



## Invisible at Home and in Society: Social Exclusion Experiences of Children with Disabilities

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**Abstract.** Children with disabilities face multifaceted social exclusion across various domains of life, particularly in low-resource urban settings in Nigeria. This conceptual paper explores how children with disabilities experience exclusion within the home, school, and community. Drawing from social exclusion theory and Bronfenbrenner’s ecological systems theory, the paper critically examines the interplay of cultural stigma, poverty, gender dynamics, and institutional gaps that reinforce their marginalization. Emphasis is placed on how these factors manifest differently across gender lines and how they contribute to the invisibility of these children in both private and public spaces. The study identifies limitations in current policies, inadequate support structures for caregivers, and societal misconceptions about disability. It proposes family-centered and community-based social work strategies, including inclusive education advocacy, caregiver psychosocial support, and public sensitization campaigns. The paper concludes with actionable recommendations for social workers, policymakers, and development actors committed to disability inclusion.

**Keywords:** Social exclusion, children with disabilities, family, social work, gender

### 1. Introduction

Social exclusion has become a global phenomenon although there is no universally agreed definition or benchmark for social exclusion, “lack of participation” is a common denominator in most definitions put forth by scholars, government bodies, non-governmental organizations and others (United Nations, 2016). The term social exclusion was used for the first time by René Lenoir to refer to the situation of certain groups of people “the mentally and the physically handicapped, suicidal people, aged, invalids, abused

children, drug addicts, delinquents, single parents, multi-problem households, marginal, asocial persons and other ‘social misfits’”— whom he estimated to comprise one tenth of the population of France and who were considered vulnerable yet outside the realm of social insurance systems of the welfare state (United Nations, 2016). Persons with disabilities who are vulnerable persons suffer social exclusion on different fronts and this also includes children with disabilities. A number of the mentally challenged individuals in the Nigerian context are disadvantaged as there seems to be a general apathy and little or no attention given to the problems of their problems (Omorogiuwa, 2017).

The global discourse on disability rights has increasingly highlighted the vulnerability of children with disabilities to systemic exclusion, particularly in low- and middle-income countries. In Nigeria, where socio-cultural beliefs often stigmatize disability and infrastructural barriers persist, children with disabilities are frequently denied the right to education, social participation, and adequate care. This exclusion is even more pronounced in urban localities like Oredo LGA in Benin City, where intersecting challenges of poverty, inadequate social protection systems, and cultural stigma render many children with disabilities invisible within their families and communities. An estimated 1.3 billion people globally experience significant disability (World Bank, 2023) and the prevalence of this is higher for developing countries with about 80 percent of them living in developing countries (International Labour Organization 2015). This figure represents 16% of the world’s population, or 1 in 6 of us (World Health Organization, 2023). In Nigeria, the 2006 census put the figure of people with disability at 3, 253,169 and from this figure, the total number of women and children with disabilities are 1, 544, 418 and 1, 002,

062, respectively. If we go by this figure, then the total number of people with disabilities is approximately 2.32% of the population (140, 431, 790), with women and children with disabilities being 1.1 and 0.71%, respectively (National Population Commission 2010).

This paper explores the nature and drivers of social exclusion experienced by children with disabilities in Oredo LGA, analyzing how social work strategies can respond to these challenges and improve welfare outcomes for these children and their families.

