Challenges Facing People with Disability in Mogadishu – Somalia.

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Abstract

According to the World Health Organization (WHO) (2011) World Disability Report, there are about 650 million people with disability in the worldwide. And more than 80 percent of persons with disabilities live in developing countries including Somalia. Persons with disabilities in developing countries are often marginalized and face challenges because of their disability. This study aimed to find out the challenges faced by people with disability in their daily lives. The qualitative study was conducted in Mogadishu city, the capital of Somalia. The data were collected through face to face interviews with 25 people for physical disabilities. To analyze the data, content analysis was used. The study found out that majority of people with physical disabilities have limited or no access to health services, education and often experience social and economic stigma and discrimination, which consequently prevents them from obtaining a better quality of life.

Keywords: Disability, Health Service Challenges, Educational Challenges, Social Challenges, People with Physical Disabilities.

Introduction

To understand the people with physical disabilities, we need to understand meanings and definitions of disability, disability models and types of disability. Disability is a condition that affects and impacts all human being (World Health Organization [WHO], 2011). The term disability according to Oxford Dictionary is a physical or mental phenomenon, in which one cannot utilize part of the body, like limited movement or difficult learning (Sultan, 2010).

United Nations Convention on the Rights of Persons with Disabilities (United Nations, 2006) defines People with Disabilities as persons who have long term physical, mental, intellectual or sensory impairments, who face different challenges that may prevent or limit their full and successful contribution or participation in society on an equal opportunity with people without disability (Nokrek, Alam, & Ahmed, 2013).

Two models have been established to define disability namely: medical and social model (Schalock, Lucksson, & Shogren, 2007). In the last twenty years the idea of disability has progressed from medical model of disability which is giving more regard to the individual's impairments to social model of working and contribution that focuses on person's inability to perform his or her daily life activities and limit participation in social activities (Ingstad & Grut, 2007). In the medical model disability is observable deviations from biomedical norms of body structure and function that directly comes from an trauma, infectious diseases, or another health problems, by which persons with certain physical and mental conditions are referred to as abnormal and that status cause all restriction of daily activities (Bickenbach et al., 1999). The UN's Convention of Rights of Person with Disabilities (2006) reflects a shift from medical to the social model of disability, Burchardt (2004) defined social model "as in contrast to the individual model in which

limitations in functioning or participation in society are seen as the direct result.

Most of the studies have categorized disability into seven types, namely mental retardation, mental illness, blindness, low vision, hearing, speech, and locomotors while the census has categorized it into five groups, namely mental, visual, hearing, speech and physical disability (Mishra & Gupta 2006). Kitching (2014) has categorized disability into five major groups namely: physical, sensory, mental illness or disorder, cognitive and intellectual or developmental. Another study said that disability can be classified as mentally defected, blind, hearing impaired, inarticulate people and physical (orthopedic) disabled people (Mülayim, 2009). This study focuses on people with a physical disability only. Physical disabilities "can involve difficulties with sitting and standing, use of hands and arms, sight, hearing, speech, breathing, bladder control, muscle control, sleeping, fits, and seizures" (Pacer Center, 2004, p.1). The most common causes of physical disability can be congenital /heredity (Monk & Wee 2008; Nepal Government, 2006).

This research will add to above mentioned and similar research conducted for knowledge creation, and more importantly, it will fill the gap that exists about challenges faced by people with disabilities in countries with conflicts like Somalia. Thus the study will look at the challenges faced by people with physical disabilities in their daily lives in Mogadishu city, the capital of Somalia. By focuses on the following challenges: Health services, Education, and Social challenges.

In Mogadishu, decades of conflict have left many persons with disabilities, although it's difficult to quantify the number of people suffering from disabilities since there is no civilian casualty tracking system (Amnesty International, 2015).

Methods

Research design

This study used a qualitative research method to investigate the social, educational and health service challenges people with disabilities experience living in Mogadishu. This method has been chosen because it gives the richness of data not possible with quantitative data since it helps the researcher to find more information on the topic being researched (Babbie, 2011).

Sample size

The study took place at Mogadishu city capital of Somalia. Mogadishu was the right place to conduct this study because of the availability of the participants. The total sample size of the study was 45 (25 people with physical disabilities), the number of participants was only known during the data collection period. The data collection technique that was used in this study was face to face interview.

Data analysis procedure

The data were analyzed using content analysis. Content analysis is the systematic reduction of written data through the identification of the unique features of the message (Bruce, 2001).

