

Self-Advocacy: A Study of Access to Banking Halls and Services by Persons with Disabilities in Southwest Nigeria

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Abstract

The Centre for Citizens with Disabilities of Nigeria executes self-advocacy initiatives to address issues related to social inclusiveness for persons with disabilities. The Centre executed a self-advocacy study regarding access to banking halls and services by persons with disabilities in Southwest Nigeria. The outcomes of the study demonstrates a significant need for structural accessibility, to respect consumers with disabilities' desires to receive services rendered in banking halls.

Keywords: Self-Advocacy, Persons with Disabilities, Accessibility

Introduction

As a general term, "disability" is defined as temporary or permanent and is usually related to a mental or physical condition, or is the outcome of an illness. As the result of a disability, a person experiences a reduction in the ability to function, and the inability to execute various activities that others can perform (Barker, 2003). It has been proposed by World Health Organization (WHO) and World Bank (2011a), in the *World Report on Disability*, that more than a billion individuals are persons with disabilities. Per estimation, approximately 15% of any population has some form of disability, with 80% of people with disabilities residing in developing countries (World Health Organization, 2011a; United Nations Enable, 2009). Despite the lack of rigorous, validated statistical data, which confirms or refutes this projection, it has been estimated that at least 20% of the Nigerian population (19 million) lives with disabilities (Solarsh & Hofman, 2006; Lang & Upah, 2008).

Though utilized interchangeably, within the context of the social model, the terms "disability" "impairment" and "handicap" are defined differently. Barker (2003) notes that "impairment" refers to "a loss or abnormality in psychological, physiological or anatomical structure or function" (page 220). The term "disability" is the outcome of a restriction in the ability to execute normal life activities, as a result of impairment. The use of the term "handicap" moves beyond the individual or micro level. From a macro perspective, the term "handicap" focuses on the barriers that emerge from the interaction between the disability and the environment (Morales, Sheafor and Scott, 2012). In line with the macro level perspective, the WHO Health Topics: Disabilities (2013) discussion defines the term "disability" beyond the medical model. Drawn from the WHO Disability: Report by the Secretariat, A66/12 (2013), a disability is recognized as a multifaceted phenomenon, which "reflects the interaction between features of a person's body and features of the society in which he or she lives" (para 1). From a social model, the *International Classification of Functioning* notes disability and function as a forceful relationship between health conditions, and the outcome of contextual and environmental factors, which result in limited activity and restrictive participation (Solarsh and Hofman, 2006).

Persons with disabilities are often underestimated in their capabilities to satisfy meaningful social roles. Such underestimations are undergirded by stigma, negative generalizations, stereotyping and degradation (Miley, O'Melia and Dubois, 2009). Members of the community, who practice such prejudiced behaviors, promote unequal or unjust treatment of individuals, due to observed and/or assumed physical or mental disabilities (Barker, 2003). This behavior is either referred to as "handicapism," the projection of prejudice and discrimination towards individuals who have forms of disabilities or "abelism," which establishes preferential status to those of society who are without forms of disabilities. Abelism is grounded in the belief that people with disabilities are out of the ordinary, and unable to perform at the level of individuals deemed free of disabilities (Dubois and Miley, 2014). These beliefs are the foundation of stigmatization and degradation, supporting social marginalization of persons with disabilities, within society (Miley, O'Melia and Dubois, 2009).

Suppes and Wells' (2003) discussion of the disability movement noted that societal prejudice,

