# The Impact of Family Violence, Neglect and Support on Psychosocial Well-being of People Living with Disabilities in Ibadan Metropolis, Nigeria

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# Abstract

The study examined the impact of family violence, neglect and support on psychosocial well-being of people living with disabilities in Ibadan metropolis. The study adopted the descriptive survey design, using a sample of 250 people living with disabilities randomly selected from five local government areas of Ibadan metropolis. Three validated instruments used for the study were author constructed questionnaires with 0.85, 0.81 and 0.73 reliability co-efficient respectively. The questionnaires were used to collect the requisite data. The data was analyzed using Analysis of Variance (ANOVA) statistics. Results obtained showed that there was significant impact of family violence on psychosocial well-being of people living with disabilities (F = 4.73, df =  $^{20}/250$ , P< 0.05); there was also significant impact of family neglect on psychosocial well-being of people living with disabilities (F = 8.32, df =  $^{20}/250$ , P< 0.05); and there was significant impact of family support on psychosocial well-being of people living with disabilities (F = 8.32, df =  $^{20}/250$ , P< 0.05); and there was significant impact of family support on psychosocial well-being of people living with disabilities (F = 10.42, df =  $^{15}/248$ , P<0.05). Based on these findings, it was recommended that all possible efforts should be made by the government substantially accelerate the pace of employment for people living with disabilities. Also, the need for special support measures should be taken into consideration by the families for psychosocial well-being of their children with disabilities.

Key word: Family Violence, Family neglect, Family support, psychosocial well-being and disabilities.

# Introduction

The United Nation Population information network estimates that there are almost 800 million people living in Africa, 50 million of who are disabled and the cause of such disabilities are due to congenital or perinatal disturbances, communicable diseases, and trauma/injury each day due to landmines that they encounter while working, farming, or playing, polio mellitus due to lack of availabilities of medical facilities and awareness, measles, living in dilapidated house and so on (UNICEF, 2003)

Disabled population has taken the vast majority of Africans, especially in Nigeria with the estimates 12.5 million persons living with disabilities and all these are suffering from deprivation from schools, skill acquisition, and opportunities to work. Despite the fact that few families with a member who has a disability are often highly adaptable and resilient, we still have greater rate of families in the society, who still have negative perception concerning those living with disabilities especially in Africa (including Nigeria), as we have them loitering all the streets in Ibadan metropolis begging for arms (Seligman and Darling, 2007)

It was reported that between 15 - 20 percent of the population has disabling condition that had a significant impact on families in the world, especially in United States. While few would argue that the way in which our society perceives and responds to the nature of disability can have a profound effect on neglect of the individual with disability and also affect the stability of marriages and families (U S Bureau of the Census, 2003; National Family Caregiver Association, 2005).

However, people who have mental, emotional, or behaviour disorder; intellectual deficiency or learning deficit; chronic illness; or other disabling condition are frequently overlooked by their family members and members of the community or kept on the periphery for a variety of complex reasons which especially can be attributed to their perception on the issue of disability which has a lot to do with their belief and education. Thus, many people living with disabilities have not experienced the collective caring and support from families or community members as they find themselves in what society seems to see as a predicament (Swinton, 2001)

It is important therefore, at this juncture to recognize that people with disabilities have much to contribute to the lives of their family members, and othes within and beyond their immediate environment and community. Unfortunately, the gifts of these groups of people have often been overlooked without knowing that there is ability in their disability.

The social stigma associated with disability results in marginalization and isolation, often leading to begging as the sole means of survival. As far as there is still negative societal perception about which consequently affects even how the family of those unfortunate to be born disabled view them, there still need for the society to stand and fight for the freedom and equal right of their social family and individual perception and support for the disabled (Smart, 2002)

Disability has far reaching consequences on the lives of the affected individuals as well as the family

members. The problems may range from economic and physical hardship to social isolation. The effects are cumulative and may make an already difficult situation, intolerable for the family with a disabled child. Poverty contributes to parents' inability to protect their children from exposure to harm and has systematic negative effects on the health and development, as well as impairment performance, possible delinquency, early child bearing and even adult poverty including homelessness only makes the situation of persons living with disabilities worse (Thomas, 1995).

