

Parents, Friends, Professionals and Decision - Makers' Views in the Framework of Living Together with People Living with Disability in Congo

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Abstract: *This paper analyses the care of people living with disabilities under a psychosocial analysis of social links and social ties, with their immediate surroundings and decision - makers. It transpires from this study that people living with disabilities in Congo are victims of social, political, economic, cultural and environmental discriminations. Their individual and global care is insufficient and therefore ineffective. The responsible people in charge of administrative structures for people living with disabilities consider disability as an abnormal physical or mental state, keeping the individual in a total dependence situation. It should be advised to develop strategic solutions which should be both global and differentiated, in terms of protection, promotion and respect of the rights of people living with disabilities.*

Keywords: Congo; Social link, Perception, Person living with disability, Living together

1. Introduction

This survey addresses the social ties from the care of people living with disabilities. Since the beginning of the 2000s, I have been conducting research on the social phenomenon of disability in Congo - Brazzaville (Mbele 2008). This social bond around the handicapped bears an important stake according to five dimensions hereafter elaborated:

- Socially speaking, it is a question of identifying the views that non - disabled people have on people living with disabilities, with a view to promoting, in the context of better living together, harmonious cohabitation and social inclusion without discrimination;
- On the psychological level, with regards to human problems linked to disability such as frustration, denial, murder, marginalization, lack of identity, a psychosocial approach would be worthy for the improvement view of people living with disabilities;
- On the humanitarian level, this issue is more topical than ever in a number of Non - Governmental Organizations (NGOs) and associations that claim to be dedicated to the situation of people with disabilities;
- On the cultural sphere, mentalities, customs, attitudes and socio - cultural considerations also influence the lives of disabled people;
- Finally, at the socio - economic level, the issue is more than important due to the lack of income, unemployment, lack of housing, difficulties related to transport, which are faced by people living with disabilities.

Firstly, I question the content the Congolese attribute to the concept of disability. Then, which people, structures or social organizations are in charge of the problems related to the life of people living with disabilities in Congo and in what way do they do it concretely? Finally, how do non - disabled people view people living with disabilities in Congo Brazzaville?

I rely on the data collected in the field from interviews, observations and the analysis of documents drawn up by NGOs, associations for the disabled as well as State institutions in the Congo.

Our main objective is to update the place that Congolese society gives to people with physical or sensory disabilities, in order to:

- Identify the definition of the concept of disability in the Congolese context;
- Identify the socio - sanitary structures, associations and administrative institutions that are involved in the care of people living with disabilities;
- Raise public awareness, decision - makers and governments on the worrying situation of people living with disabilities.

Thus, I try to contribute to the improvement of the welfare of the person living with disability in Congo.

It is therefore a question here of taking an analytical look at the socio - economic situation of people living with disabilities based on their educational and socio - professional integration. I firstly explain the concept of disability and highlight the role of institutions and associative organizations in favor of people living with disabilities.

2. Key Concept Definition

2.1 What is a disability?

In its general sense, "handicap" is defined as a disadvantage, an inferiority. It is both a concept, an individual and a social phenomenon which distinguishes the concerned person. "Handicap" is a word of English origin which takes its first meaning from the internal competition of play. It is a

contraction of three words in the English language "hand in cap" (which means: the hand in the hat or cap).

The use of the term handicap gradually moved from gambling to horse racing and then to golf, to level the playing field. From limiting the performance of the best horses, the term has passed over the course of history, without precise explanation, to limiting human capacities.

According to Jean Marc ALBY (1987), the figurative use today (disadvantage, inferiority) is a neologism.

Furthermore, in France, the word handicap has become a legal term since 1957, when it appeared for the first time in the legislation on the reclassification of disabled workers. They were classified into categories A, B, C according to the severity of the disability, while assigning a percentage of disability giving rise to compensation or assistance measures such as AAH (Allowances for Disabled Adults).

