

## Breaking Barriers: Exploring Attitudinal and Physical Exclusion of Students with Disabilities in Physical Education in Higher Education

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**ABSTRACT:** - This study explores the physical and attitudinal barriers that hinder the participation of students with disabilities in physical education (PE) activities in a tertiary educational institution in Ghana. Grounded in the Social Model of Disability (SMD) and Critical Disability Theory (CDT), the research adopted the qualitative case study design to examine how societal attitudes, institutional norms, and environmental constraints limit the inclusion of students with disabilities in PE settings. Data was collected through semi-structured interviews and non-participant observations involving 10 students with disabilities, 3 administrators, and 2 PE instructors. Thematic analysis revealed key challenges such as inaccessible sports facilities, lack of adaptive equipment, low teacher preparedness for inclusive instruction, and pervasive stereotypes that marginalize students with disabilities. These barriers not only impede physical participation but also affect the emotional well-being, academic engagement, and social integration of students. Findings highlight the disconnect between inclusive education policies and actual implementation in PE programmes in a public university. The study recommends the development of inclusive PE curricula, infrastructural improvements, disability awareness training for staff and students, and stronger policy enforcement to ensure equitable participation for all students. This study offers a context-specific framework for aligning policy and practice in inclusive PE in Ghanaian higher education.

**Keywords:** Physical barriers, attitudinal barriers, disabilities, participation, physical education, higher education

### I. INTRODUCTION

Students with disabilities in higher education institutions face persistent barriers to full participation in physical education (PE) programmes. At the University of Education, Winneba (UEW), these physical and attitudinal barriers manifest in ways that hinder inclusion, limit social integration, and compromise educational equity. Despite the presence of national policies supporting inclusive education, many students with physical and sensory impairments encounter daily challenges in accessing and participating meaningfully in PE activities. These challenges point to a broader systemic disconnect between policy intent and educational practice.

Physical Education (PE) is universally recognized as a critical component of holistic education, contributing significantly to students' physical health, mental well-being, and social development. In higher education, PE supports physical fitness while also promoting teamwork, leadership, and a sense of belonging within the academic community (Bailey et al., 2009). According to the World Health Organization (WHO,

2011), all individuals, including those with disabilities, should have the opportunity to engage in regular physical activity, with a recommended minimum of 60 minutes of moderate to vigorous activity daily for young people. Inclusive physical education ensures that students of all abilities can participate meaningfully in physical activities. The United Nations Convention on the Rights of Persons with Disabilities (UNCRPD, 2006) affirms the right of persons with disabilities to participate in physical education and sport “to the fullest extent possible.” Such participation not only enhances physical health but also reduces social stigma, boosts self-esteem, and improves communication and interpersonal skills (Sherrill, 2004; Goodwin & Watkinson, 2000).

Recent studies further underscore the role of PE in promoting inclusion and well-being. For example, Finkelstein et al. (2020) found that inclusive PE programmes improve mental health and social integration for students with disabilities. Similarly, Smith et al. (2018) emphasize the value of adaptive sports in building resilience and self-efficacy among marginalized students. Despite these established benefits and strong international advocacy, students with disabilities continue to encounter significant barriers to participation in PE. Globally, they are much less likely to engage in school-based physical activities than their non-disabled peers. Rimmer and Rowland (2008) report that children with disabilities are over four times less likely to participate in school sports due to a range of physical and social obstacles. These include inaccessible facilities, non-adaptive curricula, and inadequately trained instructors (Block & Obrusnikova, 2007). Many educators lack the necessary skills to modify activities appropriately, resulting in the unintentional exclusion of students with disabilities (Hutzler, 2003). Giese et al. (2017) point out that even with improved training, challenges related to funding and infrastructure persist. Chen et al. (2021) highlight the pressing need for policy reform and greater advocacy to bridge the gap between inclusive education theory and practice. Consequently, PE settings may reinforce prevailing societal attitudes that frame individuals with disabilities as incapable or dependent (Shakespeare, 2006).

