## Accessibility of Public Spaces: Case Study of Ikeja, Lagos State, Nigeria

### David Olalekan Akinpelu, Senem Zeybekoglu Sadri

Girne American University

**ABSTRACT:** This article is about people with different capabilities. It engages with the theoretical framework of the social model of disability about how disability and ageing issues should be considered. In doing so it pays particular attention to the accessibility of the built environment.

Disability will affect the lives of everyone at some point in their life, it is time society change to acknowledge this, with the ageing population and the prevailing increases in the number of the physically disabled people, public building, community design and other environmental barriers must be re-examined. Owing to this basic knowledge that the scholars and newspaper world regards "the aged" and "the disabled" as if they are discrete groups outside the common present thought of the society, it is therefore needed to understand that ageing and disabilities is a stage in life that people will experience at one point or the other of their life. The research work inquiries into the prominent demands for accessible built environment to carter for the population growth of the senior citizen and the disabled people.

Keyword: Accessibility, disability, public spaces, Nigeria

### I. INTRODUCTION

In today's cities, public space development is confronting rising challenges of urbanization and accessibility issues. So promoting an accessible public space is ideal aim of global communities because disability and ageing is regarded as a critical socio-spatial issue (Oliver 1990; Golledge 1993; Gleeson 1996). In the next two decades as millions of global populace attain older age, each country will be confronted with difficult challenges in built environment including accessible and visit-able public spaces. Public space design affects everyone; connectivity between people and built environment has an important impact on disabled people and ageing populace. Accessible public space design or inaccessible public space design can either subdue or ease ability of people to live and age (Nord, 2008).

Disability is both a reason and a result of poverty, reducing access to education, health care services, public amenities and employment opportunities, and participation in society. Non-disabled people can develop disability due to inadequate nutrition, unclean environments and poor infrastructures. Disability occurrence is projected to be higher in developing countries, among women and the senior population. Global disability prevalence is found to stand at 14% among adults (Mitra & Sambamoorthi, 2014). According to Lang &Upah (2008) people with different capabilities and aged people comprise about 10% of the world's population and they make up one of the most poor, marginalized and socially excluded group in any society. Development agencies and professionals are identifying disability as a key matter, inevitably linked to poverty, extension of human rights and citizenship. United Nations, in collaboration with civil society institutions has negotiated a convention about disability rights (UN Convention on the Rights of Persons with Disabilities). It is the first international legally- binding instrument that holds signatory states to make sure that suitable and robust policies are upheld for rights and dignities of people with different capabilities and aged people. Such developments facilitate social inclusion of disabled people within their respective countries (Wolfensohn, 2003). According to Olarenwaju (2004, as cited by Bashorun & Ayeni, 2013) developing countries are being confronted with increase in population and scarce resources. A population of over 170 million people, increased urbanization in last five decades (15% in 1960 to 43.3% in 2010 and projection of 60% by 2015- National Population Commission, 2004), decrease in funding from the federal government, ineffectiveness of master plans (improper and uncoordinated data underlying their preparation) make public space development ineffective and inaccessible in Nigeria (Bashorun&Ayeni, 2013; Amerena& Barron 2009). Abayomi (2013) further argues that built environment stakeholders and non-governmental organization agencies fail in pressing attention of government to social issue of accessibility of public spaces. This abysmal score underline Nigeria's vulnerability to disabilities and lack of institutional capacity to reduce or avert occurrences in future generations. Nigeria built environment is in a state of deterioration owing to several factors including but not limited to unplanned city design approaches, rural-urban migration, rapid urbanization, regular economic downturns, disregard of urban housekeeping, deterioration of urban infrastructures, low quality of open spaces and inadequate transport system. Overcrowding, slum development and squatter settlement have negative influences on built environment. Another significant deterring reason of Nigerian built environment is non-compliance with building by-laws and regulations. This consequence brings traffic injury, dehumanization and overturns civic pride of citizens (Ahianba, Dimuna, & Okogun, 2008). James Wolfensohn (2003) argued that until Nigeria government passes into law the disability discrimination legislation, and develops effective and efficient administrative infrastructures for its effective implementation, it will be impossible for Nigeria to respect rights and dignities of people with disabilities. In the same way, disabled people in Nigeria have greater tendency of ageing rapidly. This is due to the fact that those are poor often live in deteriorating physical and environmental conditions such as inadequate sanitary infrastructure and lack of access to health care provision.

There are several environmental issues that affect the accessibility of people with different capabilities within the built environment. Planning, urban design, transportation and design of public buildings and public spacesshould recognize and accommodate differences in the way people use the built environment and provide solutions that enable all to participate in activities equally, independently, with choice and with dignity. Therefore, public buildings and spaces should be designed and built to accommodate all strata of persons in the society especially those with different capabilities. Under the light of these discussions, this research paper aims to answer the following questions: What are the laws and legislations regarding people with disabilities and aged citizenry and how do governmental policies affect people with different capabilities in Nigeria? What is the role of architects and other professionals in built environment towards shaping a barrier free environment and how does their practice affect people with different capabilities in Nigeria? And last but not least, what are the potential impacts of people with different capabilities on socio-economic development in Nigeria?