## 2. Literature Review

Persons with disabilities are more likely to face adverse socioeconomic outcomes than persons without disabilities, such as less education, poorer health outcomes, lower employment levels and higher poverty rates (International Development Association, 2021). The Convention on the Rights of the Child was adopted in 1989 to promote, protect and fulfil the rights of all children, and is the most widely ratified human rights treaty. Although article 23 of the convention focuses specifically on the rights of children with disabilities, all the rights, guarantees and protection mechanisms established by the convention are applicable to children with disabilities. In addition, due to the principle of the indivisibility of human rights, all the rights guaranteed by the Convention on the Rights of the Child have to be read in conjunction with those enshrined by the CRPD (UNICEF, 2022a). The 2008 Tanzania Disability Survey found that children with disabilities are also fifty percent (50%) less likely than their peers without disabilities to complete primary school and progress to higher levels of education (United Nations Children's Fund, 2013). Children with disabilities are not a homogenous group. They are diverse people who have different impairments, age, sex, gender identity, sexual orientation, ethnicity, race, religious and cultural beliefs, socio-economic background, geographical location, level of education and migration status (UNICEF 2022a). There are nearly 240 million children living with disabilities worldwide, 1 in 10 of all children. Psychosocial difficulties affect the largest share of these children, across all ages (UNICEF, 2022b). Global and Nigerian studies confirm that children with disabilities are disproportionately excluded from education, play, and community life (WHO & World Bank, 2011; UNICEF Nigeria, 2021). In sub-Saharan Africa, disability is often framed within superstitious or fatalistic narratives, resulting in shame, neglect, or concealment (Abosi & Ozoji, 1985). In Nigeria, families may hide children with disabilities to avoid community ridicule or perceived dishonour. Gender adds another layer: girls with

disabilities are more likely to face abuse, be denied schooling, or lack access to assistive services.

Children with disabilities have special needs that are peculiar to their stage of development. Children with special needs are a concern for most parents, thus various coping strategies adopted to curb the challenges of having such a child is demanding, socially unbearable and stressful (Hastings et al., 2005). One of the groups of children with special needs are children with autism and they also fall under the category of children with disabilities. The coping ability of parents with autistic children possesses substantial implementation cost and presents sustainability and feasibility changes in low resources settings (Peters-Scheffer et al., 2012).

Opelusi and Omoruyi (2021) defined autism as a neuro-developmental disorder which is present from early childhood, characterized by great difficulty in communicating and forming relationships with other people and in using language and abstract concepts. The term autism also known as autism spectrum disorder (ASD) is a developmental syndrome with growing global health concern. Crane et al. (2016) averred that a health condition such as autism poses serious concern to parents than others and inferred that autism is associated with birth defects and has to do with pervasive developmental disorder often characterized by chronic impairment in social interactions and reciprocal communications that tend to be stereotyped patterns of behaviour, interest or activity.

According to the WHO (2013), autism begins in childhood and tends to persist into adolescence and adulthood. In most cases, the conditions are apparent during the first five years of life and this can be attributed to environmental and genetic factors. Children with autism are known as special children; therefore, it is required of the society and the parents to help them through this challenge to become useful people in life and discourage any form of limitations of their capacity to conduct daily activities (Opelusi & Omoruyi, 2021). Prior research by Busch (2006) clearly indicates that the demand of raising a child with autism can result in marked psychological distress for many parents (Hastings, 2008). Dobson and Middleton (1998), as cited in Jarbrink et al. (2003) estimated that the cost of raising a child with a disability is approximately three times greater than the cost of raising a child with no disability. Opelusi and Omoruyi (2021) opined that the negative consequence of this to the family may include difficulties in maintaining employment, lost leisure time opportunities, less time available for other children in

the family, and difficulty finding or paying for adequate childcare or therapy.

Research also shows a lack of capacity and coordination in Nigeria's disability and child welfare services. The National Policy on Inclusive Education (2017) and the Child Rights Act (2003) provide a framework for rights protection, but implementation remains weak at local levels (NCPWD, 2022).

### 3. Home-Based Exclusion

Caregivers of children with disabilities experience a number of challenges that include social isolation (Currie & Szabo 2020) and are often family members of the children, usually their mothers or fathers. The caring process has an impact on caregivers, including stress that negatively affects their health (Masefield et al. 2020). The family is often psychologically impacted (Coetzee 2016). There is also a greater financial burden on the family, which contributes to increased stress on the family as well as the carers (Geiger 2012). Madukwe (2012) argued that victims with physical impairments face problems from their parents, guardians, and other family members and friends due to a heavy reliance on this group for vital assistance. The distressing feeling of social isolation has consequences on children's mental health (Kwan et al., 2020).

