DEMystifying the Capabilities of the Cognitive Impaired in Ghana

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Abstract: Most people here in Ghana still perceive the special needs especially those who have intellectual disabilities as punishment from the gods, abomination or curses associated with spiritual and societal misfortunes. Clinical psychology has expanded its tentacles extensively in all human endeavors to encourage people to amend their lives in order to ensure healthy human development. Yet the mysteries surrounding the cognitive impaired in Ghana have barely changed. In this research, the fusing of concepts in clinical psychology, neuroscience which encourages the use of the right hemisphere or the artistic brain and the expressive arts has introduced us to other alternatives for the special needs in Ghana. This paper reveals how artistic dynamics can harness several theories into a cohesive holistic approach for the cognitive impaired in Ghana.

Keywords: capabilities, intellectual disabilities, cognitive impaired, Ghana

1. Introduction

The presence of a special needs child especially with intellectual disability in a marriage or family unit brings about many problems. Marital difficulties may arise with irritations and other disruptions of the family unit. Some parents may even go to the extent of showing negative reactions to the child’s deficient abilities and this makes it very difficult for any wholesome relationship to be developed in the family. These negative reactions can adversely affect the full maturational development of the child and may aggravate or compound the problem.

2. Causes of Intellectual Disability

Various causes are attributed to mental/ intellectual disability. They include; Pre-natal factors, Peri-natal and Post-natal factors.
Pre-natal factors include, problems encountered during conception or during pregnancy. They include; over exposure to radiation, fetal alcohol effect and chromosomal malformation etc. Other pre-natal causes include; Sexually Transmitted Diseases (STDs) such as gonorrhea, syphilis, etc. All these can cause damage to the Central Nervous System (CNS) of the unborn child. The emotional state of the pregnant mother and consistent exposure to emotional trauma and excessive use of drugs usually not prescribed by any physician during pregnancy may be contributory factors which may trigger these conditions.

Genetic causes are detected from birth, and exhibited in early age conducts such as mongolism, cretinism, microcephaly and hydrocephaly. Constitutional birth related traumas which are due to a variety of causes such as prematurity, surgery [caesarian section], high forceps delivery and anoxia, all fall under environmental causes. Prenatal infections like syphilis and rubella [measles] in the mother can also result in mental deficiency (A. Samuel Danquah, Morson, & Ghanney, 1976, pp. 48-50) Intellectual disability/cognitive impairment or mental retardation can result from numerous causes, ranging from genetic to environment.

Peri-natal influences are happenings during and around the onset of birth. Some of these causes include; anoxia or lack of oxygen; normally when there is undue prolonged labor. Narrow pelvis may cause damage to the head of the child. Sometimes heavy sedation or excessive use of anesthesia during the time of birth as well as breach delivery, may also cause a number of injuries related to the brain of the child. Often, all the peri-natal factors are environmentally inclined.

Post-natal causes include many childhood dangerous diseases such as malaria; leading to convulsion, and also measles, mumps, whooping cough, head injuries, meningitis etc. Post-natal causes may also trigger other conditions such as of epilepsy, both symptomatic and idiopathic, and this can be associated with abnormal behavior. “The incidence of impairment was greater among patients or children who have had frequent convulsive attacks due to malaria” (Danquah, A.S. 1976, pp. 52-54). Malaria, one of the most common illnesses in sub-Saharan Africa and Ghana for that matter, affects both children and adults. Among children, convulsions are frequent due to poor management of temperatures.

2.1 Social and cultural perceptions of the Cognitive impaired in Ghana

(Danquah, 2014) affirms that; “Ghana has recently crossed that bridge; the opposition was very stiff at the very beginning” (p.27). His pioneering works in Clinical Psychology in Ghana demonstrated the effectiveness of psychological interventions in treating clients suffering from various mental health disorders. Surveys he conducted heightened revelations about attitudes, behaviors and perceptions of parents, families and society regarding children with intellectual disability in Ghana. The outcomes reveal that, the perceptions that mental retardation is associated with spiritual and societal misfortunes, curses by supernatural beings, punishment from the gods and evil spirits, and attacks from malevolent human beings who have powers of witchcraft or sorcery (juju) are still real in Ghana. He explains that at the time he started his clinical counseling, it was
absolutely difficult to convince parents and families that these special children were not evil; neither were they the devil’s advocates nor people suffering from insanity. (Danquah, A.S. 1976, pp. 40-45).

These perceptions and attitudes confirm what Opoku (1978) refers to as the Theory of Causation in the Ghanaian context. He explains why the indigenous African and for that matter the Ghanaian wants to find out ‘why things happen’. In his opinion, Ghanaians believe that disease, illness, epidemic, drought, misfortune and even death may be caused by a broken relationship between human beings and supernatural beings. Finding solutions, prevention and cure therefore, must involve the physical and the spiritual. Opoku 1978, pp.145-149).

