

We are IntechOpen, the world's leading publisher of Open Access books Built by scientists, for scientists

6,900

Open access books available

186,000

International authors and editors

200M

Downloads

Our authors are among the

154

Countries delivered to

TOP 1%

most cited scientists

12.2%

Contributors from top 500 universities



WEB OF SCIENCE™

Selection of our books indexed in the Book Citation Index
in Web of Science™ Core Collection (BKCI)

Interested in publishing with us?
Contact book.department@intechopen.com

Numbers displayed above are based on latest data collected.
For more information visit www.intechopen.com



Social Supports Available to Persons with Disabilities in Nigeria

Chinyere Onalu and Nneka Nwafor

Abstract

Disability entails more than the mere physical deformity such as stroke; however, a disability could manifest in different forms; mental, emotional, sensory and intellectual disability among others. People with disability are faced with a lot of challenges and they experience depression, isolation and social exclusion which were explained in studies from the natural and behavioral sciences. Also, Social workers and Psychologists alike have often discussed the importance of social inclusion and social support for people living with a disability. Social support helps to reduce psychological stress, enhance the quality of life and achieve social inclusion. Lack of social support increases the risk of depression, social exclusion, maladaptive behaviors and mortality. In this paper, we will give a thorough explanation of Social support and its forms. We emphasized the influence of neurobiology, personality features, social system and perception on who gets social support and to what extent. The paper also discussed Nigeria's perceptions of disability and the social support networks in Nigeria, using vast literature. From literature, social supports are of different kinds however, this paper emphasized the need for functional social support which entails changing negative perceptions about disability. In other words, social support should not be just assisting the individual to access their immediate needs but should entail involving them in decision making – social inclusion.

Keywords: disability, inclusion, Society, support, Nigeria

1. Introduction

Disability is part of the various challenges that confront human beings at different places in the world. This is to say that disability is a phenomenon that transcends national boundaries, cut across gender, class and race. It was estimated that about one million people, who accounted for 15% of the global population has one form of disability or the other [1, 2]. The term 'disability' refers to different kinds of impairments and deformities which restrict people's ability to cope well in society. It is a condition that breeds various impediments on the physical, economic, political and social well-being of people living with a disability. It manifests in various forms ranging from physical disability, emotional, sensory, intellectual, and psychological among others. Sometimes, traumatic experiences which people had to render them incapacitated thereby hinder their ability to function optimally well in the society where they live [3]. Disability can also be hereditary, developed during childhood or due to old age, as a result of fatal accidents, natural disaster, and diseases among others [4–6]. In other words, disability encompasses a baby born blind, a child who developed

autism disorder, a soldier who lost his sight during the war, a man with dementia as a result of old age, a woman with an amputated leg and a student with speech disorder among others.

Each form of disability has its implications depending on its severity. For instance, Autism Spectrum Disorder (ASD) is a disability with its peculiarities. Persons with ASD find it difficult to have social interaction, however, their communication is usually marred by constant repetition and they are also known for exhibiting certain stereotype behaviors [5]. People who are deaf or dumb also have peculiar challenges, quite differently from people living with amputated legs. In other words, some disability is more severe than the other and their challenges and needs vary depending on the form of disability.

Generally, there are grave implications on the social, psychological, economic, political and overall wellbeing of people living with a disability [7]. While people without disability face a lot of challenges, those living with a disability are disproportionately challenged. They are faced with multifaceted challenges which are more severe to compare with those without any disability. According to the world report on disability, people with disabilities experience inequalities, lack of political participation, violations of their rights and denial based on their disability [6]. Consequently, disability is a big barrier to social inclusion. Ordinarily, the experience of being incapacitated confers a sense of limitation, low self-esteem, depression and most often, people with disability withdraw from social participation. Based on their disability, they are more vulnerable to discrimination, poverty, and social exclusion. It is also worth knowing that people living with severe kind of disability are mostly affected by loneliness which further increases the chance of developing ill mental health. Also according to Sengonul [8], support and warmth from loved ones was attributed to as a part of socialization, through which the young people are introduced to rational behaviors, prosocial and moral development. However, a deficiency in learning rational behaviors necessary for psychological and social integration in the society is regarded as 'disallowance socialization' [9]. In other words socialization has a close link with physical, social and mental developments of individuals.

