

Invisible Struggles: Lived Experiences of Mental Health Among Persons with Disabilities

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Abstract- Persons with disabilities often experience significant mental health challenges that remain overlooked within families, communities, and service systems. While disability is commonly understood in terms of physical or functional limitations, its psychological dimensions receive comparatively limited attention. This study explores the mental health experiences of persons with disabilities and examines the social and environmental factors influencing their emotional well-being. A qualitative research design was adopted, involving 12 participants selected through purposive sampling. Data were collected using semi-structured interviews and observation to capture lived experiences related to family dynamics, social interactions, and access to support systems. The findings reveal that participants commonly experienced social isolation, low self-esteem, anxiety about the future, and feelings of dependency. These challenges were shaped largely by stigma, discrimination, unemployment, overprotective family behavior, and limited access to mental health services. The study highlights that mental health concerns among persons with disabilities are rooted more in social barriers than in disability itself. The study emphasizes the need for inclusive social policies, accessible mental health services, and disability-sensitive social work interventions. Strengthening family support, promoting social inclusion, and ensuring equitable opportunities are essential for improving the psychological well-being and dignity of persons with disabilities.

Index Terms- Disability, Mental Health, Stigma, Social Exclusion, Social Work, Inclusion, Accessibility

I. INTRODUCTION

Mental health is a fundamental component of overall well-being, influencing how individuals think, feel, and engage with everyday life. However, for persons with disabilities, mental health concerns often remain under-recognized and insufficiently addressed within both social and institutional contexts. Disability is

frequently understood through a biomedical lens that emphasizes impairment, while the psychological and social dimensions of living with disability receive comparatively limited attention.

Persons with disabilities constitute one of the most marginalized groups globally, often facing barriers such as stigma, discrimination, unemployment, and restricted access to education, healthcare, and social participation. These structural inequalities significantly shape their emotional and psychological experiences. Feelings of loneliness, social isolation, low self-esteem, and anxiety are not merely individual conditions but are deeply embedded within broader social environments that limit inclusion and participation.

The present study is informed by the social model of disability, which posits that disability arises not only from individual impairments but also from societal barriers that hinder full participation. From this perspective, mental health challenges among persons with disabilities can be understood as outcomes of exclusionary social structures, negative attitudes, and inadequate support systems rather than disability alone. A rights-based approach further emphasizes that access to mental health care and social inclusion are essential for ensuring dignity and equality.

International frameworks such as the Convention on the Rights of Persons with Disabilities (United Nations, 2006) and definitions provided by the World Health Organization highlight the interaction between individual conditions and environmental barriers in shaping disability experiences. Despite increasing recognition of these issues, there remains limited research focusing on the lived emotional experiences of persons with disabilities, particularly within localized contexts.

In this context, the present study seeks to explore the mental health challenges faced by persons with disabilities and to understand the social, emotional, and environmental factors influencing their well-being. By focusing on lived experiences, the study aims to contribute to a more nuanced understanding of disability and mental health, while also highlighting the need for inclusive policies, accessible services, and socially responsive interventions.

II. REVIEW OF LITERATURE

Existing research consistently indicates that persons with disabilities are at a higher risk of experiencing mental health challenges compared to the general population (Gréaux et al., 2023; World Health Organization, 2024). Studies have shown that these challenges are not solely the result of individual impairments but are closely linked to social and structural factors such as stigma, discrimination, poverty, and limited access to education and employment (Mitra et al., 2013; Khalema, 2014). These factors contribute to heightened levels of stress, anxiety, and emotional distress among persons with disabilities.

A significant body of literature emphasizes the role of stigma and social exclusion in shaping mental health outcomes. Kågström et al. (2025) highlight how internalized stigma can negatively affect self-esteem and identity, leading to social withdrawal and reduced participation. Similarly, research suggests that societal attitudes often reinforce dependency and marginalization, further exacerbating psychological vulnerability.

Family dynamics also play a crucial role in influencing the emotional well-being of persons with disabilities. Supportive family environments have been found to enhance confidence, independence, and resilience, whereas overprotective or neglectful attitudes may contribute to dependency, low self-worth, and emotional insecurity (Ebuenyi, 2019; UNICEF, 2021). This indicates that the family can function both as a source of support and as a site where restrictive norms are reproduced.

