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Understanding and Managing Developmental Disabilities in Nigeria

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Abstract

Developmental disabilities have a significant impact on individuals, families, and societies worldwide. This paper intends to explore the understanding and management of developmental disabilities in Nigeria, shedding light on the unique challenges and potential strategies to address them. By examining the current state of knowledge, healthcare services, and social support systems, this study contributes to the literature on developmental disabilities in Nigeria. The paper begins by providing an overview of the definition, types, and prevalence of developmental disabilities, with an emphasis on the Nigerian context. It examines the socio-cultural factors, including poverty, inadequate healthcare infrastructure and societal attitudes towards disability, that can contribute to the development and impact of developmental disabilities in Nigeria. Moreover, this research examines the accessibility and availability of healthcare services for individuals with developmental disabilities in Nigeria. It identifies the existing gaps and challenges in healthcare delivery, including limited specialized services, inadequate funding, and fragmented care. It also highlights the importance of early screening, diagnosis, and intervention in optimizing outcomes for individuals with developmental disabilities. Furthermore, the study explores the socio-economic and psychosocial aspects of managing developmental disabilities in Nigeria. It delves into the societal stigma, discrimination, and social exclusion experienced by individuals with disabilities and their families. The paper emphasizes the need for community awareness, public education campaigns, and the promotion of inclusive policies to foster acceptance, inclusion, and equal opportunities. Additionally, this research examines the role of education and rehabilitation services in managing developmental disabilities in Nigeria. It explores inclusive education approaches, appropriate school facilities, and individualized support for students with disabilities. It also highlights the importance of vocational training programs and job placement to enhance the socio-economic integration of individuals with developmental disabilities. In 251 Abubakar, A.N.



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conclusion, this paper calls for a multi-faceted approach to understand and manage developmental disabilities in Nigeria. It emphasizes the need for collaboration among policymakers, healthcare professionals, educators, and community stakeholders to address the challenges faced by individuals with developmental disabilities. The study advocates for improved healthcare

infrastructure, inclusive education, and societal acceptance to ensure equity and enhance the

quality of life for those affected by developmental disabilities in Nigeria.

Keywords: Developmental Disabilities, Management of Developmental Disabilities, Healthcare Services, Socio-cultural Factors and Societal Stigma

1.1 Introduction

A number of life situations, including the aging process, manifest themselves as impairments. We often use the term impairments, disabilities and/or handicaps interchangeably; hence incorrectly. To begin with, parents need to be clear about these terms as the terms themselves profoundly influence their opinions and attitudes towards their own children with such problems. Impairments are generally not recognized until they interfere in the performance of daily activities by an individual. Impairment is any visible structural/anatomical loss of physical or sense organs in an individual. The loss of a little finger is an impairment. Disability, usually a consequence of impairment, is the functional inability of an individual to perform any activity in the manner or within the range considered 'normal' for any human being. It is a restriction of activities as a result of an impairment. Disability interferes in the performance of daily activities by an individual. Temporary or permanent disabilities can be caused by diseases, accidents or genetic causes, and may vary from case to case. The scale of abilitiesdisabilities exists, as it were, along a continuum. Thus, going back to our earlier example, a person who has lost his little finger (impairment) may not be experiencing any disability when compared to another individual who has lost his upper limbs. Handicap is a disadvantage resulting from, or the consequence of, impairment as well as disability. It is the manifest limitation that prevents fulfilment of the social role



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expected for the age, sex or cultural background of an individual (WHO, 1980). A person may lose a limb and still not face any impediments at his job. Thus, he is physically impaired but not handicapped. The concept of handicap is subjective, situational and subject to social perception. The official document to distinguish these terms is the International Classification of Impairments, Disabilities and Handicaps (ICIDH) first published by the World Health Organization (ibid.). A revision of the ICIDH is expected shortly, as a renamed instrument called the International Classification of Impairments, Activities and Participation (ICIAP) (WHO, 2002). This renaming is to do away with the stigma and negative connotations attached to the words disability and handicap. Furthermore, the linear, theoretical or medical-disease model underlying the earlier impairment-disabilityunderstanding of handicap as a consequence of illness-disease is being increasingly challenged by the alternative human-rights model that advocates primacy of the individual with impairments. The term disability has been replaced with activity and handicap with participation, to indicate the nature and extent of a person's involvement in life situations. 2024, Vol. 03, Issue 04, 251-261 DOI: https://doi.org/10.59231/SARI7760

