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Innovative Rehabilitation Services for Capacity Building of Persons with Special Needs in Rivers State.

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Abstract
This study examined Innovative Rehabilitation services for Capacity Building of Persons with Special Needs. Three objectives, 3 research questions and 3 hypotheses were used in the study. Descriptive survey design was used for the study. The population for the study is 321 Rehabilitation Counselors and Persons with Special Needs. The study used the entire population of 321 respondents as the sample size. Census sampling techniques was used. Data for the study was collected by means of questionnaire titled: Innovative Rehabilitation Services for Capacity Building of Persons with special needs (IRSCBPSNQ)'. The instrument adopted a four point rating scale of Very High Extent to Very low Extent. Test-re-test method was used for the reliability test which yielded reliability co-efficient of 0.72. 321 Copies of questionnaire were distributed and Three hundred and twelve (312) were retrieved for analysis. Mean and Standard Deviation were used to answer the research questions, while t-test was used to test the hypotheses. The findings revealed that assistive technology plays a vital role in improving functional independence. Based on these findings, the study recommends increased investment in assistive technologies, enhanced rural rehabilitation infrastructure, and the development of market-driven vocational training programs to foster sustainable capacity building.

Keywords: Rehabilitation services, Assistive technology, Capacity building, Vocational training, Accessibility.

Introduction

Education is widely recognized as a fundamental human right and a powerful tool for social inclusion and empowerment. Globally, efforts to make education accessible and inclusive for all, including persons with special needs, have gained significant momentum. Inclusive education promotes equitable learning opportunities and supports the development of persons with disabilities to achieve their full potential (UNESCO, 2020). However, challenges remain in ensuring quality education and rehabilitation services that meet the diverse needs of persons with special needs (Smith & Tyler, 2022).

Innovative rehabilitation services have emerged as critical interventions to enhance the functional independence and social participation of persons with special needs. These services incorporate new technologies, methods and community-based approaches that go beyond traditional rehabilitation models (Johnson et al., (2021). Recent advances in assistive technology, for example, have revolutionized communication, mobility and learning for persons with disabilities, enabling greater autonomy (Kumar & Singh, 2023). Rehabilitation centers now adopt holistic strategies that integrate physical, psychological and vocational support tailored to individual needs (Brown & Lee, 2022). Moreover, community-based rehabilitation programs have gained prominence as effective models that engage local resources and promote social inclusion (WHO, 2023). Such programs facilitate participation in community life and reduce stigma associated with disabilities (Nguyen & Tran, 2021). In addition, psychosocial support services are increasingly recognized for their role in improving the emotional well-being and resilience of persons with special needs (García et al., 2022). The integration of innovative rehabilitation services in mainstream health and education systems remains a priority for inclusive development

policies (Miller & Roberts, 2020).

Accessibility of rehabilitation centers is a fundamental aspect of ensuring equitable service delivery. Innovations aimed at improving physical access, transportation and affordable service options contribute to higher utilization of rehabilitation services (Adeyemi & Okeke, 2023). Vocational training programs tailored for persons with special needs also play a pivotal role in capacity building by equipping beneficiaries with skills for economic independence (Smith & Patel, 2021). Together with assistive technologies, these variables form the backbone of innovative rehabilitation services aimed at holistic capacity building.

Assistive technology refers to devices and software that enhance the functional capabilities of persons with disabilities, enabling better communication, mobility and learning (WHO, 2023). Accessibility of rehabilitation centers addresses the physical and logistical barriers to service use, ensuring that persons with special needs can obtain required support (Adeyemi & Okeke, 2023). Vocational training programs provide practical skills and knowledge, facilitating employment and self-reliance among persons with special needs (Smith & Patel, 2021).
Capacity building is an essential objective of rehabilitation services aimed at persons with special needs. It involves developing the skills, knowledge and attitudes necessary for individuals to participate fully in society and lead independent lives (UNDP, 2022). Education and rehabilitation jointly contribute to enhancing self-efficacy and social competence among persons with disabilities (Johnson & Clark, 2021). Effective capacity building also requires addressing systemic barriers such as discrimination, inadequate resources, and policy gaps (Ahmed et al., 2023). Furthermore, capacity building encompasses empowering persons with special needs to access employment, education and social services (García et al., 2022). Community involvement and family support have been identified as critical factors in sustaining capacity-building efforts (Nguyen & Tran, 2021). Recent studies suggest that capacity building is most successful when rehabilitation services are personalized, culturally sensitive and responsive to individual aspirations (Miller & Roberts, 2020).