In Nigeria, for example, with a joint family, most likely having the grandparents, uncles, nephew and niece in the house, messages to the child is most likely to be conflicting in nature, whereas in small nuclear family, there is likely to be greater compatibility. A child with disability may find a positive and rich atmosphere as well as a negative and restricted atmosphere depending on the particular time. Family characteristics have contributed to family violence especially for persons living with disabilities (Chimedza and Peters, 2001; Ajah, 2009).

This study therefore, examines the effects of family violence, neglect and support on psychosocial wellbeing of people living with disabilities in Ibadan metropolis, Nigeria.

# **Objectives of the study**

The main objectives of this study are to examine the impact of family violence, neglect and support on psychosocial well-being of people living with disabilities in Ibadan metropolis, Nigeria. Other specific objectives of the study are to:

- 1. Examine the impact of family violence on psychosocial well-being of people living with disabilities.
- 2. Find out the impact of family neglect on psychosocial well-being of people living with disabilities.
- 3. Ascertain the impact of family support on psychosocial well-being of people living with disabilities.
- 4. Suggest ways of improving psychosocial well-being of people living with disabilities in our society.

# **Review of Related Studies**

Family violence, in this context, refers to physical, psychosocial or sexual maltreatment, abuse or neglect of a woman with disabilities by a relative or caregiver. According to (Murphy and Leary, 2005). Violence against persons living with disabilities especially women can take many forms, which can occur at the same time. It occurs not only as deliberate maltreatment and abuse, but also in the more passive form of neglect:

- i. **Neglect** denial of food, lack of or inappropriate personal or medical care;
- ii. **Physical abuse** assault, rough or inappropriate handling, inappropriate personal or medical care, overuse of restraint, inappropriate behaviour modification, overmedication, confinement;
- iii. **Psychosocial abuse** verbal abuse, intimidation, social isolation, emotional deprivation, denial of the right to make personal decisions threat of having her children taken away; and
- iv. Sexual abuse denial of a woman's sexuality, denial of sexual information/education, verbal harassment, unwanted sexual touching, assault, forced abortion or sterilization; and misuse of financial resources

The impact that caring for a child with a disability has on families cannot be over-emphasized as there is general agreement that parenting a child with a disability is associated with higher levels of stress which often result to violence. In turn, this stress is likely to have impact on relationships and family functioning. However, denial, projection of blame, guilt, grief, withdrawal, rejection, and acceptance are the usual parental reactions which lead to violence on both the child as the prime cause and the both parents as contributing agents for bringing him to the world which may result to family disintegration or divorce (Keller and Honig, 2004).

Neglect generally refers to the absence of parental care and the chronic failure to meet children's basic needs. Once a child is born, neglect may involve a parent or care failing to provide adequate food, clothing and shelter; protect a child from physical and emotional harm or danger; ensure adequate supervision; treatment. It may also include neglect of, or unresponsiveness to, a child basic emotional need (Ajah, 2009).

Parents with low socio-economic status may be at high risk for neglecting children with disabilities, because they may feel more overwhelmed and unable to cope with the care and supervision responsibilities that are required. Neglect of people with disabilities includes negative parental perception among members of the family on the phenomena such as poverty, financial constraint, lack of financial support, stigmatization, family violence, lack of medical home, shame of reproach because of societal perception of the disabled, especially mentally retarded and failure to select appropriate place to care for the disabled child. Therefore, the causes of neglect of the disabled has been identified as stigmatization, lack of awareness, illiteracy, social perception of the phenomena, poverty, instability in government policy, etc (Nolan, et al, 2006).

(Nolan, et al, 2006) further observed that, misperceptions of people with disability especially mental illness include that it is shameful to be mentally ill, that people with mental illnesses are violent and dangerous, or that people with mental illness cannot live with the rest of the society, they are being referred to as patients. Perceptions of people with physical disabilities is that they are wicked, unforgiving, having interior motive,

regarded as a punishment from God for the families evils deeds. Any form of disabilities is looked upon as a curse that has been bestowed upon the family to atone for the sins committed by the person or the family members in their previous lifetimes.