The extra psychological, physical and financial costs of having a disability – especially in a world that is not inclusive, not accessible, and even hostile to children with disabilities – can cause stress for families, increasing the probability of family break-ups and (typically) single motherhood (Magadi and Middleton, 2007). Some caregivers, particularly mothers, report psychological distress and isolation. Extended families may withdraw support or encourage concealment. Children with disabilities are also more likely to suffer from abuse (Stalker & McArthur, 2012).

### 4. School and Community Based Exclusion

Children with disabilities have been excluded from the general education system and placed in special schools historically. In some cases, they are separated from their families and placed in long-term residential institutions where they are educated in isolation from the community, if they are educated at all. A child with a disability is almost 17 times more likely to be institutionalised than other children (United Nations Children's Fund, 2013). Children with disabilities are 25 per cent less likely to attend early childhood education, 49 per cent more likely to have never

attended school, 47 per cent more likely to be out of primary school, 33 per cent more likely to be out of lower secondary school and 27 per cent more likely to be out of upper secondary school (Jones et al., 2012).

The Global Partnership for Education (2018) estimates that 90 per cent of children with disabilities in low and lower-middle income countries do not go to school. Data also revealed that only 5 per cent of all children with disabilities worldwide have completed primary school (Peters, 2003). There are also disability related costs for learning. For instance, a child with visual impairment will require assistive devices like canes, electronic mobility aids, and reading assistance to navigate the course of his/her life, or a child with hearing impairment will require a sign instructor. Learning in schools for children with visual impairments is complicated by the lack of access to braille material, and the textbooks designed for the blind are costly for blind children whose parents are poor.

Access to preschool education is also limited, with just a quarter of children aged 0-6 years receiving the Care Dependency Grant attending a crèche or child-minding group (de Koker et al., 2006). As in many other countries around the world, children with disabilities continue to experience high levels of stigma and discrimination which is a contributory factor to household vulnerability. On reaching school age, children with disabilities continue to face considerable barriers both in accessing school and in terms of learning. Whilst the gap is closing, children with disabilities are still much less likely to attend school than children without disabilities, which has significant implications for their rates of literacy and ability to gain the qualifications needed to enter the formal labour market (Kidd et al., 2018). Children with disabilities are much less likely to progress from primary to secondary and post-secondary education and people with disabilities having on average of 2.7 years more schooling than people without disabilities (Graham et al., 2014).

### 5. Gender and Cultural Dimensions

Women and girls with disabilities face increased risk of violence and abuse, including sexual violence, gender-based discriminatory practices (UN Women, 2018). Systemic and historical marginalization as well as attitudinal and environmental barriers hinder the participation and inclusion in society of women and girls with disabilities on an equal basis with others. These barriers often lead to lower economic and social status, increased risk of violence and abuse, including sexual violence, discrimination as well as harmful

gender-based discriminatory practices, barriers in access to education, health care (including sexual and reproductive health), information and services, justice, as well as civic and political participation (ibid). The impact of diverse identities (including gender, age and disability) varies across different cultural, socio-economic and political contexts. When multiple grounds for discrimination operate at the same time, children with disabilities can be exposed to intersectional discrimination (CRPD, 2016).

Girls with disabilities experience higher levels of discrimination than boys with disabilities and children without disabilities. Twenty-three per cent of girls with more than one functional difficulty aged 15–17 years reported having personally felt discriminated against or harassed within the previous 12 months on the basis of disability or other grounds for discrimination prohibited under international human rights law, compared with 14 per cent of girls without a functional difficulty, 13 per cent of boys with more than one such disability, and 12 per cent of boys without a functional difficulty. Girls with disabilities often experience double discrimination (WHO et al., 2010). They are also at higher risk of violence, sexual exploitation and abuse (Jones et al., 2012) and are more likely to be subjected to gender-based violence (United Nations Population Fund, 2018).

