

## **Service Provision Challenges of Rehabilitation Centres in Jos Metropolis of Plateau State**

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### **Abstract**

The study identified service provision challenges of Rehabilitation Centres in Jos Metropolis of Plateau State. It identified the problems faced by the care-givers and the physically challenged persons and possible solutions to the problems. Survey design was adopted. Population for the study consisted of 150 physically challenged persons and care givers in the centres. Three research questions to guide the study. Questionnaire was used for data collection. Data were analyzed using means, standard deviation and percentages. Findings reveal 11 challenges being encountered by the care-givers during service provision and 10 encountered by challenged persons. The study also identified five possible solutions to some of the problems encountered. Based on the findings, it was recommended that, government and philanthropists should provide funding for the caring services of the rehabilitation centres so that care-givers can be helped in providing their services successfully.

**Keywords:** Services, Provision, Caregiver, Rehabilitation, Physically, Challenged.

### **Introduction**

Lack of ability to perform an activity in a manner considered normal for the human beings, as a result of impairment is termed disability. Impairment concerns the physical aspect of health; disability is the loss of functional capacity resulting from

impaired organ; handicap is a measure of the social and cultural consequences of impairment (WHO, 2010). In most part of Nigeria, people living with disability are roaming the streets begging for alms. This has posed a major problem and has contributed to the wrong behaviours manifested by

people living with disabilities which results into the way the society view them as people who need to beg for alms to survive (Balarabe & Mahmond, 2014). Within the contemporary Nigerian society, there is little appreciation that disability is fundamentally an issue inexorably linked to and rooted in human rights. The common perception, held by government, policy-makers and the public at large, is that disabled people and disability issues are viewed in terms of charity and welfare. Consequently, this viewpoint is a significantly entrenched factor that seriously militates against the disabled people within the country (Lang & Upah, 2008). There is no disability discrimination legislation that has been enacted within Nigeria, despite the fact that two bills have been introduced into the National Assembly. The bills introduced are; 15% of all elective and appointive positions at all level of government be reserved for qualified and suitable physically challenged persons and these persons also be guaranteed employment opportunities in both the government and private sectors in different parts of the country (Olawale 2007).

Disabled people sometimes have difficulty doing things and other people may take these for granted. Difficulties in travelling on public transport, climbing stairs or even using some house hold appliances poses a challenge to the disabled people. Historically, disable people

have been pitied, ignored, vilified- even hidden away in institutions. Nevertheless, discriminations continued to exist in certain important areas (Gobalakrishman, 2013). There is no form of social protection for disabled people in Nigeria which exacerbates the level of poverty and problems encountered. There are some international NGOs that do supply services to disabled people, but their geographical coverage is very limited. Consequently, for the vast majority of disabled people living in Nigeria, particularly those living in rural areas, there is no access to disability services whatsoever. Again, this situation compounds the level of social exclusion that the disabled experience (Lang & Upah, 2008). Findings by Okoli (2010) also corroborated this and in the findings, it was revealed that disabled people in Nigeria are living in an environment that is hostile to their yearnings and aspirations. Also, it was reported by (Lieketseng, Lizahn & Gubela 2017) that physically challenged persons lack good health facilities in rehabilitation centers and this give rise to more disabilities and worsening the existing disabilities. Students who are physically challenged encounter barriers in their quest for education. In Ekundayo and Ajayi (2009), the physically challenged faced a lot of challenges, for the blind, lack of production and distribution facilities for reading material like Braille translation software writing equipment / screen reader, lack of trained personnel that will handle

these special needs persons and most of the buildings, offices, markets, schools are built long ago before ever considering these persons. For the deaf, communication is difficult because many do not know how to use the sign language. For the mobility impaired, lack of access path narrow entrance doors, lack of equipped automobile door opener and in accessible buildings which have steps. These persons need special training to be able to make effective use of the available resources. Kalu (2004) emphasized that the physically challenged feels frustrated, helpless, angry, abandoned and unwanted in society, and ends up unfulfilled. The absence of facilities and support for the disabled persons kill zeal and determination to cope with the disability. The physically challenged persons lose self-confidence in the society, and some may fight back against the society in different ways. Ozoji (2010) reported that government recognizes the importance of physically challenged persons, and has published laudable policies for protection and possible services but most often the necessary funding that will be used to implement the policies becomes a problem due to paucity of funds. It has been observed that, lack of fund is one of the major challenges in the provision of services in the rehabilitation center for the physically challenge persons. Coordinating services and offering individual support to the persons of these centers demand a lot of money and

inadequate funding hinders professional development in the areas of rehabilitation each of them need, (Adebisi, Jerry, Rasaki & Igwe, 2014).

