



FEDERAL REPUBLIC OF NIGERIA



National Policy on
Rehabilitation
of
Persons With Disabilities
(PWDs)



FEDERAL REPUBLIC OF NIGERIA

National Policy on
Rehabilitation

of

**PERSONS WITH DISABILITIES
(PWDs)**

CONTENTS

SECTION 1:	INTRODUCTION	Pages
1.1.	Definitions	2
1.2.	Disability as a Human Rights and Development Issue	2
1.3.	Causes of Disability	3
1.4.	Existing disability Structure	4
1.5.	Declarations of the United Nations	5
SECTION 2:	NATIONAL POLICY FRAMEWORK ON DISABILITY	
2.1.	Objectives	6
2.2.	General Principles	6-7
2.3.	Specific Target Groups:	7
2.3.1.	Older Persons with Disabilities	7
2.3.2.	Children with Disabilities	7
2.3.3.	Women with Disabilities	8
2.3.4.	People with Disabilities living in Rural Areas	8
SECTION 3:	POLICY GUIDELINES	
3.1.	Raising Awareness	9
3.2.	Prevention, Early Intervention and Health Education	10-11
3.3.	Treatment, Therapeutic aids and orthopaedic technical services	11
3.4.	Barrier free Access	11-12
3.5.	Access to Information and Communication	12-13
3.6.	Education	13-15
3.7.	Vocational Guidance, Training and After Care Services	15-16
3.8.	Employment	16-17
3.9.	Culture and Religion	17
3.10.	Sports and Recreation	17-18
3.11.	Welfare Services and Housing	18
3.12.	Social Security	19
3.13.	Transport, Traffic and Road Safety	19-20
3.14.	Legislation	20-21
3.15.	Human Resources Development	21
3.16.	Data Information and Research	22
3.17.	Organisations of and for Persons with Disabilities	22-23
3.18.	International co-operation	23-24
3.19.	Assistive Devices	24
3.20.	Inter-Governmental Co-ordination	25
3.21.	Monitoring and Evaluation	25-26

SECTION 1:

INTRODUCTION

1.1. DEFINITIONS

Generally, the issue of definition of rehabilitation and disability is more than a matter of semantic, since they can influence how the Society perceive persons with disabilities and how persons with disabilities perceive themselves. This could also influence the type of services provided to meet the needs of persons with disabilities. There are a number of definitions on rehabilitation and disability.

Rehabilitation is defined to include all measures aimed at reducing the impact of disability for an individual, enabling him or her to achieve independence, social integration, a better quality of life and self-actualization. Rehabilitation includes not only the training of persons with disabilities but also interventions in the general systems of society, adaptations of the environment, protection of human rights and empowerment.

The term "disability" embraces a great number of different functional limitations occurring in any population in any Country of the World; The World Health Organisation (WHO) uses the medical approach to define disability. However, organisations of and for people with disabilities are increasingly adapting definitions of social model. "Disability" is the loss or limitation of opportunities to take part in the everyday life of the community on an equal level with others due to physical or social barriers. Disability varies in terms of severity, longevity, causes and consequences. Some disabilities remain static throughout a person's life while others may have periods of remission or regression.

For the purpose of this policy, it is the social model that is more relevant to the lives of persons with disabilities while noting that their medical needs should not be overlooked. However, if disability is perceived as a social phenomenon, legislators, architects, the family, the community and others who determine the shape of our environment have a crucial role to play.

1.2. DISABILITY AS A HUMAN RIGHTS AND DEVELOPMENT ISSUE

In the past, disability was viewed as a cause, which evokes pity and public sympathy. This resulted in unjust dependency, segregation, isolation and exclusion from the Society.

Over the past decade, organisations of people with disabilities all over the world have worked to reposition disability as a human rights issue. The result is a social model for disability based on the premise that if society cannot cater for people with disabilities, it is the society that must change. This model requires substantial changes to the physical environment. The goal must be the right of people with disabilities to play a full, participatory role in society.

This changing ethos has taken place within an international context which finally gave rise in 1993, to the UN Standard Rules on the Equalisation of Opportunities for

Persons with Disabilities. A key principle of movement of Persons with Disabilities throughout the world, and indeed of the social model itself, is the involvement of persons with disabilities in the process of transformations.

The principle of equal rights implies that the needs of each and every individual are of equal importance and that planning and policy-making, should be based on those needs. Furthermore, all resources must be employed in such a way as to ensure that every individual has an equal opportunity to participate.

Special attention may be needed to ensure the following:

Access to health and social services; to education; ability training and income generation opportunities; to housing; transportation and to building; to information, to cultural and social life, including sports and recreational facilities; to representation and full political involvement in all matters of concern to them.

As persons with disabilities achieve equal rights, they should also have equal obligations. As those rights are being achieved, societies should raise the expectations of persons with disabilities to assume their full responsibility as members of society.

