



Disability mainstreaming and inclusion in accessing Mental Health and Substance Use Disorders treatment/care

TUESDAY 28TH JUNE 2022

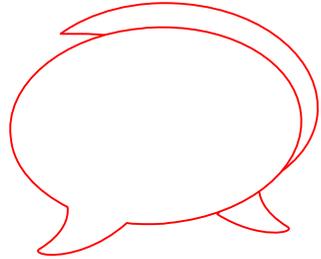
6:00PM TO 7:00PM EAT

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Gwira Foundation





Learning Outcomes

- **You will be able to delineate access barriers hindering Mental Health (MH) & Substance Use Disorders (SUDs) treatment and care for People with Disabilities (PWDs).**
- **You will be able to describe disability mainstreaming and inclusion, inequality and discrimination as related to MH & SUD treatment and care.**



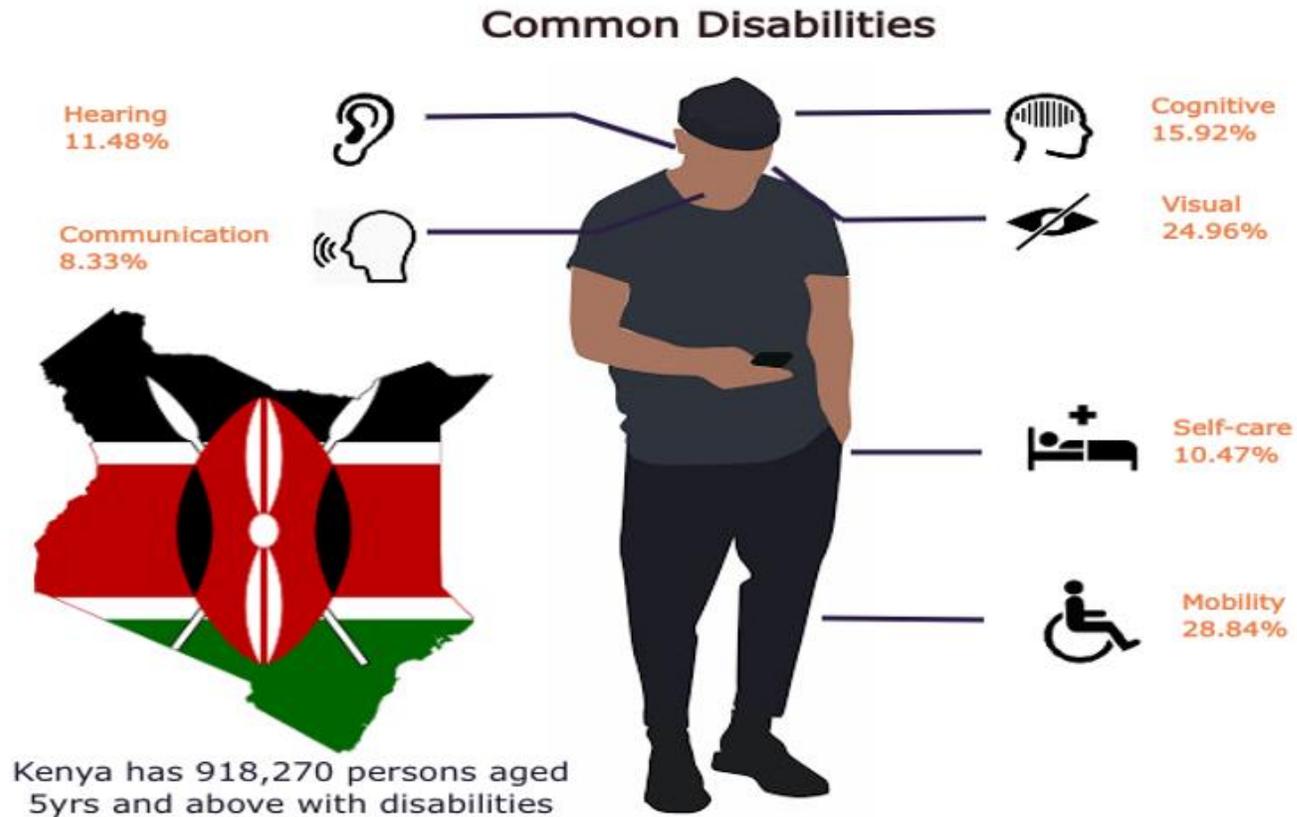
Current definitions

- International Classification of Functioning, Disability and Health (ICF), which states that **disability** is an “umbrella term for impairments, activity limitations or participation restrictions”, which result from the interaction between the person with a health condition and environmental factors (e.g. the physical environment, attitudes), and personal factors (e.g. age, gender and coping mechanism).
- Convention on the Rights of Persons with Disabilities, which states that **disability** is an evolving concept and “results from the interaction between persons with impairments and attitudinal and environmental barriers that hinders their full and effective participation in society on an equal basis with others”.



