

DISABILITY AND INTEGRATION

GAMBIAN EXPERIENCE

BY

YAHYA MUHAMMED BAH

AND

DR. LAMIN SIDIBEH

SENIOR LECTURER IN PSYCHOLOGY

UNIVERSITY OF THE GAMBIA

M.I.D. ROAD KANIFING

KANIFING MUNICIPALITY

THE GAMBIA - WEST AFRICA

ABSTRACT

More 10% of The Gambian population is persons with disabilities either as result of mental, sensory or physical impairment. Although they are persons with disabilities that do not disqualify hem to be entitled to the same rights and opportunities as all other human beings. Too their lives are handicapped by physical and social barriers in the society which hamper their full participation. Because of this, thousand of them in all parts of the country often face a life that is seemingly segregated and debased.

Everywhere, the ultimate responsibilities of remedying the conditions that led to impairment and for dealing with the consequences of disabilities rest with the government, however, that does not rule out individual contributions or contributions from other institutions.

This study was undertaken to examine some of the factors that cause the poor integration of persons with disabilities into the mainstream of the society. The study concentrated on three wards in the capital city of Banjul.

The major findings of the study revealed that majority of the respondents viewed that the negative attitudes that people have about disabilities led to the poor integration of persons with disabilities. Because these are discriminatory in nature, they result in the creation of disparities between persons with disabilities and the rest. Community Based Rehabilitation (CBR) stood out to be the most appropriate approach for the effective and efficient integration of persons with disabilities. Not only for its human face but its also recognizes disability and integration as a community problems and the solutions are within the community. Full integration was cited as one of the fundamental solution to the problems of persons with disabilities, because it ushers acceptance and subsequently leads to equal rights and equal opportunities for persons with disabilities.

Introduction

Fundamental to any study of disability is the recognition that persons with disabilities are human being like any body, secondly they have disabilities that affect some but not necessarily all their “ability/behavior”. Acknowledging the fact that words are powerful tools in communication, I have in this study decided to use expressions such as persons with disabilities instead of words such as cripples, deaf and dumb, as the latter

confirm the common view that persons with disabilities are different from the rest and thus seem to lack dignity and rights.

People in different parts of the globe, attaches importance to different type of disabilities, simply because some are common in one area than the other. However, local beliefs also affect how people view different disabilities. In places where people belief that fits, for example are the work of devils, thus a child with fits may be feared, teased or kept hidden. But in areas where every body perceives fits just as biological disorder, a child with fits may sometimes participate fully in the daily activities of the society. Both categories of children need medicine but properly by only the mistreated one need rehabilitation. This in the long run will enable persons with disabilities to integrate into the mainstream of the society.

Integration in this study refers to making persons with disabilities part and parcel of the society, thus interacting with all other persons in all form of life activity, for example being brought up in the same family and society, getting educated in the same schools, colleges and universities as the rest, getting vocational training and employment within the setting with the rest.

Also living in the same localities (villages, towns, cities, etc) with others, and equally enjoying the same social facilities and services with the rest. In a nut shell, that is, to live together in the same communities and participate in all activities on equal basis from childhood to old age. Therefore barriers in this context are any form of obstacles that will hinder persons with disabilities live and interact with the rest and thus make them feel rejected and not part of the society.

The barriers to proper integration of persons with disabilities are of various forms and categories, but they are mainly claimed to be all government or influence by attitudes.

These attitudes can be classified into two categories. First the “medical model” which is more found in developed countries, and secondly the “religious model” more prevalent in the developing nations.

The medical model states that persons with disabilities are sick people who need to spend their life to get well, while the religious model sees persons with disabilities as people who are a result of committed sins in the past or due to sins committed by the family or ancestors.

Therefore, this study is aimed to unearth those barriers, which hinder persons with disabilities not to be fully integrated into the society.

The term disability is viewed and defined in different number of ways, by scholars of different orientation, in this study, the World Health Organization's 1980 international classification of impairments, disabilities and handicaps, in which impairment is abnormality of psychological, physiological or anatomical structure or function; disability the restricted ability to perform an activity, and handicapped restriction faced by a person with disability in fulfilling normal roles due to social barrier.

