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INSTITUTE FOR PEACE AND SECURITY STUDIES (IPSS)

**BARRIERS IMPACTING HUMAN SECURITY OF PERSONS
WITH DISABILITIES IN ADDIS ABABA: IMPLICATIONS FOR
POLICY INTERVENTION**

(PhD. Dissertation)

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May 2022

Addis Ababa, Ethiopia

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Implications for Policy Intervention

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Declaration

I, Asfaw Kasa Mossissa, the undersigned, declare that this doctoral dissertation entitled “Barriers Impacting Human Security of Persons with Disabilities in Addis Ababa: Implications for Policy Intervention” conducted under the supervision of Dr. Tadesse Berisso is my own original work, in compliance with widely accepted academic practices and Addis Ababa University’s rules, I have duly acknowledged and referenced all materials used in this work, the contents of this dissertation, in full or in parts, have not been submitted to any other University or institution for award of any degree or diploma.

Asfaw Kasa Mossissa

25/05/2022

Addis Ababa University
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This is to certify that this Ph.D. dissertation titled “Barriers Impacting Human Security of Persons with Disabilities in Addis Ababa: Implications for Policy Intervention” is written by Asfaw Kasa Mossissa as partial fulfillment of the requirements of a Ph.D in peace and Security Studies. The Dissertation complies with the regulations of Addis Ababa University and meets the accepted standards with respect to originality and required quality. Therefore, we, the supervisors and examiners, approve the dissertation for final submission to the University.

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List of Acronyms

AAU: Addis Ababa University

ACPF: African Child Policy Forum

CRPD: Convention on the Rights of Persons with Disabilities

DESA: Department of Economic and Social Affairs

ENAB: Ethiopian National Association for the Blind

ENDAN: Ethiopian National Disability Network

FDRE: Federal Democratic Republic of Ethiopia

FEAPD: Federation of Ethiopian Associations of Persons with Disabilities

FGDs: focus group discussions

ICESCR: International Covenant on Economic Social and Cultural Rights

ICFDH: International Classification of Functioning Disability and Health

ICIDH: International Classification of Impairment Disability and Handicap

ICPR: International Covenant on Civil and Political Rights

JICA: Japan Cooperation Agency

MOLSA: Ministry of Labor and Social Affairs

NAWD: National Association of Women with Disabilities

POI: Place of Interview

PWDs: Persons with Disabilities

TOD: Type of Disability

UN: United Nations

UNHCR: United Nations High Commission for Refugees

UNDP: United Nations Development Program

UPIAS: Union of Physically Impaired Against Segregation

WHO: World Health Organization

Wordlist of Terms

Addis Hiwot: Formal Term for Nongovernmental Organization by this name

Addis Zemen: Official Term for Ethiopian Weekly or Journal

Beherawi Mezinagna: Formal term used for recreational Center

Braille: A system of writing and reading for the blind

Buda: Local term for spirit

Crutch: A term of device that support the travel of persons with physical impairment

Donkoro: Local language for deaf

Iqkub: Local term for social get-together for purpose of income generation.

Idir: local term for social support at the time of condolence.

International Disability Day (December 3): Annual day on which disability is commemorated.

Sheger: Term used for city bus

Wheelchair: Assistive device used for mobility by persons with physical impairment

White Cane: Term for walking-stick for the blind

Yemisrach Center: Formal Term for Nongovernmental Organization by this name.

Abstract

This dissertation argues that indirect and subtle violence by city planners and administrators poses a range of human security challenges to the everyday experiences of persons living with disabilities from now (PWDs) in urban environment of Addis Ababa. The objective of this study was to examine barriers to daily lives of urban inhabitants of PWDs. Qualitative research approach was used to conduct this investigation. Data were collected through in-depth interview with individuals with disabilities (24), government officials and experts (12), and leaders of associations of disability groups (4) and 7 focus group discussions (FGDs). Purposive and snowball samplings were participants selection techniques employed to select potential informants who could share their knowledge and experiences by participating in interview and FGDs. As a visually impaired person who is working and living in Addis Ababa, my personal lived experiences and the comments of participants on International Disability Day (2018 and 2019) were used to crosscheck the information collected by means of interview and FGDs. Policy and legal documents were used to analyze how far disability was legally protected and empowered at institutional level. Data was analyzed qualitatively using thematic method of data analysis. One of the central results of this study is the realization of the dire situation of urban inhabitants of PWDs because of the poorly built environment of Addis Ababa. The findings of this study demonstrated that structural violence manifested through structures of environment hampering accessibility and how PWDs are socially and economically valued among the larger community. The results of this study have indicated that the absence of ramps, elevators, audio communications, disability-friendly vehicles, crossings with marked visual signals, vicious vacancy announcements, and broken pavements are source of human insecurity of PWDs. The implication of this study is the need to humanize the physical and social environment of Addis Ababa with the goal of maintaining the well-being of PWDs. One way of improving the built infrastructure and make it more friendly to PWDs is to change the attitudes of concerned stakeholders, including policy and decision makers, legislatures and the society at large, to break the cultural structures which view PWDs as worthless and to be pitted, not to be supported and empowered with the intention of enabling them to lead independent lives. Addressing this social factor will ease the insensitivity of relevant actors to PWDs during planning, design, construction of key infrastructures and during recruitment.

Key Word:

Barriers, Human Security, Persons with Disabilities, Urban Environment/Addis Ababa, Policy.

List of Figures



A figure that shows unpaved pathway



Figures showing potholes on the sidewalk



A figure that demonstrates the steps of Public bus



Figures that show a wheelchair-user climbing building stairs



Figures showing an entrance of building

Chapter One

Introduction

1.1 Background of the Study

This study investigated about the impact of daily barriers upon human security of PWDs in Addis Ababa. It provided methodical and practical evidences about human security of urban inhabitants of PWDs by interrogating key barriers that stems from attitudinal, physical, architectural, and structural conditions. Specifically, the study examined everyday barriers that impede PWDs from getting access to safe mobility, secured education, and employment. It also justified the reasons for the current human insecurity of urban inhabitants of PWDs and demonstrated how they cope with barriers in the highly volatile urban way of life.

Literature reveals that PWDs make up the world's largest minority group. They are also the most vulnerable and disadvantaged social group of the mainstream society (WHO, 2011). Most of them experience violence on a daily basis and largely excluded from mainstream socioeconomic activities as a result of pervasive barriers (UN, 2006; WHO, 2011).

According to WHO (2011), over one billion people currently live with disabilities that comprise 15% of the entire world population. Out of these, 80% of them live in developing countries. This number is still on rise at both global and on national levels. The increase is due to aging, technological advancement, and the increment of burden of chronic diseases, and so on.

Despite their sizeable proportion, studies assert that PWDs do not enjoy the existing socio-economic and political opportunities on an equal basis with others (Barnes, 1991; Groce et al., 2014). According to Degener (2016), all human beings are bestowed the same rights and

respect of their dignity and human rights. However, many urban inhabitants of PWDs continue to face barriers to access services such as physical environment, education, employment, health care, and information (Degener, 2016; Zinabie, 2017).

The Universal Declaration of Human Rights (1948) states that “everyone has the right to a standard of living adequate for the health and well-being of himself and his family, including food, clothing, housing, medical care and necessary social services, and the right to security in the event of unemployment, sickness, disability, widowhood, old age, or other lack of livelihood in circumstances beyond his control” (Article 25).

Ethiopia is a signatory to the UN Convention on the Rights of Persons with Disabilities hereafter (UN CRPD) and ratified it on July 7, 2010. The country also agreed to other major international human right instruments such as International Covenant on Civil and Political Rights (ICPR) and International Covenant on Economic Social and Cultural Rights (ICESCR) (Yohannes, 2012). Accordingly, Ethiopia is required to ensure all-inclusive rights in the provision of services and safe mobility for urban inhabitants of PWDs (Meseret, 2013). However, the state initiative and other concerned stakeholders to protect and promote these rights remain little.

At national level, despite the absence of a single cohesive legal and policy instruments, Ethiopia has introduced some policy and legal norms applicable to PWDs, of which Employment Proclamation No. 568/2008 and Article 36 of the Building Proclamation No. 624/2009 are paramount (Yohannes, 2012; Meseret, 2013).

Both the international and local instruments assert that there is a need for the protection and promotion of the rights and opportunities of PWDs to enjoy all-inclusive services encompassing access to physical and social environment without obstacles (Degener, 2016). Nonetheless, those who live in developing countries such as Ethiopia still face lots of

accessibility challenges, who particularly suffer from poor physical infrastructures and lack of equal opportunities.

There is considerable evidence to support that disability and poverty are inextricably linked and one causes the other and vice versa. For example, Plessis and Reenen (2011) and Dagnachew (2011) point out that PWDs are the largest minority of the world and the most impoverished sections of the society. They represent 20% of the poorest of the world and 30% of the street children of the world. Groce et al (2011) (as cited in Elwan 1999, p. 6) also reported that one out of five of the poorest persons of the world live with some form of disability.

In developing countries, 98% of children with disabilities are left without the opportunity to attend school (African Child Policy Forum (ACPF), 2011). Additional support for this explanation comes from the work of Plessis & Reenen (2011) who further state that the majority of children with disabilities live in poverty, undernourished, rarely go to school and get enrolled, receive poor health care, and suffer from mobility constraints.

The current entire lives of PWDs in Ethiopia cannot be seen separately from the socio-economic and political landscape of the country. It has been characterized by the prolonged internal strife and instability, impoverished living conditions and inadequate and lack of equal access to services (ILO, 2004; Mohajan, 2013). The nature of disability is intricately linked to this imbedded socio-political fracture, environmental, and cultural phenomenon of the country, which has detrimental effect on poor service provisions for PWDs (Ethiopian National Disability Action Network (ENDAN), (2010); Baseline Report, 2010).

Access to urban services is solidly a human security issue for PWDs. Support for this explanation comes from Thakur (1999) who asserts that anything that reduces the quality of

life is a human security issue. This entails that disability specific barriers are increasingly becoming threats to human security of urban inhabitants of PWDs. This study therefore seeks to explain these threats to which PWDs who live/work in Addis Ababa are exposed on a daily basis.

Today, the idea of human security is increasingly gaining recognition by the UN and its agencies including UNICEF and UNDP. Particularly, the UNDP focuses on the need of the protection of people from chronic threats and sudden and harmful disruptions in the patterns of daily lives (Zambelli, 2002; Muguruza, 2007). This claim is true of urban inhabitants of PWDs who deserve empowerment and protection from urban related barriers. One way of empowerment is through generating knowledge that support policy and decision makers to work towards accessible needs of PWDs.

The main concern of human security is the prioritization of people's security, chiefly their welfare, safety, and well-being (UN, 2009; Howard-Hassmann, 2012). Urban inhabitants of PWDs are however exposed to everyday abuses and exist in an elusive physical and social environment. The survival, livelihood, and dignity of PWDs is often put at risk by disability unfriendly urban services. Furthermore, the practice of discrimination against PWDs on a daily basis is an expression of their human insecurity (Dagnachew, 2011; Wariyo, 2016).

In Ethiopia, although research into the prevalence of disability and other living experiences of PWDs is slightly growing (see for example Siyoum, 2005; Tirusew, 2005; Demisew, 2014), there is a need for broader understanding on the accessibility issues, urban lived experiences, and practices of disability.

This dissertation has addressed the accessibility challenges confronted by urban inhabitants of PWDs on a daily basis. The question whether built environment accessibility is an expression

of human security for urban inhabitants of PWDs or not is central to this study. Recent work suggests that urban inhabitants of PWDs face violence and barriers in the streets and on public transport (Misrak, 2006; Tesema, 2017). It is therefore momentous to investigate urban specific barriers met by PWDs from human security and structural violence perspectives.

While the suitability of urban environment for living is determined by a number of factors (Psatha, Deffner, & Psycharis, 2011), inclusive, accessibility, and safety are grave importance for PWDs. The mere presence of services may not change their lives and life choices and allow them to live cherished and a barrier-free way of life. To put it succinctly, the more streets, buildings, transport, and other social services are welcoming for PWDs, the better the urban environment is said to be accommodating, accessible and all-encompassing.

Addis Ababa is home to diverse and considerable social groups including all types of disabilities. In essence, the city is thought to represent the more cultured, all-inclusive, and conscious of the Ethiopian society (Abnet et al., 2017). Despite being inclusive and conducive for living, Addis Ababa remains the place where PWDs encounter multiple and complex barriers on a daily basis (Misrak, 2006; Tesema, 2017).

1.2 Statement of the Research Problem

According to Mulu (2016), Addis Ababa is one of the largest metropolitan centers in Sub-Saharan Africa. However, data on the proportion of population of Addis Ababa is extremely inconsistent and there are marked variations in the existing figures from time to time. The Central Statistics Agency (CSA) census in 2007 quantified the population of Addis Ababa to be about 2,738,248 constituting 3.7% of the Ethiopian total population.

In the same way, the exact number of PWDs in Ethiopia in general and Addis Ababa in

particular remains unknown. According to CSA (2007), the total number of PWDs is enumerated over eight hundred thousand constituting 1.1% of the entire Ethiopian population. This figure is reduction from 1.9% in 1994. Unlike the 1994 and the 2007 censuses, WHO (2011) estimates that the number of PWDs are 17.6% of the entire Ethiopian population.

Although the proportion of urban inhabitants of PWDs in Addis Ababa is estimated to be high, there is no systematic study conducted to inform the exact number of this population. Support for this explanation comes from Yohannes (2012) and Yetnebersh (2013) who state that lack of knowledge how to collect data about the rate of disability recurrence and what to include in defining the term are critical problems. They further assert that the tendency of some parents to hide their family member with a disability greatly contributes to the absence of exact number of urban inhabitants of PWDs.

Research findings, for example ILO (2004), Dagnachew (2011) revealed that the majority of PWDs are caught in a vicious cycle of poverty and exclusion in Ethiopia. Furthermore, UNICEF, MOLSA and Development Pathways (2019) stressed that urban inhabitants of PWDs are exposed to greater risk of discrimination, abuse and poverty as a result of everyday barriers they experience. They reported that 95% of PWDs live below poverty line. This impoverishment is related to the inconveniences of the available services and lack of opportunities on an equal basis with others.

There is increasing concern that PWDs are being disadvantaged by everyday barriers and they lead discriminatory life styles in Ethiopia (Japan Cooperation Agency (JICA), 2002). More precisely, urban inhabitants of PWDs in Addis Ababa remain underprivileged and excluded from social, economic, and political development initiatives. The reason behind this exclusion and lowered position of PWDs may not necessarily be related to their impairment rather they

are disadvantaged by disabling social and physical barriers (UNICEF, MOLSA and Development Pathways, 2019).

In Ethiopia, the act of exclusion of PWDs from fundamental rights is an observable problem. The refusal of parents to disclose their relatives with disabilities and the move to hide and block them at home to avoid the risk of exclusion evidently demonstrates the cultural dimension of the problem (Tirusew, 2005; Baseline report, 2010). Despite instances of considerable marginalization, urban specific barriers remain unrevealed and under researched topic.

Previous studies have reported that accessibility is essential for urban inhabitants of PWDs that enable them to live independent life and fully participate in all aspects of life (Sendi & Kerbler-kefo, 2009; Dejeammes, 2009; Basha, 2018). Although urban environment such as Addis Ababa is believed to be better in terms of accessibility, it is increasingly where PWDs encounter a myriad of barriers that range from poor service provisions to inhospitable physical environment (Misrak 2006; Tesema, 2017).

During the 2018 and 2019 International Memorial Day of PWDs in Addis Ababa, participants and the concerned state representatives put emphasis on two important issues. Primarily, this shows the agency of PWDs by debating over the absence of solid disability specific policy and legal norms both at the federal government and Addis Ababa City Administration. Secondly, they talked over the ways of making built environment accessible to urban inhabitants of PWDs where they are disproportionately disadvantaged and neglected. These discussions increase the currency of this study and the prevalence of the problem under investigation.

In general, research has shown that despite some progress in recent times, empirical data that describes the everyday reality of PWDs in Ethiopia is scanty (ILO, 2004; Eleni, 2016; UNICEF, MOLSA & Development Pathways (2019). The available studies are limited in terms of their focus and scope. For example, Misrak(2006), Dagnachew(2011), Yohannes(2012), Adugna(2015), and Tesema(2017) have explored some aspects of the challenges and lived experiences of PWDs.

In addition to the above-mentioned empirical evidence, there are further studies which reflected on the education and employment situation of PWDs and discriminatory practices against them. Among others, Almaz (2011), Tsegahun (2016), Zinabie, 2017), and UNICEF, MOLSA and Development Pathways (2019) are few of them to mention. However, these works did not provide detail analysis about the everyday barriers to the enjoyment of the rights and opportunities of urban inhabitants of PWDs.

Furthermore, out of the aforementioned studies, only a few of them specifically focused on the accessibility challenges of urban inhabitants of PWDs in Addis Ababa (see for example Misrak, 2006; Amare, 2012; Tesema, 2017). Despite their foundational importance, these studies have some limitations. Among others, besides lack of depth, attitudinal, physical, architectural, and institutional obstructions confronted by PWDs on a daily basis are not adequately addressed and stressed. This dissertation is therefore expected to bridge this knowledge gap by investigating everyday barriers faced by urban inhabitants of PWDs and their lived experiences from human security and structural violence perspectives.

With the aforesaid assessment in mind, the main purpose of this study was to investigate urban specific barriers that PWDs face on a daily basis and how these barriers affect their well-being and way of life. With the understanding of the scarcity of the scholarly work and

the presence of multiple barriers to the well-being and empowerment of urban inhabitants of PWDs, the present study aims to further broaden the current knowledge about human security by investigating barriers that urban inhabitants of PWDs face on a daily basis in their homes, in the streets, on public transportation, at workplace, and within and outside school environment.

1.3 Objectives of the Study

1.3.1 Main Objective

The general objective of this study is to investigate the everyday reality and the lived experiences of PWDs who live/work in Addis Ababa from human security and structural violence perspectives.

1.3.2 Sub objectives

The specific objectives were:

1. To assess the urban specific barriers PWDs experience in the context of human security norms
2. Examine urban specific barriers to the lives and life choices of PWDs and show how these barriers become source of threat to their human security
3. Examine the functionality of existing policies, legislations and practices in maintaining and enhancing human security of PWDs
4. assess the coping mechanisms that urban inhabitants of PWDs use to survive the barriers they experience

1.4 Research Questions

In the light of the foregoing objectives, the study sought to answer the following research questions:

1. How do the different groups in Addis Ababa conceptualize disability as part of their human security?
2. What barriers do PWDs in Addis Ababa face and how do these barriers threaten their way of life?
3. To what extent do the current policies, legislations and practices safeguard the well-being of PWDs in Addis Ababa and enhance their human security?
4. What coping mechanisms do PWDs use to overcome the barriers they face in their daily lives?

1.5 The Rational of the Study

Based on the statement of the problem, the importance of this study can be justified in various ways. First, it is being carried out at a time when the impact of urban living on the physical, social, economic, and mental life of PWDs is swelling due to the rapid urbanization in terms of construction and socio-economic transformation. Secondly, this study is well-timed because the demand of urban inhabitants of PWDs is increasingly growing in terms of having equal access in the current socio-economic and political life of the country. Thirdly, this study is also conducted at a time when urban inhabitants of PWDs are under a lot of challenges encompassing physical, attitudinal, structural, and architectural problems. Therefore, PWDs are more enlightened about their rights and empowered to claim them from the state as duty-bearer as part of human security agenda. The Aforesaid reasons has initiated this study.

The potential benefits of this study are paramount. In light of peace and security studies, the dissertation advances the discourse of human security towards the vulnerability of PWDs who live in urban areas. In doing so, the study provides new insights and perspectives to our understanding of PWDs' human security. It also increases the horizon of the society about everyday reality and lived experiences of urban inhabitants of PWDs.

Above all, this dissertation helps policy makers, development agents and government entities to formulate human security-driven policies and programs that can improve the existing infrastructure and its accessibility to PWDs. Furthermore, it contributes to the generation of a body of knowledge by looking at urban vulnerability through human security lens. Furthermore, this study can be used as springboard to conduct further research and refine the existing body of knowledge in the interaction between disability, human security and the construction of physical structures.

This study may benefit PWDs in many ways. First, it encourages them to exercise their rights and demand further opportunities that allow them to live a barrier free life and circumvent discrimination on the grounds of disability. Second, it inspires PWDs to develop the sense of self-reliance and make them feel as equal members of the mainstream society. Thirdly, this study allows PWDs to get social acceptance within the community they live thereby enhancing their self-respect and self-worth as human beings.