Types of Disabilities

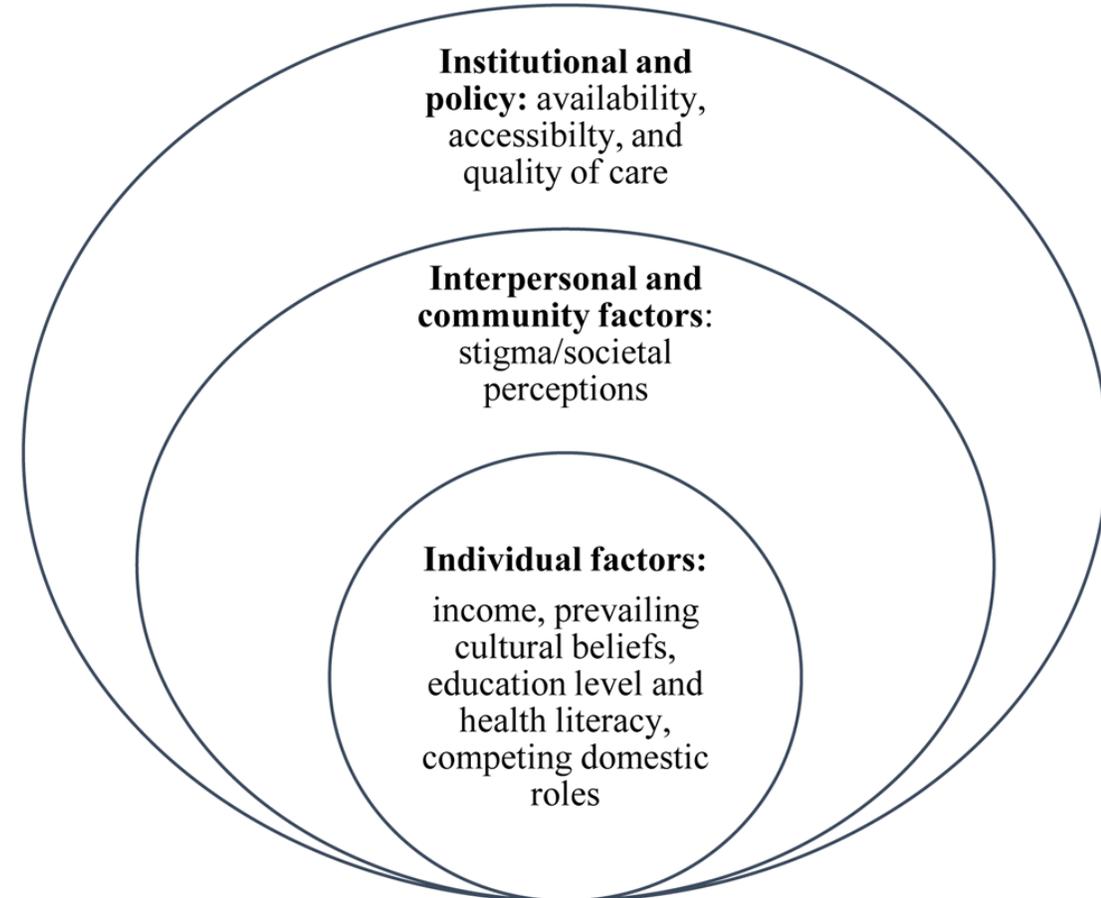
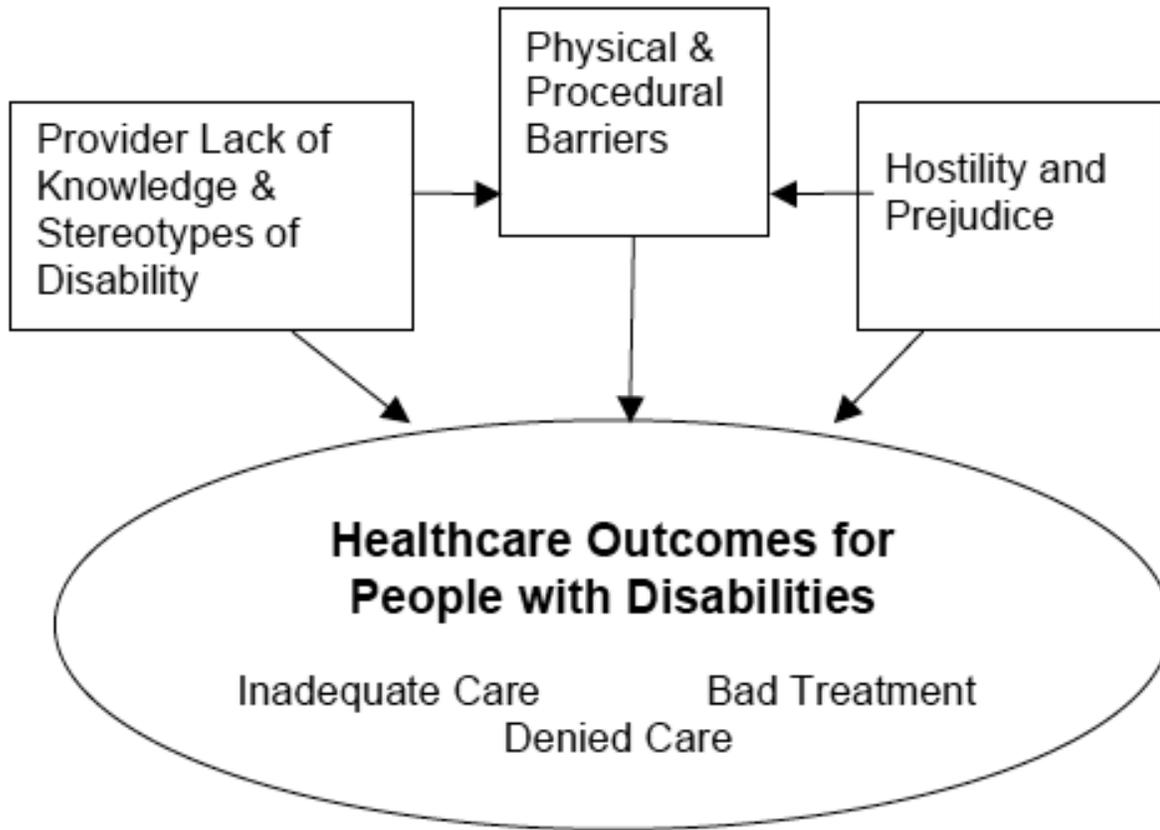
Photo credits: <https://images.app.goo.gl/CVP6UhyA8mAzdZpX6>



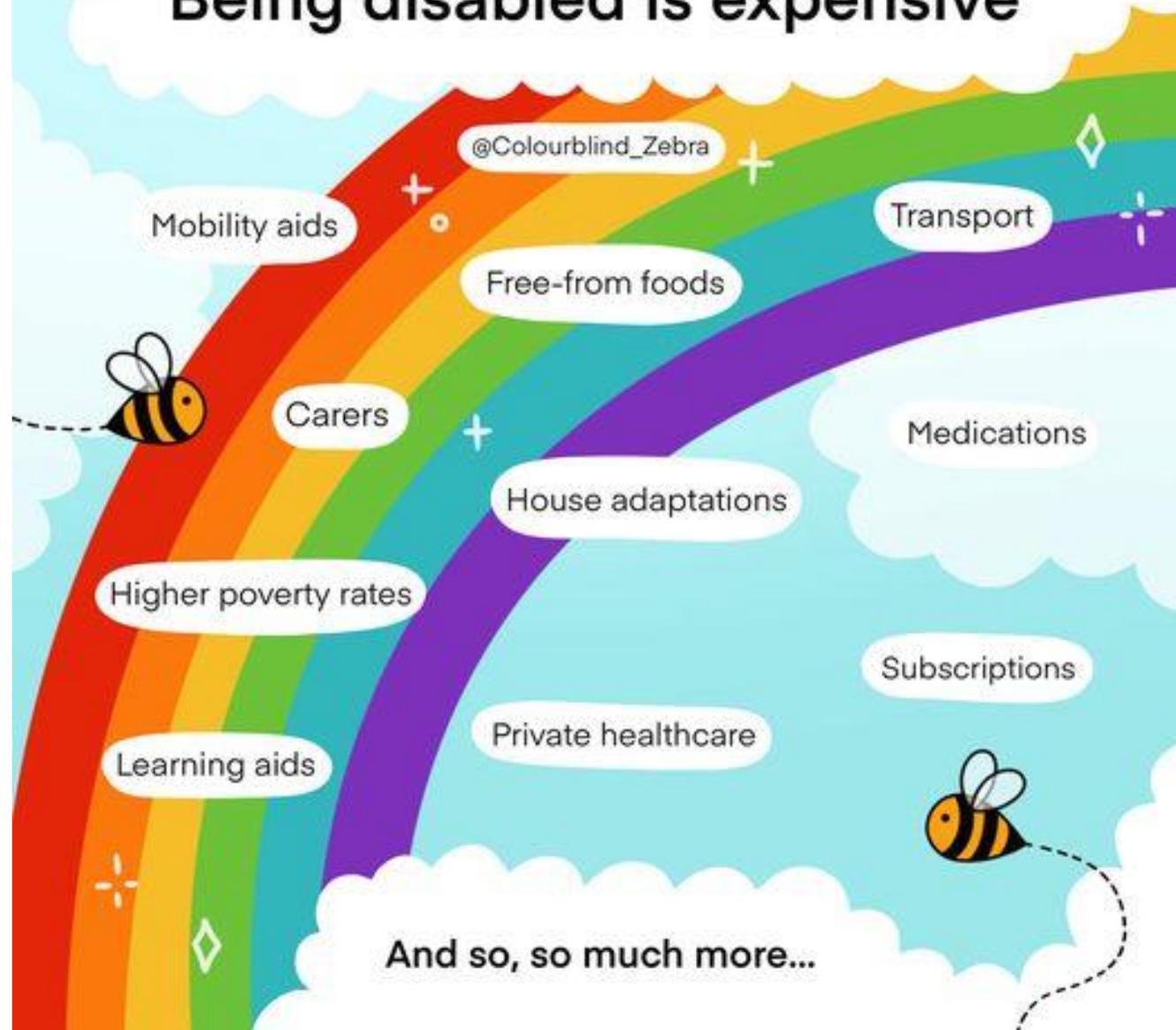
Source: KNBS 2019 Census

Disability Healthcare Access Barriers

Photo credits: <https://images.app.goo.gl/ReQUqxQ5HE7YNRJ79> and <https://images.app.goo.gl/goUaAABf5dm1zaiU7>