The qualifiers that indicate the degree of difficulty and assistance required overcome this difficulty (formerly called handicap) is now referred to as restriction in participation. In this new classification, a list of environmental/contextual factors commonly impacting on participation are delineated. Impairment is any structural loss; disability is functional incapability and handicap is social disadvantage experienced by a person. Developmental disabilities are a group of conditions that affect individuals in different impacting their physical, cognitive, and intellectual development. These conditions often become apparent during childhood or adolescence and can include:

- 1. Intellectual Disability (ID): Significant limitations in cognitive functioning and adaptive behaviors.
- 2. Autism Spectrum Disorder (ASD): Difficulty with social interactions, communication, and repetitive behaviors.
- 3. Cerebral Palsy (CP): Physical disability affecting movement, posture, and muscle tone.
- 4. Down Syndrome: Genetic disorder causing intellectual disability and physical characteristics.



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- 5. Fetal Alcohol Spectrum Disorder (FASD): Brain damage caused by prenatal alcohol exposure.
- 6. Attention Deficit Hyperactivity Disorder (ADHD): Difficulty with attention, impulse control, and hyperactivity.
- 7. Learning Disabilities (LD): Difficulty with reading, writing, mathematics, or other academic skills.
- 8. Speech and Language Disorders: Difficulty with communication, speech, or language development.
- 9. Vision and Hearing Impairments: Significant visual or hearing losses.
- 10. Neurodevelopmental Disorders: Conditions like Tourette's Syndrome, Rett Syndrome, and others. It's important to note that every individual with a developmental disability is unique with their own strengths, challenges, and needs. Early intervention, accommodations, and support can significantly impact their quality of life and inclusion in society.

2.1 Types of Developmental Disabilities Prevalent in Nigeria

Developmental disabilities are lifelong conditions that affect individuals in different ways, impacting their physical, cognitive, and intellectual development. In Nigeria, 2024, Vol. 03, Issue 04, 251-261 DOI: https://doi.org/10.59231/SARI7760 some prevalent developmental disabilities include:

- 1. Cerebral Palsy: A neurological disorder affecting movement, muscle tone, and coordination.
- 2. Autism Spectrum Disorder (ASD): A neurodevelopmental disorder impacting communication, social interaction, and behavior.
- 3. Down Syndrome: A genetic disorder causing intellectual and physical disabilities.
- 4. Intellectual Disability: Significant limitations in cognitive functioning and adaptive behaviors.
- 5. Epilepsy: A neurological condition characterized by recurrent seizures.
- 6. Hearing Loss and Deafness: Partial or complete hearing impairment.
- 7. Visual Impairment and Blindness: Partial or complete vision loss.
- 8. Sickle Cell Disease: A genetic blood disorder causing anemia, pain, and organ damage.
- 9. Muscular Dystrophy: A group of genetic disorders causing progressive muscle weakness and degeneration.
- 10. Spina Bifida: A neural tube defect affecting the spine and nervous system. It's important to note that these conditions



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require early intervention, support, and accommodations to ensure individuals with developmental disabilities can reach their full potential and lead fulfilling lives.

2.2 Socio-cultural Factors Determining Developmental Disabilities in Nigeria

In Nigeria, socio-cultural factors significantly influence the prevalence and experience of developmental disabilities. Some key factors include:

- 1. Stigma and cultural beliefs: Many Nigerians view disabilities as a curse or punishment from God, leading to stigma and marginalization.
- 2. Limited access to healthcare: Inadequate healthcare infrastructure and resources, particularly in rural areas, contribute to untreated or mismanaged conditions leading to developmental disabilities.
- 3. Traditional remedies: Preference for traditional healing methods over modern medicine can delay diagnosis and treatment, exacerbating conditions.
- 4. Nutrition and malnutrition: Inadequate nutrition during pregnancy and early childhood can increase the risk of developmental disabilities.
- 5. Education and awareness: Limited understanding and awareness about

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developmental disabilities among parents,
caregivers, and healthcare providers can lead
to delayed diagnosis and intervention.

