Perceptions of persons with disabilities in Nigeria towards healthcare

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Aim of study

• To assess perceptions of inclusiveness of healthcare services amongst persons with disabilities, in two areas in Nigeria

• For findings to guide planning, programme and policy formation

• To be used in conjunction with endline survey to evaluate progress on inclusion, in two pilot health facilities
Reducing avoidable blindness and visual impairment through provision of comprehensive child health services to 1.5m children in 11 Nigerian states (2017-20)

Consortium managed by CBM with Brien Holden Vision Institute

Funded through Seeing is Believing (SiB), Standard Chartered Bank’s global community investment programme
Nigeria: Cites of study

Gwagwalada

Doma
Methodology

Literature review

Quantitative data collection
• 1513 people screened; 165 people with disabilities identified to participate (75% male, 25% female)
• Household surveys – 126 respondents
• Street-based surveys – 39 respondents

Qualitative data collection
• Focus group discussions – 19 key opinion leaders
• In-depth interviews – 20 persons with disabilities, parents of children with disabilities; 2 Departmental Head of pilot health facilities
Key findings: Access to healthcare

Do health facilities you need regularly make it easy of hard for you to use them?
Key findings:
Responsiveness of healthcare

- the cleanliness in the health facility?
  - Very Good: 12.6%
  - Good: 72.7%
  - Not Good/Bad: 9.7%
- how clearly health care providers explained things to you?
  - Very Good: 6.9%
  - Good: 78.8%
  - Not Good/Bad: 9.1%
- your experience of being treated respectfully?
  - Very Good: 4.9%
  - Good: 80.6%
  - Not Good/Bad: 12.1%
- the way the health services ensured that you could talk privately to providers?
  - Very Good: 6.9%
  - Good: 72.7%
  - Not Good/Bad: 15.2%
- the ease with which you could see a health care provider you were happy with?
  - Very Good: 4.9%
  - Good: 75.8%
  - Not Good/Bad: 14.6%
- your experience of being involved in making decisions for your treatment?
  - Very Good: 3.9%
  - Good: 67.9%
  - Not Good/Bad: 22.4%
- the amount of time you waited before being attended to?
  - Very Good: 4.9%
  - Good: 51.5%
  - Not Good/Bad: 26.1%
  - Bad: 17.6%
Key findings:
Satisfaction with Nigerian health system

How would you rate the way health care in your country involves you in deciding what services it provides and where it provides them?

<table>
<thead>
<tr>
<th>Category</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Very satisfied</td>
<td>4.9%</td>
</tr>
<tr>
<td>Satisfied</td>
<td>75.2%</td>
</tr>
<tr>
<td>Neither satisfied / dissatisfied</td>
<td>13.9%</td>
</tr>
<tr>
<td>Dissatisfied</td>
<td>6.1%</td>
</tr>
</tbody>
</table>

In general, how satisfied are you with how the health care services are run in Nigeria?

<table>
<thead>
<tr>
<th>Category</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Very satisfied</td>
<td>7.3%</td>
</tr>
<tr>
<td>Satisfied</td>
<td>74.6%</td>
</tr>
<tr>
<td>Neither satisfied / dissatisfied</td>
<td>12.1%</td>
</tr>
<tr>
<td>Dissatisfied</td>
<td>5.5%</td>
</tr>
</tbody>
</table>

0% 20% 40% 60% 80% 100%
Key findings:
Attitudes of healthcare staff

Attitudes towards Disabled Persons (ATDP) score
Key findings: Qualitative

- Expectations of inclusive education and health service providers – further inclusion needed, education as key facilitator
- Understanding and satisfaction re inclusiveness of service provision – reasonable levels of satisfaction...
- .... But still barriers in accessing services
  - Financial factors
  - Socio-cultural factors
  - Attitudes of Health Care Workers
  - Communication
  - Political will
  - Structural
“When you go to the hospital, the doctors won't like to go close to them”
(Person with a disability, Gwagwalada)

“We have a good relationship with them though we have difficult ones amongst them”
(Hospital health personnel, Gwagwalada)
Conclusions, observations and learnings

• Whilst there is a reasonable degree of satisfaction, the inclusion of persons with disabilities in the study area needs improvement
• There is a gap in perceptions between people with disabilities and healthcare providers of inclusion in healthcare
• Education plays a key part in people with disabilities seeking to access healthcare
• The unexpected proves just as useful in research: the low number of women with disabilities identified in the study suggests further, gendered analysis of research methodology is needed