Being disabled is expensive



Treatment Barriers

Medical professionals unable to provide services to physically disabled persons due to physical barriers¹



Lack of education among healthcare professionals

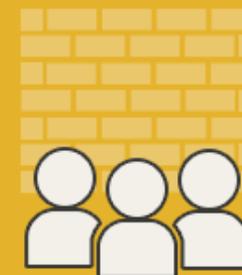


A lack of interpretation services

Enabling

Most people do this in the belief that they are helping

Due to a stigma among the general population



¹ According to a study published by the American Association on Health & Disability

² A national survey in 2008 by SAMHSA

Types of Violence (IOM, 2020)



- Physical Assault
- Trafficking, Slavery
- Infanticide
- Honor Killing and Maiming

PHYSICAL

- Abuse, Humiliation
- Confinement/ Isolation
- Intimidation/Threats
- Social Exclusion, ostracism based on sexual orientation

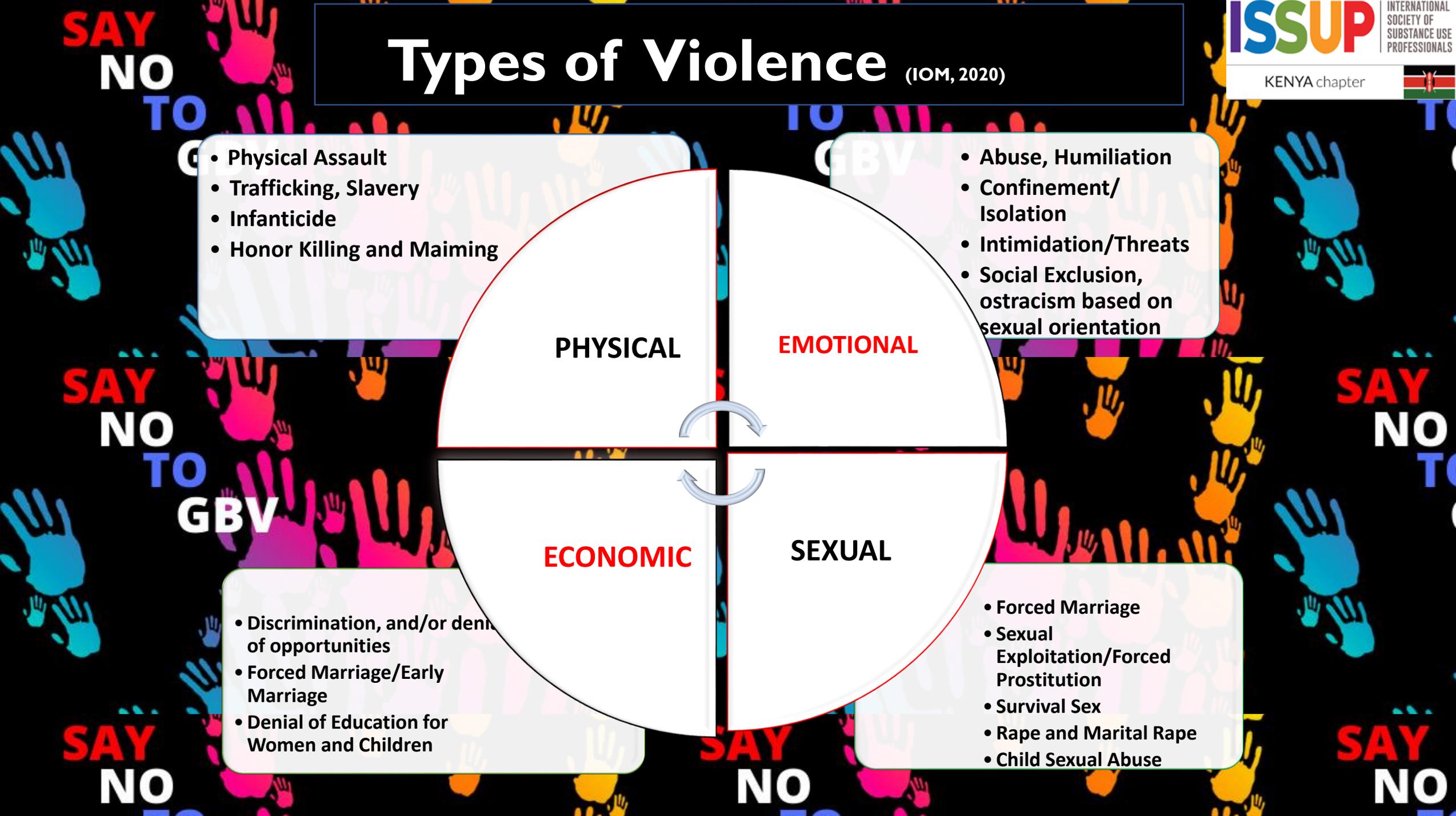
EMOTIONAL

- Discrimination, and/or denial of opportunities
- Forced Marriage/Early Marriage
- Denial of Education for Women and Children

ECONOMIC

- Forced Marriage
- Sexual Exploitation/Forced Prostitution
- Survival Sex
- Rape and Marital Rape
- Child Sexual Abuse

SEXUAL



Which barriers do PWDs face





COVID-19 and PWDs

Containment strategies- Static, face-to-face case management with appropriate infection prevention and control measures

Delay strategies-Physical distancing, limit engagement with survivors, some adapted and remote case management, train staff on changes in service delivery



Mitigation-movement markedly restricted, significantly curtailing face-to-face case management outside health facilities and requiring implementation of adapted and remote case management



Access Barriers to MH & SUD Treatment

Photo credits: <https://images.app.goo.gl/oHuUZoMTv61c95fv8> and <https://images.app.goo.gl/1XfTVcQyWMoijCRq5>

The Five Levels of Addiction Treatment

Level 0.5

Early intervention services

Level I

Outpatient services

Level II

Intensive outpatient/partial hospitalization services

Level III

Residential/inpatient services

Level IV

Medically managed intensive inpatient services



BARRIERS & CHALLENGES



NOT KNOWING WHERE TO FIND INFO



NOT BEING ELIGIBLE FOR SERVICES...

WHAT I COULD ACCESS... WAS HARD.



DIGITAL / MOBILE ISSUES

(AGE / LITERACY / CREDIT / INTERNET)



LONG WAITS



LANGUAGE BARRIERS



MOVING A LOT... OUT OF DATE INFO



LOSING TRACK ... FORGETTING



CONSISTENT COUNSELLORS



MY ENVIRONMENT & PEOPLE AROUND ME



PRACTICALITIES OF MOVING... E.g. STORAGE DURING REHAB

HOW IT AFFECTS ME ...



LOSING MY JOB



STRESSFUL, ON TOP OF EVERYTHING ELSE!



WORKERS PROMISING TO HELP, THEN DISAPPEARING



FEELING "WHAT'S THE POINT?"



HIDING THE TRUTH FROM MY KIDS

What is the problem?

