

QUALITY REHABILITATION FOR SELF ACTUALIZATION OF EXCEPTIONAL INDIVIDUALS

Dr. Jibril Isah Diso

*Department of Special Education
Bayero University Kano*

Abstract

Quality programmes have evolved outside “Institutions” since the seventies. A person with disability can be seen in his correct perspective as he is significantly hindered from living normal life in the society. There are often marked differences in attitudes toward disability and the role of persons with disabilities. Any rehabilitation programme should involved a dynamic approach that will enhance a total fulfillment of the individual. The individual learns how to live with residual permanent disabilities. Genuine adjustment focuses on the inner process that involves examination and possible reorientation of values.

Introduction

CBR programme will aim at establishing a sustainable system of rehabilitation in the local communities, within the existing social systems and resources. At national level the aim is to make the government select and promote CBR as the national strategy for rehabilitation of disabled persons. At present the CBR programmes are the most widely used concepts within development support for disabled persons. These programmes promote broad based local community development, ideally for the benefit not only of the disabled persons and their families, but also for other local groups, and their local development and social participation at large Not least is social integration of disabled emphasized.

The observation above, no doubt would have emerged out of synthesis of progressive adjustment in the evolution of programmes and services directed toward meeting the needs of persons with disabilities in our midst. It must be understood, directly from both human and social perspectives that these “exceptional individuals” are first and foremost human beings and must essentially be recognised as such but experience has shown that attitudes, acknowledge, interaction, and accordance of rights, etc, have been on the negative. At the same time such persons with disabilities arrive at such conditions for no faults of theirs, just as the society should be held responsible for any trace of disability with any individual.

Disabilities - Overview on Perspectives

A person with disabilities could be seen as one who because of physical, intellectual, or emotional impairment, is significantly hindered from learning, working, plying, adapting to the exceptions or demand of society, or doing the things other

individuals of his or her age can do (Osuorji, 2004). Citing a BBC special supplement, “Worlds of “Difference“, Osuorji indicates that about 1 in every 12 persons in Africa is disabled. This means that around 8% of Africans have an impairment, which affects their lives in some way. Such persons may have difficulty with moving around, with seeing, hearing or learning, as they may have been disabled, developed impairment in early childhood or become disabled later in life. Whatever the nature of their impairment, persons with disabilities are a significant part of the population of any given society.

Major causes of impairment include: War, Violence and Accidents, Malnutrition, infectious disease such as polio tuberculosis and measles, with non- infectious (arising from poverty), and congenital conditions. Global distribution of impairments by type include: Visual impairment - 11%; hearing impairment - 14%; severe intellectual impairment 26%; neurological disease - 4%; mobility impairment - 32%, and others - 13%. Global causes of impairment by percentage also include – malnutrition 20%, accidents, trauma and war -15.0%; infectious disease - 11.2%; non-infectious disease 20% congenital disease. 20%, and others including aging - 13.2% (UNESCO, 1995).

Facts and figures on the persons with disabilities could be of great concern. Reliable statistical information on the subject of disability is relatively thin on the ground, both in Africa and the world as a whole. Many governments have not carried out research into the prevalence of disability or studied the incidence of particular impairments in their country. Even where statistics exist, they cannot be entirely relied upon. For the world as a whole, it is often claimed that 10% of the population is disabled. According to UNESCO about 500 million persons with disabilities are existing worldwide of which about 50 million live in Africa. Of particular note at this point is the language for disability.

Disability Language

There are often marked differences in attitudes towards disability and the roles of disabled people from one society to the other. Again, words to describe aspects of disability varied greatly from place to place. The point is that we should not be too dogmatic about a particular word or phrase. For the past 40 years, words and phrases on the subject of disabilities have changed for the better – enhancing worldwide civil rights movements of persons with disabilities.

Disabled people world over are gaining greater control and ownership over language which concerns them, societies are in turn forced to adopt words, which do not label, isolate or insult disabled. Whatever arguments are being put forward about the pros and cons of a particular word, the debate over language is just one clear sign that the issue of disability and civil right is now very much on the agenda all over the world. This is however, not to understate the obvious disadvantages the disabled encounters in the society. Disabled persons face many disadvantages in their lives because of the way in which the society operates. For example, disabled people are far less likely than their

non-disabled counterparts to get a decent education, find employment or have a family. Some of the factors which contribute to disabled persons' exclusion from society include;

- Negative attitude toward disabled people in a community or culture
- A lack of enforced laws and active policies, which relate to disability and equal opportunity.
- Barriers caused by the natural and built environment, and
- inadequate services and lack of information appropriate for persons with disabilities. (UNESCO, 1995). “

Where such law and policies obtain, there is nothing to write home about them, considering the inherent imbalances and maladjustment associated with the pronouncement and implementation of such laws and/or policies. For example, in the case of Nigeria, while the National Policy on Education has a chapter dedicated to special education, nothing is said about rehabilitation programmes for persons with ‘disabilities. At the same time, the nation cannot claim ignorance on the rehabilitation mandate for persons with disabilities.