As required under the United Nations Standard Rules on Equalization of Opportunities for persons with disabilities of 1993, Internationally agreed Statistical Concepts and Definition are being gradually developed to better comprehend disability not just as social and economic issues but as well as a health related matter. This recognition has led to the development of the International Classification for Impairment Disability and Handicap [ICIDH] in 1980, by WHO. This classification was developed to facilitate collection, analysis and dissemination of statistical information on the persons with disabilities for policy and program development and evaluation. The ICIDH provides a system for categorizing and coding the long-term consequences of diseases and injuries in terms of impairment, disability and handicap.

The concepts and definitions used in this study conform to the WHO recommendation as stipulated in the ICIDH, 1980. It is, however, important to note that this study collected information on aspects of impairment, disability and handicap, although, the aspects relating to disability were given a wider coverage. Refer to appendix 4 for the definitions adopted in this study.

Statement of the Problem

There are a growing number of people with disabilities today. In most countries, The Gambia being inclusive, at least one person out of ten is a person with some form of disabilities, and at least 25% of the population is negatively affected by the present of disabilities. If families and relatives are included it is about 50%.

Research Question

The objectives of the study it will be guided by the following research questions:

1. Are people aware of disabilities in their community?
2. What are people's attitudes towards disabilities and persons with disabilities?
3. What efforts are made to rehabilitate persons with disabilities and what are the problems encountered in the process?

Target Population

Banjul is a cosmopolitan city and commercial centre where most of the State Departments, Departments, major hospitals and health centres, national rehabilitation centres, and other important government and non-governmental institutions are located. Furthermore, many persons of disabilities are often found begging or moving around with social and economic constraints. Banjul is divided into five constituencies with a population of about **120,084** inhabitants. Due to constraints such as funds and time, the study was limited to three constituencies, five Department of States, two associations of persons with disabilities, and three non-governmental organizations that support persons with disabilities.

METHODOLOGY

Sample and Sampling Technique

In principle there are various sampling techniques, however, due to the nature of the population studied we employed the stratified and random sampling techniques. This was necessary as the aim was to collect information from strata of the society with at least a population of approximately one hundred.

Data Collection

Due to the sensitivity of disability in The Gambia, the most suitable and convenient technique of data collection was the quantitative method based on the use of a questionnaire. This technique in addition to the nature of the

study was chosen for its reliability, practicability and that it hardly exerts much pressure on the respondents, it facilitates the collection of more data, limit bias of interviewers, and answers are in the respondents' own words/choices. Focus group discussions were also held to complete the questionnaire method.

Data Analysis

Data analysis process entailed two stages; initial analysis was codes and tables creation, variables prepared through combining a number of codes, converting codes into variables or developing completely new variables. Both descriptive and inferential statistics were used in the analysis. Descriptive statistics were used to provide a summary of patterns that emerged from the response of the sample. Inferential statistics on the other hand were used to provide an overview of the applicability of the resulting patterns to the population.

Results and Discussion

Hypothesis One

The negative attitudes that people create about disabilities, attribute to poor integration of persons with disabilities into the communities. The purpose of the hypothesis was to investigate whether the poor integration of persons with disabilities is due to the negative attitudes that people have about disabilities.

The main questions posed to test the hypothesis included:

1. What do you think of the attitudes people have towards persons with disabilities?
2. What effects do these attitudes have on persons with disabilities in the society?
3. In the process of integrating persons with disabilities while staying with their families or in their communities, do these attitudes have any role to play?

The basic assumption herein was that the negative attitudes that society has towards disabilities to great extent could result to poor integration of persons with disabilities into the mainstream society.

One often quoted problems that persons with disabilities face in the society are the negative attitudes that people have towards them. Table 1 depicts those responses on what attitudes people have towards persons with disabilities.

Table 1

Type of attitudes	No. of responses	Responses in %
Punishment from God	22	24%
Witch	20	22%
Bad omen	19	21%
Will of God	15	17%
Birth	05	6%
Accident	05	6%
Diseases	04	4%
Sacrifice for wealth	01	1%
Total	91	100%

The study revealed that all the respondents are aware of the different attitudes that people have towards persons with disabilities. The above table revealed that twenty two (24%) of the respondents think the attitudes people have towards persons with disabilities is, it is a punishment from God. Twenty (22%) witch, nineteen (21%) bad omen, fifteen (17%) will of God, five (6%) birth, and accident each, four (4%) disease and last on the list one (1%) is sacrifice for wealth.

