



## Situational analysis of disability in Nigeria

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**Query:** Please conduct a rapid situational analysis of disability in Nigeria, covering the political and donor environment, the legal context, DPO priorities and capacity, and available data and evidence.

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### 1. Overview

This report presents the results of a rapid desk-based situational analysis of disability in Nigeria, focusing on available evidence and data (section 3), the political and donor environment (section 4), the policy and legal context (section 5), as well as disabled people's organisations' (DPOs) priorities and capacity (section 6). This is part of a broader piece of work being undertaken by the Disability Inclusive Helpdesk for DFID Nigeria, to assess performance against DFID's new Disability Inclusion Minimum Standards.

This report aims to complement a 2018 situational analysis undertaken by the Institute for Development Studies (IDS), by drawing on the practical 'know-how' and expertise of practitioners working on disability rights in Nigeria, to provide rich insights and help contextualise information available online. Interviewees included representatives from Nigerian DPOs, INGOs and advocates for disability rights in Nigeria. The list of individuals interviewed is available on page 17.

### 2. Methodology

This practical 'know how' query has been conducted as systematically as possible within 5.5 combined days of researcher and expert time. The methodology is described below.

- **Initial rapid search of available online evidence** to identify relevant data and evidence on disability in Nigeria, focusing wherever possible on complementing rather than duplicating evidence from the IDS study. Studies since 2008<sup>1</sup> were identified through a variety of search strategies, including:
  - Google and relevant electronic databases (PubMed, Science Direct, and Google Scholar) for priority sources using a selection of key search terms<sup>2</sup> used in other systematic reviews to identify more recent materials including news articles as well as academic and grey literature.
  - Review of key disability portals and resource centres, including the Leonard Cheshire Disability and Inclusive Development Centre, Disability Data Portal, Source, International Centre for Evidence in Disability, the Impact Initiative, and Sightsavers Research Centre.
- **The DFID Disability Inclusive Development Programme consortium partners<sup>3</sup> and relevant experts were contacted** for recommendations of evidence and to suggest key experts for interviews.
- **Key expert interviews** were undertaken following semi-structured interview guides with four experts including practitioners, disability activists, and DPO representatives. (Please see page 17 for details of experts consulted)

**Limitation:** This query shares insights from a small number of individuals and should therefore not be taken as outlining consensus in the sector.

### 3. The situation for people with disabilities, available data and evidence

This sub section provides a rapid review of available data and evidence on the scale and nature of disability exclusion in Nigeria.

#### Prevalence

There is no accurate census of the disability population in Nigeria and conflicting prevalence rates are provided across different sources, a result of differing definitions of disability, differing methodologies used, and variations in data quality (WHO, 2011; Mont, 2007; Government of Nigeria, 2012).

- **The 2006 census and 2012 Nigerian General household survey both reported a disability prevalence rate of 2%** (Leonard Cheshire, 2018; National Bureau of Statistics & Federal Government of Nigeria, 2012). However, these numbers have faced scrutiny, with many experts suggesting this is an underestimation of the actual population of persons with disabilities (WHO, 2011; Haruna, 2017). The 2006 census relied on self-reporting of disability status, which typically will underestimate prevalence.<sup>4</sup> The 2012 household survey used an adapted version of the short set of Washington Group Questions to measure disability prevalence, which should identify most, but not all disabilities, and in particular, does not account for mental health,

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<sup>1</sup> The Disability Inclusion Helpdesk reviews evidence from 2008 onwards as this is the year that the Convention on the Rights of Persons with Disabilities and its Optional Protocol came into force.

<sup>2</sup> Key search terms included: Nigeria AND disabled / disability / disabilities, impairment, deaf, blind, wheelchair AND legislation, bill, politics, laws, donors, development partners, NGOs, DPO, CSO AND interventions, programmes, evaluations, reviews, research, study.

<sup>3</sup> The Disability Inclusion Helpdesk is funded under the DID programme. The DID consortium partners are ADD International, BBC Media Action, BRAC, Institute of Development Studies (IDS), International Disability Alliance (IDA), Humanity & Inclusion, Leonard Cheshire Disability, Light for the World, Sense, Sightsavers and Social Development Direct.