discrimination and stereotypical media images have been overtly identified as major barriers for individuals with disabilities: However, this alone is not the only issue. Disabilities result from outcomes due to the day to day interaction between persons and environments. Therefore, society's lack of willingness to provide accommodations, and to equalize situations to address environmental and organizational barriers, is the resounding issue. Barriers faced by people with disabilities are prevalent, impacting access to health, education, employment, transportation, economics, architectural designs, and technology and communication methods, in addition to legal rights. The lack of accommodations and the existence of disabling environments reflect lack of knowledge, prejudiced beliefs and discriminatory behavior. Such beliefs and behaviors lead to and support the exclusion of people with disabilities, from critical research, as well as program and policy development. This form of exclusion negatively impacts the creation of available, accessible and accountable services critical to the existence and function of people with disabilities, as successful members of society. Subsequently, to overcome such difficulties faced by people with disabilities, as well as to negate and remove environmental, social and economic barriers, demands interventions driven by empowerment, self-determination and advocacy (Barker, 2003; Kosciulek, 1999; Mji, Maclachlan, Melling-Williams, Gcaza, 2009; Miley, O'Malia and Dubois, 2009; Suppes and Wells, 2003; WHO and World Bank, 2011b; WHO Health Topics, 2013).

Empowerment, Self-Determination and Advocacy

Barker (2003) defines the empowerment process as assisting "individuals, families, groups, and other communities increase their personal, interpersonal, socioeconomic, and political strength and develop influence toward improving their circumstances" (p. 142). In the arena of social work practice, the empowerment process is drawn on a strengths perspective, which requires one to seek out, recognize and value the strengths of client systems, with an appreciation that skills and traits developed in adversity point to resiliency.

The acknowledgment and honoring of client systems' strengths undergirds empowerment (Suppes and Wells, 2003). From the perspective of people with disabilities and rehabilitation services, John Kosciulek (1999), defined empowerment as "the process by which people who have been rendered powerless or marginalized develop the skills to take control of their lives and their environment (p. 197).

From an ecosystem perspective the empowerment process is expressed differently per client system, due to individual and external factors. Morales and Sheafor (2012) noted the following:

The ecosystem framework [in reference to people with disabilities] provides the opportunity for a broader conceptualization of disability, recognizing the history of discrimination against people with disabilities, the structural impact of government policies, the cultural assumptions about what people with disabilities can and cannot do, and the impact of disability on the family, as well as the individual psychology and biological specifics of the disorder, [which] all play a part in determining both problems and solutions (p.331).

Miley, O'Melia and Dubois (2013) discuss the concept of empowerment as a complex three dimensional multisystem process. The three dimensions are personal, interpersonal and socio-political. Personal empowerment encompasses an individual's impression of competence, mastery, strength and ability to affect change. Interpersonal empowerment is defined by an individual's ability to influence others, through successful interaction, as well as how others look upon the individual. Sources that undergird interpersonal power are social status, driven by race, gender and class, and the acquisition of additional skills and new positions, rank or standing. The socio-political empowerment process encompasses an individual's relationships to social and political structures. Interfacing with social and political structures, enhances an individual's access to and control of resources. Access to resources and opportunities enhances personal strengths and emphasizes interpersonal competence, which impact self-determination, and self-advocacy capabilities

Self-determination and self-advocacy are core elements of empowerment, and critical to the process. Defined as "determination of one's own fate or course of action without compulsion; free will" (Pickett, 2010, p.460), self-determination acknowledges individuals' rights and needs to be free to make personal choices and decisions (Barker, 2003). Suppes and Wells (2003) noted that as with as all other people, individuals with disabilities have the desire for as much control over their lives as possible. With further discussion of the empowerment and self-help, Segal, Silverman and Tomkin (1993), as cited in Suppes and Wells (2003) addressed the fact that even individuals with severe disabilities have "potential, for self-determination, provided they have access to support services, barrier-free environment, and appropriate information and skills" (p. 527).

Self-advocacy, an extension of self-determination, is incorporated and encouraged by the empowerment model. Though it was noted that self-advocacy does not have a consensus definition, Test, Fowler, Wood, Brewer, and Eddy's (2005) executed a framework for this framework. Based on the definitions found in the literature and stakeholders' input, this framework encompassed the following four components: (1) *Knowledge of Self* : knowing one's own interests, preferences, strengths, needs, learning style, and attributes of one's disability; (2) *Knowledge of Rights*: knowing one's rights as a citizen, as an individual with a disability; (3)

Communication: subcomponents such as negotiation, persuasion, body language, and listening skills; (4) *Leadership*: learning group roles, dynamics and function; developing an understanding of one's role within the culture of individuals with disabilities, and standing up for the rights of a group (Test, Fowler, Wood, Brewer, and Eddy (2005).