On the professional level, or better still employment, the law of July 10, 1987, obliges any company (public or private) of at least twenty employees, exercising in France to hire 6% of disabled people among its total workforce, at the risk of paying financial compensation, which will be used for the professional integration of disabled people.

At the same time, stigmatizing terms such as "deficient" or "infirm" have gradually disappeared from legislative and regulatory texts.

The contribution of the United Nations (UN) to the fight against disability is also significant. The rights of persons living with disabilities are by definition the fundamental rights of the citizen as expressed in the first article of the declaration of human rights " *men are born free and remain equal in rights* ", as well as in the third article: " *everyone has the right to life, liberty and the security of his person* ". Alongside with this universal legislation, there is a specific legislation for disabled people with its limits.

Nowadays, disability specialists distinguish disability from disease and identify three main types of disability:

- Motor or physical handicaps such as paralysis of the lower or upper limbs, bumps, leprosy, elephantiasis, malformation of fingers, toes or other limbs of the body;
- Sensory handicaps concerning the visually impaired, the blind, the deaf and the dumb;
- Mental disabilities such as the deficient, autistic and intellectually disabled.

These three forms of disability can either occur at birth or after birth, and therefore be acquired. Barriers are sometimes difficult to establish between the so - called "normal" person and the "disabled" person, because the phenomenon of vicariance sometimes allows people living with disabilities to develop certain qualities unexpectedly. There is, worldwide, an International Classification of Disabilities (C. I. H), which has become the International Classification of Functions (C. I. F) since 2001 (WHO 1983, 2001). This classification clarifies the notion of disability by distinguishing three dimensions:

- The deficiency as a concept allowing to identify the alterations of the body, at the organic and functional levels;
- Incapacity linked to the consequences of deficiencies in terms of functional activity;
- The disadvantage, resulting from the unfavorable conditions in which an individual can find himself, because of his deficiency, in his environment with regard to the social standards in force.

In addition to the three main types of disability, the CIF now recognizes other forms of disability such as: social disability, psychological disability, intellectual disability (limitation in the deployment of mental functions: resonance, judgment, problem solving, understanding, acquisition of memory, attention, communication, etc.), disabling diseases (all respiratory, digestive and parasitic diseases such as: diabetes, hemophilia, Alzheimer's, etc.)

2.1.1 The word "handicap" in the Congolese context

In Congo - Brazzaville, the Law number 009/92 of April 22, 1992 *on the status, protection and promotion of the disabled person* (the roughly equivalent of the law of July 1987 in France), " *Is considered as disabled person, any person with a physical or mental deficiency, congenital or acquired, experiencing difficulty in performing normal functions for any so - called able - bodied person of the same age.* (Article 1 of the law).

This definition was developed in 1992, under the context of protest and widespread socio - political demands, marked by the holding of a so - called sovereign National Conference, bringing together all the political parties and all the associations that the Republic of Congo had at that time. The contribution of disability specialists and people living with disabilities was less. This law defines disability by focusing exclusively on the individual and the deficiency that the latter would carry, without taking into account the social or environmental aspects. It seems to be the work of a few administrations and specialists in a hurry to solve a problem and who have taken into account only a few aspects of the International Classification of Disabilities. Moreover, this law, considered as the basic text defining the status and promotion of disabled people in Congo, has remained till now without implementing decrees, despite its acceptance by default of better, by the multiple and dynamic associations for Congolese people living with disabilities.

2.1.2. The "Kikata"

In Congo, to designate a disabled person in national languages (Lingala and Kituba) and in several other languages of the country, is "Kikata". This concept which has a negative connotation could be translated into French by a handicapped, a paralyzed, a backward, a dependent or even an incompetent. It signals the absence of movement and often targets the physically handicapped. This word is nothing more than a stereotype conducive to a reductive and caricatural vision of the disabled person and his abilities.

