

# 6 Vocational Rehabilitation

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## **Rehabilitation**

Rehabilitation is seen as the ultimate or maximum physical and psychological adjustment within the limits of the person's impairment, so that he can live a useful and satisfying life as is humanly possible. Rehabilitation involves training and treatment of a patient fully so that he may attain his maximum potential for normal living mentally, educationally, economically, socially, physically, and psychologically. Rehabilitation refers to the process of restoration of disabled persons to a complete usefulness of all his capabilities.

The International Labour Organization (ILO) (1973) defined rehabilitation as a generic term covering the continuing medical, paramedical and vocational processes through which a person who has been disabled by congenital causes (injury or illness) can to some extent possibly achieve his full capacity and become useful to himself. It brings out an individual from a stage of inadequacy to a stage of adequacy in his personality. Rehabilitation is a group of services and methods that have helped restore dignity, self respect and often self support to thousands of rehabilitees. In doing this, rehabilitation has turned many dependent disabled persons into independent citizens.

## **Concept of Vocational Rehabilitation**

The Nigerian concept of rehabilitation was to clear the streets of destitute and disabled persons from the cities e.g. the Federal Government announcement clearing destitute from the streets of

Lagos shortly before FESTAC in 1977. Vocational rehabilitation is a process that enables a person with a handicap to attain usefulness and satisfaction in life. Rehabilitation should aim at personal independence, social participation and possibly, economic productivity. Vocational rehabilitation is that part of the continuous and coordinated process of rehabilitation that involves the provision of those vocational services such as vocational guidance, vocational training and selective placement, designed to enable the disabled person to secure and retain a suitable employment. It aims at independent living by the disabled.

Vocational rehabilitation is the process of helping a non-productive or deviant person towards restoration of the desired standards through education or retraining, often vocational or physical in nature. Vocational rehabilitation aids the disabled to achieve self-sufficiency, independency, effectiveness and lasting vocational adjustment. It requires many services including those offered by physicians, medical hospitals, and special schools, rehabilitation centres, and employers in both public and private sectors.

Vocational rehabilitation is part of the coordinated process of rehabilitation designed to enable the disabled person to secure and retain suitable employment.

It involves the following steps:

1. Assessment, which involves an evaluation of the individuals physical, emotional, intellectual and social status
2. Guidance, which involves the making and carrying out of adequate plans aimed at achieving satisfactory adjustment in all aspects of daily life.
3. Vocational training, which involves helping the individual acquire specific work skills.
4. Placement and follow up, which involves having the individual fixed in a job position, coupled with periodic supervision. The help of a guidance counselor achieves the above steps.

## **The History of Vocational Rehabilitation of the Disabled in Nigeria**

The efforts of rehabilitation of persons with disability in Nigeria were mainly by missionaries; mainly with the treatment of leprosy. Only recently, did Government begin to show interest by assisting with some finance, staff, and equipment. The effect of the civil war left a large number of citizens disabled which also inspired the establishment of other centers by the Government e.g. in Lagos, Kaduna etc. History of rehabilitation in the various states in Government papers shows that, Oji River (Enugu State) rehabilitation center was established in 1936 by missionaries. They cater for various types of disabled persons. The war victims were also rehabilitated there.

The Emene rehabilitation centre was set up in Enugu in 1972. Around 1908, an old people's home was established in Asaba, Delta State. Another was established in Warri and Benin in 1950 and 1948 respectively. In Benin, a sheltered workshop was set up to rehabilitate the blind.

Since 1956 workshops for vocational training of the blind have been established in Maiduguri, and Geidam in Borno state. They received formal education and vocational training.

In Cross River State, leprosy centres were established in Obubra in 1956, Ikom 1958, and Itu 1964, to provide medical services for patients and to rehabilitate them. We have the Ikot Ekpene Remedial training center workshop for shoe making.

In Gongola state since 1957 many Government blind people workshops were established particularly Yola (1957), Mubi (1971), Ganye and Numan (1978) and Wukari, Jalingo (1980). These supported workshops provide vocational training in various crafts. In 1945, the Methodist church established a leprosy settlement in Uzuakoli, Imo State where patients were trained in farming and handicrafts. War victims were also taught crafts so that they can be gainfully employed in the society.

