

Attitude of Health Personnels in Calabar and Factors Militating Against Health Care Services for Handicapped Persons in Nigeria

L.O. Ogunjimi

Physical and Health Education Unit, Department of Vocational and Special Education
Faculty of Education, University of Calabar, Calabar, Nigeria

Abstract: The study looked into the attitude of health workers in Calabar and their views on problems militating against health care services for the handicapped persons in Nigeria. All health workers in both public and private health establishment in Calabar were used as population of the study. Two hundred and sixty five health workers reacted to a 20 item validated questionnaire as subjects of the study. Simple descriptive statistical analysis such as ratio, percentage and tables were used to analyse the data collected from subjects of the study. The study revealed that health workers had negative attitude towards handicapped persons and that lack of funds and relevant health/medical equipment and facilities constituted problems in the health care services of the handicapped persons in Calabar, Nigeria. Dearth of health and medical literature in the various health care establishments was also identified as a major problem. The Study recommended attitudinal change on the part of health workers and introduction of free medical services for the handicapped persons in Nigeria. A more positive approach by members of the public especially friends and relations to the health of handicapped persons was also recommended.

Key words: Calabar, medical, equipment, health personkels, handicapped persons, statistical analysis

INTRODUCTION

Among the Social Services in national life, health care programme attracts the most of attention, propaganda and criticism. The politics of health care services hinge on the firm belief that health is wealth and so whether with genuine intention or lip service, each government wants to be seen doing something about her people's health (Moronkola, 2001). Handicapped persons (especially the mentally retarded, physically deformed, hearing impaired and visually impaired) are usually looked upon in most societies in the developing nations as cursed by the gods, misfortuned, unwanted and or unfortunate set of people.

Many health care givers who are also products and members of these societies share these negative sentiments. Some of these health workers exhibit unprofessional attitude towards the needs of these handicapped persons (Olukotun, 1994). As a result of poverty and underdevelopment, health care services are usually not within the reach of most handicapped persons. Even among the normal citizens the story is the same. The few exceptions are those from high socio economic background. Akpe (1989) pointed out that securing civil and human rights for the disabled Nigerian is one challenge that the Nigerian Society has refused to face.

The return of Nigeria to democratic rule in 1999 brought with it a ray of hope for the handicapped persons. The child Care Trust among others came into focus. The Child Care Trust was established by Chief Stella Obasanjo (Late wife of President Obasanjo) in 2001, principally to take care of health and other social needs of handicapped children. Even though the establishment of Child Care Trust had attracted goodwill and assistance from local and foreign donors, services rendered are still grossly short of the huge needs of the Nigerian Society.

The major interest of this study therefore, was to investigate the attitude of health workers in Calabar and their views on problem militating against health care services for handicapped persons in Nigeria.

MATERIALS AND METHODS

All health care workers in both public and private health care establishments in Calabar served as population of the study. Purposive sampling technique was utilized to select twenty public and private health establishment while leaving out the psychiatric and orthopedic services oriented health establishments. Equal number of public and private health institutions were utilised. They are:

- Family Health Clinic, Moore Road
- General Hospital, Mary Slessor Avenue
- University of Calabar Medical Centre
- Police Clinic Calabar , Otop Abasi
- Faith Foundation Clinic, Marian Road
- Nigerian Navy Medical Centre, Calabar
- Beecroft Health post, Calabar
- Essien Town Health Post Calabar
- Nigerian Air Force Medical Centre Calabar
- Peoples Specialist Hopsital ,IBB Way Calabar
- Immortal Medical Centre, 55 Atu Street
- Madonna Specialist Hospital, Murray Street
- Godlie Clinic, Amika Layout
- Uwanse Health Centre
- Bogobiri Health Post
- School Health Services, Ekpo Abasi
- Mevom Specialist Hospital, Calabar
- Amazing Grace Clinic, Ikot Uduak Otop
- Matanda Medical Center, Edgerly Road
- Qualitech Medical Laboratory

Sample and sampling technique: A total of 265 health workers served as subjects of the study. They were purposively selected from members of staff of the twenty health institutions used for the study. Final year students as well as Masters degree students of Health Education Programme in the Physical and Health Education Unit of the Department of Vocational and Special Education, University of Calabar, Calabar were trained as research assistants to help collate data for the study. The research assistants (ten in number) administered the validated 20 items questionnaire to all health workers met at their duty post and retrieved the questionnaire same day after completion. Some of the questionnaires were retrieved the following day from those that could not fill and return them same day.

