

The Deprivation of Human Rights Experienced African Children with Disabilities

Rebecca Markham & Anna Wiltshire

Introduction

The International Classification of Functioning, Disability and Health defines disability as 'an umbrella term for impairments, activity limitations, and participation restrictions. Disability is the interaction between individuals with a health condition... and personal and environmental factors'.⁽¹⁾ The World Health Organization (WHO) report that an estimated 15-20% of the global population are disabled.⁽²⁾

Disabled children are amongst the most socially excluded and vulnerable in society. The World Bank estimates that, in developing countries, 20% of people who live in poverty are disabled.⁽³⁾ This means that those with the least have to bear the greatest burden.

Disabled children in Africa face a multitude of difficulties every day from the physical to the psychological. Cultural beliefs and misconceptions are often used to justify the discrimination and violence faced by these children. This effect continues throughout their lives and has a negative impact on both the individual and the extended family. **All children, irrespective of their disability, should be able to enjoy their human rights without discrimination.**

This poster explores why disabled children in Africa are subject to violations of their human rights, and suggests some ways of addressing them.

Article 14: Prohibition of Discrimination

In Africa, disabled children and their families are stigmatised, leading to experiences of **shame, exclusion, social isolation, psychological and emotional neglect.**^(7,8)

The causes of disability are often associated with religious connotations and firmly held traditional beliefs.^(9,10) These include:

- A **punishment** from God
- Result of **sins** committed by a family member
- The child's **fate** or **destiny**
- An **act by the Devil**
- A **curse of witchcraft**
- Is **contagious**

All of these beliefs contribute to the way that society views and behaves towards children with disabilities and their families.⁽¹⁰⁾ In certain cases, they are subject to low societal status and social exclusion, which creates feelings of fear, shame and rejection (DIFIF 2000). To prevent this, parents have been known to take their child to the "medicine man" to be healed or, in extreme circumstances, **killed in community ceremonies.**^(9,10)



Figure 1: Children accused of witchcraft protesting in Africa.⁽¹²⁾

Moving Forward

To overcome the inequalities faced by African children with disabilities, an understanding of their distribution and causes is needed. Children with disabilities are often invisible in statistics. There is an urgent need to research the effects of disabilities on children in Africa.^(13, 14) By identifying the barriers that children with disabilities in each country struggle with, policies can be developed and evaluated.

In countries with limited resources an effective way of tackling these issues will be to integrate specialised disability services into pre-existing universal services.⁽¹⁹⁾ This can be applied across education, health and social protection sectors, using the triple track approach:⁽¹⁹⁾

1. Equitable access and inclusion of children with disabilities in child-centered, family, and community focused programs
2. Programs and services designed to target the specific needs of children with disabilities.
3. Incorporating gender sensitive as well as age and stage-appropriate tailored services

Using this approach, programmes can be designed to accommodate the needs of children across abilities, gender, age and other cultural factors.⁽¹⁹⁾

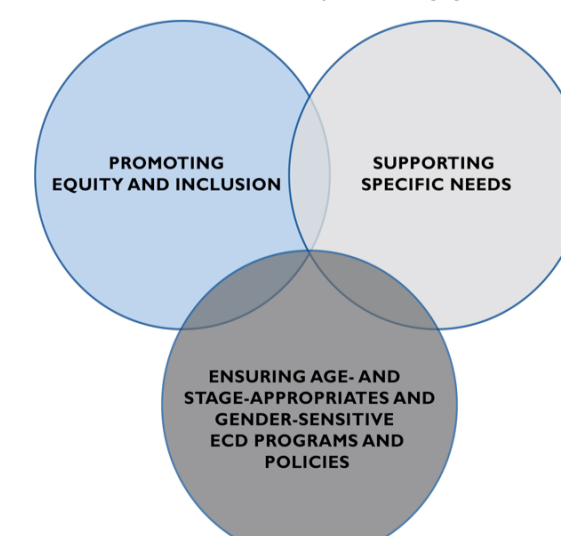


Figure 4: The Triple Track Approach⁽¹⁹⁾

Article 3: Prohibition of Torture

A systematic review conducted in 2012, revealed evidence that disabled children are **3 to 4 times more likely** to be **subjected to violence** in comparison to children without disabilities.^(4,5) Globally, 25% of disabled persons have been victims of violence. Unfortunately the situation is worse in less developed countries where **70% of children with disabilities have been abused.**⁽⁵⁾