1.3. CAUSES OF DISABILITY

Many factors are responsible for the rising numbers of people with disabilities and their consequent isolation from the mainstream of society. Among them are:-

- Communicable diseases (Leprosy, Polio, trachoma, onchocerciasis or river blindness, malaria, tuberculosis, bilharzia and other parasitic diseases, sexually transmitted diseases including AIDS, and many others).
- Malnutrition and under-nutrition (protein-energy malnutrition, vitamin and mineral deficiencies)
- Non-Communicable somatic diseases (arthritis, back problems, cardiovascular problems, epilepsy, cancer, diabetes, respiratory problems etc).
- Female Circumcision.
- Various causes of functional psychiatric illnesses (schizophrenia etc) chiefly stress related and partly inherited.
- Various causes of intellectual impairments often of unknown origin and usually congenital or innate.
- Chronic alcohol and drug abuse.
- Heredity (such as some blindness and deafness, spinal bifidal, muscular dystrophy).
- Home accidents.
- Traffic accidents.
- Prenatal problems (causing cerebral palsy).
- Work accidents.
- Civil wars, unrest, tribal communal war, arm robbery etc.

The casualties of violence often suffer a long life physical disability, mental health complication and severe psychiatric diseases. These are evident among people who have Participated or lived through a war. Examples are women who are raped during war.

1.4. EXISTING DISABILITY STRUCTURE

Over the years, the Government of Nigeria has undertaken important initiatives towards the development of a number of policy statements, which address the demands and rights of people with disabilities.

Disability issues in Nigeria have been taken care of by the three tiers of Government, Voluntary Organisations for and of persons with disabilities.

At the Federal level, all the line Ministries collaborate with the Federal Ministry responsible for rehabilitation of Persons with Disabilities towards achieving the goals of rehabilitation. The line Ministries and Agencies are:-

- Federal Ministry of Education,
- Federal Ministry of Health,
- Federal Ministry of Labour and Productivity.
- Federal Ministry of Justice,
- Federal Ministry of Women Affairs and Youth Development,
- Federal Ministry of Information and National Orientation,
- Federal Ministry of Works & Housing,
- Federal Ministry of Communication,
- Federal Ministry of Transportation,
- National Planning Commission,
- National Poverty Eradication Programme (NAPEP),
- National Directorate of Employment (NDE) etc.

In Nigeria, there are Organisations/Associations for and of persons with disabilities such as: - Associations of the Blind, Deaf and physically Handicapped. There are no legal provisions mandating the representatives of persons with disabilities to participate in policy-making and to work with Government institutions. The Government gives financial and organisational/logistic support to existing or new organisations of persons with disabilities. The organisations have the role to advocate rights and improved services, mobilize persons with disabilities, identify their needs and priorities, participate in the planning, implementation and evaluation of services and measures concerning the lives of persons with disabilities, contribute to public awareness, provide services, and promote/organise income generating activities.

1.5. DECLARATIONS OF THE UNITED NATIONS

The International year of Disabled Persons in 1981 served as a catalyst in rehabilitation issues in Nigeria. During the UN Decade of the Disabled (1983-1992) awareness was created and organisations of persons with disabilities were encouraged.

The Government of the Federal Republic of Nigeria accept the principles of participation, integration and equalisation of opportunities as defined by the United Nations in the World Programme of Action concerning Disabled Persons and by the Standard Rules on the Equalisation of Opportunities for persons with disabilities.

The Federal Government of Nigeria further accepts the principles incorporated in the following declarations proclaiming the necessity of protecting the rights and assuring the welfare and rehabilitation of the physically and mentally disadvantaged; the Universal Declaration of Human rights; the International convention of human rights; the United Nations Development Decade for Women, the Declaration on the rights of mentally retarded persons; and the Declaration on Social Progress and Development.

In Nigeria, there are organisations/associations for and of persons with disabilities such as - Associations of the Blind, Deaf and physically Handicapped. There are no legal provisions mandating the representatives of persons with disabilities to participate in policy-making and to work with Government institutions. The Government gives financial and organisational/logistic support to existing or new organisations of persons with disabilities. The organisations have the role to advocate rights and improved services, mobilize persons with disabilities, identify their needs and priorities, participate in the planning, implementation and evaluation of services and measures concerning the lives of persons with disabilities, contribute to public awareness, provide services, and promote/organize income generating activities.

- (c) Preventing or reducing the occurrence of physical, intellectual, psychological or sensory impairment and permanent functional limitation or disability.

2.3. SPECIAL TARGET GROUPS

2.3.1. OLDER PERSONS WITH DISABILITIES

The prevalence of disability increases drastically with the onset of old age. It follows that, as the life expectancy of Nigerian population increases, so too will the prevalence of disability among the older persons in our society.