1.6 The Scope of the Study and Limitations

One way of improving the quality of findings of the study and interpretation of evidences is to define the scope and to recognize limitations of the study. While defining the scope is about making the study manageable and focused, limitations of the study are issues and challenges

that the researcher face during the study (Theofanidis & Fountouki, 2018; Akanle, Ademuson, & Shittu, 2020). Drawing on these premises, this section describes about the coverage of the study in terms of subjects, study participants, and geographical limits. The noticeable limitations of this study are also addressed in brief.

1.6.1 Scope

This dissertation focuses on accessibility issues that affect persons living with disabilities in urban settings. More specifically, pathways, public transport, education environment, and employment sectors are the urban service areas where accessibility issues are topical and central to this study. These services are also conclusive in defining human security of urban inhabitants of PWDs. Other accessibility issues outside these service areas are beyond the scope of this study.

In terms of the nature of disability, the study focused on physical, visual, and hearing impairments. It is not the intention of this study to include other types of impairments. For example, persons with mental impairments, stroke, epilepsy, cerebral palsy and other invisible impairments are not part of this discussion for some reasons. Firstly, access to these groups is difficult for the researcher. Secondly, accessibility needs of these types of disabilities are quite unique. With this understanding in mind, the phrase persons with disabilities in this study refers to those with physical, visual, and hearing impairments. The acronym PWDs used throughout this dissertation also represents persons with physical, visual, and hearing impairments. The interpretation of the findings, the implications addressed, and conclusions made in this study are only the representative of participants of those with physical, visual and hearing disabilities.

In terms of geographical scope, this study was confined to Addis Ababa and participants are who live in different parts of the city. The workplace and learning institutions of participants are also unlike. However, the FGDs and interviews are mainly conducted at the place where national associations of disabilities are located, covering Arada, Gulale, Yeka, and bole sub cities. Accordingly, the geographical limits of this study are chiefly four sub cities of Addis Ababa (Arada, Gulale, Yeka, and Bole).

1.6.2 Limitations

It is not regrettable to say that this study may have noticeable and imperceptible limitations. One noticeable limitation was related to the nature of the study. To be specific, disability was an intricate concept and lacked precision to set into research context. As a result, conceptual imprecision and inconsistency may be predictable despite the fact that a great deal of effort has been made to minimize. As with all such studies, there are also financial constraints that impacted on the overall development and the maturity of this study.

This study does not also claim to be able to reach persons with hearing disabilities as adequately as possible. Apart from the communication gap, there are individuals with hearing impairments who are not agreeable to share their experience and information. Accessing them at the place and time they are appointed is also disappointing. The passing away of my mom during data collection and the leg injury I faced one day before her death are further limitations of this study. My inability to access the required resources in accessible format due to my visual impairment can be cited as additional limitation of this study.

1.7 The Structure of the Study

This thesis is organized into seven chapters. The first chapter covered the introduction which gives a brief overview of the background, considering statement of the problem, objectives of

the study, research questions, and the rationale of the study. The second chapter covered literature review where the gap in knowledge has been identified and the previous existing studies have been reviewed. This chapter also serves as a conceptual and theoretical background for the study.

The research methodology of this study is presented in chapter three which describes the approach and design of the study, the way the data is collected and analyzed, instruments used for data collection, and ethical standards adhered to carry out the study. This is followed by the three consecutive chapters dealing with the main body of this dissertation. These chapters are arranged in the way that makes sense. First, the collected data from participants is presented and this is followed by the discussion in relation to the existing body of knowledge.

Stick to this arrangement, chapter four presents data about attitudinal and physical barriers encompassing attitudes towards the onset of impairment, pathway barriers, and transportation constraints. Then, the chapter further discusses the data with the previous research to support with evidences. Chapter five presents data about accessibility challenges that urban inhabitants of PWDs face when they pursue accessing to education and employment. The analysis of this data is discoursed in line with relevant literature readings.

Chapter six concentrates on the relevant policy and legal analysis using the available documents. This policy and legal analysis is also supported by the feelings and thoughts of participants. This chapter culminates by discussing the coping mechanisms employed by urban inhabitants of PWDs to survive the life-threatening barriers they encounter in every sphere of their lives. Chapter seven is conclusion which closes this dissertation by summarizing the key findings, outlining the potential contribution of this study, and showing direction for further research.

1.8 Chapter Summary

This chapter has outlined the background of this study by discussing the statement of the problem, objectives, research questions, and the justifications for conducting this study. This eye-opening chapter has demonstrated the scope of the study in terms of subjects and geographical limits. The structure of the thesis is also outlined in this introductory chapter and it is considered as the bedrock for the remaining six chapters.

Chapter Two

Theoretical Background and Literature Review

2.1 Introduction

This chapter outlines a review of the state of research knowledge on disability and the nature of urban built accessibility of PWDs. It is broadly organized into three parts. The first section provides a brief summary of models of disability from built environment accessibility perspective. In order to furnish the present study with context and relevance, this section gives emphasis to main debates of medical, social, bio-social, and minority models of disability.

The second section examines the general nature of the previous state of research on the lived experiences of PWDs from global, regional, and Ethiopian context. Although the existing literature on accessibility challenges of urban areas is somewhat limited, this section focuses on the wholesale of previous research written from standpoint of the social model of disability since 1990s until the current state of knowledge. However, this does not mean that all the literature on disability are covered rather the overview of some of the relevant literature are presented.

How to map out disability within the framework of human and structural violence perspectives is presented in the third section. Focusing on the theories, values, and concepts of cultural violence, structural violence, and human security perspectives, this section provides context for the current study. The arguments of these approaches are relevant to situate urban accessibility challenges within broader perspectives.

2.2 Understanding Disability: Medical, Social, Bio-Social, and the Minority Models

The body of literature on disability developed over time, growing from viewing disability as a moral/religious phenomenon to a social construct. This development makes disability a very contested concept and a sensitive issue (Shakespeare, 2008; Jain, 2011; Barnes, 2012). Despite the long-standing contention over the interpretation of the concept, disability is a universal reality (Retief & Letsosa, 2018; Stjernborg, 2019).

Whereas several attempts have been made to understand and explain the concept of disability, there is little consensus on the definition of disability amongst academics. The absence of agreement among academics led to the emergence of different models of disability (Retief & Letsosa, 2018). Among these various models, the medical, the social, the bio-social, and the minority models of disability are found to be relevant for this study and discussed briefly below.

2.2.1 Disability, a Medical Model

Prior to medical interpretations, disability was understood from moral/religious perspectives (Retief & Letsosa, 2018). This view was found in a number of religious traditions and one of the manifestations of the model was the assumption that regarded disability as a punishment from an all-powerful entity (Retief & Letsosa, 2018). While the moral/religious model of disability is no longer as rampant as it was, the basic assumption of this model still dictates the way disability is understood and PWDs are treated.

While there is debate over the origin of the concept of disability, the belief that traces the cause of disability to moral/religious factor is commonly ambivalent. On the one hand, disability is construed as punishment from God. On the other hand, it is accepted as a sign

of purification and good personality (Barnes, 1991; Creamer, 2009). Despite the moral wisdom of the religious model of disability, this understanding has been gradually replaced by medical model of disability (Mitra, 2006; Sullivan, 2011).

The medical model of disability originated from the rise of medical profession in the late 19th and early 20th century (Mitra, 2006; Sullivan, 2011). Since then, the discussion of disability has for long been dominated by medical view of disability. According to this model, disability was understood as a medical condition /individual problem. See for example Retief and Letsosa (2018) who regarded disability as a medical problem that resides in the individual.

Furthermore, Stjernborg (2019) in his seminal article has discussed how disability as a concept is defined and understood in terms of medical approach. This article has shown that disability is an individual ailment that requires medication to normalize the condition.

In particular, Retief and Letsosa (2018) contend that the basic assumption of medical model of disability is that disability is a body defect or a health problem that inherently seen as abnormal and pathological. In view of these authors, medical intervention is seen as a solution to the problem and curing the diseased body is taken as normalizing the condition. Put it another way, the medical model of disability gives emphasis to an individual adjustment and rehabilitation as a solution.

Stjernborg (2019) has further discussed that disability is regarded as a pitiable condition and something to be prevented or cured rather than a social construct. This understanding of disability is fundamentally negative and as a result PWDs deviate from what is normal. In line with medical standpoint, “terms such as invalid, cripple, spastic, handicapped and retarded are all derived from the medical model” (Creamer 2009, p. 22). This labeling constitutes a

devalued identity of PWDs (Burger & Burger, 2010).

Academics such as Barnes, Mercer, and Shakespeare (1999), Dubois and Trani (2009), and Retief and Letsosa (2018) have found that medical/individual model of disability is criticized on a number of grounds. First and foremost, this model provides little concern to structural barriers and power issues within society and instead focuses on rehabilitating and curing the disability. Secondly, many PWDs do not consider themselves as sick. This suggests that the medical approach fails to take the vital distinction between impairment and sickness into account.

In support of the aforesaid argument, Llewellyn, Agu, and Mercer (2008, p. 256) maintains that “Many disabled people are not sick, but have ongoing impairment that do not present as daily health problems.”

One more criticism of the medical model of disability is that it is more of a Western culture which ignores the considerable difference of societal response to impairment or long-term health conditions across cultures (Barnes, 2012). As it has shown by medical proponents, the issues of PWDs including provision services, their social and community participation are left to health professionals (Retief & Letsosa, 2018).

The criticism of medical model of disability shown by these authors inform that there is huge knowledge gap in the existing literature about disability and the way PWDs are represented within society. The failure to see the social problems of PWDs beyond medical line is a knowledge gap that requires further study. Put it another way, the medical model of disability fails to provide alternative solution to the individual problem if the intervention to cure the disability remains ineffective. This entails that the challenges of urban inhabitants of PWDs is not much of medical rather structural (Burger & Burger, 2010; Barnes, 2012; Anastasiou &

Kauffman, 2013).

2.2.2 Disability as a Social Construct

The social model of disability ascended from the failings of the medical model of disability to hypothesize disability from social perspective (Retief & Letsosa, 2018). The Origin of this model goes back to the activism of the British disability movement in the 1960s and the 1970s. Particularly, the role played by the Union of Physically Impaired against Segregation (UPIAS) to uphold the social model of disability remains remarkable (Barnes, 2012; Retief & Letsosa, 2018).

One of the outstanding contributions of the Union of Physically Impaired against Segregation (UPIAS) is the distinction they made between impairment and disability. Unlike the medical model of disability which regarded impairment as the cause of disability, the Union differentiated impairment as biological and disability as social (Barnes, 2012). Hence, disability is a social construct according to social model of disability (Stjernborg, 2019). Put it another way, PWDs are disabled by the society not by their impairment and the solution is societal change.

The main beliefs of the social model of disability can be expressed by the extract quoted from the manifesto document of the Union of Physically Impaired against Segregation (UPIAS) entitled, 'Fundamental Principles of Disability'. "In our view, it is the society which disables physically impaired people. Disability is something imposed on top of our impairments; by the way we are unnecessarily isolated and excluded from full participation in society. Disabled people are therefore an oppressed group in society" (UPIAS, 1976, pp. 3-4). This citation upholds the view that sees disability as a social construct.

There is a growing body of evidence that disability is a social attribute rather than an individual problem. See for example, (Burger & Burger, 2010; Barnes, 2012; Anastasiou & Kauffman, 2013; and Retief & Letsosa, 2018). These authors have shown that disability is a socially created and the way out is not an individual adjustment and rehabilitation rather social change. In particular, the delineation given by Anastasiou and Kauffman (2013) falls into the category of social model of disability, which is cited as “The loss or limitation of opportunities to take part in the normal life of the community on an equal level with others due to physical and social barriers” (p. 443).

The emphasis that academics given to social aspects of disability strongly suggest that the physical and social barriers remain disproportionate and serious rather than individual impairment. In support of this, Stjernborg (2019) asserts that the social model of disability is based on the belief that the discrimination that PWDs experience on a daily basis has little to do with impairment. The World Health Organization (2011) further underpins the importance of persistent effort to remove the physical and social barriers to PWDs.

The international and local issues in which the social model of disability gained currency include declarations and conventions, national legislations, the global community based rehabilitation services, and inclusive education programs (Palmer and Harley, 2011). Despite its immense relevance, social model of disability is not immune from criticism. Much of the criticisms are related to the little consideration that the proponents of social model of disability given to the negative experiences of impairment. In this regard, Morris (1991, p. 10) notes that:

There is a tendency within the social model of disability to deny the experience of our own bodies, insisting that our physical differences and restrictions are entirely socially created.

While environmental barriers and social attitudes are a crucial part of our experience of disability - and do indeed disable us - to suggest that this is all there is to it is to deny the personal experience of physical or intellectual restrictions, of illness, of the fear of dying.

The view that sees individual and his/her impairment as indifferent and less important is the most noticeable criticism of the social model of disability. This model also fails to recognize the interplay between social and individual aspects of phenomenon. The individual may not exist in isolation from the context of social, cultural and physical environment (Stjernborg, 2019). From this point of view, disability is a collective experience seen within the wider spectrum.

From the above literature readings, there can be little doubt that the physical and social barriers that PWDs experience on a daily basis are well addressed by the advocates of social model of disability unlike the advocates of medical model. However, the model does not indicate the barriers that result from the inadequacies of institutional arrangements where PWDs frequently appear, including education, employment, and transport services. Furthermore, beyond social change to improve the situation of PWDs, the social model of disability ignores human security which gives emphasis to more protection and empowerment of PWDs.

2.2.3 The Minority Model

The minority status model is another version of social model of disability with a slight variation. Whereas the origin of the social model of disability is often linked to UK, the minority status model is a US prototype. Approximately, these two models developed at the same historical moment (Connor, Gabel, Gallegher, & Morton, 2008). The minority model is theorized on the basis of the American Civil Rights Movements. This model considers PWDs

as minority group similar to women, African-Americans and gays (Hahn, 1985; Connor, Gabel, Gallegher & Morton, 2008).

The minority model upholds the belief that the problem of disability is not individual rather it is a social and political concern. The way out is therefore protecting and promoting their civil rights, the right to political, social and economic participation. Under this model, PWDs are relegated to minority status and subjected to mistreatment and unfair discrimination. This model is also based on the belief that the physical and attitudinal barriers that PWDs face on a daily basis are an indication of prejudices and stereotypes rather than functional limitation (Scotch, 2000; Connor, Gabel, Gallegher & Morton, 2008).

Unlike the social model, the underlying assumption of the minority status model is the issue of minority and majority category, which is political rather than social. However, the problem of PWDs is not the demand of minority rights rather it is a demand for social justice. Put it another way, it is the right to live in an environment free from barriers, a society open to accommodate, and welcoming institution for all persons. These issues are more attention-grabbing than the debate between the minority and the majority concern.

2.2.4 The International Classification of Functioning, Disability and Health and the Biosocial Model of Disability

The World Health Organization (WHO) was the first international body who displayed increasing interest towards disability since 1980s. This interest was reflected by producing the International Classification of Impairment Disability and Handicap (ICIDH) in 1980 (Barnes, 2012). Despite its attempt to provide a universally accepted definition of disability, the International Classification of Impairment, Disability and Handicap (ICIDH) was reorganized

and renamed as the International Classification of Functioning Disability and Health (ICFDH) (Palmer & Harley, 2011).

According to Barnes (2012), the ICIDH was modernized on a number of grounds, of which the two reasons are at least valuable to mention. Firstly, it defines disability in terms of individual/medical perspective, ignoring the social aspects of disability. Secondly, developed by a group of social science scholars, it disregards the involvement and contribution of PWDs. Consequently, a more progressive model of disability was framed by the World Health Organization (WHO) (2001), combining a biological understanding of impairment with the social dimension of disability (Palmer & Harley, 2011).

The Bio-Social Model of Disability is a hybrid of the medical and social models of disability (Palmer & Harley, 2011; WHO, 2011). According to this model, disability is seen as something that results from the interaction of an individual impairment with the environment, including the physical, social, information, and policy issues (Palmer & Harley, 2011). Put it another way, the Western dichotomy between individual impairment and social disability has lost its currency and rhetoric by the reorganization of the International Classification of Functioning Disability and Health (ICFDH).

The ICFDH crafted the Bio-Social Model of Disability primarily to classify and measure the health condition and outcomes of an individual impairment (WHO, 2011). The need behind the incorporation of social element is to pinpoint how an individual's functioning limitations are affected by the surrounding environment. Hence, disability is an expression of a complex relationship between personal factors and the factors outside of the individual (Palmer & Harley, 2011; WHO, 2011).

The term disability is commonly used by the ICFDH to refer to “an umbrella term for any impairment, activity limitation or participation restriction which limits functioning within contextual (personal and environmental) factors” (Palmer & Harley, 2011, p. 359). From this point of view, it is possible to deduce the environmental factors to include the built environment, available services, societal attitudes, systems, policies, etc. and personal factors such as self-worth and individual’s capability to strive and actual performance in the real world.

The attempt of the ICFDH to take environmental and personal factors into account to describe disability is positive development and makes it comprehensive model. Crucially, however, measuring the functional limitation of an individual impairment in terms of health status and the surrounding environmental factors may not solve the real problems of PWDs, including changing societal attitudes and facilitating physical accessibility (Palmer & Harley, 2011). In other words, the Bio-Social Model of Disability is more medical than social focusing on the biological conception of impairment rather than social attribute.

In sum, the above reviewed models of disability are theoretically important in many ways. Firstly, each model attempt to adopt different definitions of disability and provide insights into diverse theoretical explanations on disability and related issues. Secondly, they provide important implications for disability specific policies and laws. Thirdly, the reviewed theoretical models inspire academics to further investigate how various social, economic and political barriers limit PWDs access to different services and opportunities. However, this does not mean that each model has the same purpose and values.

Despite some of their valued contributions made to the body of knowledge, the revised models have several limitations. First, defining disability and showing the conceptual variance

between impairment and disability is the main theme around which each model revolves. This makes the concerned stakeholders such as the government and the society not to give emphasis to the specific and real problems of PWDs. Secondly, the practical and daily challenges that determine the well-being, livelihood and dignity of PWDs are not deeply addressed in the models. Thirdly, the descriptions of each model are presented in very crude and general terms, failing to address specific problems and accessibility needs of PWDs.

2.3 Previous Research

This section will appraise the state of research on disability in order to provide context to the present study from global, regional and local perspectives. It is divided into 2 main subsections. The first subsection will review the global and regional debates surrounding the state of research on disability. This is followed by an appraisal of the existing literature on disability in Ethiopian context.

2.3.1 The State of Research on Disability in the Global and Regional Contexts

Since 1960s, disability was the subject of study around the world, evolving in UK and US in particular (Connor, Gabel, Gallegher, & Morton, 2008; Palmer & Harley, 2011; Barnes, 2012). Academic interest in disability was first shown by The Union of Physically Impaired against Segregation (UPIAS) that differentiated the definition of impairment from disability. The differentiation was not only a conceptual issue but it was also a matter of biological and social distinction. Adopted by the international disabled movement in 1981, the social definition of disability became a universal concern (Oliver, 1990; Barnes, 1997; Barnes, 2003; Samaha, 2007).

Previous studies on disability have shown that the initiative to investigate how disability is defined and represented in the society is originally taken by the activism of PWDs and their organizations. The debate whether disability is a socially constructed concept or a biological conception is gradually increased in pace and scale (Oliver & Barnes, 2010). However, most of the debates and academic interests are Western culture in origin and the debate is mainly focused on how to theorize disability and other concerns are rarely addressed (Connor, Gabel, Gallegher, & Morton, 2008; Palmer & Harley, 2011; Barnes, 2012).

Rooted in the social model of disability, a number of seminal works flourished in the 1990s. See for example, (Oliver, 1990; Rioux & Bach, 1994; Campbell & Oliver, 1996; Charlton, 1998; Barnes, Mercer & Shakespeare, 1999; Gleeson, 1999). These authors have shown that the distinction between biological conception of impairment and social construction of disability is evident at theoretical level. Disability is characterized as a social problem rather than individualized problem. Some of them argued that social oppression of PWDs is not something that has come from attitudes of persons without disabilities but the social systems and structures from which the attitudes stem.