### II. DEFINITION AND CAUSES OF DISABILITY

There are different views to the concept and definitions of disability; a common view of disability is "a reduction in an individual's ability of performing variety of activities (Geiecker, Otto, Momm, & Willi, 2011). Cameron (2010) offers a tentative "affirmative model" of disability definition. According to this definition, disability can be inferred as "deprivation or limitation of opportunities to take part in community life on an equal level with others due to physical and social barriers" (Cameron, 2010). Under the medical model of disability, several medical scholars and researchers have established the following as causes of disability: Arthritis and rheumatism, back or spinal problem, heart troubles, diabetes, cancer, orthopedic impairment of the lower extremity, asthma and illness (Brault 2005; Ettinger et al. 1994; Hamilton 2014; Guralnik, Fried, &Salive 1996; Lanplante Carlson 1992; Griffen 2005; Wendell 2001).

Medical model asserts gender, health status, race, educational level, and types of disease to influence causes of disability. Claiming female genders have higher prevalence of disability compared to male genders (Ettinger et al. 1994; Laplante& Carlson 1992). Through the social model of disability perspective, the causes of disability is associated with poverty, ageing, access to basic social amenities, haphazard designs, discriminatory laws, depression, unemploymentand low income. (Derbyshire 2002; Seekins 2006; Lang &Upah 2008; KAR 2005; Nord 2005; WHO 2011; World Bank 2010). According to this approach, there is a strong link between disability and poverty. Poor people have high ratio tendency of acquiring disability because they do more of dangerous work which exposes them to disabling conditions. (Bruijn, et al., 2012).

The medical model of disability sees disability as a problem that belongs to an individual with disability. In this approach, it is considered that individuals with disabilitieshave problems with their bodies; they are limited in performing their daily routines because of their bodily problems and not socio-cultural milieu. The medical model limits people with disabilities to the notion that their predicament can be resolved through medicalization mean. Against the individualistic approach of medical model, social model of disability has evolved as a criticism (Martin 2011). The social model challenges the medical approach, which focuses on "curing" individuals with disability to fit them into society, leaving them with notion that disabled people have to change, not the surrounding environment or the society. Oliver (1990) suggests that, rather than being an individual health problem, disability is the society's inability to provide accessible environments for people with disabilities. Drawing from Harris and Enfield (2013), problem of disability is the "disabling society" with denial of basic human rights of people with disabilities and through discriminatory laws which limit access to adequate health services, education facilities, employment opportunities, participation in decision making, and which result in exclusion from society, to the affirmative model of disability also criticizes social model for over stressing socio-structural barriers and ignoring the personal aspect of disability (Rousso 2013; Thomson 2005, 2006; Wendell 1996). Cameron (2008) explained that social model of disability reflects a "positioning decision" (structural and environmental barriers) than a "weakness" and affirmative model could be seen as an intermediary between an individual model and social model of disability (Cameron, 2008). The affirmative model proposal argues for the need for an extension to social model, with a motive of considering the "personal" (Cameron, 2008).

### III. BARRIERS AGAINST PEOPLE WITH DISABILITIES

There are various barriers mitigating the access, mobilityand participation of disabled people. Brujin (2012) suggests that environmental and attitudinal barriers are the most visible barriers amongst others. The social model suggets that both physical built environment and attitudes of the society towards people with disabilities should change. Public buildings such as health clinics, schools, malls, offices, shops; public spaces such as streets, squares, markets; housing environments and public transportation are often not accessible to people with physical disabilities. These are physical barriers (environmental) preventing disabled people from public participation. In addition to physical barriers, people with disabilities also confront psycho-emotional difficulties because of attitudinal issues posed from non-disabled people. Attitudinal issues include being stared at or patronized by strangers, actions which can leave disabled people feeling worthless and ashamed, and may end up preventing them from taking part in society (Reeves, 2006).

### IV. ACCESSIBILITY

In common with vast majority of low-income countries, people with different capabilities in Nigeria encounter a plethora of attitudinal, institutional and environmental barriers impeding their active social inclusion within contemporary society. Accessible design approach reduces environmental barriers and also saves cost for renovation in cases of future mobility impairment. The inaccessibility of public buildings and public spaces due to physical barriers makes it difficult for people with disabilities to access, enter and use those buildings and spaces, and it also prevents those who acquires a physical impairment to perform their daily obligations. The building pattern and design are engraved with the values of an able-bodies society. From steps into shops to absence of induction loops in public and civic building people with different capabilities have to personally face the obstacles in the built environments, which were never designed to cater for a range of bodily differences. This has resulted in some researchers to consider the built environment as "disablist, that is projecting able-bodied" values, which legitimize oppressive and discriminatory practices against people based on their physical or mental impairment.

# V. NIGERIA CONTEXT: NIGERIA CONSTITUTION AND LEGISLATION ON DISABILITY

In Africa, disability jurisprudence has started to gain prominence in the recent years. Many African countries, such as Uganda, South Africa, Kenya and Ghana passed domestic disability laws in order to protect and empower people with disabilities. Nigeria adopted the UN Convention on the Rights of Persons with Disabilities acknowledging disability as a human rights issue (United Nation Convention on the Right of Person with Disabilities (UNCRPD), 2008) Special provision for disability issues is not included in Nigeria constitution (Constitution of the Federal Republic of Nigeria, 1999). This salient social issue is not reflected in the Nigeria constitution, enabling discriminating structure within the country that treat citizenry with form of bias and prejudice. In chapter four of Nigerian 1999 constitution, there are certain rights that the citizens must enjoy. Section 33 sub section I of 1999 constitution provides that citizens must not be deprived fheir right to life. Also, section 40, 41 and 42 provides right to peaceful association, right to be free from discrimination and freedom of movement. These sections of Nigerian constitution are not effective because these provisions exist merely on paper. The environmental barriers don't allow people with different capabilities enjoy their fundamental human rights as enshrined in the Nigerian constitution.