Photo credits: <https://images.app.goo.gl/RArBCcYwiYLMcsGdA>



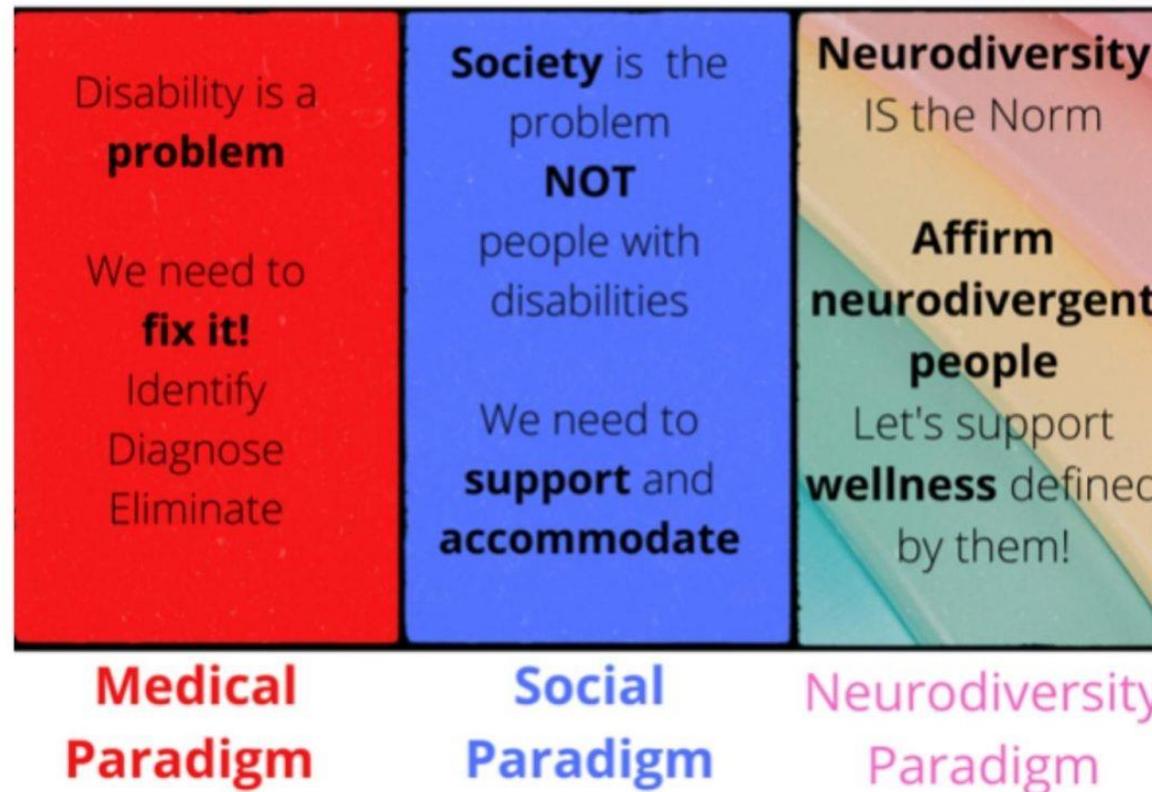


Paradigms inform disability definitions

Photo credits: <https://images.app.goo.gl/MYyHG6sStijHkR2n6>

How we think about disability matters

~Monica van Schaik, Leadership Cadre & S2C Practitioner



Medical versus Social models of disability

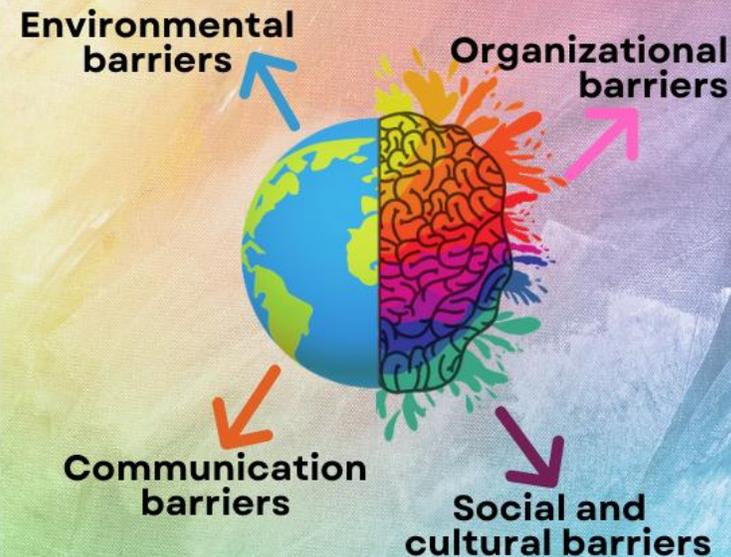
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The pathologizing model asks, what's wrong with the individual?



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The social model asks, what are the barriers to accessibility?



Shifting Disability Paradigms

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Shifting Disability Paradigm

Medical Model	Social Model
▪ 'Fix' the person	▪ 'Fix' society
▪ Focus on disability, limitations	▪ Focus on ability, what a person <i>can</i> do
▪ Adjustment to the norm	▪ Acceptance of differences
▪ Impairment must be overcome	▪ Environment must be changed
▪ Encourage acceptance	▪ Encourage independence
▪ Little consultation	▪ Person-centered decision-making
▪ Institution-based provision	▪ Community-based services
▪ Exclusion	▪ Inclusion, participation, citizenship

NEURODIVERSITY DEFINITIONS & TERMS

- Neurodiversity → The natural diversity of human brains
- Neurodiversity paradigm → The philosophy of neurodiversity
- Neurodiversity Movement → The social justice movement
- Neurodivergent → A person whose brain functioning differs from what's considered "normal"
- Neurotypical → A person whose brain functioning is considered "normal"
- Neurodiverse → A group of people with different types of brains

WWW.ANDNEXTCOMESL.COM



Disability inequality

Photo credits: <https://images.app.goo.gl/j265pPYtvInJi4b26>



Social protection gaps and disability inequality exists in vicious cycles of intersectionality factors:

- Social and cultural exclusion and stigma
- Denial of development opportunities
- Deficits in economic, social and cultural rights
- Reduced participation in decision making and denial of rights



Disability discrimination

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Disability Paradigms

Medical Model

Poor guy...
He can't vote because
he's disabled.

VOTE HERE



Social Model

He can't vote because
there are stairs to the
voting venue!!!



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Dreamstime.com
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Direct versus indirect discrimination

Photo credits: <https://images.app.goo.gl/DJp2a8546uVHdJQn9>

DIRECT DISCRIMINATION

VERSUS

INDIRECT DISCRIMINATION

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DIRECT DISCRIMINATION

Direct discrimination refers to someone being treated unfairly because of a protected characteristic

Happens when someone treats you unfairly simply because of who you are

INDIRECT DISCRIMINATION

Indirect discrimination refers to someone being unfairly because of a rule or practice that would appear to be neutral

Happens when a policy or rule applies to everyone in the same way, but it disadvantages people who share a protected attribute

Disability inclusion is about culture change

Photo credits: <https://images.app.goo.gl/3Yq9oWi92acZ2G2j9> and <https://images.app.goo.gl/vq74h1od4RTJoR458>

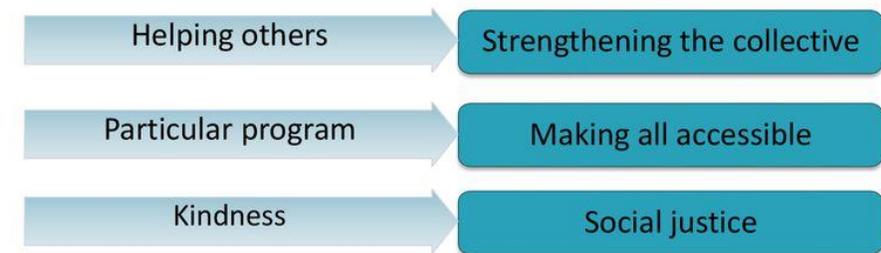
Disability Paradigms and Models and Rehabilitation Practice

Individual and Social Models of Disability

	Individual model	Social model
Explanations	<ul style="list-style-type: none"> •Personal tragedy •Individual impairment •‘Special needs’ 	<ul style="list-style-type: none"> •Social oppression/barriers •Society’s failure to meet needs of all •Intolerance of difference
Focus	<ul style="list-style-type: none"> •Inabilities •‘Lives not worth living’ •Professional control 	<ul style="list-style-type: none"> •Abilities •Valued contribution •People power

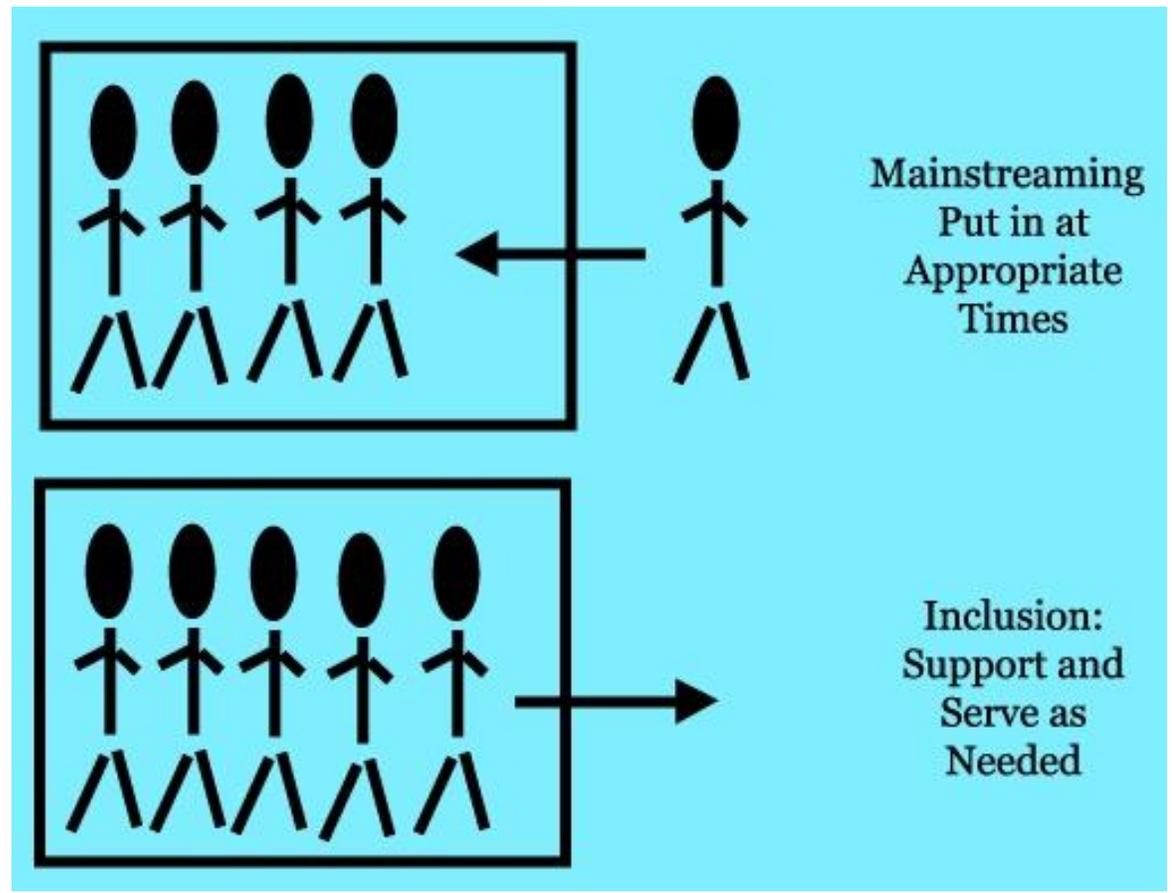
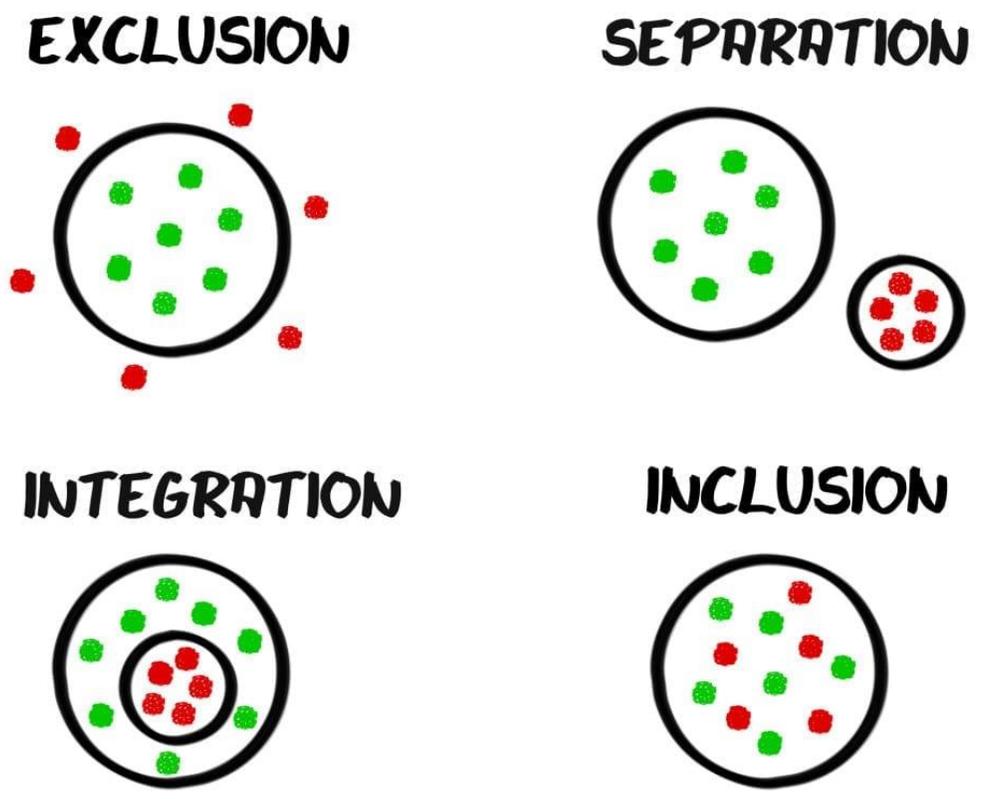
Disability Inclusion is About Culture Change

Paradigm shift:



