention on the Rights of Persons with Disabilities

EP Evangelical Presbyterian Church

GA General Assembly

GSS Ghana Statistical Service

PWD Persons with Disability

SDG Sustainable Development Goals

UD Universal Design

UDHR United Nations adopted the Universal Declaration of Human Rights

UNCRPD United Nation Conventions on the Rights of Persons with Disabilities 2006

WHO World Health Organization

WCC World Council of Churches

UN United Nation

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Chapter One: Introduction

1.1 Background

The General Assembly (GA) of the United Nations adopted the Universal Declaration of Human Rights (UDHR, 1948; Steinborn, & Nusbaum, 2019) to protect the fundamental rights of all humans to life, liberty and security in society; and to promote the civil and moral liberties of minority groups, particularly, Persons with Disabilities (PWDs). Although the UDHR is widely renowned for instituting the core standards of fairness towards all (Steinborn, & Nusbaum, 2019), it theorized disability as an ailment, instead of the person's status in society, or a condition of systems and structures of interaction between individuals and societies. As such, the 2030 Agenda for Sustainable Development (SDG) was initiated to provide a more inclusive guideline to local communities, signatory countries and the international community toward the adoption of a more comprehensive and inclusive definition for disability. The purpose was to ignite improvements in the human wellbeing of PWDs and initiate a global approach to eliminate all forms of discriminations and abuse against PWDs (Opoku, Swabey, Pullen, & Dowden, 2019; Wilbur, Gosling, & Jones, 2018). In addition to edging member nations to consider disability as a cross-culture phenomenon, requiring broad-based participation of all stakeholders to implement programmes and rules that inure benefit to PWDS, it explicitly proposed goals and key indicators for enhancing the wellbeing of PWDS. The programme covered access to education and employment, construction of school infrastructures that are sensitive to students with disabilities, inclusion and empowerment programmes targeting persons with disabilities, accessible transport, accessible public and green spaces, and building capacity of countries to disaggregate disability data to safeguard the rights of PWDs (Smith, Richard, Siguake, & charity 'Sheffield futures', 2019).

Consistent with these international regulations, several legal instruments and civic society programmes were passed to protect and empower persons with disabilities in Ghana. In addition to legal protections like the Disability Acts 2006 (Act 715) and the Chapter Five of the 1992 Republican constitution of Ghana, civil society activities, comprising the Ghana Federation of the Disabled (GFA), the Ghana Society for the Physically Disabled, and faith-based organizations have adopted significant initiatives to help PWDs in Ghana (Ocran, 2019; Kinnman, 2019).

Despite the major strides chocked with these local initiatives, the United Nations Flagship Report on Disability (2018) indicated that in developing countries, including Ghana, PWDs

face various obstacles preventing them from complete inclusion in societal activities. It pointed out that whiles many PWDs continue to live in abject poverty, unable to secure gainful employment and educational opportunities, in developing countries like Ghana where public spaces, including government structures and church buildings, do not support the mobility of PWDs, the provision of the SGD goal 10 and 11 which advocates for the removal of barriers to inclusion, discrimination and stigma on the ground of disability, and lack of accessibility to physical and virtual environments are highly undermined, and the fundamental rights of PWDs to movement, association and worship significantly encroached (Opoku, Swabey, Pullen, & Dowden, 2019; Wilbur, Gosling, & Jones, 2018).

Consequently, as one of its cardinal doctrines to support the disadvantaged in society by preaching unifying sermons that show positive regards towards minority groups and facilitating the inclusion of PWDs through literacy and infrastructural initiatives, this research seeks to examine the issue of accessibility in the Presbyterian Church of Ghana, with the view to investigate the religious leaders' understanding of disabilities, infrastructural provisions available to support PWDs, inclusion in decision-making processes and other religious initiatives to empower PWDs, among others.

1.2 Research Question

How does the Presbyterian Church of Ghana, Accra Trinity Congregation, promote accessibility of persons with mobility disabilities to public and religious spaces?

1.3 Inspiration

Having fellowshipped with the Presbyterian Church of Ghana all my life, learned and understood the doctrine of the Church, I have developed the interest in knowing the reasons supporting the way minority groups in the Church are treated. Due to my close association with the leadership of the Church, particularly through my involvement in youth programmes, I have had the sole privilege of speaking to the pastoral caucus of the Church, learning the role they play in the every-day lives of those who attended the Church, and in particular, in the lives members who have special needs. It is based on these conversations that I developed a special interest in the research topic, to document succinctly, the moral and ethical duties of the Church towards persons with disabilities and how such responsibilities are executed.

Additionally, I have interacted with persons with disabilities who attended church services on a few occasions and stopped coming to church. When asked why they stopped coming for fellowships, the PWDs narrated the challenges they encounter when trying to navigate their way up staircases to attend church services; the discomfort they experience when carried into the church building by other worshippers; and most importantly, their inability to actively participate in certain social programmes like sports and dance, among others, discourages them from coming to church. They explained that they do not feel like they form part of the religious group. Others mentioned that most of the sermons preached during church service tend to portray disability as a state of sinfulness, or worse, the result of one's sinfulness. Such doctrines alienate them and cause them to feel unwelcome in the Church. This information is indicative of the fact that discrimination and social exclusion against persons with disabilities are quite pervasive in religious groups, including Christian associations in Ghana.

Being a student social worker with extensive volunteer experience as an intern with the Department of Social Welfare and other related associations who work with people with special needs, I decided to specialise in the field of disabilities, examining the degree to which the government of Ghana and other civil society organizations are enforcing the provisions of the Disability Act to benefit PWDs. Essentially, observations recorded during my fieldwork internship as an undergraduate Social Work Student compelled me to investigate the quality of life of persons with disabilities. Furthermore, as part of the preconditions for the award of the Bachelor of Arts degree in Social Work, I read the course "Human Rights," to gain deep insights into the nature of discriminations meted out to PWDs. After this coursework, I decided to engage in a graduate scholarship on the welfare of PWDs in Ghana. Besides, as an intern in the Department of Social Welfare, I was also involved in weekly engagements with PWDs as one of the project officers delivering monthly cash transfer services to the extremely poor and PWDs and interviewing them concerning their experiences with public and social programmes in the country. These unpublished documented experiences of deprivation and exclusion by the PWDs during this project's delivery informed my decision to investigate the inclusiveness of PWDs in the Presbyterian Church of Ghana in the present master thesis. The motive was to ascertain the extent to which leadership of the Presbyterian Church and other social groups within this religious group institute programmes and policies to empower PWDs to be fully included in all religious, business and other social activities.

On this basis, this thesis was designed, targeting the church, particularly the Presbyterian Church of Ghana, to investigate the condition of life and opportunities for inclusion and participation to Persons with disabilities. As a religious institution, I want to investigate the degree to which religious doctrines of the Presbyterian Church manifests in the architectural designs of church buildings other structures built for religious activities. Again, since all church programmes are subservient to the laws of Ghana, the research will also touch on the oversight roles played by state legal apparatus to ensure that the provisions of the Disability Act are enforced and the fundamental human rights of the disabled, as enshrined in local and international legal instruments, are safeguarded.

1.4 Scope and Limitation of the Study

Although the concept of accessibility covers a wide range of deprivations against PWDs, notably in their bid to benefit from opportunities, like education, healthcare, politics and decision-making, technology, work and employment, among others, this research primarily limits the investigation to the physical and attitudinal barriers that limit PWDs' active inclusion in religious, social and economic decision-making activities in the Church. Physical accessibility in this context describes the ability and enablement of persons with disabilities to access buildings, public spaces, and any other places a person might need to go for work, play, education, worship, business, and services, among other (Danso, Atuahene, & Agyekum, 2019). As several public spaces impair persons with disabilities from gaining access to them, per the definition provided above, this research was designed to explore the role religious setups play in the denial of accessibility to PWDs, and by extension, the rights of PWDs to worship. Attitudinal barriers, on the other hand, describe the attachment of stereotypes to disability. It may comprise the perceptions that PWDs are inferior, powerless, weak, pitiful, uneducated, beggars, bad-luck, nuisance, unredeemable, cursed, etc. Such stereotypes influence the way PWDs are perceived and treated in society (Danso, Atuahene, & Agyekum, 2019).

It is also vital to note that, since this research sought to investigate unhindered mobility of PWDs, only persons with disabilities who fall within this category will be investigated. Thus, in addition to religious leaders, persons with physical impairments (crippled) were considered for interviews. Finally, as one of the largest religious organizations that take leading roles to provide welfare services to the deprived, including the establishment of community schools, empowerment of women and girls, and support for disability-friendly agencies, this research

is concentrated on the Presbyterian Church of Ghana (Lidzén, 2008). Specifically, with modern infrastructural developments to accommodate the ever-increasing membership of the Church in the capital city of Ghana, the research selected the Accra circuit of the Church to scrutinize the accommodation of disability-friendly designs into new church buildings and consultation centres; whiles comprehensively examining principles that enlist or repel the participation of PWDs during worship and other leadership programme activities.

1.5 Review of Existing Literature

As the phenomenon of limited opportunities to persons with disability is pervasive, a plethora of literary works has emerged to explain the issue from various perspectives. However, although accessibility has been adequately explored in the context of culture and legal frameworks, religious discussions on disability, particularly among Christians in Ghana, is limited. To better interrogate the issue, the following research papers were reviewed: Chapter 14 of Woodward's (2015) book titled "The Wiley-Blackwell Companion to Practical Theology edited by Bonnie J. Miller-McLemore (ed.)," Isabel Apawo Phiri and Kim Dongsung's (2014) paper titled "Called to be a diaconal community through a pilgrimage of justice and peace," Joseph Ocran's 2019 work titled "Exposing the protected: Ghana's disability laws and the rights of disabled people," and Inger Marie Lid's article, titled, "Developing the theoretical content in Universal Design" will be reviewed in this study.

Woodward offered a human experience of disability and sought to operationalize interpretations of the Holy Bible, traditions and religious practices to correspond with the real feelings and experiences of PWDs. It uses liberational theology, feminist theology, systematic theology, practical theology and process theology to redefine the concept of disability in a way that creates a conceptual, theological and physical space for PWDs to participate fully in all social activities without any real or superficial hindrance.

Ocran's article (2019), highlights the various forms of discriminations that persons with disabilities are exposed to in Ghana: It points out ways in which existing legal frameworks are instituted to protect persons with disability against abuse and discriminations and facilitate their participation in all social economic and political activities in the country. It further explained the sociocultural and legal glitches that exist in Ghana's fight against abuse of human rights of PWDs and offered structural and institutional solutions to address the problem.

Phiri and Dongsung (2014) research deliberate on the meaning of Diakonia within the context of "service to humanity." It perceives the act of service to be a vital responsibility of powerful figures in the church to the vulnerable. According to Phiri and Dongsung (2014), albeit service is understood globally to comprise acts of benevolence and charity to minority groups, including persons with disabilities, in Christianity, the term service remains an abstract and unrealistic theological doctrine that lacks understanding and practicality. For instance, in Christians, acts of philanthropy and deep care for humanity are often replaced with the expression of love to God and Jesus Christ through witnessing and discipleships. Thus, since acts of discipleship are preached as the ultimate duty of the Christian, other equally important responsibilities, including the need to provide and care for the vulnerable is often ignored. Finally, the article advocates for justice and peace for every creation of God, irrespective of their degree of ability. It stressed the divine assignment of religious leaders to be inclusive and sensitive to the needs of all, even those who are outside the Christian community. It emphasised the need to fully apply Christ's command to "liberate the oppressed, open the eyes of the blind, heal the sick" and offering fullness of life for all creation (Luke 4:16) in dealing with persons with special needs in the church.

Finally, Lid (2013) employed the social and rational models of disability to explain the concept of Universal Design (UD). In her estimate, the UD is both a democratic and legal design that perceives all humans equal and seeks to eliminate all barriers in one's physiological, psychological and socio-economic environments. From a legal perspective, UD advocates for the enforcement of non-discriminatory programmes and policies to benefit every individual. According to the United Nation's Convention on the Rights of the Child (2008, Article 2), "UD is the design of products, environments, programmes and services to be usable by all people, to the greatest extent possible, without the need for adaptation or specialized design." And that "Universal design shall not exclude assistive devices for particular groups of persons with disabilities where this is needed." The model conceives of disability as a social construct that manifests itself in the form of oppression in people's environments. Concerned about being criticised for being fixated on environment, Lid employed the Rational Model of Disability to link the bi-directional influence of person-environment factors to disability. It emphasized on the need for a comprehensive assessment on individual-specific experiences, and the effects thereof on the livelihoods of PWDs (Lid, 2012).

These articles place the study in a religious legal and socio-cultural context. Woodward's work on practical theology, for instance, will be very useful in expounding the obligations of

worshipers and religious leaders to the vulnerable; whiles Lid's concepts of barriers in the socioeconomic, physiological and environmental will help to place the research within the domain of universal human rights. Ocran (2019) and Phiri and Dongsung (2014) will then be used to indigenize the discourse within the context of the legal and socio-cultural milieu of Ghana. Whereas the research admits the importance of philosophical arguments on human rights from the perspective of religion and law, as discussed by Lid and Woodward, this research pays more attention to the practical religion and pragmatic measure adopted by religious organizations to address challenges faced of worshipers who are PWDs in Ghana. A comprehensive analysis of all factors that impede the dignity and wellbeing of PWDs is very vital in the bid to understand the treatments meted out to them in the church. Finally, in the absence of empirical literature on PWDs within the church context, the research utilised scholarly articles that cut across geographical boundaries and provide a wide range of perspectives to establish a common point of convergence where a universal framework for inclusivity in the church can be firmly established.

1.6 Definition of Terms

Persons with Disability (PWDs):

Persons with disabilities constitute the world's most populous minority groups (Department of Economic and Social Affairs, United Nations, 2012). PWDs account for billions of people across the globe and tend to surge along with population growth (World Health Organization, 2011). The Disability Discrimination Act 1995 (Her Majesty's Government, 1995) described disability assert that a person has a disability if he/she has a physical or mental limitation which has a substantial and long-reaching effect on his ability to carry out everyday activities. According to the World Health Organization (2011) disability constitutes any restriction or lack (resulting from an impairment) of ability to accomplish an activity in the manner or within the range considered common for a human being.

Physical Barriers:

Physical barriers describe the environmental obstacles that PWDs usually encounter in their daily lives. There are different types of physical barriers in social environments. Some of these social environments include schools, hospitals, workplaces, shops and shopping malls, churches, theatres, restaurants, cinema halls, washrooms, water fountains, telephone booths and counters. Physical barriers can both be located within the Surroundings of Buildings and

at Entrances to Buildings and may take the form of inaccessible ramps, staircases, and storey buildings without elevators, among others (Chiluba, 2019).