The problems of older Persons with Disabilities in Nigeria are Increasing for the following reasons:-

- (a) There are increasing number of older Persons with Disabilities in the population as life expectancy increases .
- (b) Urbanisation and rural-urban migratory labour mean that many older persons with disabilities are left to look after subsistence farms with inadequate support from the younger generation.
- (c) Few older Persons with Disabilities have adequate State or any other social security, pension or savings, even after a lifetime in employment.
- (d) Nigeria is increasingly experiencing intensified hardship which disproportionately affects vulnerable groups such as the elderly persons with disabilities. The social security is being further eroded by prevailing economic realities.
- (e) Poor access to home-based health and social services, especially in rural communities, means that older Persons with Disabilities are often confined and neglected.

2.3.2. CHILDREN WITH DISABILITIES

Nigerian children with disabilities have over the years suffered neglect owing to the fact that they are perceived to be incapable, ill, misfit and a burden to their families and the society at large. Their case represents a problem to be dealt with differently from other children issues.

The fact that such children are unable to defend themselves, they are often left alone at home and are under valued by those around them hence they become vulnerable to physical, sexual and emotional abuse. Such children, when born into families of poor social-economic backgrounds, are often confronted with many problems, which tend to have negative effect on their emotional growth and development.

2.3.3. WOMEN WITH DISABILITIES

Women with disabilities in general unlike their male counterpart suffer double jeopardy; first as women and second, as women with disabilities. They have continued to experience a lot of setbacks in all spheres of life not only because they lack educational opportunities, but also because of negative attitudes, stereotypes and lack of understanding which exist among the larger non-disabled group in the society.

Many Nigerian Women with disabilities still live in obscurity, silent misery, and socio-economic dependency. One of the most serious obstacles preventing the participation and integration of women with disabilities is the fact that the greater majority of them have not yet been encouraged to take on their duties as citizens which is an essential measure of claims to success. They are entitled to love and family life.

2.3.4. PEOPLE WITH DISABILITIES LIVING IN RURAL AREAS

In Nigeria, services enjoyed by people with disabilities in urban areas are not readily available in most rural areas. This is owing to the disparity between the level of development in rural and urban areas.

Disability in rural areas is synonymous to deprivation, abandonment, curse, burden and complete societal ostracism in political, social and economic life. Persons with disabilities in rural areas apart from dehumanizing stigma attached to them by their immediate community, are completely cut off from rehabilitation services and other opportunities that are prevalent in urban areas.

It is a vital problem that parents and relations of children with disabilities in the rural areas are often not mentally prepared to recognise: the disability in a correct sense. This prevents them from stimulating the children to develop in a positive way.

Parents often put the children behind the curtains 'or send them out to the street to beg. Many poor families fully depend on their disabled children's income from begging and cannot afford the offer of sending them to school. This attitude affects the children's development and personality in different ways. As infants, children with disabilities are deprived of stimulation that could lessen their difficulties that arise when they go through the normal stages of development.

SECTION 3:

POLICY GUIDELINES

3.1. RAISING AWARENESS

3.1.1. INTRODUCTION:

One of the greatest hurdle persons with disabilities face when trying to access mainstream programmes is a negative attitude. It is these attitudes that lead to the social exclusion and marginalisation of people with disabilities.

The changing of attitudes is not something that happens spontaneously. Attitude changing is a complex process, which involves moving in a series of stages, from one set of attitude to another. Thus, raising awareness is central to the changing of attitudes.

3.1.2. OBJECTIVES:

- (i) To raise awareness of disability as a Human Rights and Development issue targeting every component of government and society at large.
- (ii) To reduce discrimination against persons with disabilities based on archaic beliefs and customs.
- (iii) To give adequate publicity on issues affecting persons with disabilities.

3.1.3. IMPLEMENTATION STRATEGIES

- (i) Design and promote programme for raising awareness to change public attitude towards persons with disabilities.
- (ii) Publicise all activities of persons with disabilities.
- (iii) Address the issue of the lopsided portrayal of persons with disabilities as object of pity and public sympathy.
- (iv) Ensure that persons with disabilities have access to mass media especially those with sensory loss.
- (v) Promote effective partnership among the inter-governmental organisations, governments and organisations of and for persons with disabilities.
- (vi) Develop programmes of social mobilization and awareness generation so as to abolish those practices that have encouraged discrimination against persons with disabilities.
- (vii) Promote partnerships with government, the independent press and alternative media practitioners at community level on issues concerning persons with disabilities.

3.2. PREVENTION, EARLY INTERVENTION AND HEALTH EDUCATION

3.2.1. INTRODUCTION:

One of the cornerstones of disability policy is prevention. The majority of disabilities are preventable. The Federal Government of Nigeria has in place a National Health Policy with the goal to establish a comprehensive health care system based on Primary Health Care, that is promotive, protective, preventive, restorative and rehabilitative to every citizen of the country within available resources. However, because of poverty and ignorance people with disabilities could not avail themselves of these opportunities.

