

## **EFFECTIVENESS OF DISABILITY CLUSTERS IN LAGOS STATE UNDER THE UN CRPD**

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**ABSTRACT:** This study examined the effectiveness of disability cluster organisations in Lagos State in implementing the United Nations Convention on the Rights of Persons with Disabilities (UN CRPD) in advocacy and service delivery. Using a qualitative research design, in-depth interviews were conducted with leaders and members of four disability clusters, including the National Association of the Blind, the Nigeria National Association of the Deaf, the National Association of Persons with Physical Disabilities, and the Spinal Cord Injured Association of Nigeria. Findings indicate that the UN CRPD serves as a key tool for legitimising advocacy, promoting a rights-based approach, and influencing service provision, including accessibility improvements in public facilities. However, institutional and economic constraints, such as limited training, insufficient technical support, and financial challenges, hinder the effective application of the convention. The study underscores the importance of strengthening organisational capacity and providing stable financial and institutional support to enhance the ability of disability clusters to fulfil their mandate. The findings provide evidence on how legal instruments such as the UN CRPD translate into practical outcomes for persons with disabilities and highlight avenues for policy and programmatic interventions to promote inclusion and rights protection in Lagos State.

**Keywords:** Disability clusters, UN CRPD, Lagos State, Advocacy, Service delivery

### **Background to the Study**

Disability affects a substantial and growing segment of the global population, presenting a challenge that demands sustained attention from governments, institutions, and civil society. According to the World Health Organization (2023), approximately 1.3 billion individuals, representing around 16 percent of the world's population, experience significant disability. The prevalence of disability is increasing, largely due to demographic shifts, including population ageing, and the rising incidence of chronic non-communicable diseases such as diabetes, cardiovascular conditions, and mental health disorders. These trends place additional strain on health systems, social services, and support mechanisms for individuals with disabilities. While international legal instruments, particularly the United Nations Convention on the Rights of Persons with Disabilities (UN CRPD), have established standards for the recognition and protection of the rights of persons with disabilities, many countries, including Nigeria, continue to face challenges in translating these commitments into effective policy and practice. In Nigeria, the institutional structures responsible for ensuring compliance with disability rights legislation remain underdeveloped in several states, with uneven implementation of laws designed to protect and empower this population (Adepoju, 2022). This situation underscores the urgency of assessing how

legal provisions are operationalized and the degree to which they impact the lives of persons with disabilities across different regions.

In Lagos State, these challenges are particularly pronounced due to the high population density and complex urban environment, which magnify issues of access, inclusion, and institutional effectiveness. The State of Disability Inclusion Report (2024) reveals that only 15 out of Nigeria's 36 states have agencies actively enforcing disability-related legislation, and that numerous public facilities remain inaccessible to individuals with mobility, sensory, or cognitive impairments (Access360, 2024). Gaps in inclusive education, social protection measures, and healthcare services further limit opportunities for persons with disabilities to participate fully in societal activities. Organizations of persons with disabilities (OPDs), often organized into clusters, are intended to serve as conduits for rights advocacy and service delivery; however, weak institutional capacity, limited funding, and low levels of coordination have hindered their effectiveness (TheCable, 2024). These factors collectively constrain the realization of the objectives of the UN CRPD in Lagos State, underscoring the need to evaluate the operational performance and impact of disability clusters in promoting equity, access, and social inclusion.

The institutional deficiencies present in organizations of persons with disabilities (OPDs), including those organized as disability clusters, significantly constrain their ability to uphold the rights and welfare of individuals with disabilities in Lagos State. These organizations are expected to serve as agents of advocacy, service delivery, and rights protection under the United Nations Convention on the Rights of Persons with Disabilities (UN CRPD), yet their operational capacity remains limited. Critical challenges include insufficient coordination among disability clusters, inadequate financial resources, gaps in technical and managerial capacity, and weak political commitment from relevant authorities (Global Disability Fund, 2025). Such limitations not only hinder the effective execution of programs aimed at promoting social inclusion but also reduce the ability of these clusters to monitor compliance with disability rights legislation, provide necessary support services, and respond effectively to the specific needs of persons with disabilities. The National Commission for Persons with Disabilities (NCPWD) has introduced measures such as Standard Operating Procedures for inclusive education and advocacy campaigns, yet these interventions are often curtailed by budgetary constraints, staffing shortages, and administrative inefficiencies (NCPWD, 2023). Consequently, despite the existence of legal instruments and policy frameworks designed to safeguard the rights of persons with disabilities, the practical realization of these rights within Lagos State remains limited.

