



**Project Proposal for Establishing Centre for
Rehabilitation and Empowerment of
Disabled Persons in Nigeria**

BY:

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Introduction

The Current Situation for Disabled Children/Girls in Nigeria

The Current Situation for Disabled Children in rural/Urban Nigeria; a child born with a disability is destined for a life of dependency. For the poor this burden can be extreme. Disabled children can be a social, financial, mental and physical burden to their families Ojukwu (2019). Through lack of knowledge and skills of the family, the children/girls do not get the appropriate help they need. The children do not go to school and hardly leave their homes. Therefore, they are not challenged and do not develop mentally or physically. Families will often favor a healthy child over a disabled child, when it comes to food and attention.

Medical/ Rehabilitation;

Medical and rehabilitation treatment does not reach the disabled children in the poor villages. Due to the high level of illiteracy in villages, the families do not understand or know what benefits the government provides. In addition, villages are far from medical or rehabilitation centers, therefore transportation cost is another obstacle Eze (2012).

The government provides rehabilitation support for poor families, with the help of local healthcare workers from Non-Government Organizations (NGOs), specializing in different disciplines. In 2006 a scheme was finished in the district where healthcare workers were employed by the government to find the disabled

people and provide them with free care, free aids, and a possible scholarship. Community Based Rehabilitation (CBR) officers visited the villages to identify the disabled people. Based on the CBR's survey, the NGOs scheduled a registration day for a specific area. During the registration days, doctors assess and record the degree of disability in a National Identity Disabled Certificates (Pass Book) for each disabled person. In addition, the family income and caste are recorded in the Pass Book. The pass book entitles the disabled person to receive the government benefits and it must be renewed annually. Four NGO's in Nigeria are working alongside of the scheme; they are not asking for government funds, but are approved by the government to work in rehabilitation and disabled support.

Currently, some NGOs have set up disabled centers to provide treatments such as physiotherapy, occupational therapy and speech therapy. A few disabled centers have provided additional vocational training. This is a positive step to addressing the immediate situation.

More local and international NGO's are trying to connect provision with the ones who need it. Some NGO's in the district have started to help disabled children that do not get help from the government program. These children live far from the existing disable centres; therefore the NGOs are providing home-based care through their outreach programs. Transportation between the villages to the hospitals and rehabilitation centres, require time and resources from the NGO's.

The NGOs, like Mikka Foundation, are still finding disabled people, who have not been registered or are still not receiving any rehabilitation. Apparently the NGO's are not able to cover half part of Nigeria. The centers are struggling to provide the care needed, with limited resources and limited skilled staff. They are mostly reaching the children that can afford to travel. In the government scheme there is nothing written about long term or follow-up treatment. Overall one can say that the children are not challenged to use their abilities or to develop them. The focus is mostly on physical needs and adjustment, which are not enough to give a child a chance in the wider society. It will also need education and skill training.

Parents of disabled children are often insecure about asking for help. The provided benefits are difficult to reach when you get sent away or don't get all the information from the doctors or social workers. Doctors don't give all the information because of several reasons:

1. They are afraid the parents will abandon their child
2. They don't have time to do the proper assessments or tests (for free)
3. They don't always have adequate knowledge about different disabilities

Also, parents feel guilty about having a disabled child due to misbeliefs and fear. Family and neighbours are likely to encourage that feeling of guilt and a lot of mothers are left alone with the care of their child. In Nigeria, it is almost impossible for a woman to be independent. When a husband leaves them, they will

be depending on the help of their family and charity. Because of the feeling of guilt, it is not likely they will raise their voice to stand up for the rights of their child.

Education

The children who don't have to be carried, can sit up straight and behave in a group can go to a government school. In these schools they will have a place amongst 30-40 other children and if they cannot follow, there will be not much extra attention for them. The children will have a hard time finding friends to play with because they are not understood. Special education is rare but through a so called NYSC CDS's teacher, most schools get weekly support by a special teacher that visits schools that have enrolled disabled children.

In the education system there is currently some provision for special needs children, who are enrolled in mainstream government schools. These provisions include scholarships. In reality, a lot of disabled people do not have the opportunity to get the appropriate education, due to poverty and illiteracy in their family. The free benefits do not reach the villages because children are not registered after birth and the families do not know they are entitled to government provisions. Also, children will be sent away from schools because the school cannot provide the care needed and parents don't know how to ask for special education or where else to go to. Children who do get enrolled in the normal schools are often neglected and

are sitting in the back of the class without a possibility to learn at their own speed. Again, parents are not raising their voice to change this, because they risk being sent away.

Parents fight to keep their failing children in the school so they are able to work, providing what income they can to support the family.

Employment:

Very few opportunities exist in the work place for people with disabilities. With the growing population size and the lack of jobs, very few people with disabilities get paid employment. They are often confined in their homes and are dependant on their family for life. Disabled support and awareness in Nigeria is in its infancy.