Nigerians with disability decree 1993, Section 7 of the law affirm that houses should be improved to make them accessible to people with different capabilities (Disability Rights Education & Defense Fund (DREDF), 1999, 2000). The Nigerians with disability decree of 1993 is not effective because of change in Nigeria system of government from a military system to democratic system of government in 1999 (Majekodunmi, 2012). The government at that time has also failed to pass any lawsor disability bills that deal with disability issue and accessibility (Dina, Akintayo, & Ekundayo, 2013). Two bills have been presented within the last twenty-four years of reign of the National Assembly. The 6th national assembly of the federal republic of Nigeria passed the two disability bill without the acquiescence of the presidency. The 7th National Assembly is still engaged with version of the disability bill that lapsed with the 6th National Assembly. To date, there are no disability discrimination law and social protection programs for disabled people in Nigeria (Nigeria Laws of the Federation [NLF], 2000).

The Employee's Compensation Act of Nigeria, protects the interest of workers who become disabled due to occupational diseases or injuries (Employee's compensation act, 2010). Under CompensationAct, such persons are entitled to compensation which will help them earn a proper living in life (Employment and labor relations act, 2004). Nigeria is a federal state; few of Nigerian states enacted disability legislation but insufficient financial resources debarred its effective implementation. Lagos State of Nigeria, which takes the lead as former state capital of the country, passed Lagos State Special People's Law in 2011. Section 24 provides that within 5 years of the law, public buildings shall be made accessible to people with disabilities

(Lagos State Office for Disability Affairs, 2011). Though, Lagos and other states still suffer setback of implementation and total compliance of the said laws. Ministry of Women Affairs and Social Development is the lead governmental department for disability issues in Nigeria. The disability services are provided through welfare approach, majority of their rights are merely on paper. Translating this paper work to reality for lives of disabled citizens has been the focus of the ministry but to date no significant progress has been recorded (Nigeria labour act 1990; Nigeria Laws of the Federation [NLF] 2011; Lang & Upah 2008).

### VI. THE BOND OF DISABILITY AND POVERTY

From a social model of disability perspective, one of the causes of disability is associated with poverty (DFID 2007; Lang &Upah 2008; World Bank 2010). In Nigeria, high levels of unemployment (CEAAN, 2015; Kolade, 2013; The World Bank, 2013); lack of accessible and affordable health care facilities and poor conditions of Nigerian hospitals to cater for growing population (Szirmai, 2005; WHO, 2013); lack of proper educational facilities and high levels of illiteracy (Bruijn et al., 2012; CEAAN, 2015) create poverty conditions in the country. Accordingly, due to prevailing poverty level of the country, poor people are more vulnerable to developing disabilities because of inadequate nutrition, unclean environments with poor infrastructure, lack of access to basic social amenities and affordable healthcare facilities. Disability also deepens poverty by reducing access to education, employment and social protection for people with disabilities (Odomudu, 1987).

### VII. BUILT ENVIRONMENT IN NIGERIAN CITIES

The most important aspects that affect quality of life in Nigerian cities can be listed as follows: overpopulation; unplanned development; use of low quality construction materials; non-compliance with building by-laws and regulations during construction; poor quality of building and open space designs, and last but not least lack of proper public transportation. Overcrowding in cities is related to two basic issues, first increase in the country's population, and second high levels of migration from rural to urban areas, due to deteriorating built environment and lack of provision of basic amenities in the rural areas. Big cities of Nigeria such as Lagos, Ibadan, Kano, Enugu and Benin host very high density of populations (Federal Offices of Statics, 2001). Growing population in cities creates a pressure on local governments, architects and urban designers to cater for the needs of growing urban populations, which results in unplanned and uncontrollable development of urban areas (Ahianba et al., 2008). Consequently, lack of proper major infrastructure, insufficient street network, and poorly designed and maintained open and public spaces; existence of semi-permanent buildings and squatters, and increase in slum development prevail in many Nigerian cities.

In addition to overpopulation and unplanned development of cities, the low quality of construction is another factor affecting the quality of built environment in the country. In recent past, Nigeria has experienced building collapses and dilapidation of roads due to use of low-quality and cheap construction materials, and poor construction techniques (Ibrahim, 2013). One of the most important reasons for this is non-compliance with Nigerian building by-laws and regulations, and a lack of proper control mechanism, which enforces application of required laws and regulations during construction (Ahianba et al., 2008).

### VIII. CASE STUDY OF OBAFEMI AWOLOWO WAY IN ALAUSA, IKEJA

Ikeja local government area of Lagos state is located inside the heart of the capital of Lagos State. The state started in the fifteenth century as a Portuguese exchanging post, trading in ivory, slaves, and ancient rarities that develop the city from transcendent cultivating and angling towns to profoundly urbanized settlements. Lagos metropolis abode over 80% of the number of inhabitants in Lagos State, making it the most urbanized state in Nigeria today, with a population over 10 million individuals (Lawanson, 2007).