The problem, therefore, lies in the gap between the formal recognition of disability rights and the actual performance of the organizations mandated to implement them. Persons with disabilities continue to experience exclusion from education, healthcare, employment, and public services, perpetuating cycles of marginalization and social disadvantage. This disconnect highlights the need for empirical investigation into the operational effectiveness of disability clusters, particularly with respect to their ability to apply the provisions of the UN CRPD in service delivery and advocacy. Assessing institutional effectiveness is necessary to identify the factors that facilitate or impede the clusters' performance, including resource allocation, administrative structures, leadership capacity, and the level of adherence to legal obligations. The rationale for this study is anchored in the need to provide evidence-based recommendations that can strengthen the functionality of disability

clusters, enhance compliance with the CRPD, and ultimately improve the quality of life and social inclusion of persons with disabilities in Lagos State. By examining these aspects, the study seeks to inform policy, guide institutional reforms, and contribute to the broader goal of promoting equitable participation and empowerment of persons with disabilities in society.

### **Statement of the Problem**

Despite Nigeria's formal commitment to the CRPD and the existence of OPDs structured into disability clusters, there is limited evidence that these entities are achieving meaningful institutional impact in Lagos State. The absence of fully operational agencies in many states, low resource allocation, and weak enforcement mechanisms suggest that the legal rights guaranteed by the CRPD are not translating into real social and economic inclusion for persons with disabilities (Access360, 2024). In Lagos State, disability clusters are expected to serve as catalysts for CRPD implementation, yet there are persistent reports of exclusion, inadequate service delivery, and lack of accessibility in public infrastructure. The State of Disability Inclusion Report raised serious concerns, noting that some basic health facilities still lack essential accessibility features (TheCable, 2024). Without effective institutional performance, OPDs risk being limited to advocacy only, rather than acting as agents of systematic change. This gap matters because the CRPD's promise is not just symbolic; it requires active, coordinated, and well-resourced institutions to protect the human rights of persons with disabilities. When disability clusters perform poorly, it undermines Nigeria's ability to meet its CRPD obligations and perpetuates the marginalization of a historically disadvantaged group.

Therefore, this study examined how disability clusters in Lagos State apply the CRPD in their operations, assess their institutional effectiveness, and identify the critical drivers of their performance (or lack thereof). Specifically, it aims to answer the following research questions:

1. To what extent do disability cluster organizations in Lagos State implement the provisions of the UN CRPD in their service delivery and advocacy?
2. What institutional, structural or resource-related factors enable or constrain the effective application of the CRPD by these disability clusters?

### **LITERATURE REVIEW**

#### *The UN Convention on the Rights of Persons with Disabilities (CRPD) and Its Implementation*

The United Nations Convention on the Rights of Persons with Disabilities (CRPD) was adopted in 2006 and represents a landmark in international human rights law, as it explicitly recognizes persons with disabilities as full subjects of rights rather than as objects of charity or medical treatment. Under the CRPD, State Parties commit to a set of core obligations, including non-discrimination (Article 5), full and effective participation in society (Article 3), accessibility (Article 9), and reasonable accommodation (Article 2). The Convention also enshrines civil and political rights (such as legal capacity, Article 12), as well as economic, social, and cultural rights (such as education, Article 24, and work, Article 27). Moreover, it establishes monitoring mechanisms,

including the reporting obligation to the UN Committee on the Rights of Persons with Disabilities, to assess how well States translate its principles into practice.

Implementation of the CRPD has proceeded unevenly across different regions, and both successes and challenges have been documented. In many developed countries, States have established comprehensive disability laws, institutional bodies, and national plans dedicated to CRPD implementation. For example, several European countries have integrated CRPD obligations into domestic legislation and mainstreamed accessibility in public infrastructure and services. However, the gap between legal commitments and lived realities persists, especially where resources, political will, or institutional capacity remain limited. In Africa, recent reports highlight that many States, though parties to the CRPD, still struggle with translation of its provisions into enforceable national policies. The International Commission of Jurists (2025) found that in nine sub-Saharan African countries (including Nigeria, Kenya, Ghana, and South Africa), legal reforms have sometimes failed to produce meaningful change, particularly in the areas of access to justice, education, employment, and political participation (International Commission of Jurists, 2025). The report emphasizes that ratification alone does not guarantee rights realization when implementation is weak or poorly monitored (International Commission of Jurists, 2025).