Without disregarding their important contribution of theorizing disability as a social oppression, these authors have failed to address the proximate challenges to which PWDs are exposed on a daily basis, creating an urgent need to examine the barriers that affect the lives and life choices of PWDs. To be specific, little is investigated everyday experiences of PWDs living in urban areas, where sidewalks are not paved, potholes are widely opened, buildings are imprudently erected, working and school environments are poorly arranged and built, and positive attitudes towards disability is not well-developed. These problems are not only social

attributes but they are as well human security issues for PWDs, threatening their survival, livelihood, and dignity.

While there are various debates over the origin and nature of the category of disability, the contention between the medical interpretation and the social construction of disability existed for decades and the debate is still manifesting in various ways and in various research contexts (WHO, 2001). Determining how disability as a concept is used, understood, and given meaning in today's context requires historical, cultural and sociological accounts of its various meanings (Barnes, 1997). Even if it is not the purpose of this section to delve into such accounts, academics such as Barnes and Mercer (2003), Barnes Mercer and Shakespeare (1997), Barnes, Oliver, and Barton (2002) have contributed seminal works on the topic.

Overall, the strong point and contribution forwarded by these authors include the exploration of the evolution of disability as a concept, the exclusion and marginalization that PWDs experience across different historical and cultural contexts, discussion on disability in relation to social oppression similar to that experienced by women and racial groups, and theorizing disability from sociological perspectives. Moreover, these authors have shown that disability is a socially constructed concept, having meant different meanings in different times, across cultures, and for different societies.

It is true that the historical, cultural, and sociological debates about disability affords different lenses through which to study disability. However, we cannot be certain whether their theoretical explanation works for those with disabilities who live in the global south or not. In this regard, Barnes (2012) contends that societal responses to the problems of PWDs vary considerably across culture, location, and time. Shakespeare (1996) also adds that the

dichotomy between impairment and disability is generally regarded as Western driven which is not necessarily applicable in other cultures.

Generally, earlier studies on disability differ in some respects. Some researchers stick to individual/medical model of disability in their research approach. They also consider themselves as voices for PWDs, despite the fact that the way they problematize disability remain on the basis of clinical thinking (Mehrotra, 2012). Moreover, the way out of the problem suggested by such academics is institutional which is seen by others as traditional, instigating discrimination (Barnes & Mercer, 1997; Mercer, 2004). In terms of methodology, these researchers adhere to quantitative approach which enables them to quantify and measure the health status of individuals with impairment.

In contrast, lots of academics keep an eye on social model of disability to explore the social problems PWDs face in their day to day activities. As discussed by Shakespeare (1993) and Mercer (2004), the underlying assumption of this approach is that the physical, social and attitudinal barriers to which PWDs are exposed on a daily basis are societal rather than individual. Qualitative research is commonly taken as an ideal approach to construct meanings attached to experiences of persons living with disabilities (Barnes, 2003).

While the social model is by far the most conclusive approach to differentiate the biological tenet of impairment from the social conception of disability, there are some critical issues that both approaches are lacking. The mere conception of disability in terms of individual and social problem is minimalist in approach. Because the day-to-day barriers that threaten the survival, livelihood and dignity of PWDs are overlooked. These daily barriers are not only individual and social problems but they are also a matter of human security for PWDs. Little

is also considered in the two approaches regarding the ways of empowering PWDs and protecting them from the daily barriers.

This study argues that the complete picture of personal experiences of living with disabilities in urban context can be understood if the daily barriers they face are problematized and studied within structural violence and human security contexts. These approaches are proposed based on the belief that the barriers that urban inhabitants of PWDs face are not simply societal rather they are structural and human insecurity, endangering their survival, livelihood, and dignity.

Along with the growing academic interest in disability, international institutions began to incorporate disability into their programs and activities in the 1980s and 1990s (Oliver & Barnes, 2010). According to Barnes (2012), the UN declaration of 1981 as the International Year of Disabled People is an important example of growing interest in disability at international level. The declaration recognizes that the respective governments are responsible for ensuring equal rights for PWDs. This initiative was followed by the adoption of a World Program of Action, a global strategy to prevent disability.

As it has shown by Barnes, (2012), a number of other regions also embraced more or less the same approaches such as the African Decade of Persons with Disabilities (2000-2009), the European Year of People with Disabilities 2003, and the Arab Decade of Disabled Persons (2003-2012). This development is the result of many factors, including the unprecedented increase of the number of PWDs, the emergent of research interest in disability, and moral obligation imposed upon politicians and other concerned stakeholders (Barnes, 2012).

The international agencies such as the UN are also inclined to employ social model of disability in their documents as a point of reference to formulate various programs to respond

to disability at international level. The 1993 UN Standard Rules on the Equalization of Opportunities for People with Disabilities is one of the earliest examples (Oliver & Barnes, 2010; Barnes, 2012). While these early international responses to disability have been promising, their focus on prevention that is preventing disability not to occur has been traditional approach. This kind of response has fundamentally emanated from the assumption that disability is a health issue and prevention has been regarded as a primary intervention to prevent the problem.

In recent times, many policies and conventions have been promoted internationally with the intention of protecting and promoting the rights of PWDs. Among others, 2006 is regarded as landmark in the movement of the rights of PWDs. It was the year when the UN Convention on the Rights of Persons with Disabilities (CRPD) was adopted by the UN General Assembly (Stein, 2007). The Convention is the first legally enforceable United Nations instruments specifically applicable to PWDs.

The UN CRPD is one of the ten global Human Rights Agreements that focuses on the human rights and fundamental freedoms of all PWDs (Harpur & Bales, 2012; UN, 2014). It covers the spectrum of fundamental freedoms of PWDs such as personal mobility, education, employment, health care, and political participation. The Convention aims to promote these freedoms and protects the rights of all PWDs, who are defined in Article 1 as:

Those who have long-term physical, mental, intellectual or sensory impairments which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others.

According to article 9 of the Convention, any obstacle that incapacitates persons with impairments access on an equal basis with others, to the physical environment including buildings, roads, and transportation will constitute a barrier. Sahu and Sahu (2015) also define

a barrier as “anything that blocks equitable access to services, or information of a person or group of people“ (p. 2). Following the pronouncement of the norms of the Convention, international calls have been made for the removal of all barriers. Accordingly, urban built environments including Addis Ababa ought to be inclusive, safe, and accessible for urban inhabitants of PWDs (Sendi & Kerbler-kefo, 2009; Basha, 2018).

After the 2006 groundbreaking international change in the field of disability, research on disability is on the record in many respects. First, it is increasingly drawing the attention of a number of academics from a variety of disciplines globally and regionally (Oliver & Barnes, 2010). The disciplines range from education, human rights, sociology, health, rehabilitation, architecture to political science. See for example, (Beckett, 2009; Hansen & Sait, 2011; Yeager, 2011; Neille, 2013; Restrepo, 2015; Jackson, 2018; Shakespeare, Cooper, Bezmez, & Poland, 2018). This reveals that the concept of disability is gaining currency in research and becoming multidisciplinary field of study.

Secondly, there is growing shift of research from the traditional approach that has focused on the Western theorization of disability on the basis of the medical and the social construction to cross-cultural approaches that study the day-to-day lived experiences of PWDs. Researchers adopting this position include for example, (Yeager, 2011; Neille, 2013; Rolston, 2014). These academics have considered personal experiences of living with a disability using qualitative research approach and shown that disability is a socio-cultural concept, having meant different things, in different places for different social groups. This demonstrates that there is no one way or a best way to explain personal experiences of living with disabilities.

Thirdly, disability is increasingly changing across the world from being viewed as a charity and non-governmental concern to policy, legislative, and human rights issues (Oliver &

Barnes, 2010). Accordingly, a number of states have adopted national disability policies and passed persons with disabilities act. In terms of policies, take, for example, the case of India (2006), Uganda (2006), Gambia (2009), South Sudan (2013) and South Africa (2014). With regard to persons with disabilities act, note for example, Ghana (2006), Zimbabwe (2010), Sierra Leone (2011) and Zambia (2012). These initiatives demonstrate that disability is understood not only as a social problem but it is considered as a policy and legislative concern.

While the problem of the incidence of disability causes and ways of rehabilitation have been much discussed in literature, the lived experiences of urban inhabitants of PWDs have been largely forgotten. To be specific, accessibility of PWDs to the built environment and the barriers that they face in the built urban environment have been little known. As reported by Jackson (2018), the accessibility needs of PWDs are overlooked by built environment practitioners and they have little awareness about the diversity of the human condition.

According to Tudzi, Bugri, and Danso (2020), built environment contains sidewalk infrastructures, public buildings, and private erections. It also encompasses public transport and other services (Baris & Uslu, 2009). However, it is generally agreed that the nature of built environment is hostile and exclusionary for urban inhabitants of PWDs. Jackson (2018) contends that built environment fail to meet accessibility needs of PWDs. This finding is similar to that reported by Baris and Uslu (2009) who found that the inability of urban inhabitants of PWDs to access public spaces and transport schemes is not only a symbol of their physical exclusion but it is also an expression of their isolation from social life.

It has recently been shown that barrier free built environment and prudently designed buildings are prerequisites for social inclusion of PWDs and enjoying public spaces and services (Gharebaghi, et al. 2018; Terashima & Clark, 2021). However, built

environment accessibility has not received much consideration in literature and how urban inhabitants of PWDs are disabled by the barriers ensuing from the poorly built environment is little known (Basha, 2018; Jackson, 2018; Tudzi, Bugri, & Danso, 2020).

These days, urban growth is unprecedented and it is becoming the core of social, economic, and political life of human being (Psatha, Deffner, & Psycharis, 2011). However, recent research by Terashima and Clark (2021) suggest that the way urban infrastructures are designed and built and how urban facilities and services are provided for urban inhabitants of PWDs are precarious impeding their access, participation and inclusion in urban life. With this understanding in mind, it is well-timed to investigate the barriers that impede the lives and life choices of urban inhabitants of PWDs in Addis Ababa.

While most of the research into the field of disability has relied on qualitative approach see Hansen and Sait (2011), Yeager (2011), Shakespeare, Cooper, Bezmez, and Poland (2018), some researchers particularly those who have focused on the nature of urban accessibility of built environment, have employed quantitative approach, mainly survey method to measure the extent of urban accessibility (Baris & uslu, 2009; Hasanvand, et al. 2014; Danso, Atuahene, & Agyekum, 2019). Whereas the findings of the two research approaches are important in providing necessary background to the present study and the extent of disability prevalence and types, they are unable to deeply look into the lived experiences of urban inhabitants of PWDs.

It is true that the experience of urban inhabitants of PWDs is unique due to the distinctive social, economic and political structure of urban life. To be precise, as discussed by Psatha, Deffner, and psycharis (2011), urban life differs in many respects. First, it is complex in terms of daily interactions. Secondly, the need for the provisions of services is high. Thirdly, the available services are required to be accessible to every person and inclusive. Thus, these

urban life structures require different lens that enables to research and understand the unique lived experiences of urban inhabitants of PWDs.

Unlike previous studies, this study is based on the underlying assumption that urban specific barriers that PWDs experience on a daily basis are structural and threats to their survival, livelihood and dignity. Structural violence and human security are therefore theoretical orientations employed in this thesis to assess the urban impediments of PWDs who live/work in Addis Ababa. These theoretical orientations have been chosen for some reasons. First, as a social perspective, they allow for the analysis of structural barriers to which urban inhabitants of PWDs are exposed on a daily basis. Secondly, as a way forward, they allow for the formulation of appropriate policies, strategies, and legislatives. The more the urban specific barriers are structured and thought in terms of human security, the better they can be visible and concrete.

2.3.2 Previous Research in the Ethiopian Context

The preceding literature overview on disability provided the backdrop for the present study of barriers impacting human security of urban inhabitants of PWDs in Ethiopia/Addis Ababa. Evidence suggests that PWDs have traditionally been the subject of charity, ostracism, social and economic marginalization (Groce and Murray 2013; Abebe, Abera, Nega, Gizaw, Bayisa, Fasika, & Wakene 2021). For too long, disability has been understood as spiritual origin and PWDs continue to be excluded from many development policies and practices (Tirusew, 2005; Groce et al., 2013).

In Ethiopia, previous studies concentrated on the limited topics such as causes, prevalence and types of disability (Tirusew, 2005; Abebe et al., 2021). Research addressing personal experiences of urban inhabitants of PWDs has been largely overlooked. Despite the paucity of

scientific indications, PWDs constitute sizeable proportion of marginal people of the Ethiopian society and they suffer from unparalleled barriers that impede their accessibility to services and the built environment (Dagnachew, 2011; Groce et al., 2013).

Although research into personal experiences of PWDs is slowly gaining impetus since the 2005 seminal work of Tirusew Tefera, accessibility needs of urban inhabitants of PWDs to the built environment remain little known (Misrak, 2006; Amare, 2012). Urban inhabitants of PWDs in Addis Ababa continue to face severe barriers to participate in mainstream activities as a result of lack of accessibility to the built environment (Amare, 2012; Tesema, 2017).

With regard to research into the built environment accessibility, the 2006 work of Misrak Tarekegn is the initial document to recognize the problem of the built environment accessibility faced by persons with motor and visual impairments in Addis Ababa. This study is written from the standpoint of survey research with the support of FGDs. The main focus of this piece of work revolves around building design, street environment and transport system. This type of information is important in providing firsthand data to further investigate the topic using qualitative research approach in depth.

After this piece of work, the major study about the question of accessibility is the investigation conducted by Amare (2012) who has focused on the right to accessibility of PWDs in Addis Ababa. The right of PWDs to accessibility of the built environment is the central idea of this study. In terms of methodology, the study is conducted using qualitative research approach. Interview, and primary and secondary sources are instruments used for data collection.

In comparison to previous work, the discussion of the right to accessibility by Amare (2012) is purely qualitative and based on legal orientation. There is no doubt that this right based

discussion may fill the knowledge gap regarding the question of the right to accessibility of PWDs to the built environment. However, this study is unable to consider other important factors beyond the legal element of accessibility such as structural causes.

It is true that the question of accessibility is not only the issue of right but it is also a problem which arises from biased attitude of concerned stakeholders and lack of awareness. This ignorance denigrates the threatening capacity of the urban accessibility challenges of PWDs. In this regard, human security and structural violence orientations afford different lenses through which to study and construct the meaning of the relationship between disability and accessibility of built environment.

The inquiry of transport problems of PWDs by Tesema (2017) is one of the very few recent studies which deals with the transport challenges in Addis Ababa to which urban inhabitants of PWDs are exposed on a daily basis. In this study, means of public transportation such as buses, taxis and railways have received particular attention despite the fact that sidewalk accessibility is also the very concern of urban inhabitants of PWDs. In this study, the mixed method that is both qualitative and quantitative research methods are employed for the purpose of data collection.

While the built environment accessibility proves to be all-inclusive such as information/communication accessibility (Basha, 2018; Terashima and Clark, 2021), the study of Tesema (2017) has only focused on the transport aspects of accessibility issues of PWDs in Addis Ababa. Written from the standpoint of the social model of disability, this study contends that PWDs are unnecessarily excluded from the current forms of transport services. However, this argument lacks depth and does not touch upon other aspects of accessibility concerns like architectural and physical infrastructures.

One more piece of work focusing on the accessibility needs of PWDs is done by Muzemil (2018). This study was concerned with the campus physical environment accessibility of the Ethiopian universities. It gives an overview of the perception of PWDs regarding the accessibility of the physical environment of Ethiopian universities. While this work is quantitative, it provides an important indication for further research into the field of accessibility using qualitative research approach.

Based on the previous readings, the researcher comes to realize that the nature of urban built accessibility for PWDs is little investigated and known in the literature. Furthermore, it is not very much common to look at disability through an alternative lenses beyond the social and medical models of disability. With this assessment in mind, this thesis uses human security and structural violence perspectives as they are relevant to make urban accessible challenges more visible and concrete. Hence, the next two sections will review the concepts of human security and structural violence in relation to disability.

2.4 Disability from Human Security and Structural Violence Perspectives

2.4.1 Human Security

It is important to clarify what theories, values, and concepts underpin this study in order to situate this research within the peace and security field of study. This dissertation falls within structural violence and human security orientations. As of 1994, the late Mahbub Ul Haq, a Pakistani economist, has taken the initiative to coin the term human security. Subsequently, human security has become a ground-breaking concept by receiving strong support from renowned economist Amartya Sen and the UN Diplomat Sadako Ogata (Mahmud, 2008; Tadjbakhsh, 2009).

In historical terms, as stated by Liotta and Owen (2006), the root of security concept has gone to the Latin utterance 'Securitas' which literally means tranquility. From its Latin origin, the view of security has developed all the way through the French Revolution and the Liberal Enlightenment of the nineteenth century to the two World Wars and the Cold War. All through, the idea of security has been increasingly receiving dominance and eventually extended to people's security.

In the attempt to redefine and broaden the scope of the concept, two schools of thoughts, that is the narrow and broad conceptions of human security have emerged. Bajpai (2000) and Liotta and Owen (2006) state that the broad notion of human security is rooted in the idea of freedom from want and the narrow conception is fixed in the view of freedom from fear. While the narrow conception tends to protect people from military exercise as well as physical threats, the broad conception represents a wider range of threats such as social, economic, psychological, and political aspects of human vulnerability.

Similarly, Tadjbakhsh (2009) analyzes the notion of human security by grouping it into minimalist and maximalist approaches. The minimalist approach focuses on the narrow understanding of human security concept. This minimalist view understands human security as a freedom from fear and focuses on visible threats.

On the other hand, the maximalist approach promotes the broad understanding of human security that puts emphasis on both direct and indirect threats. This broad discourse on human security comprises freedom from fear, freedom from want, and freedom from indignity. These issues are fundamental principles for the broad understanding of human security (UNDP, 1994; Tadjbakhsh, 2009).

For the purpose of this study, among many bewildering definitions of human security, the UN

Commission on Human Security, *Human Security Now* (2003, p. 4) definition of human security has been adopted. The Commission equates human security with the protection of “the vital core of all human lives in ways that enhance human freedoms and human fulfilment”.

The Commission further elaborates that “Human security means protecting fundamental freedoms - freedoms that are the essence of life. It means protecting people from critical (severe) and pervasive (widespread) threats and situations”.

The definition of human security of the UN Commission asserts that people are the referent object of human security, implying that urban inhabitants of PWDs require protection and empowerment to which human security is firmly associated. Protection and empowerment are instruments of human security intervention to respond to macro level social injustice as well as to improve the daily living condition of vulnerable people, including urban inhabitants of PWDs who are facing daily barriers as a result of inaccessible built environment.

Peace and Security is a field of study with an array of possible orientations to practice and research. As a component of peace and security study, human security research revolves around the security of people specially those who are disadvantaged and in need of protection and security such as PWDs (Jolly and Ray, 2006; Schnabel, 2014). In order to situate the current study within human security perspective, it is obligatory to consider key issues that make disability a human security concept.

In this dissertation, disability is conceived as a human security concept at least for three reasons. First, disability is something that needs great attention of many stakeholders including policy makers, state bureaucrats, architects, educationalists, employers, and local administrators. The more these stakeholders work towards accessible needs of urban inhabitants of PWDs the better they are protected and empowered. This claim is expressed in

the seminal work of Schnabel, Antillano, Alviarez, and Pedrazzini (2014, p. 79) as follows:

“The concept of human security focuses on the needs of individuals and communities. They are the primary objects of security - not the state, or the government and its institutions. The latter exist to serve the population’s needs and protect people from external and internal threats to their existence and well-being”.

Secondly, disability is an expression of human vulnerability to threats that endanger the survival, livelihood, and dignity of PWDs. The key human security threats to which urban inhabitants of PWDs are exposed on a daily basis include attitudinal barriers, menacing sidewalk pavements, hostile public service provisions, unfriendliness of buildings, inaccessible vacancy notices, etc. While these disability specific threats have the capacity to put in danger the lives and life choices of urban inhabitants of PWDs, they are not often given the necessary attention.

In the seminal work of Schnabel, Antillano, Alviarez, and Pedrazzini (2014, p. 82), the closest point to the aforesaid assertion has been stated “Threats do not necessarily have to cause or trigger violence in order to be detrimental to people's survival and well-being...many more urban dwellers suffer from other threats, such as inadequate public service provision or traffic accidents, which are equally lethal and detrimental to those directly affected”

Thirdly, despite the presence of certain variations between them, the concept of human security complements with the social model of disability. One manifestation of complementarity is that the concept of human security is conceived on the foundational idea of the social model of disability. In other words, disability is conceptually social and politically a human security agenda. In exploring the barriers as causes and consequences of human insecurity of urban inhabitants of PWDs, consideration should be given to those

threats which are the main causes of PWDs physical exclusion and social suffering. In this regard, disability and structural violence are inextricably linked (Szanto, 2020).