<sup>4</sup> For example, older persons may not consider themselves as having a disability, despite having significant difficulties in functioning, because they consider their level of functioning appropriate for their age. (WHO, 2011, pp 24)

psychosocial impairments or some intellectual impairments. (Mont, 2007; National Bureau of Statistics & Federal Government of Nigeria, 2012)

- While an accurate census does not exist, **the World Health Organization estimates that there are approximately 25 million persons with disabilities in Nigeria (13.2% of the population), which is closer to the global estimate of 15% of the population** (WHO, 2011). This estimation was based on the Global Burden of Disease Study 2004 which draws on available data sources to produce estimates of incidence, prevalence, severity, duration, and mortality for more than 130 health conditions for 17 subregions of the world. This prevalence measurement was conducted using the 'years lived with disability' (YLD) approach to estimate prevalence, this approach does not consider environmental factors (WHO, 2011), however given the reliability issues with census data, this is the most widely used and trusted estimate of disability prevalence in the sector (Interview with Omoi Ozovehe and Angela Ugah).
- **The 2015 'WHO Global Health Estimates Report' estimates that more than 7 million Nigerians (3.9% of the population) suffer from depression** and almost 5 million suffer from anxiety disorders (2.7%) (WHO, 2015)<sup>5</sup>.
- **Evidence suggests that conflict and armed violence in parts of the country are contributing to the disability prevalence rate** and further marginalising those with a disability, especially women and girls (Jerry et al, 2015)<sup>6</sup>. The UN estimated that for every child killed as a result of armed violence, 100 children are left with permanent, life-long disabilities (UN, 2007).
- **The UN estimates that globally, women make up 75% of the disabled people in low and middle income countries and 65-70% of these women live in rural areas** (UN, 2011). While there is no gender disaggregated disability data in Nigeria, a study examining the gender difference in prevalence rates found evidence that the prevalence rate for mobility impairments is higher for women than men (Balogun, 2016).

### Data and evidence on access to services and outcomes for people with disabilities

People with disabilities in Nigeria are generally excluded socially, politically, and economically. Available evidence and data includes:

#### Access to Education

According to the most recent Multiple Indicator Cluster Survey (MICS), there are approximately 9.1 million out-of-school children in Nigeria (National Bureau of Statistics and UNICEF, 2017). Within this context we know that children with disabilities, especially girls, face multiple barriers to accessing education (UNESCO, 2018; Haruna, 2017):

- **JONAPWD (2017) estimate that there are approximately 3 million children with disabilities out of school in Nigeria<sup>7</sup>**, and in Kware State, the enrolment rate of children with disabilities is estimated to be as low as 3.7% (JONAPWD, 2016).
- **A recent Leonard Cheshire report (2018) finds that the access gap increases at each level of education**, with the Completion rate for Secondary Education for children with disabilities 40% compared to 58% of children without disabilities, and university completion rates for people with disabilities half rates for people without a disability (Leonard Cheshire, 2018)<sup>8</sup>.
- **Literacy rates for under 25's in Nigeria are lower for people with disabilities.** The same report found that the literacy rate is 36% for people with disabilities compared to 64% for people

<sup>5</sup> Relies again on the 2004 data from the Global Burden of Disease Study<sup>7</sup> using the Years Lived with Disability estimation method (YLD).

<sup>6</sup> This study involved KIIs and FGDs with 270 participants.

<sup>7</sup> Calculated applying UNICEF estimates that 90% of children with disabilities in developing countries are out of school.

<sup>8</sup> It is likely that these completion rates are positively skewed considering the known low enrolment rates of children with disabilities.

without disabilities. The rate is lowest for women/girls with disabilities at only 21%,<sup>9</sup> and is lower still amongst women who had difficulty hearing or with self-care (Leonard Cheshire, 2018).

- A study investigating the availability of assistive technologies for special education in Nigerian educational institutions found that **the majority of institutions do not have required assistive technologies for students with disabilities** (Yusuf, Fakomogbon & Issa 2012)<sup>10</sup>.

There is evidence that children with disabilities face multiple barriers to enrolment (Elekwe and Ebenso, 2016; Jerry et al, 2015; Haruna 2017) including:

- **Physical barriers:** schools in Nigeria are often not accessible to children with disabilities - narrow doorways, no ramps, poor lighting, lack of quiet spaces.
- **Social barriers:** negative attitudes and stigma of communities and schools can prevent children from enrolling into education, cases have been reported where schools have refused admission to children with disabilities.
- **Institutional barriers:** whilst the Inclusive Education Policy has been passed, there is yet to be any push for implementation.
- **Girls with disabilities face additional barriers**, with evidence of increased vulnerability to gender based violence, gender discrimination and reports of parents wanting to keep them at home for safety.
- **These barriers continue within school:** There is evidence of segregation in schools, negative attitude amongst teachers and a lack of teachers qualified to support children with disabilities even in special educational facilities.

