

Socio-Demographic and Socioeconomic Characteristics of Women with Disabilities in Yobe State, Nigeria

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DOI: <https://doi.org/10.62154/ajhcer.2025.021.01018>

Abstract

Women with disabilities constitute one of the most socially and economically marginalized groups in low- and middle-income countries, yet empirical evidence on their lived conditions remains limited, particularly in northern Nigeria. This study examines the socio-demographic and socioeconomic characteristics of women with disabilities in Yobe State, Nigeria. A cross-sectional descriptive survey design was employed, involving 459 women with disabilities aged 15 years and above drawn from Potiskum, Damaturu, and Yusufari Local Government Areas. Data were collected through face-to-face interviews using a structured questionnaire and analyzed using descriptive statistical techniques in SPSS version 26. The findings show that the majority of women with disabilities are within the economically active and reproductive age group of 25–54 years. Most respondents are married, although a substantial proportion are divorced or widowed, indicating notable marital instability. Religiously, the population is overwhelmingly Muslim, reflecting the dominant religious composition of Yobe State, while ethnically the respondents are drawn from diverse groups, with Kare-Kare, Kanuri, and Fulani being the most represented. Socioeconomic results reveal very low levels of formal education, with most women having no Western education or only Islamic/Qur’anic education. Employment opportunities are similarly limited, as a majority of respondents are unemployed, and those who are economically active are largely engaged in informal activities such as petty trading. Overall, the study establishes that women with disabilities in Yobe State experience low socioeconomic status characterized by limited education and high unemployment, placing them in a position of heightened social and economic vulnerability. These findings underscore the need for disability-inclusive education, livelihood, and social protection policies.

Keywords: Women, Disabilities, Socio-demographic, Socioeconomic, Education and Employment.

Introduction

Disability has increasingly been recognized as a critical public health, social, and development concern, particularly within low- and middle-income countries where social protection systems and inclusive development policies remain weak. Recent global estimates indicate that approximately 1.3 billion people about 16 per cent of the world’s population live with some form of disability, with women constituting a disproportionately affected group due to intersecting social and gender inequalities (World Health Organization, 2022). Within sub-Saharan Africa, disability is closely associated with

poverty, limited access to education, poor health outcomes, and restricted participation in economic and social life (Seidu et al., 2024).

Women with disabilities experience multiple and overlapping forms of disadvantage arising from the interaction of gender norms, socioeconomic marginalization, and disabling environments. Evidence from recent studies shows that women with disabilities are more likely than their male counterparts and non-disabled women to have lower educational attainment, limited employment opportunities, reduced income, and increased exposure to social exclusion (Banks, et al., 2017; United Nations Department of Economic and Social Affairs, 2021). These disadvantages are particularly pronounced in fragile and conflict-affected settings, where weak institutions and persistent insecurity further constrain access to basic services and livelihood opportunities.

In Nigeria, disability remains under-researched and under-documented, especially at sub-national levels. Although recent policy efforts, including the Discrimination Against Persons with Disabilities (Prohibition) Act of 2018, signal growing national commitment to inclusion, empirical evidence suggests that persons with disabilities continue to face significant barriers to education, employment, healthcare, and social participation (Azubuike et al., 2025). Women with disabilities are especially vulnerable due to entrenched patriarchal norms, high levels of poverty, and limited access to formal support systems. Despite this, disaggregated data on their socio-demographic and socioeconomic characteristics remain scarce.

Yobe State, located in North-East Nigeria, presents a particularly compelling context for examining the socio-demographic characteristics of women with disabilities. The state has experienced prolonged insecurity, widespread poverty, and weak social infrastructure, all of which exacerbate existing vulnerabilities among persons with disabilities. For women with disabilities, these conditions intersect with cultural practices, low female educational participation, and limited economic opportunities to deepen social and economic exclusion. Yet, there is a notable lack of empirical studies that systematically document their demographic profiles and living conditions, thereby limiting evidence-based policy formulation and programme design.

Guided by the social model of disability, this study conceptualizes disability as a product of social, economic, and institutional barriers rather than solely as an individual impairment. From this perspective, observed patterns in education, employment, income, and marital status among women with disabilities are interpreted as outcomes of structural exclusion and unequal access to opportunities. By analyzing the socio-demographic and socioeconomic characteristics of women with disabilities in Yobe State, this study seeks to fill a critical data gap and contribute to contemporary debates on disability, gender, and inclusive development in Nigeria. The findings are expected to provide empirical evidence to inform disability-inclusive policies and interventions at state and national levels.