Background

It has been assessed that on the average, persons with disabilities as a group are more likely to endure adverse socioeconomic outcomes than persons without disabilities, such as less education, worse health outcomes, less employment, and higher poverty rates. This group also endures exclusion from social systems, negating equal access in education, health, employment, and social services, various services intended for the general population, (World Bank., (2013). Pertaining to Nigeria, Lang and Upah (2008) noted that The Nigerian population living with disabilities constitute “one of the poorest socially excluded and marginalized groups within Nigerian society (p. 17). With the shift towards understanding and emphasizing that disability evolves from the interaction between people with a health condition and their environment, *The United Nations Convention on the Rights of persons with Disabilities (CRPD)* (2007) emphasized the need to remove environmental barriers. The *World Report On Disability Fact Sheet* (2011b) discussed “accessibility to mainstream systems and services” as one of the key recommendations addressing the needs of people with disabilities, from a global perspective. The recommendation noted that enabling accesses to all mainstream systems and services is a process that is possible and should be executed through community programs and services. Defined as “mainstreaming,” this course of actions executed by governments and other stakeholders, addresses barriers that exclude persons with disabilities from equal participation in any service provided for the general public. Mainstreaming also occurs via the provision of accommodations for persons with disabilities, to enable inclusion in education, health, employment, and social services, as well as structures, and the use of communication technologies. The occurrence of mainstreaming and implementation of accommodations requires changes to laws, policies, institutions and environments. The process of mainstreaming and use of accommodations not only supports the human rights of persons with disabilities, but can also be more cost effective (WHO and World Bank, 2011b).

Structural Barriers

As an anti-robbery mechanism, Nigerian banking establishments introduced slim oval doors at the point of entry, to detect metal (Anyaele, 2008). Subsequently, persons with mobility difficulties, who are dependent upon wheelchairs, crutches and other means of mobility assistance, struggle to access banking halls to secure services. The lack of elevators/lifts and communication technologies systematically placed at all branches, further bar the mainstreaming of persons with disabilities who desire access and use of services rendered by the banking halls. Specifically, this form of institutionalized exclusion through the lack of accommodations and support barriers, which negatively impact individuals who are dependent upon mechanisms to access services, are usually available for 'able-bodied' community members. In general, such policy development and implementation is exclusionary, as well as discriminatory; undergirding frustration and increased risks of poverty for individuals with various forms of disabilities (WHO and The World Bank, 2011b). The balance of this article will address a survey of structural, technology and communication accommodations for people with disabilities, in the context of banking halls and services in Southwestern Nigeria. This survey was a form of advocacy executed by David O. Anyaele, Executive Director of The Centre for Citizens with Disabilities (CCD), Lagos State, Nigeria.

METHOD

The rights and dignity of persons' with disabilities, with a focus on respect, tolerance and inclusion was the theoretical foundation for this survey. This foundation was drawn from the Lagos State Special Peoples' Law of 2010, United Nations' Rights of Persons' Convention on the Rights of Persons with Disabilities (2007), the Optional Protocol, (United Nations, 2007), and Article 28 of the Africa Charter Human and Peoples Rights (1981) encapsulated in the Chapter 10 LFN 1990; No 2 of 1983 of the Laws of the Federation of Nigeria LPN (Laws of the Federation of Nigeria, 1990).

The Lagos State Special Peoples Law 2010 promoted the rights of persons living with disabilities. Per the Lagos State Government Mainstreaming Gender & Social Inclusion In Lagos Planning and Budget Process (2011), this law provided for the establishment of a Disability Fund, an Office for Disability Affairs; the provision of facilities in Public buildings and Public Transportation, special seats and reservation of parking lots for persons with disabilities, as well as the Collection of Statistics. This law also emphasized the right of persons with disabilities to health, education, and employment, as well as activities of communal life, such as accessibility and participation in recreation and sport. Sections 21.1, 24.1 and 24.2, the Lagos State Special Peoples Law 2010 addressed discrimination against persons' with disabilities, the right to have accessibility of public places and facilities and the responsibility of facilities to be constructed with necessary accessibility aids

(Lagos State Special Peoples Bill 2010).