2.4.2 Structural Violence

The link between human suffering and social structure is robustly articulated by Johan Galtung (1969) in his seminal article, *“Violence, Peace, and Peace Research”*. Johan Galtung recognizes two types of violence which he terms direct/personal and structural violence. To differentiate between the two, Galtung refers to “the type of violence where there is an actor that commits the violence as personal or direct, and to violence where there is no such actor as structural or indirect” (p. 170). In the second type of violence, which remains the focus of this study, “the violence is built into structure and shows up as unequal power and consequently as unequal life chances” Schnabel (2014, p. 79).

In the sense described above, structural violence is the violence in which performers are unseen and the violence is built into social structures in which the sufferers may not have an identified perpetrator to blame instead the structures. It is the structures that create unequal life chances not a singular person (Saleem et al., 2016; Sinha et al., 2017). From peace perspective, structural violence denotes the absence of positive peace (Schnabel, 2014).

According to UNICEF (2018), structural violence implies the injustice that exists within a society underpinned by institutions and policies designed to protect and promote the rights of some people to access to goods and services but not others. Farmer et al (as cited in Neille, 2013) asserts that structural violence is the inequality rooted in the social structures that benefits some people but harms others. Christie (1997) also affirms that structural violence is an expression of unjust social, economic, and political structures through which certain segments of the society are deprived of their privileges and needs.

For the purpose of this study, Galtung (1969) definition of structural violence has been adopted which denotes “an avoidable impairment of fundamental human needs” (p. 182). This definition allows us to speak of the barriers which are covert expressions of structural violence inherent in the disadvantaged position of PWDs. In other words, barriers are embedded in the social, cultural, economic, and political system sustained by power structures which is beyond the control of PWDs. In this way, they can be violent as they remain rooted in structural reasons (Szanto, 2020).

For Schnabel (2014), UNICEF (2018), structural violence is expressed in terms of its impact upon the life chances and survival of people by preventing them from meeting their basic needs. Expressions of structural violence such as taken-for granted, invisible, silent, insidious and static remain to be overwhelming that explains the human suffering and harm (Saleem et al., 2016; Sinha et al., 2017; UNICEF, 2018).

According to Schnabel (2014), structural violence is described as a threat to people’s survival, livelihood, and dignity. The impact that structural violence creates upon the basic survival needs of people is violent, leading to human insecurity. Put it another way, structural violence is source of human insecurity that threaten people’s survival by inhibiting them from fulfilling their basic needs. This shows that structural violence is manifestation of marginalization and social oppression of the disadvantaged such as PWDs. This argument brings us to the question how disability is expressed from structural violence perspective.

Before we look at disability in the context of structural violence, it is important to describe cultural violence which is also useful to explain disability. Cultural violence is an element of structural violence which is often expressed in terms of dominant societal attitudes, values, and belief systems. It is an ideological instrument used to justify or legitimize the harm

caused by structural violence (Galtung, 1990).

For structural violence to persist, cultural violence preaches and teaches people's exploitation and repression as normal and natural (Galtung, 1990). Minnich (2020, p. 68) notes that "cultural violence is invariant that makes structural violence acceptable or at least tolerated". Rooted in religion, language, norms, and symbols, cultural violence normalizes or blurs the effects of structural violence, as in the case of male preference over female and as the belief that associates the onset of disability with punishment from God (Galtung, 1990).

Drawing on the ground-breaking work of Galtung (1990) and the recent argument of Minnich (2020), the theory of cultural violence is relevant to explain disability and the barriers experienced by urban inhabitants of PWDs. From cultural violence perspective, disability is an object of structural violence in many ways. The way disability is represented by the attitudes, values, and beliefs of the society is an expression of cultural violence. For example, the belief that considers a person's visual impairment as a punishment from God is ferocious because it makes all PWDs wrongdoers.

The relevant argument about this traditional belief is not the question of transgression rather the impact it can have on the overall social, economic, political, and personal life of the individual, which is the most significant. Put it another way, due to this widely held belief, the society do not consider PWDs as capable, productive, and worth of life. This mistreatment may make them socially deviant from mainstream society and consequently they do not get the attention of the concerned stakeholders such as road designers, service providers, and decision makers. Disability is regarded as spiritual not as social, economic, and political concern.

The impact of such representation is not only the way PWDs are treated by the society but it

also has inflicting influence upon the way they see their own problem and the way they place themselves in the society. Generally, negative attitudes like the spiritual belief mentioned above do not make PWDs feel safe not only in their worldly lives but also in their heavenly life because of the biblical implication of the transgression.

To conclude this section, cultural violence, structural violence, and human security are interrelated concepts and they are obviously of relevance for this study in many respects. First, in the view of Galtung (1990), cultural violence remains to be instrumental in the indoctrination of structural violence. In the case of disability, this implies that negative attitudes, values, and beliefs about the onset of disability are expressions of cultural violence. This proselytization affects the way the policy makers, state bureaucrats, designers, planners, as well as service providers respond to various accessibility needs of PWDs.

Secondly, many of the causal factors to the physical and social exclusion of PWDs have their roots in societies' attitudes towards disability (Chan et al., 2009). These are reflected in the social structures and systems that determine accessibility of services, widen opportunities, and set policies. Thirdly, human security is protective tool of people as stated by Schnabel (2014), which implies that PWDs are one of those who require societal and institutional protection from downside risks. Physical and social barriers are therefore threats to the survival, livelihood, and dignity of urban inhabitants of PWDs.

2.5 Definition of Key Terms

This section defines the key terms used in this study In order to avoid the possibility of their misunderstanding. These are accessibility, barriers, built environment, disability, impairment, psychological violence, and physical violence. These terms serve as a conceptual framework

for this study. As Blocksidge (2003) states, the term and the meaning that it conveys varies across cultures and languages. After careful consideration of the concepts in literature, definitions that are suited for the purpose of this study have been considered.

In this study, accessibility is used as in United Nations (2013). “accessibility refers to provision of flexibility to accommodate each user’s needs and preferences” (p. 7).

Sahu and Sahu (2015, p. 2) define barriers as “Factors in a person’s environment that, through their absence or presence, limit functioning and create disability. These include aspects such as environment that is not accessible, lack of relevant assistive technology...”. This definition allows us to speak of barriers faced by urban inhabitants of PWDs such as Addis Ababa.

The term built environment is adopted from Yeager (2011) and defined as “anything man made to improve living/travel conditions of human beings, buildings, trails, sidewalks, etc” (p. 13).

In this study, the term disability is used in the sense of the definition of the Union of Physically Impaired Against Segregation (UPIAS) (1976, p. 14). Accordingly, disability refers to "the disadvantage or restriction of activity caused by a contemporary social organization which takes no or little account of people who have physical impairments and thus excludes them from participation in the mainstream of social activities".

The definition of impairment forwarded by the Union of Physically Impaired Against Segregation (UPIAS) (1976, p. 14) is also well-suited for this study. Accordingly, impairment is defined as "lacking part or all of a limb, or having a defective limb, organ or mechanism of the body". The terms Disability and impairment are sometimes used interchangeably in this study where it seems fitting.

The term psychological violence is used in this study in the sense defined by Brown (2004) as “verbal abuse, intimidation, harassment, humiliation, abandonment...” (p. 22).

As defined by Yusuf et al. (2011, p. 1), “Physical violence includes but is not limited to, scratching, pushing, shoving, throwing, grabbing, biting, choking, slapping, punching, and use of restraints”. This definition is related to the current study and accordingly used in the sense of this definition.

2.6 Chapter Summary

From the literature review, we can draw some conclusions. First, as the field of disability is becoming the topic of research in various disciplines, it is hard to find a defined theoretical framework in the literature through which disability can be understood and analyzed. Put it another way, its theoretical underpinnings vary from one focus to another. For example, the way sociologists describe and analyze disability is quite different from the way educationalists understand and study disability.

Secondly, the social movements around disability in the 1970s and 1980s led to the emergence of various models of disability. Subsequently, the definition of disability which the models adopted has for too long been used to understand and analyze the various lived experiences of PWDs. However, the models limited the concept of disability to a theoretical analysis rather than practical experiences. This reminds us that the more disability is researched through different lenses the better it attracts policy makers and practitioners.

Thirdly, the challenges of PWDs and their lived experiences are studied, represented, and discussed in various ways in the literature. While these various representations of PWDs do

help us to understand some aspects of their lives, there exists an important knowledge gap within the literature: that of human security and structural violence.

Chapter Three

Research Design and Methodology

3.1 Introduction

This chapter discusses the research methodology of this study used to address the stated research objectives and research questions. It is organized into 4 parts. The first part gives a brief overview of research approach. This study is qualitative in nature and the steps that guide the design and execution of the research is qualitative research approach. The second section outlines the type of research design employed that enable the researcher to make sense of the data.

The third section provides a brief outline of the research methods applicable to collect qualitative data. In-depth interview and FGDs are main methods used to collect data. In the fourth section, the type of data analysis and ways of data interpretation and presentation was concisely addressed.

3.2 Qualitative Research Paradigm

In any research approach, there is no single formula to answer research questions. Some require quantitative and others can be treated using qualitative research approach (Bell & Waters, 2018). For the research problems such as which deal with what barriers impede accessing services, qualitative research approach is more appropriate than quantitative research approach.

This study adheres to qualitative research approach which allows us to investigate and understand some aspects of social life (Kumar, 2018). This approach is also useful to generate

qualitative data in words rather than in numbers that enables to analyze the data qualitatively in a better way (Patton, 2002).

It is recognized that people's behaviors and experiences are inextricably intertwined with the environment where they live. Qualitative research thus provides a comprehensive description and analysis of the environments and social contexts of the participants in the study (WHO, 2014). Depth and detail information about the topic under the study can be collected using qualitative research methods (Patton, 2002; Kumar, 2018).

Despite some of the criticism such as sample smallness and subjective interpretation, qualitative research is indispensable approach to explore personal experiences and situations where real life of people is little known. Bearing this understanding in mind, qualitative research approach is chosen in this study to examine the lived experiences of urban inhabitants of PWDs in Addis Ababa.

3.3 Research Design

This section addresses three essential elements of research design. These include epistemology, methods, and data analysis. Kivunja and Kuyini (2017) describes epistemology as “how we come to know something; how we know the truth or reality...” (p. 2). The tools the researcher use to collect data are methods (Bell & Waters, 2018). The methods guide the choice of the means by which the researcher make sense of the data and data analysis is the practice of describing and interpreting social phenomenon (Ian, 2005). The design and execution of this study is therefore informed and guided by these three fundamentals of research design and they also facilitated the method of data analysis.

According to Kothari (2004), the research design is about the underlying logic of the study that makes more focused and systematic. It is therefore important at the outset to determine the world view of this study, the methods used to collect data, and the techniques employed to analyze the qualitative data. This study is located into constructivism research paradigm because it enables to uncover and make meaning of the everyday barriers that urban inhabitants of PWDs experience. In-depth interview and FGDs were the methods used to collect data and thematic data analysis was employed to make meaning of the data. The next three sections explain each of these research elements in more detail.

3.3.1 Constructivism

According to Kivunja and Kuyini (2017), constructivism is a research paradigm used “to understand the subjective world of human experience” (p. 8). There is no single Reality in the social world rather multiple realities which are socially constructed and context specific (Cretty, 1998; Plack, 2005). Constructivism focuses on “understanding the individual and their interpretation of the world around them” (Kivunja & Kuyini, 2017, p. 8). For the reason that this study sought to uncover and examine the urban specific barriers to access to fundamental services such as safe mobility, education, and employment, constructivism is employed as a world view for this study. This research paradigm allows, as Kivunja and Kuyini (2017) described, “To get into the head of the subjects being studied” (p. 8).

Based on the world view of constructivism, every effort is made in this study to try to understand the viewpoint of the participants to interpret what they are thinking or the meaning they are making about the barriers to their daily lives. The constructivists believe that reality is what individuals construct out of their experience and action. This suggests that there is no single reality about what individuals experience and action (Kivunja & Kuyini, 2017).

According to Kivunja and Kuyini (2017), the study placed within constructivism world view exhibits the following characteristics:

The study has no single truth rather socially constructed multiple realities. It requires the decent interaction between the researcher and his/her research participants and makes deep dialogue. The study adheres to individual reality rather than universal law. The knowledge the study generates is context specific. The study takes contextual factors into consideration in the process of designing and executing the research project and reporting the results.

3.3.2 Research Methods

In accordance with world view of constructivism, this study uses qualitative research methods to explore the participants' viewpoint on the given research topic. Qualitative data can be collected using a number of methods including systematic observation, interviews, FGds, and public and private documents (Hartley & Muhit, 2003). For this study, in-depth interview and FGds were the methods used to collect data. They were chosen for their relevance for collecting and analyzing information about the viewpoint of participants on the everyday barriers they face and make sense of the data (Hartley & Muhit, 2003).

It is also helpful to consider my personal experience and the comments made by participants on International Disability Day to supplement and crosscheck the data obtained through in-depth interview and FGds. Merriam (1998, p. 20) suggests that the researcher is the "primary instrument for gathering and analyzing the data". Although qualitative research is open to subjective interpretation, I have made considerable effort to minimize my personal bias during the time of data collection and data analysis by espousing critical look.

Data was collected from the lived experiences of urban inhabitants of PWDs of both sexes. The age of participants was between twenty-four and sixty years. Participants were chosen from all walks of life including public employees, government officials and experts, Leaders of disability associations, university students, and a few non-disabled individuals whose work is directly related to disability, and some members of NGO management group.

A total of 89 participants were involved in this study, of which forty nine participated in 7 FGDs and the remaining were engaged in in-depth interview. The interviews and FGDs were conducted based on the interview guidelines prepared in advance. The guide was unstructured, flexible, and open ended.

As the subjects of the research are a specific study population with particular characteristics that is disability, purposive and snowball sampling techniques were used to select participants of the in-depth interview and FGDs. These samplings are predominantly helpful to access the research targets that are hard to find and marginalized groups. Such methods also focus on a small number of carefully selected respondents who can provide wealthy information (Patton, 2002; Bernard, 2017).

The FGDs and interviews were conducted at the center of operations of the national associations of disability including Federation of Ethiopian Association of Persons with Disabilities (FEAPD), Yemisrach center, Ethiopian national Association for the blind (ENAB), national association of women with disabilities (NAWD), Ethiopian Center for Disability Development (ECDD), and Addis Ababa University (AAU).

3.3.2.1 In-depth Interview

In-depth interview is the typical qualitative research method that enables to exploration of experiences of people's social life. It allows individuals to share their way of life (Creswell, 2014; WHO, 2014). In-depth interview involves key informants who are likely to provide needed information, ideas, and insights on a particular subject (Kumar, 1989). Depending on the nature and scope of the inquiry, the appropriate key informants can be identified and their number may be varied from one study to another (Kumar, 1989).

Kumar (1989) states that key informant interview are indispensable tool in providing information that comes from knowledgeable people. It provides data and insight which cannot be obtained using other methods. Despite its cost and time consuming, the well-prepared and designed key informant interview can provide new insights about the subject under inquiry (Kumar, 1989; Who, 2014).

In this study, key informant interview was used to obtain information about the everyday barriers that urban inhabitants of PWDs face. Information about barriers to participation around school environment, barriers to employment and workplace challenges of PWDs, and barriers to use sidewalk and transport services were collected through in-depth interview. With the consent of key informants, their interview was tape-recorded and summary notes were simultaneously taken in Braille. Each in-depth interview took about an hour.

3.3.2.2 Focus Group Discussions (FGDs)

According to Dzino-Silajdzic (2018), a focus group discussion (FGD) is qualitative data collection method that involves 6 to 12 people. The participants with shared characteristics pertinent to the discussion topic such as a particular problem, experience, social group, and

place of residence are some of the norms used to involve contributors in FGDs. The group discussion is facilitated by prearranged interview guide to foster active participation and exhaustive discussion (Dzino-Silajdzic, 2018).

It is self-evident that a focus group discussion is indispensable tool of collecting qualitative data because the participants think together, inspire and challenge each other throughout the discussion. Furthermore, it provides collective experience of participants that can enrich the study with enough information (Dornier, 2007; Creswell, 2014). Dzino-Silajdzic (2018) also asserts that FGDs allow flexibility and stimulate participants to share their experience and discuss among each other.

In this inquiry, FGDs were employed to collect further information about physical and social barriers to which urban inhabitants of PWDs are exposed on a daily basis in Addis Ababa. The insights of participants about the social situation of PWDs, the way they perceive community's attitudes towards their impairment, the coping strategies they use to soften the barriers, the challenges they encountered when using transport service, and other aspects of urban life were some of the information obtained by means of FGDs.

A total of 7 FGDs were conducted. Two of the FGDs were with women with disabilities, three FGDs were conducted with mixed participants with disabilities (men and women), and other two FGDs were attended with men with disabilities. The number of participants of each FGDs ranged between 6 and 9.

Due to the nature of their disability and communication break, FGDs with visual and hearing disabilities were conducted separately. In order to minimize the communication gap between the researcher and the participants with hearing impairment, the trained sign language interpreter was employed in order to facilitate the communication. Suitable conditions such as

convenient room were set for the participants so that they were able to describe the issue under investigation. The participants were respectfully appreciated for their time and contribution.

The number of participants in the FGDs ranges between six and nine. With the consent of participants, the FGDs were tape-recorded and the discussion lasted between one hour and an hour and half. Amharic as the local language of the city was used to conduct the in-depth interview and the FGDs.

Apart from the above mentioned methods of data collection, the researcher took part on the annual International Disability Day and witnessed the perceptions and feelings of PWDs, non-disabled participants, and state representatives including from Ministry of Labor and Social Affairs. The comments made by participants, the policy remarks of state representatives, the key accessibility challenges raised, and other important discussions were used to build up the analysis of this study. The researcher was allowed to participate with the permission from concerned administrative body.

Document analysis was one more source of data for this study. It has for too long been part of the qualitative research methodology (Bowen, 2009). As defined by Bowen (2009, p. 28), “Document analysis is a systematic procedure for reviewing or evaluating documents both printed and electronic (computer-based and Internet-transmitted) material”. Drawing upon this, document analysis was employed in this study to generate additional information to substantiate the data collected using other methods of data collection.

For this study, literature readings containing books, journals, and articles, institutional reports, policy documents, and legal records were reviewed and used as supplementary source of information to increase the validity of the findings and the accuracy of the data. Overall, the

report of this study was the result of the extensive literature review and the spoken data obtained from key informants and participants of FGDs who shared their experiences, thoughts, and feelings.

3.3.3 Data Analysis

The method of analyzing and interpreting the collected qualitative data is the crucial phase of conducting a study. Ian (2005) defines data analysis as “You can’t make an omelette without beating the eggs together. ‘Analysis’ too involves breaking data down into bits, and then ‘beating’ the bits together” (p. 31). Support for this definition comes from Alhojailan (2012, p. 1), who defines data analysis in qualitative research as “Merging of analysis and interpretation and often by the merging of data collection with data analysis”

In qualitative research, there is no standardized procedure of data analysis. As the design of every qualitative study varies in terms of focus, purpose, and method, the way and the procedure of data analysis is also unlike (Kalpokaite and Radivojevic, 2018). Alhojailan (2012, p. 1) suggests three principles that the researcher should observe while doing qualitative data analysis. First, packing raw data into succinct structure to identify, compare, and determine upon which to focus. Second, making the relationship between the research objective and summary clear. Third, making conclusion by developing a model /improving conceptual basis of the research.

Thematic analysis is one of the most functional types of qualitative data analysis (Kiger & Varpio, 2020). It is a course of identifying or presenting themes/patterns of qualitative data. Alhojailan (2012) states that thematic analysis allows the researcher to focus on important themes and identify them instead of computing the rate of recurrence of a particular theme or idea. In particular, Kiger and Varpio (2020) highlight that “Thematic analysis is an

appropriate method of Analysis for seeking to understand experiences, thoughts, or behaviors across a data set” (p. 2).