Ghana mirrors these global challenges. Although the country has demonstrated commitment to inclusive education through various laws and policies, implementation remains inconsistent. The Persons with Disability Act, 2006 (Act 715) and the Inclusive Education Policy of 2016 require educational institutions to ensure accessibility and promote non-discriminatory practices. The 2016 policy specifically calls for inclusive physical environments and instructional adaptations to support all learners, including those with disabilities (Ministry of Education, 2016). However, empirical evidence indicates that many institutions, including universities, fall short of these mandates. Agbenyega and Deku (2011) found that most school infrastructure, including PE facilities, remains inaccessible due to the absence of ramps, elevators, and suitable restrooms. The lack of adaptive sports equipment further restricts participation. Amoako et al. (2019) note that these challenges are compounded by limited government funding and insufficient educator training.

At UEW, students with disabilities report difficulties in accessing PE venues, a lack of instructional accommodations, and minimal support for participation in physical activities. These physical constraints are exacerbated by social and attitudinal barriers, including low expectations, stigma, and exclusion from group activities (Avoke, 2001; Baffoe, 2013). Such experiences can lead to psychological withdrawal and reinforce feelings of inadequacy. Although Ghana’s inclusive education framework articulates clear goals, structural and cultural obstacles continue to impede full implementation. Until these barriers are addressed, students with disabilities will remain marginalized in PE, deprived of the comprehensive educational experiences available to their peers.

While several studies have examined inclusive education in general, there is limited empirical research in Ghana specifically exploring the lived experiences of students with disabilities in tertiary PE settings. Much of the existing literature focuses on primary or secondary education, with few accounts that integrate physical and attitudinal barriers in higher education through the lens of disability theory. Moreover, the intersection of policy implementation and student experience in PE remains under-theorized. This study addresses this gap by providing context-specific, theory-informed analysis of the barriers that persist in a university environment mandated to exemplify inclusive practices. Drawing on the Social Model of Disability and Critical Disability Theory, this study aims to critically examine how physical environments, social attitudes, and institutional practices converge to shape the participation of students with disabilities in PE at the University of Education, Winneba. In doing so, it seeks to contribute to ongoing discourse on educational equity, offer recommendations for institutional reform, and inform future research and policy interventions.

## II. STATEMENT OF THE PROBLEM

At the University of Education, Winneba (UEW), as in many Ghanaian higher education institutions, students with disabilities face persistent barriers to full participation in physical education (PE). These physical and attitudinal challenges reflect deeper systemic shortcomings in the implementation of inclusive education, despite existing policy commitments.

Physical barriers remain the most immediate constraints. For this study, disability refers to mobility impairments and related conditions affecting active participation in PE. Many PE facilities, including courts, fields, and gyms, lack accessibility features such as ramps, wide doorways, handrails, and adaptive equipment (Ametepee & Anastasiou, 2015). These infrastructural omissions signal more than just design oversights but they reflect institutional disregard for inclusivity, thereby reinforcing exclusion (Agbenyega, 2007; Alhassan, 2021). The Social Model of Disability frames this exclusion not as a product of impairment, but of inaccessible environments (UNESCO, 2020).

Attitudinal barriers further entrench this marginalisation. In Ghana, disability is often interpreted through a charitable or medical lens, portraying disabled persons as dependent rather than capable (Anthony, 2011; Avoke, 2010). In PE settings, this is evident in low expectations, protective exclusion, and peer stigma. Students are frequently sidelined, offered token roles, or subjected to ridicule, undermining their confidence and participation (Oeloo & Subbey, 2008; Hayford, 2022). Critical Disability Theory helps explain how such ableist norms operate to maintain power imbalances and exclude those who do not conform to bodily norms (Hosking, 2008).

Institutional and policy failures compound these issues. Although Ghana's Inclusive Education Policy (2015) mandates accessible infrastructure and inclusive instruction (Ministry of Education, 2015), implementation remains weak. At UEW, there is little evidence of adapted PE curricula or staff training in inclusive pedagogy. This aligns with Kuyini and Desai's (2008) observation that policy commitments often lack resources, clarity, and enforcement mechanisms.