This mutual dependency between the physical and the spiritual is so essential to the Ghanaian so much so that, most often they see their survival as a result of their ability to harmonize both aspects of life. Any malfunctioning of one aspect; either the spiritual or the physique will therefore have direct impact on the other and vice-versa.

Due to these perceptions, children with intellectual disability are disregarded both culturally and socially and are labeled in various ways. Below are examples of these names in some Ghanaian languages. They include; ‘Gyimogyimi’ in Akan, “Ebolo” or “Ebagyimi” in Nzema, “Buulu” or “Musu” in Ga, “Budunu” in Sisala, “Odamite” in Dangme, “Tafrakye Tagbornadeto” or “Ehorvi” in Ewe and “Esabalto” in Gonja. All the names which denote ‘imbecile’ or ‘foolishness’ are still being used till present-day.

These negative attitudes, perceptions and behaviors have aggravated the problems of countenancing progressive interventions to proceed. Since the cause of mental retardation is most often attributed to supernatural beings, cosmic powers, wicked people and witchcraft spirits by Ghanaians, it is extremely difficult to persuade society against these superstitious perceptions and to allow positive interventions to proceed.

This explains why majority of parents and families sought help and healing from shrines, herbalists, and spiritual churches even before seeking help from orthodox medical facilities and Psychiatric Hospitals.

One striking revelation I gathered from some of the Ewe communities in the Volta Region of Ghana is that, a severely retarded child is seen as a python “ehɔ” in human form. The python is a deity in the southern and mid portions of the Volta Region. Parents, families and the community at large therefore see these special needs children as taboos/curses/abomination to the entire family.

Another disclosure from some Ewe communities in neighboring Togo interestingly revealed similar outcomes. They also believed that, children with mental retardation or cognitive impairment are gods/deities; such as the river god, the snake god, or ancestral gods, who have reincarnated and who must be provided with the requisite form of abode; shrine, or sanctuary, for worship.

The new classification of deficiency models now places the consequences of mental retardation from child to the environment. This means is that, the environment or the society in which these children find themselves has contributed more negatively to worsening the situation of these children than the children’s condition itself. These
negative attributes compound the problems and affect these children negatively leading to more maladjustment problems.

These deep-rooted cultural barriers and social negative attitudes and perceptions about the strengths and capabilities of persons with disabilities have hindered their education and training, as well as their social and economic integration into mainstream society.

Today, painstaking professional and clinical interventions are gradually improving people’s perceptions and attitude towards children with cognitive impairment. This achievement may be linked to the development of more clinical and special needs educational facilities in Ghana. These have undeniably strengthened some of the parents and families in lessening the negative attitudes and perceptions about this category special needs children.

Nonetheless, when optimistic and positive attitudes and reactions are encouraged, healing is accomplished to enable development to proceed. Positive attitudes may not necessarily change the child’s conditions, but can transform his/her situations and create conducive atmosphere for progress. I am of the view that if we can take cues of positive practices from other parts of the world we can attain tremendous achievements in Ghana. One of such insights is what neuroscience reveals to us about the two hemispheres.

2.2 Neuroscience in the Education of the Cognitive Impaired

Neuroscience makes us aware that the cerebral cortex, the part of the brain that houses rational functions is divided into two hemispheres; right and left. The left hemisphere is the seat of language and processes in a logical and sequential order, and it is in charge of carrying out logic and exact mathematical computations, analysis, lists, linearity, etc. The right hemisphere is however more into artistic or visual imagery, and processes intuitively, holistically and randomly. The brain’s right hemisphere controls muscles on the left side of the body, while the left hemisphere controls the muscles on the right side of the human body. However, the preferences of the brain’s two sections concerning right-handedness or left handedness are more complex than just mere left versus right (Remy, 2011).

The hemispheres communicate to each other through a thick band of nerve fibers called Corpus Callosum. Although it is difficult to conclude that a person is totally right brained or totally left brained, individuals uniquely, have dormant sides of the brain; just like how in a usual sense people may have a dormant eye, hand or foot.

Artistic forms in the right hemisphere are mostly preferred for the cognitive impaired, however, sometimes the use of executive skills located at the frontal cortex of the brain may be considered for exceptional special needs children by teachers, parents, care-givers, etc. Executive skills entail cognitive processes that involve planning, attention, memory, problem solving, flexibility, sense of time, emotional arousal and control of social strengths, etc., but users of these executive skills must be flexible in their thinking and open to new ideas, for the creative empowerment of these cognitive impaired children.
Dawson and Guare (2013) observed that, “human beings have a built-in capacity to meet challenges and accomplish goals through the use of high level cognitive functions called executive skills.” Executive skills allow us as humans to organize our behavior over time and override immediate demands in favor of longer-term goals. Through the use of these skills, we plan and organize activities, sustain attention, and persist to complete these tasks. Executive skills enable us to manage our emotions and monitor our thoughts in order to work more efficiently and effectively. Simply put, these skills help us to regulate our individual behaviors.