Innovative rehabilitation services have been linked to improved capacity building outcomes by providing tailored interventions that foster skill development and social inclusion (Brown & Lee, 2022). For example, the use of virtual reality and other digital tools has enhanced vocational training effectiveness for persons with special needs (Kumar & Singh, 2023). Despite these advances, challenges related to funding, infrastructure and trained personnel remain, limiting the full potential of such services in many regions, including Nigeria (Adeyemi & Okeke, 2023).

Several previous studies like innovative rehabilitation and assistive technology services have explored the impact of innovative rehabilitation services on persons with special needs. Smith and Tyler (2022) found that assistive technologies significantly improved learning outcomes for students with disabilities. García et al. 2022 highlighted the role of psychosocial support in enhancing emotional well-being. However, few studies have comprehensively examined the combined effect of multiple innovative rehabilitation variables on capacity building in the context of Rivers State or similar settings. This study aims to fill the identified gap by investigating how innovative rehabilitation services collectively influence capacity building of persons with special needs in Rivers State. Unlike previous research focused on isolated interventions, this study adopts a holistic approach, considering assistive technology, accessibility and vocational training. Such an approach is vital for informing policy and practice to better support persons with special needs in Nigeria and beyond.

Innovative Rehabilitation Services

Innovative rehabilitation services refer to the use of new, creative and effective methods, technologies and approaches designed to improve the functional abilities and quality of life of persons with special needs. Unlike traditional rehabilitation, which often focuses solely on physical recovery, innovative services integrate a broad range of supports, including assistive technologies, community-based programs and psychosocial interventions. These innovations aim to empower individuals by enhancing their independence, social participation and access to education and employment (Johnson et al., 2021).

A key feature of innovative rehabilitation is the adoption of assistive technology tools and devices that compensate for impairments and help persons with disabilities perform daily activities more effectively. Examples include communication aids, mobility devices and adaptive learning software. These technologies enable users to overcome barriers posed by their disabilities and engage more fully in social and economic activities (Kumar & Singh, 2023). Alongside technology, innovative rehabilitation emphasizes accessible service delivery, ensuring rehabilitation centers and programs are reachable and user-friendly for all persons with special needs (Adeyemi & Okeke, 2023). Moreover, vocational training programs form an integral part of innovative rehabilitation services by equipping persons with special needs with relevant skills and knowledge to

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improve their employability and economic independence. These programs are designed to be flexible and tailored to individual abilities and market demands, promoting sustainable livelihoods. Together, these elements represent a holistic approach that not only addresses the physical limitations but also the social and economic challenges faced by persons with special needs (Smith & Patel, 2021).

Capacity Building

Capacity building refers to the process of developing and strengthening the skills, abilities, resources and knowledge that individuals and communities need to effectively perform functions, solve problems and achieve sustainable development goals. In the context of persons with special needs, capacity building focuses on empowering them through education, skills training, and support services that enhance their independence, social participation and economic opportunities (UNDP, 2022). It aims to create enabling environments where persons with disabilities can maximize their potential and contribute meaningfully to society. For persons with special needs, capacity building involves targeted interventions such as vocational training, access to assistive technologies and inclusive education programs that address specific barriers they face (Johnson & Clark, 2021). These interventions not only improve individual capabilities but also help to shift societal attitudes toward greater inclusion and acceptance. Effective capacity building is essential for promoting self-reliance, reducing dependency and fostering long-term social and economic empowerment of persons with special needs (WHO, 2023).

Assistive Technology Enhances the Functional Independence of Persons with Special Needs

Assistive technology plays a crucial role in enhancing the functional independence of persons with special needs by providing tools and devices that compensate for physical, sensory, or cognitive impairments. These technologies include mobility aids like wheelchairs and prosthetics, communication devices such as speech-generating tools and adaptive software that facilitates learning and daily tasks. By enabling individuals to perform activities that would otherwise be difficult or impossible, assistive technology promotes autonomy, reduces dependence on caregivers and improves overall quality of life (Kumar & Singh, 2023). Furthermore, these technologies help bridge gaps in accessibility, allowing users to participate more fully in education, work, and social environments. Beyond physical assistance, assistive technology also supports the social inclusion and empowerment of persons with special needs. For example, communication devices enable those with speech impairments to express themselves effectively, fostering better interpersonal relationships and engagement within their communities (Johnson et al., 2021). The use of technology tailored to individual needs not only enhances daily functioning but also boosts self-confidence and motivation, essential components for personal development. As such, integrating assistive technology into rehabilitation services is vital for building the capacity of persons with special needs to live independently and contribute meaningfully to society.