While studies on inclusive education in Ghana are growing, few have investigated how physical and attitudinal barriers shape the PE experiences of students with disabilities at the tertiary level. The lived realities of these students, particularly within institutions tasked with leading inclusive practice, remain under-researched. This study addresses that gap by critically examining these barriers at UEW, employing the Social Model of Disability and Critical Disability Theory to understand how institutional design, social perceptions, and pedagogical practices combine to exclude. In doing so, it contributes evidence to inform inclusive reforms in higher education PE programmes.

## PURPOSE OF THE STUDY

This study explored how physical and attitudinal barriers affect the participation of students with disabilities in PE at UEW, and how these experiences reveal the implementation gap in inclusive education policy in higher education in Ghana.

## RESEARCH OBJECTIVES

The objectives of the study were to:

1. Explore the physical barriers that hinder students with disabilities from accessing physical education classes.
2. Identify the attitudinal barriers that students with disabilities encounter in physical education classes.
3. Examine the effects of these barriers on the participation and performance of students with disabilities in physical education

## RESEARCH QUESTIONS

The research questions were:

1. What physical barriers do students with disabilities face in physical education classes?
2. What attitudinal barriers do students with disabilities encounter in physical education classes?
3. How do these physical and attitudinal barriers affect the participation and performance of students with disabilities in physical education?

## III. THEORETICAL FRAMEWORK

This study is underpinned by the Social Model of Disability (SMD) and Critical Disability Theory (CDT). The Social Model of Disability, originally developed by disability rights advocates in the UK, shifts the focus from individual impairment to the societal and environmental barriers that restrict participation. According

to this model, disability is not caused by the physical condition itself but by the failure of society to accommodate diverse needs (Oliver, 1990). In the context of physical education (PE), this model emphasizes that exclusion is the result of inaccessible facilities, unadapted activities, and unsupportive attitudes, rather than the physical limitations of the student. This model encourages schools and universities to identify and dismantle physical and institutional barriers. Critical Disability Theory (CDT) builds on the social model but goes further to critique power dynamics, cultural stigmas, and institutional norms that perpetuate marginalization of people with disabilities (Hosking, 2008). CDT interrogates how dominant practices in education, including PE normalize able-bodiedness and treat disability as a deficiency. This theory supports an emancipatory agenda, advocating for policy reform, inclusive pedagogy, and recognition of disabled students' agency. In the Ghanaian context, CDT helps examine how social attitudes and inadequate policy implementation exclude students with disabilities, even where inclusive policies formally exist. These theories together guide the analysis of how physical and attitudinal barriers within UEW's physical education programmes undermine the rights and participation of students with disabilities.

#### IV. LITERATURE REVIEW

Physical barriers are among the most immediate and visible forms of exclusion for students with disabilities in physical education (PE). These include architectural limitations such as the absence of ramps, inaccessible sports fields, narrow doorways, and a lack of adaptive equipment (World Health Organization [WHO], 2011; Mutswanga, 2017). In Ghana, many educational institutions, including universities, are not equipped to accommodate students with mobility impairments (Agbenyega, 2007). Tertiary-level sports facilities often lack the necessary infrastructure to support students using wheelchairs or assistive devices (Avoke, 2001). Moreover, PE activities are typically designed for able-bodied participants, involving high-intensity movements such as running, jumping, or balance tasks, which may be unfeasible for some students without adaptation. The lack of inclusive curricula, adjustable equipment, and trained instructors further compounds the problem (Agyeman, 2020). Inaccessible environments not only hinder participation but also convey implicit messages of exclusion, reinforcing the marginalization of students with disabilities.