### **Economic Empowerment**

While there is no national data on the unemployment rate of persons with disabilities, research suggests that the employment rate is lower amongst persons with disabilities (Smith. N, 2011; Leonard Cheshire, 2018). Evidence includes:

- **Leonard Cheshire (2018) estimate the unemployment rate of persons with disabilities (15-24 years) to be 77% – compared to 49% amongst persons without disabilities.** The unemployment rate falls for those aged 25-64 years to 61% for persons with disabilities compared to 21% for persons without a disability.
- **Evidence suggests that even with a college education, people with disabilities find it difficult to get a job due to physical and attitudinal barriers.** A recent qualitative study with DPOs and people with disabilities it was reported that some employers felt that people with disabilities couldn't do the job effectively and were consequently unwilling to make the workplace accessible (Elekwe & Ebenso, 2016).
- **Those in work face further obstacles to progression. Only 0.9% of managerial positions are filled by people with disabilities – of these 100% were men (Leonard Cheshire, 2018).** This gender bias is also reflected in the DPO sector, where a recent study found several accounts of women being deterred from contesting for positions of leadership within DPO's due to their gender (Elekwe & Ebenso, 2016).
- **Persons with disabilities have lower access to banks and financial products.** Leonard Cheshire (2018), estimates that the proportion of adults that have an account at a bank or other financial institution is 12% for persons with disabilities compared to 16% for persons without a disability. Elekwe and Ebenso (2016) identified specific physical barriers to accessing financial services including lack of ramps, narrow doorways, and substantial paperwork.

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<sup>9</sup> The functional literacy rates for over 25's are very similar and the trends remain the same.

<sup>10</sup> The study involved the participation of 1,115 teachers.

- **Women with disabilities face further exclusion, only 4% of women with disabilities access financial products (Jerry et al, 2015).**

### **Political participation**

People with disabilities are underrepresented in political and electoral processes. Key evidence includes:

- **People with disabilities face physical barriers to participate in electoral process.** A 2016 audit of the accessibility of polling stations in Edo and Ondo states, found significant physical barriers including of polling units and voting cubicles, with 65% of the polling units observed in Edo and 77% of those in Ondo located in places that were inaccessible for Persons With Disabilities. A lack of accessible election materials, and communication skills of polling station volunteers present additional barriers. (IFA, 2016). Based on the findings of this 2016 report, the Inclusive Friends Association (IFA) together with the Independent National Election Committee (INEC) have piloted interventions during the 2018 Osun governorship election to make the process more accessible, including the adoption of a braille ballot guide. (Interview with Grace Jerry)
- **People with disabilities face particular financial barriers to political participation.** The IFA has been working closely with political parties to try to cut down costs and make processes more accessible although barriers remain. (Interview with Grace Jerry).
- **Data on the number of registered voters with disabilities is limited.** This creates particular challenges in trying to assess and address barriers to inclusion. (Interview with Grace Jerry)

### **Social protection and services**

**A study by the Nigerian Institute of Legal Studies (2012) noted that 9 out of 10 persons with disabilities in Nigeria live below the poverty line, as such social protection is crucial.** However, whilst the Social Protection bill has been under discussion since 2004 in Nigeria, there is no detailed consideration of disability within this<sup>11</sup> (ODI, 2012). Key evidence includes:

- **There is a lack of social protection for disabled persons in Nigeria** (Ibrahim Imam et al, 2016). Leonard Cheshire (2018) estimate that only 1.4% of people with disabilities are covered by social protection systems in Nigeria.
- **Families of people with disabilities experience increased financial pressures** to provide care, medical consultation and assistive devices required (Ajuwon, Ogbonna, Umolu, 2014).
- **The WHO estimates that there is limited healthcare available for those with disabilities,** with just one physiotherapist for every 10,000 people in Nigeria (WHO,2011).
- **Women and girls with disabilities are particularly vulnerable to gender-based violence (GBV) and abuse.** A 2015 study undertaken by the Nigeria Stability and Reconciliation Programme together with the Inclusive Friends Association in Plateau State, found that women and girls were at increased risk of GBV but less likely to speak up, be believed and access services. (Jerry et al, 2015)

### **Humanitarian Action**

Conflict in Nigeria is thought to be having a disproportionately negative impact on people with disabilities. The UNHCR estimates that over two million people have been internally displaced by the crisis which is believed to be contributing to the population size of disabled people (UNHCR, 2007). In

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<sup>11</sup> Action has been taken in the form of disability grants, these have been implemented ad hoc & without any strategic direction

contexts of displacement, the mortality rate for children with disabilities, often the last to receive medical care and food, can reach 80% (UN, 2007). Key evidence and data includes:

- **Research conducted by the Inclusive Friends Association in four conflict-affected local government areas in Plateau State of Nigeria found that women and girls with disability were particularly vulnerable during conflict.** Women and girls with disabilities reported finding it difficult to escape violence in conflict affected parts of northern Nigeria and were often abandoned. *'89.9% of respondents thought the impact of conflict on women with disabilities was severe or very severe'* (Jerry et al, 2015).
- **Evidence suggests that the impact of conflict affects people with disabilities differently dependent upon the type of impairment.** *'Women with visual impairments often do not know what is happening, where they are or how to get to safety'* (Jerry et al, 2015). Similarly, people with hearing impairments are unlikely to hear violence or danger approaching and people with mobility impairments are unable to get to safety. Those, especially women, with mental or intellectual impairments are often victim of gender-based violence or violence from carers (Jerry et al, 2015).
- **The humanitarian response in Nigeria is still falling short of adequately supporting people with disabilities, this is especially true for mental health.** Jerry et al (2015) found that food and relief distribution is often a 'survival-of-the-fittest' contest in which people with disabilities, especially women and girls, are disadvantaged. In some cases, respondents felt interventions do not include women with disabilities, are inaccessible and not designed to take into account their needs. Almost four-fifths (79.3%) of civil society respondents indicated their organisations have not been involved in any efforts to mitigate violence against women with disabilities.

### **Stigma and discrimination**

- **People with disabilities face discrimination and are often stigmatised** (Haruna, 2017). For example, in rural areas Jerry et al (2015) found that it is believed that those with 'hunchbacks' and who have albinism bring wealth and power when used in rituals. It is thought that having sex with women with intellectual and mental disabilities also brings wealth and power. This leads to the increased likelihood of albinos and those with 'hunchbacks' being killed and women with mental disabilities being raped (Jerry et al, 2015).
- **Children with disabilities are viewed by some parents as a burden** as they are unable to contribute to household income (Ebigbo & Ebigbo, 1992) and often lead to discrimination against family members and parents (Jerry et al, 2015).
- **Women with disabilities often faced more discrimination than men due to unequal gender power relations in Nigeria** (Jerry et al, 2015). Respondents felt men with disabilities often find it easier to get married than women and 35.4% of all respondents thought women with disabilities were employed, with the majority (54.1%) believing they did not have any source of income.
- **The UN suggests that people with mental health conditions face discrimination even in health care settings** (WHO, 2011).

### **Evidence Gaps**

This rapid review has identified a number of significant gaps in the evidence on disability in Nigeria:

- **The National prevalence rates as estimated, vary widely and do not include all mental health, psychosocial or learning impairments.**<sup>12</sup> Evidence suggests that people with

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<sup>12</sup> This will likely contribute to the suspected underestimation in the prevalence rate.

disabilities face different barriers dependent upon their type of disability, capturing and disaggregating by all impairment type is essential to inform intervention response.

- **A distinct lack of gender or age disaggregated data on disability.** There is no available data on disability prevalence rates on children with disabilities or women with disabilities in Nigeria. These groups are often the most vulnerable and will remain invisible without disaggregated data.
- **There is limited quantifiable data or evidence of programming specifically focusing on mental health or psychosocial impairments.** This group is known to face heightened stigma and discrimination, making them vulnerable.
- **There is a lack of robust evidence on the impact disability has on access to services and outcomes.** This is especially stark for non-physical impairments. There is a narrow definition of disability applied and understood in Nigeria thus leading to several groups being unidentified and further excluded.
- **A lack of data on links between disability and conflict affected states.**
- **A lack of disaggregated monitoring data around implementation of relevant social policies and programmes.**

#### 4. Political environment and legal context

Nigeria ratified the United Nations Convention on the Rights of People with Disabilities (CRPD) in 2007 and its Optional Protocol in 2010. However, successive attempts to get a Discrimination against Persons bill signed by the former president Goodluck Johnathon have been unsuccessful. (Ewang, 2019) Nigeria's State report to the CRPD Committee was due in 2012 but has still not been submitted (DRF, 2018). Until very recently, the Nigerians with Disability Act 1993 (NWDA) was the only specific legislation dealing with disability rights in Nigeria, which suffered from a lack of implementation, enforcement and awareness. (Ofuani 2011).

On the 23rd January 2019, the President of Nigeria – Muhammadu Buhari – signed the Discrimination Against Persons with Disabilities (Prohibition) Act, 2018, which is the first step towards Nigeria operationalising the CRPD. The new Act prohibits discrimination based on disability and imposes sanctions including fines and prison sentences on those who contravene it. It also stipulates a five-year transitional period for modifying public buildings, structures, and automobiles to make them accessible and usable for people with disabilities. (Ewang, 2019)

According to experts interviewed for this query, while this represents a significant achievement and opportunity to advance the rights of people with disabilities in Nigeria, the fact that it has taken almost 20 years of relentless advocacy by DPOs and disability activists to get the bill signed into law, reflects the low priority given to disability by successive governments to date. As one interviewee explained, "*the bill passed by accident*" – and was the result of political pressure around the 2019 elections which the Joint National Association for People with Disabilities (JONAPWD) was able to successfully leverage, effectively threatening to mobilise its 27 million members against politicians opposing the bill.<sup>13</sup> "*We were able to run with it [the opportunity presented by the President's ill-informed public comments on the disability bill<sup>14</sup>], mobilise the anger and make a lot of noise.*" (Interview with Judith Ekaeta Umoh) Other interviewees concurred that the motivation was about scoring 'political points', effectively viewing people with disabilities as 'vote banks' rather than reflecting genuine political will to address disability rights among the political elite.

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<sup>13</sup> See for example <https://www.vanguardngr.com/2018/12/2019-well-vote-against-politicians-opposed-to-disability-bill-jonapwd/>

<sup>14</sup> In an interview on January 17, the President denied on national television that he had received the bill. Hundreds of people protested, and barely five days later, he signed the bill into law. See <https://www.vanguardngr.com/2019/01/townhall-meeting-jonapwd-flays-buhari-over-comment-on-disability-bill/>

According to a recent country report by the Disability Rights Fund (2018), the Senate and House Representatives have been broadly supportive of efforts to address issues affecting people with disabilities, including considering and passing at least three previous national bills on disability rights (which were never signed into law), and engaging DPOs in discussion of the most recent bill. JONAPWD have found that while some parliamentarians are broadly supportive of disability rights, the Cabinet have been much harder to engage. President Buhari has recently appointed a visually impaired man, Dr. Samuel Ankeli as his Senior Special Assistant on Persons Living with Disability who now working within the office of the president. However interviewees cautioned that this position lacks both the power and resources to make any real impact. (Interviews with Omoi Ozovehe, Angela Ugah; and Chitra Nagarajan)

At the State level, there are a handful of states which have state-level disability bills, but so far only two have established Disability Commissions (as stipulated within the disability legislation). Interviewees identified specific challenges to implementing disability legislation at the state level including lack of funds, implementing plans and policies. (Interview with Omoi Ozovehe and Angela Ugah)

Experts consulted concur that the Discrimination Against Persons with Disabilities (Prohibition) Act, 2018, presents a significant opportunity which has dramatically increased awareness of disability issues, presenting a key entry point for DPOs, INGOs and donor engagement around disability issues. However, there remain concerns that the landmark bill is not accompanied by genuine political will (and accompanying resources) to address disability issues, making the role of DPOs and development partners to hold government account even more critical. “*Our [DPOs, donors and INGOs] work has only just begun*”. (Interview with Judith Ekaeta Umoh). “*We now need a framework for how the bill will be implemented*” (Interview with Omoi Ozovehe).

The Federal Ministry of Women’s Affairs and Social Development is responsible for policy and programming on disability, however experts interviewed concurred that “*the priority given to disability issues within the Ministry is low, reflected in insufficient budgetary resources being allocated*” (DRF, 2018, p. 8). Disability issues fall under the remit of the Ministry’s Rehabilitation Department, which broadly can be described as adopting a charity model approach to disability. Interviewees questioned the relevance of Ministerial ownership of disability issues, versus a standalone disability department, and stated preference to work through state-level disability commissions. “*The Ministry [of Women’s Affairs and Social Development] have their own priorities, we would prefer to run our own issues*” (Interview with Grace Jerry). JONAPWD have found the Ministry difficult to engage on disability issues, ‘beyond rehabilitation’, and report that the Ministry were involved in actively stalling the Discrimination Against Persons Act (2018) prior to it finally being passed. (Interview with Judith Ekaeta Umoh).



The Federal Ministry of Women Affairs and Social Development made a number of high profile commitments at the 2018 Global Disability Summit including a commitment to improving the policy and legislative environment, data and evidence and specific commitments related to inclusive education, economic empowerment and technology. (See box on page 4) However, a lack of DPO engagement in developing these commitments has led to a disconnect between these commitments and DPOs priorities, and in particular the need to strengthen DPO capacity to hold government to account. (Interviews with Judith Ekaeta Umoh and Grace Jerry) Furthermore, there appears to be a disconnect between the commitments made and the government's ability and readiness to take these commitments forward, especially given its history of lack of engagement in disability issues.

**Government of Nigeria: 2018 Global Disability Summit Commitments**

**Strengthen policy and legislation to promote and protect the rights of persons with disabilities;**

- Commit to assenting to the Disability Right Bill and an inclusive approach to all human right provisions in the Nigerian constitution as they apply to persons with disabilities by 2023
- Establish a strategic advocacy project focused on combating social challenges, stigma and stereotypes

**Improving access to inclusive education for children with disabilities;**

- Commit to the development of an inclusive education policy that provides free compulsory education for all children with disabilities by 2020
- Commit to ensuring physical structures are accessible to persons with disabilities and provide braille, sign language facilities for information or services opened to the public for accessibility by 2023

**Strengthen services and programmes to promote economic empowerment to persons with disabilities:**

- Commit to supporting the self-employment of people with disabilities through the provision of entrepreneurship training, grants, loans and micro-credit schemes
- Commit to giving incentives to cooperate bodies for employment and empowerment for people with disabilities and ensure that organisations disclose the number of people with disabilities in their employment as required by law.