However, presently, there has been a change in the attitudes compared with the past. Persons with disabilities are now allowed to mingle freely in the community and are to a degree accorded the rights and benefits that are extended to average citizenry. Many of these people were place in the asylum, secret-rooms where they were treated in a punitive and degrading manner, others were at the mercy of their families or acquaintances, who were obligated by society to provide for them but seldom felt compelled to treat them the same ways that ordinary persons were treated.

Amongst the enlightenments in the society that, the view that disability doesn't mean inability has emerged so that many such people are to be engaged in the productive social and economic activities if given the chance and training. Thus, disability should be seen as the products of ordinary

genetic, psychological, social and economic processes that operate in all societies. With the changes in the connotation associated with disabilities, there has been a minor shift in the focus of responsibilities for education, rehabilitation and/or habilitation of persons with disabilities, which is gradually moving from specialized institutions with professionally trained persons who claimed to have a special expertise which uniquely qualified them to understand and treat the persons with disabilities in families/communities but with close collaboration with experts in social work, rehabilitation, counseling and so on.

Therefore, a notable departure from the traditional pattern has occurred which to some extent is a contribution of many factors for examples, pressure groups, the media, the religion (Islam and Christianity) exposure and so forth, which beyond reasonable doubts have tremendously contributed to public awareness. If these are harmonized and sustained, the future of the persons with disabilities in The Gambia will look brighter.

The study was interested in knowing the effects of these negative attitudes have on the persons with disabilities in the societies and whether they have a role to play in the process of integrating persons with disabilities while staying with families and in the communities.

Table 2 (two) and three (three) illustrate the views of the respondents.

Table 2

Type of attitudes	No. of responses	Responses in %
Rejecting them	24	27%
Hiding them	22	25%
Denial of services	21	24%
Sympathy	06	7%
Tendency of killing them	05	6%
Humiliation	04	5%
Discrimination	03	3%
Reducing them to beggars	02	2%
Maltreatment	01	1%
Total	88	100%

The table indicates that twenty four (27%) respondents agreed that the effects of the negative attitudes that people have towards persons with disabilities in the society will lead to rejection, twenty two (25%) hiding them, twenty one (24%) denial of services, six (7%) sympathizing them, five (6%) wanting to kill them, four (5%) humiliation, three (3%) discrimination, two (2%) reducing them to mere beggars and lastly one (1%) maltreating them.

In addition to the above, these negative attitudes have gone to the point of conceptualizing persons with disabilities as not productive, a burden, not fit for marriage, child bearing, house keeping and worst of all their families being victimized through segregation by the rest of the community. To throw light on the severity of the impacts of these negative attitudes, I recount some of the examples that featured in the focus group discussions with the persons with disabilities or their family members.

For example, being viewed as unproductive both socially and economically has resulted to the unwillingness of some families to invest in the welfare of their children with disabilities. Thus, only few are put in school or vocational training centers where they can learn new skills and even the most fortunate who went to school or learned a trade can hardly find a job because of these negative attitudes to which employers are not an exception. Thus, it is estimated that only 3% of the persons with disabilities are in gainfully employment either in the formal or informal sectors. In the formal sectors 98% does one of the lowest paid jobs such as receptionists, clerks, typist, etc. In the informal sectors, their participation is equally minimal because of being seen not productive or cannot provide the requested collateral. Worst of all is the lack of confidence that people have on them even if they have acquired the technical know-how as depicted by the below experience of a carpenter with disabilities.

“I am a carpenter with physical disabilities. One Saturday morning when I was brewing china-tea in my house, I heard somebody calling me. This lady wanted me to go and repair her sofa. After I had repaired her sofa, she was extremely happy with my job. This lady, in turn told some of her friends about my talents. A certain gentleman came to see me about the condition of his chair. I told him I can do the job and I was ready for it, but he could not believe that a person with disability like me can do such a difficult job. My legs are weak and thin. I use a walking-stick without which I can hardly move an inch. Because of all these, this man gave the piece of work

reluctantly. But after successfully completing the job, the man could not believe his eyes. It was nicely done; the loose springs were fixed so well but will all that the man could not just be convinced. To be convinced he jumped into it but it never got broke. Eventually he was convinced with my job. This then means the so called able-body must not judge us by our look.”

These negative attitudes have made it common for newly born babies to be put to death or thrown and mothers who failed to comply threatened with severe sanctions. For example, people might not want to get any wife from the family neither will they be allowed to marry anybody.