Attitudinal barriers, rooted in societal perceptions and stereotypes, also contribute significantly to exclusion. These are reflected in teacher expectations, peer interactions, and institutional culture (Shakespeare, 2006). PE teachers may exclude students with physical and sensory impairments, whether consciously or unconsciously, by failing to provide alternatives, neglecting to involve them in activities, or assuming they cannot contribute meaningfully. In Ghana, stigma surrounding disability remains pervasive. Students frequently report being overlooked, patronized, or mocked by peers (Avoke, 2001), which is particularly damaging in the socially interactive and performance-driven context of PE. Being perceived as incapable or as hindrances to group progress can lead to social isolation and diminished self-worth (Baffoe, 2013). Additionally, teachers' limited training in inclusive education often results in misconceptions and low confidence in adapting activities for students with disabilities. This lack of preparedness fosters resistance or passivity toward inclusive practices (Agbenyega & Deku, 2011).

The cumulative effect of physical and attitudinal barriers is a marked decline in the participation, motivation, and performance of students with disabilities in PE. Research demonstrates that exclusion from physical activity not only affects physical health but also leads to emotional and psychological consequences, including diminished confidence, social withdrawal, and a reduced sense of belonging (Rimmer et al., 2004; Goodwin & Watkinson, 2000). In Ghana, where PE is a component of the university curriculum, such exclusion can adversely impact academic performance and assessment. Students who cannot participate due to inaccessibility or lack of accommodations may be unfairly evaluated, perpetuating educational inequality and undermining the goals of inclusive education.

Moreover, the long-term implications of exclusion are profound. Students may internalize negative perceptions, experience alienation from the academic community, and become discouraged from engaging in physically active careers or lifestyles (Boahen & Amoako, 2022). Without targeted intervention, these barriers can create a cycle of disengagement and sustained marginalization. The literature consistently affirms that both physical and attitudinal barriers in PE settings constrain not only students' participation but also their identity development and sense of achievement. In the Ghanaian context, where inclusive education policies exist but implementation remains inconsistent, it is crucial to understand the lived experiences of students with disabilities at institutions such as the University of Education, Winneba (UEW). This study addresses that gap by offering evidence-based insights to inform more inclusive PE practices.

## V. METHODOLOGY

This study adopted a qualitative approach, specifically a descriptive case study design, to explore the physical and attitudinal barriers that students with disabilities face in participating in physical education (PE) at the University of Education, Winneba (UEW) in Ghana. The qualitative method was chosen for its capacity to capture the lived experiences and perceptions of participants within their natural environment, providing rich, nuanced insights (Cohen et al., 2018). The case study design was deemed appropriate given the specific institutional context of UEW, where inclusive education policies exist, yet implementation gaps remain. UEW, a leading teacher education institution in Ghana, was purposively selected due to its diverse student body and central role in training future educators, including PE instructors. The university enrolls students with various disabilities, offering a relevant context for investigating inclusive PE practices.

The study targeted students with disabilities currently enrolled at UEW who had participated in at least one PE course or activity, their lecturers and administrators who frequently attended to the students. Using a maximum variation sampling technique, participants were selected to ensure a diverse representation across gender, type of disability, and academic level. A total of 15 participants were selected: 10 students, 3 administrators, and 2 instructors. This sample size was sufficient to reach data saturation, where no new themes emerged from additional data (Kusi, 2012).

Data were collected using two instruments: semi-structured interviews and an observation checklist. Interviews with students explored their personal experiences, challenges, and perceptions of PE participation. An interview guide, aligned with the study's objectives, covered areas such as physical accessibility, instructor and peer attitudes, and the perceived impact of these factors on academic and emotional well-being. The semi-structured format allowed flexibility, enabling participants to express themselves freely while providing the researcher the opportunity to probe deeper when necessary. Additionally, non-participant observations were conducted using a structured checklist to assess the inclusiveness of PE environments on campus. Observational criteria included the presence of ramps and elevators, availability of adaptive sports equipment, and patterns of interaction between instructors and students during PE sessions. The triangulation of interviews and observations enhanced the credibility of the findings.

Informed consent was obtained from all participants, who were assured of confidentiality and anonymity. Participation was voluntary, with the right to withdraw at any point without repercussions. Interviews, conducted in accessible and participant-friendly settings, lasted between 22 and 37 minutes. With consent, all sessions were audio-recorded and later transcribed verbatim. Data were analysed using the thematic analysis approach outlined by Braun and Clarke (2006), which includes six phases: familiarization, coding, theme identification, theme review, theme definition, and report writing. NVivo software was used to manage and organize the data systematically.

