

# Mobilizing Resources to Support Persons with Disabilities in Accessing Social Work Services in Bình Mỹ Commune, Ho Chi Minh City, Viet Nam

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## ABSTRACT

This study examines the mobilization of resources to support persons with disabilities (PWDs) in accessing social work services in Bình Mỹ Commune. The research is based on a survey of 207 persons with disabilities living in the locality. The main objective is to assess the current situation of resource mobilization aimed at facilitating PWDs' access to social work services and to identify factors influencing the effectiveness of these mobilization activities within the community.

A mixed-methods approach was employed, integrating both quantitative and qualitative techniques. The quantitative component involved a structured questionnaire administered to 207 PWDs to collect data on service accessibility and available support resources. In addition, qualitative data were obtained through in-depth interviews with selected PWDs and local officials in order to explore contextual factors, lived experiences, and barriers encountered when accessing social work services.

The findings indicate that support resources are primarily mobilized from families, community networks, local authorities, and social organizations. However, persons with disabilities still face several obstacles, including limited access to service-related information, mobility challenges, and insufficient coordination among support actors. Based on these findings, the study recommends strengthening linkages among community resources and enhancing the role of social work in order to improve service accessibility for persons with disabilities at the local level.

**Keywords:** social work services; resource mobilization; persons with disabilities.

## INTRODUCTION

Persons with disabilities represent one of the most vulnerable groups in society and often encounter significant barriers when attempting to access social services, particularly community-based social work services. These challenges stem not only from physical limitations or economic constraints but also from the lack of social resources such as support networks, information channels, and opportunities to connect with available services. According to the World Health Organization, people with disabilities have substantially lower access to health and social services compared to non-disabled populations, especially in developing countries (World Health Organization, 2022). Furthermore, recent studies highlight that individuals with disabilities frequently face barriers related to transportation, information availability, service costs, and social attitudes when seeking support services, leading to persistent inequalities in accessing social resources (Shakespeare et al., 2018; Banks et al., 2021).

In this context, community resource mobilization has emerged as an important strategy to enhance access to social work services for persons with disabilities. These resources may include support from families, local communities, social organizations, government agencies, and broader social networks. Previous research indicates that the participation of community actors and social organizations can significantly improve service

accessibility, enhance quality of life, and promote social inclusion for people with disabilities (Mitra, 2018; Shakespeare et al., 2021). Particularly in developing countries, where welfare systems may be limited, informal support networks from families and communities often play a crucial role in helping individuals with disabilities obtain necessary services (Banks et al., 2021).

The effectiveness of resource mobilization, however, largely depends on the strength of social connections and the presence of supportive community networks. Research in community social work suggests that individuals with stronger social ties and higher levels of community engagement are more likely to access information and receive support resources (Putnam, 2000). This is especially relevant for persons with disabilities, as social relationships not only reduce social isolation but also create pathways for accessing services and opportunities within the community.

Social Capital Theory provides a useful analytical framework for understanding how social relationships and community networks function as valuable resources for disadvantaged groups. Putnam (2000) conceptualizes social capital as encompassing trust, social norms, and networks that facilitate cooperation and mutual support within communities. Similarly, Bourdieu (1986) describes social capital as the sum of actual or potential resources linked to durable networks of relationships. Recent research has applied this theoretical perspective to examine the social participation of persons with disabilities, demonstrating that social capital can serve as a “bridge” enabling access to information, services, and developmental opportunities (Mitra, 2018; Shakespeare et al., 2021).

At the local community level, social capital among persons with disabilities is often reflected through relationships within families, neighborhoods, social organizations, and connections with local authorities. These networks not only provide material assistance but also facilitate information exchange, service referrals, and opportunities for participation in community activities. Banks and colleagues (2021) found that community support networks including families, social organizations, and self-help groups can significantly contribute to improving access to social work services and other support programs for persons with disabilities.

In Vietnam, community-based social work services have gradually developed to support vulnerable populations, including persons with disabilities. Nevertheless, access to these services remains limited in many localities, particularly where resources are fragmented and coordination among organizations is insufficient. Located in Bình Mỹ Commune, the study area has semi-rural characteristics with widely dispersed populations and ongoing urbanization. Within this context, persons with disabilities often face considerable challenges in accessing social work services, while support activities largely depend on family members, community groups, and grassroots organizations. This situation highlights the critical role of mobilizing and connecting community resources to support persons with disabilities in accessing essential services.

In practice, support activities for persons with disabilities in Bình Mỹ Commune are mainly implemented through collaboration among local authorities, mass organizations, and community networks such as the Women’s Union, Youth Union, Red Cross, and volunteer groups. These actors play an important role in connecting resources, providing information, and assisting persons with disabilities in accessing social assistance programs. However, resource mobilization efforts often remain fragmented and spontaneous, lacking systematic coordination and failing to fully utilize existing social networks. This situation calls for an appropriate theoretical approach to better analyze and strengthen the role of community resources in supporting persons with disabilities.

Although numerous studies have examined disability and access to social services, research focusing specifically on community resource mobilization through the lens of social capital theory in local social work practice remains limited, particularly in Vietnam. Therefore, investigating resource mobilization activities that support persons with disabilities in accessing social work services in Bình Mỹ Commune can contribute valuable empirical evidence to the field of community social work and provide insights into the role of social capital in improving service accessibility.