Access to mental health services remains another critical concern. Studies indicate that persons with disabilities often encounter multiple barriers in accessing care, including physical inaccessibility, financial constraints, lack of awareness, and communication challenges (Mwangi et al., 2023; Gréaux et al., 2023). These barriers limit timely intervention and contribute to the persistence of untreated mental health conditions. A rights-based approach underscores that access to mental health services is a fundamental entitlement and calls for inclusive and equitable systems of care (United Nations, 2006; UNICEF, 2021).

While the existing literature provides important insights into structural barriers and service gaps, there remains a relative lack of research that captures the lived emotional experiences of persons with disabilities, particularly within specific socio-cultural contexts. Much of the research tends to focus on quantitative indicators or policy-level analysis, with limited attention to subjective experiences and everyday realities.

In this context, the present study seeks to address this gap by exploring the lived experiences of persons with disabilities, with a specific focus on understanding how social, familial, and environmental factors shape their mental health and well-being.

III. OBJECTIVES

1. To study the mental health challenges faced by people with disabilities.
2. To identify social and emotional factors affecting their well-being.
3. To examine availability and accessibility of mental health services.
4. To understand the role of social work interventions.
5. To suggest measures for improving mental well-being and social inclusion.

IV. RESEARCH METHODOLOGY

Research Design

The study adopted a qualitative research design to explore personal experiences and emotional realities.

Participants

Participants included people with physical, visual, hearing, and multiple disabilities selected from urban and semi-urban areas.

Sampling Technique

Purposive sampling was used to select participants who could provide relevant information regarding mental health experiences.

Data Collection Tools

- Semi-structured interview schedule
- Observation
- Secondary data (books, journals, policy documents)

V. DATA ANALYSIS & INTERPRETATION

Table 1
 Socio-Demographic Profile of Respondents

Variable	Category	No of Respondents
Gender	Male	7
	Female	5
Type of Disability	Physical Disability	6
	Visual Disability	2
	Hearing Disability	2
	Multiple Disability	2
Employment Status	Employed	4
	Unemployed	8

Interpretation:

The table presents the socio-demographic profile of 12 respondents. A majority of participants were male (7), while (5) were female. Physical disability was the most common type (6), followed by visual, hearing, and multiple disabilities (2 each). Most respondents were unemployed (8), indicating limited

access to employment opportunities among persons with disabilities.

Table 2
 Major Mental Health Challenges Reported by Respondents

Mental Health Challenge	No of Respondents Reporting
Loneliness	6
Anxiety about future	5
Low self – esteem	7
Social isolation	8
Feeling like burden	4
Overthinking	1

Interpretation:

This table shows that social isolation (26%) was the most commonly reported mental health challenge among respondents. Many participants experienced low self-esteem (23%) because of repeated dependence, communication barriers, or reduced social participation. Loneliness (19%) and Anxiety about the future (16%) were also common, especially among young respondents and those with sudden disability after accident or illness. Feeling like a burden (13%) was reported mainly by respondents who were highly dependent on family support. Overthinking (3%) appeared in fewer cases but was linked with emotional stress and fear about social judgment.

Table 3
 Factors contributing to Mental Health Challenges

Factors	No of Respondents
Unemployment	7
Stigma & Discrimination	8
Family overprotection	5
Lack of accessibility	6
Financial problems	6

Interpretation:

The table shows that stigma and discrimination (25%) are the main factors affecting mental health among respondents. Unemployment (22%) and financial problems (19%) also increase stress and dependency. Lack of accessibility (19%) and

overprotective family behavior (15%) further limit independence. Overall, mental health issues are mainly influenced by social and environmental factors.

Table 4
 Role of Family Support in Emotional Well-being

Type of Family support	No of Respondents
Supportive and encouraging	5
Overprotective	4
Neglectful	3

Interpretation:
 The table indicates that supportive families (42%) help build confidence and independence. However, overprotective behavior (33%) increases dependency, while neglecting (25%) leads to emotional insecurity. This shows that balanced family support is important for better mental well-being.

Table 5
 Access to Mental Health Services

Availability of Services	No of Respondents
Easily accessible	2
Limited access	4
No access	6

Interpretation:
 This table indicates that most respondents had little (33%) or no access (50%) to mental health services. Barriers such as cost, lack of awareness, and accessibility issues restrict service use. This highlights the need for more inclusive and accessible (17%) mental health support.