Problem Statement

Despite growing global and national attention to disability-inclusive development, women with disabilities remain one of the most marginalized social groups in Nigeria. Existing national statistics and policy documents largely provide aggregated data on persons with disabilities, with limited gender-disaggregated and sub-national evidence. As a result, the specific socio-demographic and socioeconomic realities of women with disabilities particularly in conflict-affected and economically disadvantaged states such as Yobe are insufficiently understood. This data gap constrains effective policy formulation, targeted interventions, and monitoring of disability-inclusive development initiatives.

In Yobe State, persistent insecurity, widespread poverty, low female literacy, and weak social infrastructure interact to intensify the vulnerability of women with disabilities. However, empirical studies that systematically document their age structure, educational attainment, marital status, employment patterns, and income levels are scarce. Where disability research exists, it often adopts a generalized approach that obscures gender-specific experiences and fails to account for the compounded effects of disability and gender-based exclusion. Consequently, policymakers and development actors lack reliable evidence to design programmes that respond to the lived realities of women with disabilities in the state.

Addressing this gap is critical, particularly within the context of Nigeria's commitments to the Sustainable Development Goals and the Discrimination Against Persons with Disabilities (Prohibition) Act. Without context-specific socio-demographic data, efforts to promote inclusion risk reinforcing existing inequalities. This study therefore responds to an urgent need for empirical evidence on the socio-demographic and socioeconomic characteristics of women with disabilities in Yobe State, providing a foundation for disability- and gender-responsive policy and planning.

Research Objectives

1. To investigate the socio-demographic profile of women with disabilities in Yobe State, Nigeria.
2. To examine the educational and employment status of women with disabilities and assess their socioeconomic position.
3. To explore the relationship between socio-demographic and socioeconomic factors and the social and economic vulnerability of women with disabilities.

Research Questions

1. What are the socio-demographic characteristics of women with disabilities in Yobe State in terms of age, marital status, religion, and ethnicity?
2. What are the levels of education and employment among women with disabilities, and how do these factors shape their socioeconomic status?
3. How do socio-demographic and socioeconomic factors interact to influence the social and economic vulnerability of women with disabilities in Yobe State?

Theoretical Framework: Social Model of Disability

This study is grounded in the Social Model of Disability, which distinguishes between impairment understood as a functional limitation and disability, conceptualized as the social exclusion that arises from physical, institutional, and attitudinal barriers. The social model challenges biomedical perspectives that locate disability solely within the individual, instead emphasizing how societal structures, policies, and cultural norms create disabling environments (Oliver, 1996; Shakespeare, 2018).

Within the context of women with disabilities in Yobe State, the social model provides a critical interpretative lens for understanding observed socio-demographic and socioeconomic patterns. Low educational attainment, limited participation in formal employment, income poverty, and marital vulnerability identified in the data are interpreted not as inevitable consequences of impairment, but as outcomes of structural exclusion, gender discrimination, and unequal access to resources. In conflict-affected settings such as North-East Nigeria, these barriers are further compounded by insecurity, displacement, and weakened service delivery systems. The framework enables a nuanced interpretation of how disability intersects with gender and socioeconomic disadvantage to shape life chances. It also provides a basis for translating empirical findings into policy-relevant insights, emphasizing the need for structural and institutional reforms rather than individual-level interventions alone.

Methodology**Study Area**

The study was conducted in Yobe State, located in northeastern Nigeria. Yobe State is predominantly rural, with agriculture and informal economic activities forming the backbone of livelihoods. Yobe State is located between latitude 10° 30' N to 13° 27' N and longitude 9° 35' E to 12° 30' E characterized by a semi-arid climate, dispersed rural settlements, and limited health infrastructure (figure 1). The state is characterized by ethnic diversity, including Kanuri, Kare-Kare, Fulani, Hausa, Bade, and Ngizim ethnic groups, and is overwhelmingly Muslim (National Population Commission [NPC], 2023). Three Local Government Areas Potiskum, Damaturu, and Yusufari were purposively selected to reflect urban, semi-urban, and rural contexts, thereby capturing variations in socio-demographic and socioeconomic conditions among women with disabilities.

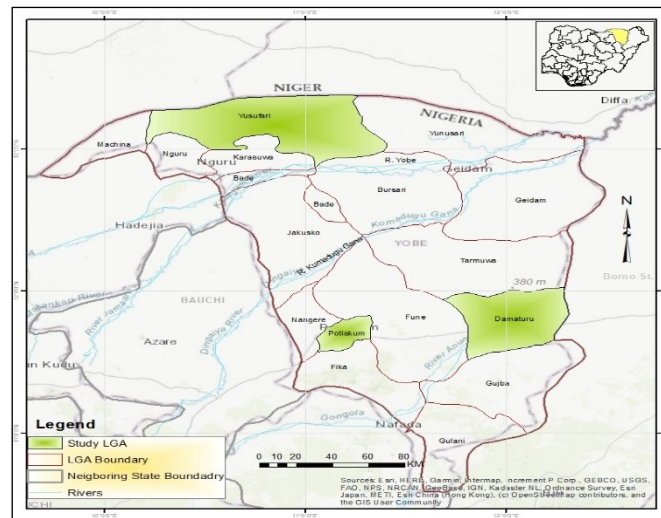


Figure 1: Map of Yobe showing the study area

Source: Geographic information service (GIS) laboratory, Yobe State University, Damaturu.