2. Coping with a disability condition

The onset of disability can be traumatic to the disabled and their families especially when they find it difficult to cope with. According to Southwick et al. [10], there is a psychological and neurobiology variances on how different people cope with traumatic conditions. Research evidence has shown that personality features such as neuroticism, extraversion, conscientiousness among others, influence how people cope with traumatic conditions such as disability [10, 11]. Unfortunately, there is a dearth of literature on disability and neurosciences, however, insights could be drawn from the theory of personality, that explains how the Ego and the Superego operates and how one's personality determines their ability to absorb shock and adapt to life's experiences. This is to say that there are persons who are better placed to cope with disability better than the others, based on their personality features. For instance, Onyishi [11] explained that people with open-mindedness and extroverts tend to have a large circle of friends and relationships - social network. It is worthy to note that, in coping with disability, social support from friends, family and significant others reduce psychological stress and boost longevity [12]. However, social support is a product of the social network. Reviewed literature has shown that the more social support network one has, the greater their chance of life satisfaction and longevity.

Furthermore, Stress buffering model also posits that people with support from family, friends and other social network suffers less from depression than those that lack social support network [11]. For, Jensen et al. [13], Social support reduces depression for both genders, across disability diagnoses and all ages. Therefore people with disability who lacks social support are subject to isolation, depression, withdrawal from the society, most often than none, subject themselves to a state of oblivion, by way of lack of social participation. All these could lead to mental ill health. Based on existing literature, the paper agrees, that people with disability, with enough social support, have a great chance for social inclusion which further increases life satisfaction whereas, lack of social support is the dawn of social exclusion which intensifies the gravity of disability. It points out that every social system is characterized by socially excluded groups particularly people with disability and the availability of social support is the onset of social inclusion. However, the degree of social support one gets is depending on their social disposure, influenced by personal traits and perceptions about disability. Put differently, the psychological ability and personal perceptions about disability make a difference in how people living with disability access social support.

3. Social exclusion and disability: a two-way relationship

Disability is undoubtedly among the most vulnerable conditions at risk of social exclusion. Scholars in both natural and behavioral sciences have explored the effect of social exclusion on wellbeing and social conditions. Studies have shown that social exclusion has a big effect on neural activities at different regions; ranging from the insula, anterior cingulate cortex, temporal and prefrontal cortex. The chronic experience of being socially excluded activates reactions at the nervous system which they described as neural activations. These neural activations stir feelings of sadness, distress and other negative emotions in the excluded person. However, these studies acknowledged that other factors such as the genetic make-up of the individual, disease, and psychological state and life experiences also have its influence [10, 14–17].

Views from the behavioral sciences show that there is a two-way relationship between social exclusion and disability. While people with disability are at greater risks of social exclusion, people who are socially excluded are at greater risks of disability [4, 7, 18]. The rate of poverty and unemployment for people with disabilities are disproportionately high. And according to Lang et al. [19], people with disability are less likely to be employed and received adequate health care and are more likely to become infected with diseases, experience abuses and undue influences on their major life's decisions. For instance, the rate of unemployment for people with disabilities in Nigeria, is 77.3 per cent, compared with 49.2 per cent for those without a disability [20]. In other words, people living with a disability are confronted with poverty, and the latter can result in disability which is a hallmark for social exclusion.

The implication of disability on the economic, social and psychological well-being of the disabled is most severe in a society characterized by poverty, discrimination and lack of social welfare [7]. However, people with disability suffer more due to the structural conditions of society. They are confronted with social exclusion from their family, friends, community, as well as the government. The discrimination against people living is stemming from the perception that they are not capable to make any meaningful contribution to society. Social exclusion, therefore, sets in when people with disability lack; decision making, employment, income, adequate health care and other material resources. Based on this, they are

most likely to be withdrawn from society; because their perception is also not different from the prevailing societal perceptions. And the effect of being excluded at the individual level can be more devastating, leading to a feeling of low self-esteem, depression, isolation, social deprivation and self-harm [4]. According to Jose [21], psychosocial disability further increases social exclusion, reduces the quality of life and the entire wellbeing of people.

4. Social support for people with disability

Social support is a term used to describe the 'comfort' created by friends, family, group, community, institution and significant others, which helps people in coping with various life challenging situations. Social support involves conveying a feeling of value, worth and acceptance towards the individuals. We have formal and informal social supports: formal social support may include support from the church, social club and other organization or institutions, while the informal support includes support from the families and friends.