**Improve availability and affordability of technology/ innovation for persons with disabilities:**

- Establishment of affordable technology and innovative centre to support the manufacture of appropriate and affordable assistive devices

**Improve the collection, availability and use of disability data:**

- Commit to reliable and comparable data on disability and its use in planning by setting up data and research fund and committing to the use of the Washington Group of questions for both the National Census and the current National Demographic survey.

**Source:** National Government of Nigeria (2018) Form for submitting commitments for the Global Disability Summit.

The National Human Rights Commission is another key government stakeholder on disability issues, which is perceived as having been very engaged with DPOs and disability issues. In July 2019, the overseas disability charity CBM is working with the Commission and JONAPWD to hold a conference with key stakeholders to raise awareness of the CRPD, and to develop a framework for how collectively DPOs and development partners can help to drive the implementation of the bill and hold the government to account. (Interview with Omoi Ozovehe and Angela Ugah).

However, a key gap for mainstreaming disability is that the majority of other government ministries “don't see disability as their issue” and as a result systematically exclude people with disabilities from mainstream social programmes Furthermore, there is no mechanism for monitoring disability inclusion at the government level. (Interview with Omoi Ozovehe and Angela Ugah).

Other relevant national policies (as further outlined in section two of the IDS 2018 draft situational analysis) include:

- The International Labour Organisation's **Vocational Rehabilitation and Employment (Disabled Persons) Convention, 1983** (No. 159) was signed on the 26 Aug 2010, which commits to implement and periodically review a national policy on vocational rehabilitation and employment of disabled persons. (IDS, 2018)
- **Section 6 of the Disability Decree of 1993** focuses on vocational, rehabilitation and employment of persons with disabilities, and emphasising provision of vocational training as well as a quota for employers to ensure people with disabilities make up at least 10% of the workforce. (Ibid, 2018)
- The **National Social Protection Policy** – approved by the Federal Executive Council in 2017, which 'conceives social protection as imperative to the reduction of poverty and protection of vulnerable groups from shocks that may arise from social insecurity and vulnerabilities caused by disabilities, accidents and disasters.' (Ibid, 2018)
- The **National Policy on Special Needs Education in Nigeria** was launched in 2015, which aims to ensure persons with disabilities are provided equal opportunities to education, equity and have access in a barrier free educational environment. (Ibid, 2018)
- **Section 8 of the National Educational policy** concerns special education or early intervention for children or adults with disabilities in Nigeria. However, a 2016 study found an absence of a legal mandate and lack of budgetary support has led to a lack of adequate programming (Ignoi and Peters, 2015)
- The existing **Mental Health Policy** (1991) document in Nigeria was formulated in 1991. It was the first policy addressing mental health issues and its components include advocacy, promotion, prevention, treatment and rehabilitation. (WHO, 2006) Nigeria is still in the process of developing a modern mental health act, with a **Mental Health Bill** (2008) still pending (Ibram, 2016).

In addition, DPOs have been mobilising around the drafting and development of **national legislation on youth political participation and violence against women**, to advocate for inclusion of disability specific issues. (Interview with Grace Jerry)

## 5. Donor environment

There has been a significant increase in the number of donors engaged in disability issues in Nigeria, with a consensus among interviewees that bilateral donors in particular – including UK Aid, DFAT and USAID – have been particularly influential in bringing visibility to disability issues. In addition, specialist rights funds including the Disability Rights Advocacy Fund and the Urgent Action Fund Africa, have provided direct funding to DPOs.

However, there remain questions around the technical capacity of some donors to deliver high quality disability inclusive programming. "*Most donors have beautiful policies on disability inclusion which are often not reflected in practice....including issues with the attitudes and engagement of staff*" (Interview with Omoi Ozovehe). There appears to be a frustration among DPOs about a lack of meaningful engagement, with engagement often adhoc and perceived to be extractive. (Interview with Judith Ekaete Umoh)

The following provides a brief overview of key bilateral, multinational, international and national donors working in this space.