Why are children with disabilities at risk of violence?⁽⁴⁻⁶⁾

- Heightened vulnerability as they are less able to defend themselves or seek help
- Societal stigma and discrimination
- Negative cultural beliefs associated with disability that brands them as unworthy of dignity and respect
- Lack of financial and medical aid, inadequate and inaccessible state health facilities
- Deficient community understanding about how to create an inclusive society



Figure 2:

Article 26 : Right to Education

The aim of the second Millennium Development Goal (MDG) was to ensure that **all children** would complete a full course of primary schooling by 2015.⁽¹³⁾ Unfortunately, for children with disabilities in Africa this goal **will not** be achieved. This is despite the efforts of the United Nations who state that children with disabilities have a right to be included in the general education system and receive individual support.^(13,14)

In Africa **fewer than 10% of disabled children attend school** because they require extra time and resources that are often not available.⁽¹⁵⁾

Barriers African children with disabilities face accessing education:⁽¹⁴⁾

- Inflexible curriculum to meet the needs of all learners and abilities
- Inadequate training and support for teachers
- Physical barriers accessing educational facilities
- Labelling based on disability, resulting in stigmatisation, peer rejection, lower self-esteem, lower expectations, and limited opportunities
- Beliefs that suffering from a disability is a punishment and that children with disabilities should be barred from accessing an education
- Fear of violence, bullying and abuse that prevent attendance or engagement

As well as being a social determinant of health, education increases prospects for future employment and economic stability.⁽¹⁴⁾ Therefore receiving an education is of utmost importance and without it children with disabilities will be **deprived of opportunities.**