In Nigeria specifically, scholarship and advocacy have pointed to significant obstacles in applying the CRPD. A legal analysis by Ashiru (2023) argues that despite the adoption of the Discrimination Against Persons with Disabilities (Prohibition) Act in 2018, societal perceptions of disability as a matter of charity rather than human rights continue to undermine effective implementation. Ashiru further notes that the law's impact is limited by weak institutional enforcement and poor coordination among stakeholders (Ashiru, 2023). Complementing this, a review by Akinbola (2023) calls for full domestication of the CRPD into Nigeria's legal system, contending that key CRPD concepts, such as reasonable accommodation and universal design, have not been meaningfully internalized due to lack of legal clarity and political prioritization (Akinbola, 2023).

Structural and resource-based challenges also significantly hinder CRPD implementation in Africa. According to the Swiss-based organization MDAC (2024), many disabled persons' organizations (DPOs) in African countries lack technical capacity and financial resources to engage in policy advocacy, monitor CRPD compliance or sensitize government officials and communities about disability rights (MDAC, 2024). This weak capacity is often compounded by limited awareness among persons with disabilities themselves of their CRPD rights, further reducing demand for accountability. MDAC also identifies weak political will, shifting institutional responsibilities, and entrenched negative attitudes toward disability as key barriers. Finally, even where legislative reforms occur, these may not be sustained due to turnover in political leadership or competing budgetary priorities (MDAC, 2024).

These findings suggest that while the CRPD offers a powerful normative basis for disability rights, its translation into meaningful social change depends heavily on domestic institutional capacity, resource adequacy, and political commitment. In Nigeria, and across much of Africa, the gap between ratification and implementation remains wide, which underscores the urgency of empirical research into how organizations of persons with disabilities (such as disability clusters) operationalize CRPD obligations. This study, by focusing on Lagos State, seeks to contribute to

filling this empirical gap, offering evidence on institutional effectiveness, constraints, and enabling factors, and thereby informing both policy reform and advocacy strategies.

*Institutional Effectiveness of Organizations of Persons with Disabilities (OPDs)*

Institutional effectiveness in non-profit advocacy organizations like OPDs is typically measured by a variety of metrics and indicators, reflecting both internal capacity and external impact. Common indicators include governance structure, leadership quality, financial sustainability, program delivery, accountability, stakeholder engagement, and organizational adaptability (Ajuwon & Dagunduro, 2024). Strategic planning, strong board oversight, transparency, and resource mobilization are often seen as key predictors of whether an organization can deliver services reliably and advocate effectively (Morris, 2024). Non-profit performance literature further emphasizes the importance of service quality and reach, monitoring and evaluation systems, and the capacity to influence policy as core dimensions of effectiveness.

Several studies identify organizational capacity, leadership, funding, and service delivery as critical determinants of performance in OPDs. Leadership that articulates a clear vision and ensures participatory decision-making significantly strengthens institutional resilience (Ajuwon & Dagunduro, 2024). Funding remains a persistent challenge: many disability organizations in Africa, including Nigeria, rely heavily on external donors, which can constrain long-term sustainability and limit autonomous agenda-setting. For example, a 2024 study by Bridgespan found that 90 percent of large African NGOs, including those in Nigeria, depend primarily on international funding for their growth and operations, which raises concerns about financial resilience and local ownership (Bridgespan Group, 2024). In addition, effective service delivery depends not just on financial resources but also on technical capacity, partnership networks, and monitoring systems. The Global Disability Fund's (2025b) recent analysis of Nigerian OPDs highlights significant gaps in governance, financial management, and compliance structures, indicating that many OPDs lack the institutional maturity to scale their operations or to meaningfully engage in advocacy.

Empirical research assessing OPD effectiveness in Nigeria and other developing countries reveals mixed performance. In Nigeria, a capacity-building project supported by the African Polling Institute (API) reported that many OPDs lack credible data systems; without reliable disability-disaggregated data, OPDs struggle to substantiate their advocacy and engage meaningfully in policy dialogues (African Polling Institute, 2022). Similarly, a project evaluating social protection in Lagos State found that OPDs had limited internal capacity to reach the most marginalized persons with disabilities (Fajemilo Foundation, 2023). The report observed that OPD leadership often lacks strategic planning and governance structures, which undermines their credibility when engaging government agencies. In the humanitarian sector, a recent report from North-East Nigeria documented that although OPDs participated in protection programming, they were under-resourced, and collaboration with humanitarian actors was weak; this limited their capacity both to deliver services and to influence coordination mechanisms (CBM & partners, 2025).