Research Design

A descriptive survey research design was employed for this study because it allows for the systematic description of population characteristics and the identification of patterns across key socio-demographic variables such as age, marital status, religion, ethnicity, educational attainment, and employment status (Babbie, 2020). This design enabled the collection of quantitative data at a single point in time, allowing for comparative analysis across different Local Government Areas (LGAs).

Study Population

The study population comprised women with disabilities aged 15 years and above residing in the selected LGAs of Yobe State. Disabilities included physical, visual, hearing, and other functional impairments. The age threshold of 15 years was adopted because it aligns with the commonly accepted definition of reproductive and working-age populations in demographic and health studies (WHO, 2022).

Sample Size and Sampling Procedure

A total of 459 women with disabilities participated in the study. The sample size was determined based on accessibility and population distribution of women with disabilities across the selected LGAs, consistent with approaches used in disability-focused community surveys in low-resource settings (United Nations Department of Economic and Social Affairs, 2021). A multistage sampling technique was employed, stage one: Purposive selection of Potiskum, Damaturu, and Yusufari LGAs based on population density and availability of disability associations. Stage two: identification of women with disabilities through registered disability associations, community leaders, and local health workers, a method widely used in disability research where sampling frames are limited (Trani et al., 2011). Stage three: Snowball sampling was used to reach additional respondents,

particularly in rural areas where women with disabilities may be socially isolated or hidden due to stigma (Emmett & Alant, 2006). This approach ensured adequate representation across age groups, marital status categories, and socioeconomic backgrounds.

Data Collection Instrument

Data for this study were collected using a structured questionnaire adapted from internationally validated instruments on disability, reproductive health, and contraceptive use developed by the World Health Organization and the World Bank (WHO & World Bank, 2011). The questionnaire was translated into Hausa and Kanuri to ensure comprehension and inclusivity, particularly for respondents with low literacy. It comprised three sub-scales: socio-demographic characteristics (age, marital status, religion, and ethnicity), socioeconomic characteristics (educational attainment and employment status), and reproductive health behavior (contraceptive knowledge, use, type, and frequency). A pilot study involving 30 women with disabilities from neighbouring Borno LGAs (Biu local government) was conducted to assess reliability, and Cronbach's alpha values were 0.72, 0.78, and 0.81 for the socio-demographic, socioeconomic, and reproductive health sub-scales, respectively, with an overall alpha of 0.79, these results indicate good internal consistency, confirming that the instrument was reliable for capturing the constructs of interest.

Method of Data Collection

Primary data were collected through face-to-face interviews, which is considered appropriate for populations with low literacy levels and diverse disabilities (Trani et al., 2011). This approach minimized non-response bias and ensured inclusion of women with limited formal education, as reflected in the study results.

Data Analysis

Data were coded and analyzed using the Statistical Package for Social Sciences (SPSS version 26.0). The analysis involved multiple complementary approaches. Descriptive Statistics: Frequencies, percentages, and cumulative percentages were used to summarize socio-demographic and socioeconomic characteristics. To explore and clearly present relationships between socio-economic characteristics and reproductive behavior, visual tools such as stacked bar charts and heat maps were employed. Stacked bar charts allowed comparison of categories such as educational attainment and marital status across reproductive outcomes, while heat maps provided a clear visual representation of correlation patterns between multiple variables.

Results

Age

The age distribution in figure 2 indicates majority of WWDs in Yobe State fall within the 24 – 54 years' age group, which collectively represents 74% of the valid responses. This

suggests a significant concentration of disability among women in their economically active and reproductive years. The age distribution of respondents reflects a predominantly youthful yet mature population, indicating that disability experiences intersect with critical reproductive and economically productive phases of life. Evidence from East African studies demonstrates similar age clustering, where younger and middle-aged women with disabilities report higher levels of exclusion from education and employment opportunities (Mac-Seing et al., 2022).