### **Bilateral donors**

**DFID:** DFID has launched a Disability Inclusion Strategy that has seen increased mainstreaming of disability in funding streams and partnerships. DFID-Nigeria has three areas of focus in their strategy

1) humanitarian response and building resilience to crises; 2) economic development and basic services to improve the lives of the most vulnerable through jobs, health and education; and 3) building stability and institutions to be effective, transparent, and accountable to their citizens (DFID, 2018). There are several projects that aim to address inclusion of persons with disabilities in society. DFID Nigeria has included a focus on persons with disabilities within each focus area, with recent funding focused on involvement of persons with disabilities in the political process and in access to education through programmes such as the Girl's Education Challenge (DFID,2018).

**USAID:** There is a requested fund of \$351.61m in 2019 to Nigeria, the majority of which is focused on funding healthcare (USAID, 2019). The USAID Nigerian Country Development Cooperation Strategy 2015-2020 is driven by a goal for reduced extreme poverty in a more stable, democratic Nigeria. There are three core objectives within this; 1) broadened and inclusive growth, 2) a healthier and more educated population in target states, and 3) strengthened good governance. For each objective there is a specified focus, on ensuring the inclusion of marginalized populations, including people with disabilities. Similarly, under the objective for access to health and education, USAID is supporting access for persons with disabilities (DRAF, 2018). One example is a programme implemented in partnership with JONAPWD to promote Inclusive Education as part of the Strengthening Advocacy and Civic Engagement (SACE) Project. (JONAPWD, 2016).

**DFAT (Australian Department for Trade and Affairs):** The Australian Government has a strong commitment to disability inclusive development, as outlined in its 2015-2020 strategy for strengthening disability-inclusive development in Australia's aid programme. This includes a focus on supporting governance for equality through the implementation of the CRPD; enabling infrastructure and accessible WASH; ensuring inclusive education and skills; and building resilience – inclusive humanitarian assistance, disaster risk reduction and social protection. (DFAT, 2015)

### **International Financial Institutions**

**The International Finance Cooperation (IFC)/World Bank Group:** The IFC are promoting inclusive access to financial services and banking, with a specific focus on people with disabilities (IFC, 2012). The Accion Microfinance bank has received investment from the IFC, they are licensed by the Central Bank of Nigeria, this bank launched the People Living with Disabilities product to provide loans. They are also performing ongoing support to Central Bank to create disability-inclusive institutions (Centre for Financial Inclusion, 2016).

**African Development Bank (AfDB):** According to their most recent financial report, AfDB are using the proceeds from Social Bonds to support social programmes in Nigeria in partnership with the Nigeria Trust Fund targeting those living below the poverty line, those that are excluded or marginalised, vulnerable groups, people with disabilities, migrants, those that are undereducated and/or the unemployed. (AfDB, 2017)

### **International and regional funds**

**Open Society Initiative for Western Africa (OSIWA):** OSIWA has worked in Nigeria since 2001. The Nigeria country programme supports the strengthening of constitutionalism and rule of law, electoral processes, equitable management of public revenues, and the rights of women and other vulnerable groups (including people with disabilities). A current grant open for applications encourages a focus on equality and anti-discrimination programmes.<sup>15</sup>

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<sup>15</sup> <http://www.osiwa.org/grants/>

**The Disability Rights Advocacy (DRA) Fund:** The DRA fund (a sister fund to the Disability Rights Fund) provided funding to support JONAPWD's advocacy activities around the passing of the Discrimination Against Persons with Disabilities (Prohibition) Act, 2018. (Interview with Judith Ekaeta Umoh) Funded by Australia Aid and UK Aid, the DRA fund supports provides grants to DPOs to advance legal frameworks around disability rights.

**The Urgent Action Fund Africa:** The fund provides rapid response grants that allow women and women human rights defenders to take advantage of time sensitive windows of opportunity to undertake strategic interventions that advance women's human rights in Africa. The fund is currently supporting JONAPWD to develop a separate entity for women with disabilities. (Interview with Judith Ekaeta Umoh)

### **National Foundations**

**MTN Foundation Nigeria:** have made a commitment to supporting – through their economic empowerment portfolio they are funding projects that focus on disability inclusion. MTN Foundation are delivering a programme called 'Disability Support Project' in Partnership with Independent Living Programme (ILP). This grant funds projects to supply mobility and assistive devices or bursaries to people with disabilities to improve their access to services (healthcare, education, livelihoods) and participate.<sup>16</sup>

### **6. DPO priorities and capacity**

This section provides an overview of the DPO landscape in Nigeria. Nigeria has a large number of DPOs representing people with a range of different impairments and working on a range of issues. This includes two umbrella organisations: JONAPWD (see annex 1) as well as the Association for Comprehensive Empowerment of Nigerians with Disabilities (ASCEND)<sup>17</sup>. In addition, there are a number of DPOs working at the national, state and local levels, representing people with a range of different impairments and working on a range of issues. Case studies of two DPOs, JONAPWD and The Inclusive Friends Association are provided in annex 1.