In Katsina State we have a leprosarium built in Baban Ruga

near Katsina town and Majem near Zaria. We have sheltered workshops set up in Zaria, Kaduna, to rehabilitate war victims. Kano also built a leprosarium at Yada-kuya and alms houses in Yakusai, and Dawakin Kudu and Durayi to rehabilitate other types of disabled persons. In Kwara State the leprosarium established in Omu-aran and Egbe 1943 provides medical and vocational rehabilitation. Lagos also has so many rehabilitation centres Nigerian Farm Craft Center for the Blind established in 1957 to train blind adults in agricultural techniques and handcrafts. The Federal Nigerian Society for the Blind established vocational training centre for blind adults in Oshodi. The centre trains many blind people to function in many sectors of the economy as telephone operators, typists, factory workers and self employed persons.

The beggar's camp in Gbagada was established in 1976 in Lagos to provide vocational rehabilitation services to the disabled in order to discourage begging. In Niger state a leprosarium was established in Chanchanga in 1953. The disabled were treated and rendered vocational training in farming, fishing and crafts. In Ogun state, rehabilitation centres were established to treat and cure illnesses. They provide vocational training, and treat, soldiers suffering from nervous or mental diseases. In Ogbomoso, as far back as 1958 rehabilitation services including farm craft, handicrafts, braille were established. The deaf centers in Ibadan were mainly towards religious, social, recreational, leadership training and improvement of communication skills of hearing impaired persons. A rehabilitation center for destitute was established in Ibadan in 1976 in its bid to rid the streets of beggars and destitute. In Nasarawa State, the Alushi medical and rehabilitation center was established in 1952. It has a school for the physically handicapped. Adults are provided vocational training in trades such as tailoring, carpentry shoemaking and metal work. Relevant technology workshops were established in Jos and Pankshin to provide vocational training and remedial

education for disabled youths and school dropouts. Plateau state rehabilitation center offers vocational training in area, like tailoring, carpentry, shoemaking, welding etc. The Mangu, Zawan rehabilitation centers provide rehabilitation services. In Sokoto State the only rehabilitation center was established in 1974 to provide vocational training for the blind in handicrafts. The government finances most of these centers.

### **Special Problems of Rehabilitation**

1. Lack of basic training centre.
2. Negative attitude of family, individuals and the public. The family may have ambivalent attitude or attitude of rejection.
3. Lack of transportation in urban and rural areas. If there is no easy movement to solve the problem of the transportation, individual with impairment could encounter some problems.
4. Shortage of trained personnel /staff/ specialist. This means that there are no sufficient professionals to help teach the basic skills and vocations to the clients.
5. Lack of funds/capital: The situation where the Government of Nigeria budgets only small amount of money for rehabilitation programme will definitely affect rehabilitation.

Some rehabilitation centres in Nigeria are those of Kano, Ibadan, Lagos, Kaduna, Sokoto and Owerri and Jos.

1. Lack of coordination of activities at the National, state and local levels"
2. Inadequate materials and resources in the form of equipment or devices. For example shortage of wheel chairs for some of the disabled. You have shortage of crutches, machines, typewriters and so on.
3. Lack of information and its exchange. This process means that people do not often pass information about rehabilitation to others.
4. Lack/of interest and appreciation in rehabilitation by the

staff/rehabilitates.

5. Lack of legislation/law.
6. Statistical problem. The number of disabled persons in Nigeria could be overwhelming. There are over 10 million disabled persons in Nigeria.
7. The idea of community-based rehabilitation (CBR) is still very new in Nigeria.
8. Lack of proper identification and classification. Unfortunately, the number of disabled persons in Nigeria is not known neither are they properly classified.
9. Government policy. Policies are not implemented or are haphazardly done.
10. Inadequate curriculum development by our vocational education planners.
11. Lack of incentives to persons who work with the disabled and or for the blind and other handicapped.
12. Inadequate family involvements.

### **Types and Forms of Vocational Rehabilitation.**

The various types and forms of rehabilitation include:

1. Social rehabilitation
2. Physical rehabilitation
3. Vocational rehabilitation
4. Psychological rehabilitation
5. Independent living rehabilitation (ILR).
6. Community based rehabilitation (CBR)
7. Medical rehabilitation

#### **1. Social Rehabilitation**

Children who are physically impaired often have social problems given sound rehabilitation to be able to cope with such problems and others such as contending with the attitudes of the society, for example, interaction with others. They need to be rehabilitated by the society. They need to be

taught how to play and interact with fellow age mates.