3.2.2. OBJECTIVES

- (i) To strengthen the vaccination of children and pregnant women against the identified endemic and preventable diseases that cause disabilities.
- (ii) To educate people about health and social issues as well as helping people to develop the ability to make informal decisions about their own health. It shall include information about institutions, which can offer support to persons with disabilities.
- (iii) To prevent diseases and accidents which may cause impairment and disabilities.
- (iv) To develop specific protective measures such as immunisation, protection against accidents and protection against occupational hazards.
- (v) To develop and strengthen early intervention programmes to prevent impairments and disabilities.

3.2.3. IMPLEMENTATION STRATEGIES

- (i) Ensure improvements in primary health care, immunisation activities, hygiene, nutrition and occupational health and safety .
- (ii) Improve the educational, economic and social status of the poor.
- (iii) Identify impairments and develop appropriate intervention.
- (iv) Design appropriate, accessible and affordable health services at primary, secondary, and tertiary levels for persons with disabilities.
- (v) Include general medical and nursing assistance on an in-patient, out-patient or community home care bases and specialised health professional assistance.
- (vi) Develop measures to identify and reduce discrimination on the basis of disability in the health sector. Particular attention should be given to the elimination of discriminations against persons with disabilities.

- (vii) Ensure comprehensive free health care for all children with disabilities under twelve, years including free access to assistive devices and rehabilitation services.
- (viii) Carry out and encourage research on diseases that cause disabilities.

3.3. TREATMENT, THERAPEUTIC AIDS AND ORTHOPAEDIC TECHNICAL SERVICES

3.3.1. INTRODUCTION

The Government of Federal Republic of Nigeria shall ensure the development and supply of support services, including assistive devices for persons with disabilities in order to minimize the consequences of disability and to increase their level of independence.

3.3.1. OBJECTIVE

- (i) To ensure that all persons with disabilities shall have full access to rehabilitation, therapeutic aids and orthopaedic technical services within their communities as a part of Community-Based Rehabilitation Programme. Their families, where possible, will be informed and involved in these rehabilitation programmes.
- (ii) To design a programme for the provision and supply of appropriate prosthesis, orthoses and technical aids.
- (iii) To ensure treatment, provision of therapeutic aids and orthopaedic services for persons with disabilities.

3.3.2. IMPLEMENTATION STRATEGIES

- (i) Provide regular medical treatment and medicine, persons with disabilities may need to preserve or improve their level of functioning.
- (ii) Provide prostheses, orthosis and technical aids to persons with disabilities.
- (iii) Provide Community-Based Rehabilitation Programmes.

3.4. BARRIER FREE ACCESS

3.4.1. INTRODUCTION:

The way in which the environment is developed and organised in Nigeria contributes to a large extent to the level of and equality that people with disabilities enjoy.

There are a number of barriers in the environment, which prevent persons with disabilities from enjoying equal opportunities with non-disabled people. For example, structural barriers in the built environment, inaccessible service point, inaccessible entrances due to security system, poor town planning and poor interior design. There should be a national requirement for an accessible built environment because this is an important development in the equalisation of opportunities for persons with disabilities.

Development agencies do not have clear policies on environmental access. The result is that hundreds of schools, clinics and other public buildings are presently being built with no regard for barrier free requirements.

3.4.2. OBJECTIVES

- (i) To introduce programmes of action to make physical environment accessible to all persons with disabilities.
- (ii) To develop standards and guidelines and to consider a lasting legislation to ensure accessibility to housing, buildings, public transport services and other means of transportation, streets and other outdoor environment.
- (iii) To ensure that architects, construction engineers and others who are professionally involved in the design and construction of the physical environment have access to the disability policy and the requirements for making places accessible to people with disabilities.

3.4.3. IMPLEMENTATION STRATEGIES

- (i) Develop standards and guidelines for accessibility to all public buildings and facilities, for example, transport, telecommunication, sports and recreation facilities.
- (ii) Enact legislation to ensure compliance.
- (iii) Professionals who are involved in design and construction of the physical environment have access to adequate information on disability policy and measures to achieve accessibility.
- (iv) Include barrier free design in the academic curriculum of the construction design.

3.5. ACCESS TO INFORMATION AND COMMUNICATION

3.5.1. INTRODUCTION

In Nigeria, people with disabilities have limited or no access to information and communication on their rights, diagnosis, medical record and available services and programmes pertaining to their disability as well as on those services which are generally available to the general public. Communication and information are

important aspects of access to public services. Access to communication and information therefore forms an integral part of the equalisation of opportunities for people with disabilities, such as the Deaf, people with speech disabilities and people with visual disabilities.

3.5.2. OBJECTIVES

- (i) To develop strategies to make information and communication services and documentation accessible to all persons with disabilities.
- (ii) To make available in formats that can be used and understood by people with hearing, visual and other communication needs.
- (iii) To promote the development and implementation of standards and best practices to make information and communication accessible to persons with disabilities.