Thus, Congolese people living with disabilities and their associations have always required that this expression be banned, as they consider it shameful and frustrating for the person living with a disability and their family. They

denounce the use of “kikata” by certain journalists on the radio as well as on television, because this expression is sometimes used by public opinion as an insult.

Actually, Congolese disability specialists must avoid using this term, which is as discriminatory as it is reductive, in order to take into account all the often unexplored potential of people living with disabilities.

The literature on Congolese people living with disabilities is poor. However, some researches have been carried out in Congo on children living with disabilities, mostly in urban areas, taking into account specific aspects such as: the education of the intellectually disabled (MIAKALOUBANZA Benoit, 1985), the integration of certain sensory handicapped people who have left school, the integration of the physically handicapped into the ordinary school environment.

In addition to the aforementioned types of disabilities, and according to Joseph MABANDZA and Victor MBOUNGOU (2015, p.30):

The Republic of Congo in its culture does not limit disability to this classic typology, it identifies another form of disability: cultural disability. This handicap arises from a very abnormal individual behavior or from the non - conformity of the person to the rules of conduct which stipulate directly or indirectly how each individual is supposed to behave in a social group. Thus, homosexuality and prostitution are handicaps. People who engage in it have difficulties if not impossibilities in meeting the expectations of the family, social and cultural environment. Therefore, the person involved is perceived as disabled with a cultural handicap.

Thus, the social link to this person, according to these authors, is then colored as in all cases of disabilities, feelings and reactions of rejection, political, social, economic, and cultural discrimination. Further to these few studies, one should consider the associations' reports and state and international institutions such as UNHACO, WHO, and ILO.

2.2 The social link

The social link is essential to any man, because it allows the identification of individuals with the community and therefore the feeling of collective belonging. It refers to all the relationships that unite individuals who are part of the same social group and that establish social rules between different individuals or social groups. The social bond is woven from the concrete social relations which ensure the social cohesion and the integration of individuals, like people living with disabilities, either by sharing common values or by the social recognition of differences when establishing social rules.

Since Emile Durkheim, sociology studies social facts, that is to say, ways of doing things which are imposed on individuals and which are external to them. In other words, they correspond to the elements that society imposes to individuals. In the context of people living with disabilities in Congo Brazzaville, social ties do indeed exist, but one

could wonder about the quality of the social ties with regard to the indicators making it possible to directly measure the presence or the strength of social ties in certain domains of social activities such as: the family (formation and dissolution of couples, family size, siblings), associations (creation and disappearance, number of members), religion (old and new religious practices), work (number of precarious jobs for the unemployed), offenses (evolution of delinquency and criminality). The concept of social link is therefore different from the broader concept of “social links”.

The crisis of social ties is sometimes mentioned for the following main reasons: the decline of authority (parents, teachers, police), the existence of failures during the socialization process (school failure, weak family ties, neighbours), the difficulty in establishing new rules for living together, due to selfishness and individualism (in the world of work, in daily life).

Serge Paugam (2018) defines the social link as "*the set of cultural, social, economic and political links which connect individuals in their daily life within various groups and which ensure social integration both from the individual point of view and from that of the global society*". He distinguishes four (04) major types of social ties:

- The bond of filiation between parents and children, which is based on intergenerational solidarity and close protection;
- The link of elective participation between spouses, friends, chosen relatives, which is based on the solidarity of the elective self - segregation and close protection;
- The link of organic participation between the actors of professional life, which is based on contractualized protection and the social esteem that results from it;
- The bond of citizenship between members of the same community, which is based on legal protection under the principle of equality (civil, political and social rights).

Looking at people living with disabilities was an opportunity to check the existence of each type of these social ties in the Congolese social, cultural, legal and political context.

2.3 “Living together”

“Living together” is a concept that expresses the peaceful bonds of good and mutual understanding that individuals, communities, peoples or ethnic groups maintain with others in their living space or in their geographical boundaries.