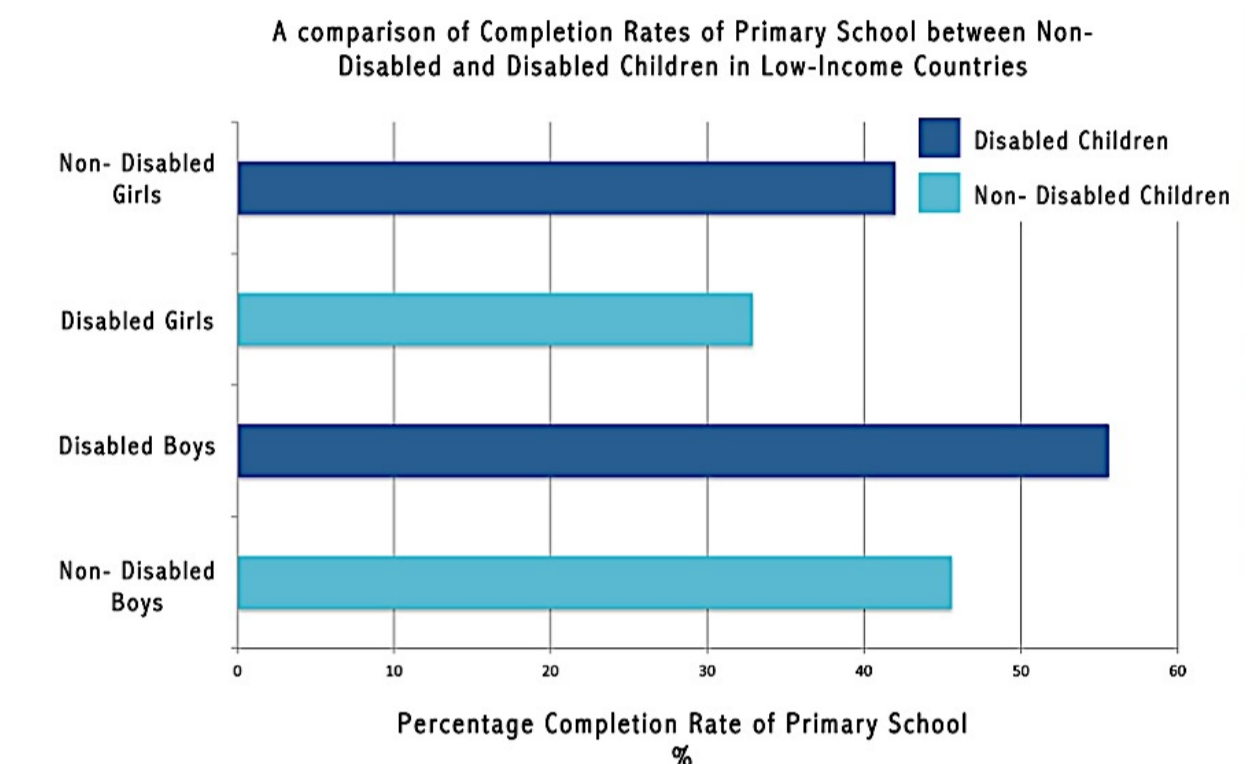


Figure 3: Graph comparing Educational Outcomes of Children with or without Disabilities in Low-Income Countries⁽¹⁴⁾

The Right to Health

Health is **not a human right** under the Universal Declaration of Human Rights. However, the WHO regards the ability to achieve the highest attainable standard of health as a fundamental human right for all.⁽¹⁶⁾

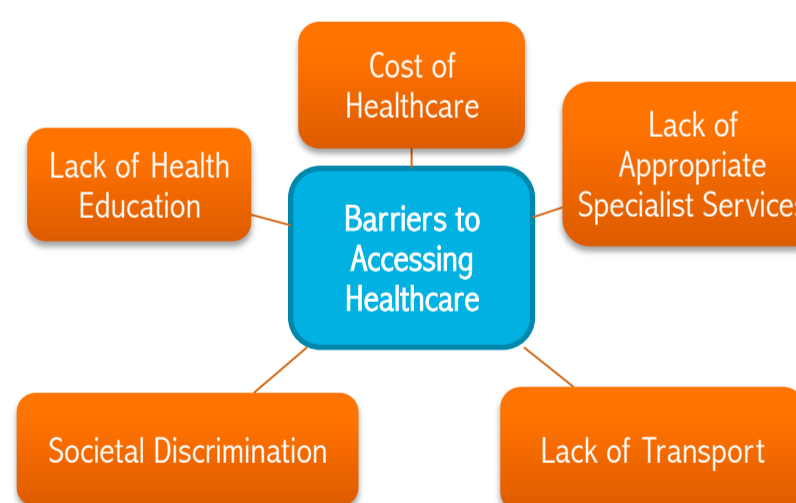


Figure 3: Barriers Children with Disabilities in Africa Face Accessing Healthcare^(14,17,18)

There are many obstacles preventing disabled children in Africa accessing healthcare, as illustrated by figure 2.^(14,17,18) Being unable to access healthcare results in health inequalities. These include exacerbation of pre-existing disabilities as well as increased susceptibility to new illnesses in an already vulnerable individual.⁽¹⁸⁾ Persons with disabilities are **3.5 times more likely to suffer from illness and injuries** such as tuberculosis, diarrhoea, hypertension and HIV/AIDS. It is of utmost importance that they are able to access health care facilities without barriers.⁽¹⁷⁾

A study in South Africa concluded that persons without disabilities were healthier (90%) compared to people with a disability (68.3%). Those with physical disabilities and sight impairment were found to be most vulnerable to injuries and illnesses. These factors, combined with a low level of information provided at health facilities, will continue to have a detrimental effect on their health.⁽¹⁷⁾

Conclusions

Children with disabilities in Africa face inequalities in many spheres of life and are often deprived of their human rights. This has been illustrated by exploring the themes of discrimination, violence and lack of access to education and healthcare. Promoting education and health as human rights and encouraging a more inclusive society are the main ways to reduce these inequalities. Action must be taken to ensure that these human rights are fulfilled and that children with disabilities are not left behind.