RESULTS

Out of the 350 questionnaires administered. Two hundred and sixty five were retrieved and found treatable. They are the ones used for data analysis in this day. The study revealed that the health workers were made up of eight categories: twenty five (9.43%) of them were Medical Doctors, fourteen (5.28%) Pharmacists, one hundred and twenty two (46.04%) Nurses and Midwives, thirteen (4.91%) Dentists, twenty nine (10.94%) Laboratory Scientists, sixteen (6.04%) Radiologists, twenty one (7.92%) Medical Records Officers and twenty five (9.43%) others such as Maids, Guards, Drivers etc. Eighty eight (33.21%) of the subjects were males, while the remaining one hundred and sixty seven (66.79%) were females. The above implies that the sex distribution of the respondents is approximately ratio one to two (1:2) ie. for every male, there are two female health workers. One hundred and sixty nine (63.77%) of them have put in more than ten years of working experience, while thirty one (11.70%) of them had less than five years of working experience.

Based on the data collected from subjects of the study, the study revealed that majority of the health workers (56.33%) have negative attitude towards the handicapped persons. 63.02% of them are of the opinion that health of the handicapped persons is not as important as that of the normal persons. One hundred and fifty three (57.74%) indicated that handicapped persons are only good enough for drug trial testing and experimentation of new medical inventions. 57.36% of them would prefer separate hospitals for the handicapped persons, while 56.98% contended that handicapped persons should be banished from public gatherings and places. For detailed information on the attitude of health workers to the handicapped persons (Table 1).

Table 1: Attitude of health workers towards the handicapped persons N = 265

Items	Agree%	Cannot say	Disagree%
Health of the handicapped persons is not as important as that of normal persons	167 (63.02)	33 (12.45)	65 (24.53)
Cost of the care of handicaps is too high for any government to cope with	129 (48.68)	26 (9.81)	110 (41.51)
Reproduction must be discouraged among the handicapped person in order to reduce their population	146 (55.09)	15 (5.67)	104 (39.24)
Handicapped persons should only be used for drug trial testing and other new medical inventions	153 (57.74)	11 (4.15)	101 (38.11)
Health workers should be specially trained to meet the needs of handicapped persons	147 (55.47)	35 (13.21)	83 (31.32)
Separate hospitals should be established for the handicaps in order to remove public nuisance	152 (57.36)	25 (9.43)	88 (33.21)
Handicapped persons should be banished from public gathering/places, in order to reduce distractions	151 (56.98)	23 (8.74)	91 (34.34)
Total 1855	1045 (56.33)	168 (9.06)	642 (34.61)

Table 2: Views of health workers in calabar on problems facing the health care services for the handicapped persons in nigeria N = 265

Items	Agree	Cannot say	Disagree
Health Care facilities are not easily accessible to the handicapped persons	228 (86.04%)	7 (2.64%)	30 (11.32%)
Special equipment required for the handicapped persons are not available	167 (63.02%)	11 (4.15%)	87 (32.83%)
Handicapped persons cannot follow and use drugs as prescribed. (poor compliance)	194 (73.21%)	33 (12.45%)	38 (14.34%)
Families and friends do not take the handicapped persons to hospitals on time	183 (69.01%)	23 (8.74%)	59 (22.25%)
Poverty cannot allow handicapped persons afford the cost for their health care.	189 (71.32%)	35 (13.21%)	41 (15.47%)
There is scarcity of Medical/health literatures on the health of the handicapped in Nigeria	164 (61.81%)	43 (16.23%)	58 (21.89%)
My pre-service training programme did not include how to specially care for the handicapped.	185 (69.81%)	15 (5.67%)	65 (24.53%)
It is very difficult to communicate with handicapped patients	153 (57.74%)	24 (9.06%)	88 (33.21%)
Total 2120	1463 (69.01%)	191 (9.01%)	466 (21.98%)