Figure 1: Map of Lagos State and the Constituent Local Government Areas (Source: GMD, 2014).

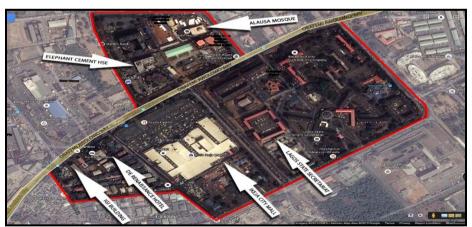
Ikeja was statutorily proclaimed in 1976 as the capital of Lagos State (Adeniyi P. O., 1986). Ikeja, an important business hub, covers 5,630 hectares of Lagos State with a population of 313,196.



Figure 2: Map of Ikeja Local Government Area (Source: Google map data, 2014).

Ikeja is traditionally inhabited by the Aworis and is the cradle of its civilization. However, Ikeja has attracted many people from different ethnic backgrounds, especially during the industrial revolution of the 1970s and 1980s and being the State capital contributed in no small measure to the attraction of diverse people to the city. In spite of the cosmopolitan nature of Ikeja, the traditional institution represented by the Olu of Ikeja is still relevant, likewise the traditional daily and weekly markets at Ipodo, Alausa and Ogba Sunday Market still function and very relevant in the present day Ikeja(Adefuye, 1987).

Ikeja Local Government Area comprises residential, commercial, recreational, industrial and institutional land use areas. (Hob consult limited, 2005). The residential area of Ikeja incorporates Ikeja G.R.A., Ogba estate, Navy cantonment quarters, Police quarters, private and public constructed houses inside the neighborhood local government. Institutional area comprises of administrative zone, chapels, and schools, open building (St. Leo Catholic Church, Lagos State service). Business area are banks, markets, and work places. The physical structure of Ikeja Local government zone is that of a planned region as a result of the seat of government located within this area (Alausa). Industrial uses and other public uses constitute other land utilization within this geographical area.



**Figure 3**: Showing the sampling area- Lagos State secretariat, Ikeja city mall, Renaissance hotel, IGI building, Elephant cement house and Alausa central mosque (Source: Google earth map data, 2015).

Ikeja is of great significance both socially and economically but also confronted with environmentaland infrastructural challenges such as flooding, shortage of water and electricity, and traffic gridlock and the predominating challenge is that of planning of the city to promote accessibility of different users. In the planning scheme of the sampling area, convenience of users was not taken into consideration. The able bodies also find it difficult to maneuver in this area; users of this space cannot freely interact within themselves. The design of the pedestrian environment is not easily understandable and is not consistent due to no consideration of the required dimensions of accessibility features that can aid mobility (Oduwaye, 2009).

To be able to tackle the challenges of rapid urbanization in Lagos State, the Lagos State government adopted a proactive strategy to turn many of the identified activity centers within Lagos mega city region into model cities. Ministry of Physical Planning and Urban Development proposed Ikeja model city plan to be developed and applied between the years 2010-2015. Ikeja model city plan covers Ikeja, Ojodu and Onigbongbo Local Government Areas. The model is meant to transform the capital of Lagos into a functional, liveable, healthy, virile, and aesthetically appealing, investment friendly environment. It aims at involving stakeholders in the planning process under the provision of State urban and regional planning and development law 2005.

The model city attempts to give urban centers required planning and development strategies for the envisaged future growth and development. When completed, it will proffer realistic measures and standards for the rapid transformation of the State capital for sustainable growth, and position Lagos into an enviable global mega city. The model city plan provides designation of high street corridors, preservation and conservation of green areas, development of Opebi Park as the heart of the model city, creation of activity centers, and upgrading of physical infrastructure. It will increase value of the lands and provide opportunity for them to build more high rising structures. However, even this plan includes no consideration for enabling features for people with different capabilities to have free access with no form of barrier (LSG 2009; MPPUD 2010). According to Dimuna (2011), a good architectural landscaping is an indispensable visual tool that has a positive psychological effect on human beings, fostering a sense of belonging, civic pride and social interaction. Public spaces, for example, squares, gardens and parks are essential for cities; they offer opportunities for socializing, recreation, sport and games for different classes and ages. They must be pedestrian-friendly, barrier-free and safe (Fessl T., 2003).

Alausa community open space is characterized of a makeup of an accidental arrangement of scattered settlement and an inconsistent ugly landscaping. Inconsistencies of housing arrangement and unappealing landscaping inhibit social interaction. Dimuna further argue that quality of the physical environment should not be in the structural point of view of the buildings but on an architectural quality that defines and enhances the environment through adoption of the city as an interconnection of open spaces. The metropolis of Ikeja is built up with mostly public buildings such as banks, offices, malls and the Lagos State secretariat. The setbacks from the road are often used as lawn for sitting with little sitting furniture while the paved access is tampered with and cannot be moved over by people on wheelchair (Dimuna, 2011).