### **2. *Physical Rehabilitation***

The persons with impairment need to become physically fit. If you carry an accident victim to the hospital for treatment, it means you are helping to rehabilitate the person.

### **3. *Vocational Rehabilitation***

This is the process of training individuals with impairment in various skills and jobs opportunities.

### **4. *Psychological Problem***

Psychological problems could include behavior disorder mental disability or even family problems.

### **5. *Independent Living Rehabilitation (ILR)***

Rehabilitation should equip persons with disability to resume independent function and only minimally dependent on outside help.

### **6. *Community Based Rehabilitation (CBR)***

Rehabilitation is taken to individuals in need of rehabilitation in their communities using local resources and materials.

## **Identification and Assessment**

### ***Identification***

Identification in rehabilitation follows the same step as in special education. The identification programme procedure includes the following steps.

1. Case finding
2. Screening
3. Educational assessment
4. Evaluation services

By identification, is meant the process of assuming the behaviour of another person; it is observing, judging certain deficits, or behaviours of individual children and adults. It is an act of discovering, locating by specific proof of one's belonging behaviour.

### ***Case Finding***

This is the step of identification. It is a process of locating the disabled or potentially impaired or adults from a target population who will benefit from vocational rehabilitation programme.

The procedure involves locating adults for screening or diagnostic activities depending on the programme goals and objectives. The population in rehabilitation cases is usually adults between 25 years to 65 years (retiring age) in Jos metropolis. The case finder goes to the field well informed about the type of people to look for and their background. The target population constitutes a large group of people of interest to the case finder for identification and also he or she certifies them for screening and other assessment procedures. The target population for the purpose of village / community or a given geographical area may become rear during the case finding process.

In order to be successful you need to develop public awareness and enlightenment campaigns. Encourage voluntary referrals; you will need to advertise service, encourage referrals for social agencies, health agencies, neighborhoods, conversing the community for the adults in need of services. All certified cases are -recorded and referred to the next stage, which is screening.

### ***Step 2 Screening***

Adults identified during case finding are usually referred for screening. Screening is a process of separating from a population, adults who would be in need of further evaluation in order to determine the ability of the adult and establish the need for rehabilitation services. Screening involves the use of basic devices or instruments designed to measure certain skills or the functioning of an organ. Screening should be done very fast: for example your target population is adults 25 - 65 years old. Suppose there are about 5000 adults that fall within pattern of this age range, and the goal of the programme is to train the adults in various skills towards employment. The efficient way is to screen



all adults between 25 – 65 years old in order to fish out those that need rehabilitation training. Adults are not labeled on the- basis of screening. Screening helps the staff to determine who need rehabilitation services.

He could be a candidate for thorough diagnostic study or he could have a good prognosis for success without receiving special rehabilitation service and training.

The five assumptions underlining the conduct of screening are:

- a. Specificity of the handicap: The problem has to be identifiable.
- b. The prospect of a good prognosis and possible rehabilitation training. The adult must show some evidence of being able to benefit from a special training programme. Placement could be in the hospital or an institution or community
- c. Prevalence: The cases must be prevalent enough that human resources are not-wasted. Screening could be conducted in a community based serving agencies or a vocational setting widens some skills in measurement and evaluation procedures.
- d. Availability of resources. It means cases identified and referred to screening for assessment will have the benefit of programme services. The programme must not be too expensive, so that it can be available and affordable to all.
- e. Practical consideration: Before screening is taken, you must:
  - 1) Identify the co-coordinator of the screening programme.
  - 2) Get interested members or staff well organized into committees for planning, training and implementation of the various phases of screening especially in regard to the major areas of handicap.
  - 3) Determination of the general objectives of the screening exercise
  - 4) Determining the target population
  - 5) Selection of appropriate instruments and procedures for the screening exercise

- 6) Place and time of screening should be determined
- 7) Community awareness services and school round - up of children who need screening
- 8) Actual screening involving parents as well: diagnoses as they are use screen or gross characteristic to determine the ability to acquire certain skills.
- 9) Screening should take place only when appropriate diagnostic and programme services are available. Information gained in screening will however help to facilitate the diagnostic process. It helps to indicate the strength and weakness of a child/adult.