According to Grandin (2006), “the frontal lobes and the prefrontal cortex along with connections to adjacent areas, make up the neurological base for executive skills”. (p.3); the frontal lobes decide what is worth doing and attending to. The frontal lobes monitor, evaluate and adjust all activities. They provide continuity and coherence and modulate affective and interpersonal behaviors so that, drives are satisfied within the constraints of internal or external environments. In her research, “Thinking in pictures” Grandin explains that visual thinkers like her are good at hands on work and experiments. This is because she developed her area of strength in visualization. Most often, special educators put so much emphasis on deficits of the children with special needs, that they forget the importance of developing the children’s talents. She notes that; “If I could snap my fingers and be non-autistic, I would not; Autism is part of what I am”. Autism can also have desirable and enabling consequences, both to the individual and the society. (Grandin, 2006, pp. 229-234)

Today, in trying to raise the standards, many schools of thought may argue that Einstein for example, who did not speak until three years, would not have been successful. Several famous scientist, musicians, engineers, and artists who had learning problems or were on the Autism Spectrum would not have achieved their aims. Many high functioning autistic and Asperger’s or dyslexic students who go into successful careers in the past, did not only inspire themselves, they also had teachers who motivated them to succeed. Good teachers try different methods and use the one that works for a particular child. Good teachers are worth their weight in gold

3. The Creative Arts Therapies

In Rubin (1987)’s résumés about the Approaches to Art Therapy, she notes, “there are many paradigms and more than one lens through which to view our complex world”. (p.317). With increase in the number of lenses, art therapists are able to put into their clinical “frames” a multiplicity of perspectives which go beyond the mere use of art materials and forms. In order to achieve intellectual, logical, emotional and intuitive benefits, both feeling and thought must be integrated in the therapeutic processes.

The image and the complexity of both patient and process in art therapy are based on certain strongly-held convictions that every human being has genuine creative potentials. However, the natural tendency to actualize that potential at increasing mature levels to achieve growth must first of all be activated deliberately.

According to Rubin (1987);
"There is only a thin line between active imagination and art...there is magic in both healing and creating...While we are involved in this process of active imagination through any of the arts, we do not only place emphasis on the aesthetic aspect of our work but also on the healing." (p.119).

Art and healing are closely related, but one must see beyond the ordinary in a relentless effort to see deeper and in a more profound way than the art work appears. That is the only way our interpretation of the art work would give a new meaning and breakthrough to users.

In doing so, the creative discovery releases the self into the realms of the Uncharted and brings forth the innate creative capabilities for the empowerment of these users. My notion of the uncharted is depicted below in a distinctive framework illustrated diagrammatically below. Black in the center, surrounded by a grayish sphere; the grayish sphere is also surrounded by a larger white sphere. On the white sphere are lightening-like images shooting in to the air. Below is the designation of the framework I created to depict my concept of the capabilities of the cognitive impaired in Ghana (Deh, T.H. 2016, p.129).

As described pictorially, the unmapped abilities of the cognitive impaired children through no fault of theirs are located in the dark portion of the diagram. These children however, possess concealed latent capabilities which remain within this dark portion until they are tapped. These children can only linger within the dark circle, if nobody intervenes. However, when they are assisted with the creative arts, they are able to graduate to the greyish sphere, where there are bigger and better opportunities to aspire higher.

**Figure 1:** Chartering, the Uncharted

**Key:**
Black - Untapped creative abilities  
Grey - Minimal intervention  
White - Excellent results
Undoubtedly, with good guidance, right strategies and excellent directions, many cognitive impaired children can proceed to the white portion where they can become excellent dramatists, artists, musicians, dancers, poets, etc. [just like Chris Burke, Lauren Potter, Grandin Temple and many others, in other parts of the world]. The portions which look like lightening shooting into the air, are the portions where prodigies may emerge when they receive requisite assistance. As the saying goes, ‘the sky is the limit’, they are unstoppable when they reach this level and therefore can do exploits far beyond cultural and social boundaries.

4. Conclusion

The arts have not been detached from healing by ancient cultures. Many art forms have survived and flourished because of their continuing relevance, adaptability and dependence on our constant use. These art forms have become viable tools for instruction, empowerment and healing. The creative forms are tools that can be explored, and their usefulness extends far beyond the confines of just entertainment, to the fields of psychotherapy and neuroscience.

It must be stressed that, if in the past people actually sang songs and danced to relieve them of their pains, anguishes and fears; if people could draw images or scribble to expose their frustrations and dangers in order to fight against suppression, oppression and depression, then, we of today’s world must continue to explore the creative modalities to attain ultimate healing. The arts therefore, have become the vehicle through which this unique form of therapy is achieved. Creative skills which are housed in the right hemisphere must be utilized as tools for education and development to demystify the capabilities of children with special needs in Ghana. The decisions for choice however, must be based on the creative strengths and/ or weaknesses of each person. This is because when deliberate creative interventions are applied, their ‘Eureka’ moments are discovered.

References

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