Social Inclusion:

This describes the process by which efforts are made to deliver equal opportunities for all, irrespective of their circumstantial and experiences. The purpose is to protect human dignity and enable citizens to achieve their full potentials. The concept is a multi-faceted developmental strategy designed to create the socioeconomic and political environments that guarantee the full and active involvement of every member of the community in the civic, social, economic, and decision-making processes of communities (Amado, Stancliffe, McCarron, & McCallion, 2013).

Social Participation:

This defines the act of engaging people in social activities. It describes the ability of individuals and groups to make decisions and engage in policymaking processes. Social participation generates reciprocal reliance among individuals and sets the grounds for mutual obligations towards everyone in the community (Amado, Stancliffe, McCarron, & McCallion, 2013).

1.7 Thesis Outline

Chapter One is the introductory chapter of the paper. The section outlines the background information on disability and accessibility laws both locally and internationally and sets the tone for the study to be conducted. It also provides the research question that the paper sought to answer.

Chapter Two provides a detailed discourse on the geographic, socio-cultural, economic and religious background of Ghana. The section also established the historical and doctrinal context within which Presbyterian practices are founded.

Chapter Three explains the theoretical framework for the study. The Social Model of Disability and the Non-competitive Theological Anthropology was used to place the study in context.

Chapter Four enlightens the research design and methodology utilised for the paper. The philosophical paradigm for qualitative research, sampling, data collection, quality assurance, and ethical issues, among others, were presented in this section.

Chapter Five presents the findings of the research. Primary information collected through indepth interviews was presented to answer the research question.

Chapter Six engages in an elaborate discourse on the information presented in chapter four, using relevant scholarly articles and available data to make sense out of the data.

Chapter Seven concludes the paper by highlighting major observations and suggest recommendations for future studies and intervention programmes to promote accessibility to religious centres to PWDs.

Chapter 2: Background and Context

2.1 Chapter introduction

This chapter aims to contextualise the study within the historical and religious frameworks of the Presbyterian Church and its practices. It highlights the vision and mission and the core values of the church with the view to demonstrate how these dynamics affect the way the church treats PWDs.

2.2 Designated Research Area

The selected areas for this study are the Teshie, Nungua and La communities, located in the Ledzokuku-Krowor Municipal Assembly (LEKMA) in the Greater Accra Region of Ghana. The municipality is part of 254 Metropolitan, Municipal and District Assemblies (MMDAs) in the country, and constitute a component of the 16 MMDAs in the Greater Accra Region (GSS, 2014). LEKMA, with its Administrative capital at Nungua, was established based on the Legislative Instrument (LI 1865) on November, 1st 2007, and assumed duty on 29th February 2008 (GSS, 2014).

Geography

Although the total land area of LEKMA is 47.57510 square kilometres, Teshie, Nungua and La, the designated communities for the research, stretches 18 kilometres from the city centre. Its boundary on the south is the Gulf of Guinea. Its territory shares border to the East with the Spintex Road close to the Coca Cola junction. On its territory to the North is the Motorway to the Tetteh Quarshie Interchange and extends south along with the neighbourhoods of Ashitey Akomfra Electoral area to the Kpeshie Lagoon (LEKMA, 2017; GSS, 2014). The map of LEKMA as depicted in figure 3.1 indicates that the municipality is squeezed between the Accra Metropolitan area on the West and the Tema Metropolitan Assembly to the East.

Demography

The population of LEKMA based on records from the 2010 population and housing census stood at 227,932 people with 109,185 males (48%) and 118,747 females (52%) (Ghana Statistical Service, 2014). The sex ratio of the population is 1:1.8 males to females. Thus, the

majority of the population are females (GSS, 2014). The total household population in the district is estimated to be 221,757, comprising 60,859 households and 21,366 houses (GSS, 2014). The average size of households in the municipality is estimated to be 2.8 persons per household and the number of persons per house 10.4; thus indicating that compound houses are the most dominant type of houses (68.5%) in LEKMA (GSS, 2014).

The age distribution and the sex compositions of the municipality run parallel to that of the nationwide arrangement. It indicates a youthful population that is typical of developing countries like Ghana. The age-sex distribution is broad-based, consisting of several persons who are still very young. The ratio among higher age-groups decreases steadily in age groups consisting of a small number of people who are aged; and more females than males at advanced ages. However, the age distribution of 15-19 years for the male population is greater than the females, which could be the result of high rates of maternal mortality (GSS, 2014).

Again, within the LEKMA, a great number constituting 92% of the population in the study area belongs to the Pentecostal/charismatic religious groups, while about 7% and 3.3% belong to the Islamic and Traditional religions respectively. Christianity made up the greatest proportion of the population in the area on account of the strong presence of orthodox denominations such as the Catholics, Presbyterians, Methodists and Anglicans and Pentecostal Churches (GSS, 2014). The data for the 2010 population and housing census shows that the Ga people constituted the dominant ethnic group followed by the Ewes. Other ethnic groups that could be found in the municipality include Akans, Kasenas, Grusis, Nkonyas, Busangas and many other tribes (GSS, 2014). With a disproportionately large number of the population affiliated to Christian organizations, it is expected then, that a lot of PWDs who live in these communities will attend Christian meetings. Finally, being a multi-ethnic community, the presence of different indigenous Ghanaian ethnic groups will help to make inferences from the findings in this study to other communities outside the study area.

Economy

Most of the people living in the study area are middle-income earners while 28% constitute the high-income earners leaving 19% of the localities as low-income earners (Republic of Ghana, 2015). The municipality is fortunate to have a lot of companies, factories, industries, financial institutions, estate developers and other small scale businesses (Republic of Ghana, 2015). These institutions contribute a lot to the LEKMA's Internally Generated Funds (IGF) and employ most of the inhabitants in Teshie-Nungua. Fishing and trading are other economic

activities within the municipality since it is a coastal area, which shares a boundary with the Gulf of Guinea (Republic of Ghana, 2015). The Ledzokuku-Krowor Municipal Assembly also relies on the external sources of funds like the DACF, DDF, UDG and other GOG transfers for its developmental projects (Republic of Ghana, 2015).

The Ledzokuku-Krowor Municipal Assembly, over the years, performed relatively well from generating revenue for developmental purposes. These are funds generated from granting Business Operating Permits, Fees and Fines, and Rent on Assembly properties, among others. Despite the seemingly booming economy, there are also a number of challenges in the municipality. This includes high levels of unemployment with its associated vices. Access to credit is a key challenge to a lot of Small scale Enterprises (Republic of Ghana, 2015). Even though measures are being put in place nationwide to alleviate poverty, the growing population and rural-urban migration are making it a challenge within the municipality (LEKMA, 2017; GSS, 2014).

Healthcare provision

Currently, LEKMA three important types of health facilities are located in the area. These include hospitals, health centres and health post, among others. Some of the health facilities are privately owned, whiles the rest are owned by the government of Ghana. In terms of their total count, there are approximately nine (9) health facilities comprising four (4) hospitals, one (1) health centre/post and four (4) other low services facilities like clinics, and Community Health-Based Planning Services (CHPs) among others (LEKMA, 2017).

The aforementioned health centres, polyclinic, reproductive and child health clinics, etc. are established to offer clinical/preventive services, ranging from out-patient and in-patient, public health services; reproductive and child health services, nutrition, pharmacy, laboratory to X-Ray services. In addition, specialist hospitals like the Family Health, Manna Mission, Inkoom and Lister Hospitals, are also located in the area to render obstetric and gynaecological procedures (LEKMA, 2017).

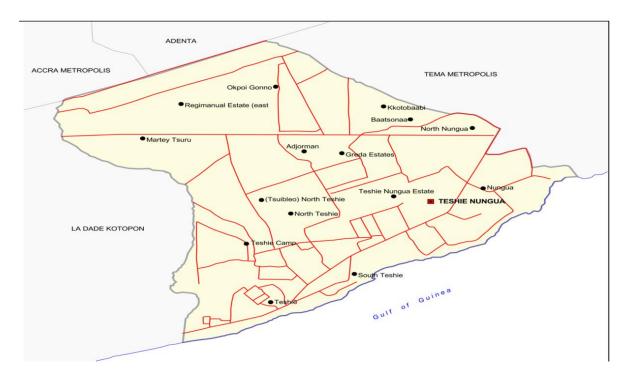
Being the largest healthcare facility in the municipality, the LEKMA Hospital was built through the collaboration between Ghana and China, to provide specialised care to inhabitants of the municipality. LEKMA has a hundred (100) beds. Currently, the orthodox component of the hospital has eighteen (18) medical doctors, including eight (8) specialists, six (6) medical officers and four (4) house officers, ninety-five (95) nurses, and about hundred and ten (110)

health extension workers. On average, the hospital has 200 clients at the OPD per day (LEKMA, 2017).

Although access to hospitals in the municipality is relatively easy for PWDs through the construction of pavements for wheelchairs, fixing of street lights, traffic lights and road-signs that warn pedestrians and drivers concerning PWDs, the facilities do not have adequate assistive devices like walking sticks, zimmer frames, crutches, walking frames and wheelchairs to support PWDs when discharged. With the inability of the Ghana Health Service to fund the provision of assistive mobility devices to PWDS, the PWDs are compelled to buy these devices with their own money, seek help from local metal workers to manufacture devices for them, or rely on the mercy of family members and/or passer-by's to direct them to-and-from the hospital and other public spaces (Ashigbi, Torgbenu, Danso, & Tudzi, 2017; Edusei, Adjei-Domfeh, Mprah, Opoku, Badu, & Appiah, 2017). It is true that as part of the benefits of the Ghana Disability Fund, persons with mobility challenges can request for wheelchairs, walking sticks and other mobility devices. However, the insufficiency of funds available to the agency to meet the numerous requests of applications has culminated in the situation where services are rendered on a priority basis. As such, only a few applicants receive these assistive devices every two years (Mansa, 2017; Ashigbi, Torgbenu, Danso, & Tudzi, 2017; Edusei, Adjei-Domfeh, Mprah, Opoku, Badu, & Appiah, 2017).

The socio-demographic characteristics of the Ledzokuku Krowor Municipality, with particular attention on the Teshie Nungual and La Communities local area, is adequately explained in this sub-section help readers of this research to appreciate the ecological, socio-cultural and healthcare circumstances of the research population. The bearing this information has on the enjoyment of fundamental rights by participants in the study.

Figure 1 Map of LEKMA



Source: Ghana Statistical Service (2014)

2.3 Religion in Ghana

The impact of religion can be observed in virtually every sphere of life in Ghana; ranging from family life and economic activities to education and other spheres of life. Article 21 of the 1992 Constitution of Ghana grants all inhabitants of the country the right to practice any religion and to manifest such practice. This provision also includes the right to religious and other public associations with any recognised group in the country.

Consistent with trends of religious groupings in the LEKMA, the African Traditional Religion, Christianity and Islam are the three major religious groups in Ghana. In the first half of the 20th century, Christianity gradually enlarged its ground at the expense of the traditional religions. Beginning in the late 20th century, the followers of Islam also began to gain grounds. This notwithstanding, Christianity is most dominant, with the majority of its adherents in the southern part of the country. In contrast, Islam became strongest in the northern parts and the larger urban centres. This is because urban centres regularly become the destination for immigrant populations from Muslim regions of western Africa. Many spiritualist and syncretistic churches claiming some adherence to Christianity combined with traditional African beliefs in magic and divination have appeared and grown in popularity. Other divisions of the Christian church are the Protestant and Roman Catholic denominations.

Christianity accounts for at least 72% of the Ghana population. Thus, at least 72% of people living in Ghana are members of various Christian denominations in the country. Religious tolerance is very high in Ghana. However, there are no major links between ethnicity and religion in the country.

According to the Ghana Statistical Service (2012), out of a total of 713,172 persons with disability currently domiciled in Ghana, 7.9% are not religious. The distribution of the rest is as follows: 13.8% (Catholic), 20.4% (Protestants/Anglican), 24% (Pentecostal/Charismatic), 11.3% (Other Christians), 13.7% (Islam), 7.8% (Traditionalists) and 1% belonging to other religious sects.

2.4 Background of the Presbyterian Church of Ghana

The First Missionaries were sent as a result of a request by Major de Richelieu, Governor of Christiansborg to counter the bad moral life of the Europeans in the fort. His request to the Danish Crown for missionaries was forwarded to the Basel Mission which had been set up in 1815 to train missionaries (Presbyterian Church of Ghana, 2020). However, after three years of arrival, the first four missionaries died (Presbyterian Church of Ghana, 2020).

The Basel Mission dispatched three others, namely: Andreas Riis, 28years, Peter Petersen Jaeger, 24 years, and a doctor, Christian Friedrich Heinze, 28years to the Gold Coast. After three months of arrival, once again, Dr Heinze and P.P. Jaeger died. As a precautionary measure to stay alive, Riis later moved to Akropong to avoid malaria fever along the coast, and to preach the gospel to a people who were not yet greatly affected by the contact with the Europeans. In November 1837 two more missionaries, Johannes Murdter and Andreas Stanger teamed up with Riis at Akropong (Presbyterian Church of Ghana, 2020). Stanger died in December 1837 and Murdter in November 1838 (Presbyterian Church of Ghana, 2020). Unfortunately, the mission in Akropong was unsuccessful. As such, Andreas and Anna Riis left Akropong in 1840 for Europe (Presbyterian Church of Ghana, 2020).

After twelve years of missionary enterprise, eight missionaries had died, and there was no single convert (Presbyterian Church of Ghana, 2020). The Basel Mission, therefore, decided to abandon the mission to the Gold Coast because they believed that the high mortality rate was a sure sign from God that Africa was not ready for the gospel (Presbyterian Church of Ghana, 2020). At the departure of Riis, the Okuapehene, Nana Addo Dankwa provided the key

to a successful mission which had eluded the missionaries. He is reported to have said: "When God created the world, He made a book for the Whiteman and "abosom" (deity) for the African. But if you could show me some Africans who can read the Whiteman's book, then we would surely follow you." The Basel Mission agreed to find African Christians from the Caribbean. The Moravian Church in the West Indies was willing to provide missionaries, and a new team made up of Andreas, Anna Riis, Johann Georg Widmann and George Thompson went to Jamaica to find suitable Christians for the Mission (Presbyterian Church of Ghana, 2020). The team arrived at Christiansborg on the 16th April 1843 on board the Irish ship, the Joseph Anderson, with 25 West Indians. This marked the rebirth of the Basel Mission's enterprise in the Gold Coast (Presbyterian Church of Ghana, 2020).