Mismanagement and misuse of the urban open spaces has led to poor quality of the urban environment. Poorly articulated street network and insufficient street lighting in many part of the city causes traffic jam and high rate of accident occurrences. (Bashorun & Ayeni, 2013). Appropriate street works such as sidewalks, guard rails, drainage; proper design and implementation of urban furniture elements such as seating units, resting areas, litter bins; and clear and eligible well-lit signage with proper tonal contrast are very important for safety, access, use and orientation in public spaces, especially for people with disabilities and aged people. Kerbs are provided within the sampling area and they are along the street median and sidewalk. The conditions of these kerbs are intact and well painted to aid visibility even at night (figure 7). There is no visible explanatory visuals and tactile paving to provide warning and guidance for visually impaired individuals in the sampling area.



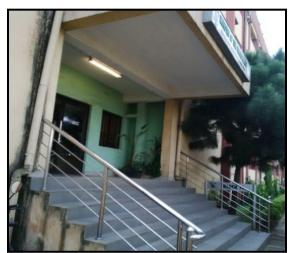


**Figure 4:** Showing bus stops with no provision of seats for the commuters (Source: Personal archive of author, 2014).





**Figure 5:** Showing traffic light without display consideration for the disabled people (Source: Personal archive of author, 2014).





**Figure 6:** Showing guard rail of 1200mm height on steps of renaissance hotel and state secretariat building (Source: Personal archive of author, 2014).





**Figure 7:** Showing closed and well planned drainage system toward Alausa secretariat (Source: Personal archive of author, 2014).





Figure 8: Showing side walk along the sampling area (Source: Personal archive of author, 2014).





Figure 9: Showing kerb along the roads of the sampling area (Source: Personal archive of author, 2014).

Basic means by which inhabitants transport themselves within and around Alausa include; use of public buses (yellow and black stripped buses) and taxis. Buses aren't designed to aid access by physically challenged individuals or visually impaired person. There is no special transportation arrangement for them except that they have to compete with the able-bodied against the odd to access available and ill-adapted public transportation means. These three modes of movement are dehumanizing and energy wasting. Besides, they expose them to many traffic dangers. Bus stop shelters are not accessible on wheelchair, most times no space or consideration for people with mobility impairment.

However, the transportation system in the sampling area is inaccessible to the physically challenged. For example, vehicles do not stop for commuters to board and disembark as a result people run, jump and trample on others to access the moving buses. There are car park provisions in the sampling area though not sufficient. The car park provision does not take people who cannot walk or carry goods over a long distance and people with visual difficulties into consideration. Sizes of most of the car park space are 2500mm width and 5000mm length. Sampling area route (Obafemi Awolowo way) serves as a major terminus for origin and destination for means of transportation and Intra and Inter State services. However, no designated parking spaces and parking signage for the people with different capabilities. The organized parking spaces also for mini buses along the corridor are inadequate and ineffective to curb the perennial traffic congestion caused by onstreet parking by mini buses as shown in figure 8-10 below.

Regarding the sampling area, no seats are provided at bus stops for commuters to rest while waiting for buses. Where seats are provided, they are in bad shape with no shade over them. Commuters have to sit on edges of bus stop or stand for buses to get to the bus stop as showed in figure 2 below. The color, shape, size, placing and height of bill boards are not standard and there is no adequate use of signage to aid visually impaired people as showed in figure 3 below.





Figure 10: Showing a man hopping into a moving bus (Source: Personal archive of author, 2014).



**Figure 11:** Showing an unsheltered bus stop along Elephant cement house (Source: Personal archive of author, 2014).



**Figure 12:** Showing car park with no designated marks for disabled people at the sampling area (Source: Personal archive of author, 2014).

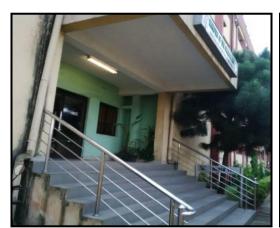
The role of public building in providing services to all despite their disability has been a daunting task for public building designer (Ejedafiru & Isebe, 2013). A study of some of the major public building shows they were not designed to aid use by mobility impaired people, coupled with the poor state of public building services. The buildings examined include the following- Lagos State secretariat, Alausa secretariat mosque, Ikeja city mall, Renaissance hotel, IGI Company and Elephant cement house. For the sampling area, majority of the principal entrance is restrictive and an alternative accessible entrance in common use is not provided. These pose challenges for disabled user and discourage their usage of the public spaces. The entrances to the public buildings are designed in such a way that two people cannot maneuver same time at the entrance door because of its small width space. Ramps are present in the public buildings around the sampling areas except for the Elephant cement house. This ramps do not allow easy navigation into the public buildings because they do not have an adequate slope as specified in international standard. Some of the ramps are slippery, steeply and relatively to flat with small width space as shown in figure 11-14 below. Majority of the public building in the

Alausa sampling area does not utilize the guard rail. The state secretariat and renaissances hotel made use of the guard rail and used it on the stair alone with a height of 1200mm as showed in figure 4 below. The drainage towards Alausa secretariat are closed, well planned and is of 2% sloppy and meet the international standard as shown in figure 5 below. There are provisions for sidewalks within the sampling area on each side of the road. These sidewalks are tarred but not in good conditions and they are not wide enough to allow physically challenged and visually impaired people access enough and maneuvers. The width of the sideways differs at different location accessed in the sampling area; some had a width or 1000mm, 1200mm and 900mm as shown in figure 6 below.