Trustworthiness was ensured through multiple strategies. Credibility was enhanced via member checking, where participants reviewed transcripts to confirm the accuracy of interpretations. Triangulation across interviews and observations reinforced the validity of the findings. Transferability was supported by providing thick descriptions, enabling readers to judge applicability to other settings. Dependability and confirmability were ensured through a clear audit trail documenting the research process. This methodological framework was designed to explore the real-world experiences of students with disabilities in PE at UEW. Through rigorous ethical procedures, triangulated data sources, and systematic analysis, the study aimed to generate evidence-based insights into the enduring barriers to full participation in physical education within inclusive educational settings.

Critical Disability Theory (CDT) informed both the design of interview questions and the coding of data in this study. Rather than viewing students with disabilities as passive recipients of support, CDT guided the framing of interview prompts to explore how power, institutional norms, and cultural attitudes shape their experiences in PE. For example, questions about physical access were framed not only to identify structural limitations, but to probe how such barriers reflect broader institutional priorities and whose needs are structurally centred or ignored. For instance, in coding the theme *Physical Barriers in PE Spaces*, CDT encouraged an analysis that moved beyond technical inaccessibility to interpret how environmental design communicates exclusion. For *Attitudinal Barriers from Instructors and Peers*, CDT highlighted the role of ableist assumptions in shaping educational relationships, especially where exclusion is justified as protection. In *Impact on Participation and Academic/Social Outcomes*, codes were sensitised to emotional, psychological, and identity-based consequences of systemic marginalisation. CDT helped illuminate the ways in which institutional

silence or inaction can function as a form of structural violence, reinforcing inequality under the guise of neutrality or limited capacity.

## VI. RESULTS AND DISCUSSION

This section presents and analyses findings from interviews. The themes are organized around the key research objectives and interpreted through the lens of the Social Model of Disability, which frames disability not as a result of individual impairment but as a consequence of societal and institutional barriers (Oliver, 1990).

### PHYSICAL BARRIERS IN PE SPACES

A central finding of this study is the structural inaccessibility of PE environments, which significantly inhibits the participation of students with disabilities. Participants reported major physical obstacles, including the lack of ramps, functioning elevators, adapted changing rooms, and accessible gym equipment.

*"Sometimes, our lecture is on the first or second floor. I have to depend on someone to carry my wheelchair. Sometimes, it's just easier to stay in the dormitory."* (Student 1)

This quote exemplifies the failure of the built environment to accommodate diverse bodies, a key principle in the Social Model of Disability. According to this model, the student's inability to access the PE lecture hall for theory lessons is not primarily due to his impairment but rather due to architectural choices that exclude him (Agyeman, 2020; Shakespeare, 2006).

*"There are no rails in the bathrooms, and most doors are too narrow for my wheelchair. So, I don't bother to change for PE."* (Student 10)

These barriers are not unique to the University of Education, Winneba. Similar conditions have been documented by Rimmer et al. (2004), who found that inaccessible gym and sport facilities are among the top deterrents for students with disabilities. Despite Ghana's Inclusive Education Policy (2016), which mandates accessible infrastructure, students' experiences reveal a persistent implementation gap.

An instructor confirmed this:

*"Honestly, our infrastructure is not disability-friendly. We have no modified equipment, and the field terrain is rough even for able-bodied students."* (PE Instructor)

The Social Model emphasizes that exclusion is a product of environments and systems, not impairments themselves (Barnes & Mercer, 2010; Mutswanga, 2017). This finding reflects how students' physical abilities become disabling only in the context of poorly designed institutional spaces.

### ATTITUDINAL BARRIERS FROM INSTRUCTORS AND PEERS

Beyond the physical environment, students described deep-seated attitudinal barriers that shaped their experiences in PE. These include low expectations, exclusionary practices, and subtle forms of discrimination.