Based on this perspective, the present study applies Social Capital Theory to analyze how community resources are mobilized to support persons with disabilities in accessing social work services in Bình Mỹ Commune, Ho

Chi Minh City. By examining the role of social networks within the community, the research aims to evaluate the extent to which support resources are mobilized and utilized, and to propose recommendations for strengthening social capital and improving the effectiveness of social work practices at the local level.

## LITERATURE REVIEW / THEORETICAL FRAMEWORK

### Literature Review

Persons with disabilities (PWDs) are among the most vulnerable groups in society and often face multiple barriers in accessing essential services such as healthcare, education, rehabilitation, and social work services. Recent studies indicate that access to services for PWDs is influenced not only by state policies and resource availability but also significantly shaped by social networks and community support (Luo et al., 2024; Zhang et al., 2025).

In this context, Social Capital Theory is considered an important analytical framework for explaining how social relationships and community networks facilitate access to resources and social services for disadvantaged groups. According to Putnam (2000) and Szreter and Woolcock (2004), social capital encompasses not only social connections but also trust, cooperation, and social norms, all of which contribute to enhancing the capacity for resource mobilization within communities.

A growing body of international research provides empirical evidence on the positive role of social capital in improving outcomes for PWDs. Choi and Yi (2022) found that social relationships and community trust positively influence health and social inclusion among PWDs. Similarly, Ebrahim, Lorenzo, and Kathard (2022) demonstrated that participation in community groups and skills development programs helps PWDs expand their social networks, thereby increasing social capital and improving employment opportunities.

In addition, several studies highlight the role of social support networks as intermediary mechanisms linking PWDs to formal services. DeFries, Wang, and Hasche (2025) argue that social capital can function as a “bridge” by facilitating information sharing, emotional support, and connections with service providers. Hickey et al. (2024) further show that community-based coordination models can strengthen linkages between formal resources (e.g., government agencies and social organizations) and informal resources (e.g., family, friends, and neighbors), thereby enhancing support for PWDs.

Moreover, research suggests that social networks also contribute to improving access to information and levels of social participation among PWDs. Zhang et al. (2025) emphasize the role of support networks in enhancing mental health and community integration. In the field of education, Jiang and Thompson (2025) found that family and community social capital significantly influence access to educational resources and support services for children with disabilities.

However, studies also indicate that PWDs generally have lower levels of social capital compared to other population groups due to barriers such as communication difficulties, social stigma, and mobility limitations (Mitra & Shakespeare, 2019; Shakespeare et al., 2021). These constraints tend to narrow social networks, thereby reducing opportunities to access information and necessary support services (Luo et al., 2024). Furthermore, limited participation in social organizations or community groups can weaken the ability to mobilize supportive resources (Hickey et al., 2024).

In Vietnam, research on PWDs has primarily focused on areas such as social welfare policies, rehabilitation, vocational training, and social inclusion (Nguyen et al., 2022; Tran & Bui, 2023). However, studies examining the role of social capital, social networks, and community resource mobilization in facilitating access to social work services remain relatively limited, particularly at the local level.

As community-based social work services are increasingly emphasized in Vietnam, understanding how to mobilize and connect social resources to support PWDs in accessing services is both theoretically and practically important. This highlights a significant research gap concerning the role of social capital and community networks in resource mobilization for PWDs at the grassroots level. Notably, empirical studies in specific local

contexts, such as Binh Mỹ commune in Ho Chi Minh City, remain scarce. Therefore, examining resource mobilization activities to support PWDs in accessing social work services in this area can provide valuable empirical evidence and contribute to improving community-based support models for PWDs

## **Theoretical Framework**

### **Social Capital**

Social capital is an important concept in the social sciences and has been widely applied to analyze how social relationships generate resources for individuals and communities. The concept gained prominence during the 1980s through the contributions of scholars such as Pierre Bourdieu, James Coleman, and Robert Putnam.

According to Bourdieu (1986), social capital refers to the aggregate of actual or potential resources linked to the possession of durable networks of relationships among individuals or social groups. These networks enable members to access various forms of resources, including information, economic assistance, and social opportunities.

Coleman (1988) conceptualizes social capital from a functional perspective, arguing that it exists within social relationships and facilitates cooperation among individuals in pursuit of shared goals. In this view, social capital is not only an attribute of individuals but also a product of social structures and interactions.

Similarly, Putnam (2000) highlights the importance of trust, social norms, and social networks in promoting cooperation and collective action within communities. Communities characterized by high levels of social capital tend to be more capable of mobilizing resources and addressing social challenges effectively.

Within the field of social work, social capital is considered a critical resource that enables vulnerable individuals and groups to access social services and development opportunities. Social relationships provide not only emotional support but also channels for information exchange, resource mobilization, and connections to formal support services (Aldrich & Meyer, 2015). This perspective is particularly relevant for vulnerable populations such as persons with disabilities, who often face structural barriers in accessing social resources.

### **Forms of Social Capital in Communities**

A number of scholars classify social capital into three primary forms: bonding social capital, bridging social capital, and linking social capital (Putnam, 2000; Aldrich & Meyer, 2015).

Bonding social capital refers to close relationships among individuals who share similar social backgrounds, such as family members, relatives, and close friends. These ties provide emotional support and immediate assistance in daily life.

Bridging social capital connects individuals or groups from different social backgrounds, facilitating the exchange of information and access to broader social opportunities.