- **Section Prohibition from Discrimination and Harmful Treatments 21.1:** “No person living with disability shall be discriminated against on the ground of his or her disability by any person or institution in any manner or circumstances whatsoever (Lagos State Special Peoples Bill 2010, p. 9).”
- **Section Provision of Buildings and Public Facilities 24.1:** “A person living with disability shall have the right and necessary facilities to access public buildings and public places (Lagos State Special Peoples Bill 2010, p. 10).”
- **Section Provision of Buildings and Public Facilities 24.2:** “No public building shall be constructed without the necessary accessibility aids such as lift (where necessary), ramps and others that shall make them accessible and usable to persons living with disability (Lagos State Special Peoples Bill 2010, p. 10).”

The United Nations’ Rights of Persons’ Convention on the Rights of Persons with Disabilities focused on the protection of rights and the promotion of dignity of persons with disabilities, regardless of age, gender, ethnicity, race, colour, nationality, religious beliefs, as well as social or political backgrounds. Article 9 of the convention identified the need for accessibility “to enable persons with disabilities to live independently and participate fully in all aspects of life with an emphasis on access equal to others”, noting services, which included physical environment, transportation, information and communication technologies (United Nations, 2007). Article 28 of the Africa Charter Human and Peoples Rights (1981) encapsulated in the Chapter 10 LFN 1990; No 2 of 1983 of the Laws of the Federation of Nigeria LPN, noted respect and consideration of other persons, without discrimination, with an emphasis on the maintenance of relations, which support the “promoting, safeguarding and reinforcing mutual respect and tolerance” (Laws of the Federation of Nigeria, 1990).

The rationale for the survey was drawn from a 2010 socio-political discussion which occurred at an advocacy even, during The Disability Awareness Week (Onyekwere, 2010), via the organization of The Centre for Citizens with Disabilities. Key elements of this discussion included the Lagos State Special Peoples Law 2010, with a focus on Sections 21.1, 24.1 and 24.2 (2010), Nigeria’s ratification of the United Nations’ Rights of Persons’ Convention on the Rights of Persons with Disabilities (2007), and The Optional Protocol (2010).

Despite the Lagos State Special Peoples’ Law 2010, and Nigeria’s ratification of the United Nations Rights of Persons with Disabilities, the Nigerian banking industry’s introduction and maintenance of slim oval doors at the point of entry, and the continued lack of systematic accommodations to access and utilize services in the banking halls, have continued to negatively impact persons with disabilities. From a national perspective, this reality has persisted, despite its direct opposition to the points of Chapter 10 LFN 1990; No 2 of 1983 of the Laws of the Federation of Nigeria LPN, (Laws of the Federation of Nigeria, 1990). Subsequently, the survey’s objectives were twofold: (1) to determine the prevalence and forms of accommodations provided for persons with disabilities, by banking facilities, and (2) to utilize data outcomes to educate relevant stakeholders regarding the prevalence of inaccessible and unaccommodating banking facilities, a deterrent to inclusive financial services.

The survey was conceptualized by Mr. David O. Anyaele, Executive Director of *The Centre for Citizens with Disabilities (CCD)* and was executed, under the auspices *CCD*. The surveyors included David O. Anyaele, Anne Anyaele, Assistant, and two BSW social work interns in the context of their social work practicum experience. The students’ participation in this survey process was allowed under the approval of Dir. Augusta Olaore, Director of the Babcock University (Nigeria) Social Work Program.

The site of the survey was identified as Lagos State, Nigeria, the commercial capital of the nation (OKAFOR, 2012). The survey process included a total of 22 banks, which were represented by 140 branches. Approval was not sought for the implementation of the survey. Bank representatives were not aware of the survey prior to its implementation, during its implementation or immediately after its completion. The survey was completed over fifteen (15) working days, from May 7, 2012 thru May 21, 2012. Limitations included minimal human and financial resources to support the physical review of the banking halls, time constraints. Human Subjects were not utilized for this survey. Subsequently, an IRB process was not executed.