*"Our PE lecturer seldomly calls me to participate. When I asked to try some activities, he said it wasn't safe for me. He meant well, but it hurts."* (Student 5)

This example highlights a form of benevolent ableism, where the teacher's protectiveness results in exclusion (Baffoe, 2013; Hehir, 2002). The Social Model critiques such attitudes as societal constructions that 'disable' people by denying them opportunities to participate meaningfully.

*"Most of the time, they just assume I can't do anything. They ask me to sit and watch. But I want to try. I want to sweat like everyone else."* (Student 7)

Students repeatedly articulated a desire for inclusion, rather than sympathy. This confirms research by Hutzler and Bar-Eli (1993), who found that teacher perceptions of competence often determine participation opportunities, regardless of the actual capabilities of students with disabilities.

PE teachers admitted to lacking the necessary pedagogical knowledge:

*"We weren't trained to teach students with physical difficulties. It is hard to improvise and adapt every activity"* (PE Instructor)

This gap is consistent with findings by Qi and Ha (2012), who argue that a lack of inclusive training among teachers leads to exclusionary practices masked as logistical constraints.

Peer attitudes also constituted a major challenge:

*"Some of my classmates avoid pairing with me. One girl said, 'I don't want us to lose because of you.' It made me cry."* (Student 1)

This reflects the internalization of ableist norms among peers, where physical difference is equated with incompetence (Agbenyega & Deku, 2011). The Social Model holds that such societal attitudes, not impairments are the real disabling factor.

### IMPACT ON PARTICIPATION AND ACADEMIC/SOCIAL OUTCOMES

The cumulative impact of physical and attitudinal barriers results in low participation, emotional distress, and a decline in self-esteem. Students frequently reported skipping PE classes, despite having an interest in sports.

*"I used to love sports back in SHS. But here, it's different. I've lost interest because I'm always sidelined."* (Student 9)

This disinterest, however, stems not from the disability but from repeated marginalization and institutional exclusion, as posited by the Social Model. Students were not disengaged by choice but by systemic neglect.

Several students discussed the psychological toll:

*"Sometimes I cry after PE class. I feel helpless momentarily, but I don't allow it to affect me"* (Student 5)

Such emotional responses echo Goodwin and Watkinson (2000), who emphasize how exclusion in PE environments can lead to long-term negative self-perceptions and social isolation.

Other students emphasized the health implications of limited PE participation:

*"Exercise helps me with my muscle strength, but I barely get the chance to do it here. I feel like my condition is worsening."* (Student 9)

These remarks suggest that inaccessible PE not only limits inclusion but may also exacerbate physical impairments, creating a vicious cycle that contradicts the intended benefits of physical education.

Administrators admitted that policy implementation remains weak:

*"We have good policies, but the resources are not there. No budget for training or equipment. That's where we fall short."* (Administrator 1)

This confirms Klu and Ametepee (2021), who found that although Ghana has strong inclusive education frameworks, enforcement and institutional resourcing are lacking, particularly in tertiary institutions.

The findings of this study show that students with disabilities at the University of Education, Winneba (UEW), are often excluded from PE not because of their impairments, but also because of barriers in the physical environment and how the university is organised. Despite Ghana's Inclusive Education Policy (2016), PE facilities in UEW remain inaccessible such as lacking ramps, wide doorways, adapted equipment, or safe pathways. These physical barriers make it difficult or even impossible for students with disabilities to take part in PE lessons. The Social Model of Disability (SMD) helps explain that it is not the disability itself that creates exclusion, but rather the failure of the environment and systems to support all students. Critical Disability Theory (CDT) takes this further by showing how such exclusion reflects deeper issues of inequality and power. When institutions fail to act on known accessibility problems, it sends a message that the needs of students with disability may not be a priority. This reflects a wider problem, where policies exist on paper but are not put into practice in ways that make a real difference.