Social support can be emotional (such as providing care or creating a condition of being cared for), instrumental (giving tangible gifts such as money, food and cloth) or informational (giving useful advice or information that will help the recipient). More elaborately, Southwick et al. [10] grouped social support as follows: structural social support - the available social network and social interactions; functional social support - the perception that social interactions have been beneficial in terms of meeting emotional or material needs; emotional social support - behavior that fosters feelings of comfort arousing the feeling of being valued and/or cared for; instrumental/material social support - tangible resources and services that help solve practical problems; and informational/cognitive social support - provision of advice or guidance to help the individual cope with difficulties.

Several studies have shown that those that have supported are less vulnerable to stress. Through social support, problems are minimized and people's social, psychological, emotional, economic and political wellbeing are positively affected. For instance, a study by Adedimeji et al. [22], using 50 HIV positive people revealed that social support, to a great extent, improves people's health, because providing care to someone, improves their immunity and longevity. Forouza et al. [23] in a cross-sectional study using 136 people with physical disability also found that social support is one of the social determinants of health, plays an important role in improving psychological conditions in people's lives. In more recent studies, Liao et al. [24] using 1297 males and 1666 female of 65 years of age, found that social support can prolong life expectancy and lower the mortality among those with impairment, the aged and those with a major disease. Another study by Gellert et al. [25] using 108 couples support that perceived social support is positively related to the quality of life while the reverse is negatively related to distress. This is to say that, people with perceived social support tend to cope better with stressful conditions and enhanced quality of life. Eisenberger [14] and Southwick et al. [10] also arrived at a similar conclusion at different time and location. In other words, having a social relationship and being aware that help is readily available can have a positive effect on the individuals' health and overall wellbeing. On the other hand lack of social support can have great consequences for people with life challenging situations. It compromises the physical and mental wellbeing of people and increases mortality [26].

Consequent upon this, people with disability requires social support to cope and overcome the tremendous burden of their disability. However, social support is encompassing, in the sense that it does not benefit the recipient alone (the person

living with disability), it also benefits their family members and caregivers. If we could understand that the impact of social support is not just for the benefit and wellbeing of the recipient alone, then we can equally agree that social support is encompassing as it affects the society at large. In other words, providing social support is not a responsibility confided to the friends and families of the recipients. Providing social support is both a formal and informal obligation. The informal actors in providing social support include the family, friends and relations of the recipients, while the formal actors may include the government, agencies (the church, mosque, community and schools), organizations (social club, unions and groups), and professionals (social workers and psychologist) among others.

The paper points out that social support is encompassing and is not limited to the personal wellbeing of the recipients, but the society at large. There is functional social support, which when given aims at changing the perception of the person living with a disability. Groups and associations give social support to their members, so also national and international organizations.

5. Disability and social support in Nigeria

Nigeria as a country has a population of over 180 million people with half of its population living in 'poverty' and 30% in extreme poverty [20]. The estimated number of persons living with disability in Nigeria is 25 million [27], While National Population Commission [NPC] cited in Okogba [28] put the number at 19 million.

Some scholars have tried to link the rate of disability in Nigeria with the rate of poverty. However, the major argument has been that poverty increases people's vulnerability to disability. According to Amadusun [7], the effect of disability in a society characterized by poverty can be very devastating. For Haruna [4], disability is both a cause and consequences of poverty. This cannot be contested against, given that poverty may restrict people's access to good health care, whereas severe health conditions, such as polio if not treated, can render people permanently incapacitated.

In a similar vein, the rate of disability in Nigeria is attributed to the frequent road accidents, the outbreak of infectious and chronic diseases like polio, smallpox, and meningitis, stroke, among others which render people incapacitated [29]. Besides, Holden et al. [30] opined that the rate of disability in Nigeria is due to the frequent conflict and violence experiences especially in the northern part of the country.

Disability is a condition that should be managed well thus people with disability requires proper consideration. It is important to note that the culture of taking care of people with disability dated back to the medieval periods. Each society has a way of taking care of disabilities. In Nigeria it could be traced back to the olden days, the disabled were being catered for by their family members. However, much has improved today, especially the recent inception of Social work profession in Nigeria, and the roles of the church, mosque, organizations, institutions and other support groups who recognizes the need to provide support to people with disability.