3.5.3. IMPLEMENTATION STRATEGIES

- (i) Develop strategies to make information and communication services and documentation accessible for persons with disabilities.
- (ii) Television stations shall provide sign language inset or subtitles in at least one major newscast programme each day and in all special programme of national significance.
- (iii) Telephone and Telecommunication companies shall provide at reasonable price special telephone and telecommunication devices for the hearing impaired.
- (iv) Postal agencies shall provide for persons with disabilities free postal services for all materials to aid the learning or improvement of persons with disabilities.
- (v) Develop strategies to make information, communication and documentation accessible for different groups of persons with disabilities. Braille, tape services, large print and other appropriate technologies should be used to provide access to written information and documentation for persons with visual impairments. Similarly, appropriate technologies should be used to provide access to spoken information for persons with auditory impairments, or comprehension difficulties.

3.6. EDUCATION

3.6.1. INTRODUCTION

A human rights and development approach to disability has significant implications for the way in which we provide education for the nation. Educationalists tend to classify persons with disabilities according to disability. Disabled learners are then either placed in special schools or classes, or totally excluded from any educational opportunity on the grounds that they are "too severely disabled".

The limited capacity of special schools particularly in rural areas, has resulted in the majority of learners from these areas being excluded from education opportunities altogether, as the environment in regular schools does not facilitate integration.

A good number of children with disabilities of school age are presently out of school. This normally results in illiteracy and low skills amongst adults with disabilities, contributing significantly to high levels of unemployment.

3.6.2. OBJECTIVES

- (i) To facilitate equal access to education.
- (ii) To develop a single education system that will cater for the needs of all learners within an inclusive environment with various placement options.
- (iii) To facilitate capacity building for all stakeholders (parents, teachers, students and planners).
- (iv) To facilitate earlier access to education for all learners but in particular for learners with special education needs.
- (v) To facilitate effective and relevant research.
- (vi) To ensure that persons with disabilities have the same right to education as their able counterparts.
- (vii) To pay special attention to adult education.

3.6.3. IMPLEMENTATION STRATEGIES

- (i) Provide free education to persons with disabilities in all public educational institutions at all levels.
- (ii) Provide education based on the fundamental principles of inclusive education which demand that all children shall be taught together whenever possible, regardless of any individual differences or difficulties they may have.
- (iii) Develop the capacity of the regular school system to enable it to meet the diverse educational needs of all children.
- (iv) Take into consideration the special needs and requirements of persons with disabilities in the formulation, design of educational policies and programmes.

- (v) Promote specialised institutions that will facilitate research and development of education of persons with disabilities.
- (vi) Promote adult education to eliminate illiteracy, which forms preventable handicaps for Nigerians with disabilities. Particular needs of people with mental disabilities and or learning difficulties and the need of elderly people with disabilities shall be taken into accounts and be encouraged to participate in adult education programmes.

3.7. VOCATIONAL GUIDANCE TRAINING AND AFTER CARE SERVICES

3.7.1. INTRODUCTION

Vocational rehabilitation should be aimed at persons with disabilities whose prospects of securing and retaining employment are substantially reduced as a result of their disabilities but who have reasonable prospect of securing and retaining suitable employment. In Nigeria, Government has put in place rehabilitation centres/institutions for vocational training for persons with disabilities. In addition, government has adopted the Community Based Vocational Rehabilitation (CBVR), which involves vocational skill training at the community level. This programme has gone a long way in attending to vocational needs of persons with disabilities. However, there is still room for improvement.

People with minor disability need help particularly ability/vocational training and jobs. In fact, most rehabilitation programmes are targeted at this group of persons with disabilities.

3.7.2. OBJECTIVES

- (i) To provide vocational training programmes and facilities for persons with disabilities.
- (ii) To provide vocational guidance and information about different occupation to enable persons with disabilities to make informed decisions when choosing an occupation according to their interests and abilities.
- (iii) To make necessary adaptation in existing public and private services and institutions which provide skills training to persons with disabilities in both urban and rural areas.
- (iv) To ensure that vocational training and rehabilitation are directed at helping persons with disabilities to obtain or retain employment; and to advance in their career thereby facilitating their integration or re-integration into society.

3.7.3. IMPLEMENTATION STRATEGIES

- (i) Ensure that aptitudes of individual persons with disabilities are taken into consideration before allocating them to vocational training programmes.
- (ii) Ensure that the range of choices of vocational training for persons with disabilities is adapted to developments in the labour market.
- (iii) Vocational training as much as possible should take place within the community to ensure social integration.
- (iv) Ensure effective After Care Services by provision of resettlement tools.

3.8. EMPLOYMENT

3.8.1. INTRODUCTION

Unemployment remains a fundamental problem affecting the majority of persons with disabilities and their families. The Federal Government of Nigeria provides employment opportunities for its citizens including persons with disabilities. However there are many misconceptions about their potentials to work. Nevertheless, there is strong evidence that a substantial proportion of persons with disabilities who are not currently in the labour force are capable of being employed in some way, given proper support and removal of barriers.