Research reliability

The researcher recorded the data and the expert researcher rechecked and they reached at least 80% of the intercoder reliability (ranging between 80% and 100%) in agreement which is the acceptable percentage according to Miles and Huberman.

Results

Overview of the Demographic features of people with physical disabilities

The information related to the participants is shown in below.

Table 1 Majority of people with physical disabilities which were interviewed in this study are male, which made up of 16 (64%) of the population of people with physical disabilities, 25-34 was the most interviewed age group at 8 (32%), Furthermore, 10 (40%) of people with physical disabilities interviewed in this study have never attended school. According to their occupation, the study revealed that most of the people with physical disabilities 12 (48%) were unemployed. In terms of marital status, the majority of the people with physical disabilities 11 (44%) were married.

Table 1: Overview of the Demographic features of people with physical disabilities.

Items	Frequency	Percentage (%)			
	Gender				
Male	16	64			
Female	9	36			
	Age group				
18-24	5	20			
25-34	8	32			
35-44	6	24			
45-54	5	20			
55-64	0	0			
65+	1	4			

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Items	Frequency	Percentage (%)		
Educational level				
Primary	-	-		
Intermediate	2	8		
Secondary school	5	20		
University	4	16		
Informal education	4	16		
	Occupation	_		
Employed	9	36		
Unemployed	12	48		
Student	4	16		
Marital status				
Single	10	40		
Married	11	44		
Divorced	4	16		
	Breadwinner			
Father	8	32		
Person with disability	8	32		
Husband	4	16		
Brother	1	4		
Son	1	4		
Relatives	3	12		

Findings related to the types of disability, time occurred and their causes

The major types of disability that people with disabilities have, time of occurrence and the causes were presented below:

Majority of persons with physical disabilities interviewed in this study have a deformity of both legs (f=12) while five participants have a deformity on one leg only. The remaining participants have one leg amputated (f=4), paralysis of the lower part of the body (f=2) and cerebral palsy (f=2). The highest number of people with physical disabilities developed their disability when they were 9-11 years old (f=8) while the least number of participants (f=6) started to live with a disability when they were 6-8 years old. The study shows that 8 participants' cause of disability was polio; the second-highest causative factor was unknown 7. A gunshot was the third-largest identified cause followed by fire, accident, and cancer.

Table 12. Types of disability

Category	Codes	Frequency	Percent
Deformity of lower limbs	Deformity Both legs	12	48
	Deformity of one leg	5	20
Cerebral palsy	Deformity of upper and lower limbs	2	8
Spinal cord injury	Paralysis of the lower part of the body	2	8
Amputation legs	Amputated one leg	4	16
Total		25	100
Time the disability occurred		Frequency	Percent
0-2 years old		6	24

Category	Codes	Frequency	Percent
3-5 years old		7	28
6-8 years old		4	16
9-11 years old		8	32
I don't know		-	-
Total		25	100
Causes of disability			
Category	Codes	Frequency	Percent
Non-Human related causes	Polio	8	32
	Cancer	1	4
Human related causes	Gunshot	4	16
	Fire	3	12
	Accident	2	8
Unknown causes	Unknown	7	28
Tot	al	25	100

Findings related to the challenges faced by people with physical disabilities

The main objective of the study was to find out the challenges faced by people with disability on their daily lives, especially focusing on health service, educational and social challenges. The researcher will discuss the challenges separately below:

Findings related to the health service challenges faced by people with physical disabilities

Table 3. Health service needs Table 3. Health service needs

Category	Codes	Frequency	Percent
Surgery	Orthopedic surgery	11	40.8
	Neurosurgery	2	7.4
Assistive Technology	Motorcycle	1	3.7
	Wheelchair 2	2	7.4
	Artificial leg	3	11.1
Physiotherapy	Physiotherapy	6	22.2
Nothing	Nothing	2	7.4
Total	27	100	
Note. Two persons with physical disabilities have stated more than one need			

Table 3 above shows that majority of the people with physical disabilities' disability need is orthopedic surgery (f=11), they mentioned that their only health service need is to get a well-trained and professional orthopedic doctor who can successfully do the operation

they need. One participant narrated that;

"The only thing that my disability need is to get the well knowledgeable orthopedic doctor, who can do an operation for my legs" (PPD 10).