### ***Step 3 Diagnosis***

*Diagnosis is a process designed to*

- a. Confirm or disconfirm the existence of a problem serious enough to require training of those adults identified in the screening efforts.
- b. Clarify the nature of the problem (is it produced by body organs, environment or both). It involves looking at the adults and the environment in-depth for three basic purposes.
  - 1) To determine whether a handicapping condition or conditions exist
  - 2) To clarify the cause of the identified problem i.e. if the adult is impaired due to e.g. accident, illness e.t.c
  - 3) To develop treatment plans that the programme can render the adult.

Diagnosis is more specific than screening and ideally it should involve a multi-disciplinary team or trained professional (e.g. medical physician, neurologists, language psychologist, medical, counsellors, social workers, vocational workers i.e. specialist in various skilled areas physical therapist language therapist orthopedic specialist, special educators in different areas etc.), The composition of the team will depend on the nature of the

child's disabilities. To determine the composition of the type of data needed will help determine the appropriateness of the obtained data from as many disciplines as possible to get or prepare a broad picture of the child's performance.

The procedures within the diagnostic phase may include:

- a) Administration of standardized instruments
- b) Systematic observation
- c) Development of social and case history, formal interviews.

The information obtained from the results of the diagnosis activities should have strong implications for developing an individualized programme for each adult. Results should be interpreted to staff and parents with emphasis on implication for the planning of daily activities for the adult.

#### ***Step 4 Assessment***

This is when the teacher and/or parents determine individual goals and objectives in specific areas of development in order to plan a vocational or educational programme for the adult. The outcome of assessment should enable those working with the adult to identify his strengths and weaknesses. Assessment provides the teacher with the information needed in planning series of specific curriculum experiences that are based on specific goal and objectives related to the information derived from assessment. Assessment should be done by multi-disciplinary professionals" in order to categorize the disabled and provide appropriate programmes. Assessment equips the vocational experts in order to help him plan remedial programme and solve the problem associated with the client. It enables the professionals to provide alternatives or suggestive solutions to related problems of the client. Assessment should be a continuous process so that re-assessment is possible at intervals at any stage of rehabilitation.

Socially; assessment should stress aspects of past social history

of the client, educational level, work experiences, family relations and home environment.

Assessment is designed to describe or measure areas such as job - placement, job interests, work attitudes responsibilities and aspirations.

### **Step 5 Programme Evaluation**

It is the process of determining whether or not the vocational programme produced the desired results in training adults, who entered and completed the programme information compiled about the adults against some standards criteria. Such data are compiled against which the measurement data are compared, and considered so that decisions process of interpreting the results of the analysis to determine whether the programme should be maintained or modified) can be made. This is to determine the effectiveness of the activities in helping the children reach some determined end.

Evaluation is to clarify its relation to diagnosing vocational assessment.

The main reasons of evaluation include:

- a) To collect data and information on the programme for external decision making and
- b) Provide information for external agencies and populations such as consumers, and Bureau of education for the handicapped.

### **Professionals in Rehabilitation**

1. Special Education Teachers
2. Rehabilitation Counsellors
3. Doctors
4. Nurses
5. Ophthalmologist: - Specialist for treatment of visual problem. That is he deals with cases of visual impairment.

6. Optometrist - Designs and prescribes glasses and lenses:
7. Physiotherapist-Deals with treatment of people with muscles or motor problems. Here the individual could undergo exercises. This is common in cases of stroke. It could also be any problem that has to do with full movement of the part of the body.
8. Oto-laryngologist - Specialists who attend to the problems involving the ear, nose, and throat.
9. Audiologist - Recommends hearing aids, and tests hearing sensitivity.
10. Social workers - perform functions of a counsellor or social welfare worker. Liaise between the home (families of persons with disabilities and government agencies for affective service provisions for persons with disabilities.

### **Vocational Training**

Studies have shown that most handicapped individuals do not work for long in vocation for which they were not counseled. It is good that, prevocational education is introduced, which is a combination of academic work with training, intended to familiarize the persons with impairment, with a wide variety of job opportunities and the specific skills involved. This will give the person with exceptionalities an idea of what interests him and what he is capable of doing. Vocational training is the provision of opportunities to all disabled clients to acquire adequate and relevant skills necessary for their own choice of vocation in life.

The International Labour Organization (ILO) (1973) defined vocational training as that part of continuous and coordinated process of rehabilitation which involves provision of vocational services such as vocational guidance, vocational training, counselling and selective placement designed to enable individuals with disabilities to secure and retain suitable employment of their choice".