In summary, the conclusion is persons with disabilities are less welcome in the society in comparison to the able-bodied persons for reasons influenced by both culture and societal attitudes towards persons with disabilities.

“prediction of helpless, revulsion of the abnormal, inadequacy at production and at rearing, their feelings of bereavement at the loss of the normal child they expected with almost infinite potentialities, anger, grief and adjustment, which takes time, feeling of shock, guilty and embarrassment which is social reaction to what parents think others are feeling and so on,” The Handicapped Community (1996:127).

Table No.3

Responses	No. of respondents	Percent - %
Yes	45	88%
No	00	00%
N/A	06	12%
Total	51	100%

From the above table out of a total number of 55 respondents, forty five (88%) regarded attitudes as very important in the process of integrating persons with disabilities into the mainstream society they are staying with families because depending on the type they can either slow or quicken the process, while nobody disagreed, six (12%) neither disagreed nor agreed. Therefore the results have clearly demonstrated the importance people’s attitudes in the process of integrating persons with disabilities into the mainstream society. But unfortunately, these convictions have not clearly translated into action even amongst the elites and custodian of tradition and culture. Thus, it is not a surprise that most developing nations don’t a clear set of explicit policies or laws related to the protection and promotion of the

rights of persons with disabilities and even where they do exist they are symbolic, which is a reflection of the general system of belief or a statement of intent. Therefore, politicians or legislators are no different from the others and, if the general public view is that persons with disabilities are “useless” and will remain so, whatever is done; then naturally this belief will be reflected in the policies. For example, accessible construction cannot be left to the good will of landlords and builders but there must be building codes and standards that are enforceable by law, if persons with disabilities are to be fully mainstreamed and actively participate on equal terms in the society. This means we need accessible environment that is built for accessibility to all, that is to say housing, transportation, work places, public buildings, schools, shops; businesses must be accessible to all which might be a dream without any legislative support.

In follow up question, the results revealed if the negative attitudes must be changed the most appropriate strategy is awareness raising as portrayed in table 4 below.

Table 4

Type of effective methods of attitudinal change	No. of respondents	Percentage %
Awareness raising	39	82%
acceptance	05	11%
independence	03	6%
Giving moral support	01	2%
Total	48	100%

The above table illustrates that thirty nine respondents (82%) suggested that the negative attitudes towards persons with disabilities can be changed for better through awareness raising campaign. Whereas five respondents (11%) suggested acceptance as a good strategy in changing these negative attitudes, three respondents (6%) ascribed to independence, and one (2%) giving moral support.

To conclude, the findings revealed by the fifty one respondents confirmed the hypothesis which holds that negative attitudes that society has towards disabilities and persons with disabilities attribute to the poor integration of persons with disabilities, which is anticipated once addressed will smoothen

the successfully mainstreaming persons with disabilities for productive living.

Hypothesis Two

It was hypothesized that Community Based Rehabilitation (CBR) could be the best strategy for the proper integration of persons with disabilities into the mainstream of society.

The purpose of this hypothesis was to investigate the most appropriate means for the successful integration of persons with disabilities.

The hypothesis was anchored on the assumption that with the adaptation and implementation of Community Based Rehabilitation, there is a great tendency of achieving the long sought proper integration of persons with disabilities as opposed to the institutional model.

In testing this hypothesis, the main issues raised included:

1. What supportive services do you think persons with disabilities need in the society?
2. Whom do you think should provide these services to the persons with disabilities?
3. In view of the problems persons with disabilities do encounter what are the most appropriate strategies in assisting them for proper integration?

The below mentioned table summarized the respondents' answers as regards to what services persons with disabilities in the society need for proper mainstreaming.

Table 5

Type of supportive services needed by persons with disabilities	No. of responses	Responses in %
Education & training	45	24%
Guidance & Counseling	40	21%
Medical services	36	19%
Financial & material support	32	17%
Taken care of	21	12%

Access to facilities & services	06	4%
employment	04	3%
Technical aids	02	2%
Legislative support	01	1%
Total	187	100%

The above table as can be seen depicts that forty five (24%) of the respondents subscribed to the view that persons with disabilities need education and training for any effective integration into the mainstream society. With quality, relevant education and training, it is believed that the chances for economic independence (self-reliance) are sharpened through employment opportunities both in the public and private sectors.

Thus, concurring with: “education is paramount for any meaningful integration of persons with disabilities,” Dr. Malembe J. (1992).