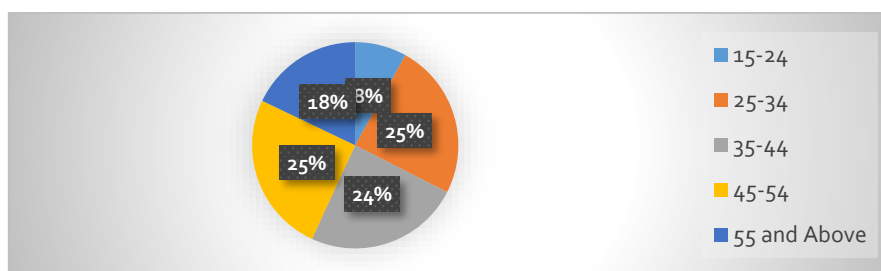


Figure 2: Age of Women with Disability in the Study Area

Source: Author's Analysis, 2024.

According to the SMD, the marginalization of younger women with disabilities stems from inadequate community and institutional adaptation rather than biological factors. In SSA, where early marriage and low access to inclusive education prevail, the absence of inclusive schooling and vocational opportunities perpetuates vulnerability and reinforces marital instability (Sightsavers, 2021).

Marital Status and Instability among Women with Disabilities

Table 1 in the study indicates that 59.91% of women with disabilities (WWDs) in Yobe State were married, while 22.44% were divorced, 12.64% were widowed, and 5.01% were single. The data reflect considerable marital instability, with nearly half (35.08%) of respondents having experienced divorce or widowhood. This finding aligns with trends observed across Sub-Saharan Africa (SSA), where marital instability among WWDs is frequently associated with gendered socio-economic roles and discriminatory cultural attitudes (Engelbrecht et al., 2023). A regional study by Rotenberg et al. (2024) found that in Ghana and Uganda, up to 40% of WWDs experienced marital breakdowns within the first five years of marriage due to stigma and economic dependence.

Table 1: Marital Status

Marital Status	Frequency	Percent (%)
Single	23	5.01
Married	275	59.91
Divorced	103	22.44
Widowed	58	12.64
Total	459	100.0

Source: Author's Analysis, 2024.

Under the Social Model of Disability (SMD), such instability stems not from impairments themselves but from structural and social barriers. In contexts like Yobe, the societal expectation that women perform extensive domestic and caregiving duties contributes to perceived inadequacy of WWDs in fulfilling traditional roles. Economic exclusion and gendered dependency further compound these challenges (Engelbrecht et al., 2023). The SMD posits that marital instability arises where social institutions fail to support inclusion and equal participation, rather than from personal or physical limitations.

Religion

The results in figure 3 show that the majority of women with disabilities in all LGAs are Muslims, while those identifying as Christians represent a very small proportion. Notably, in Yusufari, there are no Christian women with disabilities among the respondents. The findings reveal a pronounced contrast in levels of religiosity across different population densities within Yobe State. Specifically, respondents from the less densely populated Yusufari Local Government Area (LGA) demonstrated stronger adherence to traditional and belief-oriented dimensions of religiosity when compared to those in the more urbanized and densely populated areas of Damaturu and Potiskum LGAs. This pattern aligns with the conclusions of Nikkhah et al. (2014), who found that rural residents of Mahmoudabad City exhibited significantly higher levels of religious belief and ritual participation than their urban counterparts.

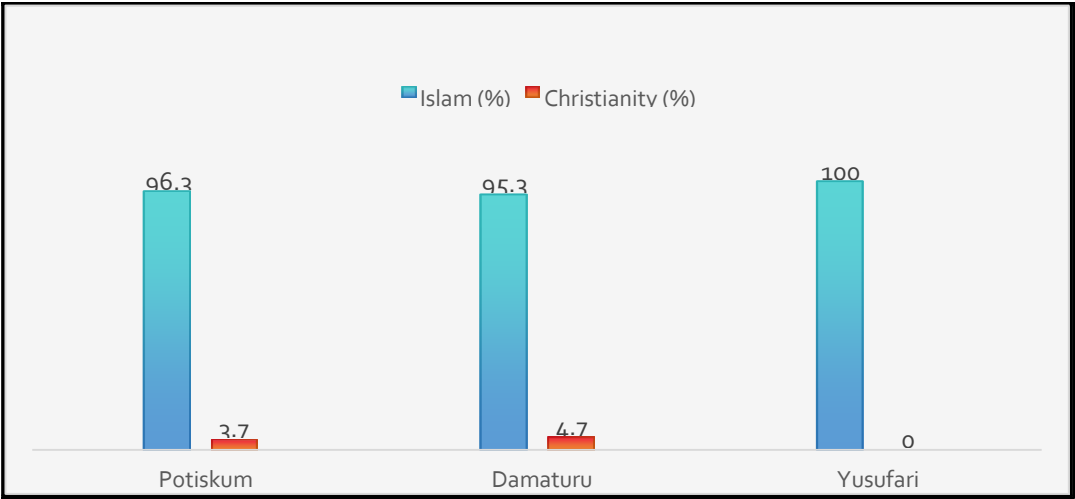


Figure 3: Religious Belief of WWDs
Source: Author’s Analysis, 2024.