Vocational training helps the impaired to function indepen-

dently in the family and community. The training helps them to be able to manage their home affairs, participate in day-to-day activities of the community, social roles of making decisions that lead to self determination and maximization of physical and psychological reliance on others.

Vocational training gives the impaired a broad range of experiences, which is needed to help the client achieve his employment goal written in the rehabilitation plans.

Training in various skills includes:

1. tailoring,
2. dyeing,
3. bicycle repairs,
4. local crafts,
5. carpentry ,
6. operating communication equipment like telephone operation,
7. radio repairs
8. tapes,
9. poetry,
10. farming,
11. welding,
12. drumming,
13. vulcanizing,
14. printing,
15. mechanic, and
16. music. etc

Training in Braille, self help skills are necessary e.g. dressing, good table etiquette, house management. Any of such skills taught in the vocational training centres should prepare the impaired persons to help themselves as well as contribute economically and socially to the life of the society. They should be able to acquire the knowledge, skills, and attitude and perform efficiently on their

chosen occupations.

### **Pre-Vocational Activities and Training**

Full evaluation services including: -

1. Assessment of medication and psychological problems, speech and language, vocational interest, aptitude and work skill.
2. Occupational skills instruction.
3. Academic, personal, vocational adjustment counselling.
4. Special aids and devices.
5. Job development and placement.
6. Family counselling and support services.
7. Transportation.

Pre - vocational activities include: -

1. Introducing the client to names of tools, and materials.
2. Language of the vocational/communication.
3. Attitude or behaviour towards the tools, and manner of handling tools.
4. Procedural sequence - order of doing things - (first things first).
5. The usefulness of the vocation. Some may like to take it as a career.
6. Attitudes to motivation on job - e.g. waking up early, punctuality, no truancy, neatness, and obeying instructions.
7. How to get to the working places, transportation etc.

### **Setting Up a Vocational Centre**

1. Consider needs of the society.
2. Sources of raw materials.
3. Potentiality of the impaired - health, interest, adjustment etc.
4. Manpower - team approach.
5. Funds.
6. Support from family and society
7. Transportation
8. Land and location should be near.

## **Job Related Instruction in Vocational Training**

1. Language and communication skills necessary to perform jobs.
  - a. Study manuals, instruction materials.
  - b. Reading and following directions for specific projects.
  - c. Knowledge of related terms and their use.
  - d. Ability to understand written or verbal instructions.
  - e. Ability to understand written or verbal communication from management.
  - f. Ability to communicate verbally or in writing to supervisors or co - workers about specific job clusters.
  
2. Practical mathematics;
  - a) Ability to calculate measure or observe various parts of a mathematical operation.
  - b) Ability to record data if necessary.
  - c) Ability to read instructions or other measuring devices.
  
3. Understanding the operation and repairs of equipment.
  - a) Demonstrations
  - b) Scientifics
  - c) Mechanical drawings or similar materials.
  
4. Ability to complete a project by following plans, schematics, mechanical drawing;
  
5. General scientific principles related to this training.
  - a) Understanding concepts and application.
  - b) New developments in particular occupation.
  
6. Use of instructional aids.
  - a) Movies
  - b) Slides
  - c) Illustrations
  - d) Charts



- e) Programmed material etc.
- 7. Employment information regarding specific trade.
  - a) Wages
  - b) Unions
  - c) Availability of work in locality
  - d) Hours
- 8. Specific safety requirements of trade:
  - a) Specific jobs
  - b) Others nearby
  - c) Whole plan or place of employment.
- 9. Meaningfulness of job in relationship to
  - a) Other trades
  - b) Other jobs-in the same place of employment.
  - c) Local community.
  - d) State and wider geographical community,
- 12. Visits to other job locations placement stage of training the disabled, when the individual client is fixed up in a job.

The result of vocational rehabilitation programme (training) is to have adequate and appropriate assets about the job that will match their ability and potentialities. Where some clients have problems of re-integration into an old job or society for a new one, it is the duty of the placement officer to change jobs to suit the disabled clients as the need arises. Placement involves putting the client in the right occupation, which is within the disabled adults physical, and mental capacity and one for which he has been thoroughly prepared. Follow up services are also important so as to ascertain whether the placement of a job is satisfying to the individual disabled person or not.

Also to identify the nature of vocational training or retraining

that is most appropriate for the adult. He also evaluates the entire placement programme. He assesses the success of counselling. In order to avoid wrong job settlement in an employment, the placement officer follow up on the disabled as regard the job - placed, so as to ensure job satisfaction. He does the valuation objectively without bias.