According to Ajah (2009), many disabled in Ibadan metropolis of both sexes are left along the streets to beg, most times, they keep them out there without monitoring their activities, forgetting that disabled are prone and expose to HIV/AIDS more than any other people because of their disabilities, for example, the females among them are raped on daily basis. On daily basis the young ones and the reproductive ones give birth to babies besides the gutters, their female and male children who are assisting them to beg for arms sleep with each other and find them with babies even at a tender age.

There is effect of family violence on people living with disabilities. Family violence, in this context, refers to physical, psychological or sexual maltreatment, abuse or neglect of a woman with disabilities by a relative or caregiver. It is a violation of trust and an abuse of power in a relationship where a woman should have the right to absolute safety.

According to Reiss and Howe (1999), men living in poverty are at high risk of violence, and women living in poverty are at high risk of all types of violence, including sexual abuse. For instance, two thirds of poor mothers are at risk of severe violence at the hands of a childhood caretaker. However, the parents of children with disabilities perceive more problems in themselves and their family which adversely has consequences on the person with disability.

The presence of child with exceptionality, however, can have an impact on their relationship and interactions among parents. Many studies have indicated that having a child with disability can have a negative impact on the parent's marriage. For instance, a child's handicap attacks the fabric of marriage in four ways: (1) It excites powerful emotions in both parents; (2) It acts as a dispiriting symbol of shared failure; (3) It reshapes the organization of the family; and (4) It creates fertile ground for violence (Ajah, 2009).

Keller and Honig (2004) and Ajah (2009) observed that, some parents experience helplessness, feelings of inadequacy, anger, shock and guilt, whereas others go through periods of disbelief, depression, and self-blame. The siblings are not left out as they also experience feelings of guilt, shame, and embarrassment all these triggers violence in the family. Also, regulating the emotional consequences of the event of the presence of disability, such as "avoidance" of the person with disabilities can cause violence in the family as more negative outcomes than problem-focused coping strategies are seen more often than positive outcome which may take a long time to manifest.

Family support in this study refers to services provided to help a member of the family with a disability at home as the family is expected to provide services that are family-oriented and tailored to each member of the family. According to Ajah (2009), the home is typically the environment to grow up in, no matter the child's disabilities. Therefore, family support is often defined as "whatever it takes" to prevent a person from being placed outside the natural home.

Family support is needed to eliminate some of the stress that the individual with disability is passing through such as fear of the future, stigma, fear, shame, isolation, loneliness, ignorance and ability to function. This is so because family experience, in trying to meet the unique needs of a family member with disability in their natural home helps maintain their quality of life(Keller and Honig, 2004).

Though, the stress can be financially and emotionally overwhelming and families face critical situation in providing support. Yet, it is still believed that children, regardless of their disabilities belong to their families. Family support rages from financial assistance to individualized care and supervision of each individual, guidance, training and care needed to ensure the individual, guidance, training and care needed to ensure the individual, guidance, training and care needed to ensure the individual's health, and safety, assistance with daily living tasks such as bathing, dressing, grooming, food preparation, shopping, housekeeping, laundry and other tasks that ensure the person maintains a safe, healthy and stable living environment and ensure functionality (Donovan, 2003; Nowicki, 2006; Ajah, 2009).

Family support of an individual with disability includes the social standing of the family in terms of their income, education, and occupation because an individual's income, education, and occupational status are often closely interrelated in determining the quality of family support received by people living with disabilities. Therefore, issues of low socio-economic status and poverty affect individuals and families including those living with disabilities of all racial, ethnic and religious backgrounds all over the world (including Nigeria). It was also observed that, economic instability is biting hard on virtually larger percentage of the population in homes, where both male and female heads of household comprise the majority of poor families in Nigeria contributes to the poor or lack of family support of people living with disabilities (Reiss, Stainglass, and Home, 2002; UNICEF, 2003; Ajah, 2009).

Family support is interrelated with the family social status which implies that a higher socio-economic status family might have more resources available to provide support to a member of the family with disability, while those with low socio-economic status are vis-à-vis. But according to Ferguson (2001), higher socio-economic status does not automatically guarantee better family support because, those families of lower socio-

economic status may also have resources through donors at the onset of the disability, thereby offering early intervention than those of higher socio-economic status who had no previous knowledge of disability and are feeling shy of having an exceptional child.