After a few weeks stay in Christiansborg, they went to Akropong. When they arrived in Akropong, they realised that the initial mission house was destroyed. Consequently, they renovated the building and established the first Mission station in Akropong. The West Indians introduced mangoes, cocoyam, avocado pear, groundnut oil, and many others to the local food economy. One must also add that the Basel Mission introduced the cultivation of cocoa (Presbyterian Church of Ghana, 2020).

As they chocked more success, schools were started in Akropong and Osu. Other stations were also opened at Aburi, Larteh, Odumase, Abokobi, Kyebi, Gyadam, and Anum, and later, Kwahu, Asante, Yendi and Salaga and the North (Presbyterian Church of Ghana, 2020). The Presbyterian Training College was started in 1848 to facilitate the growth of the church (Presbyterian Church of Ghana, 2020). New colleges were founded at Aburi and Abetifi, and clinics and hospitals at Aburi and Agogo. Presently the church has established hospitals at Donkorkrom, Bawku, Dormaa Ahenkro, Enchi, and several other health centres. Other areas of endeavours of the church were in the development of the vernacular, development of roads, commerce. The development of the vernacular was in keeping with the Basel Mission policy of ministering to the people in their indigenous language. Following the departure of the Basel Missionaries from Ghana in 1918, the Scottish Mission was given the mandate to provide leadership for the church (Presbyterian Church of Ghana, 2020). Considering the size of the Church and the small staff of two missionaries of the Scottish Mission, it recruited indigenous leaders into the church's national leadership and local leadership structure (Presbyterian Church of Ghana, 2020).

The church currently has 19 presbyteries and other overseas branches in the USA, Europe and Australia. The local presbyteries are distributed across three zones: the Southern zone, made of Sefwi, Sekyere, Ga West, Volta, West Akyem, Ga, Kwahu, Akwuapen, Western, Akyem-Abuakwa, Dangme-Tongu, Central, and Asante-Akyem presbyteries. The Northern Zone includes the Asante South, Brong Ahafo, Asante, Upper, West Brong and Northern presbyteries. The ministry of the church comprises Junior Youth Fellowship, Men's Fellowship, Children's Service, National Union of Presbyterian Students-Ghana, Women's Fellowship, Young People's Guild, and the Young Adults Fellowship. Seven administrative institutions manage all activities of the church. These include the Administrative and Human Resource, Development and Social Services, Ecumenical Social Relations, Department of Mission and Evangelism, Finance, Department of Church Life and Nurture and the Department of Education (Presbyterian Church of Ghana, 2020).

Whiles the vision of the church is primarily focused on the importance of being Christ-centred, self-sustaining and a growing church that mobilises nations to prayer, evangelism, self-sufficiency and global partnerships, the fellowship has also sought, as one of its core mandates, to promote socio-economic development of all humans through advocacy and effective delivery of social services. It principal values include The Centrality of the Word of God, Discipline, Hard work, Integrity, Humility, Unity, Upholding Democratic Principles, Godly Leadership and Skills Development, Sound Moral Principle and Upholding Democratic Principles (Social Justice) (Presbyterian Church of Ghana, 2020).

The sub-section demonstrates the relevance of the motives of the early missions on the doctrines practices of the Presbyterian Church in the 21st century. As demonstrated by the historical antecedents, having identified core missions of the church to include the imperativeness of transforming "all kinds of people" into a Christ-like and self-sustaining individual, this research, through interactions with the PWDs and leaders of the Presbyterian Church of Ghana, determines the extent to which the beliefs, practices, attitude and physical infrastructural designs of the church promote these values.

2.5 Background of the La nativity Presbyterian Church of Ghana

In October 1979, Rev. Ebenezer Odai Tettey, the District Minister at the La Bethel Church alerted Session on people's complaints regarding difficulties the older people in the church, as well as the infirm who lived far away from the church, continually face in their quest to attend

church services at the Bethel Congregation, particularly during evening worship services. It was reported that some of the commuters get blinded by the head-lights from on-coming vehicles and stumbled into gutters whiles or fall as a result. Consequently, Session proposed the need to set up a parallel Church on the far end of the city to make church attendance convenient, safe and cost-effective.

The new church was set up at Bethel as discussed, and on Sunday the 25th of September 1981, the first church service was conducted. Later, the church was renamed by Session, in consultation with the Rev. E.O. Tettey, the "La North." In 1983 Rev. E.O. Tettey was transferred from the congregation and E.A. Adjei appointed as the new leader of the parish. As the head of the church, E.A. Adjei proposed the need to change the name of the church. At this request, some of the stakeholders proposed the name Asafoatse Bu Presbyterian Church which E.A. Adjei discarded because it represented the local name of the traditional area. He pointed out that Jesus' life was marked by three circumstances, namely; His Nativity, His Epiphany and His Resurrection. Since Accra Central was called the Church of Resurrection, and 'Kaajaano' was christened Epiphany, it is just appropriate that be named Church of the Nativity to project the three events. Against such wisdom, the Presbyterian Church of the Nativity was adopted as the name of the parish.

With steady growth in the church, a new Church Complex comprising a Chapel, a Manse, and a school block at Nativity was built. The architectural designs were put together by Plan Architects, led by Mr E.O. Adjetey, a Presbyter of the Tema Manhean Presbyterian church. On Sunday 20th December 1987, the sod was cut by Rev. I.A. Sowah for the commencement of work on the new church building (Cayman Compass, 2016). As the church maintained growth in its membership and spiritual activities, on the 17th March 1991, the church was inaugurated to the glory of God by Rev. Ayitey Atiapa (Ga Presbytery Chairman) assisted by Rev. C.K. Sackey (Ag. Presbytery Clerk) (Cayman Compass, 2016).

The mission of the church is to "uphold the centrality of the Word of God and through the enablement of the Holy Spirit, pursue a holistic ministry to bring all of creation to the glory of God through (Presbyterian Church of Ghana, 2020). Mobilizing the entire church for prayer, Improving church growth through evangelism and nurture, Attaining self-sufficiency through effective resource mobilization, Promoting socio-economic development through advocacy

and effective delivery of social service, Upholding the Reformed Tradition and Cherishing partnership with the worldwide body of Christ" (Presbyterian Church of Ghana, 2020).

To encourage fellowship between members for spiritual and personal developments, the church encouraged the formation of several associations. Some of these include the Young People's Guild, Men's Fellowship, Women's Fellowship, Children's Service, Singing Band, Church Choir, Junior Youth, Boys' and Girls' Brigade, Bible Study and Prayer Group, Metallic Echoes, the Nativity Praise Dynamics and the Northern Outreach Ministry (NOM).

As a measure to assist the infirmed, aged and the sick in the congregation and other adjoining communities, the church has converted one of its old offices into a clinic, and formally unveiled it on 3rd September 2001 by Rev. J.O. Obodai, the then-District Minister, and witnessed by Rev. Neils Hesse. The church has also put in place a ministry for older people. For instance, it established four centres for invalids in the church who because of their physical condition are unable to travel long distances from their homes to the main church premise. Councillor Lartey Centre manages these centers, Quartey's Villa, Millicent Dsane's centre and Mary Quarshie's centre (Presbyterian Church of Ghana, 2020).

With the core values of the church encompassing the Centrality of the Word of God, Discipline, Hard Work, Integrity, Humility, Unity, Upholding Democratic Principles, Godly Leadership and Skills Development and Moral Principles, this sub-section helps to establish similarities between the Nativity Presbyterian church as a congregation and the principles governing the worship and administrative activities of the Presbyterian Church of Ghana as a Christian denomination in Ghana. This assessment will help to identify how significant issues of the disabled are to the congregation, and how the needs of worshipers who are physically impaired are met. As the Constitution of the World Council of Churches expressed the vital role of churches in serving human needs, breaking down barriers between people, promoting one human family in justice and peace, and upholding the integrity of creation as service to God, it is important to juxtapose the structure and functions of the Nativity Presbyterian church with these principles to determine the types of services extended to PWDs (WCC, 2018).

Chapter 3: Theoretical Framework

3.1 Chapter Introduction

This section discusses the theoretical lenses through which the research was conducted. To clarify the researcher's concept of accessibility to persons with disability in the Presbyterian Church, Ghana, the social model of disability and the non-competitive theological anthropology was adopted to direct the conduct of the paper. A conceptual relationship between the two models was then established to indicate the complementariness of the two theories in this research.

3.2 Social Model of Disability

In his book "The Politics of Displacement," Mike Oliver defined Social Model of Disability as impairments sustained by individuals through interactions with the environment (Oliver, 1990). The definition was framed to counter the pathological approach used to describe the disability in the 1970s. Thus whereas the medical approach conceptualised disability as physical, biologically dysfunctional barriers, the Social Model of Disability perceived the phenomenon to emanate from one's engagement with society, particularly individuals, rules and institutions the person regularly interacts with.

In other words, contrary to the medical model that saw disability as an issue brought about by hindrances with individual pathological factors, this concept redefined the experience of disability from the perspective of public health and social workers (Barnes, 2003; Campbell & Oliver, 1996; Thomas, 2012) As per the World Health Organization (2002), "Disability and functioning are viewed as outcomes of the interaction between health conditions (diseases, disorders and injuries) and contextual factors (World Health Organization, 2002). The contextual factors include external environmental circumstance, for example, social attitudes, architectural characteristics, legal and social structures as well as climate, terrain and so forth; and internal personal factors, comprising gender, age, coping styles, social background, education, profession, past and current experience, overall behaviour pattern, character and other relevant influence on the experience of disability by individuals and groups (World Health Organization, 2002). Supporting this claim, the WHO (2011) posits that the expression "disability is the umbrella term for impairments, activity impediments, and participation limitations, alluding to the undesirable effects between a person's wellbeing and that person's relative influences (ecological and individual factors)."

The model contends that instead of perceiving disability as biological limitations, the condition makes more sense when understood as hindrances imposed on people living with physical impairments. Debilitations alone do not constitute a disability if society accepts its obligations of being the provider of welfare packages to empower the physically disabled to be actively involved in the social lives of their communities.

Disability is hence described as a type of social impediment engendered by obstructions, (dis)ableism and prohibition from social activities (Oliver & Barnes, 2012). With the recent expansion in the social activism of persons with disabilities, this understanding has undergone considerable changes.

Initial research projects on disability concentrated on obstructions posed by the physical infrastructure and socio-cultural disablements. By the mid-2000s, however, this perception changed when prominent scholars started scrutinizing the dualism among impairment and disability (Shakespeare & Watson, 2001). Goodley (2001) contended that mental impairments, for instance, are socially fabricated. Shakespeare and Watson expressed that disability was brought about by biological and the environment, including prohibitive social barriers (Shakespear & Watson, 2001). Interesting debates (Shakespear, 2004; Thomas, 2004; Sheldon, Traustadóttir, Beresford, Boxall & Oliver, 2007) still linger purporting to make the social model progressively 'relational', with accentuations on vigour and developmental deficits as the disabler (Oliver, 2013). With this, the social model conceptualizes what a human science of disability is; the conceptualization of 'debilitating conditions' (Thomas, 2004), psychoemotional disablism like stigma and verbal abuses (Gross & Hahn, 2004; Reeve, 2002), and intersectionality of chronic sickness and gender (Thomas, 2006). The social model, in this regard, kept up its significance to fight against social oppressions against persons with disabilities (Thomas 2008).

3.2.1 Importance of the Social Model of Disability

The apparent importance of the social model is that it is socially and politically situated in impaired individuals' developments and activism for social change (Hunt, 1966; Finkelstein, 2004). It likewise conscientise impaired individuals to be in charge of their livelihoods. The theory espouses a worldview of inclusion, co-creation and liberation policies to explain the connection between disability and impairment (Oliver, 1995; Barnes, 2014). Moreover, the social model is viewed as all-inclusive, because it is based on strategies to utilize individuals'

encounters of discrimination or other social hindrances to empower them to take away all social, cultural and political boundaries and take a persevere towards more equality and social justice for all.

It is against this backdrop that Beresford (2004) depicts the social model as a 'light bulb' experience for incapacitated individuals. The materialist premise of the model perceives the relationship between capitalism and structural disparities and social exclusion to be very crucial when considering the basis of disempowerment against PWDs (Thomas, 2012; Oliver, 1990). Not having the option to contribute or sell one's work in industrialist system frequently implied avoidance from social life, which is the reason why the social model espouses the ideals of free-living, the option to work and a common 'disability' culture that respects everyone (Oliver, 1990; Barnes, 2012). Employment opportunities constitute one of the pivotal proposition of the social model (Barnes & Mercer, 2005; Graby, 2015), as does the need to reconsider disability in positive terms. Swain and French (2000) and Swain et al. (2013) contend that the social model gravitates towards a 'positive model of disability' that praises impairment and disability. The acceptance of impairment and disability lies contrary to the more bio-medical understandings of impairments which proposes that they ought to be accommodated, preempted or remedied consistently.

Acceptance of disability creates a strong link between the social model and the capabilities approach (Schalock, 2004; Burchardt, 2004). Burchardt (2004), for instance, mentioned that the shared characteristics between the capabilities model and the social model, particularly concerning how each describes social obstructions and individual constraints, the significance of dependence and the estimation of opportunity, and unsatisfactory wage rates and salary schemes depict the measure of wellbeing that persons with disabilities possess. She associates social justice with an emphasis on how the capabilities approach can prompt the need to counter destitution and social, monetary and political exclusions in societies (Burchardt, 2004). These contentions have become progressively persuasive and associated the social model to rights-based methods to deal with exclusion and disempowerment (Kittay, 2013).

In any case, the accentuation on capabilities is indicative of the flexibility in the social model and its ability to be adaptable and inventive, especially, when the model perceives intersectionality and how impairments may change over the life-course. Endeavours to comprehend social exclusion and structural persecution are observed when connecting sexual

orientation, ethnicity and impairments to clarify the high occurrence of cognitive problems among Afro-Caribbean populaces in the UK (Hudson-Sharp & Metcalf, 2016).

Social Model activism constitutes another medium though which proponents of the perspective try to make their ideas public. The activism had supports from the 'psychiatric system survivor' movements (Beresford, 2004) and other contemporary approaches to activists who are connected to neuro-diversity (McWade, Milton & Beresford, 2015; Beresford & Wallcraft, 1997). The neuro-diverse movement (Silberman, 2015), for instance, contend that their approach creates a link between the social model and psychiatric survivors (Spandler, Anderson & Sapey, 2015). The development started during the 1990s with individuals with autism, dyslexia, dyspraxia and Attention Deficit hyperactivity Disorder (ADHD), contending both for the social appreciation of disabilities and the celebration of such conditions as 'real' (Waltz, 2013). The paradigm counteracts medical pathologisation claims.