Table 6
 Coping Mechanisms Used by Respondents

Coping Strategy	No of Respondents
Family support	5
Social withdrawal	4
Religious/Spiritual activities	3
Self-Motivation	2
No coping mechanism	3

Interpretation:
 The table shows that family support (29%) is the most common coping method. Some respondents use social withdrawal (23%), which is not a healthy coping strategy. A few rely on spiritual activities (18%) or self-motivation (12%), while some have no coping mechanism (18%), indicating the need for proper guidance and counselling.

VI. FINDINGS AND DISCUSSION

The study reveals that persons with disabilities experience a range of interconnected mental health challenges shaped largely by social and environmental conditions. Among the participants, social isolation emerged as the most prominent issue, with many individuals reporting exclusion from social interactions, community participation, and decision-making processes. This finding reflects broader patterns of marginalization identified in existing literature, where limited inclusion contributes significantly to psychological distress.

Closely associated with social isolation were low self-esteem and feelings of dependency, which were frequently expressed by participants. These experiences were often linked to repeated reliance on family members and restricted opportunities for independent functioning. Such findings align with the work of Kågström et al. (2025), which highlights how stigma and internalized negative perceptions can shape self-identity and emotional well-being.

The study further indicates that stigma and discrimination are central factors influencing mental health outcomes. Participants reported experiencing insensitive behavior, social rejection, and negative labeling, which contributed to anxiety, emotional distress, and withdrawal from social spaces. This supports earlier research (Mitra et al., 2013) that identifies stigma as a key structural barrier affecting both social participation and psychological health.

Unemployment and financial constraints also emerged as significant stressors. A majority of respondents were unemployed, which not only limited financial independence but also affected their sense of purpose and future security. The absence of

inclusive employment opportunities reinforces dependency and contributes to heightened anxiety about the future, as also observed in previous studies on disability and poverty.

Family dynamics were found to play a dual role in shaping mental health experiences. While supportive family environments enhanced confidence and emotional security, overprotective behavior often restricted independence and reinforced feelings of inadequacy. In some cases, neglect further intensified emotional vulnerability. These findings highlight the complex role of family as both a source of support and a site of control, consistent with UNICEF (2021).

Access to mental health services remains limited, with most participants reporting little or no access to professional support. Barriers such as cost, lack of awareness, and physical inaccessibility hinder timely intervention. This reflects broader systemic gaps in service delivery, as identified by Mwangi et al. (2023), and underscores the need for more inclusive and accessible mental health care systems.

In terms of coping mechanisms, participants primarily relied on informal sources of support such as family relationships and religious or spiritual practices. However, some individuals reported social withdrawal or absence of coping strategies, indicating unmet mental health needs. The reliance on informal coping mechanisms highlights both the resilience of individuals and the lack of structured support systems.

Overall, the findings suggest that mental health challenges among persons with disabilities are not solely rooted in individual conditions but are significantly shaped by social exclusion, structural inequalities, and limited access to supportive resources. This reinforces the relevance of the social model of disability, which emphasizes the role of societal barriers in producing disadvantage and distress.

VII. SUGGESTIONS/ RECOMMENDATIONS

Based on the findings, it is important to improve awareness in society about the emotional and

psychological needs of persons with disabilities. Community awareness programs can help reduce stigma and encourage respectful and inclusive behavior.

Accessible mental health counselling services should be made available through hospitals, educational institutions, and community centers. Social workers and mental health professionals should actively work with persons with disabilities to provide emotional support, guidance, and counselling.

Families should be encouraged to promote independence and confidence rather than excessive protection. At the same time, government and social welfare organizations should strengthen employment opportunities, skill development programs, and inclusive education systems so that persons with disabilities can participate actively in society.

VIII. LIMITATIONS OF THE STUDY

The study is based on a small sample size of 12 participants, which limits the generalizability of the findings. Additionally, the research was conducted within a specific geographic context, and therefore may not fully capture the diverse experiences of persons with disabilities in different regions. As a qualitative study, the findings are based on subjective experiences and interpretations, which, while providing depth, may not represent broader population trends.

IX. CONCLUSIONS

The study highlights that mental health challenges among persons with disabilities are deeply shaped by social, economic, and environmental conditions rather than disability alone. Experiences of social isolation, low self-esteem, and anxiety emerge largely from exclusionary social structures, stigma, and limited opportunities for participation in education and employment.