**Figure 13:** Showing the approach view of Lagos State government secretariat and IGI building along the sampling area (Source: Personal archive of author, 2014).





**Figure 14:** Showing Lagos State Secretariat inaccessible entrance to disabled people along the sampling area (Source: Personal archive of author, 2014).





**Figure 15:** Showing inadequate ramp slope and slippery floor finish at renaissance hotel along the sampling area (Source: Personal archive of author, 2014).



**Figure 16:** Showing entrance to the IGI building with a steeply deformed ramp access (Source: Personal archive of author, 2014).

The comparative method of analysis of the sampling area of Obafemi Awolowo way in Alausa area of Ikeja local government area, Lagos State reflects the socio-milieu problems encountered by disabled people. It further strengthens the belief of the social model of disability which negates the widely assumption that most disabilities impose considerable restrictions, such as lack of mobility, limitations in finding suitable employment opportunities and difficulty in integrating with non-disabled people.

### IX. CONCLUSION AND RECOMMENDATIONS

This research work conflates theoretical discussions, and pragmatic observations from the built environment with the aim of developing an understanding of the type of barriers that people with different capabilities encounter. Considering issues of accessibility of public spacespeople with disabilities are by and large the most neglected in the design and construction of those spaces. Access limitation affects the social integration of disabled and denies them of equal access to social participation. At one point in an individual life, one experiences one form of disability or the other as a result of old age, sickness or injury. People can become disabled due to different reasons and circumstances (Mont, 2007). It is generally perceived through the social model of disability that the obstructions to full integration for disabled individuals in social life are made by society (Oliver M., 1990). These obstructions, which incorporate physical, natural, social and environmental barriers, must be eliminated to ensure unbiased opportunities. Perhaps this skewing reflection is buttressed through the social model of disability.

Addressing the fundamental needs of the people with different capabilities through design of public spaces requires an understanding of their needs within these spaces. Not only do individuals with disabilities carry on with a life of mistreatment from the general public: they are likewise denied equivalent access to their essential needs of space and infrastructure required to aid them. Public spaces are designed and constructed in a way that constrains and restricts freedom of access and mobility for people with disabilities. Therefore, the following measures are recommended to reduce or eradicate the barriers faced by people with different capabilities in Nigeria.

- Re-evaluation of laws and regulations- Government policies, laws and regulation pertaining to the built
  environment should be re-evaluated with a possibility for amendment. Through the re-evaluation of
  Nigerian national building code and strict compliance with existing building laws could pave a way for
  achieving accessible public spaces in Nigeria. A law or act should be enacted to allow for accessible
  designs.
- Integration of policies into urban-rural development- Advocating of a balance between urban and rural settlements, which should be conceptualized through proper planning and design. Government policies should be re-evaluated with a possibility for amendment, and new policies on urban-rural develoment should be established with strict compliance.
- Improvement of the built environment- the built environment should be improved through the provision of basic infrastructural amenities, reduction of overcrowding, good sanitation and compliance with building by-laws and regulations.

• Integrating people with different capabilities into workforce through employment- Government can develop policies and strategies to integrate people with disabilities into the workforce by firstly understanding their different form of disabilities and comprehending their strengths and weaknesses. An understanding of their limitations, and their willingness to work will help government and private organizationstodeploy them to where they can function in the best way. A lot of people with different capabilities are talented but their handful resources are being wasted away because of the inept attitude of the government and inequality and discrimination posed by the society.