Lessons from the humanitarian and development sectors beyond Nigeria also underscore patterns of institutional weakness. CBM Global's (2022) recent work reflects that even when OPDs are included in humanitarian planning, their organizational capacity, especially in financial

management, governance, and preparedness, is often weak, reducing their long-term participation in response efforts. To address these deficits, capacity strengthening strategies must prioritize governance, compliance, leadership development, and financial systems (Global Disability Fund, 2025b).

These studies suggest that although OPDs hold the promise to act as powerful agents of rights protection and service delivery, their institutional effectiveness is constrained by weak leadership structures, dependence on external funding, limited technical systems, and inadequate governance mechanisms. For the context of Lagos State disability clusters, assessing these dimensions of effectiveness could identify critical barriers and opportunities, helping to inform interventions that strengthen OPDs' capacity to apply the CRPD and realize their mission.

#### *Barriers to Effective Disability Advocacy and Service Delivery*

Efforts by disability clusters and other organizations of persons with disabilities continue to be shaped by structural, financial, administrative, and political constraints that limit effective advocacy and service provision. Studies from both developed and developing countries consistently show that inadequate funding remains one of the most persistent constraints, reducing the capacity of disability organizations to implement programmes, recruit qualified personnel, and sustain long-term interventions (Hickey et al., 2021; Karrie et al., 2024). In Nigeria, irregular government subventions and limited donor engagement weaken institutional performance, leaving disability clusters unable to pursue strategic initiatives or expand their outreach (Adebisi & Emmanuel, 2023). Beyond financial limitations, administrative challenges such as weak planning systems, limited monitoring structures, and inconsistent reporting procedures create gaps in coordination and reduce efficiency (African Disability Forum, 2022). Political constraints also play a significant part, especially where disability issues receive limited priority in state planning and budgeting processes. Research across several African countries shows that government agencies often lack the technical capacity or commitment to enforce disability-inclusive legislation, thereby hindering advocacy groups' work (Mwendwa et al., 2021). These conditions collectively limit disability clusters' ability to fully implement the obligations of the UN CRPD in their advocacy and service delivery roles.

Societal attitudes and cultural norms add further barriers to institutional effectiveness. Persistent stigma, low public awareness, and misconceptions about disability remain widespread in many communities, including those in Nigeria. These attitudes influence family decisions, community support systems, and institutional priorities, often resulting in limited acceptance of disability rights initiatives (Ogunyemi & Idowu, 2022). Studies from South Africa, Kenya, and the United Kingdom highlight that negative social attitudes reduce participation in community programmes, discourage reporting of discrimination, and limit the visibility of persons with disabilities in public life (Maart et al., 2021; Shakespeare et al., 2022). Where cultural norms frame disability as a personal tragedy or spiritual issue, disability clusters face considerable obstacles in mobilizing communities or securing local support for rights-based initiatives. These social barriers interact with institutional shortcomings, reinforcing patterns of exclusion and weakening the outreach efforts of OPDs.

Access to resources, including technical training and inter-agency coordination, remains another significant challenge. Many OPDs lack specialised training in rights-based advocacy, programme

design, financial management, and monitoring and evaluation, which affects their ability to meet organisational goals (Akinola & Eze, 2023). In addition, poor coordination between disability clusters, state agencies, and civil society groups leads to duplication of efforts and inefficient use of limited resources. Research in both Nigeria and other African countries shows that inter-agency collaboration is often weak due to inconsistent communication channels, unclear mandates, and competition for limited funding (Lutalo et al., 2023). In contrast, studies from Sweden and Canada show that strong coordination mechanisms, clear referral pathways, and regular joint planning meetings significantly strengthen service delivery and advocacy outcomes (Bergstrom & Eriksson, 2021; Trudeau & Paquette, 2024). These comparisons demonstrate that improved coordination, adequate training, and better resourcing could significantly enhance the effectiveness of disability clusters in Lagos State.