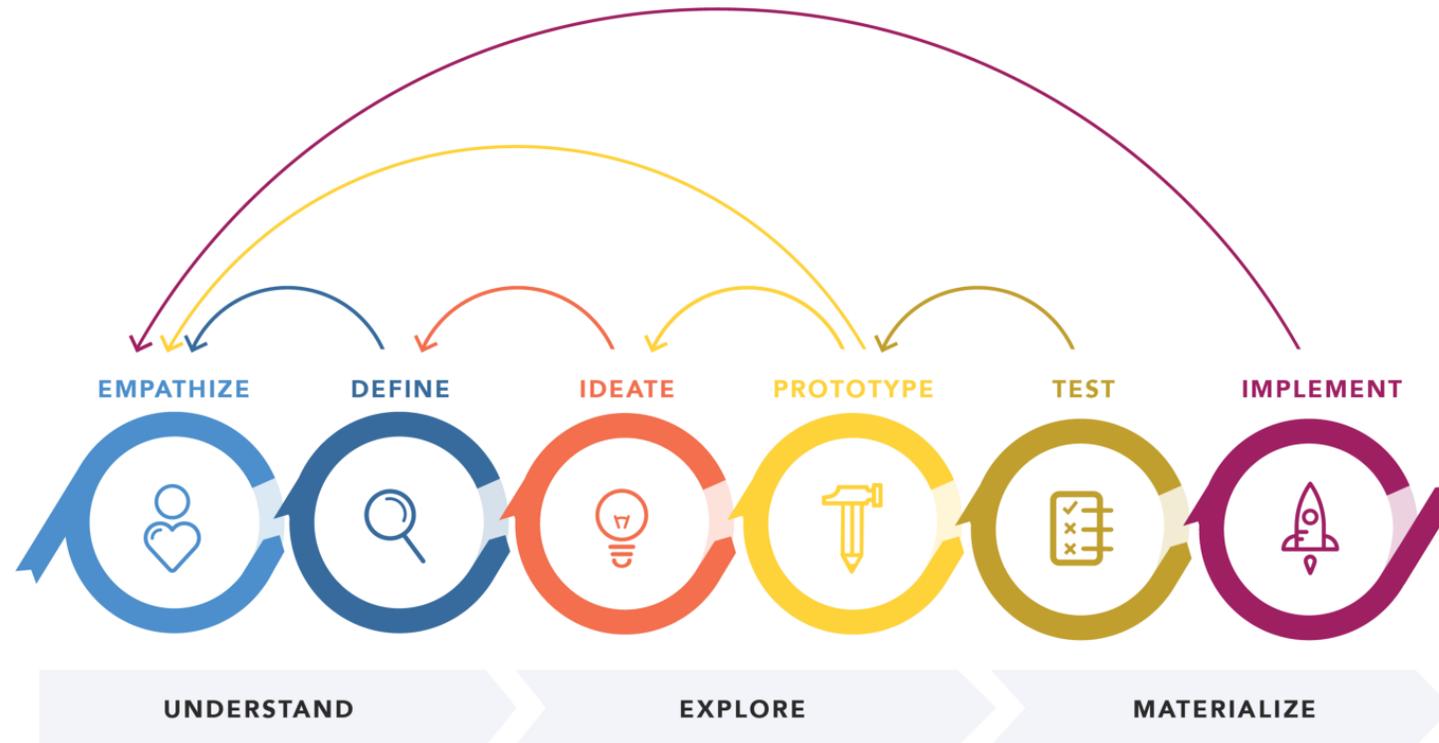
Inclusion vs. mainstreaming

Photo credits: <https://images.app.goo.gl/a5qyZStdejLvaftz7> and <https://images.app.goo.gl/1D2TMtni2CF3VCjt9>



Design thinking and Disability accessibility

Photo credits: <https://images.app.goo.gl/8yjQMSPxPyPeT33H7>

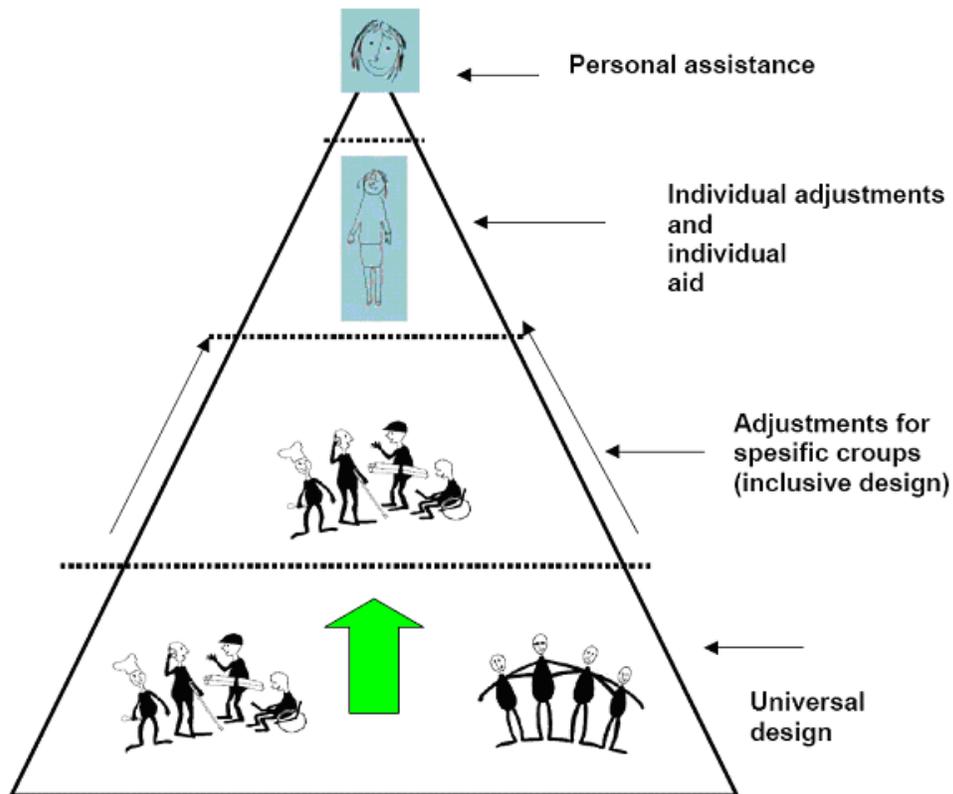




Adaptive equipment & Assistive tech

Photo credits: <https://images.app.goo.gl/qB2NYakf9qk7fEZu9> and <https://images.app.goo.gl/chwQozbui9pBjKS16>

Accessibility for all



Some Examples of Adaptive Equipment:



Durable Medical Equipment

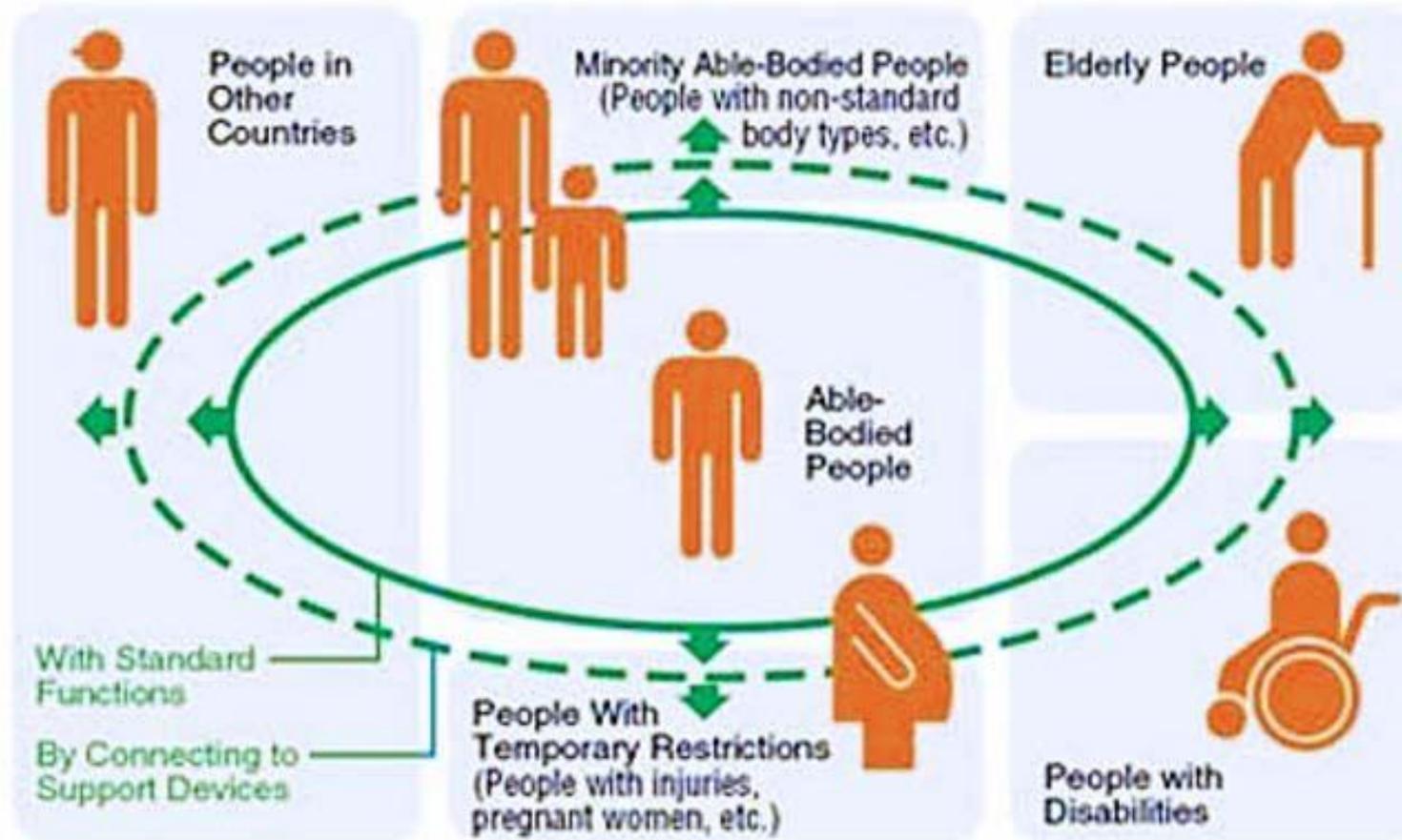
- Bath Safety – Rails and chairs
- Diabetic Supplies – Testing supplies
- Homecare Beds – adjustable, mattresses
- Power Chairs
- Scooters/Walking Aids
- Standing Aids
- Wheelchairs
- Mealtime utensils/dinnerware

Assistive Technology

- Eyeglasses or magnifiers
- Talking Dictionary, screen readers
- Switches, joysticks, foot pedals
- Eye controlled computers
- Communication Boards
- Hearing Aids
- Signaling devices, headphones
- Electronic Books, Closed Captioning

Universal design and reasonable accommodations

Photo credits: <https://images.app.goo.gl/mCv7JnSzuWXHZFsb6>



Disability-inclusive COVID-19 response in Kenya



Photo credits: <https://images.app.goo.gl/z4Kf42fWtjLSaHm7>

- Information and communication
- Health care
- Support services
- Protection strategies
- Vulnerability

1 INFORMATION AND COMMUNICATION

To ensure that people with disabilities are not deprived of lifesaving information, communication strategies should include qualified sign language interpretation for televised announcements, websites that are accessible to people with different disabilities and telephone-based services that have text capabilities for people who are deaf or hard of hearing.



2 HEALTH CARE

The Government should take all appropriate measures to ensure access for persons with disabilities to health services and provide persons with disabilities with the same range, quality and standard of health care as provided to other persons, including mental health services



3 SUPPORT SERVICES

People with disabilities who live at home often rely on community-based social support to meet their basic daily needs, including for meals and hygiene. This should be strengthened. They will also need support from professionals who will understand COVID-19 and how to ensure personal hygiene and protection. Protective gears and services will also be needed.

4 PROTECTION STRATEGIES

Governments should also consider the specific needs of people with disabilities when developing prevention strategies. For example, additional guidelines on hand washing should be developed for people with disabilities who are not able to wash their hands frequently or on their own or lack access to sufficient water for hygiene

5 VULNERABILITY

A lot of people with disabilities have other secondary conditions which make them more vulnerable to attack by diseases. Without swift action by the government to include persons with disabilities in their response to COVID-19, they will remain at serious risk of infection and death as the pandemic spreads. People who are older, people with chronic health conditions and disabilities.





Key messages (UNFPA, 2020)

- **The COVID-19 response must engage Organizations of People with Disabilities (OPDs) and networks in decision making.**
- **During COVID-19, discrimination against women and girls with disabilities increases due to social isolation, disrupted routines and if caregivers can't reach them.**
- **PWDs are 3 times more likely to receive different forms of violence than people without disabilities.**
- **To prevent GBV, PWDs should be able to use accessible hotlines, reach trusted family and caregivers, and have people who check on them to ensure their safety.**
- **During COVID-19, PWDs face discrimination and barriers to access information, education and services.**

What Can We Do?

1. Educate your entities on intersectionality/ crossroads of exclusion.



2. Become a more mindful, disability-inclusive person.



3. Make your communications more disability-accessible.



4. Identify opportunities for collaboration with the disability movement.



5. Rethink your definition of “justice”.



Disability etiquette

Photo credits: <https://images.app.goo.gl/JXEJpPrKBQ3bze6x6> and <https://images.app.goo.gl/LDMPvMeeKEjCESkE7>

You are in a unique position to shape the public image of people with disabilities. By putting the person first and using these suggested words, you can convey a positive, objective view of an individual instead of a negative, insensitive image.

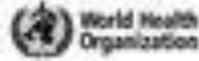
Do say	Don't say
Disability	Differently abled, challenged
People with disabilities	The disabled, handicapped
Person with spinal cord injury	Cripple
Person with autism, on the autism spectrum	Autistic
Person with Down syndrome	Mongoloid
Person of short stature	Midget, dwarf
Uses a wheelchair, wheelchair user	Confined to a wheelchair, wheelchair-bound
Has a learning disability	Slow learner
Has chemical or environmental sensitivities	Chemophobic
Has a brain injury	Brain damaged
Blind, low vision	Visually handicapped, blind as a bat
Deaf, hard of hearing	Deaf-mute, deaf and dumb
Intellectual disability	Retarded, mental retardation
Amputee, has limb loss	Gimp, lame
Congenital disability	Birth defect
Burn survivor	Burn victim
Post-polio syndrome	Suffers from polio
Service animal or dog	Seeing eye dog
Psychiatric disability, mental illness	Crazy, psycho, schizo
How should I describe you or your disability?	What happened to you?
Accessible parking or restroom	Handicapped parking, disabled restroom