This is truly important in a country like The Gambia where due to limited natural resources, most Gambians see formal employment as the main source of income generation. Denial of education, therefore, means denial to job opportunities and increase in dependence, also strengthening the held negative attitudes about persons with disabilities. This is especially true in times of high unemployment which characterized most developing nations.

Furthermore, the table also indicated that forty (21%) of the respondents concurred guidance and counseling as a key supportive services needed by persons with disabilities. This is quite significant since it is a vehicle for empowerment and attitudinal change to promote personal well-being, productivity and self expression for sound footing in their communities.

Next, followed by medical services thirty six (19%), financial and material support thirty two (17%), taken care of twelve (21%), accessing to facilities and services six (4%), employment four (3%) and legislative support one (2%).

Employment though four (3%) was mentioned as one of the most disturbing problems faced by persons with disabilities in the society which contributed to their becoming consumers rather providers. Thus, viewing them as a burden to the society reinforcing the negative attitudes held towards them.

In addition to knowing the services, the study was also interested in knowing who should provide these services. Below is a table of the responses in their hierarchical order.

Table 6

categories of service providers	No. of responses	Responses in %
Government institutions	45	27%
Non-governmental organizations -NGOs	40	24%
Individuals members	38	23%
Families & communities	38	23%
PWD'S Organizations	05	3%
Total	166	100%

The above table shows that forty five (27%) of the respondents adhered to government to be the main provider of these crucial supportive services needed by persons with disabilities for any efficient and effective integration of persons with disabilities. But interestingly enough, only three special educational institutions exist to separately cater for the visually impaired, deaf and hard of hearing children and children with learning disabilities. These institutions like most institutions due to both financial and human resources can only cater for few children in the urban and sub-urban areas.

This then to some extent concurred with the studying findings citing lack of access to quality, relevant education and training as a fundamental problem encountered by the persons with disabilities, and it is the sole duty of the government to provide it.

The study also captured a sizeable of respondents forty (24%) subscribing to NGOs to be a provider of the supportive services needed by the persons with disabilities. This opinion is of significant importance in the strife to making education accessible to persons with disabilities in view of the numerous problems encountered by the government, the should-be sole provider.

Individuals, families and communities as separate institutions attracted thirty eight (23%) responses each, while the organizations of persons with disabilities captured five (3%).

The study has, therefore, distinctly revealed that a family is important in the life of persons with disabilities like any other persons in the community. Thus, persons with disabilities should live with their families as long as this does not impose any unmanageable burden on them or him/her and that the persons with disabilities and the family should receive full support in the form of financial and technical assistance when necessary. Persons with disabilities belong to the families and therefore, they are part of the family and like any other person need family and community in which they live or belong.

The findings further pointed out that Community Based Rehabilitation (CBR) as being advantageous for it provides more room for acceptance, wider resources to be tapped, less expense on the sponsors, strengthening the kinship (family-ties), economic independence and so on.

In the focus group discussions, the commitment of the government and leadership, level of the economy and priority given in terms of development, willing of the community to give part of their resources to the Community Based Rehabilitation (CBR) programmes, high cost in health and education which cannot be met by the families of the persons with disabilities, the attitudes of the persons with disabilities as fundamental issues that need to be given attention if mainstreaming is not to be a mere wish.

Therefore, these results confirmed the hypothesis that Community Based Rehabilitation (CBR) could be an answer to proper integration of persons with disabilities into the Gambian's society.

Hypothesis Three

It was hypothesized that

“The full integration of persons with disabilities may provide equal opportunities in all aspect of life.”

The purpose of this hypothesis was to investigate the level of the community awareness as regards to the importance of the full integration of persons with disabilities in relation to their fundamental needs.

The hypothesis was based on the assumption that with full integration of the persons with disabilities, the chances of according them equal rights and opportunities like the rest would be heightened.

In testing this hypothesis, the main issues raised included:

1. Where do you think persons with disabilities will benefit most?
2. Why do you think persons with disabilities should be integrated into the society?
3. What are the effects on the persons with disabilities when they are seen as part and parcel of the society?
4. With your experience how can the process of integration be maintained and sustained?

The below table summarized the responses to where respondents think persons with disabilities will benefit most.

Table 7

type of sources of benefits	No. of responses	Responses in %
Staying with families/communities	31	44%
Depending on themselves	28	39%
Staying in institutions	12	17%
Total	71	100%

The table as can be seen revealed that thirty one (44%) respondents subscribed to the view that persons with disabilities benefit most by staying with their families/communities.