Ethnicity

Table 2 presents the ethnic composition of women with disabilities in Yobe State. The distribution includes a variety of ethnic groups native to the region, with the highest representation among the Kare-Kare (19.83%), Kanuri (19.17%), and Fulani (15.90%) ethnic groups. The Hausa (13.94%), Ngizim (10.24%), and other ethnic groups (6.75%) also have

significant representation. Minorities such as the Bade (5.89%), Ngamo (4.36%), and Bolewa (3.92%) follow. One entry is ambiguous due to incomplete categorization.

Table 2: Ethnicity

Ethnicity	Frequency	Percent (%)
Kanuri	88	19.17
Hausa	64	13.94
Fulani	73	15.90
Bade	27	5.89
Kare-Kare	91	19.83
Bolewa	18	3.92
Ngizim	47	10.24
Ngamo	20	4.36
Other ethnic groups	31	6.75
Total	459	100.0

Source: Author's Analysis, 2024.

The ethnic distribution reflects the broader demographic patterns of Yobe State, which is home to diverse ethnic communities, with Kanuri, Kare-Kare, and Fulani being dominant (National Population Commission [NPC], 2024). The notable representation of these groups among women with disabilities may not necessarily indicate higher prevalence of disability within those groups, but could reflect their demographic weight in the population and their greater visibility in social research.

The largest proportion of respondents were Kare-Kare (19.83%), which is slightly higher than Kanuri (19.17%). This finding is notable given that the Kanuri are often regarded as the dominant ethnic group in Yobe State (Mustapha, 2006). Ethnic identity can significantly shape attitudes toward disability, including perceptions, care practices, and patterns of social inclusion. Research in northern Nigeria has shown that disability is frequently interpreted through cultural, spiritual, or metaphysical lenses, which may influence how persons with disabilities are treated within their communities (Sango et al., 2022). Among some northern Nigerian ethnic groups, such beliefs can result in both compassionate care and social exclusion, depending on prevailing local norms and interpretations.

Educational Background

Table 3 shows that only 12.42% of WWDs in Yobe attained tertiary education, compared to 12.64% with secondary education, 16.34% with primary education, and 58.61% with no formal education (Islamic/Qur'anic). This pattern reveals a persistent educational gap. SSA data corroborate this, showing that fewer than 10% of children with disabilities complete secondary education compared to over 40% of non-disabled peers (World Bank, 2018).

From the perspective of the Social Model of Disability, these disparities are not primarily the result of individual impairments but are shaped by environmental and institutional barriers. Such barriers include inaccessible physical infrastructure, limited availability of

trained personnel, and persistent stigma within educational and social institutions, all of which restrict meaningful participation by persons with disabilities (UNESCO, 2020).

Table 3: *Educational Background Status*

Educational Background	Frequency	Percent
Non formal education (Islamic/Qur'anic)	269	58.61
Primary certificate	75	16.34
Secondary certificate	58	12.64
Tertiary certificate	57	12.42
Total	459	100.0

Source: Author's Analysis, 2024.

Research across SSA emphasizes that exclusionary practices in schools, combined with gender-based biases, push girls with disabilities out of formal education (Samia et al., 2022). In Yobe, socio-economic pressures further exacerbate this, as families often prioritize able-bodied children for limited educational resources. Consequently, lower educational attainment contributes to restricted employment options, marital dependency, and social exclusion.

Employment Status

Table 4 shows that more than half of the women with disabilities in all three LGAs are unemployed. However, a significant proportion of these women are involved in petty trading activities across the LGAs. The most striking feature of this figure is the very high unemployment rate (62.96%) among women with disabilities in Yobe State. This suggests a systemic exclusion from economic participation and a lack of inclusive employment opportunities. Meanwhile, the informal sector, particularly petty trading (23.74%), appears to be the most accessible means of livelihood for this group. Only a very small minority are engaged in formal employment as civil servants (6.1%), student (6.31%) and even fewer are others (1.01%) in any form of structured profession.

Therefore, the study shows that disabled women in Yobe State have low socioeconomic status and thus, vulnerable to reproductive health challenges, which can affect their reproductive behavior. In addition, limited access to employment opportunities and structural barriers within the labour market continue to expose women with disabilities to heightened financial vulnerability (Thompson, 2019). Empirical studies among rural women with disabilities in Nigeria further indicate that many come from low socioeconomic backgrounds, which compounds the challenges they face in accessing healthcare services and other essential social supports (Iwuagwu et al., 2023).