According to Martin Luther King "*We must learn to live together like brothers, otherwise we will die together like idiots.*" This concept therefore refers to a social bond very similar to the bond of kinship and the habit of living together. Living together therefore means recognizing, tolerating and respecting all forms of diversity, fighting against discrimination and facilitating harmonious cohabitation.

In the promotion and implementation of living together, various actors involved should work together to facilitate the emergence of common values that contribute to peace and social cohesion. In the era of current societies based on

individualism, the market economy and globalization, the values of "living together" seem necessary and still relevant. These values are first of all human, through which we express our humanity via values such as respect, consideration, empathy, tolerance towards others. They are ethical, moral and universal, both felt deep within and expressed in laws, constitutions, and many international texts affirming human rights.

According to Catherine Rouhier (2018, p.4), living together is not self-evident and takes the form of various actions:

- Promote values;
- Develop solidarity;
- Reorganize our common life on earth;
- Train in citizenship;
- Prevent conflicts;
- Respect cultures, religions;
- Reinforce the will of individuals to be actors;
- Teach everyone to recognize in others the same freedom as in themselves.

It is also about being tolerant, accepting differences, confronting ways of doing things and opinions, without judgment or contempt, but with respect, understanding and open-mindedness.

According to Jean De Dieu KOURISSA (2016, p.242) "To invest in the quest for the foundations of living together is to further consolidate the establishment of a global vision, noble, which consists in ensuring that, despite everything, peace and national unity remain."

This Congolese Association advocates a new social configuration that highlights the representativeness of all social strata, all nooks and crannies, all ethnicities, races, social minorities to a bright common future.

2.4 Institutions and associative organizations in favor of people with disabilities

In Congo - Brazzaville, reliable statistical data on people living with disabilities is almost non-existent, as is often the case in many other African countries. In 1984, the Republic of Congo embarked on an exhaustive census of people with disabilities, but faced with countless difficulties, this census remained incomplete. To overcome this problem, it would be desirable to provide, as other countries do, to include some questions related to disabilities during a general census of the country's population.

However, in February 1994, the Republic of Congo, with an overall population of 2,500,000 inhabitants, had approximately 250,000 disabled people; according to the State Secretariat for People with Disabilities on "The social situation of people living with disabilities in the face of the devaluation of the CFA currency". This 10% ratio is also mentioned by the World Health Organization (WHO).

The figure of 10% proposed by the WHO as the average percentage of people with disabilities in the total population of each country in the world is valid for countries in the North as well as those in the South.

However, the Republic of Congo, which experienced civil wars from 1993 to 1999, could consequently record a change in the number of people living with disabilities, either more likely upwards (due to war injuries and traumas), or downwards decline (by eliminating handicapped minorities). Today, this figure is estimated at around 400,000 disabled people, out of a population around 4,000,000.

Moreover, statistics on people living with disabilities in Congo are much more difficult to establish in rural areas than in urban areas, such as in Brazzaville, the capital of the country. Thus the following table summarizes the number of disabled people in the capital city of Brazzaville after the wars.

Table I: Statistics of disabled people in Brazzaville by categories of disability

Categories	Number	Total
Motor disability	Men 39,546 Women 22,600	62,146
Deaf and hearing impaired	Men 11,798 Women 7,802	19,600
Blind and visually impaired, mental and intellectual disabilities	Men 10,275 Women 7,725	18,000
Mental and intellectual handicapped	Men 4,919 Women 2,681	7,600
Leprosy	Men 401 Women 253	654

Source: UNHACO, Brazzaville.

In Brazzaville, more than half (58%) of people living with disabilities have disabilities in the upper and lower limbs, therefore physically disabled. Men are more affected by all types of disabilities (62%) than women (28%). This situation could be explained by the fact that the male sex is more exposed to phenomena such as wars, fights, and accidents of all kinds.

In June 2000, the city of Brazzaville, with a population of approximately one million inhabitants, had 108,000 disabled people according to the National Union of the Handicapped in Congo (UNHACO). This figure confirms our bet on an increase in the number of disabled people after the wars.