While expressing their views on the various problems militating against health care services for the handicapped persons in Nigeria, majority of the subjects of the study (86.04%) indicated that health care facilities are not easily accessible to the handicapped person. 63.02% of the respondents contended that special equipment required for the health care of the handicapped persons are not available, while one hundred and eighty three (69.01%) of them confirmed that families and friends do not take the handicapped persons to the hospitals early enough. On the cost of health care services, 71.32% of the subjects of the study indicated that poverty cannot allow the handicapped persons afford the cost for their health care. 69.81% of the respondents confirmed that they were not trained on how to specially care for the handicapped persons during their pre-service training period. Additional information on problems militating against health care services for the handicapped persons is contained in Table 2.

DISCUSSION

It is disheartening and most unfortunate that very many (56.33%) of the health workers have negative attitude towards the handicapped persons. This finding is at variance with that of Moronkola (2001) who discovered that 85.14% of his subjects study exhibited positive attitude towards the handicapped persons. The implications of this finding are many, the principal among them is the fact that majority of the health workers may not be favourably disposed towards taking care of the health needs of the handicapped persons. Attitudes according to Ozoji (1993) are considered as effective tendencies expressed toward objects. Objects perceived as less important are more likely to draw unfavourable evaluations that will in turn initiate unfavourable disposition towards the objects. This revelation is not a cheering one at all. Health workers should by their position and training show mercy, understanding and empathy towards the less fortunate in the society.

Majority of the respondents (86.04%) were of the view that accessibility to health care facilities is very difficult to most handicapped persons in Nigeria. This revelation has gone a long way to confirm the views of Oloyede (1996) who recorded that majority of Nigerian population receive minimal health care. With the general poor attitude towards the plight of the handicapped persons, it is logical to infer that facilities required for their health care are grossly inadequate in Nigeria. Djukanovic and Mach (1975) also pointed out that health care services are very difficult to obtain in many developing countries as a result of shortage of health facilities.

Because of the special nature of the handicapped persons, they certainly require special/specialized equipment. The fact that these special equipment are not available makes it more difficult to cater for the health needs of the handicapped persons. Ogunbode (1994) pointed out that appropriate equipment ease nursing work and that if equipment are adequately supplied, nurses would be motivated to work and initiate prompt treatment.

On the issue of drug compliance, many of the health workers (73.21%) confirmed that handicapped persons cannot follow or use the drugs as prescribed. Moronkola (2001) contended that even though the issue of drug compliance may not be a serious factor confronting the handicapped persons in Nigeria, but that there is need to find a better way out to ensure proper drug compliance among the handicapped persons. 69.01% of the respondents were of the view that friends and family members do not take the handicapped persons to the hospital on time. This may be as a result of artificial distance created by their poor attitude towards the plight of the disabled persons. Attitude like this may prove too fatal if and when adequate care is not taken. It is important to note that mothers of handicapped persons according to Gaji (1975) must be conversant with every aspect of their children's lives. The views expressed by 57.74% of the subjects that it is very difficult to communicate with handicapped persons was ably supported by Dipietro *et al.* (1981) who confirmed that deafness often interfered with communication between the patient and the health care provider.