Dada (2005), successful care giving must be a joint family decision whether the physically challenged is to be left at home or in rehabilitation centre. In the provision of services to the physically challenged persons, the care giver is a very important part of the care giving process for the disabled. The care giver must prepare for this role by being able to understand that the cause of the disability is irreversible and accept the responsibility to shape the personality of the physically challenged. However, only a few people are prepared for the responsibilities and tasks involved in caring for the physically challenged. In order to help make the task of caring easier, it is pertinent to have trained personnel and a guide for managing the rehabilitation centres with disabled people. This guide will help to serve as a road map which gives optimal paths for care givers, WHO (2010). It is also an emphatic reminder that those who care for the physically challenged can do better job of providing care services. For effectiveness in care giving services to the physically challenged persons, an individual must possess certain attitude, training and qualifications. In Kumar, Gautan & Sitanshu, (2012), Capacity building for caregivers or service providers through recruiting, training and subsequent retraining is necessary for

effective service provision in rehabilitation centres. Murthy (2016) opined that, care giving can be demanding as they perform a variety of tasks such as cooking, cleaning, providing companionship and assisting persons with toileting, bathing, dressing, errands in addition to another task. The more challenging the persons need the more complex, demanding and stressful the care givers role might be. Stress and decreased time for personal needs are two major challenges that caregivers face. Following the trend of care giving services, it is obvious that physically challenged in this part of the world have not been adequately catered for, likewise little or no study has been really carried out on the caring service for the physically challenged persons in Jos metropolis. Therefore, there is a need to investigate into problem of caring services from the aspect of care giver and the disabled persons. Service provisions in rehabilitation centres for both the care givers and the physically challenged persons have been encountering some problems. Notable among them are; the absence of disability discrimination laws, inadequate qualified care givers, lack of funding and inadequate facilities. This gave rise to this research work with a focus on the rehabilitation centres in Jos metropolis of Plateau State.

### **Objectives of the study**

The general objective was to investigate the service provision challenges of rehabilitation centres in Jos metropolis. Specifically, the study:

- 1.identified problem faced by the care givers in providing care services to the physically challenged persons in the Rehabilitation Centres in Jos Metropolis.
- 2.identified problem encountered by the physically challenged in receiving care services in the Rehabilitation Centres in Jos Metropolis
- 3.determined possible solution to the problems encountered by both the care givers and the physically challenged persons during the provision and the receiving of services in the Rehabilitation Centres in Jos Metropolis.

### **Research Question**

The following research questions were raised to guide the study;

1. What are the identified problems faced by the care givers in providing care services to the physically challenged persons with the rehabilitation centres in Jos Metropolis?
2. What are the identified problems encountered by the physically challenged in receiving services in the rehabilitation centres in Jos Metropolis?
3. What are the possible solutions to the challenges encountered during the provision and receiving of

services in the rehabilitation centres in Jos Metropolis?

### **Methodology**

**Research Design:** - The research work adopted descriptive survey research design. The design is suitable as it aimed at collecting data and describing in a systematic manner.

**Area of Study:** - The study area was Jos metropolis of Plateau State. It has 4 Rehabilitation Centers for the physically challenged, and each of these centres are located in different wards across the Metropolis. The four centre names are Plateau school for the deaf, Zawan school for the blind, Archbishop Ganaka Memorial School for the Handicapped and Professor J. I. Iheanacho Centre.

**Population for the Study:** - The total population for this study was One hundred and fifty (150). It comprises of physically challenged persons and workers of four Centre, which has a population of one hundred and ten physically challenged persons of the three categories in the study and forty care givers, (Centre Record, 2015). The entire population was used for the study since it was a manageable size.

**Instrument for Data Collection:** Two types of structured questionnaires were used for collecting data. One of the questionnaires was for the staff and the other for the physically challenged. The questionnaire for the physically challenged (QPC) was administered to the physically

challenged. The questionnaire for caregiver providing care (QCPC) was administered to caregiver only. A 5-point scale questionnaire was used. Other types of items used include open and closed ended test item. It was validated by three experts in the Department of Home Science and Management. The reliability of the instrument which was estimated using Cronbach Alpha formula and found to be 0.78 was used.

**Method of Data Collection:** - A total of 150 copies of the questionnaire was administered on the spot and collected immediately. 110 copies of the instruments were administered to the physically challenged persons (PQC) and 40 copies to the care giver providing care (QCPC). Three assistants helped in the administration and retrieval of the questionnaire forms. All the copies of the questionnaire were properly completed and returned, giving a 100% return rates.