#### *Impact of Disability Clusters on Rights Protection and Social Inclusion*

Recent evidence indicates that disability clusters, which are collaborative groupings of OPDs and allied actors, can strengthen rights advocacy, influence policy processes, and expand service provision when they operate with coordination and clear objectives. International policy initiatives and government strategies have highlighted the value of collective action for raising visibility and bargaining power. For example, the UK Foreign, Commonwealth and Development Office's Disability Inclusion and Rights Strategy (2022-2030) underlines that sustained partnerships between DPOs, government bodies, and donors can improve policy uptake, increase access to funding, and embed disability inclusion in public programming (Foreign, Commonwealth and Development Office, 2022). Similar lessons emerge from civil-society coalitions in Europe and North America, where joint campaigning and pooled technical resources have supported legal and administrative reforms that strengthen protections for persons with disabilities (Alliance for Disability Development, 2024).

In Africa, coalition models have produced demonstrable gains in policy influence and public accountability. National and regional alliances, for instance, consultative networks in South Africa and cross-organisational coalitions supported by pan-African bodies, have successfully submitted evidence to parliamentary committees, secured representation on advisory bodies, and participated in national reporting on the UN CRPD (South African Disability Alliance, 2023). At the country level, recent reviews show that coordinated OPD action has contributed to improvements in accessibility assessments and the monitoring of public services. The Global Disability Fund's (2025) country brief for Nigeria reports that cluster-style coordination in some states facilitated joint monitoring of public facilities and consolidated inputs for legislative reform, improving the visibility of accessibility deficits during state budget and planning cycles (Global Disability Fund, 2025). Centre for Women, Health and Inclusive Networks (2025) documents how cluster members in Ikeja and Ojo areas of Lagos pooled data and mobilized joint advocacy that fed into local action plans for violence-against-women-with-disabilities programming and facility accessibility checks.

Empirical case studies from Lagos State and analogous settings provide further evidence of concrete outcomes from cluster approaches. The Lagos technical action document describes cluster-led monitoring visits, joint submissions to ministries, and coordinated awareness campaigns that increased local officials' responsiveness to accessibility complaints (Centre for Women, Health and

Inclusive Networks, 2025). Research on assistive technology and service networks in East Africa shows that collective procurement and referral arrangements implemented by networks of organisations increased the availability and distribution of assistive devices, demonstrating a practical service-delivery benefit from coordination (Smith, 2024). These examples suggest that clusters can reduce duplication, extend geographic reach, and create economies of scale that individual organisations find difficult to achieve alone.

Beyond service delivery, clusters contribute to empowerment and inclusion by providing training, leadership development, and shared platforms for self-advocacy. Reports from capacity-building initiatives indicate that members of functioning clusters are better placed to participate in public consultations, to hold authorities to account, and to negotiate access improvements (Disability Rights Fund, 2022). International agencies and donors have also documented that when clusters receive targeted technical support, for example, in monitoring and reporting, budget analysis or legal literacy, they are more effective at pressing for implementation of CRPD obligations (Sightsavers, 2022). However, the literature also stresses that the positive effects of clustering are conditional; clusters yield the most impact when they combine representative membership, transparent governance, shared data systems, and stable resourcing (Global Disability Fund, 2025b).

Thus, the available evidence from developed countries, Africa, and Nigeria indicates that disability clusters can play a meaningful role in rights promotion, policy influence, and service provision, and that they can strengthen inclusion and empowerment when properly supported. For Lagos State, documented cluster activities, such as joint monitoring, coordinated advocacy, shared referral mechanisms, and collaborative awareness campaigns, point to clear pathways by which cluster arrangements can advance CRPD implementation and improve the social participation of persons with disabilities.

## **METHODS**

### *Research Design*

This study used a qualitative research design to examine the effectiveness of disability clusters in Lagos State under the UN CRPD. The design was suitable for gathering detailed accounts through open-ended engagement with participants. Qualitative approaches allow researchers to obtain participants' explanations, experiences, and meanings in natural settings, especially in studies involving social groups and advocacy structures (Creswell & Poth, 2018). Data were obtained through face-to-face key informant interviews (KII) and in-depth interviews (IDIs).