Finally, the flexibility inherent in the social model of disability conditions the paradigm to easily adjust to changing situations and capable of having the option to assimilate negative reactions, using such criticisms to grow more advanced and complex applications. Later hypothetical reasoning of the approach was modelled to affect political programmes and activities to benefit PWDs. However, the social model is still not successful in its attempted to guarantee that a rights-based policy gets linked with the acceptance and liberation of disabilities.

3.2.2 Shortcomings of the Social Model of Disability

Different studies of disability were published to criticise the social model. A significant number of these originated from the social model of disability (Terzi, 2004; Nabbali, 2009). Progressively, the majority of the centre of the criticism on the inability of the theory to explain ontological and epistemological aspects of the human body. Whiles various proponents of the model expounded on the premise of impairment as simply pathological, by contending that impairments are socially developed and limiting, the social model failed to clarify the relationship between human interactions and medical approaches to disability, particularly when considering the relationship between physical and mental pains of disability. To add to this, Shakespeare and Watson (2001) asserted that impairments are brought about by natural and social factors, just as by prohibitive social hindrances and discriminatory practices.

Other shortcomings identified by authors who oppose the social model concentrated on the degree to which 'disability' can be treated, especially given that the disparity between impaired and non-incapacitation are blurry and often insignificant. This has driven Goodley (2001) to scrutinize the epistemological foundation of the social model. The contrast existing between impairment and disability in this manner, according to Goodley (2001), reinforces the premise of the Cartesian dualism of the body and the mind; a strong argument for the medical model of disability (Hughes B, Paterson, 1997). More importantly, Shakespeare and Watson (2001) have opined that the social model has become just one of the obsolete philosophies that cannot establish the dualistic differentiation between impairment and disability.

Finally, it has been objected that the social model may promote the idea of an inherent structural order that rates activism and liberation of PWDs solely by their efforts higher as opposed to those pursued by their partners. Whiles political activism and liberation by those who suffer impairments can be liberating and seen as a strength (Barnes, 2012) it can at the same time distance likely allies and sympathizers, and make it hard to build up joint efforts with other groups (Shakespeare & Watson, 2001). Furthermore, some level of unpopular normative and customary oversight can be entrenched when the social model is used. This may occur as a consequence of endeavours which set up conventionalities that are usually not amenable to change (Finkelstein, 1996).

3.2.3 Operationalizing the Social Disability Model

The Social Model of Disability was adopted to examine the intersectionality between infirmity, disablism and inclusivity. By describing the structural organization of the Presbyterian Church, including the architectural designs of the building belonging to the church, the model aids the research to ascertain the extent to which physical structures of religious organizations, in particular the Presbyterian Church, promote or impairs PWDs' complete participation in all religious activities.

The model also aids the researcher to investigate the pervasiveness of psycho-emotional disablism in the Presbyterian Church, and then engage in a critical evaluation of ways in which the practice discourage religiosity among PWDs. Specifically, the study will employ this tenet to examine the extent to which practices of verbal and psychological abuse in the Presbyterian Church influence PWDs' perception of inclusiveness in the church.

3.3 Non-competitive Theological Anthropology

While it is a welcoming component of most Christian religious philosophies to think about God as an empowering human divinity, the enablement may come to the expense of weakening trepidation and vulnerability. Assuming that God probably is competitive, at that point, one should consistently be in question about what one must do to keep God working as the assurance of support and arbitration in his/her favour. On this ground, therefore, different scholars reject the view that sees God as a rival to His creation. A prominent proponent of the non-competitive nature of God is Kathryn Tanner (2001). Tanner, a professor of theology with extensive expertise on Constructive Christian Theology, has expansively written books to deconstruct the relationship between God, Jesus Christ, and humans in a way that falsifies the idea of a competitive relationship between God and His creation. She contends that a God who is in rivalry with creatures seizes to hold the position of a real God; The idea of a competitive God is seen to deviate from the Jewish, Christian, and Muslim religions conceptualization, and as narrated by Kathryn Tanner (2001, p. 4) in her book Jesus, Humanity and the Trinity, God is not comparable to a sort of thing among different sorts of things; and that if God is transcendent, it augurs well to imagine that God can be the provider of a wide range of things and habits of presence; and on that premise, it equally bodes well to think about a noncompetitive connection between God and his creatures. Thus, a non-competitive relation between individuals is just conceivable based on this sort of precept of some divine qualities that transcends human nature. As Tanner (2001, p. 2) puts it, "the glorification of God does not come at the detriment of creatures." Along these lines, to start to fathom God's greatness is to comprehend that since God "exists" in another nature than one driven by human needs and shortcomings, there is nothing one can or need do to procure God's endorsement or respect. God is, to Tanner's (2001), "the abundant supplier of all that the creature is naturally designed to be" (p. 3). To discuss God's amazing quality is to profess that God is "above" or "outside of" or "not quite the same as" the assertions of which God is the source. There are various ramifications of a non-competitive theology of God for understanding human activity and relations. Consistent with Tanner's analogy, this research conceptualises theology and disability in three distinct ways:

1. It features the practice that, usually in all kinds of competitive relationship, one side succeeds or prevails to the detriment of the other party. For somebody to win a race, another person needs to remain the looser (Tanner, 2001). Subsequently, the contemporary authoritative and ill-disposed political doctrine of rivalry asserts that a person's prosperity accompanies the

disintegration of another person, a sort of political premise in Newton's Third Law. This conceptualization potentially influences the religious understanding of disability as a state of vulnerability; and in some instances, the result of one's sinful state. As a state of sinfulness, religious doctrines perceive one's ability to overcome disability through divine healing releases the individual from destitution (Tanner, 2001).

- 2. It also indicates that all interactions between individuals are possibly somehow competitive. One may propose that albeit numerous interactions are competitive, surely not all connections lead to gainers and losers. In any case, as Tanner (2001) noted, even connections that are not understood in such black-and-white terms are never-the-less competitive. Thus, even under situations where religious groups provide support to those who are most in need, including PWDs, this is done with the conviction that the giver is in a better position than the receiver; and as such, being in the receiving end sentences one to a perpetual state of the vulnerability until they are cured and/or treatment.
- 3. Finally, Tanner posit that envisioning a theological world that is built distinctly on the principle of non-competitive interactions often leads to ostracism, in contrast with the conceivably positive relationship frequently espoused by Christians. This hegemony is often observed in the use of expressions such as powerlessness and suffering servant-hood to echo Christ's sacrifice for mankind among Christians. Rowan Williams (2000) has contended that:

"A policy entirely based on 'charity' in the sense of egalitarian transcendence, non-competitive communion, and so on, fails to meet the general expectation of all, because it only partially recognizes the fact that the non-charitable world habitually deals with conflicts of interest and desires, the unavoidability of loss, and the obstinacy of others. (p. 70)"

3.3.1 Non-competitive Theological Anthropology and Disability

A non-competitive theology gives a better understanding of theology and disability by confirming PWDs as they 'simply are,' without the need to create a social or political status for them (Williams, 2000, p. 70–71). In this manner, non-competitive theology shows the absence of broad theological anthropologies, bars and standards that people need to meet to be considered as human creatures of a valuable God are eliminated (Tanner, 2001). As such one may, for this reason, oppose attestations concerning the human resemblance with a God who is not mutilated or "broken;" particularly when scholars opined that human capacities with regards to "relationship," "objectivity," or "imagination" is indicative of being created along with God's qualities (Kittay, 1999; Williams, 2000).

Interestingly, a non-competitive theology makes space for theological anthropology that perceives PWDs as they simply seem to be, instead of carving ideal images that each individual is expected to be (Vanier, 1998; Lear, 1990). Jonathan Lear (1990), a professor of philosophy and a psychotherapist, in his investigation of Freud's work entitled "Love and Its Place in Nature," mentioned that being an individual is always influenced by what it resembles for that individual to be (pp. x). This does not necessarily presuppose that personhood or language about becoming human is inductive; rather, it opines that there is no apriori beginning point for humanity, which focuses on physical or scholarly preconditions without first accepting people's dependence upon potential decentring. Despite Lear's background as a philosopher of the human psyche, his discourse points to the significance of non-competitive theology as an uplifting examination of theology and disability studies. It gives an unmistakable theological method of reasoning for dissenting religious philosophies that portray an individual without first taking care of specific biographical aspects, particularly those of people with disabilities.

Without such a theology, people with and without handicaps face a daily reality such that contentions and competitive interactions structure the backbone of human experience, and offers credence to the existential emotional resistance between individuals. This is what the authoritative researcher, Walter Brueggemann (1982) depicted as "those who are well off" and "the have-nots" (pp. 28–30). Within such interactions, "the poor" comprising individuals who do not have the level of resources and capacities to seek competitive relations; or, as logician Eva Feder Kittay (1999) argues, individuals who on account of "unfavourable conditions, like disability, are unable to compete for social considerations on their terms" (pp.xi) are often increasingly rejected from taking an interest in social activities that offer tools and aptitudes for self-dependence. For people with handicaps and others who lack wealth and other basic opportunities, distressing circumstances regularly becomes their reality. In one respect, people who end up rejected from the effective quest for competitive interactions may advance toward the sort of turbulent and incapacitating forlornness that Jean Vanier (1998) portrayed in his book, "Becoming Human." Vanier is a catholic philosopher, a theologian, and an advocate for persons with developmental impairments. He opined that:

"Frequently... loneliness... can be a source of apathy and depression, and even of a desire to die...This apathy is how loneliness most often shows itself in the elderly and those with disabilities. It is the loneliness we find in those who fall into depression, who have lost the sense of meaning in their lives, who are asking the question born of despair: What is left? (p. 8–9)."

Alternatively, such people may join activists and pressure groups that replace or serve as an intermediary for the missing opportunities for effective competition. However, as Rowan

Williams (2000) has contended, while this approach guards against detachment by persons with disabilities and victimization, and the commitment of governmental programmes to the felt needs of such minority groups, it likewise unavoidably stand only as an extreme option in contrast to popular engagements. It is worth noting that this strategy has outcomes with dare ramifications (p. 71). For instance, while numerous social affiliations, formal inclusion, and safe zones for people who lack opportunities in a competitive society are encouraged, it may also serve as the basis for major social apathy, particularly, in the political sphere.

According to Vanier's (1998), some of the key terms for the understanding of humanity include catchphrases like connectedness, acceptance, receptiveness, understanding, love, and commitment. Every one of this is best cultivated in a non-competitive interaction where, according to Alasdair MacIntyre (1999), the prospects are neither mine-as-opposed-to-others' nor 'others-as-opposed-to mine'. Rather, it is only 'mine' to the extent that they are equally owned by 'others', a system of mutual dependence (p. 119).

Vanier (1998) along these lines intimated that the past should be lived into the future: he explained that "tolerance, love, wholeness, solidarity, harmony, the human potential for healing and reclamation, and the need of absolution must form the basis of humanity (p. 14). Consequently, Vanier's anthropology seems to highlight a regularly disregarded part of the human interactions; to be specific, the distinction between interdependence within reliance, and between inter-dependence within independence. Whiles, it is true to assert that every human is interrelated in some way, the contemporary political paradigm typically perceives such interdependency as consensual, and as such a competitive collaboration between basically free people. He explains that the experience of interdependency starts with dependence and reliance that is frequently non-mutual and unchosen but rather based on the need to have a place with others, may sound suggestive but normal to human nature. In this case, Vanier suggests that having a place with people is a major human power, synonymous with "drive" in the Freudian sense.

When one fails to establish human connections and interrelatedness, the individual's life fails to be completely human, and subject to appendages of disarray and depression, and possibly culminating in those feelings of trepidation that incite humans to avoid and discriminate against one another (Vanier, 1998, p.5). The theology of noncompetition perceives that the power of having a place is certifiably not a simple issue of collaboration, but fundamentally that. Vanier's experience can be perused in a sense that the feeling of having the place during his

interactions with persons with disabilities culminated in his deep-rooted work to provide care for others. Thus, as he provides care in his association and interactions with the group, he gets a feeling of having a place of comfort.

Vanier's assertion has been particularly useful for the theology of noncompetition because it has encouraged individuals to acknowledge as opposed to romanticizing disability. The recuperating, tolerance and feeling of being accepted, which Vanier described, however, does not occur randomly (Vanier, 1998, p. 11), as they can sometimes be tragic.

3.3.2 Shortcomings of the Non-competitive Theology of Anthropology

Noncompetition can appear limited in its reaction to the difficulties of weakness. Progress ought not to mean disposing of all that undermines PWDs. Regardless of whether one fixes malignant growth, they are going to kick the bucket of some other illness (Hauerwas & Vanier, 2008, p. 52).

While the facts demonstrate that minorities and PWDs fare better when they do not engage in fierce challenges with the contemporary political system, the tone of the case addresses the fact that avoidance of such challenging competitions does not insulate them from suffering and distress from other sources.

Again, although Vanier, appraised vulnerability and helplessness as acceptable and worthy of acknowledgement, it does not turn disabilities into human qualities of strength. His description of human acceptance and belongingness has reliably rather reinforced the delicacy and powerlessness that go with PWDs as people who are delicate and defenceless and in this manner regularly agonizing and more distressed. For instance, it is agonizing that autistic children hit their heads against the floor when there are too many activities taking place around them; and it is distressing that persons with cognitive impairments can only tell their immediate caregivers how the day was by discussing a motion picture content that they memorised so many years' ago. Whatever is meant by non-competitive theological anthropology, there is the need to consider the physical and psychological agony, and other uncongenial emotional or mental distresses PWDs endure. These feelings are real (Vanier, 1998, p. 11).

3.3.3 Operationalizing the Theory of Non-competitive Anthropology

The model is relevant to the extent that it aids the study interdependence between PWDs and other congregants in the Presbyterian Church of Ghana. Specifically, religious teachings and

doctrines espoused by the church, and the implications thereof on inclusivity in the church, will be adequately discussed using the non-competitive anthropology theory. In other words, since doctrines demonstrate congregants understanding of vulnerability and willingness to perceive others as equal participants in religious ceremonials, the quality of the relationship and interpersonal regards prevalent in the Presbyterian Church in connection to disability is a vital phenomenon to investigate.

Again, the model aids the examination of the motivation behind disability welfare programmes in the Presbyterian Church. For instance, whether the receipt of welfare assistance is conditioned on church attendance and unwavering acceptance of church doctrines can best be expounded using this theory.