Key points from the interviews include:

- **Nigeria has a large number of DPOs representing people with a range of different impairments and working on a range of issues.** Different disability 'clusters' representing specific impairments. Each DPO has their own priorities and agenda (for example sign language interpretation in health centres being driven by deaf women) (interview with Omoi Ozovehe and Angela Ugah). One interviewee described the movement as '*fragmented*', with a lack of shared priorities and agenda beyond the passing of the recent landmark bill. " [since the passing of the bill], *we now really need key stakeholders to sit together and define priorities to ensure the legislation is realised*" (Interview with Omoi Ozovehe)
- **Coordination between DPOs is stronger at the national level than at the state level where coordination is particularly weak.** However, this is an area that donors have been supporting, which has been welcomed by DPOs (interview with Grace Jerry).
- **Men with physical disabilities, are more broadly represented within the movement than other groups specifically women and girls with disabilities, and some other types of impairment.** In particular, interviewees noted that with the exception of a few women-led DPOs, women and girls with disabilities are significantly underrepresented or "*invisible*" in the movement. Interviewee Judith Ekaeta Umoh was elected as Chair of JONAPWD in 2014, and is still one of only a small handful of women in leadership positions within the sector, which she

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<sup>16</sup> <https://foundation.mtnonline.com/causes/economic-empowerment/>

<sup>17</sup> Less visible than JONAPWD, there is limited public information available about ASCEND, its membership, or its activities. (DRF, 2018)

describes as a very male dominated space. People with psychosocial and intellectual disabilities have typically been underrepresented, and people with mental health conditions are not considered part of the movement at all.

- **However, there are signs that the movement is becoming more inclusive.** At JONAPWD's most recent November 2018 national convention, it was agreed to open up space for more disability clusters with the intention of increasing inclusion including for people with psychosocial disabilities, women with disabilities, families of children with disabilities and people with albinism. The proposed changes, which should hopefully be approved at the next general meeting in June 2019, should lead to a much broader and representative membership base. Inclusion of mental health is not being considered at this time. (Interview with Judith Umoh).
- **Common capacity gaps include organisational capacity, weak governance, technical capacity (including rights-based approaches), and self-esteem of staff.** CBM have been doing a lot of work building the capacity of DPOs, and while undertaking a disability audit of the humanitarian sector, they were disappointed to find no state level partners with sufficient capacity to contribute. *“At the state level, we see DPOs with very low capacity, especially in the north of the country”.* (Interview with Omoi Ozovehe)
- **In addition to DPOs, it is important to note that there are also some informal structures where people with disabilities may convene and self-organise.** For example in Northern Borno, there is a part of the state where blind people live together, which has its own Emir who also represents people with disabilities as a Special Advisor to the State Government on disability. (Interview with Chitra Nagarajan)

## Annex 1: DPO case studies

The following case studies provide further insights into the priorities and capacity of two DPOs (one national and one regional).

**JONAPWD** is the largest organisation working on disability issues in Nigeria, with over 27 million members and working across all 36 states. Formed in 2012 to defend the rights and development of Nigerians with disabilities, the umbrella DPO currently represents six 'clusters' of disabled people's groups including people who are blind, people who are deaf, people with physical disabilities, people with intellectual disabilities, people with spinal cord injuries and people with leprosy. JONAPWD were instrumental in advocacy efforts focused on the passing of the recent landmark disability bill. Additional priorities include inclusive education.

Over the last six years since Judith Ekaeta Umoh has been JONAPWD's chair, the organisation has been significantly strengthened as an organisation, and has grown from receiving mainly in kind support to now being the recipient of direct funding including in partnership with Chemonics working delivering a four year advocacy project on inclusive education from USAID as part of the Strengthening Advocacy and Civic Engagement (SACE) Project.

According to Judith, key capacity gaps still facing the organisation include an ineffective governance structure and lack of institutional core funding. According to a recent internal assessment of capacity, organisational management and internal controls scored very poorly. Further a lack of a strategic plan and sufficient board structure and profile were highlighted as areas of weakness.

**The Inclusive Friends Association** is a women-led DPO based in Plateau State, which aims to put disability issues at the forefront of development. Priority areas include democracy and governance, with a focus on increased political participation of people with disabilities. Inclusive Friends also work across a number of other sectors within their programming including gender-based violence (GBV), water,

sanitation and hygiene (WASH) and inclusive education. Inclusive Friends have partnered with JONAPWD since 2014. Engaged with them at the state, LGA and national level.

Inclusive Friends has been supported by the National Democratic Institute (NDI) for a number of years, which has led to improved organisational capacity, especially around HR, finance and communications. According to their executive director Grace Jerry, they have technical capacity gaps around work on gender-based violence.

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