### *Participants*

The study population consisted of the following six disability clusters recognised in Lagos State: National Association of the Blind (NAB), Nigeria National Association of the Deaf (NNAD), National Association of Persons with Physical Disabilities (NAPPD), Spinal Cord Injured Association of Nigeria (SCIAN), National Association of Persons with Intellectual Disabilities (NAPID), and Integration, Dignity and Economic Advancement (IDEA; association of leprosy

survivors). These clusters are documented by the Joint National Association of Persons with Disabilities (JONAPWD, 2016).

Purposive sampling was used. This method is suited for selecting participants who can provide relevant information based on their organisational roles and lived experience (Etikan et al., 2016). Four clusters, namely, NAB, NNAD, NAPPD, and SCIAN, were purposively selected because of their active organisational structures in Lagos State and their availability during the data collection period. Two groups of participants were engaged: 1. Organisational leaders for KIIs and 2. Members with lived experience for IDIs. A total of 20 interviews were conducted (eight KIIs, made up of two leaders from each cluster, and 12 IDIs, made up of three members from each cluster. Participants were included if they met the following criteria: Were adults aged 18 years and above, registered leaders or members of the selected clusters, could communicate clearly during the interview, and gave voluntary consent. Participants unable to engage meaningfully in interviews due to cognitive limitations were not included for ethical reasons.

#### *Method of Data Collection*

Data collection was carried out during a period of three months. Two unstructured interview guides were used, one for leaders and one for cluster members. Interviews were held face-to-face at venues chosen by participants. All interviews were audio-recorded with consent. Field notes were also taken to capture relevant observations.

#### *Data Management and Analysis*

Audio recordings were transcribed verbatim by the researcher. The analysis followed thematic content analysis. This method is widely used in qualitative studies for identifying and organising patterns in participants' accounts (Braun & Clarke, 2021). The analytical steps included: Reading all transcripts to gain familiarity, open coding of repeated ideas, grouping related codes into categories, developing final themes, and checking the themes against the raw data. No percentages were used unless the exact number of respondents was provided.

#### *Ethical Considerations*

This study adhered to ethical standards of the American Psychological Association (2020) for research involving human participants. It respected and guaranteed participants' confidentiality, anonymity, and safety. Informed consent was obtained from all participants, who were informed of their right to withdraw from the study at any time without penalty. Approvals were also obtained from leaders of disability clusters used before data collection commenced. Confidentiality was ensured by removing names and identifiable details from transcripts. Audio files and transcripts were stored securely in password-protected folders.

## **RESULTS**

### *Theme 1: Use of the UNCRPD as an Advocacy and Service Delivery Tool*

The first research question focused on the extent to which disability cluster organisations in Lagos State apply the provisions of the UNCRPD in their activities. Accounts from interviewees showed that most of the cluster leaders (7 out of 8) recognised the UNCRPD as a tool that strengthens their engagement with government agencies and civil society actors. These leaders explained that the document gives their organisations a basis for demanding improved conditions for persons with disabilities in Lagos State. Several leaders (5 out of 8) stated that the UNCRPD contributed to wider advocacy efforts that led to the domestication of the National Disability Act in 2018. Four leaders reported that the UNCRPD influenced their shift from a charity approach to a rights-based approach in service delivery. They described how this change shaped their internal programmes and encouraged their members to understand disability as a rights issue. Some participants also stated that the UNCRPD helped challenge discriminatory attitudes and supported their campaigns against stigmatisation in communities.

A few interviewees (3 out of 8) reported that they used the convention to advocate for improvements in accessibility within public buildings. They noted that several public structures that lacked ramps were later reconstructed to provide them. One respondent explained:

“Yes, the convention has been the major facilitator for our cluster. It gives us authority and gives members confidence, knowing that there is an international instrument that speaks to their rights. Without the convention, I would not have had the legal basis to engage effectively on issues affecting persons with disabilities” (*IDI, Male, Hearing Impaired*).

Another participant highlighted their efforts to improve accessibility in health and public facilities:

“As a cluster we have been able to push for the creation of more ramps. Another thing we have raised is the need for health facilities to generate data that captures persons with disabilities who use the services.” (*IDI, Female, Physical Disability*)

### *Theme 2: Factors Encouraging Adoption of the UNCRPD*

The second research question examined the factors that encourage or hinder the application of the UNCRPD among disability clusters. Interview data showed that most of the participants (10 out of 12) identified the rights-based approach promoted by the UNCRPD as a major influence on their adoption of the instrument. They described the social expectation for disability issues to be addressed through principles of equality, inclusion, and dignity. Several interviewees pointed out that the UNCRPD enables their organisations to challenge discriminatory practices and to demand equal opportunities.