This is very essential particularly should disabilities be seen as the product of ordinary genetic, psychological, social and economic processes that operate in all societies but in most societies it is the opposite.

Thus, one of the major problems of persons with disabilities is the prejudice and discrimination which has virtually contributed to the needless human suffering they are subjected to daily. Therefore, major amongst the struggle of persons with disabilities is acceptance which ultimately will go a long way in the dissolution of the social and physical barriers which are product of the negative attitudes that society holds towards persons with disabilities.

The family and community being principal unit of social economy and political activities can't be divorced from the whole issue.

As pointed out, one of the major problems of persons with disabilities is acceptance for with it, even the medical problems associated with disabilities will be catered for by good policies which unfortunately lacks more especially in most developing nations. Or if any, they are just symbolic due to the negative attitudes that society holds towards persons with disabilities which unfortunately have found its way in the minds of the policy makers. Therefore, priority is accorded based on expectations. The fulfillment of these expectations to some extents rest on one's physical, intellectual, psychological, etc fitness of the community to care and love its citizenry as depicted below.

“The love one has for his/her child is the richest gift one can ever give to a child. Nothing in his/her life, not even material goods, will ever be as important, or exercise as great influence as this. It is firmly established not as a sentiment but as a fact that one vital essential for the well-being of a child is this warm continuous feeling of love and being wanted by his/her mother, and the relation of understanding which grows up between mother and child. Just as flower needs sunshine in order to grow to full beauty, so children need love,” Winifred D. K, (1963:19).

Therefore, one's attitude towards a child and one's love for him/her is paramount as love is claimed to be the first important thing that a child needs from his/her parents/caregivers, equally important to understand the child's needs which is only possible through acceptance is greatly necessary in order that love may be guided by wisdom.

Next in the hierarchy of benefits is by depending on themselves which attracted twenty eight (39%) responses. This is of vital importance because by depending on themselves, they are not longer seen as a burden to the society but a partner in development. Thus, in this process appreciation is heighten and love is paved and subsequently the elimination of social and physical barriers begins. Twelve (17%) respondents subscribed to staying in institutions which by comparison shows how un-ideal institutionalization is vis-à-vis profitability.

The study was also interested in knowing how the process of integration can be maintained and sustained. The main question was, ‘with your experience

how can the process of integration be maintained and sustained?’ This was purposefully done to seek public opinion as to which institution is best suitable to be charged with the coordination and sustenance of disability and integration programmes. The below table in summary depict the responses of the respondents.

Table 8

Means of maintaining & sustaining integration programs	No. of responses	Responses in %
Community support	42	39%
Government funding	31	29%
Donor support	26	24%
Individual support	04	4%
Organization of PWD support	02	2%
Awareness raising	01	1%
Employment	01	1%
Total	107	100%

The table revealed forty two (39%) respondents concurred with community as the most appropriate mean to maintain and sustain the programs for the integration of persons with disabilities. This to some extents confirms the emerging concept in the social science and in particular in the social service delivery system “the age of popular participation and participatory decisions.” This philosophy holds it that the success of any programme to a degree, depends on the participation of the concerned community. Thus, not imposition – “top-down” chain of command but “bottom-up” equality in decision making. Therefore, people are not asked to participate only in ways that have already been calculated from the above but allowed to identify needs, locate local resources and maximize them with limited external help.

Next, is followed by government which attracted thirty one (29%) response. Government funding is virtually important in the maintenance and sustenance of the integration of persons with disabilities hence integration alongside its packages is expensive and calls a lot even outside the monetary aspect. For example, to prepare and disseminate information relevant to the issue, to create, through legislation, the necessary legal bases and measure to achieve the objectives, to ensure opportunities by eliminating barriers to full

participation, to provide rehabilitation services by giving social, nutritional, medical, educational and vocational assistance and technical aids, to facilitate research on matters related to it, just to mention a few.

In addition to the expenses highlighted, their opinions have also concurred with the recommendation of the World Programme of Action concerning persons with disabilities (1981). At the level of national action, government should bear the ultimate responsibilities of implementing the world programme of action although local authorities and other organizations in the public and private individual will be involved. The world programme of action aim to promote effective measures for prevention of disabilities and rehabilitation, and these programmes should be an integral component of the national policy for socio-economic development.