The findings emphasize that while individual resilience and family support play an important role, they are often insufficient in the absence of inclusive systems and accessible services. Overprotective

family dynamics, unemployment, and restricted access to mental health care further reinforce dependency and emotional distress.

Addressing these challenges requires a shift from an individual-centered understanding of disability to a more inclusive and rights-based approach that prioritizes dignity, participation, and equality. Creating enabling environments, strengthening support systems, and ensuring access to appropriate mental health services are essential for improving the overall well-being of persons with disabilities.

“Promoting mental well-being among persons with disabilities is not merely a health concern but a matter of social justice and human rights.”

Plan of Action: Social Work Intervention

The present study highlights the urgent need for a comprehensive and multi-level social work intervention to address the mental health challenges faced by persons with disabilities. The intervention aims to improve their psychological well-being, enhance social inclusion, and ensure access to supportive services through a coordinated approach involving individuals, families, communities, institutions, and policy frameworks.

At the individual level, the intervention focuses on strengthening the emotional resilience and self-esteem of persons with disabilities. Social workers can provide professional counselling services to address issues such as anxiety, loneliness, and low self-worth identified in the study. Life skills training, including decision-making, problem-solving, and coping strategies, should be introduced to promote independence and confidence. Vocational guidance and skill development programs can further empower individuals by enhancing their employability and reducing dependency.

At the family level, the intervention emphasizes the importance of creating a supportive and balanced environment. The findings indicate that both overprotective and neglectful family behaviors negatively impact mental well-being. Therefore, family counselling and awareness programs should

be conducted to educate family members about the emotional needs of persons with disabilities. Social workers can play a mediating role by encouraging families to adopt a supportive yet independence-promoting approach, thereby fostering emotional security and self-confidence.

At the community level, efforts should be directed towards reducing stigma and promoting social inclusion. Awareness campaigns, sensitization programs, and inclusive community activities can help challenge negative stereotypes and discriminatory attitudes. The formation of support groups and self-help groups among persons with disabilities can provide a platform for shared experiences, peer support, and collective empowerment. Social workers can act as community organizers to mobilize resources and encourage active participation.

At the institutional level, there is a need to strengthen accessibility and availability of mental health services. The study reveals limited access to such services, which calls for the establishment of disability-friendly counselling centers within hospitals, educational institutions, and community settings. Training programs should be conducted for professionals to develop disability-sensitive approaches in service delivery. Collaboration between social workers, NGOs, healthcare providers, and educational institutions is essential to ensure an integrated support system.

At the policy level, the intervention advocates for inclusive and rights-based measures that promote equality and participation. Social workers can engage in advocacy to ensure effective implementation of disability-related policies and schemes. Emphasis should be placed on creating employment opportunities, enhancing skill development initiatives, and strengthening social security systems. Policy interventions must aim to remove structural barriers and promote equal access to education, healthcare, and livelihood opportunities.

The implementation of this intervention requires a phased approach, beginning with a needs assessment and followed by awareness programs, counselling

services, skill development initiatives, and continuous advocacy efforts. Monitoring and evaluation should be carried out through regular assessments of mental health status, feedback from beneficiaries, and analysis of participation levels and outcomes.

Overall, this plan of action is grounded in the social model of disability and a rights-based approach, recognizing that mental health challenges among persons with disabilities are largely shaped by social and environmental factors. Through coordinated and sustained efforts, social work interventions can play a transformative role in promoting dignity, inclusion, and overall well-being.

X. RECOMMENDATIONS

The findings of the study highlight the need for multi-level interventions to address the mental health challenges faced by persons with disabilities. At the societal level, there is a need to strengthen awareness and sensitization programs to challenge stigma and promote inclusive attitudes. Community-based initiatives can play a key role in fostering acceptance and reducing social exclusion.

At the institutional level, accessible and affordable mental health services must be integrated within existing healthcare and social welfare systems. This includes the development of disability-sensitive counselling services, trained professionals, and inclusive infrastructure.

Families should be supported through awareness and counselling programs to encourage balanced support that promotes independence while ensuring emotional security.

Policy-level interventions should focus on enhancing employment opportunities, skill development, and inclusive education systems to reduce dependency and improve quality of life.

Social workers have a critical role in bridging gaps between individuals, families, and institutions by providing counselling, advocacy, and community-based support interventions.

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