A participant stated:

“In our cluster, the UNCRPD gives us leverage to demand access to different areas of life without discrimination. It helps us counter negative attitudes and gives strength to our message of inclusion.”  
*(IDI, Female, Physical Impairment)*

Legal recognition of the UNCRPD was also noted as an encouraging factor. Participants explained that the convention gives them a legitimate platform to engage duty bearers and to request better protection for persons with disabilities.

#### *Theme 3: Barriers to Effective Application of the UNCRPD*

While several participants reported positive experiences with the use of the UNCRPD, a significant number (8 out of 12) described barriers that hinder their effective use of the instrument. These barriers fell into two categories: institutional limitations and economic hardship.

Institutional limitations were frequently mentioned, with 6 respondents stating that they lacked access to organisations or training centres capable of teaching them how to interpret the articles of the UNCRPD. Several respondents (5 out of 12) described the convention as “too difficult to understand”, noting that without guidance, they struggled to translate its provisions into practical advocacy strategies. Economic hardship was also highlighted. Many cluster members (7 out of 12) explained that poverty, limited financial resources, and unstable livelihoods reduced the time and capacity they could dedicate to studying or applying the UNCRPD. For these participants, daily survival took precedence over engaging with lengthy international instruments:

“Many of us are still battling with poverty, lack of funds and means of survival. Reading the UNCRPD to fully understand it becomes secondary because people are trying to cope with day-to-day challenges”.  
*(IDI, Male, Physical Disability)*

## DISCUSSION

The findings show that disability cluster organisations in Lagos State make notable use of the UN Convention on the Rights of Persons with Disabilities (UNCRPD) in their advocacy and service delivery, although their engagement is uneven and shaped by structural and economic limitations. Most cluster leaders reported that the UNCRPD strengthens their interaction with state institutions and enables them to challenge discriminatory practices. This outcome supports earlier studies showing that international human rights instruments can strengthen the influence of organisations of persons with disabilities (OPDs) when they engage with public authorities and civil society actors. Reports from South Africa and other African countries have documented similar gains in advocacy strength when OPDs anchor their demands in the principles of the CRPD (South African Disability Alliance, 2023; MDAC, 2024). The present study reinforces these findings by showing that Lagos-

based clusters use the UNCRPD as a source of legitimacy when negotiating with duty bearers, especially on issues related to accessibility, inclusion, and respect for dignity.

The shift from charity-based models to rights-based service delivery reported by several leaders reflects a growing recognition of disability as a legal and social justice issue. This aligns with Nigerian scholarship that argues for the need to treat disability from a rights perspective rather than from welfare or charity standpoint (Ashiru, 2023). The clusters' reported adoption of rights-based approaches suggests that international norms are gradually influencing organizational behaviour at local levels. These findings also correspond with international reports showing that when OPDs receive technical exposure to CRPD standards, their internal programmes, public messaging, and community training activities increasingly reflect rights-based values (Disability Rights Fund, 2022; Sightsavers, 2022).

The study also found that participants used the UNCRPD to promote accessibility in public facilities. Several respondents attributed specific improvements, such as the installation of ramps in health and public buildings, to their advocacy efforts. This matches the Global Disability Fund (2025) report, which highlights that cluster-style coordination in parts of Nigeria has contributed to improved monitoring of accessibility and increased responsiveness from public agencies. Similar outcomes have been documented in European disability coalitions, which have used joint advocacy to influence accessibility legislation and infrastructure upgrades (Alliance for Disability Development, 2024). The study's findings therefore support the view that coordinated advocacy anchored in international standards can strengthen efforts aimed at removing environmental barriers.

The study further identified factors that encourage the use of the UNCRPD among clusters. Participants described the legal recognition of the Convention and the broad social expectation for equality as key influences. These findings correspond with research showing that when disability rights instruments are recognised within national law, OPDs gain stronger grounds to negotiate with government agencies (International Commission of Jurists , 2025). Furthermore, the emphasis placed by participants on the relevance of equality, inclusion, and dignity is consistent with the MDAC (2024) observation that CRPD-aligned advocacy enables OPDs to challenge negative attitudes and discriminatory practices, even in low-resource settings.