On the hierarchy again is the ideal of donor support which managed to attract twenty six (24%) responses. The donor support, the findings revealed is quite essential especially in the developing nations because of the existing situations and their resources constraint, level of socio-economic development, and their capacity to formulate and implement the action envisage in the package of integration, maintenance and sustenance.

Four (4%) went to organizations of persons with disabilities and private individuals each, which shows the need for those institutions' support in the strife.

Critically looking at the statistics, the findings have made interesting revelations especially with regards to the last three supports which seem to be one of the most essential ingredients for any successful integration of persons with disabilities but the less quoted.

Thus, it appears most people are not familiar with the key elements in disability and integration. For example, legislative support without which hardly any programme of this nature can attain its goals. Therefore, the findings suggest awareness gap.

The study further revealed any attempt to maintain and sustain full integration means paving the way to acceptance and with acceptance the disappearance of negative attitudes. Thus, opening the doors for economic, social and political empowerment, which ushers self-reliance and self-respect?

In light of the above, the findings confirmed the hypothesis that the full integration of persons with disabilities can accord persons with disabilities equal rights and equal opportunities to live a productive life like the rest.

Summary and Conclusion

Disability like any other social problem in The Gambia has been accorded some considerable attention and concerns in the recent years from different walks of life, since it has numerous negative impacts not only on the socio-economic and political development of persons with disabilities and their families but also on the nation at large.

The study showed that the negative attitudes that people have towards persons with disabilities has substantially affected the integration of persons with disabilities. For with such attitudes, they feel unwanted, unproductive and isolated. This results to the creation of that wider gap between them and the rest of the society. Not mentioning the psycho-social and physical torture some are faced with.

Furthermore, the findings revealed with CBR, successful integration is feasible. For it recognizes disabilities as a community problem and the solution lies within the community as opposed to the institutional approach. Therefore, acknowledging the significance of the participatory approach. The lack of full integration of persons with disabilities has been highlighted as one of the main causation of their marginalization.

Therefore, in conclusion the findings concurred with the widely held belief “your attitudes towards persons with disabilities may be our biggest handicap and you too.”

Recommendations

Disability needs to be conceptualized as a process. That is it entails how the persons with disabilities encounter problems in their overall lives. Impairment (damages) results to disabilities (loss of function). Disabilities results to handicap (loss of role); until this unpleasant and disheartening process is minimized or eradicated by eliminating or reducing poverty and the risk of diseases, for example, poliomyelitis and leprosy, contaminated water supply, sanitation and nutrition standard are improved, the home and

work environment, compromising primary care especially material child care, it will appear impossible to map out effective programs. These challenging tasks, therefore, calls for the collaboration of individuals with disabilities, the families, the community, united nations system, the non-government organizations community, and the government.

In light of the research findings, we recommend as follows:

To the families:

- To change their negative attitudes towards persons with disabilities.
- To see the problems of disabilities as a community problem and the solutions are within the community itself.
- To recognize persons with disabilities and their families as normal and capable to contribute to societal development.

To the families of persons with disabilities

- To recognize their members with disabilities as equal to those without.
- To form supportive associations, be actively involved in the search for advice, information, support, and be ever ready for any call for integration.

To persons with disabilities

- To accept their disabilities and thereafter start thinking positively about them.
- To form different organizations through which they can influence government policies and decision-making process that either directly or indirectly affect their life.
- To stop portraying themselves as inferior and need to be sympathized with.
- To recognize the need for collaboration, for example, with NGOs, government, UN system, etc for in isolation they can't succeed but the collaboration must not be at the expense of their autonomy.

To the government

- To institute vibrant specialized committees including persons with disabilities to critically examine the needs and aspirations of persons with disabilities be it in employment, education, recreation, rehabilitation, etc.

- To create through legislations the necessary legal framework and authorities for measures to achieve such rights as the rights to security and protection from inhuman and degrading treatments.
- To ensure persons with disabilities are accorded equal rights and equal opportunities for productive and gainful employment in the open labor market.
- To ensure special education is an integral part of the national education policy.
- To take measures to remove all obstacles that hinders the active participation of persons with disabilities in nation building.
- To come up with multi-disciplinary approach that is within the general system which facilitates early dictation, assessment and treatment of impairment,
- To ensure rehabilitation programmes are decentralized and cater for all type of disabilities.

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