3.4 Summary

Whereas the social model of disability encourages the creation of institutionalised sociocultural and legal justice system that fosters the inclusion of persons with disability in all social, religious and political activities in their communities, the non-competitive theological anthropology emphasizes the value of equality among everyone in society, particularly those who are Christian whose God does not base relationship with His creatures on physical, social or economic status and possessions.

Thus, whereas the non-competitive theological anthropology gives the religious argument for religious leaders and members of the Christina religion to perceive persons with disability as equal participants in all activities that concern them, devoid of stereotypes, pity or sympathy, the social model of disability goes further to advocate for the provision of those structural, infrastructural and enabling policies to empower PWDs to live independent lives.

Chapter 4: Methodology

4.1 Chapter Introduction

This section focuses on the method adopted in conducting the study. This includes the research design, study population, sampling technique, sample size, sources of data, methods of data collection, data handling and analysis and ethical considerations. Finally, limitations of the study are discussed in this section.

4.2 Research Design

According to Kothari (2004), a research design is a conceptual structure within which a study is conducted. It constitutes all the arrangements of conditions for collecting and analyzing data in a manner that aims to impute relevance to the research purpose and objectives. A qualitative research design was employed to conduct this study. Qualitative research is a way of exploring a social phenomenon, including the weave of everyday life, the understanding, experiences and imaginations of people, the ways that social processes and institutions work and the significance of the meanings that they generate (Creswell, 2017).

A phenomenological approach which involves the description of the experiences of individuals and groups about a specific phenomenon as described by participants in research was used (Creswell, 2017), to collect and construct a rich, comprehensive description of the participants' experience. Using this design aided the researcher to put the issue into perspective, using specific observations and narratives that fit the study objectives, and generate a rich amount of data on welfare programmes that target persons with mobility impairments in the Presbyterian Church.

The reason for employing a phenomenological approach is to develop a deeper understanding of the topic under study. It also provided the opportunity for a systematic and in-depth understanding of participants' responses. Using the qualitative method allowed me to explore participants' emotions as they narrated their experiences. Finally, the use of this research design enabled the establishment of a relationship of trust with participants. Trust guarantees the provision of responses that are factual and true.

4.3 Study Population

This is the total group of individuals from which the sample was drawn (Creswell, 2017). In consonance with the design of this research, the target population was purposefully demarcated to comprise PWDs and Pastors who attend the Presbyterian Church in the Ga zones of the presbytery. The participants were drawn from the Nativity Presbyterian Church of Ghana. With a long history of its formation, and high church attendance record spanning several demographic characteristics, these churches offer the best opportunity to answer the research question.

4.4 Eligibility Criteria

The study selected PWDs who are above the age of 18 years, with mobility challenges, and registered member of the Ga zone Presbyterian church in Accra. PWDs who do not have mobility challenges and not a registered member of the Presbyterian Church were not selected.

4.5 Selection of Participants.

Ten participants took part in this research. In qualitative research, the selection of participants refers to the recruitment of a segment of the study population to represent the entire population (Babbie, 2007). Sampling is very important because it is virtually not possible to study the entire population; therefore, part of the population is used to replace the whole population.

A combination of purposive was employed to collect data for this study. However, snowballing was utilised to recruit and interview potential participants in this research.

The purposive sampling involved selecting a sample from a population with a specific set of characteristics for the research study (Babbie, 2007). Here, the researcher selected the participants with a reason; relying on his expert judgment, only those who exhibit certain prescribed qualities that fit the purpose of the research were selected (Patton, 2002). The power of purposive sampling lies in selecting information-rich participants for in-depth analysis related to the phenomenon being studied (Patton, 2002). The PWDs were selected from the list of registered PWDs provided by the congregations. Thus, the researcher upon the identification of eligible participants entreated them to identify other PWDs in the Presbyterian Church who are not on the list provided to be interviewed. According to Salganik and Heckathorn (2004), the main values of snowball sampling is its ability to obtain respondents from social networks

or groups of people who are hard to locate. The study used the snowball technique to select PWDs in the Presbyterian Church who fit the description and has experienced similar religious encounters in the church. It is worth mentioning, however, that due to the sampling procedure employed, the participants were made of people who are similar in various aspects of their experiences, with only minor variations in their understanding and religious engagements.

Four (4) Pastors and three (3) PWDs were selected to participate in this research. This was, however, done after a prior authorization was sought from the management of the church to carry out this research. This enabled the researcher to collect relevant and in-depth information on the phenomenon.

4.6 Sources of Data

The study used primary data, collected directly from PWDs and Pastors in the Presbyterian Church of Ghana using interview guides and then analysed and presented in narratives. The research catechized the church's architectural design, doctrinal principles, and other systemic factors that significantly influence the likelihood that PWDs may face discrimination in the Church.

4.7 Method of Data Collection and Research Instruments

The interview guide was used to collect information from participants. The interview guide was developed in line with the objectives of the study. Knowing the busy schedule of religious leaders and individual PWDs, coupled with the risk of exposing potential participants to the novel COVID-19 infections, the interviews were conducted on the telephone. Using the interview guide enabled the researcher to collect in-depth data from the respondents. More importantly, it made it possible for the researcher to obtain verbal information related to the experiences of the participants involved. In addition, it helped the researcher to establish a relationship of trust with participants. In a qualitative study, trust is imperative to encourage participants to provide truthful and authentic information to the researcher, because the research design involves the collection of information on the experiences and personal profile of respondents, some of which can either be embarrassing, or unlawful. That said, telephone interviews presented the researcher with its unique challenges. For instance, since the

interviewer could not see the participants, it was impossible to observe the congruence between their non-verbal cues and the information they were relaying. Again, in addition to cost, audibility was also a major challenge. Due to network challenges, the researcher found it difficult to have a perfect audio perception of what the respondents were narrating. As such, the research spent a lot more time playing the tape over and over again in order to filter out the substance of what was being said.

Finally, with permission from the participants, the researcher used audio tape recorders and field notebooks to collect data for analyses. The tape recorder is necessary because it aided the researcher to save details of the interview. The audio files were later played and transcribed verbatim. Observed tensions in the participants' voices were recorded using the field notebook. Each interview lasted between 15 to 30 minutes.

4.8 Data Analysis

Since the qualitative study dwells on in-depth information from participants, it is imperative to use tried-and-tested strategies to analyze the data and ensure participants perspectives are captured in the analysis. In line with the above, this study adopted the following: First, the files and field notes were arranged in categories. A system for labelling (naming) and storing the interview was then developed and applied. The files were named using codes assigned to each audio file based on date, time and place the interview was conducted. Next, a data tracking system was developed to name each document, consent form, and other relevant documents according to the labels assigned to the audiotape and field notes. The files were then transcribed verbatim, and the files kept on a password-protected laptop to ensure safekeeping (Creswell, 2017). Finally, a glossary was developed to define key terms that are crucial to this research.

The six-step thematic analyses, as proposed by Braun and Clarke (2006), is further explained below:

Familiarization with the Data: First, to fully understand the information provided by the participants, the researcher immerses himself into the data and tries to become intimately familiar with it. To be effective in this quest, reading and re-reading the data, and listening to audio-recorded data several times to note any initial analytic observation was adequately done by the researcher.

Coding: This is another vital element of approaches to qualitative analysis. This involves identifying and generating labels for important features of the data of relevance using the research questions as a guide. In addition to being a method of data reduction, it is also an analytic process, to capture both semantic and conceptual reading of the data. The researcher will code every data item and collate all their codes and data extracts.

Searching for Themes: A theme is a coherent and meaningful pattern in the data in line with the research question. This was done to identify similarity and differences in the data. Here, themes were constructed by the researcher based on the research objectives and the emerging issues from the data. The researcher ended this phase by collating all the coded data relevant to each theme.

Reviewing Themes: This process ensures that themes are consistent with coded extracts and the complete data-set. The researcher reflected on whether the themes tell a convincing and compelling story about the data, and begin to define the nature of each theme, and the relationship between the themes. When necessary, two or more themes were collapsed into a single one, or one theme split into two or more themes or discarded altogether.

Defining and Naming Themes: The researcher writes a detailed analysis of each theme, to identify the story each theme is trying to tell and the essence of each theme. A concise, punchy and informative name for each theme was then constructed.

Writing Up: Writing is the final and most important part of the analytic process in Thematic Analysis. Writing-up involves the task of the researcher to weave together the analytic narrative and data extracts to tell the reader a coherent and persuasive story about the data, and contextualizing it in relation to existing literature.

4.9 Methodological Rigour

Trustworthiness in qualitative research ensures that findings of the research accurately represent what participants have said (McGrath, Palmgren, & Liljedahl, 2019). Rigour of research can be accurate when the researcher applies the appropriate research tools to meet the stated objectives of the investigation (Creswell & Poth, 2017). To ensure the trustworthiness of research, the criteria of credibility, transferability, dependability and conformability must be achieved (McGrath, Palmgren, & Liljedahl, 2019)

Credibility

Credibility is attained when the findings from the data reflect reality and are believable (Shenton, 2004). Thus, to ensure credibility, participants were purposefully recruited after meeting the criteria of the research. Participants who were included are those who could provide in-depth information on the experiences of People Living with disability in accessing religious sites. Besides, member checking was done to validate participants' responses by discussing generated themes with the participants. Credibility was also enhanced through triangulation, a method of rigour which has been advocated by many authors (McGrath, Palmgren, & Liljedahl, 2019; Shenton, 2004; Creswell, 2017). In this study, triangulation was obtained by summing up data and comparing it with other sources, particularly other PWDs, religious leaders and published materials. To protect the data, the coding of the data was done by the researcher instead of engaging a professional coder.

To further strengthen the credibility of the study, prolonged engagement was ensured by establishing rapport and building trust with the participants. The interview recordings were listened to frequently, and the transcript re-read to ensure accurate reportage.

Transferability

Transferability is the degree to which the findings of the study can be replicated in other settings (Shenton, 2004). To achieve this, the researcher gave a detailed description of the research setting, background of participants and methodology used for other researchers to be able to apply them when transferring the study conclusions to other similar setting or cases. Also, for audit trail, all transcribed data and field notes were stored in a folder on a computer, email and cabinet. Furthermore, the participants' direct quotes were included in the research work for a better understanding of the context in which the study was conducted.

Dependability

Dependability is the level at which the research findings are consistent, reliable and could be replicated. This is measured by the standard at which the research is conducted, analyzed and presented (Hasson, Keeney, & McKenna, 2000). To achieve dependability, the researcher provided a detailed description of the research setting, methodology and background of participants who will be used in the study. Also, all participants were interviewed with the same interview guide. Each transcript was subjected to the same method of generating the themes and sub-themes. All documents for the research process were kept for audit trail.

Confirmability

Confirmability represents the ability of the researcher to demonstrate that the research findings and interpretations are the reflections of the participants and not the preferences of the

researcher (Liamputtong, 2009). To ensure the confirmability of the research findings, the demographics of the sample were described along with the experience about which they were interviewed. This is intended to allow readers to comprehend the findings of the research and its relevance. Also, all audio recordings were transcribed by the researcher shortly after the interview.

4.10 Reflexive Statement

One indispensable quality of social science research is its scientific rigour, as demonstrated through the researcher's trustworthiness. Before my enrolment into the graduate programme, I served as the Prayer Secretary of the Presbyterian Church and lived in the same municipality where the research was conducted. As I am resident in the community, I am privy to occurrences in the area, notably, the issue of discrimination against PWDs. Although this position may facilitate the speedy recruitment of participants for the research, the researcher anticipated the tendency of this familiarity to influence the kind of information the participants would relay. Consequently, all selected participants were sufficiently educated on the essence of the study, confidentiality rules and anonymity regarding their participation. It is worth mentioning that, despite the aforementioned engagement of the researcher with the research population, he is adequately trained to put aside his personal feelings and other prejudices during the conduct of this research. A high level of professionalism and trustworthiness was maintained during data collection and analysis.

4.11 Ethical Considerations

Ethical clearance was taken from the Norwegian Centre for Research Data (NSD) before data was collected. Consent was also sought from the management of the Presbyterian Church before the interviews were conducted.

Participants were informed that their participation in the research is entirely voluntary, and if they decide not to participate or withdraw from the study, they will not suffer any adverse consequences. Participants were also informed that they might choose not to answer any question that makes them feel uncomfortable. The interviews were only conducted after their consent to participate has duly been given.

Participant's anonymity and confidentiality were assured. The information collected did not expose the participants' identity. To minimize the risk of the audio being lost, the files were transferred from the audio recorders as soon as possible and saved to a password-protected computer. The audio recordings were then deleted once the transcripts have been completed and quality checked. The transcripts were locked in a cabinet with a key, and no one outside the research team was able to see the information. The recorders were used with the participants' consent. Ensuring confidentiality during the conduct of interviews enabled the researcher to shield the participants from the potential risk of being ostracized by the church and its congregants for sharing sensitive information about the ministry. However, educational information, ages, and the years of services about Ministers were given in the table because it does not expose their anonymity, and they are public advocates on issues of disability.

There is no material benefit to the participants for taking part in this study. However, it is anticipated that the findings of this study will help the government of Ghana and other stakeholders to formulate policies that will address challenges faced by PWDs regarding access to social spaces.

Chapter 5: Presentation of Findings

5.0 Introduction

The Chapter presents information provided by the participants in this study through telephone interviews. The information was presented along with themes generated in line with relevant literature. The participants included Persons with Disabilities (PWDs), Pastors of the Presbyterian Church of Ghana (one disabled) and other Church Leaders. Direct quotes from the transcripts were used to support the analysis conducted.

5.1 Demographic Characteristics

The table below provides a summary of the demographic characteristics of participants who were interviewed for this research. To protect the participants' privacy and anonymity, pseudonyms were used to replace their actual names. The participant' categories were represented with abbreviations. For instance, Church Pastor was represented with CP; DL represented Denominational Leaders; NCL denoted a National Church Leader; PWD-V represents a Visually Impaired Person, and PWD-P representing a Person with Physical Impairments. Whereas the age variation of participants who were interviewed for this researched ranges from 25 years to 82 years, their years of fellowship with the Envangelical Presbyterian Church of Ghana varieties between one to 51 years. This ensures that whiles the voice notes are contextualised to make the presentation lucid, they are also organized in a modus that do not divulge the names, place of work and other detectable physiognomies of the participants.