First and foremost, the Nigerian social workers, in collaborations with other professionals, governmental and non-governmental agencies provide social services to the people with disability in Nigeria. The roles of social workers in working with people with disability include; demolishing structural barriers that impede people's wellbeing, fighting against poverty, conveying a feeling of acceptance to the disabled persons and changing perceptions about disability beginning from the individual level to the societal level. The involvement of social workers in serving persons with disability is paramount for their well-being given that social workers

assess individuals from the point of 'strength' derived from Strength perspective (SP). The SP model posits that individuals are a bank of capability, which when harnessed can be used to enhance their wellbeing and that of others. Since people with disability are trainable and have the innate abilities [4], social workers are very important actors in harnessing these strength to help them reduce dependency and increase life's satisfaction however the place of social work in serving people living with a disability is beyond the scope of this paper. Different disability groups were formed in Nigeria whose aims and objectives are to take care of people living with a disability.

Despite these available supports, people with disability continue to face tremendous challenges, mostly as a result of the general perception of being disabled. This paper submits that much more is needed to be done, particularly in changing the perceptions of those living with disability through functional social support [10].

It is worthy to note that perceptions and attitude of a particular society has a great influence on people with disability. This is to say that perceptions about disability induce either positive or negative attitude towards the people living with a disability. Negative attitude towards people with disability can be a result of negative perceptions. Influenced by prevailing cultural norms intersected by religious and superstitious belief, the Nigerian society perceives persons with disability both negatively or positively depending on the type of disability. In some of the negative perceptions, people with disability were viewed as people who committed abomination either in their present lifetime or the previous one [7, 30–32]. According to Haruna [4], some disability conditions such as mental retardation among others were seen as a punishment from God. Talk of the sharia in north There is also a prevalent belief in witches and evil spirits as being responsible for some disability conditions. Based on this, the disabled person is most often isolated and is left at the mercy of his/her family members [20, 33]. As a result, they suffer from social exclusion and were most often ignored by the government.

On the other hand, there were also positive perceptions and attitude towards people with disability. Some culture view disability as extraordinary thus, treat people with disability with gentleness. For instance, Nyagweso [32], observed that the people of the Igbo tribe in the Eastern part of Nigeria treat people with disability with great kindness. The paper also explained how the Yoruba's in the western part of Nigeria perceives disability. The Yoruba's associated disability to *Obatala* (the god in charge of molding human bodies). It narrated how *Obatala* got intoxicated due to alcohol and in the process, he fashioned people with impairment and deformities. With this prevailing belief, the Yorubas views people with disability with pity and provides special care for them. According to Haruna [4], about 90 per cent of Nigerians view people with disability as liabilities - those who require charity, who should be assisted in form of giving financial aids, support and other forms of humanitarian assistance. Based on these perceptions, the predominant attitude towards a disabled person in Nigeria is exclusion and pity, thus they were given alms in form of charity. Even though members of the society, groups and organization provides care in form of charity to these group, they were not involved in the mainstream of the society – their voice does not count even in the decisions that affect their lives. This type of social support hinders social inclusion. According to Southwick et al. [10], some social support may not necessarily be positive. This is because, through the practice of begging some people living with disability in Nigeria see their condition as a pitiable one, thus it has become common to see them begging on the streets and in the markets places. A survey by United Nation found that 'begging' is one of the commonest occupations for people living with disability in Nigeria [34]. And their perceptions about disability are not different from the general perceptions about disability. According to Southwick et al. [10], although

certain personality features are associated with one's enthusiasm to seek and access the available social support, however, the type of social support and the social system moderate the degree and the extent to these features can strive.

This paper argues that people with disability may have innate potentials that could help them access social support network; however, they need functional social support to sustain them. Social support for them should also include: (1) changing negative perceptions about disability (2) empowerment- involving them in the mainstream of the society where their voice could be heard, especially in decisions that concern them. (3) defending their human rights (4) demolishing walls of poverty, discrimination and social exclusion. They should be supported to maximize their potentials and contribute to social and economic development.