Linking social capital refers to relationships between individuals and institutions or authorities with different levels of power, such as government agencies, social service providers, and formal organizations. These connections are particularly important for accessing public services and institutional resources.

This classification helps clarify how different types of social networks contribute to community resource mobilization and social support.

### **Social Capital and Access to Services for Persons with Disabilities**

Persons with disabilities often face multiple barriers when attempting to access social services. These barriers may include physical environmental constraints, limited access to information, financial difficulties, and social stigma.

In this context, social capital can play a critical role in helping persons with disabilities overcome these obstacles and gain better access to support resources. Research suggests that social support networks can provide valuable information about social assistance programs, healthcare services, and opportunities for education or employment (Mitra, 2018).

Family members and close friends often serve as the primary support system that helps persons with disabilities access essential services. Meanwhile, community organizations and social groups can act as intermediaries connecting them to larger support programs and institutional services.

In addition, social capital contributes to improving psychological well-being and social inclusion among persons with disabilities. Shakespeare et al. (2021) argue that participation in social networks can reduce feelings of isolation and enhance individuals' confidence in engaging with community activities. These social connections not only improve quality of life but also facilitate access to support services.

However, the level of social capital available to persons with disabilities may be influenced by socioeconomic conditions, social participation, and environmental barriers. Individuals living in communities with weaker social cohesion or limited support organizations often experience greater difficulties in accessing social services (Banks et al., 2021). Therefore, strengthening social capital within communities is considered an important strategy for improving service accessibility for persons with disabilities.

### **Conceptualizing Resource Mobilization to Support Access to Social Work Services for Persons with Disabilities from a Social Capital Perspective**

Social capital theory emphasizes the role of social relationships in enabling individuals to access resources and development opportunities. According to Putnam (2000) and Lin (2001), social capital emerges through social networks, trust, and cooperative norms within communities.

In the context of social work, this perspective is particularly useful for analyzing how vulnerable groups including persons with disabilities gain access to social services. From this viewpoint, resource mobilization within communities can be examined through different forms of social capital.

Among these forms, bonding social capital plays a particularly important role in the daily lives of persons with disabilities. Bonding social capital refers to close relationships among family members, relatives, neighbors, and close friends. These networks often represent the first and most immediate support system available to individuals with disabilities.

In many situations, families provide not only emotional and financial support but also act as intermediaries connecting persons with disabilities to social services such as rehabilitation programs, psychological counseling, and social assistance initiatives.

International studies highlight the significant role of family networks in facilitating service access for persons with disabilities. For example, Emerson et al. (2011) found that individuals with strong family support are more likely to access healthcare and social welfare services. Similarly, Shakespeare et al. (2018) suggest that family support can reduce informational and psychological barriers when individuals with disabilities attempt to engage with social service systems.

Nevertheless, scholars also note that bonding social capital may become restrictive if social networks remain limited within close family circles. Woolcock and Narayan (2000) argue that overly closed networks may reduce opportunities to access external resources and information. Consequently, while bonding social capital forms a crucial foundation for support, expanding social connections beyond family networks is necessary to enhance access to social work services for persons with disabilities.

### **Conceptual Framework**

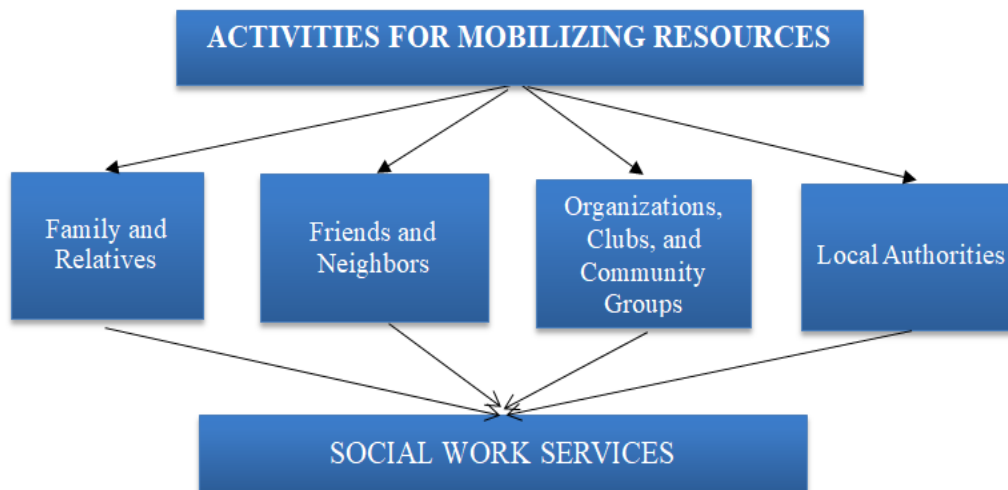
Based on social capital theory, this study examines how community social networks contribute to the mobilization of resources supporting persons with disabilities in accessing social work services.

The analytical framework focuses primarily on bonding social capital, including relationships within families, relatives, neighbors, and close community members. These networks influence:

The provision of emotional and material support

The sharing of information about available services

The facilitation of connections between persons with disabilities and service providers



### Analytical framework

Through this framework, the study analyzes the relationship between social capital and the effectiveness of resource mobilization in improving service accessibility for persons with disabilities.