Brown and Clarke (2006) further state that thematic analysis is a method of data analysis that needs identifying, analyzing, and reporting qualitative data. The flexibility nature of thematic analysis makes it different from other types of qualitative data analysis and can be used within various research paradigms (Kiger & Varpio, 2020). For the study that uses constructivist epistemology, Kiger and Varpio (2020) suggest that thematic analysis is particularly appropriate because it illustrates the way social construct develops and allows to search for latent and deeper themes within data.

With this understanding in mind, thematic analysis is used in this study to identify, analyze, and report the qualitative data gathered from participants of urban inhabitants of PWDs. Inductive approach is used to identify themes that provides a broader and more expansive analysis of the whole study as suggested by Kiger and Varpio (2020). This approach is a method by which the researcher identifies themes from his/her data sets (Kiger & Varpio, 2020).

As outlined by Brown and Clarke (2006) and Kiger and Varpio (2020), six steps of thematic analysis were recommended. Stick to these steps, the gathered data of this study was analyzed in the following ways. First, I transcribed the recorded spoken data into texts and to familiarize myself with the data, I read over and over again the transcribed text. Second, the transcribed data were manually given initial codes such as descriptive and conceptual codes. Third, pertinent Themes were developed in the form of search. Fourth, I reviewed again and again the initial codes as well as the transcribed texts and further themes and subthemes were then developed. Fifth, the themes were defined and the task of identifying themes was

concluded. Finally, these steps were reiterated many times by going back and forth until the report of this study was produced.

3.4 Data Triangulation

To determine whether the findings of this study are credible or not, data triangulation is an important method for judgment. Triangulation refers to the use of multiple sources of data (Noble & Heale, 2019). Bashir, Afzal, and Azeem (2008) state that triangulation in qualitative study is the measurement of validity and reliability. The objective of using more than one approach in studying a particular problem is to establish the credibility and trustworthiness of findings (Heale & Forbes, 2013).

In recognition of the importance of triangulation in qualitative study, more than one source of data was used in this study. The remarks of state representatives and participants on International Disability Day, my personal lived experiences, and policy and legal document analysis were used to crosscheck the data obtained via in-depth interview and FGDs. In addition to this, literature readings, informal discussions with my colleagues, and interviews on mass media about disability were also considered to verify the accuracy of the claims and conclusions made in this study.

3.5 Ethical Considerations

The scientific research that incorporates human subjects in the study demands ethical values. Cognizant of ethical principles of scientific research declared in Belmont report (1979), the researcher shades light on the issues such as informed consent, beneficence, confidentiality, and respect for research participants. Based on this truth, data was collected with the consent of informants who participated in FGDs and in-depth interview.

Furthermore, participants were primarily informed the objective of the study before starting the discussion or the interview. During data collection process or afterwards, personal information of participants would not be publicized or given to any third party without their full consent in case the need arises.

In order to keep the intellectual and scientific integrity of the study, citations, references, websites, and any other related information were verified and properly acknowledged. The act of recording the voice of participants and pictures were done with the consent and knowledge of participants. During data collection, the norms of the society, way of life, religious practices were strictly respected.

3.6 Chapter Summary

This chapter has discussed the various parts of research methodology needed for this study. The most important research elements outlined in this chapter include the research design chosen for this study, the research world view adhered, methods of data collection employed, method of data analysis used, and the research ethical standards adhered to conduct this study.

These research fundamentals are important in qualitative based investigation. The omission of one research element from the study may result in poor and incomplete research procedure that may also affect the findings and conclusions of the study. Therefore, it is reasonable to conclude that the more these research elements are obeyed the better the results and conclusions of a research report becomes logical and dependable.

Chapter Four

People's Conceptualization and Perception of Disability and Accessible Mobility

4.1 Introduction

This chapter has two sections. The first section discusses about public perceptions (attitudes) towards the onset of disability and potentials of PWDs. It also interrogates how PWDs perceive about their own disability. This section further traces the origin of attitudinal barriers; showing that PWDs are disabled by negative public attitudes rather than their own impairments. It also addresses how attitudinal barriers contribute to their marginalization and exclusion through cultural indoctrination.

The second section is an account of the barriers to mobility of PWDs that they encounter on walkways of Addis Ababa and when they travel by public transport. The experiences of PWDs living in urban areas show that their independent travel and well-being are threatened by barriers stemming from poor walkway conditions and the challenges of public transport service provisions (Misrak, 2006; Tesema, 2017).

While nonviolent mobility is essential for PWDs to participate in social and community activities as discussed by Baris and Uslu (2009), they encounter many-sided barriers endangering their livelihood, survival, and dignity. This study shows that why and how these barriers become threats to well-being and empowerment of PWDs in Addis Ababa. The chapter ends by providing discussions on the findings and it draws some conclusions based on the report of participants account.

4.2 Emerging Cultural Beliefs and Norms: Personal Autonomy and Self-worth

People's attitude towards the onset of disability is the most intimidating barriers that contribute to other barriers inciting discrimination against the well-being and empowerment of PWDs (Chan, Livneh, Pruett, Wang, & Zheng, 2009; Sahu & Sahu, 2015). Participants of this study indicated that attitudes people hold towards PWDs range from mistaken beliefs to low expectations.

In relation to the perception of family and community members about disability, interviewees and FGDs indicated that they do not feel comfortable when their family members give birth to a child with disability or acquire it later. They relate the onset of disability to diverse societal norms such as ancestral transgressions and bad omens. One participant states, for example that:

Whenever we chat about the source of my physical impairment, my family members often told me that the sins of my grandparents caused my impairment. I was even beholden by their thought bit by bit and internalized their way of perception (Male, age 50, type of disability hereafter (TOD) physical impairment, place of interview hereafter (POI), Federation of Ethiopian Associations of Persons with Disabilities hereafter (FEAPD), 2018.

The above comment articulates that the family and other community members believe that disability is the result of the perceived misdeeds of ancestors and their transgressions. It speaks the family members of PWDs are wrongdoers and their transgression goes beyond one generation. This norm makes PWDs feel unfortunate and offender among their family and the larger community. As a consequence, they face isolation and exclusion from mainstream society.

To add my own experience to the above mentioned account:

I was told that I got visual impairment due to the transgression of my grandfather that repelled the nuptial between his closest daughter and neighboring sorcery. To be precise, my mom told me that the neighboring sorcery asked one of the daughters of my grandfather for marriage. Yet, my grandfather rejected the matrimonial and the sorcery cursed the offspring's of my grandpa to get blind. So, the curse became the source of my blindness as my granddads offended the sorcery refusing the marriage relationship (TOD visual impairment).

The above emerging cultural beliefs and norms as theme show that the family and other community members believe that the onset of disability is something related to supernatural power. This tradition makes PWDs not only feel defective but it also makes them to feel inferior and lose their self-reliance and lack strong-mindedness to fully participate in mainstream society. Despite the scientific uncertainty of the above two descriptions, they have the power to normalize the practice of discrimination against PWDs and threaten their well-being and personal empowerment.

The comments of participants on International Disability Day and FGDs stated that family members and the community consider a person born with impairment as taboo and bad-omen.

This was expressed by one participant as follows:

All the time, People around me voiced that my physical impairment was bad luck and I was impaired by mystical power. I was even told that I was taken to sorcery in my early years to get his cure. Yet, I stayed physically impaired and still long-lived with it (Female, age 40, TOD physical impairment, POI National Association of Women with Disabilities hereafter (NAWD), 2018).

The above comment states that the belief of society towards the onset of impairment is mysterious that they relate impairment to something taboo and bad-omen. They do not perceive it as normal happening. The above experience further articulates that the perceived

sorceries are regarded as healers who are entitled to restore the impaired body. While the above labeling looks traditional and mystical, it makes PWDs feel unfortunate and transgressed. Furthermore, this perception serves as foundational to normalize the practice of marginalization and discrimination against PWDs.

When PWDs were asked about perception of their own impairment, they commented that they tend to discriminate and isolate themselves from the rest of the community due to the negative societal responses to disability. They also believe that their disability triggered to develop the sense of lowered status and dependent on others. This was stated by one interviewee as follows:

I prefer to communicate with my own group who are disabled. I feel scared when I communicate with the rest of the community. Instead of socializing myself with those without disabilities, I feel relaxed when I meet people who are similar to me (Male, age 50, TOD physical impairment, POI FEAPD, 2018).

The above quotation demonstrates that the perception of PWDs about their own impairment is self-discriminatory which hinder them from becoming equal member of the community and exercise equal opportunities. It illustrates that PWDs are not only discriminated against but they also discriminate themselves. The above comment further articulates that PWDs' self-discriminatory behaviors remain critical that distract their identity and potential.

Another interviewee commented about her perception of impairment as follows:

I often feel that I am stereotyped and I also isolate myself from getting together with others. Currently, I am not a member of any social gathering though I know its importance. When I consider becoming a member of social gathering, what soon comes to my mind is the way others accept my visual impairment and perceive it...then I am really in confusion. (Female, age 30, TOD visual impairment, POI Ethiopian National Association for the blind hereafter (ENAB), 2019).

The above citation enunciates how PWDs detach themselves from participating in social life of the mainstream community. It also shows how their own perception is impacted by the

general public and internalized the way others perceive their disability and accept them. The story further speaks self-isolation remains the problem seen on the side of PWDs and their lack of preparedness to take part in social and community life is critical problem.

Pertaining to the question of the perception of disability, participants felt that some family members and the larger community believe that disability befalls as a result of the spirit locally known buda (evil eye). An example of such belief was reported by one participant in the following excerpt:

I was encouraged to believe that my loss of sight was related to buda (evil eye). My parents told me that when I was kid, my eyes were good-looking. There was a neighboring woman who used to visit my mom. She was perceived to have evil eye spirit (Buda). While my mom tried to hide me from her look, she stared at my eyes and Bit by bit I lost my sight (Female, age 33, TOD visual impairment, POI ENAB, 2019).

The above narration demonstrates how societal beliefs about source of impairment extremely get bewildered and complex that contributed to the current relegation and discrimination against PWDs. This belief represents the way the society treats PWDs and perceives their impairment. The above quote further articulates that societal beliefs in mystical power increases the social isolation and discrimination against PWDs.

Furthermore, interviewees and FGDs reported that family and the community members believe that the source of impairment is supernatural power and as a result they prefer their family members with disabilities to remain at home and receive parental treatment. By serving the person at home, they believe that God may recompense them heavenly life. One interviewee commented:

I was told that my physical impairment was inborn. It was the goodwill of God who engendered my physical damage. Though I was not able to walk, I wished to go out of home...Yet, when I inclined to leave home, my parents were unwilling and I stayed at home and received their treatment for some years (Male, age 44, TOD physical impairment, POI private office, 2018).

The above quotation suggests that even though it varies from community to community, the way the family treat their relations with disabilities are not only mystical but it is also intolerant. They consider them as less capable and unfortunate to lead an independent life and ought to be kept at home and served by family members. The story further speaks family's treatment at home and the misperception of the larger community about disability makes PWDs dependent and inferior among their age group.

Another interviewee also recounted:

I feel that my parents were embarrassed by my physical condition. They were reluctant to consider me as equal member of our family...while my age group without disabilities were sent to school; I was not allowed to go to school. I was kept at home for some years before I get enrolled to school (Male, age 35, TOD physical impairment, POI Ethiopian Center for Disability Development hereafter (ECDD), 2019).

To complement the above story with my own experience:

Prior to loss of my sight, I started regular class around my homeland. A year later, I eventually lost my sight and remained at home for some years. While school for the blind was found in the district where I was born, my parents were not initially prepared to send me to school for the blind...They questioned how blind people could attend class once they lost their sight. After my insistent push and other family members, I joined school for the blind (TOD visual impairment).

The above two excerpts demonstrate that while the family ought to care for their relations with disabilities, their reluctance to send their family members with disabilities to school and participate them in mainstream way of life is prejudiced. The two comments further articulate that positive attitude of families towards their relations with disabilities is key factor in the course of empowerment and well-being of PWDs and make them self-reliant.

The comment below shows that disability is perceived as the person's health condition rather than it is unfortunate that could happen to any individual. For example one participant said:

We are often regarded as people with diseases. when a person with White Cane or on wheelchair gets into public vehicle, you may hear people saying, 'The sick is coming leave a seat.' Many people see those of us as unhealthy...Even our family members perceive us as a diseased member of the family (Male, age 42, TOD physical impairment, POI ECDD, 2019).

To sum up this section, data collected from participants show that PWDs confront many barriers throughout their lives. The barriers are not only attitudinal but they are also physical obstacles that endanger the survival, livelihood, and dignity of PWDs. Physical barriers are life-threatening that PWDs encounter when they walk and travel by public transport. The next section presents participants' accounts in detail regarding physical barriers.

4.3 Barriers to Mobility: Threats of Violence to well-being of Persons with Disabilities

This section provides a brief outline of walkway and transport accessibility conditions of PWDs. The first part describes pathway barriers that hinder safe and free movement of PWDs in urban environment of Addis Ababa. The second part deals with the barriers that PWDs encounter when they travel by public transport. Accordingly, the two sections are presented in detail below.

4.3.1 Sidewalk Accessibility: Barriers to the safety of Persons with Disabilities

I prefer to start this section by recounting my experience which I met at the time of doing this study. Once I settled the dissertation proposal, I quickly went to data collection. In the middle of data collection, my mom got sick. Then, I stopped gathering data and went to visit my mother. At the time of my first visit, I stayed with her for a while and went back to Addis Ababa. Immediately, I continued to collect data.

My mom's health condition was however gradually worsened and she remained on bed for a

long time. In the meantime, I went four times to visit her. Despite my periodic visits, she passed away at the time of my last visit.

One day before my mom's death, I went into deep hole on the asphalt side at the town called Bako. The pothole was deep and its edge was sharp. It was not covered by brace and I got severe leg injury. I went soon to nearby health center and received first aid. My injury however got worsened after a week and I went back to Addis Ababa and continued to get treatment. Since the injury was chronic, it took me long time to get fully recovered.

Even if the above incidence is not within the geographical scope of this study, it speaks about the whole essence of this investigation and shows the depth of the problem. Furthermore, the story is an impression for the analysis of this section and envisages what urban inhabitants of PWDs face on a daily basis in Addis Ababa.

As discussed by Odame and Amoako-sakyi (2019), walkway conveniences are essential for ensuring equitable access to social and economic services for PWDs. Furthermore, sidewalks ought to be nonviolent to accommodate and enable PWDs safe and independent travel. Similarly, Stjernborg (2019) states that barrier free mobility is essential for PWDs to accomplish their everyday jobs. Among others, they require for establishing and maintaining social connections, dealing with everyday activities, and participating in social life of their community.

Despite the socio-economic importance of walkways, participants indicated that there are many barriers that impede the safe and independent travel of PWDs on the walkways of Addis Ababa. In response to the challenges of pathways, interviewees and FGDs participants indicated that PWDs are more disabled and intimidated by poor walkway conditions of the city than the nature of their impairments. They reported a number of walkway related barriers

encompassing sidewalk curbs, potholes, electric poles, overhung tree branches, dwarf walls, drainage ditches, and piles of wastes, broken pavements, and grilles with openings. These barriers are prevalent, preventing PWDs from safe and independent travel on a daily basis.

Interviewees and FGDs participants further voiced that sidewalk potholes are one of the major barriers to safe and freedom of movement for PWDs in Addis Ababa. The following quote illustrates this claim:

The coincidence happened to me on my trip to workplace. I was travelling alone to work. In the meantime, I went into pothole nearby my workplace. The pothole was to some extent deep and filled with dirty. I Came out of the pothole with the help of another commuter. It was risky accident and my leg was modestly hurt (Female, age 60, TOD visual impairment, POI Addis Hiwot, 2018).

This extract articulates the everyday barriers faced by PWDs on the walkways of Addis Ababa. The description further entails that the absence of accessible pathways austere remains life-threatening, endangering the well-being and safety of PWDs. The quote also indicates that the state bureaucracies continue to ignore and live up to mobility needs of PWDs.

A similar incident was also reported by another participant as follows:

On my trip for personal purpose, I experienced fall at the place named Piazza. I went into deep hole and my leg badly hurt. Even if the hole was empty, the depth and breadth of the hole was horrible and hazardous. It took me more weeks to get my leg well (Male, age 48, TOD visual impairment, POI office of Labor and Social Affairs of Aarada sub city, 2018).

The above accounts exemplify that PWDs may face repeated walkway challenges with varying degree of severity. Essentially, the story utters that PWDs remain in a difficulty in their travel to access shopping malls, recreational centers, and enjoy public services. The above two stories also suggest that potholes continue to be the main walkway challenges for PWDs in Addis Ababa, being source of their injury and further impairment.

The comments of participants on International Disability Day and in-depth interviewees indicated that the sidewalks in Addis Ababa are extremely offensive and inhospitable. While access needs of PWDs to walkways are distinct, the design and construction of the sidewalks of Addis Ababa remains obstacle for mobility needs of wheelchair users. One interviewee who uses wheelchair for mobility stated that:

There was an accident which I faced on my trip using wheelchair. The trip was from my residential to workplace. My wheelchair could not move on pathways since they were jumbled and broken apart. I was therefore compelled to move on the asphalt side to flee the broken pavements. Yet my wheelchair was abruptly dropped into pothole where I could not come out of the hole by myself. It was the commuters who assisted me to come out of the pothole.. .then; I went back and wasted the day. (Male, age 42, TOD physical impairment, POI national recreational center, 2018).

The above quotation voices that the walkway difficulties encountered by PWDs remain multiple and complicated. To be specific, the above quote states that wheelchair users could not safely move on the streets of Addis Ababa as a result of many obstacles. These walkway impediments do not only create mobility difficulty but they also hinder the full participation of PWDs in mainstream way of life.

Furthermore, participants said that the sidewalks in Addis Ababa are not only traveled by commuters but domesticated animals such as oxen and donkeys are also traveled on the pathways of Addis Ababa. The story recounted by one participant may corroborate the contention as follows:

Though I often use taxi to go and return from career, on one occasion, I faced serious heartbreak on my return home. As I reached my destination, I went out of the taxi and started walking home. I soon heard people's singly cry. They were loudly saying ox...ox. I did not realize what was going to happen. The ox soon lifted me up and turned me down. My leg was hurt. I survived with the help of almighty God! Thanks (Female, age 54, TOD visual impairment, POI NAWD, 2019).

The above account reveals the extent to which the sidewalks in Addis Ababa are more complicated and challenging for PWDs and how they become life-threatening. The story also

reveals that the state bureaucracies do not consider the walkway challenges of PWDs and lack curiosity to promote easy mobility. The negative impact of the poor walkway conditions of Addis Ababa on PWDs is not only disproportionate but it is also prejudiced.

Participants further voiced that highway crossings remain inaccessible to PWDs in Addis Ababa. The absence of acoustic messages at crossings, discontinuity of walkways, and sidewalk objects are rampant barriers to accessible crossings for PWDs. The way Zebra crossings are designed and marked are austere unfavorable that does not accommodate and fulfill crossing needs of urban inhabitants of PWDs. The case I and three of my companions met while crossing the main road may well verify the contention:

On one occasion, I and three of my mates encountered traffic accident when crossing the highway intersection at a particular place called Sidist Kilo. This site is known for being busy road where the intersections are multidirectional and lack verbal announcement that enable us to cross easily. The chance happened to us while going to one of the lunchrooms of the area. All of us were injured by the accident despite variance in the level of our injury. One of our friends met severe leg injury and remained in hospital for more than a year and half. I lost my front single tooth and the other friend got grave head injury. Our remaining colleague encountered minor injury. (TOD visual impairment).

The above experience shows how highway crossings are extremely life-threatening and endangering the well-being of PWDs. The story is not only terrible but it also represents the reluctance of state bureaucracies and the concerned stakeholders to live up to crossing needs of PWDs. It highlights that the highway crossings are poorly designed and constructed that ignores travel needs and well-being of PWDs.

The above quote further articulates that highway crossings remain dangerous, inaccessible and discriminatory against PWDs. To be specific, the absence of audio announcements and visual information at highway crossings are still major barriers that impede their safe and independent trip. The story also demonstrates that unfriendly crossings at busy highways are

one of the sources of traffic accident faced by PWDs in Addis Ababa.

Furthermore, in-depth interviewees and FGD participants reported that the sidewalks used by PWDs are obstructed by objects on a daily basis. They mentioned objects such as garbage bins and stuffs for sale are walkway barriers inhibiting the safe and independent mobility of PWDs. These sidewalks are also places where many public and private vehicles park. These are additional impediments that obstruct the free movement of PWDs.