Table 1 Demographic Characteristic

CHURCH LEADERS							
PSEUDONYM	PSEUDONYM GENDER AGE LEVEL OF POSITION DISABILITY STATUS						
			EDUCATION				
CP-1	Male	30-39	Tertiary	Pastor	None		
CP-2	Male	35-40	Tertiary	Pastor	None		

NCL	Male	25-29	Tertiary	Youth	None
				Leader	
CP-NCL	Male	50-59	Tertiary	NCL-CP	Physically Impaired
		PERS	ONS WITH DISA	ABILITIES	
PSEUDONYM	GENDER	AGE	LEVEL OF	POSITION	DISABILITY STATUS
			EDUCATION		
PWD-P 1	Male	40-49	Tertiary	Member	Physically Impaired
PWD-P 2	Female	60-63	Basic	Member	Physically Impaired
			Education		
PWD-P 3	Male	30-39	Basic	Member	Physically Impaired
			Education		
PWD-V	Male	80-89	Senior High	Member	Visually Impaired
			School		
PWD-P 4	Male	20-29	Tertiary	Member	Physically Impaired

Source: Field Data, 2020

5.3 Environmental Assessment

By way of ascertaining the ability of persons with disability to navigate their way through the religious premises of the Presbyterian Church of Ghana, the research asked the respondents to provide a vivid description of their church compound, emphasizing the ease with which persons with disabilities can easily move around, access the church auditorium, and effectively participate in worship rituals.

The responses gathered indicates close similarities between descriptions provided by the PWDs and those given by church leaders who were interviewed. On the issue of distance, it was mentioned that some of the churches are remote from people who have mobility impairments, particularly the aged and the visually impaired, thereby making it a difficult task for such people to attend church services. Additionally, it was pointed out that the popular means of transportation for economically disadvantaged people who needed to travel long distances to attend church services, was by foot. Only those who can afford to pick public transports to the church were able to do so. As such, some of the respondents who trek to church complained variously about the dangers of being knocked down by speeding vehicles and falling, among others. According to some of the church ministers, when this it is determined that a key member of the church is infirmed and cannot come to church on the basis of the remoteness of the church facility from the individual, a time is scheduled by the leadership of the church to visit the congregant to encourage them with scriptures. Some of the respondents had this to say:

Just three years ago, the roads in the area were constructed, and it takes a long distance to go to the church...I will walk on the road from my house to the main entrance... and that place is a bit slippery because of the gravel...Even the elderly in the church were complaining that when they are coming, it's like you are descending...It's not so high, but you feel like you are descending and if you don't take care, you will fall...(PWD – P 4).

There's no ramp or rails, even where the platform is situated. So they have a guide who normally guide me here and there (PWD-V)

In terms of the church's architectural designs, the interviews revealed that majority of the buildings managed by the Presbyterian Church of Ghana, including offices and church buildings are not easily accessible to persons with disabilities. Some of the church buildings have tall staircases that congregants needed to ascend in order to enter the church auditorium. Whiles existing church buildings were not designed with the needs of persons with disabilities in mind, and it also indicated that majority of the church erections that are currently under construction do not have ramps and rails to facilitate the easy movement of persons with disabilities.

We have not been able to put in place all the structural designs. We have a staircase, but then there is no ramp leading to the place. The way and manner, as I told you, we have not finished building that place, and so it hasn't been put in a disability-friendly-that state... so you have to climb. So, like I told you, the building is in progress, and for that matter, the facility is not fully done... so far I will say that I am the only person with a disability in that congregation...(CP-NCP).

Moreover, whiles a few of the churches have made arrangements for PWDs to have special places designed for them within the auditorium, several others do not have such provisions. As such, PWDs with wheelchairs and canes are compelled to sit and worship from positions that naturally do not favour their condition. Finally, it was pointed out that in almost all the churches observed in this research, there are platforms that separate the congregants from ministers. Thus, when congregants are required to go to the podium, they had to climb up staircases to do so. In the case of those with mobility impairments, this means their inability to go to the pulpit, or being carried up-stage. The respondents narrated their experiences in the following words:

I have pastored a lot of congregations, and I see that that is the problem. They do this without having persons with disability in mind. And even where you find some of these things, it is an afterthought...The building is such that when you enter, the main auditorium there are stairs and we have the altar side or the platform where the ministers and the elders are... And that place too is not disability... they will just put up the building without thinking of persons with disabilities. (CP-NCP).

5.3 Religious and Social Engagement of PWDs

Since the research purports to evaluate the effects of church structural designs on the worship activities of PWDs, the participants' engagement in worship rituals were thoroughly explored. It was intended to ascertain the type of assistance received by the participants from the church, the challenges they encounter when going to church, and the frequency with which they attended church services amid the physical challenges that the church structures presented.

On the means through which the persons with disability in this research were able to navigate their way into the church auditorium, both the PWDs and the church leaders who were interviewed for this research submitted that the PWDs are usually assisted by ushers to enter the building. Under circumstances where the staircases are too tall for the PWDs to climb, they may be carried by the ushers into the building. While in the building, however, PWDs who attend church services with congregations that do not have reserved spaces for PWDs must then look for a convenient place to sit and worship. Some of them narrated the situation as follows:

So there was no ramp. So always every Sunday they have to carry me...and for the compound, no problem...the toilet facility that is not disability friendly... I can't use the washroom, so I have to keep whatever in me till I come back home (PWD-P 1).

The PWDs also lamented over not being consulted when decisions are being taken. None of the persons with disabilities in this research assumed any leadership position in the Presbyterian Church since they started fellowshipping with their respective congregations.

For me, I've not seen any PWD as a leader for now. I may not know about other churches, but for me, since I started fellowshipping with all the churches I've attended here, I've not seen any. But I've been a prayer director before in another church. That one is not in Accra. It's around the Volta region. I've even been a youth leader before, youth leader/prayer director. That is the only thing I can say, but apart from that, I've not seen with my eye (PWD-P 3).

To examine their receptiveness to the kinds of assistance offered by the church to help them participate in worship activities, the PWDs in this research were asked to express their impressions and satisfaction with the assistance they received. The outcome shows that whiles all the participants appreciated the sacrifice of some of the church members to enable them to take part in church rituals, they are nonetheless uncomfortable with being given help in order to access the facilities. Those who are often carried to enter and exit the facilities were particularly unhappy with the spectacle of being carried by others. Some of them had this to say:

I don't like it when people carry me into the church. This is a large association. If it happens that way, everybody will be looking at you as if you cannot do anything for yourself (PWD-P 2).

They don't understand. That's why when you are closer to the gate, they try to carry you. But in the announcement, they used to say 'let's do this for the youth, let's do this for the women', but they don't say 'let's do this for persons with disability in church.' So it's out of their mind. It's not even in their calendar (PWD-P 1).

Having identified the challenges they encounter and the kind of assistance they receive to overcome their mobility impairments in church, the PWDs were questioned on their readiness to actively engage in all worship schedules. The information gathered indicated that a few of them were not seriously concerned with the situation. In contrast, the majority admitted having missed a number of church activities because of the difficulties they would face if they had attempted to engage in those ceremonies. Some went ahead to add that they do not think the church cares about them. They opined that when any programme is organized in the church, it feels as though the decision-making body never considers how those decisions would affect persons with disability. This is what they narrated:

Last year, we went for a national youth conference at Obuasi. And you if you see the places where we slept, the place where we bath where you want to use the loo and all those things...they were full of stairs. So...I told my superintendent that the next time they are planning, they should consider some of us or else, me I will not come again... if I see that I'm not comfortable, so I'm scared that I may fall, I won't come ... there is a certain man on my road to my church. He's also a Presbyterian, and he doesn't come. So the Presbyters went there to ask why he stopped... some said he said he is afraid... And he doesn't want to come too because when he falls, no one will buy walking aid for him, no one will do this so he will not come (PWD – P 4).

What I will say is that some care, some don't care. That's how I see it. And the ones that care they are few and the ones that don't care they are many. That's how I see it. From my point of view, that's how I see it. Some of them care, but most of them, they don't even care (PWD-P 3).

The church is for all...And therefore at every point in time, nobody should be restricted from coming into the church. But there are restrictions in the form of structural restrictions. And when these things are removed, yes, more persons with disability would be happier coming to church... But then if the facilities are not disability friendly, if the washrooms are not disability friendly, how does such a person visit the washroom (CP-NCP).

5.4 Religious Doctrines and Teachings on Disability

To understand the religious teachings and practices underpinning the treatments meted out to persons with disabilities in the Presbyterian Church of Ghana, questions were asked regarding the church's welfare policies and religious teachings regarding persons with disabilities. Albeit some of the responses gathered from the PWDs and the Pastors show close similarities, there are also expressions of divergent views on how the PWDs understood the church's values concerning disability in general.

Pastors, I mean a man of God, men of God in Ghana don't have a disability and the faith together. They have only faith to win a soul. What I want to say is whether you are a person with a disability or not it is an equal soul. For them, they focus on only how to win the soul, but they don't focus on how the soul will manage to climb up into the congregation. So that is their problem. So they don't have (PWD-P 1).

In terms of welfare packages, all the participants mentioned that so such policies existed to assist persons with disabilities. Some of the pastors indicated that, since matters of disabilities were not originally an issue of concern to the Ghanaian society, it was not made a significant part of the church's values. However, each congregation, based on the number of persons with disabilities who fellowship with them and the criticalness of their condition, may institute welfare programme to help them. It is on this basis that some of the congregations used the ushers to assist PWDs and the other scheduling time to visit PWDs at home. On a few occasions, some of the congregations' support persons with disabilities financially. The participants had this to say:

For them to ask you that how do you fare, what is your difficulties in the church, no... I have never come across that (PWD-P 1).

In terms of the church doctrine, the study registered opposing comments from some of the PWDs and the Church Leaders. Whereas the church leaders were confident that the church cares for all members, including PWDs, some of the PWDs disagree. The PWDs mentioned that some of the sermons preached in the church seem to portray disability as a sinful status or the culmination of one's sinfulness. Again, persons with disabilities are habitually excluded decision-making processes in the church......narrated his experience as follows:

I will say most pastors preach not what they want to preach... they have a sermon, and have designed it so that the people get what they are giving to them, like put them in in a certain corner... Maybe is it for their selfish ambition or is it for the church to grow... I cannot tell what is in their mind though but what they preach does not educate people... some people even don't know that in the Bible there are people with disability. I mean they changed nations, and through them, things were turned around. They don't even know. Do you understand? That's the issue. It is because most pastors don't talk about this. They don't think about going to that aspect to prompt people to know that (PWD-P 3).

Some of them (congregants) understand the state of persons with a disability. Still, most of them – only a few understand but most of them, the mindset is maybe if I get close to this person, the more I get close to him maybe my child can become a person with a disability or maybe I can become (PWD-P 3).

On the other hand, the church leaders explained that the Presbyterian Church is concerned about the wellbeing of every congregant. They quoted the Holy Bible, saying that the abled persons and the persons with disabilities are creations of Ghana, and are created in their peculiarity in order to give glory to God who is in Heaven. It was mentioned during the interviews that the General Assembly of the Presbyterian Church of Ghana is currently drafting a Policy on Disability which will be unveiled when coronavirus lockdown is eased. One of the pastors had this to say:

From the biblical perspective, erm, disability has some shades, a lot of shades. And one of them is the sin tag. When it is expressed, especially in the Old Testament, that when you sin, God says when you sin, I'm going to bring this and that, this calamity, you will be blind, you'll be this you'll be that. So from that perspective, disability is being as a consequence of one's sin. Disability is seen as a kind of punishment from God. Disability is seen as a curse from God or from gods. And so - again, it makes, from the same biblical point of view, disability is seen as a blemish... A blemish is a stain, a scar. And so, you the Israelites when they were going to sacrifice the animals that they will use shouldn't be animals with blemish... So erm, if one has a disability that is how

such a person is perceived...And so in the Old Testament times, such a person was not to enter into the assembly of the saints or to come to the presence of God... And so that has formed a mindset for the people all this while till the New Testament time. And even the New Testament time it continued. But then thanks be to God that Jesus Christ actually brought another perspective or pointed to another perspective that we have overlooked, or we have not looked at all this while. That one I call the God factor. In John chapter 9, when Jesus Christ and his disciples were passing, the disciples asked Jesus, when they saw the man born blind sitting there begging, they asked Jesus 'who sinned, this man or his parents that he was born blind?' And it tells you the kind of er, the world view that we've had about persons with disability...And Jesus said, 'look it wasn't the sins of the parents or this man but that the works of God might be made manifest.' And so it tells you that, there is a God factor to the issue of disability. (CP -NCP).

5.5 Way Forward

Noting the infrastructural and policy deficits in the Presbyterian Church of Ghana, as indicated by the Persons with Disabilities and the church's leadership, the research implored the participants to propose solutions geared towards making the Presbyterian Church more inclusive and disability-friendly that is it during the time is research was conducted.

For the PWDs, they will be encouraged to attend services and participate in all worship rituals when the church infrastructure is reconstructed serve the needs of PWDs, when a lot of PWDs selected to take up leadership positions and actively engaged in decisions making processes, and when church leaders, the congregation and some PWDs are taught basic lessons on the rights of persons with disabilities as enshrined in the 1992 constitution of the Republic of Ghana. They suggested the following:

What I think can be done too is that the church should have a seminar or a retreat and call someone who is in that field, either someone who has done disability course or rehabilitation before. You call such people, or you may find someone, a person with a disability who knows more about these things then you let them come and teach, let them come and lecture the people. You should do it frequently like, maybe if it is twice a year...So we can get these advocacy groups to help such people, to encourage them to them to pursue their rights (PWD-P 3).

What I think or I know the government can do is that the law is the law and nobody is above the law. One, they should draw their (the church) attention. Even the disability Act that we have, it has been passed. Since then, I don't see if the law has sued somebody to the court or drawn somebody to the court before. You understand. All these things are there, but they have neglected them. So what I will ask the government that they should come in and draw the attention of people who enter the church; not only the church but public places (PWD-P 3).

Whiles the proposals suggested by the church leaders were similar to the ones mentioned by the PWDs, they also emphasised on the need for PWDs to make themselves visible to be included in activities. They also mentioned the need for economic empowerment for PWDs to ensure that they lived sustainably and have the stability to be part of church activities. Finally, some of the leaders advised the management of the Presbyterian Church of Ghana to ensure that the Policy on Disability is strictly enforced and all stakeholders compelled to adhere to its dictates.

I don't think the government will wait for the Legislative Instrument before they push those people to do what is stated for the people within your terrain. So the government must enforce such people to make their spaces accessible to everybody. You know, in the disability group as well, pressure group as well – you see government alone cannot do this. That's the thing we are doing here, yourself and myself we have to (PWD-P 1).