3.8.2. OBJECTIVES

- (i) To ensure effective participation of persons with disabilities in employment process in the country.
- (ii) To identify and eliminate employment barriers and making reasonable accommodation to the limitation of persons with disabilities.
- (iii) To provide technical aids and assistive devices which they need to perform their job.
- (iv) To ensure that labour related legislation does not discriminate against persons with disabilities.

3.8.3. IMPLEMENTATION STRATEGIES

- (i) Promote employment of persons with disabilities both in formal and informal sectors.
- (ii) Establish shelter employment for persons with disabilities who; because of their disability or special needs are unable to obtain, keep or cope with the demands of a job in a competitive labour market.
- (iii) Establish a comprehensive and up to date labour market information system.

- (iv) Ensure that shelter employment shall be subject to general supervision by competent authorities and shall have an adequate contractual status, which takes into account their needs for personal assistance and development. This shall take the form of a normal employer/employee relationship and remuneration.
- (v) Develop programmes to assist entrepreneurs that have disabilities.

3.9. CULTURE AND RELIGION

3.9.1. OBJECTIVES

- (i) To support, promote and ensure that persons with disabilities have access to cultural events and activities nationwide and at all levels.
- (ii) To encourage religious authorities to make their facilities and activities accessible to all persons with disabilities

3.9.2. IMPLEMENTATION STRATEGIES

- (i) Promote and develop Nigerian material and spiritual culture, and enhancing participation in cultural activities through the mechanism of dance, music, drama, literature, oral traditional arts, crafts and popular culture.
- (ii) Ensure that planning and presentation of cultural activities is such that people with disabilities have equal opportunity to participate.

3.10. SPORTS AND RECREATION

3.10.1. INTRODUCTION

People with disabilities experience the same need for sports, including competitive sports and recreation as their non-disabled peers.

Sports is generally regarded as one of the vital components in the integration of persons with disabilities into society. It is also often a vital component in the successful rehabilitation of persons with disabilities.

Sports at school level is critical for the development of physical qualities, as well as for the development of self esteem, courage and endurance. It is therefore vital that sports at school level - both with ordinary and special schools - receive urgent attention.

3.10.2. OBJECTIVES

- (i) To develop and extend sporting activities for persons with disabilities in both mainstream and special facilities.
- (ii) To ensure that sports, recreation facilities and events are made accessible to persons with disabilities
- (iii) To ensure the participation of persons with disabilities in sports for both recreational and competitive purposes.

3.10.3. IMPLEMENTATION STRATEGIES

- (i)* Initiate aid and support the development and integration of sports for persons with disabilities within the national sports development programme.
- (ii)* Ensure that all sporting facilities are accessible to persons with disabilities.
- (iii)* Ensure that all participants have equal opportunities to develop their skills and to practice the sports code of their choice.
- (iv)* Organisers of Sports and recreation should consult with organisations of persons with disabilities when developing their services for persons with disabilities.

3.11. WELFARE SERVICES AND HOUSING

3.11.1. INTRODUCTION

In Nigeria, the government has the responsibility of providing basic social amenities for the use of her citizenry. Unfortunately, the national planners do not often consider the predicaments faced by the people with disabilities in our society. This means that the group has been denied access to social welfare services.

Similarly, majority of persons with disabilities have limited access to independent housing. The existing houses are often inaccessible due to poor design and overcrowding. This compels them to live in institutions against their wish.

3.11.2. OBJECTIVES

- (i)* To develop welfare services that aim to integrate persons with disabilities.
- (ii)* To provide persons with disabilities and their families with safe shelter and houses of their own.
- (iii)* To develop welfare services that will accommodate the need of all categories of persons with disabilities.
- (iv)* To facilitate the orientation and training of welfare service providers to be more disability sensitive. Such service providers should include persons with disabilities.

3.11.3 IMPLEMENTATION STRATEGIES

- i.* Ensure that adequate allowances and pensions are allocated to all persons entitled to them, including adult and children with disabilities.
- ii.* In planning and development of housing schemes, ensure that access needs of persons with disabilities are met.
- iii.* Provide social security income for unemployed persons with disabilities.
- iv.* Provide adequate funds and upgrade existing training institutions with adequate materials and personnel.

3.12. SOCIAL SECURITY

3.12.1 INTRODUCTION

The issue of social security which involves provision of financial assistance to the needy and unemployed persons with disabilities does not exist in Nigeria. Hence, persons with disabilities are left to fend for themselves. They often become a burden to their immediate families.

3.12.2. OBJECTIVES

- (i) To provide for a co-ordinate and equitable system of social security to meet basic needs and delivery capacity for independent living, self sufficiency and integration of the group into the mainstream of society.
- (ii) To increase the supply of accessible information to consumers on how to access benefits criteria for qualification and the availability of mechanisms to assist with problem which may arise.

3.12.3. IMPLEMENTATION STRATEGIES

- (i) Ensure that adequate income support is given to persons with disabilities.
- (ii) In order to develop personal and economic independence, persons with disabilities shall have the right to a decent standard of living.
- (iii) Ensure adequate provision of income support and social security protection to individuals who undertake the care of persons with disabilities.
- (iv) Incentives should be provided for persons with disabilities to secure employment or establish income-generating activities of their own.