**Method of Data Analysis:** - The data collected through the use of the two sets of questionnaires were analyzed using percentage and mean to answer the research questions. The response to the question items were rated in the following order 5, 4, 3, 2, 1 for SA, A, D, SD, UD respectively. The responses were problem or not problem based on 2.50 decision point

### **Results**

**Table 1: Mean Responses on Problems Encountered by the Caregivers**

S/n	Problems faced by the care givers	Mean (%)	Decision point
1	Lack of funding from the government	3.31 (66.2)	Problem
2	Lack of appropriate and modernized equipment and materials	4.26 (85.2)	Problem
3	Lack of essentials amenities and facilities building, electricity, conducive environment, and water	4.18 (83.6)	Problem
4	Inadequate specialized training and retraining of caregivers.	3.69 (73.8)	Problem
5	Poor incentives (salaries, wages, bonuses, essential materials etc)	3.39 (67.8)	Problem
6	Lack of insurance for both caregivers and disabled	4.36 (87.2)	Problem
7	Lack of parents/guidance support	4.08 (81.6)	Problem
8	Negative attitude of Nigerians	2.15 (43.0)	Not problem
9	Shortage of personnel:	2.69 (53.8)	Problem
10	No mechanisms to review and access methodologies used in education of special need persons.	3.74 (74.8)	Problem
11	Providing care poses health hazard to caregivers	3.59 (71.8)	Problem
12	Balancing the demand of family makes it difficult to provide optimum services	3.92 (78.4)	Problem
<b>Overall mean</b>		<b>3.61 (72.3)</b>	

Table 1 presents the response to problems encountered by the caregivers at the various centers visited in Jos metropolis. Eleven of the items are problems based on 2.50 decision point set in the study with mean range of 2.69-4.26. This revealed that the caregivers are really encountering problems. Such problems were; funding (3.31), lack of

equipment (4.26), poor incentive (3.39), health hazard (3.59) among many others. However, only one of the problem items was not problem which is negative attitude of Nigerians with the lowest mean of 2.15. This implies that the care-givers are having service challenges in providing services to the physically challenged persons.

**Table2: Mean Responses on the Problems Encountered by the Physically Challenged Persons**

S/no	Problems encountered by the physically challenged	$\overline{X}_b$	$\overline{X}_d$	$\overline{X}_i$
1	Lack of adequate funding from all levels of government for the provision of materials for special training	3.68	4.21	3.97
2	Lack of good and conducive learning environment for persons	3.94	3.92	4.35
3	Lack of facilities and special qualified caregivers for the special and specific caring services	3.20	3.21	2.17
4	Lack of essential amenities e.g rest room within the classroom environment	3.97	4.14	3.82
5	Lack of implementation of government laudable policies.	3.54	3.82	4.02
6	Lack of respect for the dignity of persons by the respective care givers	3.91	4.03	3.86
7	Lack of support and encouragement by the society	3.82	3.96	4.33
8	Problem of discrimination and consideration to exercise their skills and knowledge in the society	2.80	2.42	2.95
9	Loneliness and excommunication among peer and society at large.	3.62	3.89	4.04
10	Lack of good health of a family or/and care giver is a key factor which can affect the health and well being of the persons.	4.02	4.28	4.20
	<b>Overall mean</b>	<b>3.37</b>	<b>3.79</b>	<b>3.77</b>

$\overline{X}_b$ = mean for the blind,  $\overline{X}_d$  = mean for the deaf  $\overline{X}_i$ = mean for the immobile

Table 2 presents the response to problems encountered by the physically challenged persons based on their categories in Jos metropolis. All the 10 items are problems with means range of 2.80-4.02 by the blind persons based on the 2.50 decision point set. This includes; funding (3.68), lack of facilities (3.20) lack of

implementation of government laudable policies (3.54) among others. The Table also presents the response to 10 problem by the deaf persons. These have means range of 3.2-4.28.

Furthermore, the Table shows 10 problems encountered by the mobility impaired persons. The problems have means range of 2.96-4.35.

**Table 3: Percentage Responses on Possible Solutions to Problems Encountered by the Care-givers and Physically Challenged Persons**

S/n	Possible solutions to some problems encountered	Frequency (%)
1.	Adequate funding of the rehabilitation centre for the physically challenged persons by government and philanthropy	120 (80%)
2.	Full implementation of government laws and policies as it affects the physically challenged persons	110 (73.3%)
3.	The center owners should provide necessary materials and equipment for the care giving services.	90 (60%)
4.	The family and the community should give special considerations and attention to the physically challenged persons	140 (93.3%)
5.	Support and encouragement from the society to the physically challenged persons	135 (90%)

Table 3 shows five problems with percentage range of 60-90. Though, there are numerous problems but the listed above were the most pointed out by the respondents. The respondents identified that the listed solution if met will address some of the perennial problems of the caring service to the physically challenged persons in Jos metropolis.

#### **Discussion of Findings**

From the data collected and analyzed, the study revealed some of the numerous problems encountered by the care givers and the various types of physically challenged persons examined in the study. The result revealed that the caregivers' experiences some notable problems in the caring services provided for the physically challenged persons in rehabilitation centres. Also, there is no enough specialized caregiver which an important part of the care is giving process for the disabled. In line with World Health Organizations (2010), in

order to help make the task of caring easier, it is pertinent to have trained personnel and a guide for managing institutions with disabled people. Murthy (2016), in his report opined that care givers' emotional health is important not only for the care giver, but also for the care receiver. The aim should be to minimize the stress of care giving and maximize the positive feeling of care giving. According to Bolanle and Ajokpaniovo (2012), rehabilitation is all encompassing – physical, emotional, social, medical, vocational and of course economic. The care givers then must be well and adequately trained and skilled as good counsellors so as to provide quality services in the rehabilitation centre through their wealth of experience and training and retraining, advising and consultation and even environmental manipulations such that would be of help to the physically challenged person in the centre to achieve optimal functioning. The study established the problem funding



and lack of necessary tools and machinery to work effectively: this agrees with Ekundayo and Ajayi (2009), that equipment for teaching are lacking or inadequate or in bad shape to permit the centre freedom in performing the needed task. This is one of the major challenge facing service provision in the rehabilitation centres, in all aspect of service provision in centres for the physically challenged, inadequate and inaccessible funds could be regarded as the prime reason for delay and slow pace development. Coordinating services and offering individual support to the physically challenged persons demand a lot of money and inadequate funding hinders development in the areas of rehabilitation services each of them need. In most cases also, the available funds for these projects are not accessible to the care givers and managers thereby making the service provision in the rehabilitation centres to suffer unnecessarily in areas of infrastructures, equipments and learning materials. (Adebisi *et al* 2014). This also agrees with (Lieketseng *et al* 2017), that in the real sense rehabilitation centres for physically challenged persons lack good health facilities and free health care is not always free for persons with disabilities nor is it accessible to them.

Finally, the evidence from the study enumerated some of the problems which were found to have notable difference for all the categories' of physically challenged

persons in the study. The finding agrees with Gobalakrishman (2013) that there is problem of discrimination between the disabled and the people. Also with Balarabe and Mahmond (2014), who opined that lack of dignity of persons in the society has lead them to beg for alms to survive. Okoli (2010) reports that disabled persons are living in an environment that is hostile leads to frustration and abandonment.

Furthermore, the study raised some of the solutions to the pertinent problems for both the caregivers and the physically challenged persons in the study. Among such are adequate funding, full implementation of government laws and policies, provision of necessary materials.

### Conclusion

Care giving services to physically challenged persons is encountering problems both on the side of the care givers and the physically challenged persons. It was found that funding among many other problems is really hindering the caring practices and services for the physically challenged persons in Jos metropolis. The study also established that the problems are significantly affecting the services and this has made the services to be difficult for both the care givers and the care receivers in the study. It was further established that adequate funding, implementation of government laws and policies, provision of necessary material at the centers will ameliorate some of the

significant problems being encountered.

Capacity building of service providers can be improved through effective education, training and recruitment. A review of knowledge and competencies of care givers in relevant areas can provide a starting point for developing appropriate measures to improve them. Manpower generation by promoting new courses and initiating degree and diplomas in relevant courses will solve the problem of inadequate trained care givers (Kumar, Gautan and Sitanshu, 2012).

### Recommendations

Based on the finding of the study, the following recommendations were made:

1. NGOs and other relevant bodies should do adequate enlightenment and sensitization campaign for the general public to have a positive attitude and approach towards the physically challenged persons in order to reduce stigmatization and discrimination.
2. Government and philanthropist should adequately provide fund for the caring services so that care givers can be eased in providing their services successfully.
3. Training of specialist in caring services to the physically challenged persons should be encouraged and the care givers should be adequately remunerated in order to be effective in the services being provided.

4. Providing facilities for the study of all the required skill and training for the persons' Braille, language interpreter, mobility specialist.
5. The caregiver need to initiate and propel the changes they want to see happen in the rehabilitation centre especially in terms of policy implementation by playing the role of influencing policy direction.

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