## METHODOLOGY

### Research Design

This study adopts a mixed-methods research design, combining quantitative and qualitative approaches to examine the role of social capital in mobilizing resources that support persons with disabilities in accessing social work services within the community.

The quantitative component uses a structured questionnaire survey, allowing the study to analyze the relationship between forms of social capital and service accessibility. This approach also enables the evaluation of the relative influence of different factors within the research model.

### Research Site and Participants

The study was conducted in Binh Mỹ Commune. The commune has semi-rural characteristics, with a dispersed population and the presence of various community-based networks such as mass organizations, social groups, and volunteer initiatives.

The research sample consists of 207 persons with disabilities residing in the commune. Participants include individuals with different types of disabilities, such as physical disabilities, hearing and speech impairments, visual impairments, and mild intellectual disabilities.

### Document Analysis

Document analysis was employed to establish the theoretical foundation for applying social capital theory to the study of resource mobilization for persons with disabilities. The reviewed materials include academic books,

peer-reviewed journal articles, reports from international organizations, and policy documents related to disability and social work.

Through systematic comparison and synthesis of these sources, the study clarifies the key concepts and dimensions of social capital bonding, bridging, and linking and examines how social networks contribute to mobilizing community resources to support access to social work services.

### **Quantitative Analysis**

Survey data were processed and analyzed using SPSS 26.0. Descriptive statistics were first applied to summarize the demographic characteristics of the sample and the distribution of key variables.

The reliability of measurement scales was assessed using Cronbach's Alpha, with values of 0.852 or higher indicating acceptable reliability for social science research.

A purposive sampling strategy was employed based on a list of persons with disabilities maintained by local social affairs officers. Participants were selected according to several stratification criteria, including gender, working-age group, type and severity of disability, and level of access to social work services.

Data were collected using a structured questionnaire with items measured on a five-point Likert scale ranging from 1 (strongly disagree) to 5 (strongly agree). In addition to descriptive statistics and reliability testing, Pearson correlation analysis was conducted to examine relationships among variables in the research model, thereby clarifying the role of social capital in facilitating access to social work services.

### **Qualitative Method**

Qualitative data were collected through semi-structured in-depth interviews with persons with disabilities of working age, their family members, and local social work practitioners.

Participants were selected using purposive sampling, and interviews continued until data saturation was reached.

Interview data were recorded, transcribed, and analyzed using thematic analysis to identify key themes related to psychological, social, and institutional barriers encountered by persons with disabilities when accessing social work services. These qualitative findings complement and provide deeper insights into the quantitative results.

### **Research Ethics**

The study adheres to ethical principles in social science research. Prior to participation, all respondents were provided with detailed information about the research objectives, data collection procedures, and their rights to decline or withdraw from the study at any time.

Participation by persons with disabilities, their family members, and local officials was entirely voluntary and based on informed consent.

All personal information was kept confidential and anonymized during data processing and publication. The collected data were used solely for academic research purposes to analyze resource mobilization activities supporting persons with disabilities in accessing social work services within the community.

### **Research Results**

#### **Current Situation of Resource Mobilization to Support Persons with Disabilities in Accessing Social Work Services at the Community Level**

Resource mobilization plays an important role in supporting persons with disabilities (PWDs) in accessing social work services within the community. Through the participation of various stakeholders such as families, local authorities, social organizations, and community networks, support resources can be connected and allocated to meet the diverse needs of PWDs.

In Bình Mỹ Commune, resource mobilization activities for PWDs are mainly implemented through the grassroots government system, social organizations, and community relationship networks. However, the level of access to and effectiveness of these resources may vary depending on socio-economic conditions, social networks, and individuals' capacity to connect with available support systems. Therefore, analyzing the extent to which support resources are mobilized and utilized locally can help clarify the role of social networks in enhancing the accessibility of social work services for PWDs within the community.

The survey results indicate that the level of resource mobilization to support persons with disabilities (PWDs) in accessing social work services at the community level is moderate, with an overall mean score of 2.98/5. This finding suggests that although support activities have been implemented, the effectiveness of resource mobilization and the accessibility of these resources remain limited, with considerable variation across different groups. The divergence in response patterns (as reflected in the coexistence of both positive and negative evaluations) highlights disparities in service access experiences among PWDs, implying that individual characteristics and social contextual factors may differentially influence their ability to access resources.

A disaggregated analysis by type of resource shows that support from family members and relatives has the highest mean score (M = 3.15). Specifically, 42.5% of PWDs reported that they frequently or very frequently receive such support, while 33.9% perceived the level of support as low. This discrepancy suggests that although the family is the primary source of support, its effectiveness varies significantly across households, potentially depending on economic conditions, the strength of family ties, and the awareness of family members.

From a statistical perspective, this finding can be further interpreted by considering the role of "family support" as a key predictor in regression models of access to social work services. If this variable exhibits a positive and statistically significant coefficient ( $p < 0.05$ ), it would indicate that higher levels of family support are associated with improved access to services among PWDs. Moreover, a moderate or higher correlation coefficient ( $r$ ) between family support and service access would further substantiate the strength of this relationship.

From the perspective of Social Capital Theory, these results clearly reflect the role of bonding social capital, which refers to close-knit relationships such as those within families and among relatives. This form of social capital provides direct material, emotional, and informational support to PWDs. However, an overreliance on bonding social capital may also impose certain limitations, as it tends to be inward-looking and less effective in connecting individuals to external resources. This may help explain why, despite relatively strong family support, the overall level of access to social work services remains only moderate.

Therefore, the findings not only confirm the crucial role of family support but also highlight the need to strengthen other forms of social capital, particularly bridging social capital and linking social capital. Enhancing these forms of social capital would help expand support networks and improve the ability of PWDs to connect with formal services within the community.

The analysis of in-depth interview data further reinforces this finding. Many participants stated that their families represent the primary source of support in seeking information and accessing social services in the locality. One interview participant shared: "My family helps me the most, from finding information about support policies to accompanying me to complete administrative procedures when necessary." (Female, 42 years old)

Table 1: Resource Mobilization Activities Supporting Persons with Disabilities in Accessing Social Work Services

TT	Activities to mobilize resources to support people with disabilities in accessing social work services.	Answer options (%)					Mean	Std. Deviation
		1. Infrequent; 2. Infrequent; 3. Normal; 4. Frequent; 5. Very frequent						
		1	2	3	4	5		
1	Family and relatives often support me.	6,8	27,1	23,7	29,0	13,5	3,15	1,16

2	Friends, neighbors, or connections in the community.	9,2	20,3	33,8	23,7	13,0	3,11	1,15
3	I have opportunities to participate in organizations, clubs, or community groups.	8,2	37,2	32,9	16,9	4,8	2,73	0,99
4	I receive support or guidance from local authorities in finding information.	8,7	26,6	34,3	22,7	7,7	2,94	1,07
<b>DTB</b>							<b>2,98</b>	<b>1,10</b>

(Source: Actual survey data)

In addition to family support, assistance from friends, neighbors, and broader community relationships is also reported at a moderate level ( $M = 3.11$ ). Specifically, approximately 36.7% of persons with disabilities (PWDs) indicated that they frequently receive support from these social ties, while 29.5% perceived such support as limited. These findings suggest that community-based social networks play a certain role in providing information, emotional support, and initial conditions that facilitate PWDs' access to social work services.

A deeper analysis reveals that although the mean score is relatively high, the proportion of positive evaluations does not overwhelmingly dominate, indicating that the effectiveness of this source of support varies across individuals. This pattern implies that factors such as the level of social participation, the ability to maintain relationships, and individual social positioning may serve as important mediating variables influencing the capacity to mobilize community support. In quantitative models, if the variable "community support" demonstrates a positive and statistically significant association with the dependent variable (service access), it can be interpreted as a contributing factor to improved access, albeit with a potentially weaker effect compared to family support.

From the perspective of Social Capital Theory, these findings reflect the role of bridging social capital, which refers to broader and more heterogeneous social ties beyond the immediate family. This form of social capital is particularly important in enabling PWDs to access diverse sources of information and expand their connections to social resources. However, due to its relatively loose structure and lower levels of cohesion, the effectiveness of such networks often depends on the individual's level of proactive engagement as well as the characteristics of the surrounding community context.

The results from in-depth interviews also indicate that community networks, particularly neighbors and friends, play an important role in providing information and supporting PWDs in accessing social assistance programs. In many cases, information related to support policies or local assistance activities is not accessed directly through official channels but rather through close social relationships within the community. One interview participant shared: "Sometimes I learn about support programs through my neighbors or acquaintances in the neighborhood." (Male, 35 years old).

These findings suggest that social relationships within the community may function as informal communication channels, helping PWDs access information and social resources. This reflects the role of community networks in complementing formal support channels and highlights the importance of strengthening social connections to improve PWDs' access to social work services at the local level.

In contrast, support from local authorities in providing information and guidance for accessing services is rated at a relatively low level ( $M = 2.94$ ), lower than that of informal support sources. Specifically, 35.3% of persons with disabilities (PWDs) reported that they rarely or very rarely receive such support, while only 30.4% indicated that they receive it frequently. This discrepancy points to a significant gap between the public service system and the actual needs of PWDs.

From the perspective of examining relationships between variables, these findings suggest that the variable “government support” may exhibit a weak or statistically insignificant effect in regression models if appropriate mediating mechanisms are absent. In other words, although formal service systems exist, PWDs’ access remains limited due to the lack of effective connection channels. This pattern may also be reflected in a low correlation coefficient between government support and the level of service access.

Qualitative data analysis further reveals that some PWDs experience difficulties in accessing information about available services or support programs in the locality. Many respondents reported that they were not familiar with official information channels and therefore often relied on acquaintances or local officials to learn about assistance programs. One interview participant stated:

"I have heard about some support programs for people with disabilities, but I do not know where to find the information. Sometimes I have to ask acquaintances or local officials to learn about them." (Male, 36 years old).

This finding indicates that PWDs’ access to information remains limited and highlights the important role of social networks and grassroots officials in connecting PWDs with available support resources. It also suggests that strengthening communication strategies and improving community-level information channels could enhance PWDs’ access to social work services.

These qualitative findings can be explained from the perspective of Social Capital Theory. In community contexts, many PWDs primarily rely on bonding social capital, which refers to close relationships such as family members, friends, and neighbors, to obtain information and support resources. When official information channels are not widely disseminated or easily accessible, close social ties within the community become important sources of information that help PWDs learn about available support programs.

However, this reliance on close relationships also indicates limitations in bridging social capital, which refers to connections between PWDs and broader social groups such as community organizations or social groups. In addition, the difficulties PWDs face in accessing information about support programs also reflect a relatively low level of linking social capital, referring to the connections between PWDs and formal institutions such as service providers or local government authorities. These findings suggest that improving access to social work services requires strengthening mechanisms that connect PWDs with social organizations while also enhancing communication systems and information dissemination at the community level.

Regarding resource mobilization activities related to opportunities to participate in organizations, clubs, or community groups, this variable recorded the lowest mean score ( $M = 2.73$ ). Up to 45.4% of PWDs reported that they rarely or never had opportunities to participate in organizations or community groups, while only 21.7% indicated that they participated frequently. This finding suggests that the level of participation of PWDs in broader social networks within the community remains limited.

In-depth interviews also reflect that participation in community activities among PWDs remains constrained due to psychological barriers and accessibility conditions. A local social affairs officer explained: *"Some persons with disabilities rarely participate in community activities because they feel hesitant to communicate or face mobility difficulties, which also limits their connection with support organizations."* (Female, 38 years old, Local cultural–social affairs officer).

This observation indicates that beyond informational barriers, issues related to mobility, psychological self-confidence, and limitations in social interaction may also influence the level of community participation among PWDs. These factors also reflect the limited expansion of broader social networks within the community, as PWDs have fewer opportunities to participate in social organizations or community groups to expand their networks and access support resources.

From the perspective of Social Capital Theory, these barriers may reduce the level of bridging social capital among PWDs, which refers to connections between individuals and broader social groups in the community. When social participation is limited, access to information, opportunities, and support programs provided by social organizations may also become restricted. Therefore, creating favorable conditions for PWDs to

participate in community activities, while strengthening the connecting role of social workers and local organizations, could help expand social networks and improve PWDs’ access to social work services within the community.

**Evaluation of Resource Mobilization Activities Supporting Access to Social Work Services by Gender, Education Level, and Type of Disability**

**Comparison by Gender**

The analysis results indicate certain differences between male and female respondents in their evaluation of the level of resource mobilization supporting PWDs in accessing social work services within the community; however, the differences are relatively small.

Regarding support or guidance from local authorities in seeking information, the mean score for males was 2.93, while the mean score for females was 2.96. The statistical test results indicate that there is no significant difference between the two gender groups ( $p = 0.187 > 0.05$ ). This suggests that both male and female PWDs experience relatively similar levels of access to support from local authorities.

Similarly, for opportunities to participate in organizations, clubs, or community groups, the mean score for males was 2.83 (SD = 1.024), while the mean score for females was 2.60 (SD = 0.950). However, this difference is not statistically significant ( $p = 0.828 > 0.05$ ). The findings indicate that opportunities for PWDs to participate in community social networks remain limited for both gender groups.

Table 2: Resource Mobilization Activities Supporting PWDs’ Access to Social Work Services by Gender

	Gender	N	Mean	Std. Deviation	Std. Error Mean	p
Family and relatives often support me.	Male	118	3.14	1.132	.104	0,092
	Female	89	3.18	1.211	.128	
Friends, neighbors, or connections in the community.	Male	118	3.03	1.147	.106	0,048
	Female	89	3.21	1.153	.122	
I have opportunities to participate in organizations, clubs, or community groups.	Male	118	2.83	1.024	.094	0,828
	Female	89	2.60	.950	.101	
I receive support or guidance from local authorities in finding information.	Male	118	2.93	1.044	.096	0,187
	Female	89	2.96	1.117	.118	

(Source: Actual survey data)

Regarding support from family members and relatives, the mean score for male respondents was 3.14, while the mean score for female respondents was 3.18. The statistical test results indicate that there is no significant difference between the two groups ( $p = 0.092 > 0.05$ ). This finding reflects the relatively consistent role of family support for persons with disabilities (PWDs), regardless of gender.

However, regarding support from friends, neighbors, and community relationships, the results reveal a statistically significant difference between male and female respondents ( $p = 0.048 < 0.05$ ). Specifically, female PWDs reported a higher mean score (3.21) compared to males (3.03). This finding suggests that female PWDs

tend to receive more support from community social networks, which may be associated with their higher level of social interaction and stronger community engagement.

Overall, the analysis indicates that gender does not create significant differences across most support resources, except for support from community relationship networks. This finding suggests that community-based support programs for PWDs should continue to emphasize the role of social networks, particularly community relationships, in order to enhance access to social work services for PWDs.

### Differences in Resource Mobilization Activities by Educational Level of Persons with Disabilities

A one-way analysis of variance (ANOVA) was conducted to examine differences in the evaluations of PWDs regarding resource mobilization activities supporting access to social work services based on educational level.

The results show a statistically significant difference among educational groups in terms of support or guidance from local authorities when seeking information ( $F = 4.242$ ;  $p = 0.001 < 0.05$ ). This finding suggests that the level of access to and support received from local authorities varies depending on the educational background of PWDs. Individuals with higher levels of education tend to have better access to information and support resources provided by local authorities compared to those with lower educational levels.