HOW TO TALK TO AND ACT AROUND A PERSON WITH A DISABILITY

TIPS FROM PARENTS, CAREGIVERS AND INDIVIDUALS WITH DISABILITIES

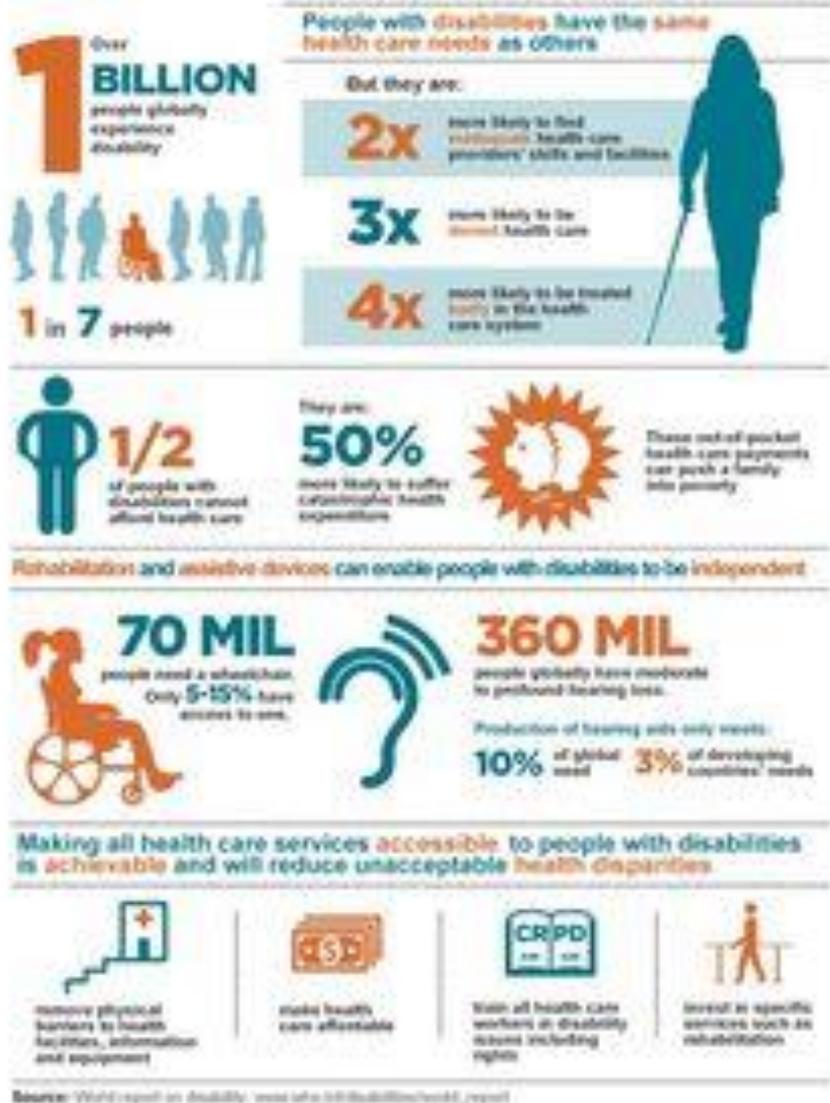
- 1. Treat them like you would anyone else. Say hi. Introduce yourself.**
- 2. Don't assume you know what they want or need. Ask them!**
- 3. No two people with a diagnosis are the same. They are all different, with unique likes, hopes and dreams!**
- 4. Never use the "r-word!" Not as a joke, an insult or to describe a medical condition. That term is hurtful and outdated!**
- 5. Ask before offering to help. They may want to do things themselves, even if it takes longer!**
- 6. Staring makes people with disabilities and their caregivers feel really uncomfortable. If you're curious, come over and say hi!**
- 7. Empathize with them (but don't feel sorry for them). Your compassion and understanding goes a long way!**
- 8. Teach your children from a very young age that differences are OK. If they point or stare, don't shush or shame them. Encourage them to say hi and get to know the person!**
- 9. Speak directly to a person with a disability—not their caregiver.**
- 10. A wheelchair is an extension of a person's body. Don't lean on it or push it without asking.**

Better health for people with disabilities



What practitioners can do

<https://images.app.goo.gl/ScZ7ymPHZs5naSGv6>



- Make all health care services all-inclusive and accessible to PWDs
- Get ongoing disability training and sensitization to reduce unacceptable health disparities
- Institutionalize, lobby and advocate for needs of PWDs
- Employ PWDs in the SUD and MH treatment and care: “Nothing for us without us”

What Ministries, Departments & Agencies (MDAs) can do (NCPWD, 2022)

- **Establish and operationalize Disability Mainstreaming Committee (DMC) with 30% representation of PWDs.**
- **Formulate Disability Mainstreaming Action Plan to ensure that staffs are informed on disability-related aspects and to empower PWDs.**
- **Sensitization and training of staff on service provision to PWDs**

What Ministries, Departments & Agencies (MDAs) can do (Continued)

(NCPWD, 2022)

- **Establish structures and systems that ensure PWDs access information and services, such as;**
 - Train staff on sign language, avail materials in Braille, ramps, signage, guides, accessible toilets, lifts with visual, audio and ductile features, non-slippery floor surface, disability friendly vehicles & walkways, accessible parking
- **Ensure progressive realization of attaining the 5% on elective, appointive, contractual of all recruited personnel in appointments, employment/promotion for persons with disabilities.**
- **Ensure no discrimination in advertising, interviewing, recruitment, volunteerism, internships, training & promotions of PWDs.**

Summary

- **Numerous access barriers exist for MH & SUDs treatment and care for PWDs; full realization of disability access needs to factor measures that are:**
 - Adequate
 - Available
 - Affordable
 - Disability accessible
 - Quality
- **Disability mainstreaming and inclusion can resolve disability inequality and discrimination as related to MH & SUD treatment and care.**
 - Individual paradigm shift; families and communities stigma eradication
 - Practitioner and institutional action
 - Disability mainstreaming indicators for all MDAs

https://youtu.be/bCRy0o_FohQ

Hotline	Services	Partner
0800 724 333 (Toll free)	Support team	NCPWD
1517 (Toll free)	helpline.kenya@unhcr.org or Kakuma: kenkaprt@unhcr.org	UNHCR
0800-000-300 (Toll free service for women with disabilities)	A PWD can register by dialing *548#USDD line https://allafrica.com/stories/202112100055.html	Mama Siri by UNFPA and This-Ability Trust (1-Nairobi, 2-Mombasa, Kisumu, Uasin-Gishu, Kilifi, Kakamega, Kwale, Kajiado)
1195 (Toll free)	GBV services	Health Care Assistance –Kenya
0800-720-565	GBV Response	Gender Violence Recovery Center
0800-730-999	Directorate of community policing, Gender and Child Protection	National Police Service
1190 (Toll Free)	GBV, HIV, SRH	LVCT Health



Hotline	Services	Partner
020 2426606	An inclusive society where basic needs and rights of all people with mental health disorders are recognized and respected.	Basic Needs Basic Rights (BNBR) Kenya
0800-720-186	Psychosocial support, legal representation, dignity packs, referrals to safe houses and health services	Center for Rights Education and Awareness (CREAW)
1199(Toll Free) or SMS "Support" to 20767	Counselling, referral, linkage	Kenya Red Cross
SMS 21094	GBV reporting	Nairobi County
0711400506	GBV Response	MSF(Nairobi)
Mobile Complaints lines: 0757-292932, 0769-710434. Landline: 041 2220468.	Watchdog on human rights violations	Kenya National Commission on Human Rights (KNCHR)





SOME DISABILITY RESOURCES

Riziki Source, Jobs for People with Disabilities

- www.rizikisource.org, SMS the word 'kazi' to 21499 at a cost of Sh1.

Uber Assist

- <https://www.uber.com/en-KE/blog/uberassist-making-nairobi-more-accessible/>

assistALL

- A Sign Language app innovation by Signs Media Kenya Limited

Apps for People with Disabilities

- <https://www.capitalfm.co.ke/lifestyle/2019/05/15/apps-for-persons-with-disabilities/>

Assistive Tech for mobile phone users

- <https://www.businessdailyafrica.com/bd/data-hub/assistive-tech-pushes-up-number-of-disabled-mobile-phone-users-3832680>

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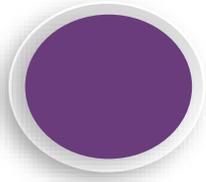
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THANK YOU

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