As a component of the *CCD* advocacy efforts for individuals with disabilities, the reviewers were able to enter 140 banking facilities as members of the community, surveying the availability of accommodations for individuals with disabilities. The surveyors determined the presence or lack of ground level floors and multiple floors, elevators/lifts, ramps, audio announcements, elevators/lifts with voice, and accessible toilets. For the purpose of this survey, these factors were defined as follows:

1. Floor: The street level/ ground floor of the branch for public entry, and/or multiple floor levels,
2. Ramps: A constructed slope that joins the road or path to the building, provided for wheelchair users to access public buildings..
3. Elevator/ Lift: Vertical transport equipment that efficiently moves people and/or goods between floors of a building..
4. Audio: A programmed or pre-recorded announcement in a banking hall that provides basic information

- to customers in the banking halls.
5. Elevator/ Lift With Voice: Located in the elevator/lift, a form of pre-recorded information that informs users of approaching floors.
 6. Accessible Toilet: A special toilet designed to accommodate people with physical disabilities.

RESULTS

Data was collected in the Lagos State, Nigeria by three (3) surveyors, who assessed 140 branches of twenty-two banks, while physically present in the banking facilities. Of the twenty-two banks, five (4%) were identified as microfinance banks. One hundred and thirty (93%) of the reviewed branches ranged from two-to- four level facilities, while only ten (7%) of the branches were recorded as having one floor. Simultaneously, of the 140 branches, only 2 (1%), provided accommodations for patrons who required assistance with ambulation. These accommodations were limited to elevators/lifts, ramps and audio. Ninety-nine (99%) of the banking branches lacked any identified accommodations (evaluators/lifts, ramps, audio /pre-recorded information systems, elevators/lifts with pre-recorded information systems, accessible toilets). Of the assessed 140 branches, 100% utilized oval steel doors in accordance with security measures, which poses as a potential deterrent for individuals dependent upon assistance for mobility, such as wheelchairs and crutches.

Table 1. Banks Facilities Surveyed

Banks Facilities Surveyed	Cumulative Number
Total Number of Banks Identified for Review	22
Total Number of Banks Identified as Microfinance Facilities	5
Total Number of Bank Branches Reviewed	140