Accessibility of Rehabilitation Centers to Persons with Special Needs in Urban and Rural Areas

Accessibility of rehabilitation centers plays a critical role in ensuring that persons with special needs receive timely and adequate support. In urban areas, rehabilitation centers are often more numerous and better equipped, with relatively easier physical access due to developed infrastructure and transportation networks (Adeyemi & Okeke, 2023). Urban centers also tend to have more specialized services and skilled professionals, making them more effective in addressing diverse rehabilitation needs. However, despite better availability, challenges such as overcrowding and limited awareness of services can still restrict optimal access for many individuals. Conversely, in rural areas, accessibility remains a major barrier due to poor infrastructure, limited number of rehabilitation facilities and scarcity of trained personnel (Okon & Eze, 2022). Many persons with special needs living in rural communities face difficulties traveling long distances to reach centers, resulting in delays or complete lack of rehabilitation services. This urban-rural disparity negatively impacts the capacity building and social inclusion of persons with disabilities, highlighting the urgent need for policy interventions aimed at expanding accessible rehabilitation services across all regions.

Vocational Training Contribution to the Economic Empowerment of Persons with Special Needs

Vocational training plays a pivotal role in the economic empowerment of persons with special needs by equipping them with practical skills and knowledge necessary for gainful employment or entrepreneurship. Through tailored training programs, individuals learn trades or professional skills that match their abilities and market demand, which increases their employability and potential to generate income (Smith & Patel, 2021). This form of capacity building helps reduce dependency on family or social welfare systems and promotes financial independence, allowing persons with disabilities to contribute economically to their communities. Moreover, vocational training fosters self-confidence and social inclusion, which are critical components of sustainable economic empowerment. By participating in skill development initiatives, persons with special needs gain a sense of purpose and belonging, which encourages active engagement in economic activities

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(Johnson & Clark, 2021). However, the extent of this contribution often depends on the accessibility and quality of vocational training programs, as well as the availability of supportive policies and resources that enable meaningful employment opportunities for trained individuals.

Statement of the problem

Persons with special needs often face significant challenges that limit their full participation in educational, social and economic activities. Despite various rehabilitation efforts, many still experience barriers to independence and social inclusion. One major challenge is the inadequate availability and use of innovative rehabilitation services such as assistive technology, which can significantly improve communication, mobility and learning outcomes. Without proper access to these technologies, persons with special needs remain disadvantaged in achieving their potential. Additionally, the accessibility of rehabilitation centers remains a critical concern in many regions, including Rivers State. Many centers are either physically inaccessible or located far from where persons with special needs live, making it difficult for them to benefit fully from available services. This lack of accessibility hampers the effective delivery of rehabilitation services, reducing opportunities for persons with special needs to receive timely and adequate care and support. Furthermore, vocational training programs designed for persons with special needs are often insufficient, poorly tailored, or under-resourced, limiting their ability to build practical skills that enhance economic empowerment and self-reliance. These gaps in innovative rehabilitation services negatively affect the capacity building of persons with special needs, underscoring the urgent need to evaluate and improve these services holistically. This study, therefore, seeks to investigate the extent to which assistive technology, accessibility of rehabilitation centers and vocational training programs contribute to the capacity building of persons with special needs in Rivers State.

Objectives

The specific objectives of this study are to:

1. Determine the extent to which assistive technology enhances the functional independence of persons with special needs.
2. Determine the extent to which rehabilitation services are accessible to persons with special needs in urban and rural areas.
3. Determine the extent to which vocational training contributes to the economic empowerment of persons with special needs.

Research Questions

1. To what extent does assistive technology enhance the functional independence of persons with special needs?
2. To what extent are rehabilitation services accessible to persons with special needs in urban and rural areas?
3. To what extent does vocational training contribute to the economic empowerment of persons with special needs?