Despite these positive findings, significant barriers continue to restrict the effective use of the UNCRPD by disability clusters in Lagos State. The first major barrier concerns institutional capacity. Many respondents reported limited access to training on how to interpret and apply UNCRPD articles. This finding echoes the concerns raised by several reports indicating that OPDs across Africa often lack the technical competence required to translate international disability rights instruments into organisational strategies, advocacy materials, or policy submissions (Global Disability Fund, 2025; MDAC, 2024). Nigerian-focused assessments by the African Polling Institute (2022) and the Fajemilo Foundation (2023) also highlight similar gaps in data management, strategic planning, and rights-based programme development among OPDs. The present study adds to this literature by providing specific evidence from Lagos State disability clusters and showing that the absence of training centres or technical mentors limits the extent to which cluster members can apply the CRPD effectively.

The second major barrier identified is economic hardship. Respondents repeatedly noted that poverty and unstable livelihoods reduce the time and capacity they can dedicate to studying or applying the UNCRPD. This finding is consistent with the literature that identifies financial constraints as one of the strongest impediments to effective disability advocacy. Hickey et al. (2021) and Karrie et al. (2024) emphasise that underfunding restricts organisational activities, reduces staff capacity, and undermines strategic planning. In Nigeria, scholars and sector reports similarly observe that irregular government support and limited donor engagement further constrain the work of OPDs (Adebisi & Emmanuel, 2023). The current study corroborates these earlier findings by demonstrating how economic pressure affects individual members directly by, for example, reduce their ability to engage with training, advocacy tasks, or document review, thereby weakening the organisational capacity of clusters as a whole.

Comparing these findings with the literature on effective disability coalition work reveals a contrast between what clusters could achieve and the realities they face. Studies from Sweden and Canada indicate that strong coordination mechanisms, stable resources, and regular joint planning produce tangible gains in service delivery and policy influence (Bergstrom & Eriksson, 2021; Trudeau & Paquette, 2024). Lagos State clusters show potential for similar achievements, as seen in their reported success with accessibility advocacy, but the absence of sufficient funding, training, and administrative support prevents them from realising these outcomes consistently.

Thus, the findings illustrate a gap between the promise of the UNCRPD and the capacity of disability clusters to use it fully. While the clusters show strong motivation and partial application of the Convention, their progress is slowed by institutional weakness, limited resources, and the daily financial struggles experienced by their members. These findings align with studies across Nigeria and other African countries, confirming that organisational effectiveness depends not only on legal instruments but also on the presence of functional governance systems, technical expertise, and sustainable financing (Ajuwon & Dagunduro, 2024; Global Disability Fund, 2025).

These results also reinforce the need for sustained investment in disability governance structures in Lagos State. The literature emphasizes that cluster-based models succeed when supported by clear internal procedures, shared data systems, and steady financial and technical backing (Global Disability Fund, 2025; Sightsavers, 2022). The Lagos-based evidence presented in this study suggests that such support would significantly strengthen the ability of disability clusters to implement CRPD obligations and improve the social participation of persons with disabilities.

## **Conclusion**

The study shows that disability cluster organizations in Lagos State draw considerable strength from the UN CRPD, using it to reinforce advocacy, guide service delivery, and promote a rights-based approach. Their use of the convention aligns with earlier research that emphasizes the CRPD's value for legitimacy, mobilization, and engagement with state institutions. At the same time, the findings reveal that institutional weaknesses, limited training, and economic hardship continue to restrict effective application of the convention, supporting previous studies that highlight capacity gaps, weak enforcement structures, and financial constraints within OPDs. The results point to the ongoing need for stronger institutional support, clearer implementation

pathways, and sustained investment in organizational capacity so that disability clusters can perform their roles more effectively in advancing inclusion, accessibility, and rights protection for persons with disabilities in Lagos State.

### **Recommendations**

Based on the findings of this study, the following recommendations are made:

1. Government agencies, disability commissions, and partner organisations should establish sustained training programmes that equip disability cluster leaders and members with practical skills for interpreting and applying the UNCRPD. This should include structured workshops, mentoring, and simplified guides that support the translation of the convention's articles into routine advocacy, organisational planning, and service delivery.
2. Disability clusters should receive consistent funding, administrative support, and access to resource centres. Targeted financial assistance, operational grants, and improved coordination with state institutions would strengthen their ability to engage in rights-based advocacy, conduct community outreach, and meaningfully implement UNCRPD principles.

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