Furthermore, Mitra et al., (2017) in their study on disability gap in employment rate which covered fifteen developing countries including seven African countries revealed that, women without disabilities are more employed than disabled women. Thus, disabled women have low socioeconomic status and are less likely to be employed than non-disabled

women thus, the employment landscape for women with disabilities in Yobe State is characterized by high levels of unemployment, informal sector dominance, and minimal formal employment.

Table 4: *Employment Status of Women with Disability*

L.G.A	Employment Status	Frequency	Percent (%)
Potiskum	Civil servant	9	3.66
	Petty trader	65	26.42
	Unemployed	157	63.82
	Student	15	6.10
	Total	246	100.0
Damaturu	Civil servant	8	4.73
	Petty trader	33	19.53
	Farmer	6	3.60
	Unemployed	108	63.91
	Student	9	5.32
	Other	5	2.91
	Total	169	100.0
Yusufari	Civil servant	11	25.00
	Petty trader	4	9.09
	Unemployed	24	54.55
	Student	5	11.36
	Total	44	100.0

Source: Author's Analysis, 2024.

Types of Disabilities

Figure 4 identifies that 45.3% of respondents had physical Disabilities, 26.8% visual impairments, 19.2% hearing impairments, mental health challenge 3.5%, 2.4%, multiple disabilities and 2.8% others. The dominance of physical impairments mirrors national disability surveys in Nigeria and reflects patterns seen across SSA (Azubuike et al., 2025). The SMD interprets these variations as socially constructed barriers: limited accessibility infrastructure and inadequate assistive technologies create disabling environments rather than inherent incapacity. Inclusive design, rehabilitation services, and policy enforcement remain key to addressing these inequities.

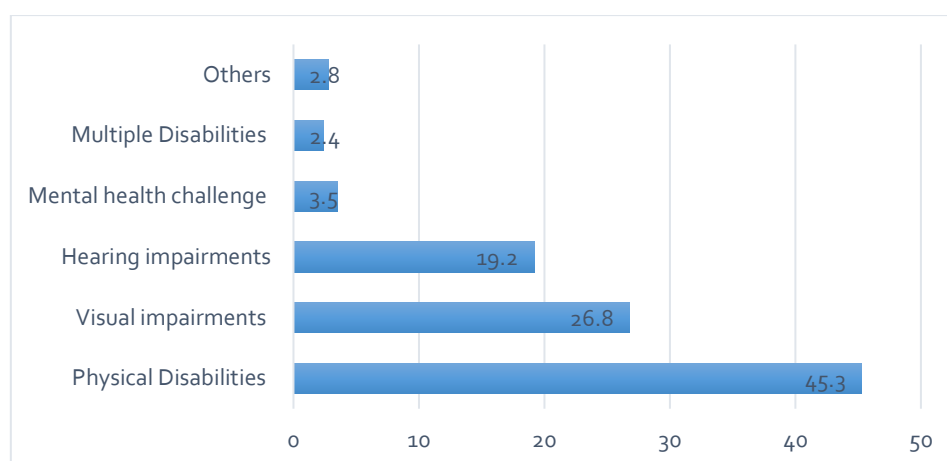


Figure 4: *Type of Disabilities*

Source: Author's Analysis, 2024.

Relationship Between Socio-Economic Characteristics and Reproductive Behavior

Data visualization tools such as stacked bar charts and heat maps were used to present these relationships clearly and provides a deeper exploration of how socio-economic characteristics namely education and employment relate to reproductive behavior, with specific emphasis on contraceptive use among women with disabilities.

Education and Contraceptive Use

The bar chart and heatmap reveal a strong positive relationship between educational attainment and contraceptive use. Women with secondary education and above are more likely to use contraception, whereas non-users are heavily concentrated among those with no formal education or only Islamic/Qur'anic schooling. This pattern suggests that education improves health literacy, awareness of reproductive options, and autonomy in decision-making. Similar result was revealed in Seidu et al., (2024) in their study educational Intervention to Raise Awareness of Contraceptive Options Among Young People in San Francisco where they show that educational intervention significantly improved the awareness of contraceptives among students.