#### **Research Hypotheses**

Following the introduction and review of related studies, these three null hypotheses were formulated and tested at 0.05 level of significance to achieve the objectives of this study:

- **Ho**<sub>1</sub>: There will be no significant impact of family violence on psychosocial well-being of the people living with disabilities.
- **Ho<sub>2</sub>:** There will be no significant impact of family neglect on psychosocial well-being of people living with disabilities.
- **Ho<sub>3</sub>:** There will be no significant impact of family support on psychosocial well-being of people living with disabilities.

# Methodology

# **Research Design**

The study is on effects of family violence, neglect and support on psychosocial well-being of people living with disabilities in Ibadan metropolis of Nigeria. The descriptive survey design was used to examine the effects of family violence, neglect, and support on psychosocial well-being of people living with disabilities in Ibadan metropolis.

# Participants

The participants in the study were people living with disabilities randomly drawn from five local government areas of Ibadan metropolis – Ibadan North, Ibadan North-West, Ibadan North – East, Ibadan South – West, and Ibadan South – East. A purposive sampling of 250 respondents of the study population was made. The respondents' ages range between 17 and 35 years old and above were selected from rehabilitation centres, schools, homes and households for the study in Ibadan metropolis.

#### **Research Instruments**

The three instruments used in this study were – Family Violence Scale (FVS), Family Neglect Scale (FNS), and Family Support Scale (FSS).

#### Family Violence Scale (FVS)

This scale was developed by Desmond K. Runyan (2006). This scale is made up of 10 items measuring the respondents' level of family violence. This is therefore adapted by the author to measure the level of family violence among the people living with disabilities. The respondents were asked to respond to a 4-point rating scale ranging from strongly agree (4) to strongly disagree (1). The high scores indicating a positive overall effect of family violence on psychosocial well-being of people living with disabilities.

The scale has internal consistency of .90 and revalidation reliability of .85 when administered on 100 people living with disabilities. The instrument was considered valid, through the favourable comments from experts in psychometrics on the suitability of the items.

# Family Neglect Scale (FNS)

This scale was developed by Adam Zolotor (2006). The scale is made up of 14 items measuring the respondents' family neglect as it affects their psychosocial well-being. This is therefore adapted by the author to measure the ways at which the respondents' were neglect and the effects of this on their psychosocial well-being. The respondents were asked to respond to a 4-point rating scale ranging from strongly agree (4) to strongly disagree (1). The high scores indicating a positive overall effect of family neglect on psychosocial well-being of people living with disabilities.

The scale has internal consistency of 0.76 and revalidation reliability of 0.81 when administered on 100 people living with disabilities. The instrument was considered valid, through the favourable comments of experts in psychometrics on the suitability of the items.

# Family Support Scale (FSS)

This scale was developed by Zimet, Dahlem, Zimet and Farley (1998). The scale is made up of 12 items measuring the respondents' family support of the people living with disabilities. This therefore adapted by the author to measure the family support of the people living with disabilities. The respondents were asked to

respond to a 4-point rating scale ranging from strongly agree (4) to strongly disagree (1). The high scores indicating a positive overall effect of family support on psychosocial well-being of people living with disabilities.

The scale has internal consistency of 0.77 and revalidation reliability of 0.73 when administered on 100 people living with disabilities. The instrument was considered valid, through the favourable comments from experts in psychometrics on the suitability of the items.

# Procedure

The questionnaires were administered through the help and support of the local government council workers in each local government area, which is the study area. A total of 400 questionnaires were distributed, out of which 250 were returned and well administered. This represents a return of 62.5, which is considered adequate, bearing in mind the sensitivity of the issues under investigation.

#### Data Analysis

The data collected were analyzed, using Analysis of Variance (ANOVA) to examine the effects of family violence, neglect, and support on psychosocial well-being of people living with disabilities.

#### Results

The results of the study obtained for testing the three hypotheses are presented in Table 1, 2 and 3 below.

# Hypothesis 1

There will be no significant impact of family violence on psychosocial well-being of people living with disabilities.

 
 Table 1:
 Analysis of Variance (ANOVA) showing the impact of family violence on psychosocial wellbeing of people living with disabilities.