Hypotheses

1. There is no significant difference in the mean ratings of counselors and special needs students on the extent to which assistive technology enhances the functional independence of persons with special needs.
2. There is no significant difference in the mean ratings of counselors and special needs students on the extent to which rehabilitation services are accessible to persons with special needs in Rivers State.
3. There is no significant difference in the mean ratings of counselors and special needs students on the extent to which vocational training contributes to the economic empowerment of persons with special needs.

Methodology

This study adopted descriptive survey design to examine the extent to which innovative rehabilitation services contribute to the capacity building of persons with special needs in Rivers State. The survey design was appropriate because it allows for the collection of data from a large population to describe existing phenomena and test relationships among variables (Creswell, 2014). This study was conducted in Rivers State, Nigeria, with a focus on selected rehabilitation centers that provide services to persons with special needs. Rivers State is located in the Niger Delta region and is known for its diverse population and mix of urban and rural communities. The research specifically targeted three rehabilitation centers, Rivers State Rehabilitation Center in Port Harcourt, Port Harcourt Special Needs Outreach Center in Obio/Akpor and Bonny Island Rehabilitation Services in Bonny representing both urban and rural settings within the state. These centers were chosen

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because of their recognized role in offering innovative rehabilitation services aimed at capacity building for persons with special needs. The population of this study comprised all persons with special needs and rehabilitation counselors in three selected rehabilitation centers in Rivers State. These centers include Rivers State Rehabilitation Center in Port Harcourt, which had 15 counselors and 125 persons with special needs; Port Harcourt Special Needs Outreach Center in Obio/Akpor with 13 counselors and 93 persons with special needs; and Bonny Island Rehabilitation Services in Bonny, which had 9 counselors and 66 persons with special needs. Therefore, the total population for the study was 321 respondents, consisting of 37 rehabilitation counselors and 284 persons with special needs. The study used the entire population of 321 respondents as the sample size to ensure comprehensive data collection and representation. The instrument for this study was self-structured questionnaire developed by the researcher. The questionnaire was titled "Innovative Rehabilitation Services for Capacity Building of Persons with special needs (IRSCBPSNQ)". The questionnaire was structured on a four point rating scale of Very High extent to Very Low extent. The questionnaire was subjected to face and content validity checks by experts in Measurement and evaluation. In order to establish the reliability of the instrument, test-re-test method was used. The reliability coefficient was determined using Pearson Product Moment Correlation Co-efficient to establish the reliability index of the instrument. A reliability coefficient of 0.72 was obtained, which the researcher felt it was high enough and that the instrument was therefore, deemed reliable. A total of 321 (Three Hundred and twenty one) copies of the instrument was administered to counselor and special needs students and 312 (Three Hundred and twelve) copies retrieved from the respondents within an interval of two weeks. This was done by the researcher and two assistants who were briefed on the modalities to administer and retrieve the instruments. The research questions and hypotheses was analyzed using mean, standard deviations and t-test statistic. while the hypotheses were tested with t-test statistic. The decision rule for the research questions were based on the range for which every item mean response value falls within the real lower limit and upper real limit.

Results

Research Question 1: To what extent does assistive technology enhance the functional independence of persons with special needs?

Table 1: Mean and Standard Deviation on how assistive technology enhance the functional independence of persons with special needs (N = 312)

S/N	Item Statements	counselor = 34			special needs Student = 278		
		$\bar{x}$	SD	Remarks	$\bar{x}$	SD	Remarks
1	Assistive technology helps persons with special needs perform daily tasks independently	3.59	0.73	Very High Extent	3.33	0.89	High extent
2	The use of screen readers and speech-to-text tools enhances the communication ability of persons with visual or hearing impairments.	3.44	0.77	High Extent	3.19	0.93	High Extent
3	Mobility aids (e.g., wheelchairs, walking devices) increase the physical independence of persons with special needs	3.59	0.84	Very High Extent	3.23	1.05	High extent
4	Assistive learning technologies support academic achievement among persons with special needs.	3.44	0.74	High extent	3.66	0.61	Very High Extent
5	Access to customized assistive technologies improves self-confidence in persons with special needs	3.47	0.78	High Extent	3.64	0.59	Very High Extent
	Grand Mean =	**3.50**	**0.77**	Very High Extent	**3.41**	**0.81**	Very High extent

The results in table 1 show that all the items on the table were rated to be very high extent by the Counsellor and special needs special needs students. It was generally concluded that Assistive technology helped persons with special needs perform daily tasks independently. The used of screen readers and speech-to-text tools enhanced the communication ability of persons with visual or hearing impairments was Very high extent. The confirmation was made with a grand mean of 3.50 and standard deviation of 0.77 for counsellor while that of special needs students were 3.41 and 0.81 for mean and standard deviation.