Nigeria (project Area)

Nigeria has the highest number of disabled residents most especially in the northern part of the country like, Kano, Kastina, Bauchi, Borno etc and in Lagos, Abuja and Kwara, you will find a lot of disable children and adult begging for arms. South East is not an exemption, you will also find disable children in Anambra, Enugu, Abia and all parts of Nigeria and her districts. To date there are so many state that has no disable disabled resource centres in Nigeria, Like Kogi State, Benue State, Niger, Jigawa Kastina etc has no effective disable centres that can serve the population of over 152,231 disabled people. (Government of Nigeria, Department of Economics and Statistics, 2006 census).

Private clinics have set up schools and centers, but not all area's are covered and especially in the rural area's it's hard to reach the children due to transport problems.

Project Proposal

Based on the information above, we can conclude that many disabled children in Nigeria do not get the appropriate support. This project would like to contribute to the improvement of the current support. I, Victoria Amadi, if opportune to win the contest will work with other NGOs in Nigeria, as well as provide additional support. **The project will focus on promoting awareness of the existing benefits, offer support and influence the government policy.** My outreach team will visit the villages in Nigeria to assess the community services and villagers. They will identify the disabled children and determine what their initial needs are. Then the outreach team will decide what the best provision will be and who will provide those provisions.

Based on the assessment of the current situation, we need to provide additional support. Like Special Education Center That will include special education, rehabilitation and vocational training. A future residential facility will also be available.

Target group

The target group for the disabled support program will be children in the age of 0-17 and disabled girls with a mental and/or physical disability in Nigeria, who live in poor needy families that cannot afford (medical) care for their children.

Goal

The overall goal of the Disabled Support Centre project is to improve the quality of life for disabled children in poor families in Nigeria.

- Increased and more appropriate support for disabled children and their families
- Increased social interaction between families with disabled children in villages in Nigeria.
- Integration of disabled children and young adults into the wider community.
- Education and Life skills development.

Strategies

The best way to achieve the goals will be through education. Challenging the children to develop themselves and by giving them a chance to come out of their isolation and mean something for their environment. This is why I pray to win the contest and set up a centre for special education with multidiscipline support for mental and physical disabilities.

Outreach Currently, the outreach team visits the families to educate them on their rights and benefits, as well as showing them how to receive the benefits.

A plan I need to work out is to increase the income level of the parents through small businesses that can be set in or close by the centre.

Special Education Centre

In order to have an effective program, I will would like to bring different disciplines under one roof. The primary focus will be on special education with additional support, such as physiotherapy and vocational training. All the disciplines will be working together for the same goal. Each child will have a specific treatment plan with individual goals that the whole team will work towards.

The Special Education Centre will comprise of 2 therapy rooms, a day-care centre, classrooms for education and training, an office and a staff room. There will be showers, toilets and a place to wash clothes. If funding permits, there will be a therapy pool.

The Special Education Centre will be built in a location close to a government school for the children to attend. It will be close to major bus routes so that the centre is easily accessible. Special, individually tailored education will be provided at the centres for those children who are unable to attend the mainstream schools.

Action Plan

1. In depth assessment of the area to include numbers and needs of children with disabilities and the provision available for them (with knowledge of other NGO's) in affiliation with the rehabilitation centres in Nigeria
2. Make contact and links with other providers in the area, such as schools, clinics and homes (government and private).
3. Set up an empowerment centre for the empowerment of disabled children and their parents.
4. Equip the families of disabled children with the knowledge and skills to provide targeted care for children and provide means by which the children can develop a level of independence relevant to their needs.
7. Train staff in order to help them understand how they can take care of the children and challenge them to develop.
8. Provide workshops in the villages through outreach and the satellite centres.
9. Improve the accessibility of the provisions.
10. Educate about the benefits and how to get them.
11. Arrange transportation to provisions (hospitals, clinics and the Special Education Centre).

13. Build a Special Education Centre with a provision as complete as possible for disabled children and their care-takers and recruit staff for the centre.

15. Find financial support from the local government and local/international sponsors.

Results

1. A complete assessment of all organizations that provide disabled care in the area and whether the families can reach them.

2. Effective coverage of provision in the area.

3. An empowerment centre for education of parents and mediation between provisions.

4. A Special Education Centre will exist with the following provisions: Medical Care, Physiotherapy and mental support. Day-care and rehabilitation for the children ages 05. Early intervention centre. Vocational training for children. Resource centre for school going children, separate from the day-care. A resident for children who have nowhere else to go. Utilization of disability aids, such as crutches, braces and wheel chairs.

6. Families with disabled children are financially and mentally supported to take care of their child at home.

7. Children develop and are challenged to do so by their environment.

Budget: