

Community-Based Rehabilitation in the City:

- A Case of Jamestown-Accra, Ghana

Alexander Kwesi Kassah

HiH Skriftserie 1998/13 - Harstad College



NB Rana Depotbiblioteket

Community-Based Rehabilitation in the City:

- A Case of Jamestown-Accra, Ghana

Alexander Kwesi Kassah HiH Skriftserie 1998/13 - Harstad College



HØGSKOLEN I HARSTAD

HARSTAD COLLEGE

Tittel	. Chana.	Nummer/Number
Community-Based Rehabilitati	on in the City:	1998/13
A case of Jamestown-Accra, G	hana	Sider/Pages
		17
Forfatter/Author		
Alexander Kwesi Kassah	a of Action Concerning Disabled	Personal by the
Avdeling/Department	Prosjekt/Project	the most property of the
Avd. for Helse- og sosialfag		
(Dep. of Health and Social Sciences)		

Sammendrag/Abstract

Community-Based Rehabilitation (CBR) is an important strategy in response to the United Nations' «World Programme of Action Concerning Disabled Persons» of 1982. The program is to enhance the quality of life of disabled people. In other words, enable them to look after themselves, become mobile, attend school, enjoy family life and take part in community activities. Jamestown, which is located in the city of Accra was chosen as one of the districts for CBR activities. Since the commencement of the CBR program at Jamestown, some disabled people who were kept indoors for several years were identified and given the necessary support. Despite the fact that Jamestown CBR has recorded some successes, recruitment of disabled people in the area is not easy. Problems ranging from practical to socio-cultural could account for the difficulties. How then can CBR survive?

Stikkord	Community-Based Rehabilitation, disability, Jamestown-Ghana	Key Words
ISBN	and maintain a lifestyle in which they are	ISSN
82-453-0105-1		0807-2698

HOGSKOLENI HARSTAD

Community-Based Rehabilitation in the city:

A case of Jamestown-Accra, Ghana.

ALEXANDER KWESI KASSAH

1.0 Introduction

The adoption of the «World Programme of Action Concerning Disabled Persons» by the United Nations General Assembly in 1982 paved the way for governments and people of the world to take a closer look at the living conditions of disabled people. The Program aims at providing effective measures for the prevention of disability, rehabilitation and the realisation of goals of «full participation» and «equality» of disabled persons in social life and development (UN, 1983).

Community-Based Rehabilitation (CBR) came to be recognised as a means of attaining the goals mentioned above in many developing countries, including Ghana. According to Helander, CBR is a strategy designed to meet the needs of populations which are mostly rural and have little or no access to rehabilitation services (Helander, 1992). He described CBR as a strategy for enhancing the quality of life of disabled people by providing more equitable opportunities and by promoting and protecting their human rights (Helander, 1992). The approach also seeks to resolve the problem of integration by direct involvement of disabled persons, their families, and the entire community in which they live (ILO, UNESCO, WHO, 1994). The goal of community programmes according to Peat, is to enable a person with disability to establish and maintain a lifestyle in which they enjoy equal access to social, cultural and economic privileges and opportunities (Peat, 1997).

providing effective measures for the grovention of disciplifity reliabilitation and more direction

Community-Based Rehabilitation was initiated in Ghana by the Ministry of Employment and Social Welfare in June 1992. This step was taken in collaboration with the Ministries of Health, Education and some Non-Governmental Organisations. Financial backing was given by the Swedish Organisation of the Handicapped International Aid (SHIA) and the Norwegian Association of Disabled (NAD). The World Health Organisation (WHO), the United Nations Educational, Scientific and Cultural Organisation (UNESCO) and the International Labour Organisation (ILO) were instrumental in strengthening the capacity of the Community-Based Rehabilitation Program (CBRP) through technical guidance and training of personnel (Hoel, 1996).

Community-Based Rehabilitation Programs are more often than not, designed to meet the rehabilitation needs of rural communities. In the rural communities, where everybody knows everybody else, the bonds of solidarity and the spirit of communal help is often high.

Voluntary work is thus a more welcome activity. This is to say that people easily volunteer or come together to resolve common problems, for example build latrines, till the land for farming purposes, harvest crops, to mention but few of them. In other words community members put together their resources to help members in need. Such pro-social or helping behaviour is often devoid of direct economic strings or considerations. Choosing Jamestown which is located at the city centre of Accra as a district for CBR activities, thus raises many fundamental problems. The main problem here is how can community-based rehabilitation thrive in the city? Life in the city often provides for greater individualism and a struggle for survival. Can a voluntary program based on the unemployed city poor survive?

Secondly, it seems that recruitment of disabled people may not be easy in the city. Disabled people seem to be exposed to other ways of survival in the city, for example begging. Apart

from the fact that begging in the city, provides the quickest way of getting ones daily bread and independence, it is seen by many disabled people as a less stigmatising condition and also one of the fastest ways disabled people and their families can avoid stigmatising environments (Kassah, 1998). By resorting to begging, disabled people seem to contribute economically to the upkeep of the family, thereby playing a highly valued social role. Are community-based rehabilitation programs capable of competing with the other forces in the city which pull disabled people and their families?

Qualitative interview was mainly used in the Jamestown CBRP study. Jamestown is one of the CBRP districts in the southern belt of Ghana. The area is subdivided into four sub-districts or zones. These are Akwashong, Atukpai, Sakumetsoshishie and Shuinoo. The local supervisors in charge of the zones were interviewed. Some disabled persons and their families were also visited for exchange of views on the program. Other major respondents were the project manager, the deputy project manager and the CBR agent responsible for the district. The green light for the commencement of data collection was given by the director of Social Welfare in Ghana.

2.0 Jamestown CBR

Jamestown CBR is being steered by a CBR Agent, Local Supervisors and a five man CBR committee. CBR Agents are full-time employees of the Department of Social Welfare. They have it as a duty to create awareness in their respective districts, encourage communities to establish rehabilitation committees, to support communities to improve the conditions of people with disabilities, to train volunteers in the communities or local supervisors and last but not the least inform communities about available services and opportunities.

supervisors in charge of the sones were interviewed. Some disabled nersons and their

Local Supervisors are volunteers selected by the community through the chiefs. Preferably, a man and a woman are chosen to perform this role. They are trained by the CBR Agents in simple rehabilitation techniques, for example how to complete and use registration/assessment forms and the World Health Organisation manual respectively. The Local Supervisors have it as a duty to identify people with disabilities (PWDs), assess their needs, train family members in how to support and interact with PWDs, refer PWDs and their family members to services and opportunities within the community in the form of education, skills training and health, and last but not the least discuss with CBR Agents opportunities which may exist outside the community. Family members are also trained by the local supervisors to provide ADL (Activities of Daily Living) training (O'Toole, 1996).

A Community Rehabilitation committee comprises of a disabled person or a relative, a health worker (nurse & others), a teacher (peripatetic) and a church leader or philanthropist. The responsibilities of the community rehabilitation committee are; to meet and discuss issues pertaining to people with disabilities in the community, select dedicated individuals in the community to be trained as local supervisors, include disability issues in all community development activities in the community, and to initiate activities to improve the lives of people with disabilities, and their families, and to ensure their human rights (CBR-Team, 1995).

Table 1. Disabled people in Jamestown CBR

Primary disability	Frequency	Percentage (%)	
Seeing	5	6	
Hearing/speaking	22	26	
Moving	45	53	

have	No feeling	2	2	
311.223	Strange behaviour	1	1	
3.0	Fits	5	6	
	Learning	5	6	
	Other difficulties			
e iziti	TOTAL	85	100	

CBR Agent, July 1997

The Jamestown program took off after the CBR Agent responsible for Jamestown met the chiefs and elders of the district and sensitised them about disabilities. The meeting was directed at educating them to erase the previous notions that disabilities are curses on the families and that disabled people should not be seen at public places. They were also told about the fact that disability should not be seen as sickness and that disabled people can be productive and active members of society if granted the necessary support.

As can be seen in the table 1, 85 disabled people have been registered at Jamestown. These include people with the following disabilities; seeing, hearing/speaking, moving, no feeling, strange behaviour, fits and learning. Six percent (6%) of disabled people at Jamestown have seeing disability, twenty-two percent (22%) have hearing and speaking disability, 53 percent

directed of addication them to enser the previous notions that distibilities are curses on the

have disabilities pertaining to moving, and the remaining 15 % have disabilities described as strange behaviour, no feeling, learning and fits.

3.0 Discussion

The CBR agent in charge of the Jamestown district pointed out in an interview that one of the disabled people recruited to the program was left in bed and had been indoors for the past eight years. Many have not even dreamed about the possibility of seeing the sun since wheelchairs were expensive and difficult to acquire. Neither did they have the chance to undergo therapy to enable them become mobile. Some disabled people in the area were given little or no attention, and have also not acquired «ADL» or activities of daily living training. The idea of sending disabled people to school never occurred to many of the inhabitants. The «normal» children were given greater priority when it comes to educating children in many households. In any case, there seems to be no provision in the public school system for admission of disabled children. Since the commencement of the CBR program at Jamestown, there has been an increase in awareness about the causes of disability, even though the feeling of stigma and the thought that disability is a curse for something one has done wrong in the family, has not been completely erased.

Table 2. LIFE-QUALITY OF PEOPLE WITH DISABILITIES (%)

Primary disability	No. showing improvement	% showing improvement	
Seeing	ther being regi 1 and as active a	1,0	
Hearing/speaking	15	17,7	
Moving	28	32,9	
No feeling	nat communitie <u>s satural not naco</u>	0,0	

The idea of sending disabiled neople to wingel never occurred to many of the interbillates. The

	4,7
	4,7
	0,0
2 6	1,0

CBR Agent, July 1997

With the help of the local supervisors, some disabled people were identified and given the necessary support. This is to say that efforts have been made to improve the quality of life of some of the disabled people who joined the program. According to the CBR agent responsible for Jamestown, 52 of the 85 disabled people have admitted having some improvement in their daily lives after joining the CBR program. Some could now take part in household chores (sweep the house and wash dishes), and walk around on their own. One boy who hitherto could not walk has not only learnt to walk but also learnt to ride a bicycle. It was also made possible for some others to acquire wheel chairs, which means that they could move around freely in the community, an important element of Community-Based Rehabilitation Program. Some have gained admission into public schools while others have gone into trades, some of which are socially devalued, or place them in low status roles, for example shoe repairing. In short, many of them have started doing things they could not do earlier. Table two gives an insight into the percentage of disabled persons showing improved quality of life or have met some of their needs after being registered as active members of the Jamestown CBR program. Even though CBR seems to be doing relatively well at Jamestown, the program is far from realising its goals. The first problem is a practical, organisational or rather structural one. Poplin, pointed out that communities differ not only in terms of uniqueness, but also in terms

Strenge behaviour

Learning

Compared difficulties

Compared difficu

some of the disabled prosjetevite joined the prophers. Accertangle the CRR agent connected for Impervented in their for Impervented in their daily lives attenfoliums the CRR engines. Some called now man pure impervented interest (average the boune; sod week distinct), and walk ascept on their boune; sod week distinct), and walk ascept on their boune; sod week distinct), and walk ascept on their boune; sod week distinct, and walk ascept on the boune; so the respective forms only found to walk be asked to property. It was also made outle and walk for some their sense and others are and others wheek distinct and of Commency Based R should make ascent for graphy in the forms and a sense at the property of the response of the sense of the se

realizing its goals. The first problem is a provided a regardinary at the first state of the sta

of variations in ideology (Poplin, 1972). Taking into consideration the variations, Borkensha and Hodge suggested, that the type of social relations within community should determine the choice of interventions that may be used (Borkensha and Hodge, 1969). The Jamestown project is cited in a city community, but based on the principles characteristic of rural communities. Locating CBR at Jamestown seems to contradict Helander's view, that Community-Based Rehabilitation is to serve people in the rural areas with little or no access to rehabilitation services (Helander, 1992). Tönnies' Gemeinschaft/ Gesselschaft dichotomies may be to some extent of analytical significance here, especially in pointing out the need to take seriously variations in society (Tönnies, 1957). This is also to avoid planting strategies meant for rural communities on the city communities. Despite the criticisms levelled against the dichotomies, it cannot be denied that the rural communities and city communities are characterised to some degree by unique behavioural patterns. While excessive individualism, impersonality, acquisitiveness and rational calculativeness are said to constitute noncommunal relations, communal relations seem to be characterised by a high degree of intimacy, emotional depth, moral commitment, social cohesion, and continuity in time (Nisbet, 1994). Care must therefore be taken when models meant for the rural community are to be applied to the city community. One special difference is that city dwellers and rural dwellers operate with different forms of solidarity. While many in the rural communities may operate to some degree with what in Durkheimian terms could be referred to as mechanic solidarity, many city community members may operate to a greater extent with organic solidarity (Durkheim, 1893). This implies also that the premises for survival of CBR in both communities differ, so are the daily challenges. While many city poor find themselves in an ongoing struggle for survival and have little or no time for voluntary activities, their counterparts in the rural communities might have a more accommodating attitude towards

the dichotomies, it cannot be denied that the mital communities and city containable

voluntary activities. The emphasis here is that pro-social and solidaric behaviour is more characteristic of rural communities as against the city community. Pro-social behaviour in the city is often less characterised by the fact that people readily help others without attaching economic strings. Apart from the poor incentives attached to the CBR agent role, Jamestown CBR is overdependent on the goodwill of community members for the implementation of the program. While the CBR agents are full-time paid government employees, the Local Supervisors, who do the most difficult task of recruiting the participants receive no payment for their efforts. The model of reaching people with disabilities based on the conception that all communities constitute units for voluntary social action, is problematic. Following Helander, the community spirit is not easy to identify in this setting (Helander, 1992). This problem may be compounded by the waning trust between the CBR Agents, Local Supervisors and Rehabilitation Committee members. Due to the fact that the CBR program is financed by foreign non-governmental bodies, there is the tendency on the part of the volunteers to develop some form of mistrust. The suspicion that the CBR Agents and other government officials may be depriving them of what is due them, is ever present. A politics of mistrust could dampen the spirit of the Local Supervisors in their efforts to help their disabled people. Simply the city community members see their role in the program as worth some economic remuneration. Development of mistrust as a result of not considering their roles in the program in economic terms may ruin the program. The city poor, unlike the rural counterparts seem to operate with a different form of economic rationality and hardly accept the idea of working without any form of remuneration. Social cohesion exists in the city community, but unlike the rural communities, it does not necessarily make solidaric action easy.

problem may be enumpounted by the waning fents between the CER Avenue. Local actual

Another major problem is how to recruit disabled people to the program. According to an informant, it is difficult to get those responsible for the disabled to come out readily and be part of the program. Further, local supervisors being community members are not unaware of the social consequences of exposing families with disabled members. In the first place, parents or relatives of disabled people are still being haunted by what Goffman refers to as courtesy stigma (Goffman, 1963). This is the case because many still feel ashamed of being parents or close associates of disabled persons. In other words parents of disabled people, are still looked down upon by members of the community (Kassah, 1998). Many will rather not disclose the fact that they have a disabled child to avoid stigmatising themselves and the rest of the family. In Ghana many people still find it difficult to choose their marriage partners from a family which has a disabled member. The knowledge after marriage that a partner has a disabled family member may easily result in divorce. It therefore takes the agents much time to identify people with disabilities and give them the necessary support.

Recruitment to the program is also dependent on the past experiences from similar programs. Many disabled people who have acquired training at rehabilitation centres do not put their knowledge to use. According to the CBR agent, it is not enough to train and give tools. What happens after acquiring skills? Apart from the fact that disabled people are pushed into «socially devalued roles», borrowing Wolfensbergers terms, that is, in low status trades, initial capital is needed to get them started after acquiring the skills(Wolfensberger, 1992). They do not only need a place to live and enjoy family life without interference from family members, but also a place to practice their trade, money to buy the initial inputs like raw materials and tools. The point here, is that the majority of people who live in the community are poor, parents of disabled people inclusive. Most of them can neither pay the admission fees nor the graduation fees, let alone rent a store or purchase the needed tools to enable their wards

from a family which has an isolated member. The lenew later mannage that a partner has

practice the trade they have learnt in the city. The individualistic nature of many people in the city which is encouraged by the struggle for survival make it difficult for community members to pull resources together to provide the things needed for sustaining community based rehabilitation efforts. The thought of acquiring knowledge that can only be put on the shelves, kicks off many disabled people and their families from joining the program. The above point is strengthened by what a disabled man who has a wife and seven children said. He pointed out, that even though he graduated at one of the rehabilitation centres, he had to go begging because of lack of financial support to practice his trade. «There is therefore no need learning trade that cannot be put to use», he lamented. These experiences can to a large extent have a discouraging effects on those who are being convinced to join the program.

Disabled people in the city are open to other opportunities as compared to their counterparts in the rural communities. Begging is one of the major opportunities open to many disabled people in the city. While begging for instance is not frowned upon by many city dwellers, it is associated with shame or stigmatised, a condition which labelling theorists refer to as "difficult to reverse" (Friedson, 1970; Albrecht et al, 1982). People who are so labelled in the rural communities, unlike their city counterparts become victims of society and subjected to strict formal and informal sanctions. Begging does not only constitute the fastest and easiest way disabled people can adjust to the hard conditions in the city, it offers the disabled person the chance to improve upon his "spoilt identity" (Goffman, 1963). The rich in all human societies are often revered and many disabled people who have acquired some wealth are no exceptions. Begging may uplift the person's image in society. This however may have negative consequences or may constitute a great threat to recruitment of disabled people to CBR programs in the city. Begging in the cities, seem to constitute a pull factor or a centripetal force which easily attracts disabled people to the city centres. Rumours that

Disabled neonle in the city are open to other opportunities as compare to liters couplings in

begging is lucrative in the city makes it difficult for disabled persons in the city to get involved in CBR activities (Kassah, 1998). These rumours are compounded by the fact that some rich family members capitalise on the situation and exploit disabled people. It was pointed out by one informant that, some rich people buy wheelchairs for some disabled people and put them in the streets to beg. Wheelchairs are expensive (about 600000 Ghanaian cedis/2000 Norwegian kroner) and are beyond the budget line of most disabled people. Another side of the issue is the general attitude of Ghanaians towards disabled people in the city. Many are most often than not full of pity and readily give alms to beggars who parade the streets. This behaviour cannot be explained only by their sympathetic view of disability, but also by their traditional and religious beliefs which are deeply rooted in the social structure. In any case the sympathy stems from their beliefs that the living, the dead and the yet to be born play active roles in the Ghanaian's daily life (Sarpong, 1974). The ancestors or the dead have the responsibility of rewarding or punishing the living when they do good and bad respectively. In the rural areas people keep their disabled people at home, and try to do their best for them until they retire to their graves. By so doing, they avoid punishment from their ancestors and gods, of which sending them another disabled child, and bareness in the family are considered as some of such punishments. This caring behaviour, it seems, is imported into the city and manifests itself in a form of readily giving alms to disabled people in the street. Accra is a hetero-religious city and many inhabitants of the city may best be described as notoriously religious and often combine traditional religious activities with the imported ones. Giving of alms may often be seen in terms of receiving blessings from God. The teachings of the Koran, also seem to reinforce this behaviour, since giving alms is encouraged.

emoure. In any case the sympathy sums from then beliefs that the living, the deal and the

Can the preference of begging be explained in economic terms? Some of the beggars, according to an informant, are well to do economically, and some even own taxies, but could still be found at strategic places in the city begging. An informant pointed out that on one occasion, officials of a non-governmental organisation went into the streets to discourage some of these people from coming back to the streets by giving them huge sums of money, but to their surprise found them back to base after some few days. It can therefore be said, that it is not necessarily the desire to get rich which is paramount to their decision to be on the streets begging. Rather, this phenomenon could be explained in terms of an acquisition of a new identity which is attached to the new role as beggars. Many find out that begging which has hitherto been a taboo and strictly sanctioned, is an acceptable way of life. In the streets, many disabled people interact with others who do not consider begging as stigmatising. Feelings of stigma is also reduced as a result when disabled people experience that they are no longer dependants, but productive members of the family. Their social needs also seem to be met as a result. In other words, they seize to be reduced to the four walls of their rooms, waiting although sometimes in vain, for their daily bread. Given the above, it is not easy for many disabled people to join programs that restrict them from begging activities. The last but not the least factor in favour of begging is the fact that a majority of disabled people in the city are engaged in begging activities, meanwhile plans have not be made to include them in the program. Jamestown is the only area chosen in the Accra area to participate in the program. Other communities in the city have therefore been left out of the program. As mentioned already, those who are outside the program may serve as bad influence on those in the program. While those participating in the project are forbidden or

many distribute service another with others who do not consider become as electrical and

fired when seen begging, a large percentage of disabled people are not bound by this sanction.

The minority who are members of the program may easily fall victim to the desires to beg.

4.0 Summary

CBR is an important strategy to enable disabled people to live an improved life quality. The Jamestown CBR has made it possible for some disabled people to move around, go to school, learn trade and participate in social activities in the district. The program is however burdened with structural problems. The program has been initiated making limited room for city/rural dichotomies, even though research has been very critical of planting plans from one unit onto another. Jamestown CBR is based on the fact that people readily give help without expecting reward in the cities, a phenomenon which is often the case in rural communities. Even though the program seems to be doing well, de-stigmatising effect of begging in the city will continue to threaten recruitment of disabled people in the city. How then can CBR survive?

fired when soon begging, a large percentage of disabled people are not bound by this sanguage.

4.0 Summer

CHR is an important strategy to enable disabled people to live an improved life quality. The lamestown CHR has made at possible for some disabled people to move account. So to school, learn trade and participate in account activities in the dispirat. The program to however burdered with structural problems. The program has been initiated making limited from the city/rural dichotomies, even though research has been were critical of planting limited from the city/rural another. Jamestown CHR is thised on the last team very critical of planting plants from age and catto the reward in the cities, a phageinesion which is often the case in tural communics. But although the program seems to be doing well, destrigationsing effect of begging in the city will reaching the program seems to be doing well, destrigationsing effect of begging in the city will reaching

References:

- 1. United Nations, World Programme of Action Concerning Disabled Persons, 1983, New York, USA, 1983.
- 2. Helander, E, Prejudice and Dignity: An introduction to Community-Based Rehabilitation, 1992, UNDP, Geneva, Switzerland.
- 3. International Labour Organisation (ILO), United Nations Educational Scientific and Cultural Organisation (UNESCO), World Health Organisation (WHO), (1994), Joint Position Paper on community based rehabilitation for people with disabilities. Geneva: WHO.
- 4. Peat, M. Community Based Rehabilitation, Saunders Company Ltd., Great Britain, 1997.
- Hoel, V. The Community Based Rehabilitation Programme in Ghana, Norges Handikapforbund, 1996, Oslo, Norway.
- 6. Kassah, A. K., Community-Based Rehabilitation and stigma management by physically disabled people in Ghana, In Disability and Rehabilitation: An International Multidisciplinary Journal, 1998; 20 (2):66-73. Taylor & Francis Ltd. London, UK
- 7. O'Toole, B., Participatory Evaluation Report: Ghana Community-Based Rehabilitation Programme, April, 1996.
- 8. CBR-Team, Draft progress report and additional information for UN/NAD-SHIA Mission to Ghana, 1995, Accra, Ghana.
- 9. Poplin, DE., Communities: A survey of the theories and methods Research. Macmillan Company, New York, 1972.