The chapter illustrates the forms of discrimination encountered by PWDs in the Presbyterian Church of Ghana as a consequence of biological, doctrinal and governmental factors. It worth noting, however, that due to Covid-19 pandemic, the interviews did not last for long minutes, with only a small number of participants used. A more elaborate study that focuses on the government's role in the church will ideally complement the outcome of this research to make it more informative.

Chapter 6: Discussions

6.0 Introduction

This chapter synthesises information collected from participants of this research with scholarly articles to draw meaningful conclusions. To make the delivery intelligible, the discussion was clustered under analytical themes, and the social model of disability and the non-competitive theological anthropology theories used to provide a philosophical basis for the arguments made. The themes under which the chapter was organized include the environmental assessment of the church premise, the religious and social engagement of PWDs in the Presbyterian Church (E.P), and the religious teachings and doctrine at the Presbyterian Church of Ghana.

6.1 Environmental Assessment

The study explored the architectural design of churches belonging to the Presbyterian Church of Ghana to determine how it affected the religiosity of persons with disability who fellowship with the organization. The purpose was to ascertain the ease with which worshipers at the Presbyterian Church with mobility impairments are able to navigate their ways in and out of church facilities.

Narrating their experiences, it was revealed by the PWDs and church leaders who participated in this research that almost all church facilities belonging to the Presbyterian Church of Ghana do not have disability-friendly features. This includes church buildings and office premises. For instance, whereas some of the churches lack rails, ramps, and disability-friendly toilet facilities to assist the easy movement and comfort of PWDs, others are quite remote from the residence of PWDs who fellowship with the church. Thus, since most of the PWDs are poor, lacking the ability to own their cars or the ability to pay for taxis to attend church service, they often trek long distances to church. In the process, some fall, whereas others come under the constant fear of being knocked down by speeding vehicles. This was the main concern expressed by older people and persons with visual impairments in the church. Several factors may account for this reality in the Presbyterian Church of Ghana. This includes colonial legacies, cultural influences, and rational financial decisions.

The Ghanaian culture characteristically stigmatises disability (Osam, Opoku, Dogbe, Nketsia, & Hammond, 2019). Ghanaian families have the habit of hiding cases of PWDs to avoid

ridicule and public stigma. For families who have declared disability cases, it is often difficult for young men and women in such families to get married. As such, no arrangement is culturally and structurally instituted to ensure inclusiveness of PWDs in the social and economic activities of Ghanaian societies (Osam, Opoku, Dogbe, Nketsia, & Hammond, 2019). As advanced by the Social Model of Disability, this form of stereotypical mentalities could influence the Presbyterian Church to undermine the importance of instituting disability-friendly organizational structures to guarantee inclusivity in the church. In the Chapter Five (5.2) of this research, one of the pastors intimated that: I have pastored a lot of congregations, and I see that this is the problem. They do things without having persons with disability in mind. And even where you actually find some of these things, it is an afterthought...The building is such that when you enter, the main auditorium there are stairs and we have the altar side or the platform where the ministers and the elders are... And that place too is not disability friendly... they will just put up the building without thinking of persons with disabilities. (CP – NCP) (See Pg. 53).

Again, the intersectional theorem of the Social Model of Disability assets that when the foundational systems of a nation discriminate, this permeates the practices of other institutions in that nation, including the political, social, economic and religious sectors, among others. The colonial legacies could also account for the structural deficits in the architectural designs of Presbyterian Churches in Ghana. Most of the colonial buildings were built years before the constitutional rule. As such, the rights of vulnerable groups, including children, pregnant women and PWDs, among others, were ignored. Since a lot of the church buildings currently in use by the church were colonial bequests, it is not surprising that without renovation works, they have remained the same. Finally, since the number of persons with disability in the E.P church accounted for less than one per cent of the entire population of the organization, it is likely that the organization failed to identify the urgency of expending its scarce financial resource on constructing rails and ramps at their churches and office setups when there is the least likelihood that they would be utilised. Thus, contrary to the recommendations of the noncompetitive theological anthropology, for religious organizations to support the needy from the motivation of representing a God who provides freely without expecting anything in returns, the Presbyterian Church has probably undermined the structural needs of PWDs because expenditure on this minority group might not benefit the church.

This prevailing condition, which often makes church attendance a difficult task for PWDs, has potentially discouraged a lot of them from attending church. Under Chapter Five (5.3) of this

research, one of the PWDs lamented in the following words: "I told my superintendent that the next time they are planning, they should consider some of us or else, me, I will not come again... if I see that I'm not comfortable, or I'm scared that I may fall, I won't come...there is a certain man on my road to my church. He's also a Presbyterian, and he doesn't come. So the Presbyters went there to ask why he stopped... some said he said he is afraid...and he doesn't want to come because when he falls, no one will buy walking aid for him ... so he will not come $(PWD - P \ 4)$ (see P. 55)." Consistent with the Social Model of Disability, the impediments posed by the unfriendly physical structures of the Presbyterian Church of Ghana is serving as the disabler, one that prevents the complete participation of the PWDs in all worship rituals of the church. On the other hand, this exposé points to a sharp contrast between the priorities of the E.P. Church and the non-competitive theological anthropology. Since the theory enjoins religious groups to treat each creation of God, not as a means to an end, but as ends in themselves, the blatant disregard for the need of PWDs in the church would suggest, from the philosophical stance of the non-competitive theological anthropology, that congregants of the church are commoditized, and all requisite structural designs are only constructed when the doing so inures some real or superficial benefits to the church.

6.2 Religious and Social Engagement of PWDS at the E.P Church

According to Valle & Connor (2019), the ability of persons with disabilities to be fully involved in societal activities, including religious, economic and political processes, is contingent on the enabling conditions available. Thus, in the church, it is appropriate to think that the religious and social engagement of PWDs would be significantly influenced by the extent to which they feel accepted by the organization.

Results of interviews conducted with PWDs and pastors of the Presbyterian Church of Ghana show that whiles a few of the congregants who have mobility impairments attend church services, they do so occasionally. The larger proportion of the disability community in the church, however, does not go to church at all. Reasons assigned to this occurrence consist of the fact that persons with disabilities often disdain the spectacle of being carried in public to access the church auditorium. Thus in the absence of rails and ramps to facilitate the easy access of church building to persons with disabilities, the church improvised by instructing ushers in the church to assist PWDs in or out of the church auditorium. They often do this by either guiding PWDs (the blind) or carrying them (cripples) into and out of the auditorium. It is worth

noting that, although the non-competitive theological anthropology advocates for delivery of selfless assistance to the vulnerable, the beneficiaries' opinion concerning the nature and appropriateness of the support has not been comprehensively discussed in the theory.

Consequently, albeit the church has instituted measures to facilitate the safe entry of PWDs with mobility impairments into the church auditorium, the beneficiaries do not consider the support to be dignifying. This constitutes what the Social Model of Disability labels as psychoemotional disablism. One of the PWDs had this to say: "I don't like it when people carry me into the church. This is a large association. If it happens that way, everybody will be looking at you as if you cannot do anything by yourself (PWD-P 2) (See Pg. 55)." Although the pastors of the church denied having received any complaints from the PWDs pointing to their discomfort with this arrangement, majority of the PWDs interviewed in this research abhors the practice and overtly hates being carried in public. This practice has likely discouraged some of them from attending church regularly. The gospel tasks the faithful not to drive out from their communities all those who God has accepted (WCC, 2016 P.17). This affirms that, as human beings are created in God's image, they have been mandated to be God's co-workers in God's unending care and love for all that is created (Nordstokke Kjell, 2015). For that reason, human dignity needs to be respected and defended at all time in order to bring the quality of good life God intended for all His creation. This is what Diakonia seeks to infused into the church as caretakers of creation.

Furthermore, it was revealed that almost all the churches do not have well-developed sanitary facilities to ensure the comfort of PWDs when they want to visit the toilet or urinate. It is, therefore, a difficult task for them to use the lavatory whenever they go to church. Accordingly, to avoid the risk of falling at the lavatories, PWDs decided not to use the facilities until they go back home. On page 56 of this research, one of the participants explained that: "The church is for all...And therefore at every point in time, nobody should be restricted from coming into the church. But there are restrictions in the form of structural restrictions. And when these things are removed, yes, more persons with disability would be happier coming to church... But then if the facilities are not disability friendly, if the washrooms are not disability friendly, how does such a person visit the washroom (CP-NCP)." Thus, the disablement of participants in this vein did not originate from their biological condition, but the limitations posed by the religious environments, as postulated by the Intersectional Approach of the Social Model of Disability. In agreement with the concept of contextual hindrances, frailty is not the source of limitation to PWDs, but rather all impediments presented by the social environments to prevent

the full participation of PWDs in the social, economic and religious activities of their communities. Based on the examination of responses gathered in this study, this discomfort might have accounted for their absenteeism from church (Obeng, 2007).

Finally, when asked if they were actively involved in other social activities of the church, most of the responses gathered to show that PWDs do not participate in such activities. In an explanation to clarify their reasons for boycotting other social gatherings, the PWDs indicated that they were never consulted for any activity. Consequently, anytime they attended these events, they often discover that the events' organization and available facilities do not guarantee the safety and convenience of PWDs. All humans, irrespective of their biological and economic status, are social beings, who crave for respect and acceptance. According to the Social Model of Disability, when this need for acceptance is absent, people are likely to be apathetic and/or aloof. Thus, it was found that the inability of PWDs to avoid social gatherings organised by the Presbyterian Church of Ghana was largely because their views and condition was not taken into consideration when planning such events. Hence, they lack the pull influences to encourage attendance from the PWDs

6.3 Religious Teaching and Doctrines on Disability

Every religious organization uses a set of principles and belief systems to conduct the behaviours of congregants in the organization. This is also true of the Presbyterian Church of Ghana. The Presbyterian Church was founded on certain religious doctrines that make their worship and relationship with congregants distinct from other organizations. According to the WCC(2016, P.5) and the non-competitive theological anthropology, all human beings are created equal through God's loving-kindness, no matter what changes their bodies and minds may exhibit. In that, there should be equal opportunities for both abled and disabled to have the opportunity to become subjects of their own lives. In the practice of conviviality as part of Diakonia practices, there is the need to seek for a system where all community members have equal access to the resources for a better life, and everyone in the community should have all the necessities that enhance living together. There should not be any actions from others or power structures that discriminate against others, thereby creating marginalization and vulnerability but promote inclusiveness. As such, this research was set to investigate the relationship between doctrines used by the Presbyterian Church in its worship rituals and the practice of inclusiveness in the church.

A review of literature on the history and practices of the Presbyterian Church of Ghana pointed out, as one of the core values of the church, social justice and Godly principles, which comprise the need to treat everyone equally. It stated that one of the cardinal objectives of the church is to transform all kinds of people into Christ-like and self-sustaining individuals (Presbyterian Church of Ghana, 2020). This explains the need to empower all people, irrespective of their physical, cultural and economic orientations, to participate fully in all religious activities. This gives the impression that the needs of vulnerable individuals in the church will be a priority, and the opinions of the vulnerable, particularly persons with disabilities, adequately considered when taking decisions that affect them. Despite this, and the Biblical instruction of all people to be treated equally, the unfair treatment meted out to PWDs who participated in this research show the practice of psycho-emotional disablism, through practices that regarded PWDs as less important than people without impairments. As a result, most of the congregants in the E.P church construe disability to be an accursed state or a state of sinfulness. In Chapter Five, subsection 5.4 of this research, one of the participants opined that: "I cannot tell what is in their mind...but what they preach does not educate people... some people even don't know that in the Bible, there are people with disability (PWD 3) (See Pg. 57)."

Again, the non-competitive theological anthropology theorised that God provided the needs of humanity so that the given can represent the hand of God in giving to the less privileged in society. As churches are representative of God on earth, it is expected, without equivocation, that PWDs and other vulnerable groups would have their needs prioritised and delivered by the church. However, when asked about welfare programmes in the Presbyterian Church, the PWDs denied knowing anything about welfare programmes for PWDs in the church. One of the participants described it this way: "For them to ask you that how do you fare, what is your difficulties in the church, no...I have never come across that" (PWD-P, 1) (See Pg. 57). The church leaders, on the other hand, mentioned that whiles there is no available universal welfare policy in the Presbyterian Church concerning PWDs, each congregation have instituted various measures to take care of vulnerable people. This includes intervallic stipends – that are not regular – a donation of clothing and other items, and home visitations to encourage them. The pastors, however, admitted that the church could have done better. They also admitted to the lack of initiatives in the church to encourage the participation of PWDs in the decision-making process. On account of these omissions, and the confirmed absence of assistive devices to assist persons with mobility impairments in the church, it is not a surprise that almost all the PWDs who participated in this research felt that the church does not care about their welfare.

To rectify the challenges faced by PWDs in the Presbyterian Church of Ghana, most of the participants called for the government to enforce the disability law in all churches, and every church leader taken through informative sessions on disability. It must be pointed out that, the General Assembly of the Presbyterian Church has, on August 29 2019, drafted the Policy on Disability to ensure more inclusiveness in the organization. As a policy statement of the Policy on Disability, the E.P Church spells sets to make disability inclusion an integral part of the church's polity, programmes, policies and activities at the local, district and presbytery and General Assembly levels to transform the church into a disability-friendly organization (Presbyterian Church of Ghana, 2020). Basing its principles on the Bible books of Mark 2:13-17, Luke 13:10-17, John 5:1-15 and John 9:1-41, the Disability Policy is designed to guide the church to provide a holistic service to all congregants in line with Jesus' instruction to show love and care for the lowly ones in the church. Thus, when enforced, members of the church will be banned from using stereotypical terminologies to describe disability and those who have disabilities; uphold the dignity of persons with disabilities by adopting teachings that show respect to PWDs; create awareness concerning disability issues in the church; provide counselling services to families of persons with disabilities; include persons with disability in the church's democratic process; make facilities such as manses, offices, schools, hospitals, clinics, and washrooms, among others, disability friendly; appoint disability focal persons; and enforce the dictates of Ghana's Disability Act 2006 (Act 715) in the Presbyterian Church (Asante & Sasu, 2015).

Since the provisions of the Policy on Disability covers not only structural irregularities of the church but also the doctrinal and behavioural conducts of congregants and church leaders, it is projected that when effectively implemented, the environmental limitations that currently hinder PWDs from full religious engagements; and the discriminatory doctrinal and leadership decisions that either commoditise or discourage PWDs psycho-emotionally would be significantly addressed.

It is worth pointing out, in conclusion, that since there are no established administrative and policy-enforcement institutions to carry out the provisions of the policy, it is doubtful that the policy will be adequately applied and all stakeholders of the church compelled to apply its principles. Again, since the policy could not be enforced in 2020 due to the effects of the Covid-19 pandemic protocols on all social, political and religious organizations, the fear is that PWDs will continue to endure the current condition of indignity, hoping that the situation changes soon.