### **Areas of Vocational Evaluation**

- a) Vocational readiness for general functioning in the community.
- b) Appearance
- c) Personal hygiene
- d) Neatness
- e) Care of property
- f) Personal finances
- g) Quality of work
- h) Use of phone
- i) Safety
- j) Independence
- k) Self - controlled behaviour
- l) Self - Concept
- m) Realistic goals.
- n) Use of transportation
- o) Knowledge of existing employment in home community
- p) Finding, applying for, and/keeping a job.
- q) Ability to communicate with others
- r) Consideration for others
- s) Socialization with peers and others
- t) Adaptations to new and different social groups.
- u) Ability to handle large or small misfortunes.

### **The Process of Vocational Guidance**

Vocational guidance involves the following processes:

- a) Finding out all about the individual from every point of view connected with employment.

- b) Giving full information on suitable work and training opportunities.
- c) Advising on the most suitable vocation
- d) Finding out all about the individual.

Information needed to investigate persons vocational prospects are:

- 1) Psychological facts describing the individual aptitudes, skills, interest and personality traits
- 2) Personal and social facts needed as a framework for interpretation of data e.g. using achievement test, questionnaires, personal social data etc.

### **Vocational information**

Vocational information is very important as it provide sufficient occupational information, which has been, defined as valid and usable data about positions, jobs and occupations. These include duties, requirements for entrances, conditions of work, rewards offered, advanced pattern, existing and predicted supply of and demands for workers, and sources of further information. You could get such information from professional groups, Government articles, newspapers or magazines. Individuals too could search for such information.

### **Vocational Counselling**

Vocational guidance is a system of techniques designed to help the individual find the calling of life, which provides him great satisfaction, and maximum use of his talents. This could help guide adults to make the right vocational choices.

Vocational guidance has to do with the social, intellectual, emotional and economic future of the individual. This enables the individual to avoid wasting time in training for a vocation which is not suitable. It also help to ensure better use of training facilities by ensuring that only those who can benefit enter into the training

that is most appropriate for the adult. He also evaluates the entire placement programme. He assesses the success of counselling. In order to avoid wrong job settlement in an employment, the placement officer follow up on the disabled as regard the job - placed, so as to ensure job satisfaction. He does the valuation objectively without bias.

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- a) Finding out all about the individual from every point of view connected with employment.

10. Follow up services.

### **Characteristics of a Good Rehabilitation Counsellor**

1. To acquire basic knowledge in the field of counselling.
2. To understand the process of matching individuals with compatible environment.
3. To decide upon a growth or stabilization plan for the clients.
4. To develop prescriptive counselling skills.
5. To implement appropriate counselling strategies for each life style.
6. To understand psychology of each handicap, as regard awareness, acceptance, sensitivity and flexibility.

### **Aims and Objectives of Vocational Counselling**

The aims and objectives of vocational counselling are as follows:

1. To ensure that the disabled persons develop their capabilities, reduce dependency and make them to be capable and as independent as possible.
2. Rendering the disabled capable of productive work, which is beneficiary to the community.
3. Assisting the disabled to develop, through work, self-esteem derived from such satisfaction.
4. Appreciating the worth of work at their level without over emphasis on material possession and objectives out of their grasp,
5. Preparing the disabled to live within the community and to meet up with the demand of everyday life.
6. It help the retarded person to become a generally happier person in the society.
7. It enables the retarded person to gain dignity in the sight of others.
8. It makes the family of the retarded person generally happy.
9. It helps him economically, and he/she is burden-free in the family.
10. It contributes to the welfare of the society.

11. It helps him become busy instead of being idle.

### **Major Goals of Vocational Counselling**

1. One of the major goals of vocational counselling is to help the client become more independent
2. It also helps the individual develop and explore alternative ways and means of dealing with his or her problem of conflicts
3. To overcome blocks or obstacles that impede programmes in any area.
4. The client is helped to overcome those undefined blocks or obstacles through an information gathering and sorting process.
5. As a result of information derived from the counselling process, the client is better off and able to make decisions that will lead to resolutions of uncertainties and conflicts.

### **The Need for Vocational Counselling**

1. Vocational counselling serves as a catalyst, helping the individual to improve quantitatively and qualitatively.
2. It entails the provision of solution to the client by the counsellor
3. It helps an individual to become well adjusted and to grow and develop personally and collectively.
4. It also helps people to understand themselves and the whole environment and to recognize the mutual relationship with the environment.
5. It helps individuals to take active responsibilities in their roles in the society having first of all to make them well adjusted.