2.4.1 The place and role of associations

The Physically Handicapped Association of Congo (A. H. PHY. CO), created on March 9, 1979 in Brazzaville, could be considered both as a very first for the Congolese disabled and then as the ancestor of the current National Union of Disabled Persons of Congo (UNHACO). This categorical association with globalizing and vague objectives did not last long, and other more organized and ambitious ones took over.

Since the end of the 1980s and the beginning of the 1990s, a very remarkable dynamic of associations working to promote and improve the living conditions of people living with disabilities has been observed in Congo. This dynamic encouraged by the political authorities, is above all the fruit of the efforts of the disabled people themselves who have been good enough to organize themselves into associations of categorical types, with as pioneers or precursors the motor disabled people who have often shown at the head of claims. Thus, almost all associations of Congolese disabled people

have come together in a large national union that defends their interests both nationally and internationally.

- The National Union of Associations of Disabled People of Congo (U. N. HA. CO.)

U. N. HA. CO is a social association of a humanitarian and public utility nature, governed by the French law of July 1, 1901 and its implementing decree of August 15, 1901. It claims to be autonomous, apolitical and non - profit. It was created on July 30, 1987 in Brazzaville with a very broad and ambitious catalog of objectives which are:

- promote the organization and development of prevention, rehabilitation and social reintegration services and programs in collaboration with existing private or public local administrations and international organizations;
- stimulate administrations and partners to creating appropriate structures for the benefit of people with disabilities;
- encourage the public authorities to create and apply special legislation relating to the protection, training and employment of disabled people;
- strengthen the capacities of member associations to carry out their program for the equity and equality of opportunities;
- establish a coordination system to promote and ensure an exchange of information for equal participation at national, regional and international level;
- promote the realization of community projects for the maintenance of income and social security;
- seek the financial, material and human means to achieve these objectives.

The large UNHACO group brings together the following categorical associations of disabled people:

- 1) The National Association of People with Motor Disabilities in Congo (ANHAMCO).
- 2) The National Association of Lepers in Congo (ASL).
- 3) The National Association of Mentally Disabled People in Congo (ANPHMC).
- 4) The National Association of the Blind and Visually Impaired in Congo (ANADVC).
- 5) The National Association of the Deaf and Hearing Impaired in Congo (ANSDACO).
- 6) The National Association of Disabled Women in Congo (ANAFHCO).

Some groups or associations that are not directly part of UNHACO are affiliated to it; in this case we can quote:

- 1) Group for the Integration of Disabled People in Cuvette - Ouest (GIPHCO).
- 2) The Association of Albino Children in Congo (ASEALCO).
- 3) Handicap 3 (H - 3).
- 4) Handicap - Congo Relief (FIASECO).

There are certainly other associations or structures in Congo which deal with the defense of the rights and interests of people living with disabilities, without however belonging to the larger UNHACO group; these are among others:

- 1) The Committee for the Defense of the Rights of Persons with Disabilities (COD - PH).

- 2) The League for Education, Training and Information of Disabled People (LEFIPH).
- 3) Congo - Assistance (Humanitarian association chaired since the 1980s by the First Lady of the Congolese Head of State and which leads the fight against AIDS and charitable actions in favor of the sick, children, the poor and disabled).

In addition, UNHACO is an active member of several International or Global Organizations, such as:

- Disabled People's International (DPI)
- The World Federation of the Deaf (WFD).
- International inclusion.
- The Pan - African People with Disabilities (PANHA).
- The Central African Federation of Associations for the Promotion and Protection of the Rights of Persons with Disabilities.

The large UNHACO group also works in partnership with the State as well as with organizations and global institutions such as WHO, UNDP, the Raout FOLLEREAU Foundation, FUNUAP, Lions - Club, Caritas, the African Rehabilitation Institute.