## 6. Theoretical Framework

This study draws on two interrelated theoretical frameworks:

**Social Exclusion Theory** posits that exclusion results from institutional and social practices that systematically marginalize individuals or groups from participating fully in society (Silver, 1994). The process of exclusion of the Children with disabilities start at from micro level that is at the individual level that is within the family from close relatives, siblings, peer groups and so on and extends to macro level encompassing community and society at large. The repercussion of this exclusion faced from these social structures have a profound influence on the psyche of the child, ultimately shaping the relationship they share. Social exclusion enforces the social forces that prevents the children with disabilities in engaging themselves day activities thereby curtailing their active involvement in the society. Stigma and discrimination due to disability are the root cause of exclusion of the children with disabilities from the society. The pervasiveness of stigma and discrimination affecting the children with disabilities and the social exclusion from normal interaction within the society produce psychological distress for

m reflected in their accessibility to education, family life and financial aspect (Das and Joseph, 2023).

**Ecological Systems Theory:** The Ecological systems theory was originated by Bronfenbrenner (1979) who posited that human development is shaped by the interaction of an individual and the environment. The Ecological systems theory (also referred to as social ecology theory) is a framework of postulations or set of theoretical principles for understanding the dynamic interrelations along various personal and environmental factors (Ugiagbe, 2018). This theory uses the analogy of the biological ecosystem in the explanation of the relationship and interdependence of organisms in an ecosystem in the understanding of how the social ecology theory explains the interaction between individuals in an “eco-space such as human aggregation in a loci” (Aladeselu, 2021). In this context, this theory explains how a child's development is influenced by interactions across multiple systems: the microsystem (family), mesosystem (school/community), exosystem (policy/services), and macrosystem (cultural/societal norms). Children with disabilities have more complex relationships with the different systems and often find themselves excluded at different levels. Social workers can work with individuals with mental disability to resolve associated psychosocial problems and with families in which mental health problems exist in connection with social problems, such as child rearing distress, unemployment/poverty and social isolation, and educational attainment problem (Omorogiuwa, 2009).

Together, these frameworks help to unpack how exclusion is reinforced at various levels and identify leverage points for social work intervention.

### 6.1 Social Work Strategies for Inclusion

To counter these dynamics, social workers can leverage several strategies:

**Family-Centered Support:** Home visits, counselling, and parenting skills training for caregivers, especially mothers.

**Inclusive Education Advocacy:** Partnering with schools to promote universal design, disability-friendly policies, and teacher training.

**Community Engagement:** Sensitization campaigns using local media, churches, and traditional institutions to challenge stigma.

**Policy Linkages:** Helping families access cash transfers, assistive devices, or referrals through existing social protection programs.

**Child Participation:** Encouraging the voice and agency of children with disabilities in program design and feedback loops.

## 7. Conclusion

The exclusion of children with disabilities in Oredo LGA is a pressing developmental and social justice concern. Without intentional strategies that center families, challenge stigma, and strengthen service systems, these children risk remaining invisible. Social work, with its rights-based and holistic approach, is uniquely positioned to drive inclusive change. By building family resilience, transforming community attitudes, and bridging policy-practice gaps, social workers can play a pivotal role in ensuring that all children are seen, valued, and supported.

## 8. Recommendations

**Capacity Building:** Train local social workers and community volunteers on inclusive case management.

**Multi-Stakeholder Collaboration:** Engage health, education, and religious leaders in coordinated disability response.

**Policy Implementation:** Advocate for local-level enforcement of the Child Rights Act and Inclusive Education Policy.

**Research and Data:** Encourage localized studies and disaggregated data on children with disabilities in Oredo Local Government Area.

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