The second highest health service needs that the participants' disability need is physiotherapy (f=6) The third most needed health service that was mentioned is an artificial leg for participants who

amputated their legs, they expressed that they need only artificial legs to walk as mentioned by one participant;

"This time I do not need surgery or physiotherapy but I need an artificial leg to walk without any help from others" (PPD 12)

As displayed in the above table other participants need neurosurgery, assistive technology like wheelchair and motorcycle, as well as those who mentioned that their disabilities do not need any health services at all. Some of the participants are stated below;

"My health problem is polio and polio has only prevention which is vaccination, so now I do not need any health service related to my disability neither treatment nor surgery" (PPD 7).

Table 4. Common challenges that prevent or discourage the seeking of health services

Category	Codes	Frequency	Percent
Economic	Expensive health services	7	35
problem	Travel expenses	9	45
Environmental	Transportation problem	2	10
	Hospital building problem	2	10
Total		20	100

two persons with physical disabilities stated that they have both economic and environmental problems

Majority of the people with physical disabilities stated that the only challenges that prevent them from getting the health services they need are economic problem, and nine participants expressed that they need to go to other countries due to lack of availability of health service in

Somalia but due to financial issues it is difficult for them to travel. Some of the responses are as follows;

"I need neurosurgery, but there is no neurosurgery doctor in Mogadishu, so, I need to go outside of the country to get operation on my spinal cord, but it needs too much money" (PPD 3).

Seven participants stated that they cannot use the available services due to expensiveness and they don't have enough money;

"The services that I need is available in the country, and cannot afford it because it is expensive" (PPD 4).

Four participants stated that they were faced with certain barriers while they were using the health services, the barriers include; transportation problem and inappropriate hospital buildings;

"To access some hospitals is difficult for me because their buildings are not suitable to enter by someone like me" (PPD 15).

Findings related to the educational challenges that faced by people with physical disabilities

Table 5. Availability of educational institutions for persons with disabilities

Educational Institution	Frequency	Percent
Yes	2	8
No	23	92
I don't know	-	-
Total	25	100

Majority of the people with physical disabilities (f=23) stated that there are no educational institutions for people with physical disabilities

while two participants said that previously, there were two schools for people with special needs, but now they are closed.

Those who said that there were educational institutions for people with physical disabilities stated that there was an institute for training of people with special needs.

One participant indicated that Siyad Barre's government built two schools for people with disabilities; "No government before or after Siyad Barre's government give importance to the people with disabilities because that government built us schools for the training of people with special needs, " (PPD 7).

Majority of the people with physical disabilities said that they did not attend normal school.

Table 6. Reasons for not attending schools

Category	Codes	Frequency	Percent
Environmental problem	School buildings	8	53.3
	Transportation	3	20
Economic problem	School fee	4	26.7
Family problem	Misconception	-	-
Total		15	100

Note. Two family members stated that their family member with disabilities did not attend schools because of economic and school buildings.

Most of the people with physical disabilities (f=8) stated that they did not attend normal schools because of their building, as mentioned by one participant;

"I could not go to school because it's not designed to be accessed by a person with a physical disability" (PPD 21).

Another participant said that most schools do not have any ramp and elevator:

"I need to go school, but there is no school which has ramp or elevator for a person with a disability" (PPD 22)

Four participants said that they did not benefit from schools for economic reason, as one participant narrated below:

"Majority of the schools are private, and they need more money for school fees, and my parents do not have enough money to pay the fees" (PPD 24)

Three participants stated that they did not attend school for the transportation problem:

"There is no school near our home, therefore we have to take a bus every day, and it is not easy for me to use public transportations" (PPD 8).

For those who benefited from normal schools most of them said that the schools do not cater to the people with disability's need and as mentioned by some participants:

"Our school's buildings contain three floors and there is no elevator! I had to go up through the stairs and it was difficult as well as uncomfortable for me" (PPD 6).

Another participant narrated that:

"The school I graduated from and the university that I am studying now, both of them they do not have any ramp or elevator, even chairs and tables are not suitable for a student with a disability" (PPD 2).

Three participants mentioned that their schools have met some needs of people with disabilities like giving priority and respect as one participant said:

"My school was a normal school but they give me more priority and respect" (PPD 13).

While two participants stated that their schools met the needs of people with special needs, one of them explained that:

"Our school was suitable for people with special needs because it's designed only for them and aimed at including the people with special needs" (PPD 7).

Findings related to the social challenges faced by people with physical disabilities

Majority of the participants (f=24) indicated that their family members behave well and they supported them, as one participant narrated below:

"Every one of my family members helps me and they make effort to support me 100%" (PPD 2).