Source of Variation	Sum of Square	df	Mean Square	F - Cal	F - Critical	Р.
Between group variance	1796.093	20	94.531			
Within group Variance	4601.65	230	20.007	4.73	**1.57	*<0.05
Total Variance	6397.744	250				

\*Significant at 0.05 level of confidence

\*\*Table value = 1.57

Table 1 revealed the significant impact of family violence on psychosocial well-being of people living with disabilities. This is significant because F - Calculated value (4.73) is greater than F - Critical Value (1.57) at 0.05 level of significance. Hence, the null hypothesis is rejected. The results have shown a significant impact of family violence on psychosocial well-being of people living with disabilities in Ibadan metropolis.

# Hypothesis 2

There will be no significant impact of family neglect on psychosocial well-being of people living with disabilities.

 
 Table 2:
 Analysis Variance (ANOVA) showing the impact of family neglect on psychosocial wellbeing of people living with disabilities

Source of Variation	Sum of	df	Mean	F - Cal	F - Critical	Р.
	Square		Square			
Between group variance	2606.642	20	137.192			
Within group Variance	3791.102	230	16.483	8.32	**1.57	*<0.05
Total Variance	6397.744	250				

\*Significant at 0.05 level of confidence

\*\*Table value = 1.57

The results in table 2 showed a significant impact of family neglect on psychosocial well-being of people living with disabilities in Ibadan metropolis. This is so because the F – Calculated Value (8.32) is greater than F – Critical Value (1.57) at 0.05 level of significance. Hence, the null hypothesis is rejected. The results have shown a significant impact of family neglect on psychosocial well-being of people living with disabilities.

# Hypothesis 3

There will be no significant impact of family support on psychosocial well-being of people living with disabilities.

<b>Table 3:</b> Analysis of Variance (ANOVA) showing the impact of family well-being of people living with disabilities.					vith				
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Source of Variation	Sum of	df	Mean	F - Cal	F - Critical	Р.
	Square		Square			
Between group variance	2667.825	15 233	166.739			
Within group Variance	3729.919		16.483	10.42	**1.67	*<0.05
Total Variance	6397.744	250				

\*Significant at 0.05 level of confidence

\*\*Table value = 1.67

Table 3 revealed that there is significant impact of family support on psychosocial well-being of people living with disabilities. This is so because the F – Calculated value (10.42) is greater than F – Critical Value (1.67) at 0.05 level of significance. This indicates that their significant impact of family support on psychosocial well-being of the people living with disabilities; therefore the null hypothesis is rejected.

#### Discussion

The results on table 1 showed that there was significant impact of family violence on psychosocial well-being of people living with disabilities in Ibadan metropolis. This result supports the research finding of Reiss, Stainglass and Howe (1999), Keller and Honig (2004), Murphy and Leary (2005), Nolan, McCarron, McCallion and Murphy-Lawless (2006) and Ajah (2009) that family violence can happen when family members have different views or beliefs and these adversely affect psychosocial well-being of people living with disabilities. For instance, these researchers found that higher levels of maternal stress, family strain, lower social support, family disintegration or separation caused by blaming one another, abandonment and greater use of avoidant coping strategies associated with parenting a child with disability.

However, they found that, some parents experience helplessness, feeling of inadequacy, anger, shock and guilt, while others go through periods of disbelief, depression and self-blame, and all these trigger violence in the family which eventually have significant impact on psychosocial well-being of their children living with disabilities. They stressed the point that the impact that caring for a child with a disability has on families cannot be overemphasized as there is general agreement that, parenting a child with a disability is associated with higher levels of stress which often result to violence. In turn, this stress is likely to have impact on relationships and family functioning.

On table 2, the results indicated that there was a significant impact of family neglect on psychosocial well-being of people living with disabilities. This study however, supports the research findings of Garbarino (1999), Rees and Siakeu (2004), Nolan, McCarron, McCallion and Murphy-Lawless (2006) and Ajah (2009) that neglect may involve failure to provide medical care, protection, or the necessities of life. Emotional and educational neglect can also result in serious harm, especially when parents have difficulty in establishing a strong bond with a child who has a disability.

They stressed the point that, the emotional distance of parents increases the risk of learning and behaviour problems in children living with disabilities. According to them, causes of neglect of children with disabilities are the same as those for all children; however, several elements may increase the risk of neglect for children with chronic illness or disabilities often place higher emotional, physical, economic, and social demands on their families. Nolan, McCarron, McCallion and Murphy-Lawless (2006) however, observed that parents with low socio-economic status may be at high risk for neglecting children with disabilities, because they may feel more overwhelmed and unable to cope with the care and supervision responsibilities that are required.