- 6. Poverty and economic constraints: Financial limitations can restrict access to necessary medical care, therapy, and support services.
- 7. Family dynamics and social support: Strong family and social support networks can positively impact individuals with developmental disabilities, while lack of support can worsen their experiences.
- 8. Cultural practices and superstitions: Harmful practices like female genital mutilation (FGM) and beliefs about "evil spirits" can contribute to developmental disabilities.
- 9. Limited accessibility and inclusivity: Inadequate infrastructure and lack of accommodations in public spaces, schools, and healthcare facilities can restrict opportunities and inclusion for individuals with developmental disabilities.
- 10. Gender and social inequality: Gender and social biases can affect access to resources, healthcare, and opportunities for individuals with developmental disabilities.

Addressing these socio-cultural factors is crucial to reducing the prevalence and impact



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of developmental disabilities in Nigeria and promoting inclusive support and acceptance.

- 2.3 Healthcare Challenges towards
 Addressing Developmental Disabilities in
 Nigeria in Nigeria, healthcare challenges
 towards addressing developmental
 disabilities include:
- 1. Limited Awareness and Understanding: Healthcare providers lack knowledge about developmental disabilities, leading to misdiagnosis or delayed diagnosis.
- 2. Inadequate Training and Expertise: Limited specialized training and expertise in developmental pediatrics, neurology, and rehabilitation medicine.
- 3. Insufficient Infrastructure and Resources: Inadequate facilities, equipment, and supplies, particularly in rural areas.
- 4. Limited Access to Healthcare Services: Barriers include distance, cost, and lack of transportation.
- 5. High Patient-to-Doctor Ratio: Overwhelmed healthcare providers may not have the time or resources to provide adequate care.
- 6. Limited Availability of Therapies: Speech, occupational, and physical therapies are scarce, especially outside urban areas.

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- 7. Stigma and Cultural Beliefs: Healthcare providers may share cultural beliefs and stigmatize individuals with developmental disabilities.
- 8. Limited data and research: Inadequate data and research on developmental disabilities in Nigeria, making it difficult to develop effective interventions.
- 9. Inadequate Policy and Legislation: Limited policies and laws protecting the rights of individuals with developmental disabilities.
- 10. Funding Constraints: Inadequate allocation of resources and funding for developmental disability services.
- 11. Brain Drain: Migration of skilled healthcare professionals to other countries.
- 12. Limited Availability of Assistive Technology: Limited access to devices and tools that can aid individuals developmental disabilities. Addressing these challenges requires a multi-faceted approach, increasing including awareness and education, investing in infrastructure and resources, and developing policies legislation that support individuals with developmental disabilities.

2.3 Significance of Early Screening, Diagnosis and Intervention in Optimizing



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Outcomes for Individuals with Developmental Disabilities

Early screening, diagnosis, and intervention are crucial in optimizing outcomes for individuals with developmental disabilities. The importance of early intervention can be seen in the following:

- 1. Improved Outcomes: Early intervention leads to better cognitive, social, and communication skills.
- 2. Reduced Severity: Identifying and addressing developmental delays early can reduce the severity of disabilities.
- 3. Increased Accessibility: Early intervention enables children to access mainstream education and social activities.
- 4. Enhanced Language Development: Early language intervention improves communication skills and reduces language deficits.
- 5. Better Social Skills: Early social skills training improves relationships and social interactions.
- 6. Increased Independence: Early intervention enables individuals to develop self-care and daily living skills.
- 7. Reduced Stigma: Early acceptance and support reduce stigma and promote inclusivity.

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- 8. Family Support: Early intervention provides families with guidance, support, and resources.
- 9. Cost-effective: Early intervention reduces long-term costs associated with developmental disabilities.
- 10. Improved Mental Health: Early intervention reduces the risk of mental health issues, such as anxiety and depression.
- 11. Increased Participation: Early intervention enables individuals to participate fully in their communities.
- 12. Better Health Outcomes: Early intervention addresses related health issues, such as epilepsy and sleep disorders.

Early screening, diagnosis, and intervention are critical in optimizing outcomes for individuals with developmental disabilities, enabling them to reach their full potential and lead fulfilling lives.