Yet one participant said that some of his/her family member's hate them because of their disabilities, as one participant mentioned below:

"Some of my family members hate me, and they are uncomfortable to help me" (PPD 10).

Majority of people with physical disabilities (f=24) said that their friends behave well, and they respect them more while six participants stated that some of their friends behave badly, as mentioned by one participant:

"Some of my friends at the workplace, sometimes they abuse me because of my disability" (PPD 7).

Table 7. Opinions about family behaviors

Family Behaviors	Frequency	Percent
Positive behavior	24	96
Negative behavior	1	4
Total	25	100
Friends Behaviors	Frequency	Percent
Positive behavior	24	80
Negative behavior	6	20
Total	30	100
Community Behaviors	Frequency	Percent
Positive behavior	23	92
Negative behavior	2	8
Total	25	100

Note. Five people with physical disabilities and one family member said that friends have both positive and negative behaviors

Majority of participants (f=23) said that the communities they live in are treating them well, and they respect them while two participants said that they are faced with problems from some people in the community and one participant mentioned that:

"Some of the community members do not respect me, especially neighbors, who insult me sometimes for my disabilities" (PPD 10).

Majority of the people with physical disabilities participated in competitions such as Qur'an competition, class competition, and school competition while the minority of the participants participated in different activities like empowering people with disabilities, disability day, and political party activities and so on. Similarly, the majority of the

family members stated that their family members with disabilities participate in activities such as Qur'an competition, empowering disabled people, disability day, political party activities and so on.

Majority of the people with physical disabilities (f=14) said that they are not currently participating in social activities, due to lack of information, five participants said they are not participating because there are no ongoing activities, two participants stated that they are not participating in the activities because they are illiterate while two participants said that they do not need to participate in social activities.

Marriage decision	Frequency	Percent
Yes	7	28
No	18	72
Total	25	100

Table 8. Effects of disability on marriage decision

Majority of the people with physical disabilities (f=18) indicated that their disabilities do not affect their marriage decision while seven participants said that their disabilities affected their marriage decision. One participant mentioned that he lost some marriage attempts for reasons related to his disability and he said;

"I had a relationship with a girl, when we decided to marry each other, her family rejected me because of my condition" (PPD 5).

Another participant said that he will not get married because of his disability:

"... It has more effect because I cannot marry; the lower part of my body has mobility problems..." (PPD 3).

Table 9. Effects of disability after marriage

After marriage	Frequency	Percent
Yes	4	26.7
No	11`	73.3
Total	15	100

Majority of the participants (f=11) stated that their disability has no effect on their lives after marriage while four participants said that their disabilities have an effect on their lives after marriage, and some of them mentioned that they are divorced because of issues related to their disabilities as one participant narrated below:

"After one year of our marriage, my husband decided to divorce me for the reasons related to my disability" (PPD 9).

Another participant expressed that his/her disability has affected her badly after marriage and he/she mentioned that;

"I was divorced because the doctor told us that I will not become pregnant, after a few days my husband divorced me..." (PPD 10).

Conclusion & Recommendations

In conclusion, it can be argued that there are many challenges faced by people with physical disabilities in their daily lives, and most of the people with physical disabilities cannot obtain basic services including sufficient health services, education, job opportunities, accessibility, and social participation. These have negative impacts on people with physical disabilities and lead to exclusion from society.

Based on the findings of the study the following recommendations are made:

- The government should make sure that the public buildings, transportations, and roads are disability-friendly.
- Raise awareness about disability
- Come up with suitable hospitals and schools that cater to people with physical disabilities.
- Come up with more social activities for a person with physical disabilities
- The organizations that deals with people with disabilities should make sure that all people with disabilities are invited to social activities.
- The government should raise awareness about Polio vaccine.
- The Somali government should come up with disability policy
- The constitution of Somalia should review its constitution regarding people with disabilities,
- Future studies should be conducted in other parts of Somalia on this topic
- In the future, researchers should focus on specific challenges and possible solutions.

Limitations of the study

The main methodologies used in this study were qualitative, which usually take several months to conduct and interpret. However, one of the limitations of this study is lack of transferability of the result, because this study used the qualitative research method which its results cannot be generalized to the larger population because of the small sample size

and the results can also be biased since the participants can take different ways when answering the questions as compared to quantitative research (Babbie, 2007). The second limitation of this study related to the lack of time because the main methodology used in this study was qualitative, which normally takes more time to collect and interpret the data (Atieno, 2009).

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