6. Conclusion


Based on the literature, social support is a lifesaver. People living with disability experience a lot of life straining challenges, however, some of these challenges were as a result of their disability which further undermines their ability to be productive and live a fulfilled life. People with disability are trainable, have innate potentials and the ability to be productive, thus they require functional social support from people to utilize these potentials. The paper also argues that social support for people with disability should not be limited to providing information, giving emotional support, tangible gifts or materials, rather it encompasses demolishing structural barriers such as social exclusion, marginalization and stigmas which they are most vulnerable to. This is why professionals like social workers are good actors in providing social support. Social workers are known for enlightening the public through which they change negative societal perceptions about disability, instilling the right perceptions and attitudes. Social workers through their professional interventions fight against discrimination and social exclusion.

Author details

Chinyere Onalu* and Nneka Nwafor
University of Nigeria, Nsukka, Nigeria

*Address all correspondence to: chinyere.onalu@unn.edu.ng

IntechOpen

© 2021 The Author(s). Licensee IntechOpen. This chapter is distributed under the terms of the Creative Commons Attribution License (<http://creativecommons.org/licenses/by/3.0>), which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited. 

References

- [1] McClain-Nhlapo, C. V., Sivonen, L. H. A., Raja, D. S., Palummo, S., & Acul, E. (2018). *Disability inclusion framework*. World Bank
- [2] World bank (2020). *Disability inclusion*. <https://www.worldbank.org/en/topic/disability>
- [3] Kidd, S., Wapling, L., Schjoedt, R., Gelders, B., Bailey-Athias, D., Tran, A., & Salomon, H. (2019). Leaving no-one behind: Building inclusive social protection systems for persons with disabilities. <https://www.researchgate.net/publication/335467217>
- [4] Haruna, M.A. (2017). The problems of living with disability in Nigeria. *Journal of Law, Policy and Globalization*, 6(5), 103-112
- [5] McPartland, J., & Pelphrey, K.A. (2013). The implications of social neuroscience for social disability. *Journal of Autism Development Disorder*, 42(6). <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3848203/>
- [6] World Health Organisation (2011). *World report on disability*. WHO and the World Bank. Washington, D.C.
- [7] Amadasun, S. (2020). Social work services for persons with disabilities in Nigeria: A qualitative inquiry. *International Journal of Social sciences perspectives*, 6(2), 59-67
- [8] Sengonul, T. (2018). *Socialization processes towards children and adolescents for developing empathy, sympathy and prosocial behavior*. Doi:10.5772/intechopen.7413.
- [9] Scribano, A., De Sena, A., & Lisdero, P. (2018). *Socialization processes towards children and adolescents for developing empathy, sympathy and prosocial behaviours*. Doi:10.5772/intechopen.74391
- [10] Southwick, S.M., Sippel, L., Krystal, J., Charney, D., Mayes, L., & Pietrzak, R. (2016). Why are some individuals more resilient than others: the role of social support. *World Psychiatry*, 15(1), 77-79.
- [11] Onyishi, I.E., Okongwo, O.E. & Ugwu, F.O. (2017). Personality and social support as predictors of life satisfaction of Nigerian prisons officers. *European Scientific Journal*, 8(20), 110-125
- [12] Kuiper, J.S., Zuidersma, M., Oude Voshaar, R.C., Zuidema, S.U., van den Heuvel, E.R., Stolk, R.P., & Smith, N. (2015). Social relationships and risk of dementia: A systematic review and meta-analysis of longitudinal cohort studies. *Ageing Res Rev*, 22, 39-57. <https://pubmed.ncbi.nlm.nih.gov/25956016/>
- [13] Jensen, M.P., Smith, A.E., Bombardier, C.H., Yorkston, K.M., Miro, J.J. & Molton, I.R. (2014). Social support, depression, and physical disability: Age and diagnostic group effects. *Disability and health journal*, 7(2), 164-172
- [14] Eisenberger, N.I. (2013). An empirical review of the neural underpinnings of receiving and giving social support: health implications. *Psychosom Med*, 75(6), 545-556.
- [15] Preller, K.H., Pokorny, T., Hock, A., Kraehenmann, R., Stampfli, P., Seifritzc, E., Scheideggera, M., & Vollenweider, F.X. (2016). *Effects of serotonin 2A/1A receptor stimulation on social exclusion processing*. https://www.researchgate.net/publication/301483927_Effects_of_serotonin_2A1A_receptor_stimulation_on_social_exclusion_processing
- [16] Wang, H., Braun, C. & Enck, P. (2017). How the brain reacts to social

stress (exclusion) – A scoping review. *Neuroscience and Behavioural Review*, 80, 80-88