Graphic 1. Bank Facilities Surveyed

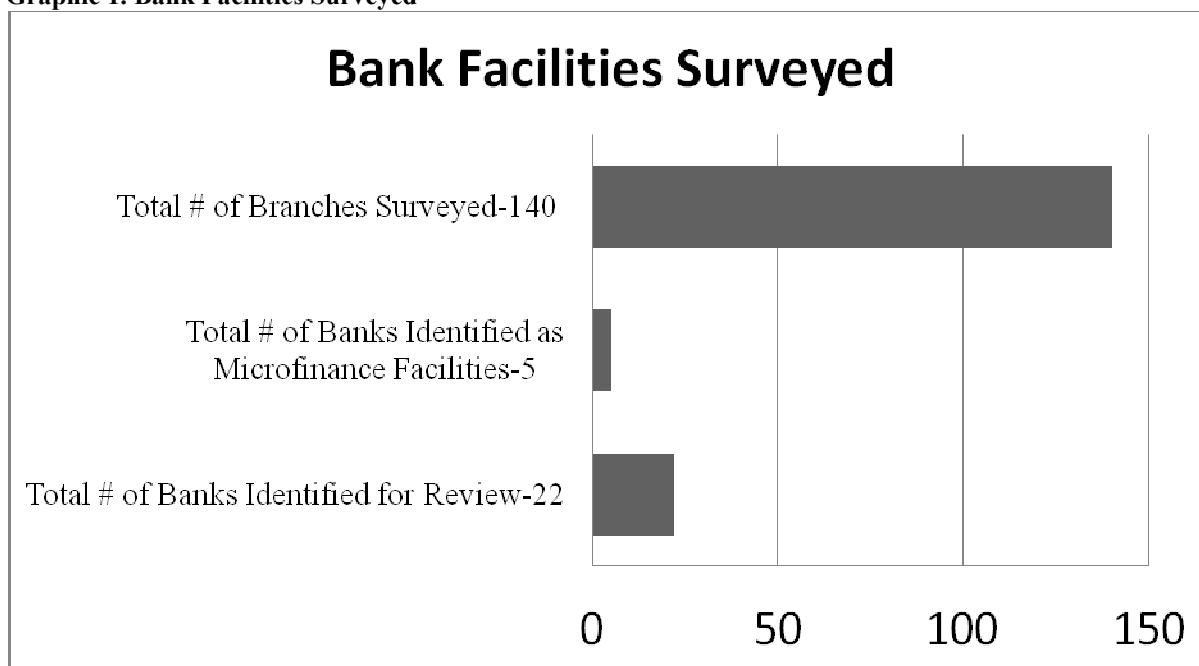


Table 2. Floor Levels of Surveyed Branches

Category of Floor Levels for Surveyed Branches	Cumulative Number	Percentage
1 Floor per Branch	10	7%
2 Floors per Branch	92	66%
3 Floors per Branch	32	23%
4 Floors per Branch	6	4%
Total	140	100%