References

1. World Health Organization. WHO | Disabilities: World Health Organization, 2013 [updated 2013-11-29 15:26:20]. Available from: www.who.int/topicdisabilities/
2. WHO | World report on disability. World Health Organization, 2014 2014-10-16 17:07:16. Report No.
3. World Bank. Factbook on Persons with Disabilities 2007 [updated 2007]. Available from: <http://www.un.org/disabilities/default.asp?#18>
4. James S, Sells PA, Wood S, Hughes K, McKay E, Eckley J, Bates G, Wilson C, Shalunpaire T, O'Brien A. Prevalence and risk of violence against children with disabilities: a systematic review and meta-analysis of observational studies. *Lancet*. 2012;380(9845):899-907. doi: 10.1016/S0140-6736(12)60692-8.
5. The African Child Policy Forum. Breaking the silence: violence against children with disabilities. Addis Ababa: The African Child Policy Forum; 2010.
6. Karen M Davies, Nambou Kengebe, J., and Dpuk Naker. Violence against primary school children with disabilities in Uganda: a cross-sectional study. *BMC Public Health*. 2014; 14(1): 1017.
7. Sisona M, Ngonzi A. (2008). Abuse of Children in West Africa. *Implications for Social Work Education and Practice* *British Journal of Social Work*, pp. 1218-1234.
8. Luanga Nkate C. (2003). *Orphan Poverty and Disability in Uganda*. Paper presented at CPRE Conference, 7-9 April 2003, Manchester.
9. Cox S. (2013). *Close the circle: A research initiative by Plan International into the rights of children with disabilities to education and protection in West Africa*. Darfur: Plan West Africa.
10. Reynolds S. (2010). Disability culture in West Africa: Qualitative research indicating barriers and progress in Central region of Ghana. *Occupational Therapy International*.
11. Harrop, EW. (2012) Ties that bind: African witchcraft and contemporary slavery. *The Telegraph*. 'Child witches' of Nigeria seek refuge. www.telegraph.co.uk/news/worldnews/africaandindianoceania/1017882/Child-witches-of-Nigeria-seek-refuge.html [Accessed 25th October 2014].
12. No Child Forgotten: Education and Inequality 2015. 2015.
13. World Health Organization (2011). *World Disability Report*, p. 206
14. Sightsavers. *Making Inclusive Education a Reality*. 2011, p.2.
15. WHO Health and Human Rights. www.who.int/hhr [Accessed 2011/11/18].
16. Swames, A, Rogstad, R, & Saha, L. 2014. Understanding Issues of People Living With Disabilities in South Africa. *Journal of Asian and African Studies*.
17. Schroeder, M, Eide, A.H, Aiken, M, Redickson, M, & Hansen, M. 2013. Inclusion of vulnerable groups in health policies: Regional policies on health priorities in Africa. *African Journal of Disability* 1(1), Ar. #40, 9 pages. <http://dx.doi.org/10.4102/ajod.v1i1.40>
18. ADESTAR One: Including Orphans and Vulnerable Children with Disabilities in Early Childhood Development Programs. Technical Brief, 2014, p.40.
19. Reynolds, S. (2010). Disability culture in West Africa: Qualitative research indicating barriers and progress in Central region of Ghana. *Occupational Therapy International*.

Contact Information
Rebecca Markham: rm12787@my.bristol.ac.uk
Anna Wiltshire: annawiltshire@hotmail.co.uk