2.4 Socio-economic and Psychosocial Aspects of Managing Developmental Disabilities in Nigeria.

Managing developmental disabilities in Nigeria involves addressing various socioeconomic and psychosocial aspects, including:

2.4.1 Socio-economic Aspects

1. Poverty and economic constraints;



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- 2. Limited access to education and employment;
- 3. Stigma and social exclusion
- 4. Inadequate healthcare and rehabilitation services;
- Lack of social support and resources;
- 6. Limited accessibility and inclusivity in public spaces and facilities.

2.4.2 Psychosocial Aspects

- 1. Emotional and mental health challenges (e.g., anxiety, depression);
- 2. Social isolation and loneliness;
- 3. Stigma and shame;
- 4. Family dynamics and caregiver burden;
- 5. Limited social skills and relationships;
- 6. Difficulty with daily living activities and independence;
- 7. Mental health stigma and limited access to mental health services:
- 8. Trauma and abuse (e.g., physical, emotional, sexual);

2.4.3 Approach to Managing Socioeconomic and Psychosocial Aspects of Developmental Disabilities.

To address these aspects, a comprehensive approach is needed as follows:

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- 1. Increased awareness and education;
- 2. Access to healthcare, rehabilitation, and mental health services;
- 3. Social support and resources (e.g., support groups, respite care);
- 4. Inclusive education and employment opportunities;
- 5. Accessibility and accommodations in public spaces and facilities;
- 6. Family-centered and community-based interventions;
- 7. Economic empowerment and poverty reduction strategies;
- 8. Addressing stigma and promoting social inclusion;

By addressing these socio-economic and psychosocial aspects, individuals with developmental disabilities in Nigeria can lead more fulfilling and inclusive lives.

2.5 Role of Education and Rehabilitation Services in Managing Developmental Disabilities in Nigeria.

Education and rehabilitation services play a vital role in managing developmental disabilities in Nigeria in the following ways:

1. Early identification and intervention: Educational settings can identify developmental delays and provide early intervention.



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- 2. Inclusive education: Modified curricula and adapted teaching methods help individuals with developmental disabilities learn and participate.
- 3. Special education: Trained teachers and specialized programs cater to specific needs.
- 4. Rehabilitation services: Physical, occupational, and speech therapies help develop skills and abilities.
- 5. Vocational training: Equips individuals with developmental disabilities with employable skills.
- 6. Counseling and psychotherapy: Supports mental health and well-being.
- 7. Family support and training: Empowers caregivers with knowledge and skills.
- 8. Accessibility and accommodations: Modifications in educational settings enable participation.
- 9. Social skills development: Encourages social interaction and relationships.
- 10. Community integration: Facilitates participation in community activities and social events.

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- 11. Empowerment and advocacy: Promotes self-advocacy and advocacy for rights.
- 12. Research and development: Informing evidence-based practices and policy development.

Education and rehabilitation services help individuals with developmental disabilities in Nigeria reach their full potential, lead independent lives, and participate fully in their communities.

2.6 Multifaceted Approach to Understanding and Managing Developmental Disabilities in Nigeria.

A multifaceted approach to understanding and managing developmental disabilities in Nigeria involves combining various perspectives and strategies, including:

- Medical and therapeutic interventions
 (e.g., speech, occupational, physical therapy);
- 2. Educational and vocational support (e.g., special education, skills training);
- 3. Social and community-based initiatives (e.g., support groups, inclusive programs);
- 4. Cultural and religious sensitization (e.g., addressing stigma, promoting acceptance);



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- 5. Economic and policy reforms (e.g., accessible infrastructure, disability-friendly laws):
- 6. Family-centered and empowerment-focused approaches (e.g., training, advocacy);
- 7. Research and data collection (e.g., prevalence needs assessments);
- 8. Collaboration and partnership (e.g., healthcare, education, social services);
- 9. Technology and assistive devices (e.g., communication aids, mobility tools);
- 10. Mental health and well-being support (e.g., counseling, psychotherapy);
- 11. Community engagement and participation (e.g., inclusive events, social activities); and
- 12. Capacity building and training (e.g., healthcare providers, educators, caregivers). This comprehensive approach addresses the complex needs of individuals with developmental disabilities in Nigeria, promoting inclusive support and acceptance.

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2024, Vol. 03, Issue 04, 251-261 DOI: https://doi.org/10.59231/SARI7760 exposure to one or more traumatic experiences.

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