- 10. Borkensha, D. & Hodge, P. Community development: An interpretation. In social and economic development, Chandler Publishing company, San Francisco, California, 1969.
- 11. Tönnies, F., Community and Society, Harper & Row, New York, 1957.
- 12. Nisbet, RA, The sociological tradition, 1994, Transaction Publishers, London, UK
- 13. Durkheim, E., The division of labour in society, London: Macmillan, 1984.
- 14. Goffman, E. **Stigma: Notes on the management of Spoiled Identity.** 1963, Prentice-Hall Inc., New Jersey
- 15. Wolfensberger, W, A brief introduction to social role valorization as a high-order concept for structuring human services, 1992, Syracuse, USA.
- 16. Sarpong, P., Ghana in Retrospect: Some aspects of Ghanaian Culture, 1974,Ghana Publishing Corporation, Accra-Tema, Ghana.
- 17. Friedson E. **Profession of Medicine: A study of applied knowledge**. New York: Russel Sage, 1970.
- 18. Albrecht GL, Walker VG, Levy JA. Social distance from the stigmatised. Soc. Sc. Med. 1982; 1319-1327.

 Borkensha, D. & Hodge, P. Community development: An interpretation, in social and economic development, Chardler Publishing company, San Francisco, California, 1969.

11. Tonnies, F., Community and Saciety, Harper & Row, New York, 1917.

RAS The sectological tradition, 1994, Transaction Publishers, London, UK

13. Durkheim, E. The division of tabour in society, London: Mannellan, 1984.

14. Goffman, E. Stigmus Norws on the management of Spoiled Edentify, 1967, Promise

15. Wolfensbergen, W. & brief introduction to soils! role sujertaition as a kigh-order

concept for structuring human services. 1992, Symouse, USA.

16, Sapong, P., Chana in Itetrospect: Same aspects of Chemples Criticity, 1974,

Ghana Publishing Corporation, Accar-Lerea, Chana.

17. Friedson E. Profession of Madicines A study of applied imowledge, New York Eustel

Sage, 1970.

18. Albrecht GL, Walker VG, Levy 1A. Social distance from the dispusational Soc. Sc.

Med. 1982: 1319-1327

Biographical details

Name: Kassah Kwesi Alexander

Educational background: BA Hons. (Sociology) University of Ghana, Legon (1986).

Cand. Polit. (Community Planning), University of Tromsø (1992), PhD. Candidate,

Department of sociology, University of Tromsø (from 1997....).

OCCUPATION: LECTURER, Department of Health and Social Science, Harstad College,

Harstad, Norway.

Publications: Community-Based Rehabilitation and stigma management by physically

disabled people in Ghana, In Disability and Rehabilitation: An International

Multidisciplinary Journal, 1998; 20 (2):66-73. Taylor & Francis Ltd. London, UK

Biographical details

Namer Kassah Kwesi Alexander

Educational backgrounds BA Hons. (Sociology) University of Chena Lugan (1986)

(_TOU | mail name The university varieties in resentance)

OCCUPATION: I.ECTURER, Deparatest of Health and Social Sciuntis, Finnshill College

Harstad, Norway.

Publications: Community-Based Rehebilisation and edgma management by physically

disabled people in Chena, in Disability and Schabilitations An Internalisasi.

Multidisciplinary Journal, 1998; 20 (2):55-73, Taylor & Prancis Ltd., Lendon, UK.



Publikasjonsliste fra Høgskolen i Harstad

Fra og med 1996 ble tidligere publikasjonsserier ved Høgskolen i Harstad erstattet med en **Skriftserie** og en **Arbeidsnotatserie**.

Skriftserien - ISSN 0807-2698

- 1998/14 Alexander Kwesi Kassah: «The Community Idea» (ISBN 82-453-0107-8) Kr. 50,-
- 1998/13 Alexander Kwesi Kassah: «Community-Based Rehabilitation in the city: A case of Jamestown-Accra, Ghana» (ISBN 82-453-0105-1) Kr. 50,-
- 1998/12 **Kjell Toften:** «Chain Integration in the Norwegian Hotel Industry industry overview, causes, and some strategic implications (ISBN 82-453-0104-3) Kr. 50,-
- 1998/11 Baard Borge: «NS' mange ansikter: Innholdsanalyse av et propagandaskrift fra 1944» (ISBN 82-453-0103-5) Kr. 70,-
- 1998/10 Truls Erikson: «Entrepreneurial Capital The Emerging Venture's Most Important Asset & Competitive Advantage» (ISBN 82-453-0098-5) Kr. 40,-
- Anne Marit Bygdnes: «Toalett-trening av mennesker med psykisk utviklingshemming. En teoretisk drøfting og et empirisk bidrag». (ISBN 82-453-0097-7) Kr. 120,-
- 1998/8 Tanja Susann Ihlhaug/Leif Hugo Hansen: «Medbestemmelse eller mer bestemmelse? bruker lederne de tillitsvalgte?» En undersøkelse om ledelsesatferd og ansattes medbestemmelsesrett i kommunal virksomhet i Troms Fylke. (ISBN 82-453-0096-9) Kr. 90,-
- 1998/7 Kjell Toften: «Express Reiser Scandinavian Package Tour Industry» (ISBN 82-453-0095-0) Kr. 40,-
- 1998/6 Stein Mikkelsen: «Safe Community Symbol and Co-operation. A study of inter-sectoral co-operation and development in a Norwegian community» (ISBN 82-453-0094-2) Kr. 50,-
- 1998/5 Truls Erikson: «A Study of Entrepreneurial Intentions Among a Cohort MBAs The Extended Bird Model». (ISBN 82-453-0093-4). Kr. 50,-