2.4.2 Contributions from decision - makers

Actors in charge of the disability sector and people living with disabilities themselves have often denounced the lack of interest of Congolese institutions vis - à - vis people with disabilities, and the lack of a socio - economic policy in their favour, despite the law of 22 April 1992 on the status, protection and promotion of disabled people. For their part, the Congolese public authorities declare that they are sparing no effort for the respect of human and minority rights by establishing equal opportunities between all social strata. Article 31 of the Constitution of November 6, 2015 stipulates that people living with disabilities have "*the right to protective measures in relation to their physical, moral or other needs, to their development. The State has the duty to promote the presence of people living with disabilities within national and local institutions and administrations*". The same text establishes in its article 234 an Advisory Council of people living with disabilities responsible for making suggestions to the government on their lives. Disability - related issues in the Congo depend on the Ministry of Social Affairs and the Family, which has the duty to develop projects and programs in favor of people living with disabilities throughout the territory, in particular to educate children in difficult situations, disabilities and help families.

Some positive measures and actions aimed at the protection, promotion and development of disabled people at various levels are the work of the State, public authorities in collusion with associations for the disabled. It is:

- The signing and approval by the Congo of the agreement establishing the African Institute for Rehabilitation (IAR) of April 8, 1985 in Addis Ababa, as well as the obtaining on September 18, 1986 of the establishment of the headquarters and a branch in the Congo,
- The creation of the National Union of the Handicapped of Congo (UNHACO) in 1987, benefiting from financial subsidies from the State, which assigned it by memorandum a head office in an administrative building in February 1991,

- One - vote participation in the Congolese National Assembly of Persons living with Disabilities from 1988 to 1992;
- The broadcasting on State radio and television of programs for people with disabilities (Promo - Handi);
- The publication of a newsletter "LIAISON" specializing in disability - related issues,
- The adoption of Act 079 of the National Conference requesting the creation of a State Secretariat in charge of people with disabilities,
- The adoption at the National Conference and the promulgation by the President of the Republic of Law No.009192 of April 22, 1992 on the status, protection and promotion of the disabled person in Congo,
- The establishment in November 2015 of an Advisory Council for people living with disabilities in the fundamental law.

The Government's policy is variously appreciated because, the actors of associations, religious denominations, civil society, and people living with disabilities find it poorly defined, incoherent and without good vision. It is made up of speeches, small material assistance concerning only a few types of disabilities without aiming at the real integration of people living with disabilities, nor promoting their autonomy in community life. Workers in government structures speak of a policy with an unclear vision and without the means of action.

The activities deployed in the Social Action Centers (CAS) are only visible in the three (3) main cities of Congo (Brazzaville, Pointe - Noire and Dolisie) and are almost non - existent in the rest of the country. The offer of very insufficient and low quality services is essentially limited to small one - off donations to a few people living with disabilities and during the International Day of Disabilities. It is more the fact of a few associations and religious denominations in limited places.

The disability situation in the Congo, as everywhere else, raises the problem of the rights of people living with unrecognized and unrespected disabilities. The current policy is not oriented towards the protection of people living with disabilities, but based on their needs. It is essential to improve it and set up a national system for the protection of people living with disabilities, based on a new legal framework. Protection refers to the prevention of abuse, violence, stigma, discrimination; strengthening the capacities of guarantors or obligors such as: the family, associations, the State, the community; promoting social change and attitude change.

Despite these few positive and encouraging actions, the situation of people living with disabilities in Congo remains difficult because of a very deplorable living environment compared to the national average.

2.4.3 The school and social integration of people living with disabilities

At the school level, attendance is compulsory from 6 to 14 years old, because according to Law No.008 of September 6, 1990 on reorganizing the Congolese education system, the State guarantees compulsory education for each child. This

measure extends to people with disabilities (mental, sensory, motor and social misfits). This legal provision is not respected everywhere in the country, because according to the National Union of the Handicapped of Congo, barely 19% of disabled people are educated, including 2.9% in the three specialized institutions concentrated in Brazzaville, the capital.