Table 3: Resource Mobilization Activities Supporting PWDs’ Access to Social Work Services by Educational Level

		Sum Squares	df	Mean Square	F	Sig.
I receive support or guidance from local authorities in finding information.	Between Groups	22.650	5	4.530	4.242	.001
	Within Groups	214.654	201	1.068		
	Total	237.304	206			
I have opportunities to participate in organizations, clubs, or community groups.	Between Groups	7.037	5	1.407	1.430	.215
	Within Groups	197.813	201	.984		
	Total	204.850	206			
Family and relatives often support me.	Between Groups	20.081	5	4.016	3.117	.010
	Within Groups	258.972	201	1.288		
	Total	279.053	206			
Friends, neighbors, or connections in the community.	Between Groups	8.653	5	1.731	1.319	.258
	Within Groups	263.791	201	1.312		
	Total	272.444	206			

(Source: Actual survey data)

The ANOVA results also indicate a statistically significant difference among educational groups regarding support from family members and relatives ( $F = 3.117$ ;  $p = 0.010 < 0.05$ ). This finding suggests that the level of family support may be influenced by factors related to educational attainment, such as communication ability, awareness of social rights and benefits, or the level of proactiveness in seeking support.

In contrast, the analysis does not reveal statistically significant differences among educational groups in terms of opportunities to participate in organizations, clubs, or community groups ( $F = 1.430$ ;  $p = 0.215 > 0.05$ ) or support from friends, neighbors, and community relationships ( $F = 1.319$ ;  $p = 0.258 > 0.05$ ). This suggests that participation in community social networks among persons with disabilities (PWDs) does not depend heavily on educational attainment but may instead be influenced by other factors such as health conditions, mobility, or the level of social integration.

From the perspective of Social Capital Theory, these findings suggest that educational attainment may contribute to strengthening linking social capital, particularly by enhancing individuals' ability to access information and interact with governmental institutions. However, regarding bridging social capital and broader community networks, educational level does not appear to be a determining factor.

### Differences in Resource Mobilization Activities by Type of Disability

A one-way analysis of variance (ANOVA) was conducted to examine differences in PWDs' evaluations of resource mobilization activities supporting access to social work services based on the type of disability.

The results indicate a statistically significant difference among disability groups regarding support or guidance from local authorities in seeking information ( $F = 2.272$ ;  $p = 0.049 < 0.05$ ). This finding suggests that the ability of PWDs to access support resources from local authorities may vary depending on the characteristics and severity of their disability.

Similarly, the analysis also shows a statistically significant difference among disability groups in terms of opportunities to participate in organizations, clubs, or community groups ( $F = 4.183$ ;  $p = 0.001 < 0.05$ ). This result indicates that the type of disability may significantly influence individuals' ability to participate in social networks within the community. Certain types of disabilities, particularly physical disabilities or severe disabilities, may create greater barriers to participation in social activities.

Table 4: Resource Mobilization Activities Supporting PWDs' Access to Social Work Services by Type of Disability

		Sum of Squares	df	Mean Square	F	Sig.
I receive support or guidance from local authorities in finding information.	Between Groups	12.695	5	2.539	2.272	.049
	Within Groups	224.609	201	1.117		
	Total	237.304	206			
I have opportunities to participate in organizations, clubs, or community groups.	Between Groups	19.306	5	3.861	4.183	.001
	Within Groups	185.544	201	.923		
	Total	204.850	206			
Family and relatives often support me.	Between Groups	4.073	5	.815	.595	.703
	Within Groups	274.980	201	1.368		
	Total	279.053	206			
	Between Groups	14.325	5	2.865	2.231	.053
	Within Groups	258.119	201	1.284		

Friends, neighbors, or connections in the community.	Total	272.444	206			
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(Source: Actual survey data)

Conversely, the analysis results do not indicate statistically significant differences among disability groups regarding support from family members and relatives ( $F = 0.595$ ;  $p = 0.703 > 0.05$ ). This suggests that family support remains a relatively stable source of assistance for persons with disabilities (PWDs), regardless of the type of disability.

Regarding support from friends, neighbors, and community relationships, the analysis results also show no statistically significant difference ( $F = 2.231$ ;  $p = 0.053 > 0.05$ ), although the p-value is relatively close to the significance threshold. This finding suggests that support from community relationships may be relatively consistent across different disability groups.

From the perspective of Social Capital Theory, these results indicate that the type of disability may influence access to linking social capital (connections with government authorities and service systems) as well as bridging social capital (participation in organizations and community networks). However, bonding social capital, particularly support from family members and relatives, continues to play an important and relatively stable role for PWDs.

## DISCUSSION AND POLICY IMPLICATIONS

The findings indicate that the level of resource mobilization to support PWDs in accessing social work services at the community level remains moderate. Informal resources, such as family support and close social networks, play a more prominent role than formal sources, including social organizations and local authorities. This pattern not only reflects differences in the effectiveness of various resource types but also reveals an imbalance in the structure of social capital among PWDs within the community. From the perspective of Social Capital Theory, social networks facilitate individuals' access to information, emotional support, and necessary resources to overcome social barriers, particularly for vulnerable groups such as PWDs.

First, the results confirm that family members and close relatives are the most important sources of support for PWDs in accessing social work services. This finding highlights the dominant role of bonding social capital close-knit relationships characterized by strong ties. Beyond providing material assistance, these relationships play a critical role in offering psychological support, sharing information, and promoting social participation among PWDs. From a more advanced analytical perspective, "family support" can be considered a strong predictor in regression models of service access, with a more direct and stable effect compared to other resource types. This finding is consistent with studies by Hall and Kramer (2021), Lindsay et al. (2019), and Emerson et al. (2020), which demonstrate that family networks not only reduce psychological barriers but also enhance social participation and decrease the risk of social isolation among PWDs.