The results obtained from this study on table 3 revealed that there was significant impact of family support on psychosocial well-being of people living with disabilities in Ibadan metropolis. This study therefore, is in agreement with research findings of Reiss, Stainglass and Howe (2002), Donovan (2003), UNICEF (2003), Nowicki (2006) and Ajah (2009) that, family support is needed to eliminate some of the stress that the individual with disability is passing through such as fear of the future, stigma, fear, shame, isolation, loneliness, ignorance and inability to function. This is so because family experience, in trying to meet the unique needs of a family member with disability in their neutral homes helps to maintain their quality of life.

The researchers observed that, family support of an individual with disability also include the social standing of the family in terms of their income, education, and occupation because an individual's income, education and occupational status are often closely interrelated to determining the quality of family support received by people living with disabilities. Therefore, according to UNICEF (2003), economic instability is biting hard on virtually larger percentage of the population in homes where both male and female heads of household comprise the majority of poor families in Nigeria contributes to poor family support of people living with disabilities.

# **Implication of the Findings and Recommendations**

The implications of the findings inherent in the study evidently indicate that family violence, neglect and support have significant impact on psychosocial well-being of people living with disabilities in Ibadan metropolis. However, as most families face changes within the household, previous schedule routines, and activities should be modified slightly and at the very least, adjusted to meet the combination of acceptance and psychosocial well-being of people living with disabilities.

Furthermore, tasks such as medical attention, good nutrition, visits, feedings, dressing, bathing and toileting sessions, complex feeding regimens, and daily programmes of physical therapy, engage in leisure time activities together and interact socially more with friends, vacations, hobbies and attend social events should be extended to the people living with disabilities. All these will reduce having feelings of loneliness, social isolation, distance from friends, neighbours, and their communities of people living with disabilities.

Sequel to the findings of this study, the following recommendations were made:

- 1. To ensure the integration or re-integration of people living with disabilities into ordinary working life and thereby into society, the need for special support measures should also be taken into consideration. This should include the provision of aids, devices and other social services to the people living with disabilities, retain and advance in suitable employment.
- 2. More special schools and skill acquisition centre, such as rehabilitation centres should be established for people living with disabilities. For instance, government should pay more attention to the development of special education for the people living with disabilities. Most of these centres or special schools should train disabled people and resettle them on specials jobs.
- 3. Family members should be informed about the child's strengths and weakness. This will help them to attach realistic expectations with the child regarding general cleanliness, education, occupation and marriage. Also, financial support to the needy families of disabled children may be implemented by the three tiers of government and other volunteer agencies. For instance, a number of efforts have been made by government and individuals to educate people living with disabilities. Family members therefore, at any level should allow disabled people to promote their own ideas so as to give them a greater say in the family decision making.
- 4. The state mass media should be fully geared and utilized for building positive image of people living with disabilities, for their social integration and advancement. This will therefore, give them equal opportunity in life, especially in the matter of employment and economic resettlement and for their all-round development in society. In other words, arrangement for job settlement should be considered important by the government and non-government organizations for people living with disabilities. Also, adequate residential care services should be established for severe and profound mentally retarded people.
- 5. However, in order to avoid frustration among people living with disabilities, all possible efforts should be made by the government to substantially accelerate the pace of employment for people living with disabilities. The setting-up of organizations of disabled people and their families, starting at the community level, and with unions at national level be intensified.

# Conclusion

In conclusion, this study has examined the impact of family violence, neglect and support on psychosocial wellbeing of people living with disabilities. The study evidently showed that some families neglected their children living with disabilities by hiding them in their houses. They are denied the opportunity to mix with the larger society which should help them learn the norms that would make them lived happy lives. This study also highlighted that people living with disabilities should be considered as part and parcel of the society. Therefore, they need to be fully integrated into the society. In this respect, they will be able to contribute to the technological, economic, political and social development of the nation.

By and large, the study stresses the point that there should be full acceptance of people living with disabilities because their acceptance has implications for the eventual adjustment in society.

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