### **Bibliography**

- [1]. Abberley, P. (1987). The concept of oppression and the development of a social theory of disability. Disability, handdicap and society, 2(1), pp.5-19.
- [2]. Adeniji, K. (1998). The public sector and physical planning in Nigeria. Journa of the Nigeria institute of town planners.
- [3]. Ahianba, J., Dimuna, K., & Okogun, G. (2008). Built environment decay and urban health in Nigeria. Journal of human ecology, 23(3), pp.259-265.
- [4]. Alkali, L. (2005). Planning sustainable urban growth in Nigeria: challenges and strategies at the conference on planning sustainable urban growth and sustainable architecture held at the ECOSOC Chambers, United Nations Headquarter. New York.
- [5]. Barnes. (2007). "Citizenship and vulnerability: disability and issues of social and political engagement". British Journal of Sociology, 58(4), pp. 717-718.
- [6]. Barnes, C., & Mercer, G. (2004). Disability Policy and Practice: Applying the Social Model. Leeds, UK: The disability press.
- [7]. Bashorun, J. O., & Ayeni, D. A. (2013). Planning and restoration of environmental values in Nigeria dysfunctional societies. European journal of sustainable development, 2(4), 184-198.
- [8]. Boschmann, E., & Kwan, M.-P. (2008). Toward socially sustainable urban transportation: progress and potentials. International journal of sustainable transportation, 2(3), pp.138-157. doi:10.1080/15568310701517265
- [9]. Bruijn, P., Regeer, B., Cornielje, H., Wolting, R., Veen, S. V., & Maharaj, N. (2012). Count me in-include people with disabilities in development projects, a practical guide for organisations in north and south. Netherlands: Stichting light for the world, postbus 672, 3900 AR Veenendal, Netherlands.
- [10]. Cameron. (2008). "Further towards an Affirmative Model". In T. campbell, F. Fontes, H. Hemingway, A. Soorenian, & C. Tills (Eds.), Disability Studies: Emerignig insights and perspectives (pp. pp.14-30). Leeds: The disability press, Leeds, UK.
- [11]. Cameron, C. (2010). 'Does anybody like being disabled? A critical exploration of impairment, identity, media and everyday life in a disabling society'. PHD thesis, Queen Magaret university, Edinburgh, UK.
- [12]. Church, R. L., & Marston, J. R. (2003). Measuring accessibility for people with a disability. Geographical analysis, pg. 83-96.
- [13]. Constitution of the Federal Republic of Nigeria (1999). Constitution of the Federal Republic of Nigeria, 1999. Retrieved from http://www.nigeria-law.org/ConstitutionOfTheFederalRepublicOfNigeria.htm.
- [14]. Crow, L. (1996). Including all of our lives: renewing the social model of disability. UK: The disability press.
- [15]. Department for international development (DFID). (2005). Reducing poverty by tackling social exclusion: A DFID Policy Paper. Retrieved from http://www.dfid.gov.uk
- [16]. Dimuna, K. O. (2011). The social effects of the built environment: A case study of selected buildings in Benin City, Nigeria. Journal of human ecology, 34(3), pp.189-196.
- [17]. Dina, Y., Akintayo, J., & Ekundayo, F. (2013, March). Update: guide to Nigerian legal information. NY: Hauser Global Law School Program, New York University School of Law. Retrieved from http://www.nyulawglobal.org/globalex/Nigeria1.htm
- [18]. Disability discrimination act (DDA), 2005. (n.d.). www.legislation.gov.uk/ukpga/2005/13/contents. Retrieved from Disability Discrimination Act 2005 Legislation.gov.uk.
- [19]. Disabled people's international (DPI). (1982). proceeding of the first world congress. Disabled people's international (DPI), Singapore.
- [20]. Drum, C. E. (2014). The dynamics of disability and chronic conditions. disability and health, 7, 2-5.
- [21]. Dubos, R. (1969). Man adapting: His limitations and potentialities. In W. R. Jr. (Ed.), In: environment for man, the next fifty years (p. pp.21). Bloomington, Illinois: Indiana University Press.
- [22]. Egan, L. (2012, November 9). I'm not a "person with a disability": I'm a disabled person.
- [23]. Ejedafiru, E. F., & Isebe, M. L. (2013). Access and use of public libraries by disabled persons in Nigeria. An international journal of information and communication technology (ICT), 10(1), pp.135-141.
- [24]. Employee's compensation act. (2010). Abuja. Retrieved from www.ilo.org/ dyn/natlex/ docs /ELECTRONIC/ 87608/.../ NGA87608.pdf
- [25]. Employment and labor relations act. (2004). Retrieved from http://www.egov. go.tz/egov\_uploads/ documents/ The\_Employment\_and\_Labour\_Relations\_Act,\_6-2004\_sw.pdf.
- [26]. Federal Offices of Statics. (2001). Annual report 2000. Abuja: FOS.
- [27]. Geiecker, Otto, Momm, & Willi. (2011). Disability: concepts and definations. (J. M. Stellman, Ed.) Disability and work-encyclopedia of occupational health and safety, 17.
- [28]. Golledge, R. (1993). Geography and the disabled: a survey with special references to vision impaired and blind population. Transaction of the institute of british geographers, 18(1), 63-85.
- [29]. Hammerstad, A. (2004). African commitments to democracy in theory and practice: A review of eight NEPAD countries. African Human Security Initiative (AHSI), pp.1-10. Retrieved from http://issafrica.org/pubs/Other/ahsi/ahsipaper1.pdf
- [30]. Harris, A., & Enfield, S. (2003). Disability, Equality and human right: a training manual for development and humanitarian organisation. Oxford: An Oxfam Publication in association with Action on Disability and Development (ADD), Oxford, UK.
- [31]. Ibrahim, R. B. (2013). Monumental effects of building collapse in Nigeria cities: The case of Lagos island, Nigeria. Journal of engineering innovation, 1(12), pp.26-31.
- [32]. Keates, S., & Clarkson, J. (2003). Countering design exclusion. In P. J. Clarkson, R. Coleman, S. Keates, & C. Lebbon (Eds.), Inclusive design: design for the whole population (pp. pp.438-457). Springer-Verlag London. doi:10.1007/978-1-4471-0001-0
- [33]. Kirwood, T. B. (2002). Evolution of ageing. Journal of mechanisms of ageing and development, 123(7), pp.737-745. doi:10.1016/S0047-6374(01)00419-5
- [34]. Lagos State Office for Disability Affairs. (2011). (Lagos State Special People's Law [LSSPL]. Retrieved from http://www.lasoda.org.ng.