Chapter 7: Conclusion and Recommendations

7.0 Introduction

The study was set to investigate the effects of religious and institutional programmes and policies at the Presbyterian Church of Ghana on the religiosity of persons with disabilities. This chapter seeks to provide concluding remarks in lieu of the analysis conducted in the study. These remarks are summarised below.

7.1 Summary of the Study

Using the qualitative research design, the study was set to ascertain the extent of inclusiveness in the religious setups, with particular focus on the Presbyterian Church of Ghana. Sampling seven participants, comprising three church executives and pastors and four PWDs from the Ga Trinity congregation of the Presbyterian Church, the study sought to determine the measures taken by the church to promote accessibility to persons with a mobility disability. Some of the key issues explored include the architectural design of church buildings, availability of welfare programmes to help PWDs with mobility impairments, and the church's doctrines and teaching about disability.

In terms of the physical structures, the research confirmed that the architectural designs of buildings belonging to the Presbyterian Church are not disability friendly. Almost all the church buildings, whether old or new, lack rails and ramps to facilitate easy access to people with a mobility disability. Again, it was found out that all the church facilities do not have appropriate lavatories that PWDs can conveniently use. As a result, PWDs who cannot access the church buildings on their own are either guided to do so or carried into and out of the building during worship periods by designated ushers. Similarly, any PWD who desires to use lavatories did so facing the likely risk of falling and/or getting themselves injured in the process. Similarly, on the welfare programmes, it was found out that the Presbyterian Church does not have institutionalised welfare programmes for the disabled at the time this research was conducted. However, based on the discretion of individual pastors and church leaders, a few of the PWDs were given a limited stipend to support themselves, whereas others were supported psychologically through home visits. Based on the Social Model of Disability, it was determined that the absence of PWDs from religious activities is due to the limitations posed by the structural and doctrinal deficits.

On account of this prevailing situation in the church, the PWDs are generally not satisfied with the treatment meted out to them as congregants of the E.P Church. A general understanding of the PWDs of the church revealed the perception that the E.P church does not care about PWDs. Thus, the arrangement and decisions making the process of the organization are inhumane to vulnerable people in the church, particularly those with disabilities and the aged. This presupposes the church's disregard for a non-competitive doctrine that ensures that every congregant is treated fairly.

It was however observed that the leadership of the church has identified and acknowledged this deficit in the church, and is taking strategic steps to make the church more inclusive and democratically welcoming to all persons, particularly, persons with disabilities. As such, in August 2019, the E.P Church formulated the Disability Policy, which tackles all the challenges faced by PWDs in the church. Due to the effects of the COVID-19 pandemic on church activities, however, the policy was not enforced. These notwithstanding there are doubts concerning the effective enforcement of the policy when the pandemic ceases to exist. This is because no structural and institutional adjustments have been made by the church to accommodate the new measures proposed in the policy.

Consequently, the PWDs called for government intervention in all religious settings to enforce the existing Disability Act 2006 (Act 175). It must be noted that since the government has not been able to equally enforce the provisions of the Disability Act within its institutions across the country, there is little hope that it will have the moral ground to compel religious organizations to implement the provisions of the Act.

7.2 Recommendations

The recommendations provided in this section are derived from the suggestions gathered from participants in this research and the analysis conducted using primary data and scholarly literature relevant to the research. It must be noted that although the recommendations are not exhaustive, they, however, touched on the salient concepts explored in this research. It was classified under three subheadings: Church, Policy and Research.

7.2.1 Church

- The Church must organize workshops for all ministers and pastors of the Presbyterian Church to educate them on the rights of PWDs and the provisions of the Disability Act of Ghana.
- Select leaders based on their understanding and respect for persons with disability in the Church. This will create a general culture of acceptance for persons with disabilities across all the congregations of the church.
- Select and support persons with disabilities to occupy leadership positions at decision-making levels across all the department and institutional levels of the Presbyterian Church. Thus, from the national level to regional, district and congregational levels, persons with disabilities must be appointed to occupy positions to guarantee the representativeness of their views and privileges in the church.
- Instruct churches to engage in renovation projects across the church's worship and office buildings to make them more disability-friendly.
- Compel the construction of lavatories at all church branches in a disability-friendly manner.
- Collaborate with other disability institutions, like the department of social work, the Ghana Federation of the Disabled, the Ghana Society of the Physically Disabled (GPSD) and the Ghana Blind Union to educate congregants, pastors and PWDs on the rights and privileges of PWDs in Ghana.

7.2.2 *Policy*

- The government of Ghana must ensure the effective enforcement of the Disability Act in all sectors of the country, particularly, the church where a lot of people perceive disability as a state of sinfulness.
- There should be periodic surveillance of churches to monitor the convenience of church buildings, lavatories, and designs of auditoriums to persons with disabilities. Buildings without rails and ramps must be compelled by law to construct it.
- Pronounce as illegal, any teaching or religious doctrine that dehumanises and discriminates against persons with disabilities.
- Promote formal education for persons with disabilities.
- Establish programmes to deliver real-time supports to families with disabilities.

7.2.3 Further Research

Deprivation of basic liberties and rights of persons with disabilities constitute abuse against them. Unfortunately, occurrences of this abuse at religious sectors are perceived divine and hence disregarded. In Ghana, only a few studies are conducted to ascertain abuse against the disabled, and other vulnerable groups in the church and at the mosque. In order to institute effective programmes to avert such dehumanizing treatments against vulnerable groups at places of worship, this research suggests a more comprehensive government-initiated survey to ascertain the extent of the problem in order to formulate laws to rectify it. Civil society organisations that provide assistance to religious organizations to support the wellbeing of vulnerable people should also embark on research to ascertain the extent to which targets of donations are benefiting from it. This will help to sanitise the religious sector and make it more inclusive to everybody, particularly persons with disabilities.

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APPENDICES

APPENDIX A:

VID SPECIALIZED UNIVERSITY, OSLO

Date	/	/	20	20

Background

My name is Collins Agyenim-Boateng; I am a student of Vid Specialized University, Oslo conducting a study on Disability Mobility in the Church. The research forms part of my academic work for the award of a Master's Degree.

Purpose of the Research

This research is intended to investigate the availability of architectural and other infrastructural designs to facilitate the mobility of Persons with Disabilities in the Presbyterian Church of Ghana. It seeks to the motivation behind the disability policies and programmes adopted by the church.

Participation

Your participation in this study is voluntary, and as such, you have the right to withdraw anytime you feel any discomfort during the data collection process. If you decide to withdraw from the study, the data provided by you will be destroyed.

Risks and Benefits

You may feel exposed to revealing sensitive information during the study. Confidentiality is highly guaranteed for you to feel free to talk to the researchers. The study will be beneficial in that it will inform policymakers to pursue policies and programmes that promote the wellbeing of PWDs.

Confidentiality

All personal identifying information about yourself will remain confidential and will not be included in the final write up. Any quotations to be used in reporting the findings will not include names or any identifying data to ensure anonymity. All recordings and transcripts will only be accessible to the researcher.

Compensation

Since the study is purely academic work, the researcher has not planned to give any financial compensation to respondents for participating in the study.

Funding Information

The participant will incur no cost, and there will be no remuneration for the participant. You are assured that the information provided will be used solely for the purpose of the study. This study is solely sponsored by the principal investigator.

APPENDIX: Information Letter and Consent

Are you interested in taking part in the research project?

Disability Mobility in the Church.

A qualitative study of accessibility promotion in the Presbyterian church of Ghana, Accra Trinity Congregation.

This is an inquiry about participation in a research project where the main purpose is to collect data for the purpose of writing a master thesis at the programme titled master in diakonia and Christian social practice at VID specialized university. In this letter we will give you information about the purpose of the project and what your participation will involve.

Purpose of the project

This research is intended to investigate the availability of architectural and other infrastructural designs to facilitate the mobility of Persons with Disabilities in the Presbyterian Church of Ghana. It seeks to the motivation behind the disability policies and programmes adopted by the church. How does the Presbyterian Church in Ghana, Accra circuit create awareness and promote accessibility to buildings of persons living with wheelchairs physical disability to develop their potentials and how disabled church members experience their situation

Who is responsible for the research project?

VID Specialized University is the institution responsible for the project.

Why are you being asked to participate?

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You are asked to participate because you are related to a church in which there are people with difficult access. You will be asked about your experiences as members of the church being not able to have access to the sermon due to physical disability or if you are a church leader, you are asked to contribute with your reflections on the matter.

What does participation involve for you?

Participation involves taking part in an interview. The interview will last for not more than 50to 60 minutes. This interview will be recorded, the recording device and the inform consent form will be kept separately as well as the text from the interviews. This will be done to ensure that any information given can not traced to the individual personally.

Participation is voluntary

Participation in the project is voluntary. If you chose to participate, you can withdraw your consent at any time without giving a reason. All information about you will then be deleted. There will be no negative consequences for you if you chose not to participate or later decide to withdraw.

Your personal privacy – how we will store and use your personal data

I will only use your personal data for the purpose(s) specified in this information letter. I will process your personal data confidentially and in accordance with data protection legislation (the General Data Protection Regulation and Personal Data Act).

In protecting your identity, your name and contact details will be coded. The list of the coded names of all participants, contact details will be stored separately from the rest of the collected data.

What will happen to your personal data at the end of the research project?

The project is scheduled to end of 30 May 2020. The data will be obliterated after the master thesis has been accepted by VID and no later then 30 November 2020.

Your rights

So long as you can be identified in the collected data, you have the right to:

- access the personal data that is being processed about you
- request that your personal data is deleted
- request that incorrect personal data about you is corrected/rectified
- receive a copy of your personal data (data portability), and

- send a complaint to the Data Protection Officer or The Norwegian Data Protection Authority regarding the processing of your personal data

What gives us the right to process your personal data?

We will process your personal data based on your consent.

Based on an agreement with [VID Specialized University], NSD – The Norwegian Centre for Research Data AS has assessed that the processing of personal data in this project is in accordance with data protection legislation.

Where can I find out more?

If you have questions about the project, or want to exercise your rights, contact:

VID Specialized University via Anne Austad Førsteamanuensis / Associate Professor anne.austad@vid.no

 $+47\ 22451910\ /\ +47\ 92446904$. You could contact me via my mobile number 0048669872 or my email agyenimbc@gmail.com

VID vitenskapelige høgskole / VID Specialized University

• NSD – The Norwegian Centre for Research Data AS, by email: (personverntjenester@nsd.no) or by telephone: +47 55 58 21 17.

Yours Sincerely,

Project Leader (Supervisor)

Student

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NSD Project Number: 119898

5.3.2020

Date of Approval:

☐ To participant in an interview ☐ For information about myself to be published in a way that I can be recognized in that the names of the individual congregation will be given, however, participant names will not be given. Consent of participants were recorded on audio tapes. I give consent for my personal data to be processed until the end date of the project, approx. 27 of June 2020	I have received and understood information about the project <i>the church and the people living with disability</i> and have been given the opportunity to ask questions. I give consent:				
	☐ For information about myself to be published in a way that I can be recognized in that the names of the individual congregation will be given, however, participant names				
	• • • • • • • • • • • • • • • • • • • •				
Appendix iii: NSD Recommendations and Guidelines					

VID SPECIALIZED UNIVERSITY, OSLO

Interview Guide (PWDs)

Section A: Demographic Characteristics

1.	Level of Education: (a) Basic School (b) Senior High School (c) Tertiary (d) None
2.	
3.	The number of years of fellowship with the Presbyterian Church of
	Ghana
4.	Type of Disability
5.	Assistive devise you currently use
6.	Marital Status
7.	Parental Status

Section B: Environmental Assessment

- 1. Describe the architectural design of your congregation (Exterior and Interior Design)
- 2. Describe other religious and social infrastructural facilities in your congregation
- 3. Describe how you access church building and other religious/social spaces
- 4. Describe (if any) the kind of assistance you receive to enter the church premise/building and other social spaces.

Section C: Impacts on Social and Religious Activities

- 1. In what ways has the architectural designs affected your religious and social activities in Church?
- 2. How do you feel when receiving assistance to enter/access social and religious grounds?
- 3. Do you think you are ENTITLED to better treatment from the church than what currently exists?

Section D: Religious Doctrines and Practices

- 1. What, in your opinion, is the understanding of DISABILITY to the church leaders? (When preaching about DISABILITY, what do they normally stress on?)
- 2. What, in your opinion, is the understanding of DISABILITY to members of your congregation? (How do they describe your condition?)
- 3. Have your pastors (leaders) ever discussed your mobility challenges with you before? (Please explain).
- 4. What kind of welfare programmes exists in the church to support PWDs?
- 5. Do you think the church cares about your mobility issues? (Why?)

Section E: The Way Forward

- 1. What, in your opinion, can be done to compel religious leaders to build disability-friendly structures?
- 2. What can be done to change the perception of the church concerning disability?
- 3. What can be done to encourage PWDs to assert their rights in the church?

VID SPECIALIZED UNIVERSITY, OSLO

Interview Guide (Pastors)

Section A: Demographic Characteristics

1.	Level of Education: (a) Basic School (b) Senior High School (c) Tertiary (d) None
2.	Age
	Years of experience as in the Presbyterian Church of Ghana
4.	Current role in the Church
5.	Marital Status
6.	Parental Status

Section B: Environmental Assessment

- 1. Describe the architectural design of your congregation (Exterior and Interior Design)
- 2. Describe other religious and social infrastructural facilities in your congregation
- 3. Describe how PWDs access church building and other religious/social spaces
- 4. Describe (if any) the kind of assistance PWDs receive to enter the church premise/building and other social spaces.

Section C: Impacts on Social and Religious Activities

- 1. In what ways have the architectural designs affected the religious and social activities of PWDs in the Presbyterian Church?
- 2. Based on the rules and regulations of the Presbyterian Church, what kind of assistance are PWDs ENTITLED to? (Do they receive them? Please explain)

Section D: Religious Doctrines and Practices

- 1. What is your understanding of DISABILITY?
- 2. From a religious perspective, what does it mean to be disabled?
- 3. Have you ever discussed mobility challenges with PWDS who attend church services with your congregation? (Please explain).
- 4. What kind of welfare programmes exists in the church to support PWDs?
- 5. What is your reflection on the church's cares about PWD mobility issues?

Section E: The Way Forward

- 1. What, in your opinion, can be done to compel religious leaders to build disability-friendly structures?
- 2. What can be done, if needed, to change the perception of the church concerning disability?

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3. What can be done to encourage PWDs to assert their rights in the church?