In addition to physical barriers, students described strong attitudinal challenges from instructors and peers. Some PE instructors believed that students with disability should not take part in certain activities for safety reasons, or because they lacked the skills to adjust their lessons. While these views may be well-meaning, they result in students being left out. CDT explains this as a form of ableism, where persons living with disabilities are seen as less capable or in need of protection, rather than as full participants in their education. For instance, some students indicated that they were excluded from group activities by their classmates, which affected their confidence and motivation. Despite these experiences, students expressed a clear desire to be involved and active. The gap between inclusive policy and students' actual experiences shows that much more needs to be done to make PE truly inclusive. This includes changing not only buildings and equipment, but also the attitudes, knowledge, and values of those who teach and work with students with disabilities.

Through the lens of the Social Model of Disability, this study highlights that the barriers students with disabilities face at UEW stem not from their impairments, but from inaccessible environments, unsupportive attitudes, and institutional inaction. Although policies such as Ghana's Inclusive Education Policy (2016) reflect a commitment to inclusion, their implementation remains uneven and often symbolic. The voices of students in this study make clear that they are not asking for sympathy or special treatment, but for equal and meaningful opportunities to participate, achieve, and belong. Without intentional reforms such as accessible infrastructure, adaptive equipment, inclusive teacher training, and greater awareness among peers, these students will continue to face preventable exclusion.

Also, this study uses CDT to reveal how institutional practices at UEW reinforce normative able-bodiedness and contribute to the exclusion of students with disabilities in PE. Inaccessible facilities and attitudes of staff are not isolated issues but reflect deeper institutional complicity. By prioritising norms in infrastructure, pedagogy, and policy implementation, the university could be reproducing exclusion while formally claiming inclusion. The findings thus highlight how inaction, neglect, and protective rhetoric serve to maintain ableist structures, ultimately denying students with disability full participation, recognition, and agency in higher education.

## CONCLUSION AND RECOMMENDATIONS

This study examined the barriers that hinder the participation of students with disabilities in Physical Education at the University of Education, Winneba (UEW). Drawing on the Social Model of Disability (SMD) and Critical Disability Theory (CDT), the findings challenge the assumption that exclusion is the result of individual impairments. Instead, the study reveals how inaccessible infrastructure, limited instructional adaptations, and deeply embedded social attitudes converge to marginalise students with disabilities within PE spaces. In doing so, it offers a contextual application of CDT to the Ghanaian higher education setting, revealing how institutional practices, continue to reinforce ableist norms through omission, avoidance, and neglect although these practices are framed by the inclusive policy.

This research contributes to the field by offering empirical evidence from a tertiary institution in the Global South, an area underrepresented in inclusive education literature. By centring students' opinions, revealing the lived realities of exclusion and exposing the gap between policy commitments and daily experiences. The study thus not only reinforces the urgency of addressing environmental and attitudinal barriers but also calls for a shift in how inclusion is understood and enacted within physical education.

To address these findings, recommendations are proposed. In the short term, UEW should prioritise the development of inclusive infrastructure. This includes the installation of ramps, elevators, and accessible washrooms, alongside the provision of adaptive PE equipment such as sports wheelchairs and adjustable gym tools. Equally important is the establishment of targeted training for PE instructors, focusing on inclusive pedagogies and Universal Design for Learning (UDL) principles. These measures align with the provisions of Ghana's Inclusive Education Policy and are critical for meeting the immediate needs of students with disabilities. In the longer term, however, institutional change must go beyond compliance. Cultural attitudes towards disability among staff and students must be addressed through sustained sensitisation programmes. For instance, the Resource Centre for Students with Special Needs and the Department of Health, Physical Education and Recreation (HPERS) should collaborate to facilitate regular workshops, peer-led forums, and awareness campaigns aimed at challenging ableist assumptions and fostering inclusive values across the university.

Furthermore, inclusive curriculum reform must involve students with disabilities in the design and evaluation of PE activities, recognising their agency and lived expertise. Ultimately, for inclusive education to move from rhetoric to reality, universities must adopt a transformative approach that does not merely accommodate difference but actively rethinks institutional norms and practices. This study calls for a reorientation of inclusive PE from a policy obligation to a pedagogical and ethical imperative rooted in equity, dignity, and social justice.

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