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Research Question 2: To what extent are rehabilitation centers accessible to persons with special needs in urban and rural areas?

Table 2: Mean and Standard Deviation Scores on how rehabilitation centers accessible to persons with special needs in urban and rural areas (N = 312)

S/N	Item Statements	counselor = 34			special needs Student = 278		
		$\bar{x}$	SD	Remarks	$\bar{x}$	SD	Remarks
1	Rehabilitation centers in urban areas are physically accessible to persons with special needs	3.62	0.73	Very High extent	3.18	1.04	Very High extent
2	Rehabilitation centers in rural areas are physically accessible to persons with special needs.	3.32	0.87	Very High extent	3.47	0.79	Very High extent
3	Transportation to urban rehabilitation centers is easy for persons with special needs.	3.50	0.78	Very High extent	2.97	1.12	High extent
4	Rural rehabilitation centers are adequately equipped with ramps, lifts, and accessible restrooms.	3.62	0.59	Very High extent	3.46	0.70	Very High extent
5	Information about available services in rural rehabilitation centers is easily accessible.	3.32	0.87	Very High extent	3.66	0.62	Very High extent
	Grand Mean & SD =	**3.48**	**0.76**		**3.34**	**0.85**	

The results in Table 2 show that one of the item on the table was rated to a Very high extent (that is, item 1,2,4, and 5) while 3 of the items were rated to a high extent (that was, item 3). It was therefore concluded that Rehabilitation centers in urban areas were physically accessible to persons with special needs. Rural rehabilitation centers were adequately equipped with ramps, lifts, and accessible restrooms. The confirmation was made with a grand mean of 3.48 and 0.76 while standard deviation of 3.34 and 0.85 for both Counsellor and special needs students.

Research Question 3: To what extent does vocational training contribute to the economic empowerment of persons with special needs?

Table 3: Mean and Standard Deviation Scores on how vocational training contribute to the economic empowerment of persons with special needs (N = 312).

S/N	Item Statements	counselor = 34			special needs Student = 278		
		$\bar{x}$	SD	Remarks	$\bar{x}$	SD	Remarks
1	Vocational training equips persons with special needs with practical skills for income generation	3.38	0.87	Very High extent	3.22	0.86	Very High extent
2	Vocational training improves the chances of persons with special needs securing employment	3.09	1.04	Very High extent	3.38	0.94	Very High extent
3	Vocational training builds self-confidence in persons with special needs to become economically self-reliant.	3.74	0.66	Very High extent	3.37	0.87	Very High extent
4	Vocational training enhances the productivity of persons with special needs.	3.26	0.95	Very High extent	2.59	0.98	High Extent
5	Persons with special needs are able to access funding or resources to support their vocational efforts	3.65	0.64	Very High extent	3.55	0.70	Very High extent
	Grand Mean =	**3.42**	**0.83**		**3.22**	**0.87**	

The result in table 3 shows that item 1,2,3 and 5 on the table were rated to a Very High extent while only item 4

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was rated to a high extent. The grand mean of 3.42 and 3.22 brings the conclusion that Vocational training equipped persons with special needs with practical skills for income generation. Vocational training improved the chances of persons with special needs securing employment to a High extent

Test of Hypotheses

Hypothesis 1: There is no significant difference in the mean ratings of counselors and special needs special needs students on the extent to which assistive technology enhances the functional independence of persons with special needs.

Table 4: t-test Analysis on the mean response of counselors and special needs special needs students on the extent to which assistive technology enhances the functional independence of persons with special needs

Respondents	N	$\bar{x}$	SD	Std Error	Df	A	t-cal	t-crit	Decision
Counsellor	34	3.50	0.77						
				0.019	310	0.05	0.69	1.96	Accepted
Special needs students	278	3.41	0.81						

Table 4, the t–calculated value of 0.69 was less than t–critical value of 1.96 at 0.05 levels of significance and 310 degree of freedom. The null hypothesis was accepted. Indicating there is no significant difference in the mean responses of counselors and special needs special needs students on the extent to which assistive technology enhances the functional independence of persons with special needs**.**

Hypothesis 2: There is no significant difference in the mean ratings of counselors and special needs special needs students on the extent to which rehabilitation centers are accessible to persons with special needs in Rivers State.