4.3.2 Transport Accessibility: Vehicle Related Barriers

In Addis Ababa, transportation is an accessibility issue for PWDs (Tesema, 2017). Participants reported that city bus, minicabs, Sheger bus, public service bus, trains, and other unstated vehicles are the most commonly used means of transport in Addis Ababa. However, most of them are not equally accessible to all inhabitants of the city. Specifically, for many PWDs, they remain inaccessible and do not serve them on an equal basis with others. They further mentioned that the overall design and features of these vehicles are not assembled in the way they accommodate all people including PWDs.

Participants of this study suggested that public transport service in Addis Ababa is an area where PWDs face numerous barriers that affect their safe and independent mobility. They also added that their rights to get access to accessible public transport is violated. In essence, these barriers not only endanger their free movement but they also threaten the survival, livelihood, and dignity of PWDs.

FGD participants and in-depth interviewees articulated that PWDs are denied accessible means of transportation in Addis Ababa. They further voiced that while public transport is said to be speedy, many vehicles do not accommodate travel needs of PWDs. They are filled

with unfavorable and countless barriers that hinder their nonviolent trip. Moreover, the absence of user-friendly public transport service could have additional impact on the livelihood and personal well-being of PWDs.

While accessible public transportation is an expression of the well-being of urban people and enhancement of their social interaction, PWDs have little access to this service in Addis Ababa on an equal basis with others (Tesema, 2017). Many participants of this study also confirmed that public transport infrastructures lack accessibilities that uphold the nonviolent mobility of PWDs.

The comments of participants on International Disability Day and FGDs participants stated that the most reported barriers to access to public transportation include disrespectful treatment of drivers and their assistance, unfriendly interior layout of the vehicles and their steps, poor design and construction of bus stops, disorderly taxi waiting sidewalks, absence of verbal messages, lack of visual information, driving away before passengers with disabilities are seated, and stopping far from the platform.

In-depth interviewees also indicated that the mistreatment experienced by wheelchair users and the disrespect towards them is one of the often reported difficulties in public transport spheres. It ominously disregards the conveyance of wheelchair users in Addis Ababa. One participant commented:

As my impairment is physical, I relied on wheelchair for mobility. On one occasion, I sought to travel from my residential area to what is locally called stadium. As I was waiting for city bus at the waiting place, the bus came and took customers excluding me. The bus driver and his assistant told me that 'there was no extra space for your wheelchair and we would not help you' (Male, age 44, TOD physical impairment, POI Yemisrach center, 2019).

The above comment shows that PWDs face multiple challenges when they seek to travel by

vehicles. First and foremost, the mistreatment and disrespectful behaviors of the drivers and their assistants is discriminatory that disregards their travel needs. Secondly, the above quote articulates how the provision of public transportation system in Addis Ababa remains inequitable and inaccessible for PWDs.

The above quotation further suggests that the impolite treatment of drivers and their assistants has negative impact upon the psychological well-being of wheelchair users. The story also voices that some of the service providers in the area of public transportation remain reluctant to transport wheelchair users in the name of their wheelchair. They believe that it may occupy extra space that inhibits other travelers without disabilities.

FGDs and in-depth interviewees specified that the interior layout of most vehicles including their landing steps is where PWDs face barriers. The story recounted by one participant of FGDs may substantiate this contention as follows:

On one occasion, while I was travelling by the so called public service bus, I fell down. The trip was from local place called Saris to other corner of the city named Galan Condominium. The accident happened to me when I reached my destination. In the course of my landing, I fell down from the landing steps of the bus. My leg highly hurt and I soon went to nearby health care center to get medication (Female, age 34, TOD visual impairment, POI ENAB, 2019).

The above excerpt is a typical indication of the challenges faced by PWDs as a result of the improper and imprudent design of the steps of the city vehicles. More precisely, the story voices that despite some positive aspects of other buses such as Sheger, the design of the landing steps of public service bus remains incompatible for PWDs. Almost all steps on public service bus are poorly designed and imprudently built that put PWDs at risk of fall and further impairment.

Interviewees further reported that PWDs have less access to private vehicles. They felt that

their social life is mostly trapped by lack of and their level of access to private vehicles. Thus, public transportation remains the most preferred means of travel for PWDs in Addis Ababa. The public transport however lacks necessary facilities that make their travel nonviolent. Despite slight disagreement among interviewees over the use of vehicles for daily travel, PWDs start facing barriers once they leave home.

4.4 Discussion

This section discusses the key findings of this chapter and the implication of the findings on the human security of PWDs in Addis Ababa. It also interrogates how the findings of this study are related to the current literature discussed in chapter two and answered the research questions outlined in the introduction chapter. The section also analyses why the findings are important for disability specific policy implications.

4.4.1 Violence Stemming from Attitudinal Barriers

Psychological violence is the most common form of abuse that stems from attitudinal barriers. Ozemela, Ortiz, and Urban (2019) state that psychological violence manifests itself in the form of mistaken beliefs toward disability, verbal assaults, threats, and taunting. These attitudes make PWDs to lose their self-confidence and esteem. Psychological violence is not only limited to internalization of societal attitudes but it also accompanies other forms of abuses such as deprivation and neglect (Brown, 2004).

Within the current study, attitudinal barriers are violent when the society relate a person's disability to God's punishment, ancestral transgression, mysterious spirits, and personal misbehaviors. Similar findings were reported by Brown (2004) who stated that Social preference for children who are born free of physical defects is strong in many cultures. This

belief can result in the discrimination against those born with impairments and sometimes killing of them. This is an expression of cultural violence leading to structural violence imbedded within social structures (Galtung, 1990).

Additional support for this explanation comes from Ozemela, Ortiz, and Urban (2019) who demonstrate that structures and institutions continue to play the role that reinforce people's preference for the birth of nondisabled children. This is a cultural violence in which children born with impairments are seen as a sign of bad omen and deviation from mainstream society. PWDs are therefore considered a burden to the mainstream society.

Similarly, Neille (2013) found that psychological violence represents the perceptions and responses of both the family members and the larger community to disability. While acceptance of PWDs by the general public increases their self-esteem, self-awareness, and sense of security, their rejection creates anxiety, hostility, and depression (Vilchinsky, Findler, & Werner, 2010).

Literature readings reveal that the daily obstacles that PWDs face are generated by societal attitudes. For example, Kyei et al (2014 and Mills (2018) state that supernatural factors control the way the society perceive disability and treat PWDs. In this study, most of the perceived beliefs emerged around the concept of disability encompasses transgression committed in previous life, witches, Buda (evil eye), and belief in supernatural power. Despite the uncertainties of these perceptions, they still govern societal views regarding disability in the study area.

The findings from this study indicate that negative perceptions toward disability and potentials of PWDs are the problem they face on a daily basis. The response of the general public to the onset of disability is extremely complex and blurry. It differs from perceiving as

taboo/bad luck to viewing it as punishment from God. These findings are in line with previous results Jain (2011) and Briant (2015) who demonstrate that the public perceptions toward the onset of disability are complex and mysterious, causing psychological abuses.

According to data presented in this chapter under 4.2, the perception of the general public toward disability and the way PWDs perceive their own impairment is essentially erroneous and destructive. This misperception may incur psychological/emotional violence endangering the well-being, survival, and dignity of PWDs. This is supported by Neille and Penn (2017) who suggest that PWDs face multiple forms of violence in their everyday lives, encompassing structural violence, deprivation, and physical, emotional, and sexual abuse.

Livneh (2012) reports that negative societal attitudes reinforce violence against PWDs that range from psychological abuse to social disparity. In this current study, psychological violence was particularly evident in many of the accounts of participants. For example, the norm that recounts source of impairment to parental wrongdoing and supernatural power makes PWDs feel inferior and transgressed. Furthermore, these experiences extend beyond psychological violence, affecting their well-being, empowerment, and self-esteem (Mendes, Srighanthan, & Mendes, 2009).

The way the public perceive disability determines the position PWDs have in the mainstream community in which they reside (Livneh, 2012; Mendes, Srighanthan, & Mendes, 2009). Negative societal attitudes are invisible barriers that create the sense of dependency and powerlessness among PWDs, exposing them to psychological violence (Chan, Livneh, Pruett, Wang, and Zheng, 2009). Many of the reports of participants of this study suggest that the labeling of PWDs and their family as offender and coldshouldered is an example of psychological violence.

The findings of this study highlight that negative responses of the family and the larger community members to disability are source of marginalization and oppression for PWDs. These negative attitudes dehumanize and devalue their personal autonomy and self-esteem, leading them to dependency on others and disadvantaged. This concurs well with the report of Gerschick (2000) who described disability not only in terms of physical and mental anomalous but also understood it in terms of social and stigmatized conditions.

Negative attitudes held by the general public towards disability has much better impact on the culturally appropriate human behaviors such as marriage relationship and social contact. Although having a relationship and forming a family is key ambitions for both disabled and non-disabled individuals in their lives, many PWDs experience violence and abuse when they pursue for relationship and family formation (Neille, 2013; Neille & Penn, 2017).

Many participants' accounts of this study suggested that the culturally acceptable marital union is fraught with psychological violence, thus preventing PWDs from marital union. Some of the most common abusive expressions reported by a male participant, (age 37, TOD visual impairment, POI ENAB, year 2019), including: "Why do you marry a visually impaired person? Who makes living? If I were you, I would not marry him...don't you have other options?" "These languages are typical representations of psychological abuses, affecting the feelings of many PWDs to practice culturally accepted community roles. This finding has literature support in which PWDs are mentioned as those who would not become prospective husbands and wives (Cudjoe & Alhassan, 2017).

Equally, the way PWDs perceive their own disability defines the position they have in the community and the way they receive societal treatment and acceptance. This is explained by Chan, Livneh, Pruett, Wang, and Zheng (2009) who state that the response of PWDs to their disability in the form of anxiety, denial, dependency, and depression makes them more vulnerable to psychological violence. This finding

concur with the current study in which participants demonstrated that they preferred to make more interaction with those who have disability than persons without disabilities. This preference can be associated with the societal negative assumptions about disability and potentials of PWDs.

4.4.2 Physical/Architectural Violence

This section examines how structural violence contributes to physical/architectural violence towards PWDs. Structural violence and physical abuses are not mutually exclusive. They relate to one another and manifest in the lives and life choices of PWDs. According to Galtung (1969), structural violence represents the implanted social injustice which is manifested when one access to the determinants of life such as education, employment, and health care services. Within the current study, structural violence is evident when PWDs are denied access to safe and independent mobility.

Physical and transport accessibility is more than just moving around; it also includes social and economic conditions, implying access to services (Bascom, 2017; Stjernborg, 2019). The exclusion of PWDs from accessing a barrier free sidewalk environment and transportation service is tantamount to violence to their well-being and empowerment. Galtung (1969) states that physical violence pertains to different dimensions including the constraints on human movements and the failure to safely and independently access to transport service on an equal basis with others. Brown (2004) and Ozemela, Ortiz, and Urban (2019) also note that physical violence is almost synonym to an act of exclusion from public spaces on account of non-accessible public transport services.

The findings of this study showed that physical violence is through which structural violence is evident at different places and circumstances including on the streets, on public transport, at home, school, and work. While this type of violence affects the quality life of everyone, PWDs remain vulnerable on a daily basis due to the nature and degree of their disability. This

violence not only affects their quality of life but it also harms their ability to develop full potential (Brown, 2004; Ozemela, Ortiz, and Urban, 2019).

Within the current study, incidences of physical violence were evident when PWDs encountered barriers to gain access to walkways and public transportation service provisions. This is supported by Brown (2004) and Ozemela, Ortiz, and Urban (2019) who found that PWDs are at greater risk for being physically and psychologically abused, socially and economically excluded, and legally and publically unnoticed.

As discussed in the literature review chapter, article 9 of the UN CRPD and article 36 of the Ethiopian Building Proclamation No. 624/2009 require the concerned stakeholders to enable built environment accessible to PWDs and to enjoy independent mobility and services on an equal basis with others.

Despite the provisions of international and national norms, the findings of this study suggest that the built environment of Addis Ababa is still congested by a number of infrastructural barriers of varying degrees and types. This implies that the concerned stakeholders and state bureaucracies remain indifferent to fulfill their obligation endorsed under the international and national norms. Put it another way, violent acts such as falling from vehicles, entering into potholes, colliding with poles, and lacking accessible crossings are manifestations of the roles of the larger structural systems that impede physical and transport accessibility for PWDs. A similar point is made by Galtung (1969) who states that violence is not only physical harm but includes social structures.

The results of this chapter further indicate that the nature of the walking environment of Addis Ababa has not received much attention among concerned stakeholders and the state bureaucracies. Accordingly, the source of barriers in accessing the physical environment and

public transport service of the city is largely the result of social injustice entrenched in the social, economic, and political structures. Put it another way, when PWDs suffer from preventable walkway barriers, when they suffer from poor transport service provisions, and when PWDs are unable to cross traffic intersections due to lack of sound or visual marks, structural violence is evident.

Although physical violence pertains largely to the bodily punishment in the form of loss of life of individuals or group of individuals, it must be acknowledged that this kind of bodily punishment is extreme form of biological violence (Galtung, 1969). In this study, physical violence emerged as extremely disabling barriers to mobility of PWDs, affecting their safe and independent travel on a daily basis. The accounts of participants highlighted that physical barriers remain the major cause for social, economic, and political exclusion of PWDs. This finding fits with the previous reports, Danso, Atuahene, and Agyekum (2019), and Basha (2018) who reported that public transport and sidewalk restraints remain obstacles for PWDs, exposing them to social and economic disadvantaged.

While incidences such as dropping into sidewalk potholes, being thrown down by domestic animals, collapsing on the footways, colliding with poles and sidewalk trees, plunging of wheelchair into potholes, and inability to drive wheelchair on the sidewalks are walkway intimidations commonly happened to PWDs, falling from vehicle steps, traffic accidents, lack of space for wheelchair users, service providers' spiteful treatment, absence of vocal signs, and disability unfriendly vehicles are forms of violence ensuing from poor transport service provisions. These incidences are not only violent but they are also structural problems because most of the incidences are avoidable if the necessary consideration is given during the design and building phases.

This study underlines that safe and conducive walking environment and barrier free travel by public transport is prerequisite for the well-being and empowerment of PWDs. More precisely, nonviolent walkway travel and welcoming public transport service enable them to enjoy equal opportunities, fully participate in all aspects of life, and live independently (WHO, 2011; Stjernborg, 2019).

Despite the need for accessible walking environment and welcoming public transportation, the findings from this study highlights that the walkways are not designed and built to equally serve all people including PWDs. This was evident by the accounts of participants and the results of other studies, including misrak (2006), Tesema (2017) who demonstrated that they are designed and built for the limited sections of the society, particularly for those without disabilities. This implies that the right to have equal access to walking environment and transport on an equal basis with others is little respected, leading to physical exclusion and discrimination against PWDs.

The main findings of this chapter include the implication of attitudinal barriers as a source of psychological violence, leading to the rejection and marginalization of PWDs and also having detrimental impact upon their overall lives and life choices. The stakeholders and state bureaucrats are therefore expected to do much on this issue.

One more significant finding of this chapter is the commonness of physical violence, ensuing from abusive physical environment and inaccessible public transportation systems. This implies that PWDs are under a lot of burdens in their everyday lives. This makes them deviate from full social norms and economic activities which could affect their quality of life and increase their social isolation from the mainstream community.

4.5 Chapter Summary

This chapter has presented two important concerns of PWDs who live/work in Addis Ababa. Primarily, the question of attitudinal barriers has been discussed, tracing their origin and focusing on their impacts upon the well-being and empowerment of PWDs. The risks of misguided beliefs and societal misperceptions about disability have been analyzed.

Secondly, the chapter has presented the overview of barriers to physical accessibility that continues to impact everyday lives and life choices of PWDs. While these are by no means the only barriers faced by PWDs, they are found to be the most common forms of barriers, affecting their survival, livelihood, and dignity.

The findings of this chapter has also indicated that the stakeholders including state bureaucrats and disability activists remain reluctant to voice about everyday realities and accessibility challenges of PWDs. Despite the adoption of the international and local norms that require stakeholders to avoid obstacles and meet their access needs, there is little endeavor to protect PWDs from physical abuse and promote their empowerment to exercise their rights.

Chapter Five

Accessibility Issues in Education and Employment

5.1 Introduction

The biological/physical fact of living with a certain disability exposes individuals to experience violence and abuse. These forms of violence are not only limited to traditional acts of insulting, beating, and verbal abuse rather there is entrenched forms of structural violence (Brown, 2004; Daruwalla et al, 2013). Within the current study, barriers to access to education and employment are the most common forms of structural violence experienced by PWDs who live/work in Addis Ababa.

This chapter considers barriers that inhibit access of PWDs to fundamental public services as forms of structural violence. The chapter gives emphasis to barriers to access to education and employment. The analysis of this chapter is presented in five sections. Following this introductory section, the second section gives a brief overview of barriers that PWDs face in pursuing their education. In the third section, barriers that inhibit the employment of PWDs are presented. The fourth section highlights and discusses the emerging major findings. In the final section, some conclusions are drawn from the data presented in this chapter.

5.2 Accessibility issues in Education

Pertaining to education, the research participants noted a number of barriers that PWDs face at all levels of their school life. These barriers make their access to education difficult. Among others, physical, curricular, and information are the most evident. The level of prevalence and the impact of these barriers vary depending on the type and severity of disability.

5.2.1 Physical Accessibility

The comments of participants on International Disability Day and in-depth interviewees indicated that PWDs encounter physical barriers within and outside the school environment. These barriers are the foremost intimidating factors that downgrade the daily living of urban inhabitants of PWDs. Participants further voiced that physical obstacles on the way to school and the place where schools are located are visible barriers that PWDs face outside the school environment.

FGDs Participants and interviewees agreed that many schools in Addis Ababa are located in areas where PWDs encounter serious obstacles and make their independent mobility nearly impossible. For example, some schools are instituted away from main road, others are situated within villages, and some others are placed where paved alleyways are lacking and school entrances are punctuated by waterways and deep holes. One interviewee stated that:

The school gate in which I attended my primary education was extremely complicated. It was filled with piles of stones and the gateway was broken apart... Unless supported, I was not able to get into the school. It was the school guard who regularly accompanied me... the school principals who were responsible for making arrangements remained silent. (Male, age 30, TOD physical impairment, POI Yemisrach center, 2019).

Another participant commented:

My primary school was found within village. The pathway between the school and the village was always flooded. The pathway was narrow and there was open waterway on the village side. I would not move by myself using my white cane (Female, age 32, TOD visual impairment, POI ENAB, 2019).

The above two accounts show that the preparedness of the public offices/schools to make the school environment accessible for PWDs is really poor. This reluctance significantly limits their access to education and constrains their full participation in public services. More precisely, the quotations articulate how the nature of student diversity and their specific needs

received less attention from state bureaucrats and concerned stakeholders. This disinclination increases inequality in education among citizens.

In addition to the challenges that come from outside school environment, interviewees and FGDs participants voiced that barriers within the school environment are widespread and intolerable. FGDs participants mentioned the following obstacles “poorly designed and constructed school buildings, absence of ramps, elevators, lifts, user-friendly toilets, and disorderly and unpaved school pathways” (FGDs with men participants, POI Yemisrach center, 2019).

Other participants of FGDs mentioned further barriers including “Stairways, floor arrangements, corridors and classroom entries” (FGDs with Mixed participants, POI CDC, year 2019). These citations demonstrate that the school environment of Addis Ababa are littered with barriers that ensue from imprudently designed and built classrooms and offices, making access to education difficult and unbearable. The above quotations further show that accessibility in the school environment remains to be persistent, discriminatory and exclusionary for PWDs.

The comments of participants on International Disability Day and interviewees revealed that school buildings remain to be discouraging and painful for PWDs. They further mentioned that making school environment accessible to PWDs is overlooked and unnoticed by concerned stakeholders. One participant commented, “The school buildings where I attended my primary education were not designed and constructed in the way to host persons with physical disabilities. The classrooms were not ground floors and ramps and elevators were not arranged” (Female, age 49, TOD physical impairment, POI FEAPD, 2018).

Another interviewee stated that “The school entrances were not paved and holes were not covered. I was often supported by classmates to go in and out of the school building. There were also times when school principals refused to enroll me in the name of the unfriendliness of the school built environment” (Male, age 29, TOD visual impairment, POI ENAB, 2019).