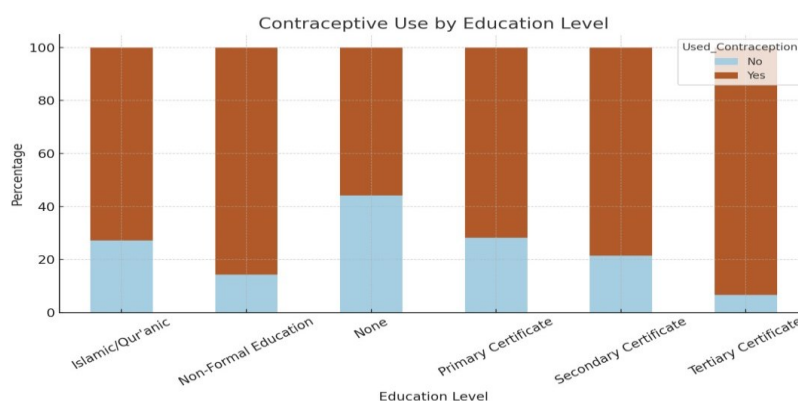


Figure 5: *Stacked Bar Chart – Contraceptive Use by Education Level*

Source: Author's Analysis, 2024.

Employment and Contraceptive Use

Employment status also significantly influences contraceptive behavior. Women in formal or semi-formal employment such as civil service and trading show markedly higher contraceptive use. Conversely, women who are unemployed or serve as full-time housewives demonstrate lower usage. This trend suggests that economic empowerment facilitates not just access to reproductive healthcare services but also reinforces women's confidence in using them. This is also confirmed by Seidu et al., (2024) in the study of empowering Women and Use of Reproductive Health Services where it revealed that empowerment led to a higher rate of reproductive health service utilization.

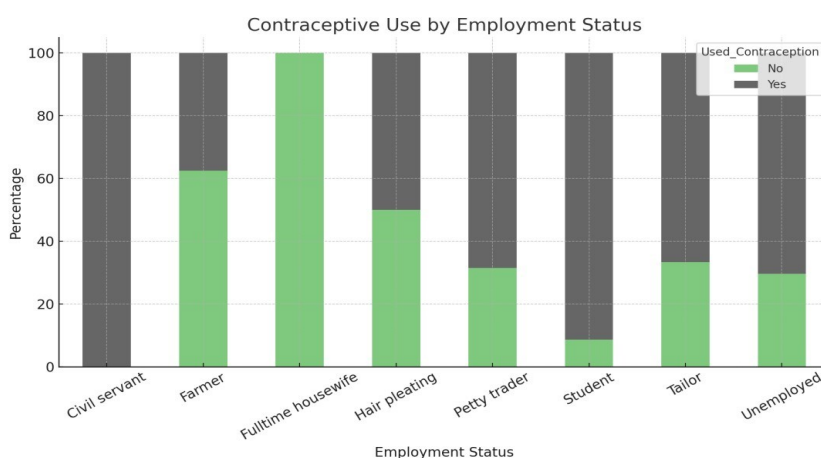


Figure 6: Stacked Bar Chart – Contraceptive Use by Employment Status

Source: Author's Analysis, 2024.

Education vs Contraceptive Use

This chart shows the proportion of contraceptive use across different levels of education. A clear positive gradient exists: women with no formal education or only Islamic/Qur'anic schooling report minimal contraceptive use, whereas those with tertiary and postgraduate education show markedly higher uptake. This aligns with studies such as Cleland et al. (2012), who reported that education not only increases awareness of family planning but also fosters decision-making power and access to health services.

This bar chart illustrates contraceptive use across employment types. Civil servants and petty traders show high levels of contraceptive uptake, whereas housewives and unemployed women report minimal usage. The pattern reinforces the notion that economic empowerment correlates with increased reproductive agency (Seidu et al., 2024). Employment provides both the autonomy and financial capacity to access modern contraceptive methods.

Heatmap: Education vs Contraceptive Use

The heatmap intensifies the contrast in contraceptive uptake among educational levels. It visually confirms that women with tertiary education dominate the 'Yes' contraceptive

category, while non-users cluster around lower educational levels. This supports findings by Mac-Seing et al. (2022), who observed education as a robust predictor of contraceptive prevalence in Nigeria.

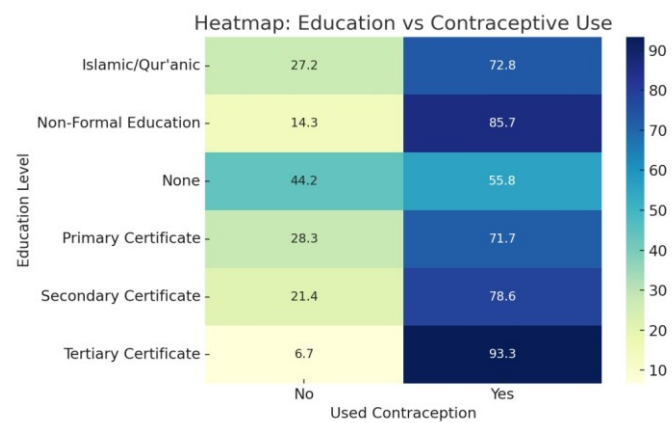


Figure 7: Heat map – Education vs. Contraceptive Use
Source: Author’s Analysis, 2024.