Beyond its direct support function, the family also serves as an important intermediary mechanism connecting PWDs to formal resources. Studies by Lindsay and Cagliostro (2021) and Goodley et al. (2022) indicate that, particularly in developing contexts, family members often act as "bridges" by assisting PWDs in accessing information, completing administrative procedures, and connecting with social services. This suggests that the impact of bonding social capital is not only direct but may also operate indirectly by activating other forms of social capital.

However, the findings also reveal that PWDs' participation in social organizations and community groups remains limited, reflecting a weakness in bridging social capital. This form of social capital is essential for expanding networks beyond the family and enabling access to more diverse information and opportunities. The lack of such connections may constrain PWDs' ability to access services and broader social opportunities. From a statistical perspective, this may be reflected in a low correlation or weak effect of the variable "community

participation” on service access. These findings are consistent with Amado et al. (2018) and Tough et al. (2019), who report that PWDs tend to have smaller and less diverse social networks, increasing the risk of social isolation.

In the Vietnamese context, empirical evidence further supports this observation. Takahashi et al. (2020) found that participation in multiple social groups is positively associated with life satisfaction among PWDs, while Mitra and Yap (2021) emphasize that more diverse social networks enhance social inclusion and access to resources. This suggests that strengthening bridging social capital could play a critical role in improving the effectiveness of resource mobilization at the community level.

In addition, the study indicates that support from local authorities and service-providing organizations remains limited, reflecting a relatively low level of linking social capital. This type of social capital represents relationships between individuals and formal institutions with authority, such as government agencies or service providers. When such connections are weak, PWDs face greater difficulties in accessing official information, support programs, and administrative procedures. From a statistical standpoint, this may be reflected in a weak or non-significant effect of the variable “government support” in analytical models. This finding aligns with studies by Banks and Polack (2020), Shakespeare et al. (2021), and Graham et al. (2019), which highlight that the lack of effective linkages between PWDs and public service systems constitutes a major barrier to the implementation of inclusive policies.

Beyond social network factors, the findings also suggest that individual characteristics, such as educational attainment and type of disability, are associated with differences in access to support resources. This reflects the unequal distribution of social capital among different groups of PWDs. Studies by Mitra et al. (2017) and Shandra et al. (2019) indicate that individuals with higher levels of education or greater social integration tend to have broader social networks and better access to information. Similarly, Emerson et al. (2020) show that more favorable socioeconomic conditions enable PWDs to build and sustain stronger social capital, thereby improving access to support resources.

Overall, the findings underscore the central role of social capital in facilitating PWDs’ access to social work services at the community level, while also revealing a clear imbalance among its different forms. While bonding social capital plays a dominant role, bridging and linking social capital remain underdeveloped, limiting opportunities to expand networks and connect with formal service systems. These findings suggest that social work interventions should move beyond direct support provision to focus on strengthening all forms of social capital. In particular, efforts should prioritize enhancing PWDs’ participation in community organizations and improving linkages with public service institutions. Such approaches are essential for improving the effectiveness of resource mobilization and ensuring sustainable access to social work services for PWDs.

## **Policy Implications**

Based on the research findings, several policy implications can be proposed to improve the effectiveness of resource mobilization supporting PWDs’ access to social work services within communities:

Strengthen the role of families and informal support networks in programs supporting PWDs. Community-based interventions should focus on enhancing the capacity of families to assist PWDs in accessing information, services, and development opportunities.

Expand social networks and community organizations for PWDs, such as clubs, self-help groups, or disability organizations. Participation in such networks can help PWDs strengthen bridging social capital and access broader resources and opportunities.

Enhance the role of local authorities and social workers in connecting PWDs with social resources. This can be achieved through activities such as information provision, counseling, administrative support, and the development of community-based social work service systems.

Promote communication and raise community awareness about the rights of PWDs, while encouraging inclusive programs that reduce social barriers and create opportunities for PWDs to participate in community activities.

### Limitations and Future Research

Although this study provides important evidence regarding the role of social capital in supporting PWDs' access to social work services at the community level, several limitations should be acknowledged.

First, the study was conducted in a single locality, which may limit the generalizability of the findings. Second, the data relied primarily on self-reported responses from participants, which may be influenced by perceptual bias. Third, the cross-sectional research design does not allow for the examination of causal relationships among the studied variables.

Future studies could expand the scope of research to multiple local contexts, incorporate comparative analyses, and employ more advanced analytical methods to provide a deeper understanding of the role of social capital in improving access to services for persons with disabilities.

### CONCLUSION

This study applied Social Capital Theory to analyze resource mobilization activities supporting persons with disabilities in accessing social work services within communities. The findings indicate that support resources primarily originate from close social networks, such as family members, friends, and neighbors, while connections with social organizations and formal service systems remain limited.

Additionally, certain individual factors, including educational level and type of disability, may influence the accessibility of support resources. These findings suggest the need to strengthen policies and programs aimed at developing social capital among PWDs, particularly by expanding social networks, promoting community participation, and enhancing the role of social work systems at the local level.

Effectively mobilizing social resources not only improves access to social work services for PWDs but also contributes to promoting social inclusion and improving their overall quality of life within the community.

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