Table 5: t-test Analysis on the mean responses of counselors and special needs special needs students on the extent to which rehabilitation centers are accessible to persons with special needs in Rivers State.

Respondents	N	$\bar{x}$	SD	Std Error	Df	A	t-cal	t-crit	Decision
Counsellor	34	3.48	0.76						
				0.019	310	0.05	1.07	1.96	Accepted
Special needs students	278	3.34	0.85						

From the t – test in Table 5, the calculated value was 1.07 while the t –critical value was 1.96 at 0.05 level of significance. The t–calculated value was lower than t–critical value, the null hypothesis was therefore Accepted. Indicating there is no significant difference in the mean responses of counselors and special needs special needs students on the extent to which rehabilitation centers are accessible to persons with special needs in Rivers State**.**

Hypothesis 3: There is no significant difference in the mean ratings of counselors and special needs special needs students on the extent to which vocational training contributes to the economic empowerment of persons with special needs.

Table 6: t-test Analysis on the mean responses of counselors and special needs special needs students on the extent to which vocational training contributes to the economic empowerment of persons with special needs.

Respondents	N	$\bar{x}$	SD	Std. Error	Df	A	t-cal	t-crit	Decision
Counsellor	34	3.42	0.83						
				0.022	310	0.05	1.42	1.96	Accepted
Special needs students	278	3.22	0.87						

Table 6, the t–calculated value of 1.42 was less than t–critical value of 1.96 at 0.05 levels of significance and

310 degrees of freedom. The null hypothesis was accepted. Indicating there is no significant difference in the mean responses of counselors and special needs special needs students on the extent to which vocational training contributes to the economic empowerment of persons with special needs**.**

Summary of Majors Findings

1. The use of screen readers and speech-to-text tools enhances the communication ability of persons with visual or hearing impairments.
2. Rehabilitation centers in urban areas were physically accessible to persons with special needs. Rural rehabilitation centers are adequately equipped with ramps, lifts and accessible restrooms.
3. Vocational training equips persons with special needs with practical skills for income generation. Vocational training improved the chances of persons with special needs securing employment.
4. There is no significant difference in the mean ratings of counselors and special needs special needs students on the extent to which assistive technology enhances the functional independence of persons with special needs.
5. There is no significant difference in the mean ratings of counselors and special needs special needs students on the extent to which rehabilitation centers are accessible to persons with special needs in Rivers State
6. There is no significant difference in the mean responses of counselors and special needs special needs students on the extent to which vocational training contributes to the economic empowerment of persons with special needs.

Conclusion

Findings from the study revealed that assistive technology significantly enhances the functional independence of persons with special needs by enabling them to perform daily tasks with minimal assistance. The responses from counselors and special needs students indicated a high extent to which tools such as mobility aids, communication devices and adaptive learning technologies contribute to self-reliance and improved quality of life. This suggests that investing in and expanding the use of assistive technology is vital for promoting autonomy and confidence among persons with special needs. In addition, the study showed a disparity in the accessibility of rehabilitation centers between urban and rural areas. While urban centers tend to be more equipped and reachable, rural rehabilitation centers often lack essential infrastructure and support systems. Despite these gaps, vocational training was found to play a crucial role in the economic empowerment of persons with special needs, offering them practical skills, income-generating opportunities and increased employment prospects. Therefore, to achieve sustainable capacity building, stakeholders must ensure equitable access to rehabilitation services, integrate relevant vocational programs and strengthen assistive technology support across all regions.

Recommendations

1. Government and stakeholders in special education and rehabilitation services should invest more in the provision and maintenance of assistive technologies that support the functional independence of persons with special needs. This includes mobility aids, communication devices and digital learning tools, which enhance their autonomy and participation in daily activities.
2. There should be a deliberate policy to improve the accessibility of rehabilitation centers, especially in rural areas**,** by constructing inclusive facilities, providing accessible transportation and ensuring availability of trained staff. Bridging the rural-urban gap in rehabilitation services will promote equal opportunities for all persons with special needs.
3. Vocational training programs should be expanded, tailored to the abilities and interests of persons with special needs and linked to viable economic opportunities**.** Additionally, post-training support such as startup kits, mentorship and access to microfinance should be provided to enhance sustainable economic empowerment.

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