Publikasionsliste fra Hægskalen i Harsige

Fra og med 1996 ble tidligere publikasjonsserier ved Hogskoken i Harstad erstattet med en Skriftaerle og en Arbeidsnotatserie.

Skriftserien - ISSN 0807-2698

1998/14 Alexander Ewest Kessahn «The Community Idous (ISBN 82-453-0107-8) Kr. 50.-

1998/13 Alexander Koresi Educator «Community-Based Rehabilization in the city:

A case of ferrostown-Acers, Change (ISBN 82-453-0105-1) Kr. 50.

998/12 Kjell Toffen: «Chain integration in the Norwegian Motel industry—industry
overview, causes, and some strategic implications

998/11 Beard Borger des mange annihur: Inchaldsemskys av et propagatisk fill.

1998/16 Trule Endson: «Butteproneivial Capital - The Emitaging Venture's Most Important Asset & Commettides Advantages
Inspect 22-253-0098-31-30, 40-

1998/9 Anne Marii Bygdness «Tooleti-troning av menneskor nied payliisk utviklingehemming. En feoreask droning og et enquisk bidrage...

8898

Tanja Sussan Ilibare Haga Huga Huga Huga de Sesanasta de Sesanas

1998/7 Mijoli Tofren: «Li-spress Reiser - Spandinavian Paologe Tow Industry» (1981/192-193-1995-0) 15: 40.-

Trals Erritgon: von Study of Entreprenousal Information
Among a Cohort MSAs - The Extended Bird Madely.
VISBN 82-453-0093-4), Kr. 30-

1998/4	Arild Wikan: «4 Periodicity in Leslie Matrix Models with Density Dependen Survival Probabilities» (ISBN 82-453-0092-6) Kr. 70,- Arild Wikan: «Dynamical Consequences of Reproductive Delay in Leslie Matrix Models with Nonlinear Survival Probabilities» (ISBN 82-453-0091-8) Kr. 70,-					
1998/3						
1998/2	Terje Thomsen: «Gruppeintervjuet - avgrensing, anvendelse og anvisning» (ISBN 82-453-0089-6) Kr. 50,-					
1998/1	Alexander Kwesi Kassah: «Community Based Rehabilitation and Stigma Management by Physically Disabled People in Ghana». (ISBN 82-453-0088-8) Kr. 50,-					
1997/17	Tore L.Jensen: «Interorganizational Governance Structure and Outlet Economic Performance». An Application of Accounting Data in Interorganizational Performance Measurement. (ISBN 82-453-0088-8) Kr. 110,-					
1997/16	Tore L.Jensen: «En analyse av ukedagseffekter i futuresmarkedet for elektrisk kraft». (ISBN 82-453-0086-1) Kr. 50,-					
1997/15	Baard Borge: «Krig, oppgjør og nasjonal konsensus - Etterkrigs- oppgjørenes sosiale virkninger i Nederland, Danmark og Norge». (ISBN 82-453-0084-5) Kr. 50,-					
1997/14	Tore Einar Johansen: «Myter og virkelighet om samer - 'de e forskjell på folk og finna'» (ISBN 82-453-0083-7) Kr. 40,-					
1997/13	Eli Samuelsen: «Den besværlige tiden» - Betraktninger om praksisopplæringen i sykepleierutdanningen (ISBN 82-453-0082-9) Kr. 50,-					
1997/12	Eli Samuelsen: «Du er ikke verdig en plass i herberget - Refleksjon over etikk og etiske vurderingers plass i sykepleien» (ISBN 82-453-0081-0) Kr. 50,-					
1997/11	Vegard A. Schancke/Miriam G. Lukwago: «A Programme for Early Intercultural Psychosocial Intervention for					
	Unaccompanied Minor Asylum Seekers and Refugees (EM) - a Group Approach» (ISBN 82-453-0080-2) Kr. 50,-					
1997/10	Hilde Nordahl-Pedersen: «Alternativ medisin og skolemedisin - en paradigmediskusjon» (ISBN 82-453-0068-3) Kr. 50,-					
1997/9	Inger Aksberg Johansen: «Reminisens i et interaksjonsperspektiv - En kvalitativ undersøkelse basert på intervju med eldre og sykepleiere» (ISBN 82-453-0079-9) Kr. 120,-					