[17] Will, G.J., van Lier, P.A., Crone, E.A., & Guroglu, B. (2016). Chronic childhood peer rejection is associated with heightened neural responses to social exclusion during adolescence. *Journal of Abnormal Child Psychology*, 44, 43-55

[18] Burchardt, T. (2003). Social exclusion and the on-set of disability. *Joseph Rowntree Foundation*. <https://www.jrf.org.uk/report/social-exclusion-and-onset-disability>

[19] Lang, R., Schneider, M., Kett, M., Cole, E., & Groce, N. (2019). Policy development: An analysis of disability inclusion in a selection of African union policies. *Dev Policy Rev*, 3(7), 155-175

[20] Thompson, S. (2019). *Nigeria Situational Analysis*. Disability Inclusive Development

[21] Jose, J.P., Cherayi, S. & Sadath, A. (2016). *Conceptualizing psychological disability in social exclusion: a preliminary discourse*. <https://journals.sagepub.com/doi/abs/10.1177/2455328x16628770>

[22] Adedimeji, A.A., Alawode, O.O., and Odutolu, O. (2010). Impact of care and social support on wellbeing among people living with HIV/AIDS in Nigeria. *Iranian Journal of Public Health*, 39(2), 30-38

[23] Forouza, A.S., Mahmoodi, A., Shushtari, Z.J., Salimi, Y., Saijadi, H. & Mahmoodi, Z. (2013). Perceived social support among people with a physical disability. *Iran Red Crescent Medical Journal*, 15(8), 663-667

[24] Liao, C., Li, C., Lee, S.H., Liao, W.C., Liao, M.Y., Lin, J., Yeh, C.J., & Lee, M.C. (2015). Social support and mortality among the age people with

major disease or ADL disabilities in Taiwan: A national study. *Archives of gerontology and geriatrics*, 60(2), 317-321

[25] Gellert, P., Hausler, A., Suhr, R., Gholami, M., Rapp, M., Kuhlmeier, A., & Nordheim, J. (2018). *Testing the stress-buffering hypothesis of social support in couples coping with early-stage dementia*. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5754077/>

[26] Holt-Lunstad, J., Smith, T.B., & Layton, J.B. (2010). Social relationships and mortality risk: A meta-analytic review. *PLoS Med* https://scholar.google.com/scholar_lookup?journal=PLoS+Med&title=Social+relationships+and+mortality+risk:+a+meta-analytic+review&author=J+Holt-Lunstad&author=TB+Smith&author=JB+Layton&volume=7&publication_year=2010&pages=e1000316&pmid=20668659&

[27] Center for Disability and Development Innovations, (2016). *Training courses- gender in disability*. Abuja

[28] Okogba, E. (2018). NPC puts Nigeria's disabled population at 19 million. *The Vanguard*. <http://www.vanguardngr.com/2018/10/npc-puts-nigerias-disabled-population-at-19million/>.

[29] Akinkugbe, O.O., Lucas, A.O., Onyemelukwe, G.C., Yahaya, H., & Halima, A. (2010). *Non-communicable diseases in Nigeria: The emerging epidemics*. Nigerian Health Review: Health Reform Foundation of Nigeria (HERFON).

[30] Holden, A., Clark, C. and Abualghaib, O. (2019). *Situational analysis of disability in Nigeria*. Disability Inclusion Helpdesk Report

[31] Birchall, J. (2019). *Overview of social exclusion in Nigeria*. Helpdesk report.

[32] Nyangweso, M. (2018). Disability in Africa: A cultural/religious perspective. <https://www.researchgate.net/publication/325642373>

[33] Wapling, L. (2019). *DFID Nigeria disability Inclusion minimum standards assessment*. Disability Inclusion Helpdesk, Social Development Direct

[34] UNDP (2015). "UNDP Implements Empowerment Programme for Persons with Disabilities" <https://www.ng.undp.org/content/nigeria/en/home/presscenter/articles/2015/08/26/undp-implements-empowerment-programme-for-persons-with-disabilities-.html>