3.13. TRANSPORT, TRAFFIC AND ROAD SAFETY

3.13.1. INTRODUCTION:

Persons with disabilities have continued to remain largely invisible and unable to contribute to or benefit from services and commercial activities available to most of their fellow citizens primarily due to inadequate transport system.

Our transport system is inaccessible and not flexible enough to accommodate the basic needs of persons with disabilities. Furthermore, persons with disabilities are cut off from activities such as attending schools or going to work, or take part in social programmes; the lack of accessible transport poses a great barrier to their full integration into the society.

3.14.3. IMPLEMENTATION STRATEGIES

- (i) Enact legislation embodying the rights and obligations of persons with disabilities.
- (ii) Ensure that organisations of persons with disabilities are involved in the development of national legislation concerning the rights of persons with disabilities, as well as in the on going evaluation of that particular legislation.
- (iii) Provide for appropriate sanctions in case of violations of the principle of non-discrimination in the legislation:
- (iv) Enact legislation to remove conditions that may adversely affect the lives of persons with disabilities, including harassment and victimization.

3.15. HUMAN RESOURCES DEVELOPMENT

3.15.1. INTRODUCTION

This is one of the key elements that can be used to break the cycle of poverty and under-development. The basic prerequisite for development is the capacity of society to use its own resources to sustain itself. Unfortunately, majority of people with disabilities find themselves in the state of poverty because of the past and prevailing discriminations against them.

3.15.2. OBJECTIVES

- (i) To ensure effective participation of persons with disabilities in socio-economic development of the Nigerian society.
- (ii) To provide opportunities for persons with disabilities to obtain the highest possible educational and vocational qualifications.
- (iii) To ensure and monitor equalisation of job opportunities for persons with disabilities in public and private sectors.

3.15.3. IMPLEMENTATION STRATEGIES

- (i) Promote equitable vocation, pre-employment and on-the-job training for persons with disabilities in all sectors of the economy.
- (ii) Provide adequate funds and materials/resources for institutions/centres responsible for training and development of persons with disabilities.
- (iii) Ensure that a percentage of work force is reserved for qualified persons with disabilities.
- (iv) Design and review curriculum of training institutions of persons with disabilities from time to time to meet the challenges of contemporary living.

3.16. DATA INFORMATION AND RESEARCH

3.16.1. INTRODUCTION:

Poverty and inequality as they affect persons with disabilities in Nigeria can be better tackled when the exact size and the magnitudes of the problems are understood by those responsible for national planning. Lack of sufficient data has made it difficult to appreciate the magnitude and scope of problems facing persons with disabilities in the country .

From the statistics available, it is not an overstatement to say that Nigeria is one of the poorest countries in the world. The data and information at hand do not include details of those with disabilities hence it is difficult to effectively plan for them.

3.16.2. OBJECTIVES

- (i) To ensure regular and appropriate data collection on the living conditions of persons with disabilities.
- (ii) To ensure that data on persons with disabilities should reflect their physical or mental conditions, resources/capabilities and the environment in which they live, work and play.
- (iii) To ensure optimum dissemination of information on the living conditions of persons with disabilities.

3.16.3. IMPLEMENTATION STRATEGIES

- (i) Conduct national survey on persons with disabilities and update it from time to time.
- (ii) Establish a national research centre equipped with modern data based facilities.
- (iii) Establish national guidelines and minimum norms and standards for disability related research.

3.17. ORGANISATIONS OF AND FOR PERSONS WITH DISABILITIES

3.17.1. INTRODUCTION

The Government of Nigeria recognizes the formation and establishment of organisations of and for persons with disabilities to cater for their interests and represent them at local, national and International/regional levels. Such organisations are saddled with the roles of identifying the needs, services, advocating changes as well as raising public awareness towards the plights of persons with disabilities. The organisations met with difficulties owing to limited resources.

3.17.2 OBJECTIVES

- (i) To provide direct services to persons with disabilities.
- (ii) To participate in the promotion of welfare and rehabilitation programmes for persons with disabilities.
- (iii) To collaborate with Governments in the implementation of Rehabilitation Programmes.
- (iv) To initiate and provide services for the improvement of the quality of life of persons with disabilities

3.17.3 IMPLEMENTATION STRATEGIES

- (i) Put in place a mechanism for effective co-ordination and monitoring of activities of various non-governmental organisations of and for persons with disabilities.
- (ii) Encourage the involvement of NGOs/Associations of Persons with Disabilities in the formulation of policies and programmes relating to them.
- (iii) Support the establishment of non-governmental organisations in view of the vital roles they play on issues relating to persons with disabilities.
- (iv) Provide technical assistance where possible to NGOs involved with persons with disabilities.