These establishments whose number of pupils varies in a decreasing way according to the increase in the school level are:

- The Psychopedagogical Institute of Brazzaville which receives children with mental abnormalities;
- The Institute for Deaf Youth of Brazzaville (IJSB) created by religious orders and welcoming deaf - mutes, which belonged to the State until 1992, then was returned to the Catholic Church by the State after the Sovereign National Conference;
- The Institute for the Blind of Congo (IAC) located in the southern suburbs of Brazzaville: is an establishment that the Congolese State manages in partnership with the Salvation Army.

To these Institutions, we can add the Professional Rehabilitation Center for Persons with Disabilities, which is a branch of the African Rehabilitation Institute, whose insufficient training and lack of a clear staff status are deplored. At the socio - professional level, the situation is different in rural areas than in urban areas.

In rural areas, even if it has never been easy anywhere to be disabled, the disabled person in Congolese rural areas is integrated into traditional society. The person with a disability does not live in a separate "world", they belong to a clan or a village in which they participate in all activities according to their possibilities.

The other members of the village community are in solidarity with him by sparing him from tasks that are impossible for him to carry out. In short, in traditional rural areas, the handicapped person is relieved of work obligations or simply responsible for small productive obligations, without being excluded from collective consumption.

At the cultural level, integration is sometimes a function of the nature of the handicap. The question is, for example, more serious among people deprived of language than among blind people who have language, in a society where culture is transmitted in oral.

In urban areas, access to employment remains difficult and limited, even within public services. Among the manual jobs exercised by people living with disabilities, there are crafts, watchmaking, mechanics, pottery, shoemaking, brick making (NGAMBOU Jean, 1995).

The difficulties of social integration of the disabled person in Congo are real on the school, socio - economic or family levels. This person, often abandoned to his family or worse to himself, is required to make the necessary effort to overcome his handicap without special help, under the same conditions as certain so - called "able - bodied" people.

3. Conclusion

This analysis of the views of the immediate neighbour of people living with disabilities reports, through various indicators and needs, on the consideration of these people in order to improve the process of their social integration.

The situation of people living with disabilities in Congo does not differ from that of other African countries and even the world. However, the analysis reveals that people living with disabilities in Congo are victims of social, political, economic, cultural and environmental discrimination. Their individual and global care is insufficient and ineffective. The few services provided are not enough in terms of schooling, employment, accessibility, financial resources, quality of services, allocated credits and recognition.

In Congo, the actors of the structures in charge of people living with disabilities perceive the disability as an abnormal physical or mental state, maintaining the individual in a situation of inferiority, of lack of personal autonomy vis - à - vis others in community life. This situation disrupts family and social relationships, generates suffering for the individual and his relatives (parents, brothers, sisters and friends). They describe this state in terms of malformation, difficulty, restriction, impossibility that does not allow individuals to meet family, social and cultural expectations. The perception of disability among these actors can be understood in terms of adaptive behavior presenting a deficit in its functioning, an inadequacy of the subject in relation to what is expected of him.

Disability management in Congo should consist of developing a response that is both global and differentiated in a friendly and protective environment in the promotion and respect of the rights of people living with disabilities.

Modern education and work require new attitudes and apprehensions vis - à - vis people with disabilities, in view of the many difficulties posed by their educational and socio - professional integration in Congo: lack and insufficiency of specialized establishments, lack of teachers, unemployment, difficulties of transport, housing, medical care and food....

Finally, to improve support for people with disabilities in the Republic of Congo, the following proposals can be taken into account, among many others, in terms of:

1) Training:

- Create specialized establishments, with boarding schools, in the reception of disabled people in all regions of the country;
- Train trainers and specialized technicians, whose total number remains insufficient for the whole country;
- Organize forums, workshops, seminars, symposiums and campaigns to raise public awareness of disabilities.
- Train sign language interpreters for deaf women in childbirth blocks and information on HIV/AIDS.