The above two experiences highlight that school buildings are imprudently designed and erected disregarding the access needs of PWDs. While these needs are not the same, most of the school buildings do not fulfill accessible requirements needed by PWDs. Consequently, there are times when PWDs are denied to get enrolled and fully participate in education on an equal basis with others.

The two accounts further state that the state bureaucrats and the concerned stakeholders are not prepared to consider the varying access needs of PWDs in the process of school designing and building. This reluctance is not only discouraging to come to school for PWDs, but it is also an act of violating their rights to education and get access to building.

5.2.2 Inclusive Curriculum

The obstructions which stem from imprudent curriculum design and preparation are typical problems facing PWDs. The main curricular barriers stated by FGDs participants and interviewees include absence of learning resources, wheelchairs, crutches, white cane, exam related challenges, limited field of studies.

5.2.2.1 Learning Resources

FGDs participants stated that absence of learning resources are the most evident curricular barriers that impede PWDs from making the best out of their education/schooling experience.

Even the available learning resources are overpriced and unavailable on the market. The following quote illustrate this claim:

I was under lots of pressures during my primary and high school life. I had no braille texts and writing materials. Even if the school provided me with ordinary texts like any other students, none of them were braille written text. Despite lacking learning resources, I was assessed in the same way others were assessed. (Male, age 40, TOD visual impairment, POI ENAB, 2019).

Participants of FGDs and in-depth interviewees reported that the scarcity of learning materials for PWDs is not only lacking in primary and high schools but they are also deficient in higher education institutions. What I experienced when I was undergraduate student could explain this contention:

Honestly speaking, there was no a single Braille written learning material for visually impaired persons where I attended my undergraduate study. Although I was obligated to depend on classmates to read class notes and references, they do not always feel relaxed to support me, particularly when they were overloaded (TOD visual impairment).

The above two extracts demonstrate that PWDs are not provided learning resources on an equal basis with others at all levels of education. This is due to the reluctance of the concerned stakeholders to make learning materials available in accessible format despite their scarcity on the market. As a result, PWDs are obliged to rely on fellow students to get class notes and other resources to read.

The above two quotes further highlight that despite the fact that the state bureaucrats and other concerned stakeholders are responsible for the preparation and distribution of learning resources on an equal basis with others, there are little attempts to make them available for PWDs to increase their full participation.

5.2.2.2 Wheelchair/Crutches, and White Cane

For those who use wheelchair, participants reported that the problem of materials that support their daily movement and travel to the school and within the school environment is the pronounced burden. The extract below may well show this claim:

I need a wheelchair to move around. But wheelchairs and crutches are not easily obtainable because they are expensive as well as rarely available on the market...Many of us could not afford to buy wheelchair's and crutches(Female, age 44, TOD physical impairment, POI FEAPD, 2019).

Another interviewee, when asked about what barriers limit his participation in education said:

I was not sent to school on time. I thought that at that time, my parents had no enough money to purchase wheelchair for me. This was the problem of many parents that discouraged them not to send wheelchair user of their family member to school (Male, age 50, TOD physical impairment, POI FEAPD, 2019).

The above two extracts illustrate how lack of physical assistive devices, for example, wheelchair and crutches impede the mobility of PWDs and become a barrier to get access to classroom, laboratory center, library, cafeteria, and toilet. The above accounts further demonstrate that resources and physical devices needed by PWDs are diverse based on the type of their impairment and severity. This situation makes the impediments that PWDs face on a daily basis remain disproportionate and complex.

For visually impaired persons, White Cane is a walking tool that supports their mobility. While it assists them to move around to some extent, White Cane is not cure-all for their safe and independent mobility. Almost all forms of White Canes which are currently used by visually impaired persons are traditional with no voice signals. Interviewees reported that White Cane is easily breakable by the legs of commuters, by stationed and moving vehicles, suddenly entering into potholes, and by roving animals.

It is persuasive to support this claim by citing my own experience, “On one occasion, while I was walking alone from what is commonly called Arat Kilo to Ethiopian National Association for the Blind (ENAB), my White Cane was broken by a vehicle on move and its tip at the bottom was detached away. Then, I was obliged to walk without walking stick until I reached my destination” (TOD visual impairment).

To complement the aforementioned experience with the story of a participant of this study, “when I was a high school student, one day, my White Cane was suddenly bent by the leg of traveler on my way. It was bitterly warped and I had no an alternative walking stick. For that day, I was obligated to depend on someone to get to school.” (Male, age 45, TOD visual impairment, POI private office, 2018).

The above two stories show how the walking environment of Addis Ababa remains complex and littered with many-sided accessibility challenges, ranging from poor designing and building to using the sidewalks for other purposes such as parking and dealings. In this complex walking environment, the daily movement of visually impaired persons using White Cane is not only difficult but it is also intimidating and lethal.

5.2.2.3 Exam Related Challenges

The remarks of participants on International Disability Day and in-depth interviewees felt that exam related challenges are curricular barriers that visually impaired persons in particular face in their school life. While the barriers are ubiquitous at all levels of education, the way they are seated for national exams remain problematic. When asked about this issue, an interviewee said:

When I took entrance exam, I met grave trouble. As the exam started, I was told that no one was assigned to read the exam for me. My presence was completely

unnoticed... Then, I soon informed my situation to the exam coordinator and he told me that he had no information about my presence...Initially; he said it was not my duty and it was up to the school...manpower was not available...After my complaint much, the school vice and the chief coordinator talked over and assigned me a reader. (Male, age 30, TOD visual impairment, POI ENAB, year 2019).

There is also the problem of the quality of assigned readers. Some readers even contribute to lower grades by the students with disabilities, as the following quote illustrates, “When I took University entrance exam, I met big problem as far as reader is concerned. Particularly, one who was assigned to read history exam was very sluggish and I could not complete on time. I was told that the time was over while I was on question number sixty out of 90 ” (Female, age 24, TOD visual impairment, POI ENAb, year 2019).

My personal experience could complement the above views too.

When I took Ethiopian school leaving certificate examination (ESLCE), I had the same experience. The person assigned to read English exam was an administrative staff that had no experience and detached from education for a long time...I remember I could not finish the first day morning exams on time since the reader was inactive (TOD visual impairment year 2019).

The above accounts demonstrate that the challenges that visually impaired persons face at the time of entry as well as class based exams are manifold and complex. The stories show that the problems are more than the inactiveness of the assigned readers for visually impaired persons. The stories further exemplify that the concerned stakeholders are extremely reluctant and proper strategies and policies are absent in the curriculum with reference to the way to administer exams for those who need special treatment and provisions.

5.2.2.4 Restricted Field of Studies

FGDs participants and interviewees indicated that some of those who succeeded to join higher education institutions by overcoming the barriers, the field of studies that they can join are very limited and only certain fields of studies are allowed. To be specific, visually impaired

persons have a limited number of streams to join, mostly in the social sciences and humanities. For example, one interviewee said:

In the university where I studied undergraduate class, the choices of field of studies were few. Even if the social fields were said disability friendly, accounting, economics, and other fields were not allowed to join...I was not given the field I wanted to study. I was interested in Information Communication Technology...yet I was forbidden to study it. (Female, age 25, TOD visual impairment, POI AAU, 2019).

The above quotation enunciates that visually impaired persons are invisible in all-inclusive higher educational curriculum. It raises the question that how far the education system integrates them and takes their needs of education into account. The experience further pronounces that visually impaired persons have few options and face a variety of discriminatory behaviors to enter their interested field of studies.

5.2.3 Information Accessibility

Participants of FGds and interviewees indicated that PWDs suffer from lack of accessible information. While means of access to information for PWDs varies depending on the type and severity of their impairments, lack of accessible information is major impediments that inhibit them from accessing education.

Participants further said that although inaccessibility of information remains the problem of all types of disabilities, visually impaired persons and hearing impaired persons are the most impacted sections of disability population. While lack of sign language interpreter/assistive hearing aids is major barrier for persons with hearing disabilities, absence of audio/verbal information is pervasive barrier for those with visual disabilities that hamper them from accessing education.

The comments of participants on International Disability Day and participants of in-depth interview reported that persons with hearing disabilities do not fully participate in regular

lessons and lectures as a result of lack of sign language interpreter. The absence of sign language interpreter at school environment remains major impediment for persons with hearing disabilities, making them excluded from participating in education. The extract below shows this claim:

In public school where I attended my primary classes, there was no assigned sign language interpreter for students with hearing disabilities. Unless it was written on the chalkboard, I could not follow audio lessons. Most teachers preferred more talk than visual information. The school briefings and announcements were also in most cases oral and so I was distant from accessing school information. (Male, age 25, TOD hearing impairment, POI AAU, year 2019).

Other participants argued that apart from lack of access to information, PWDs experience intimidating tongues in the class both from teachers and fellow students, as one interviewee put it:

I was the only student with hearing impairment in our class. One day, the teacher asked us to answer question at the time of class lesson. Other classmates failed to give right answer...my answer was correct. Yet, the teacher voiced by saying look! This donokoro (deaf) woman answered correctly while the rest of you were wrong. (Female, age34, TOD hearing impairment, POI NAWD, 2019).

The above quotations exemplify how PWDs are abused by negative responses of some teachers towards disability in the class and the absence of sign language interpreter. This prejudicial treatment not only limits their full participation in education but it is also the defilement of their dignity and rights. The above two citations further articulate that the frequent abuse experienced by PWDs at school disheartens their motivation to get enrolled and access education.

Interviewees also felt that persons with hearing disabilities are also suffered from absence of health related information, as one female interviewee recounted her experience:

On one occasion, I went to one of the health care centers of Addis Ababa for checkup. I visited the health center to know my HIV/AIDS status. Yet, there was no sign language interpreter in the health center. The nurse on job knows nothing about sign

language and we could not communicate. I went back without getting health service I needed. (Female, age 30, TOD hearing impairment, POI NAWD, year 2019).

This citation demonstrates how persons with hearing disabilities are detached from information in public services including health care provisions due to the absence of sign language interpreter. The story further highlights how health bureaucrats and health specialists overlooked accessible health information needs of persons with hearing disabilities. Their inability to access to health information may also expose them to other forms of health problems.

Participants of FGDs and interviewees highlighted that notices, class shifts, and other school information are mostly notified in written format that disregards accessible information needs of visually impaired persons. For example, one participant commented:

On one occasion, I felt my impairment when I missed the classroom where we were taking the course. As usual, I went to the former class since I had not any information about class shift. My classmates left for the new classroom without updating me...then I missed that class. (Male, age 27, TOD visual impairment, POI ENAB, year 2019).

This account exemplifies that despite the fact that having access to information is defining factor in empowering every person's way of life, visually impaired persons are not still made to have access to information on an equal basis with others. More precisely, the citation further articulates how lack of accessible information for visually impaired persons is discriminatory and has great impact upon their lives and life choices.

5.3 Employment: Accessibility issues

As discussed by Zenabie (2017), despite some improvements of legislative and policy practices, PWDs are still under lots of burdens when they pursue for employment and remain underrepresented in the labor market. With this understanding in mind, this section analyses accessibility challenges in employment for urban inhabitants of PWDs.

It makes sense to start this section by bringing up my experience here. I believe that it provides general idea about the overall employment situation of PWDs in the Ethiopian labor market.

Following completion of my undergraduate studies, I applied to Jimma College of Teachers' Education. The vacancy was announced to employ two history tutors and we were only two applicants. Despite my visual impairment, I had better accomplishment of grade scores and undergraduate essay than the other applicant. However, the employer of the college rejected to hire me in the name of physical inconveniences of the college environment (TOD visual impairment).

While PWDs are found in very limited employment sectors and career, for example, teachers, lawyers, and social workers, these sectors are even characterized by poor physical working conditions, employer's negative attitudes, and institutional level of difficulties (Tirussew et al, 2013; Zinabie, 2017). In extreme cases, other available sectors are not totally receptive to many PWDs.

Within the current study, the most observable barriers that many PWDs face in the labor market are noted in the form of pre-hiring processes and after they are being hired at their workplace. Among others, unfriendly vacancy announcements, misperceptions of employers and infrastructural problems are the most disabling barriers, hindering PWDs from accessing employment.

5.3.1 Vacancy Accessibility

The inability to access vacancy announcement is critical obstruction for PWDs when they pursue employment. While access to vacancy announcement is prerequisite to get employed, arrangements are little to make vacancies accessible to PWDs (Tirussew et al, 2013; Frian et al, 2019). This denial not only reduces the full participation of PWDs in the labor market but it also affects them in all walks of their lives. Even though vacancy announcement varies from one type of disability to another, almost all of them face difficulties in accessing vacancy announcements.

As mentioned by several participants, written vacancy announcements/noticeboards are not accessible to visually impaired persons. This was stated by one participant as follows:

As soon as I graduated, I started looking for vacancy. Yet, nearly all vacancies were out on paper and notice board...I could not access them by myself. I was obligated to assign a classmate to inform me when vacancies were out. Despite his willingness, my classmate was employed ahead of me and he did not share me information. I remained without being employed for a long time. (Male, age 40, TOD visual impairment, POI ENAB, 2019).

Another interviewee, when asked about the inconvenience of vacancy announcement, said:

What really disheartens me is that visually impaired persons cannot access to vacancy information out on the weekly journal (Addis Zemen). Vacancy announcements on this weekly newspaper remain exclusively inaccessible for visually impaired persons since it is not available in braille. Unless helped by someone, the possibility of qualified visually impaired individuals to be hired is most unlikely. (Female, age 33, TOD visual impairment, POI ENAB, 2019).

The above two extracts show how visually impaired persons are abused by biased and unreceptive vacancy announcements. This negligence not only impedes their chances of getting employed and fully participated in the labor market but it also obliges them to be dependent on non-disabled individuals to get access to vacancies. The two quotations also articulate that not to make vacancy announcements accessible for PWDs is an act of defilement of their human rights and sign of disrespectful towards their dignity and qualification.

Participants of FGDs and interviewees felt that the biggest problem for many PWDs after they complete their study is how to access to vacancy announcements. The way to access to vacancy announcements is little and insensitive that makes them feel insecure and discontented. The comment of a wheelchair user below shows this claim:

My challenges are numerous including accessing the areas where noticeboards/ announcements are out, the distance/place between my residential and where noticeboards/announcements are posted, walkway difficulties and messes, the way the

display board is arranged and erected. (Female, age 49, TOD physical impairment, POI EFPD, year 2019).

Another participant commented:

Noticeboards are inaccessible. Unless you can stand, you would not get read the vacancy. Unexpectedly, some vacancies are disappointing for they call for healthy and full-sized applicants. (Male, age 30, TOD physical impairment, POI Yemisrach center, 2019).

These two comments demonstrate how PWDs are discouraged by the complications of vacancy announcements that they face when they look for employment. The two quotes also state that most of the vacancy announcements are terrible for wheelchair users because they are full of manmade and natural impediments. The quotations further articulate that the concerned stakeholders and state bureaucrats remain reluctant to make vacancy announcements accessible for all PWDs.

Furthermore, interviewees and FGDs participants felt that acoustic notices do not make persons with hearing disabilities feel comfortable and the absence of sign language interpreter at the time of interview also makes them feel mistreated and disheartened. Talking about this issue an interviewee said:

Employers do not make available sign language interpreter for applicants with hearing disabilities when they are on interview. Some vacancies are announced through only acoustic means and become difficult to access them. Employers do not also consider employees with hearing disabilities and make sign language interpreter ready at conferences and trainings. Assistive devices such as hearing aids are also lacking in most workplaces (Male, age 36, TOD hearing impairment, POI ECDD, 2019).

By and large, the above quote exemplifies that persons with hearing disabilities remain invisible at the time of vacancy announcements and throughout hiring process. It evidently indicates that vacancy announcements are in some cases unfavorable for persons with hearing disabilities and employers remain reluctant to make adjustments for them to compete for the job position on an equal basis with others.

5.3.2 Perceptions of Employers towards Employees with Disabilities

Employers' perception towards employment potentials and qualification of PWDs remain the most frequently mentioned reason for not being employed. In this regard, Shier, Graham, and Jonesc (2009) state that throughout the hiring process, PWDs continue to face marginalization and exclusion. Despite the vital implication of gainful employment for better and quality life, perceptions of employers towards employment potentials of PWDs is still rigid and permanent.

Participants agreed that employers are disinclined to engage competent PWDs in the labor market by creating offensive explanations. For example, one participant commented:

Without considering your competence, employers jump to conclusions by saying 'the job is inconvenient for you, the office has upstairs, go to other office, and the job has fieldwork and so on (Male, age 42, TOD physical impairment, POI Beherawi Mezinagna (National recreational center), 2018).

Another interviewee also stated:

Employers do not have motivation to hire us because of our disability. They always prefer to say it is a difficult job for you, the office is in the fourth floor, and the environment is tough for daily movement. (Female, age 31, TOD physical impairment, POI ECDD, 2019).

The above quotes show how employers discriminate against PWDs using courteous tongues which cannot make bread for them. The quotations further articulate that employers not only lack interest but they are also unaware of the competence and potentials of PWDs.

When participants asked about their experience of job application and hiring process, they said that employers do not feel comfortable when persons with white cane and wheelchair users enter the room where the interview is to be made. One participant recalled his experience as follows:

In many offices where I applied, employers were hesitant to receive my résumé and get employed me by looking at my physical condition. In case I was shortlisted for an interview, the interviewer did not feel relaxed and instead of directing towards the interview, employers wanted to focus more on my disability than my competence. Some tongues used by interviewers were also offensive and discouraging (Male, age 50, TOD physical impairment, POI, FEAPD, 2019).

Another annotation of a participant may complement to the above citation as follows:

I applied to one of the FM radios in Addis Ababa. The position was reporter. I was called for an interview and entered the room where the interview was to be made. Before starting the interview, I was repeatedly asked how I could work as a reporter. They tried to influence me that the job was not comfortable for me. In many cases, employers did not see your capability rather they focus on your physical defects. (Male, age 42, TOD physical impairment, POI Beherawi Mezinagna (National recreational center), year 2019).

Speaking of my personal experience, it complements with the view mentioned above. “Before I get employed as a teaching staff of higher education, I applied to public office. While I was eligible to the job position, the office where I applied was not prepared to hire me. The employers asked me how I could execute the task if I were given the opportunity. I tried to convince them by directing to focus more on my capability than my visual impairment. However, the interviewers were not ready to listen to my concerns” (TOD visual impairment)

The above excerpts demonstrate that employers systematically abuse job applicants with disabilities at the time of interview and they are predetermined by negative attitudes towards the employment potentials of PWDs. The above citations also articulate how employers violate the rights of PWDs to get employed on an equal basis with others. Despite the presence of laws to accommodate them in the Ethiopian labor market (Proclamation No. 568/2008), employers remain still little interested to positively engage those qualified individuals with disabilities in the workforce.

Participants further reported that employers did not have positive feeling about the presence of more employees with disabilities in one public office. If the workplace has the already

employed individuals with disabilities, the employers do not seem ready to add other applicants with disabilities to their office. They also lack willingness to receive the already employed individuals with disabilities in the form of transference from one sub city to another. The experience of one participant may corroborate this claim as follows:

During the redeployment of staffs across the subsidies, I picked Cherkos sub city. Yet, the sub city manager refused to accept me because of the presence of other staff with a physical disability. The manager perceived employees with disabilities not as workforce but as a burden to the office. (Female, age 34, TOD visual impairment, POI Office of Ministry of Women and Children Affairs, 2019).

Another interviewee added his experience to the above comment as follows:

In the ministerial office where I am currently working, there was one occasion when a person with physical disability was denied to get employed as a result of my presence. Employers did not want to have more persons with disabilities in one workplace because they assumed us as problem makers not as productive laborers. (Male, age 32, TOD physical impairment, POI Ministry of Labor and Social Affairs, 2019).

The above two extracts highlight how workplace inclusion of PWDs received little concern as a result of employer's negative attitudes towards their employability and potentials. The two quotes also demonstrate that employer's rejection of the employment of qualified PWDs is not only an indication of misperception but it also remains a structured problem, contradicting employment rights of PWDs and their human rights.

Furthermore, interviewees argued that employers do not allow staffs who acquired disability to remain on their job. The story of a participant may verify this contention as follows:

I was a health worker before I lost my sight. I never thought of being blind and had no idea about disability until then. While I was on medication, I was told by my employer (Ministry of Health) to apply for retirement. Nonetheless, I was not at the age of giving up my work. Apart from being retired, I was able to continue in the same institution by changing my job position. Yet, my employer was not ready to give me such an opportunity and stopped paying me salary. Then, I was not able to continue in my career after I lost my sight. (Female, age 60, TOD visual impairment, POI Addis Hiwot, 2019).