Heatmap: Employment vs Contraceptive Use

This heatmap demonstrates the strength of association between employment type and contraceptive use. Civil servants show the strongest uptake, whereas housewives and farmers are clustered in non-use. This validates evidence from NPC & ICF (2019) that economic participation increases contraceptive coverage.

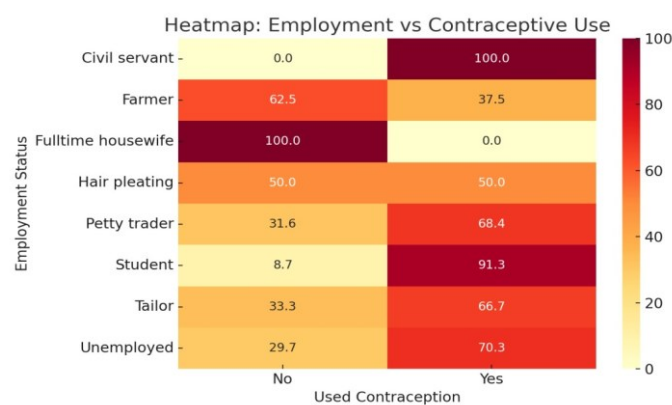


Figure 8: Heat map – Employment vs. Contraceptive Use
Source: Author’s Analysis, 2024.

Conclusion

This study examined the socio-demographic and socioeconomic characteristics of women with disabilities in Yobe State, Nigeria, using descriptive survey data collected from 459 respondents across urban, semi-urban, and rural Local Government Areas. The findings clearly demonstrate that women with disabilities in Yobe State are predominantly within

the economically active and reproductive age group, with nearly three-quarters of respondents aged between 25 and 54 years. This concentration indicates that disability among women in the state largely affects those who would ordinarily be expected to participate actively in economic and family life.

The marital status profile shows that the majority of women with disabilities are married, accounting for almost 60% of respondents. However, a substantial proportion are divorced or widowed, together representing over one-third of the sample. This pattern suggests that while marriage is common among women with disabilities in Yobe State, marital instability and spousal loss are also significant features of their social experience. The very small proportion of single women further reflects prevailing cultural norms that promote marriage among women irrespective of disability status.

Religious affiliation among respondents is overwhelmingly Islamic across all study locations, reflecting the dominant religious composition of Yobe State. Stronger expressions of religious homogeneity were observed in rural areas, particularly in Yusufari LGA. Ethnically, women with disabilities are drawn from a wide range of groups, with Kare-Kare, Kanuri, and Fulani being the most represented. This ethnic distribution largely mirrors the general population structure of the state, indicating that disability cuts across ethnic boundaries rather than being concentrated within a single group.

The socioeconomic findings reveal a markedly low level of formal educational attainment among women with disabilities. Nearly three-quarters of respondents reported having no Western formal education or having received only Islamic/Qur'anic education, while only a small minority attained secondary or tertiary education. This limited educational profile corresponds with the employment status findings, which show that a majority of women with disabilities are unemployed. Among those who are economically active, engagement is largely confined to informal activities, particularly petty trading, with very few women employed in the formal sector or enrolled in educational institutions.

Overall, the study establishes that women with disabilities in Yobe State are characterized by low educational attainment, high unemployment, and limited participation in formal economic structures. These socio-demographic and socioeconomic characteristics collectively indicate a low socioeconomic status for most women with disabilities in the study area, placing them in a position of heightened social and economic vulnerability.

Recommendations

The following recommendations are drawn directly from the patterns observed in the study findings:

1. Given that the majority of respondents possess no formal Western education or only Islamic/Qur'anic education, educational programs targeting women with disabilities should prioritize basic literacy, continuing education, and skills development appropriate to their existing educational background.
2. Since most economically active women with disabilities are engaged in petty trading rather than formal employment, livelihood interventions should strengthen

and support informal-sector activities through skills enhancement, access to small-scale capital, and market support.

3. The high proportion of unemployed women within the 24–54 age group indicates the need for targeted economic inclusion strategies that focus on working-age women with disabilities who are currently outside the labour force.
4. The substantial proportions of divorced and widowed women suggest that marital instability is a significant factor in the lives of women with disabilities. Support programs should therefore recognize the specific vulnerabilities associated with divorce and widowhood among this population.
5. Given the ethnic diversity and religious homogeneity observed among respondents, interventions targeting women with disabilities should be culturally sensitive and inclusive across ethnic groups, while aligning with the dominant religious context of the study area.

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