The fact that many of the health workers were not exposed to how they can specially take care of the handicapped persons was confirmed by 69.81% of the subjects of the study. This finding has more or less buttressed the views of American Hospital Associate (1978) that very few education and training programmes in health field provide information on deaf people and how to communicate with them. Boelen (1996) however pointed out that Comprehensive plan to re-orientate the health work force will remain the centre focus of any successful reform in the health care services. 71.32% of the respondents perceived that handicapped persons are too poor in Nigeria to be able to meet the cost of their health care. This is so obvious because the country has remained perpetually a developing nation. In spite of the oil wealth, Nigeria is still ranked among the poor nations of the world where basic infrastructures and amenities required for basic health needs are lacking. 61.89% of the respondents pointed out that there is dearth of health/medical literature on the health of the handicapped persons in Nigeria. This major problem must be tackled with all seriousness. Health and medical literature are vital

to update the knowledge of health personnel which will also help in better diagnosis, treatment and management of the health of handicapped person (Moronkola, 2001).

CONCLUSION

From this study, it was revealed that health workers had negative attitude towards handicapped persons. Health Care facilities are not easily accessible and special equipment for the special needs of the handicapped persons are lacking. Poor attitude of family members and friends ensured that handicapped person are not taken to the hospital on time, while the handicapped person themselves found it difficult to comply with drug use directives. The pre-service training programme was deficient in matters concerning the health of the handicapped person, poverty, difficulties in communication and dearth of health/medical literature were problems besetting the health care services for the handicapped person in Nigeria.

RECOMMENDATIONS

Based on the conclusion drawn from the study the following recommendations are made:

- Urgent steps must be taken to effect a re-orientation of the health work force to cater for the deficiencies in their pre-service training programme.
- Programme of positive attitudinal change must be put in place and emphasized among Nigerians
- Private and public business outfits including multinationals should be encourage to fund health services in Nigeria.
- Health policy and planning at the various levels of government should incorporate inputs from exceptional person's groups and organisations.
- Free health/medical services should be introduced for all handicapped persons in Nigeria.
- Additional researches on the health need of handicapped persons be conducted in Nigeria.
- Medical and General Libraries should be stocked with relevant and current literature on the health needs of the handicapped persons.

- Encouraging capable handicapped persons to be interested in health field. This may eventually sensitize other colleagues to be more sensitive towards the needs of the handicapped persons.

REFERENCES

- Akpe, N.F., 1989. The challenge of securing civil and human on the Occasion of the 6th Graduation Ceremony, Federal College of Education (Special) Oyo.
- American Hospital Association 1978. Twelve Communicating with Hearing-Impaired Patients.
- Boelen, C., 1996. Collaboration between Health Care Delivery and Education for Health, 9: 5-6.
- Dipietro, L.J., C.H. Knight and J.S. Sams, 1981. Health care delivery for deaf patients: The Providers role Am. Ann. Deaf, pp: 106 -112.
- Djukanovic, V. and E.P. Mach, Eds., 1975: Alternative approaches to meeting basic health needs in developing countries. Geneva: World Health Organisation.
- Gaji, F.D., 1975. Intervention strategies for mother with exceptional children in E.D. Ozoji and I.K. Nwazuo (Eds.), Professionalism in Special Education, Jos: Deka Productions Ltd., pp: 227-231.
- Moronkola, O.A., 2001. Attitude of health workers in Ibadan and their perception of problems militating against health care services for exceptional persons in Nigeria. Af. J. Vocat. Edu., 1: 198-210.
- Ogunbode, J.O., 1994. The attitude and self concept denominators in counseling visually impaired person J. Issues in Social-Psychol. Counseling, 2: 41-44.
- Oloyede, E.O., 1996. Towards a better manpower for basic health care services. J. School Health Edu., 3: 64-66.
- Olukotun, J.O., 1994. The attitude and self concept denominators in counseling visually impaired person J. Issues in Social-Psychol. Counseling 2: 41-44.
- Ozoji, E.D., 1993. Attitudinizing the special teacher J. Issues in Special Edu., 1: 87-91.
- Wyatt, H.J., 1978. You and your deaf patients. Washington Gallaudet College.