- [35]. Lang, R., & upah, L. (2008). Scoping study: disability issues in Nigeria. The Department for International Development (DFID), Abuia.
- [36]. LaPlante, M., Hendershot, G., & Moss, A. (1992). Assistive technology devices and home accessibility features: prevalence, payment, need and trends. advance data from vital and health statistics. Hyattsville, Maryland: National Center for Health Statistics.
- [37]. Lynott, J. (2009). Visitability: making home more accessible for the growing 50+ population. Journal of AARP, pp.1-4.
- [38]. Maisel, J. (2007). Existing visitability initiative. Buffalo, New York, USA: IDEA Centre.
- [39]. Majekodunmi, A. (2012). Democratization and development in Nigeria: The Fourth Republic in perspective. International journal of academic research in economics and management sciences, 1(5), pp.1-13. Retrieved from http://www. hrmars.com/admin/pics/1110.pdf
- [40]. Manley, S. (1996). Walls of exclusion: the role of local authorities in creating barrier-free streets. Landscape and urban planning, 35(2-3), pg. 137-152.
- [41]. Martin, N. (2011). Disability Identity-Disability Pride. The National association of disability practitioners.
- [42]. Mitra, S., & Sambamoorthi, U. (2014). Disability prevalence among adults: estimates for 54 countries and progress toward a global estimate. Disability and Rehabilitation, 36(11), pp.940-947. doi:10.3109/09638288.2013.825333
- [43]. Mont, D. (2007). Measuring disability prevelance.
- [44]. Morris, J. (1991). Pride against prejudices. London: Women's press.
- [45]. Myrdal, G. (1968). Asian Drama: an inquiry into the poverty of Nations (Vols. I-III). Harmondsworth: Penguin.
- [46]. Nigeria labour act. (1990). Labour Act, chapter 198, laws of the Federation of Nigeria 1990. Retrieved from http://www.nigeria-law.org/LabourAct.htm.
- [47]. Nigeria Laws of the Federation [NLF]. (2000). Nigeria Laws of the Federation [NLF]. Retrieved from http://www.nigeria-law.org/LFNMainPage.htm.
- [48]. Nord, C. (2008). The ageing body and architecture. Ageing and society: conference architectural inquiries, 1-10.
- [49]. Odomudu, R. (1987). Shelter and housing. an approach to better living. Journal of Nigerian institute of architects, 3(2), pp.92.
- [50]. Oduwaye, L. (2009). Challenges of sustainable physical planning and development in metropolitan Lagos. Journal of sustainable development, 2(1), pp.159-171.
- [51]. Oliver. (1996). Defining impairment and disability: issues at stake. In C. Barnes, & G. Mercer (Eds.), Exploring the divide: illness and disability (pp. 22-54). The disability press, school of sociology and socila policy, university of Leeds, Leeds LS2 9JT.
- [52]. Oliver, M. (1990, July 23). The individual and social models of disability. Readers in disability studies. Paper presented at the joint workshop of the living options group and the research unit of the royal college of physicians on people with established locomotors disabilities in hospital, Thames polythenic, London.
- [53]. Oliver, M. (2004). The social model in action: if I had a hammer, In C.Barnes, & G.Mercer, Implementing the social model of disability: theory and research. Leeds: The disability press, Leeds, UK.
- [54]. Omatsone, M., & Dimuna, K. O. (2010). Regeneration in the Nigerian urban built environment. Journal of human ecology, 29(2), pp.141-149.
- [55]. Osuide, S. (2004). Strategies for affordable housing stocks delivery in Nigeria. 18th Inaugural Lecture of Ambrose Alli University, Floreat System Benin-City,, (pp. 2-20).
- [56]. Parker, G. (1993). With this body: caring and disability in marriage. Milton keynes: Open university press.
- [57]. Reeves. (2006). 'Towards a psychology of disability: The emotional effects of living in a disabling society'. In D. Goodley, & R. Lawthom, Disability and Psychology: Critical Introductions and Reflections, (pp. 94-107). London: Palgrave.
- [58]. Sadri, H. (2012). "Professional Ethics in Architecture and Responsibilities of Architects towards Humanity", Turkish Journal of Business Ethics, No: 9, May 2012, Istanbul, ISSN: 1308-4070.
- [59]. Seekins, T. (2006). Introduction: disability and community development. Journal of the community development society, 37(3).
- [60]. Shakespeare, T. (1992, September). 'A response to Liz Crow'. pp.40-42.
- [61]. Shakespeares, T. (1996). The Sexual Politics of Disability. London, UK: Cassell.
- [62]. Swain, J., & French, S. (2000). Towards an affirmation model of disability. Disability and society, 15(4), 569-582. doi:10.1080/09687590050058189
- [63]. Szirmai, A. (2005). The dynamics of socio-economic development: an introduction. Cambridge university press.
- [64]. Truesdale, S., & Steinfeld, E. (2002). Visit-ability: An approach to universal design in housing. Buffalo, NY: IDEA center.
- [65]. Union of the Physically Impaired Against Segregation (UPIAS). (1976). Fundamental principle of disability. London.
- [66]. United Nation Convention on the Right of Person with Disabilities (UNCRPD). (2008). Final report of Ad hoc committee on a comprehensive and integral international convention on the protection and promotion of the right and dignity of persons with disabilities. United Nations.
- [67]. Wolfensohn, J. (2003). The world bank report. The economic times, Swizerland.
- [68]. Wood, J. (1980). International classification of impairments, disabilities, and handicaps: a manual of classification relating to the consequences of disease, published in accordance with resolution WHA29.35 of the Twenty-ninth World Health Assembly, May 1976 -. Geneva: World Health Organization, Geneva.
- [69]. Zola, I. K. (2005). Toward the necessary universalizing of a disability policy. The milbank quarterly: a miltidisciplinary journal of population health policy, 83(4). doi:10.1111/j.1468-0009.2005.00436.x