3.18 INTERNATIONAL COOPERATION

3.18.1. INTRODUCTION

Countries will participate actively in International cooperation concerning policies for the equalization of opportunities for persons with disabilities. Failure to have contacts with some notable and reputable International bodies dealing with disability issues will definitely have some negative effects on the quality of life as well as the rights of persons with disabilities. These bodies especially the United Nations deals with relevant conventions, treaties and agreements pertaining to disabilities.

3.18.2. OBJECTIVES

- (i) To maximize benefits from activities of international bodies as they relate to persons with disabilities.
- (ii) To develop appropriate disability-related technologies from various international bodies involved in issues relating to persons with disabilities.

3.18.3 IMPLEMENTATION STRATEGIES

- (i) Initiate the establishment of contact with international bodies involved in disability issues, as well as United Nations and its specialised agencies.
- (ii) Introduce disability issues in general negotiations concerning standards, information exchange, and development programmes for persons with disabilities.
- (iii) When planning and reviewing programmes of technical and economic cooperation, special attention shall be given to yearnings and aspirations of persons with disabilities.
- (iv) Ensure that the United Nations and the specialised agencies include in their workplans all programmes of persons with disabilities.

3.19. ASSISTIVE DEVICES

3.19.1. INTRODUCTION

Aids and appliances that are meant for the use of persons with disabilities to enhance their potentials are usually not available. Where they are available, they are often beyond the reach of an average person with disability.

Although some aids and appliances are produced locally at affordable cost, they are not sufficient. The local producers can no longer meet the increasing needs of persons with disabilities because financial and material resources required for the production of aids and appliances are grossly inadequate.

3.19.2. OBJECTIVES

- (i) To ensure availability of needed aids and appliances for persons with disabilities.
- (ii) To provide an enabling environment for the local producers of aids and appliances.
- (iii) To encourage the use of local raw materials for the production of aids and appliances.

3.19.3. IMPLEMENTATION STRATEGIES

- (i) Encourage the local production of aids and appliances through grants, loans and technical support services.
- (ii) Encourage the training of Personnel on the production of sophisticated aids and appliances.
- (iii) Promote foreign investors in the area of production of aids and appliances to establish the plant in Nigeria.
- (iv) Provide the needed aids and appliances free to persons with disabilities.
- (v) Provide guidelines on the distribution of aids and appliances to persons with disabilities.

3.20. INTER-GOVERNMENTAL CO-ORDINATIONS

3.20.1. INTRODUCTION

Lack of coordination of most of the Government activities especially those pertaining to persons with disabilities has made it difficult for most of their dreams to be realised. This is buttressed by the fact that there is seldom an inflow of communication among different bodies as well as the three-tiers of government on issues relating to persons with disabilities.

3.20.2. OBJECTIVES

- (i) To ensure effective coordination of all the policies and programmes of all tiers of government aimed at improving the quality of life of persons with disabilities.
- (ii) To provide a standard and comprehensive policy framework to guide all tiers of government for effective service delivery to persons with disabilities.
- (iii) To ensure effective distribution of responsibilities among the three-tiers of government on matters relating to persons with disabilities.

3.20.3. IMPLEMENTATION STRATEGIES

- (i) Federal, State and Local Governments shall take immediate steps in including disability issues in their overall development plans.
- (ii) National Committee on disability issues shall be set up to advise and mediate between the three-tiers of government on matters affecting persons with disabilities.
- (iii) Exchange programme for the personnel of the three-tiers of government in the service delivery to persons with disabilities shall be promoted.
- (iv) The Federal government shall ensure adequate coordination of all activities and issues relating to all persons with disabilities.

3.21. MONITORING AND EVALUATION

3.21.1. INTRODUCTION

Monitoring is an essential element in the upholding of human rights including the rights of persons living with disabilities. It can be used as a corrective tool against the violated rights of persons with disabilities.

Monitoring can also be used to measure trends and patterns of discriminations on the grounds of disabilities both at an individual and systematic level. It can also be used as an educative tool to create awareness.

Evaluation on the other hand is assessment of all programmes that directly affect persons with disabilities with a view to reviewing it from the earliest conceptual and planning stages.

3.21.2. OBJECTIVES

- (i) To ensure that projects and programmes designed to enhance quality of life of persons with disabilities are effectively implemented.
- (ii) To make information available for future planning of projects/programmes meant for persons with disabilities.
- (iii) To assess the extent to which the projects/programmes have been utilized to the benefit of persons with disabilities.

3.21.3. IMPLEMENTATION STRATEGIES

- (i) Evaluate periodically and systematically national disability programmes and services.
- (ii) Develop and adopt terminologies and criteria for the evaluation of disability related programmes and services.
- (iii) Develop criteria and terminologies and include organisations of and for persons with disabilities from the initial planning stages.
- (iv) Participate in international co-operation in order to develop common standard for national evaluation in disability field through the national coordinating committees.
- (v) Evaluate various programmes in disability field to ensure overall efficacy in fulfilling policy objectives.

PERSONS WITH DISABILITIES
(PWDs)