### **Vocational Counselling/Remediation**

Counselling responsibility should be conceived and this depends very much on the professional skills that would be based on one or more theoretical approaches. The counsellor should set up a team on remediation or reducing the problem of the handicap. He should also consider the following:

- 1) Authority: Knowing one's professional strength before going for counselling
- 2) Maturity: Maintaining professional integrity.
- 3) Creativity: Solving novel problems
- 4) Accountability: Personal limitation, monitor the process used to provide support to persons with impairment person and objectivity to evaluate the outcome.

To achieve the above, the person must accept and be ready to accomplish the task ahead before counselling is effective.

### **Counselling Services**

This is a face-to-face service between the counsellors and the client. For effective personal counselling, the counsellor must remain strongly, knowledgeable of human personality, and individual differences. In carrying out the counselling process the counsellors should possess the following characteristics, trustworthy, genuine and dependable, capable of giving positive regards to client, knowledgeable, communicate effectively, being understandable, positive in attitude, respectful, being comforting in receiving client, effective catalyst, self confidence, non-judgmental emotionally stable, skillful in all aspects of life.

Counselling may be provided by qualified school counsellor or other related professionals. The recipient of the counselling effort could be the parent of the child with impairment and the child himself. The purpose of counselling is invariably to help the teacher, parents, and child to, understand the nature of the disabilities and the long-term effect that may be expected. In some cases, counselling should be maintained over the entire time the child is in need.

### **Techniques of Vocational Counselling**

Before giving vocational counselling, the following should be taken into consideration:

- 1) Authority: Knowing one's professional strength before going for counselling
- 2) Maturity: Maintaining professional integrity.
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### **Techniques of Vocational Counselling**

Before giving vocational counselling, the following should be taken into consideration:



you to secure or find a job. The advocate could be the teacher, social workers, and professionals and so on.

## ***2. Vocational Training***

This refers to the training that the persons with disability receive as a result of their handicapping conditions. This usually involves;

- a) Assessment.
- b) Vocational Counselling
- c) Training
- d) Placement to enable them secure a job or the placement officer can secure the job.
- e) Follow up services: This means that after the person has been placed on a job, the placement officer follows the person to his working place or visits him at least after every 3 or 4 months. This helps the placement officer to evaluate the competence of the person and also to find out if he is encountering any problems as regard e.g. payment of salaries, transport etc. Thus the employment of persons with disability are checked to avoid discrimination from their employer.

## ***3. Work Supervisor***

This refers to the officer that supervises both the handicapped person and the workers that train the disabled person. He is responsible for supplying anything lacking in the place of work. Even though supervisors cannot dismiss an officer from his job, he can issue query to the officer if he is not performing his duty well.

## ***4. Vocational Evaluator***

This officer is responsible for assessing the disabled fully. He finds out how well the job is being carried out. He is able to identify disabled person's weaknesses and is also in a better position to suggest and recommend how best to train the disable. After evaluation and assessment he then goes and effects changes required for efficiency and comfort.

### **5. Adjustment Counsellor**

We do not have adjustment counsellors in Nigeria but they are available abroad. He trains the person with disability on how to adjust fully to their new job. Counsellor provides all the necessary adjustment information needed to help the disabled person settle fully on his new job.

### **6. Rehabilitation Counsellor**

This officer is often the head as such he is supposed to have a PhD; Masters or at least a First Degree in guidance and counselling. He unites all the workers. He opens a file for every person that works in the center. He also helps to listen to their problems, study their problem and also help in solving their problems whenever you go to him. The officers counsel the client to help remove the effect of disability the adult may have so that you can settle comfortably in the job. \*

### **7. Resettlement Service**

Individuals that often require this type of services are those persons who acquired the disability later in life. These individuals usually go to the rehabilitation center for their training and this type of training is called resettlement service.

## **Employment Options for persons with Disability**

Persons with disability often experience difficulty in finding employment. Job opportunity is more limited than they are for the disabled person. The type of job options are as follows:

1. Sheltered employment
2. Competitive (open) employment.
3. Home bound employment
4. Self employment
5. Comparative employment

### **1. Sheltered Employment**

Some people who are impaired are not capable of working up to

the standards expected of employees in open industries, though they may be able to do useful work. They may be slow or may need time off for a lot of medical treatment. Some may be very good and competent workers but may have epileptic fits so often that they would not be acceptable by an employer.