Graphic 2. Floor Levels of Surveyed Banking Halls

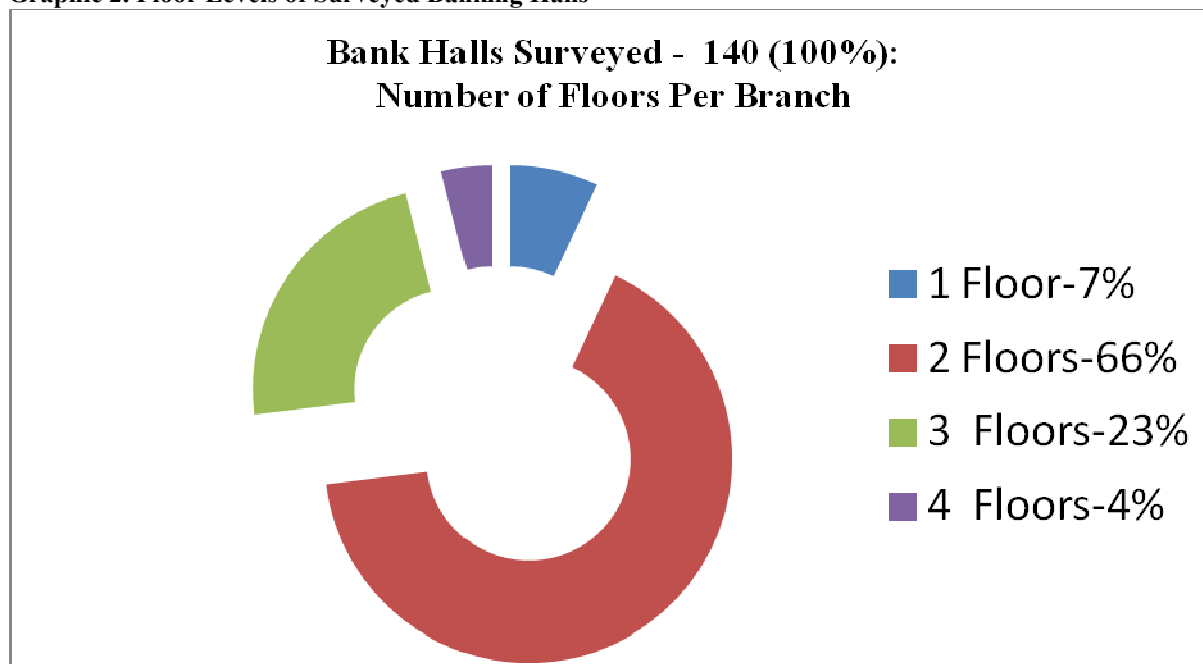
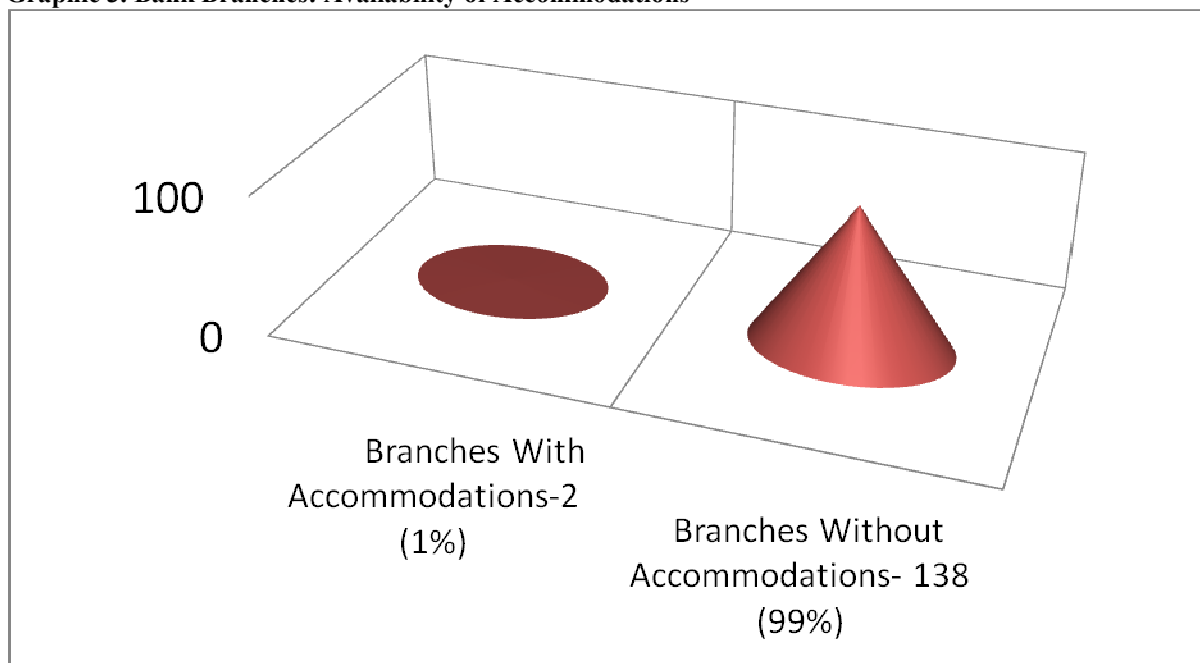


Table 3. Banking Branches Survey for Presence of Accommodations

Banks Branches Survey for Presence of Accommodations	Cumulative Number	Percentage
Total Number of Bank Branches Surveyed	140	100%
Total Number of Bank Branches With Accommodations	2	1%
Total Number Bank Branches Without Accommodations	138	99%

Graphic 3. Bank Branches: Availability of Accommodations



DISCUSSION

Self-advocacy, is a form of advocacy, in which an individual or group supports and defends their interests either in the face of a threat or proactively to meet their needs (Hagan, 2013). In his discussion of the self-advocacy process, the Executive Director, Mr. David Anyaele noted a sense of purpose, guided by the CCD vision statement, “To see a Nigeria that is inclusive, free from human rights abuses against persons with disabilities,

where policies and programmes are designed and implemented with full participation of persons with disabilities (Olaore, 2012).”

Self-advocacy has been recognized as a key element of the macro level CCD activities: Activities that demonstrate the importance of self-advocacy in the fight for social inclusiveness of persons with disabilities in developing countries. CCD’s clear mandate and stated objectives, which delineates the organization’s self-advocacy activities, have been identified as such:

- To initiate and implement programs, policies and activities geared toward the promotion and enhancement of the welfare of persons with disability.
- To empower or assist in empowering persons with a disability.
- To regularly access the impact of public policy on human rights and through publications seminars, workshops and lectures report on initiatives to empower persons with a disability.
- To educate, sensitize, counsel and mobilize persons with disabilities, in various areas critical to their survival, progress and support, advocating for respect of the rule of law and due process.
- To monitor the formulation and implementation of policies that either impact or of public interest, proving relevant to persons with disabilities, publishing reports, newsletters, journals or policy papers which address these issues.
- To organize seminars, symposia, and conferences addressing cutting edges issues and trends, regarding the effect of socio-political and economic development on persons with disabilities.