2) Legislation and Institutions:

- Take as soon as possible the texts of application (decrees and orders) of the main law 009/92 of April 22, 1992, on

the status, promotion and protection of the disabled person in Congo - Brazzaville;

- Ratify UN texts related to disability issues;
- Recreate within the Government a Secretariat of State responsible for persons with disabilities as required by the National Conference in 1991;
- Set up Disabled People's Centers (MDPH) like those that exist in France and which would take care of specifying the degree or percentage of disability as well as the care of people living with disabilities.

3) Socio - sanitary action:

- Allocate an allowance to any disabled person, recognized as such, variable according to the degree of the disability. This allocation, it is said, in force during the colonial era has never been abolished;
- Introduce a disabled or invalidity card, which will be issued by an authorized body;
- Improve accessibility to all public buildings that can accommodate a disabled person.

4) Jobs and the economy:

- Set a hiring quota for people with disabilities of 5% for all large companies and 10% for the State, in order to encourage their hiring;
- Exempt from taxes and duties disabled people who have created an economic activity.

5) Culture, sport and leisure:

- Encourage and help people with disabilities to perform and exhibit their works in Congo and abroad;
- Create categories and teams for people with disabilities within sports federations and major national competitions.

At the end of this reflection, we are far from having exhausted in a few lines, a subject as vast and complex as that of disability. Many other dimensions, such as the socio - economic integration of people living with disabilities, have not been addressed here, we regret that. However, this is a reflection offering different avenues of entry for the study of people living with disabilities in the Congo, which will continue.

References

- [1] ALBY, Jean Marc (1987). *Handicaps, vécu, évalué*, Pensée Sauvage, Grenoble.
- [2] Constitution Congolaise du 06 novembre 2015
- [3] HAMONET Claude (1996). *Les personnes Handicapées*; PUF; Paris.
- [4] KOURISSA Jean de Dieu (2016). *Le vivre ensemble au Congo*, Paris, L'Harmatan.
- [5] Loi 009/92 du 22 avril 1992, *portant statut, promotion et protection de la personne handicapée au Congo - Brazzaville*
- [6] Loi numéro 008 du 06 septembre 1990 *portant réorganisation du système éducatif congolais*.
- [7] MABANDZA Joseph et MBOUNGOU Victor (2015). *La situation du handicap au Congo - Brazzaville*, Paris, L'Harmatan.

- [8] MBELE, Jean Didier (2008). *La Représentation des situations de handicaps au Congo - Brazzaville: une approche psychologique et socio - culturelle*, Thèse de Doctorat en Psychologie, Université Lumière Lyon II, Lyon.
- [9] MIAKALOUBANZA, Benoit (1985). *L'éducation des déficients intellectuels au Congo*; thèse de doctorat 3e cycle; Paris 10; Nanterre.
- [10] MORVAN, Jean Sébastien (1990). *Représentations des situations de handicaps CTNRHI*, Paris, PUF.
- [11] NGAMBOU, Jean (1995). *L'insertion socioprofessionnelle des jeunes handicapés de Brazzaville: cas des handicapés auditifs*, Mémoire pour le CAIJS; INJS; Brazzaville.
- [12] OMS (2001). *Classification Internationale du Fonctionnement, du Handicap et de la Santé*, Paris, Librairie Privat.
- [13] OMS (1983). *Classification Internationale des Handicaps*, Paris, PUF.
- [14] ONU (1948). *Déclaration Universelle des Droits de l'Homme*.
- [15] PAUGAM Serge (2018). *Le lien social*, Paris, PUF.
- [16] PORTALIER, Serge (1996). *Colloque sur la Perception, la Cognition et le Handicap: Recherches en Défectologie*, Université Lumière Lyon2; Lyon.
- [17] ROUHIER, Catherine (2018). *Les valeurs du vivre - ensemble sont - elles encore d'actualité ?* Bruxelles, n°36.18, Analyse UFAPEC.