The sort of work available in sheltered workshop varies greatly. Some places are still turning out the traditional crafts, basketing, brush making, and mat weaving. Some make their own brand of goods such as soaps, shampoos, textiles, leather goods, beddings and furniture.

Employees in sheltered workshop cover the normal working weeks and their wages are usually agreed upon with the appropriate trade unions.

Those professionals involved with the impaired people need to be aware of the service, which exist to help them find work. It should never be forgotten however, that finding the right job is often more difficult than finding jobs for the able bodied people.

Disabled people are less able to be switched around between buildings and less able to move about the country in search of jobs. The disabled person who is looking for work will need a lot of support and encouragement from those working with him.

**Training for employment:** The training service agency runs several skill centres formally known as government training centres, which teach variety of skills and run semi-skilled occupational courses from six to nine months. The type of subjects available include: Clerical, business and administrative studies, engineering trades of various kinds. Disabled people who are able to work at these trades may enroll in these courses, and do so beside able-bodied trainees.

Clients who are suitably qualified, may be trained under the scheme. It is especially suitable for those who have to leave their usual professions because of disability. For example, a school teacher good in art that was becoming deaf might be trained to become a commercial artist. An athletics coach losing his or her

sight might be trained to become a physiotherapist.

## **2. *Competitive or Open Employment***

Competitive or open employment refers to a situation where both individuals with disability and normal persons have to undergo training to make them capable of securing jobs. Although the disabled persons have some limitations of getting many jobs, they are supposed to compete for employment of their choice and interest as far as they are qualified.

With modern education, both the missionaries and governments have established various vocational institutions where both children and adult with handicapping conditions are meaningfully trained in different areas so that they would acquire skills in areas of their interests and capabilities. They acquire skills such as painting, principles of teaching, typing, telephone operating etc. This enables the disabled to compete favourably with the normal persons on open employment. Abang ( 1980) revealed that blind people employed in open industries on the average, report earlier to their work places than their sighted counterparts and leave their work place later than sighted co-workers

## **3. *Self-employment***

This means that the disabled person is self-employed. That is, the employee becomes the employer of the skills acquired. The disabled person refuses to take appointment with the Government, Company or individual. He decides to set up, for example, a workshop for himself to earn his daily bread. Such workshops could include leather work, making and repair of bags or shoes, tailoring, blacksmith, welding, sewing, carpentry and so on.

One of the objectives of special education is to train the disabled persons to be self-reliant. Vocational training is a type of training that enables the disabled person to acquire skills in Jobs

like carpentry, painting, architecture, tailoring and many others.

The disabled persons are trained to even accept the fact that not all people would like to work with them. Sometimes because of the nature of the disability, they may prefer to be self-employed.

At times the able bodied persons may never admit that the disabled persons can exhibit useful talents in jobs.

#### ***4. Home Bound Employment.***

This option makes it possible for disabled person to be employed by the members of the family to work for them. This employment is given to someone whose parents are aware of his condition.

Homebound employment is best for the impaired whose condition needs some adjustments that may be difficult in other work places. For example, the lady in the wheel chair cannot be employed as a typist in a chamber in an upstairs building. Their employment may be such in jobs like teaching family children, working in shops etc.

#### ***5. Cooperative Employment***

This is a type of employment where a group of disabled come out in groups to do a job. The disabled persons organize themselves into an association. This means that they all have their different jobs and sectors. They are able to get favours from government or voluntary agencies.

An example of such a group is "Nigeria Blind Association Jos Branch (NBA), and Nigeria National Association of the Deaf (NNDA)

### **Focus Questions**

1. What is rehabilitation
2. Provide a brief history of rehabilitation in Nigeria.
3. Rehabilitation programme in Nigeria is beset with many problems. Explain any five of these problems.
4. Rehabilitation has many types and forms. Explain any five of

these types and forms.

5. Explain the steps to identification and assessment in rehabilitation
6. There are many professionals in the rehabilitation field. Briefly explain the role of any five of such professionals
7. Explain any five vocational skills that a client can undertake in a typical rehabilitation centre.
8. Explain the role of a rehabilitation counsellor in the rehabilitation process.
9. What five goals should a typical vocational counselling provide clients in a rehabilitation centre.