As a result of his self-advocacy initiative, Mr. Anyaele formerly presented to the Senate Committee on Constitutional Review, calling on the Senate to amend Sections 15 and 42 of the 1999 Constitution to prohibit discrimination on the ground of disabilities, addressing social inclusion and the empowerment of persons with disabilities (Olaore, 2012). June 2008, *Newswatch*, a national newspaper, highlighted protest participants’ reports of discrimination at the entrance of banks due to the necessary use of metal crutches that could not pass through the security door metal detectors (Onyekwere, 2008). Participants verbalized their frustration, due to the inability to maneuver their wheelchairs through narrow security doors in banking halls. Others noted the violation of their privacy when bank officials addressed their banking needs, outside of the banking hall, leaving those with disabilities vulnerable to potential robbery. Empowered, CCD followed with a consultative meeting, July 29, 2008, which addressed the issues of exclusion and accessibility in banking halls and services for individuals with disabilities. CCD spearheaded the discussion of the core elements of these issues, alongside the collective development of an advocacy plan of action (Anyaele, 2008). Continued issues related to the accessibility of banking services for persons with disabilities resulted in the CCD survey, executed in Lagos, Nigeria: This self-advocacy initiative, was driven by the continued identified concerns of individuals with disabilities, and their inability to access banking halls as consumers desiring services. Beyond the completion of the 2012 survey, CCD embarked on the dissemination of the results, as a major component of planned activities for the November 2012 Disabilities Awareness Week. In an effort to support communication and education in the arena of accommodations for persons with disabilities, the speaker, House of Representative, RT. Honorable Aminu Tambuwal was invited, and The Speaker wrote to inform CCD that Hon Beni Lar, the Chairperson of the House Committee on Human Rights will represent the Speaker however, she was unable to attend the event. To further enhance the audience’ understanding of the issues impacting community members with disabilities, the guest speaker a member of the Jigawa House of Assembly and Chairman of the House Committee on Information, Youth and Culture, Honorable Adamu Sha’aibu, who is also wheelchair bound was invited. Hon. Sha’aibu also was unable to attend the event even though he confirmed participation (Olaore 2012)

CONCLUSION

It has been observed that the fight for social inclusiveness and empowerment of persons with disabilities through self-advocacy may be resisted by ‘Charitable giving mindsets.’ Citizens of developing countries like Nigeria believe that it is their moral obligation to give alms to the poor either be it Christianity, Islam or African Traditional religion (Ogunkan, 2011; Uche & Ogugua, 2013). Persons with disabilities are often the object of such alms giving because they form a majority amongst the beggars (Chang, 2011). Subsequently, they are expected to stand outside the banks begging rather than be permitted to transact business like any other citizen. For banks to cooperate, changing from the giving of monetary donations to persons with disabilities, to redesigning their facilities to accommodate persons with disabilities is a major paradigm shift. Such resistance to the charitable approach informed the establishment of several international Disabled Persons Organizations (Hans and Patri, 2003). CCD, in Nigeria is therefore an example of such organizations that champion social inclusiveness for persons with disabilities. This overt form of self-advocacy is directly opposed to charitable giving, which undergirds the exclusion of community members with disabilities. Despite the limitations of the CCD’s survey of banking halls, the presence of community exclusions, mirrored by the inaccessibility of services due to structural barriers, the lack of accommodations point to the need for further of these issues. Objective data which points to the presence of a societal norm of exclusion will further highlight the need for a

shift in organizational procedures, as well as socio-political policies/ regulations that deter inclusion of individuals living with disabilities.

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