A great shock is on what remains of the “Nigerians with disability DECREE, 1993”. This decree was passed by the then Federal Military Government in 1993. Sections 1 and 6, among others are to be mentioned for the purpose of understanding and attention.

The section 1 is titled “General Principles” which reads as follows:

“... this decree is to provide a clear and comprehensive legal protection and security for Nigerians with disability as well as establish standard for enforcement of the rights and privileges

guaranteed under this decree and other laws applicable to the disabled in the Federal Republic of Nigeria” (P.M.G, 1993; 1).

The outlined principles no doubt can be evaluated as ideal and actually principled on the disability subject for which the decree was passed, but the understanding and its enforcement (implementation), and the failures observed on such issues, can the present condole to posterity. Even those who passed the decree, most of who have transformed into the stake holding politicians of the day might have forgotten of this decree they passed.

Section 4, talked of the “Rights and Privileges of persons with Disabilities”. This section focused on “Health Services”. Five clauses were articulated under this section, the first of which reads disabled persons shall be provided in all public health institutions, free medical and health services including general medical needs” (p.2). The rest of the clauses contained Governments’ mandate for the commitment of medical institutions on treatment, recommendation and certification for disability, Section 6 of the 1993 decree is our major point of concern as it was dedicated to “Vocational Rehabilitation and Employment”. There was a commitment given this cited section, that “Government shall take measures to promote the employment of the disabled. Accordingly:

- Vocational rehabilitation centres to develop and enhance the skills and potentials of persons with disability shall be established in all local government areas.
- Training programmes shall be established to develop vocational skills, and
- Vocational guidance and counselling shall be available to the disabled.

Other four articles of this section 6, focused on mandate to employers of labour, percentage of employment quota for trained persons with disabilities, and the issue of non-discrimination of employed persons based on disability. But it is regrettable and on a disappointing note conclude that the cited decree of 1993, with its attended clauses can best be imagined than realised as this can be regarded as mere entertainment without concern or regret for failure of implementation. However, all hopes are not lost as fortunate wind is blowing across the globe on quality criteria for rehabilitation services and programmes.

Quality Criteria for Rehabilitation Programmes Based on UN Standard Rules and Conventions.

Different UN resolutions, conventions and declarations give clear guidelines on actions for disabled, in particular “The Standard Rules on the Equalisation of Opportunities for Persons with Disabilities” which were adopted by the UN General Assembly in 1994. The UN Standard Rules have been developed on the basis of experiences gained during the UN decade of disabled persons 1983 – 1992. The political and moral foundation of the rules is among others based on the Declaration of Human Rights and on the Convention of the Rights of the Child. It emphasises the need for equal opportunities and rights for children and adults with disabilities, and defines three focal areas (UN, 1994):

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- Preconditions for equal participation, which give recommendations on awareness raising, medical care and rehabilitation, and support services.
 - Target areas for equal participation, which give recommendations on accessibility, education, employment, economic and social security, family life and personal integrity, culture and recreation, and religion.
 - Implementation measures, which give recommendations on policy making and personnel training and evaluation of rehabilitation programmes, among others.

Based on the outline above, criteria for good quality development support to rehabilitation programmes for disabled persons can be based on the UN declarations in the following way (Iareg, 1995;8):

- The country's legislation is explicitly defending the disabled against discrimination and makes them visible as a group,
- People with disabilities with such needs get opportunities for rehabilitation, medical treatment, education, training and employment to develop their potentials.
- People with disabilities have rights to an equal standard of living and economic security as the population at large.
- People with disabilities have a right to love in their families and local communities
- People with disabilities are taken into considerations in the general community planning.
- There exists a national plan and strategy for disability policy.
- The different sectors, like education, health and labour have accommodated their services to people with disabilities.
- There are different types of support to the disabled
- People with disabilities and their organisations have formal and real representation in for a for a disability policy and other issues related to them as a group.

Conclusion

Any basic knowledge and understanding in the area of disability should see it essentially related to function. It should be seen as a disablement and a discrepancy between the capabilities of the individual and the functions demanded of him/her by society in areas which are essential to the establishment of independence and a social life. There are broadly speaking, two ways of understanding and defining disability: One is related to culture and how the disability functions for the individual in the society. The other is related to medical explanations of causes based on the knowledge of human physiology and anatomy, resulting in medical diagnosis This is where rehabilitation remains dynamic.

Rehabilitation therefore, includes a health-oriented process that assists an individual who is disabled to achieve his or her great possible level of physical, mental, spiritual, social, and economic functioning. The rehabilitation process helps the person achievement acceptable quality of life with dignity, self-respect, and independence. “It is not how high one rises that determines One’s merit, but rater how far one has come, considering his/her difficulties”

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