1997/8	Aud Merethe Alme: «Lønnsreform og ledermobilitet - Metodiske tilnærminger og resultater» (ISBN 82-453-0078-0) Kr. 70,-
1997/7	Truls Erikson: «Should Managerial Competence be in the Retail Growth Performance Equation?». (ISBN 82-453-0076-4) Kr. 50,-
1997/6	Børre Kristiansen/Steinar Johansen: «Rammer for omsorg - Alternative modeller for organisering av Hamarøy Bygdeheim» (ISBN 82-453-0071-3) Kr. 70,-
1997/5	Truls Erikson: «Retail Profit Performance and The Relationship to Marketing Outcomes and Financial Structure» (ISBN 82-453-0075-6) Kr. 50,-
1997/4	Rolf Utkvitne: «Kompetanse i Detaljhandelen». (ISBN 82-453-0064-0) Kr. 70,-
1997/3	Hilde Nordahl-Pedersen (red.): «Konferanserapport fra Helsedagene i Nord-Norge 1996». (ISBN 82-453-0069-1). Kr. 150
1997/2	Truls Erikson: «A Study of Career Choice Intentions Among a Cohort HBS MBA Candidates. The Ajzen Model». (ISBN 82-453-0074-8). Kr. 70,-
1997/1	Truls Erikson: «An Empirical Study of Entrepreneurial Choice Intentions Among a Cohort of MIT Sloan Fellows. The Shapero Model». (ISBN 82-453-0072-1) Kr. 50,-
1997	Stine Margrethe Hem/Ådne Danielsen/Anne Marie Bakken: «Ansvarsreformen i Kvæfjord - En stor oppgave til en liten kommune». (ISBN 82-90586-49-3, i samarb. med Diaforsk) Kr. 190,-
1996/1	Arne-Johan Johansen: «Fra Dårekiste til normalisert omsorg». (ISBN 82-453-0063-2). Kr. 100,-
Arbeidsn	otatserien - ISSN 0809-2567
1998/1	Anne Marit Bygdnes: «Toalett-trening av psykisk utviklingshemmede (ISBN 82-543-0099-3) Kr. 70,-

Aud Merethe Alme: «Prosjektskisse: Tjenestemannsorganisasjoner

Truls Erikson: «Applying the Canonical Structure of Analysis be

Means of Algebra on Managerial Competence and Retail Growth

og forvaltningsreformer». (ISBN 82-453-0085-3) Kr. 50,-

Performance Variables». (ISBN 82-453-0077-2) Kr. 40,-

1997/2

1997/1

Bestilling av publikasjoner

Jeg bestiller he	erved:			
Navn på serien	Nummer	Forfatter	Tittel	Pris
Ved samlet kjøp over l	kr. 500 dekker H	øgskolen i Harstad por	rto/frakt - ellers kommer	porto i tillegg.
Postnr. /sted:				
		Fax		

Vennligst fyll ut skjemaet og returner til:

Høgskolen i Harstad, 9400 Harstad Tlf.: 77 05 81 00 Fax: 77 05 81 01





Visste at...

... Høgskolen i Harstad med sine ca 1.000 studenter er blant landets minste høgskoler. Et godt studiemiljø og en uformell tone med nærhet og god oppfølging av den enkelte student preger skolen. Ved årsskiftet 1996/97 flyttet vi inn i nye lokaler som ligger idyllisk og sentralt plassert ved byens havnepromenade.

... våre to fagavdelinger - økonomi-/samfunnsfag og helse-/sosialfag gir flere studiemuligheter blant ulike grunnutdanninger og videreutdanninger:

Grunnutdanninger:

- Varehandel og distribusion
- Økonomi og administrasjon
- Reiseliv og turisme
- Engelsk grunnfag
- Statsvitenskap grunnfag
- Barnevernpedagogutdanning
- Sykepleierutdanning
- Vernepleierutdanning

Videreutdanninger:

- Revisjon
- Internasjonal handel
- Ledelse og organisasjon
- Helse- og sosialadministrasjon
- Rehabilitering
- Psykiatrisk sykepleie
- Reiseliv og turisme

...foruten ordinære undervisningsoppgaver og kurs påtar Høgskolen i Harstad seg også forsknings- og utredningsoppdrag for næringslivet og det offentlige. Våre ca. 60 fagansatte innehar høy kompetanse og dekker et bredt faglig spekter: Økonomi/administrasjon, sosialøkonomi, ledelse/organisasjon, statistikk, statsvitenskap, sosialantropologi, sosiologi, engelsk, matematikk, pedagogikk, spesialpedagogikk, vernepleie, psykologi, sykepleievitenskap, matematikk, jus.

Post- og besøksadresse: Havnegata 5, 9400 Harstad Telefon 77 05 81 00. Telefaks 77 05 81 01 Internett: http://www.hih.no