The above account exemplifies that employees who acquired disability on job are at risk of losing their career as a result of employer's ignorance and misperception towards the incidence of disability. This mistreatment is not simply a form of personal negligence but the extract indicates how social inequities are imbedded amongst the mainstream society and in this way the lives and life choices of PWDs are threatened by the embedded social and institutional structures, leading them to impoverishment and marginalization.

5.3.3 Architectural Accessibility

Architectural obstacles are the most common hindrances experienced by PWDs that prevent them from enjoying social services such as employment opportunities on an equal basis with others (Agarwal & Steele, 2016). When workplace buildings and pathways are inaccessible to PWDs, they are at risk of social exclusion and unable to participate and contribute to society (Danso, Atuahene, & Agyekum, 2019).

Within the current study, infrastructures are the most disabling barriers to access employment opportunities. This was evident in many accounts of participants as one interviewee asserted:

In pursuit for job, I applied to office of social and labor affairs of City Administration of Addis Ababa. The job position I sought was expert of women and children affairs. Even if I earned the job opportunity, the office was on the fifth floor. It was not furnished with elevator and ramp...the stairs were crisscross and the way to climb and perform my duty was obstructed by unfriendly building arrangements. Regrettably, I could not take the opportunity. (Male, age 41, TOD physical impairment, POI ECDD, 2019).

Another participant, when asked about her experience said,

Following my graduation, I went to one of the public offices of the city for job application. However, the workplace was extremely rough and the offices were new and they were built without having ramps and elevators. Since I was crawling, I was not able to enter the compound and get registered for the vacancy. (Female, age 49, TOD physical impairment, POI FEAPD, 2019).

To reinforce the above discussion, I will bring up my personal experience here.

Nearly all offices and classrooms where I am currently working are built without taking the concerns of PWDs into account. Despite the fact that they are recent erections with four floors, the buildings are not built in the way they could accommodate visually impaired persons and wheelchair users. Ramps, elevators, and paved ways were totally absent (TOD visual impairment).

The above comments are classic examples that show how lack of accessibility and physical isolation together with employers negative attitudes have resulted in the marginalization and exclusion of many PWDs from labor force. The absence of workplace accessibility is an act of dehumanizing and devaluing PWDs that actually contribute to their marginalization and rejection.

When participants were asked about barriers to access to employment, they commented that unreceptive physical environment remain great challenge that impede the employment potential of PWDs and their proficient work performance on an equal basis with others. More precisely, a building with no ramp, lift, and accessible toilet is not only inaccessible but it also represents embedded social inequity that reinforces employment based discrimination against PWDs.

In connection to this assertion, one participant commented:

On one occasion, I heard when my manager said 'It is better to hire one thousand sighted individuals than employing one person with visual impairment. When you employ them, they demand further adjustments including accessible workplace.' I feel that other employers also lack goodwill to make adjustments for employees with disabilities. Some of them consider applicants with disabilities as incompetent and unproductive. (Female, age 33, TOD visual impairment, POI ENAB, 2019).

The above quote illustrates that employers deny the employment potentials of PWDs in the name of unreceptive physical environment as a way out for marginalizing and discriminating job applicants with disabilities. The quote also highlights that whether employers are aware of

the employment rights of PWDs or not, they do not care to respect their rights to compete for a vacancy and get employed on an equal basis with others.

Participants also stated that many employers do not consider the physical adjustments that PWDs require on the basis of their disability when they are engaged in the employment sector. They do not care whether the office is in the fourth floor or not. They are little worried whether ramps, pulleys, and accessible toilet are adjusted or not. For such employers, hiring PWDs itself is doing favor and making inclusion in the labor force.

During discussion over this issue with FGD participants, one interviewee said:

Only hiring us is not enough. But making the work environment accessible for us is equally imperative. Without furnishing the building with elevator and ramp, enforcing employees with disabilities to carry out their duty on the 4th or 5th floor is synonymous to denial to hire them. Not to make alleyways accessible for employees with disabilities is also equivalent to their rejection from being employed. (Male, age 44, TOD physical impairment, POI Yemisrach center, 2019).

In general, the above verbatim of participants demonstrate that public sectors such as employment are still indifferent to the service needs of PWDs. More precisely, this section has revealed that the barriers experienced by the already employed and job applicants with disabilities remain glaring challenges that continue to affect their lives and life choices. Most of these barriers are embedded within social structures that reinforce the cycle of social injustice against persons with disabilities.

5.4 Discussion

These days, PWDs reside in a violent society in which they are unable to assert their needs, rights, and protect themselves from abusive and violent behaviors. The faces of violence and abuses experienced by PWDs are numerous and subtle. They manifest in the form of traditional acts including verbal abuse, speaking down using derogative tongues, and

insulting. They can also be structural, where they are disadvantaged by barriers to access education, employment, and other public services (Brown, 2004; Eide et al., 2017).

While there is an agreement among concerned stakeholders that PWDs have the same rights to education and employment on an equal basis with others, they still experience rejection and exclusion from education and employment opportunities. This denial is related to the imbedded social, economic, and political structures in which PWDs are understood as invisible and minority groups (Belay, Fantahun, & Missaye 2015; UNESCO, 2015).

5.4.1 Experience of Structural Violence in Education

Education is one of the priorities for PWDs and making education environment accessible for them is vital. However, when we look at the situation of education provision for PWDs in Addis Ababa, the problem of accessibility is still flagrant and littered with a number of barriers and safe and stimulating environment is not guaranteed (Lawrence, 2004; Belay, Fantahun & Missaye, 2015; UNESCO, 2015). Within the current study, the most noticeable disabling forms of barriers include physical, curricular, and information that reinforce exclusion of PWDs from education.

In Ethiopia, a 2010 report from the Ministry of Education (MoE, 2010) indicated that fewer than 3% of children with disabilities have access to primary education. This proportion is extremely low and the percentage decreases as children with disabilities move up the education ladder. The reasons why PWDs are absent in the school is not only the problem of physical challenges and absence of learning resources but the obstructing barriers are also deeply imbedded in the social and economic structures of Ethiopian society (Belay, Fantahun & Missaye, 2015).

Violence against PWDs can be understood as structural, when they are denied education and kept at home due to avoidable barriers. Within the current study, structural violence is noticeable when schools refuse to host them, if buildings remain inaccessible, when school toilets are inhospitable, and if curriculum disregards their needs. These are avoidable challenges since they are not beyond the capability of the concerned stakeholders and the resources needed to meet them are not overstated. In addition, the life potential of individuals with disabilities are reduced due to the above stated challenges.

According to Galtung (1969, p. 171), "resources are unevenly distributed, as when income distributions are heavily skewed, literacy/education unevenly distributed, medical services existent in some districts and for some groups only, and so on." Based on this description, one may claim that not to make school environment accessible for PWDs, failing to provide them with accessible learning resources, excluding them from accessing information, and denying their rights to get enrolled to school on an equal basis with others are manifestations of structural violence.

Furthermore, when PWDs cannot travel safely to school due to pathway constraints, where school entrances are occupied by impediments including waterways and deep holes, structural violence occurs. It is not the pathway constraints and the impediments on the school entrances that qualify as structural violence, but the fact that they are adjustable if the state bureaucrats and other concerned stakeholders remain committed and live up to the domestic and international norms and requirements.

Winter and Leighton (2001) state that structural violence occurs when resources are unequally distributed, when people are disadvantaged by unequal access to education, health care, political power. Similarly, Minnich (2020) asserts that structural violence is the deprivation of

individuals or communities through social systems resulting from discrimination, economic inequality, and social injustice.

Within the current study, it can be argued that structural violence manifest when school playground and toilet are not equally made accessible to PWDs, if wheelchair users are not provided with devices that support their daily movement, when sign language interpreter and hearing aids are not made available for persons with hearing impairments, and when national exams are not properly arranged and administered in the way that conforms to the needs of PWDs, and generally when they are not treated on an equal basis with others.

The evidences and accounts collected from many participants indicated that structural violence is a recurrent phenomenon in the provision of education for PWDs in a number of ways. For example, it is manifested when PWDs are allowed only to study certain subjects or join limited field of studies but denied others, if information is not made them reachable in the format they need, unless attitudes of the family, teachers, and the community towards potentials of PWDs are changed, if they do not feel equal on the playground, and so on.

While it is widely recognized that structural violence in the education sector is common, research that showed the linkage between them in the context of disability is little known (Almaz, 2011; Demisew, 2014; Tsegahun, 2016). The findings of these studies focused on the delivery and implementation problems of inclusive education and the attitudes of the society towards PWDs. Despite the fact that structural violence remains a persistent problem, it is overlooked in a number of studies conducted so far. Structural violence is often the result of poor government's education policies and practices that fail to protect PWDs from avoidable barriers and social injustice. Similar finding is reported by UNICEF (2018) in which the

inadequacies of institutions and policy arrangements affect accessibility of education for all children on an equal basis with others.

The findings emerged from this chapter highlighted that the most observed physical, curricular, and information barriers are not only ordinary challenges but they also remain structural problems. The target to create inclusive education cannot be considered met unless all of these barriers are bypassed. Without removing the structural barriers or at least minimizing their impacts, the goal to realize inclusive education and its implementation remain unrealistic.

The above claim is supported by research finding elsewhere in Zimbabwe that explored structural violence in the context of disability and poverty (Eide et al., 2017). The study result indicated that structural violence appeared in the form of exploitation, discrimination, and injustice done on children with cerebral palsy that prevent them from meeting their basic needs including education, adequate social services, infrastructures, and safeguarding their human rights.

5.4.2 Experience of Structural Violence in Employment

Minimizing barriers to employment is an integral part of making PWDs included in the labor market. While work is an indispensable means to earn income and serves to increase people's social connection and status, employment rate of PWDs remains extremely low (Loprest & Maag, 2001). Similar findings were reported by Abd Manaf et al (2019) who argued that employment allows people to integrate and be part of the community. It also serves as a means to improve one's socio-economic status.

Despite of Employment Proclamation No. 568/2008 and other mandates imposed by the Ethiopian government, the employability and livelihood of PWDs still remain unchanged. A study conducted to examine the challenges and employment opportunities of PWDs in Ethiopia, specifically in Dire Dawa identified factors that contributed to the lower employment participation of PWDs (Zinabie, 2017).

The result of this study found that negative attitudes of employers towards hiring PWDs, barriers in the physical environment, fear of cost of accommodation, and lack of awareness about employment potentials of PWDs are some of the factors for their considerable absence in the labor market (Zinabie, 2017). Within the current study, the accounts of many participants demonstrated that barriers along the road to employment of PWDs and the challenges they faced after being hired are manifestation of structural violence.

The inequalities that many PWDs experience in the Ethiopian labor market fit into Galtung's understanding of structural violence since most of the barriers are avoidable and the committers are not easily recognizable. Structural violence occurs when institutions and policies are designed in a way that benefits some people and harm others by creating barriers to access to goods and services (Saleem et al., 2016; UNICEF, 2018).

Within the current study, structural violence manifests when PWDs are unable to get access to vacancy announcements or when the vacancies are not announced using accessible format such as audio, when display boards are poorly arranged and erected, if the vacancies are intended to hire only those without disabilities, when employers show preference for non-disabled applicants rather than the disabled, when sign language interpreter is not made available for those with hearing disabilities during the interview and workplace, and if assistive devices are lacking for those who are in need.

The above barriers are qualified as structural violence not because of the problem they created but the fact that they are avoidable if the concerned institutions are steadfast for their responsibility and proper policy is put into words to realize employment equality among all members of the society. The key word here avoidable, as used by Galtung is critical here as it implies that the employment needs of PWDs can be realized if the barriers are avoided or minimized.

The Manual on employability of PWDs compiled by Tirussew et al (2013) states that PWDs are excluded from most walks of life in all sectors including employment. The reasons mentioned in the manual for their exclusion from these sectors are mistaken beliefs about disability, unfavorable job vacancies, lack of awareness about potentials of PWDs. The manual further affirms that qualified university graduates with disabilities are at risk of unemployment due to attitudinal barriers and other factors in the labor market.

The rights to employment of PWDs is evidently stated in article 27 of the UN Convention (2006). The article requires states parties to recognize the rights of PWDs to work on an equal basis with others. To be specific, the duty declared under letter (a) of article 27 of the Convention is worthwhile that prohibits “discrimination on the basis of disability with regard to all matters concerning all forms of employment, including conditions of recruitment, hiring and employment, continuance of employment, career advancement and safe and health working conditions.”

Ethiopia agreed to the UN CRPD and made it part of its constitution since 2010. Besides, at national level, Proclamation No. 568/2008 is the most relevant stipulation concerning the Right to Employment for PWDs. The proclamation makes any law, practice, custom, attitude and any discriminatory situations null and void that restrict equal employment opportunities

for PWDs. According to the proclamation, employers are responsible for making working conditions, training and other services accessible for persons with disabilities.

The above stated international and domestic statutes dictate equitable access to employment and other social services for PWDs to realize their inclusion and make them contribute to the overall socioeconomic development of mainstream society. In Ethiopia however, the lack of strong employment policy and practice results in inequity and exclusion of PWDs from labor market, making structural violence persistent.

Many of the contributing factors to lack of equal employment opportunities of PWDs emanate from attitudes of the society towards disability (Tirussew et al., 2013; Zinabie, 2017). These attitudes are in most cases reflected in the structures and systems through policy makings, dispensation of services, and the creation and enlargement of opportunities that benefit the powerful and harm the powerless. This unjust relationship is an expression of structural violence to which socially marginalized groups such as PWDs are exposed (Sinha et al., 2017; Minnich, 2020).

Despite some progress in recent times, PWDs are still unable to realize their potential because of avoidable barriers to access to employment opportunities and persistent social inequalities. As mentioned by several participants, structural violence manifests when qualified persons with disabilities are denied employment opportunities in the name of the office location on the fourth or fifth floor, when they are fired because of acquiring disability on the job, and when employers refused to receive résumé of qualified individuals with disabilities and get employed them.

Furthermore, this study shows that PWDs face structural violence when stakeholders fail to take the concerns of PWDs into account during office building and arrangement, for example

when offices lack ramps, pulleys and other facilities that support employees with disabilities to perform their duties efficiently on an equal basis with others. Employers lack of good will to provide employees with disabilities with reasonable accommodation and the tendency to consider them as incompetent and unproductive without fulfilling their work needs are additional examples of structural violence.

One of the central finding of this chapter is that it is not the absence of facilities and the persistent barriers to access to employment that qualify as structural violence but the fact that most of the challenges are adjustable based on the nature and type of impairment. To be specific, the blame is on stakeholders who failed to avoid the barriers or at least minimize their impacts upon the employment potential of PWDs and their participation in education on an equal basis with others.

5.5 Chapter Summary

In conclusion, this chapter has presented the general review of the barriers that PWDs are facing when they pursue for education and employment in the city of Addis Ababa, tracing their marginalization and exclusion from these sectors. In the first part, the observed disabling barriers in education sector have been discussed and analyzed. Another section has been devoted to the discussion of barriers encountered by qualified PWDs when they pursue for employment. The analysis of this chapter and discussions has been made within the framework of structural violence to which PWDs are exposed on a daily basis.

It is also reasonable to conclude that despite the positive impact of the presence of international instruments and national proclamation on the employability of PWDs and their rights to education, many of the conventions still remain on paper and their implementation is

not beyond political and media consumption. This is why PWDs continued to face marginalization and discrimination in education as well as in the labor market, making them live in poverty.

Furthermore, this chapter has highlighted that structural violence is the underlying issue in the lives and life choices of PWDs. It is noted in the form of barriers, of which physical constraints, unreceptive curricular system, inaccessible information, negative attitudes of the society, and ill-disposed vacancy announcements are the most persistent restraints faced by PWDs in public sectors such as education and employment.

Chapter Six

Review of Policy Issues, Legal Protections and Coping Mechanisms

6.1 Introduction

In this chapter, apart from introductory and concluding remarks, three important themes are presented. The theme which deals with policy gaps in the field of disability is outlined in the first section. Accordingly, it reviews some existing policies which consider disability as one area of target. This section also reflects on some of the action plans and strategies projected to advance the beneficiary of PWDs on an equal basis with others.

An outline of the level of legal protection accorded to PWDs under the Ethiopian legal system is introduced in the second section. Imperial Order 70/1971, Proclamation No. 101/1994, the 1995 FDRE Constitution, Proclamation No. 568/2008, Building Proclamation No. 624/2009, and Federal Civil Servants Proclamation No. 1064/2017 are briefly scrutinized. They are chosen based on their applicability on disability concerns.

In the third section, an appraisal of coping mechanisms used by PWDs to come out of the problems they faced on a daily basis is considered. Some of these coping mechanisms include the creation of disability specific organizations and membership, self-discriminatory behaviors shown by some PWDs, downplaying disability for gaining social acceptance, and friendship and intimacy. This chapter culminates by drawing some conclusions and summarizing the main findings of the chapter.

6.2 Policy Issues

In recent times, there are increasing attempts to include PWDs in the policy documents and action plans of government. Examples of such policies and action plans include Developmental Social Welfare Policy (1996), National Employment Policy and Strategy (2009), National Plan of Action of Persons with Disabilities (2012-2021), National Social Protection policy (2014), National Social Protection Strategy (2016), A Master Plan for Special Needs Education /Inclusive Education in Ethiopia (2016), The Second Ethiopian National Human Right Action Plan (2016), and Ethiopian Education Development Roadmap (2017).

What these policies and action plans have in common is that they focus on all vulnerable sections of the society, counting PWDs, elders, women, and the disadvantaged. However, the problems and needs of these groups are extremely different and unparalleled. Take, for example, the case of PWDs who need special adjustment on the basis of their type of disability. From this perspective, policy areas of intervention for these groups and other vulnerable people are not alike.

The national plan of action of persons with disabilities (2012-2021) was introduced on the basis of Developmental and Social Welfare Policy (MOLSA, 2012). The action plan is destined to create more inclusive Ethiopian society as described in its summary section. The main issues addressed in the action plan comprise rehabilitation services, access to education on an equal basis, life skill training, and equal employment opportunities (MOLSA, 2012).

As proclaimed in its heading, the action plan was disability specific agenda to fulfill different needs of PWDs. However, the action plan was presented by blending the issue of elderly

people with the problems of PWDs. Despite some of the positive sides of the action plans, PWDs, or their representatives at least, were not consulted during the development and implementation stages of the policies and action plans. They also lacked comprehensiveness and attention to disability specific needs (MOLSA, 2012; Wesen, 2019).

When we analyze National Social Protection Policy of 2014, PWDs were addressed by fragmented paragraphs of the document. These paragraphs envisioned the design of different communication systems to get rid of the traditional mistaken beliefs and actions which affect the livelihood and quality life of PWDs. In these section, accessibility of basic infrastructures was envisioned for PWDs. However, national social protection policy of 2014 lacked implementation mechanisms and the policy envisions were formulated in crude terms.

Unlike the social protection policies which stress on rehabilitation services, the national social protection strategy of 2016 provided special focus on the delivery of services for PWDs. Some of the favorable developments of the strategy include provision of priority and special services for PWDs, introduction of disability allowance, training on the rights of PWDs, the availability of walking canes at reasonable price and the use of Braille for visually impaired persons.

Whereas the actions and envisions anticipated by the national social protection strategy remains beneficiary for PWDs, the strategy presented disability associating it with inability to work and an obstacle to earn living. Furthermore, PWDs were contained within safety net programs by both the social protection policy and the strategy. Despite their vulnerability to poverty and their overrepresentation in the poor, the consideration and the assessment of the problem of PWDs with the problems of the needy may not be appropriate.

One more important policy document which addresses the employment issues of PWDs is National Employment Policy and Strategy of 2009. In order to improve the right to employment of PWDs, the following policy remedies are envisioned by the paragraphs of national employment policy and strategy of 2009. Among others, encouragement of capacity building of PWDs, providing them support to start business, facilitating better access to financial credits, supporting their disability specific associations, and encouraging private sectors to involve PWDs.

Without disregarding the positive sides of the national employment policy and strategy of 2009, one could argue that from the current given employment rights of PWDs, the policy failed to address the real problems of PWDs in employment sector. To be specific, the required emphasis was not given to accessibility of buildings, changing employer's attitudes towards disability, accessible vacancy announcements, and the walkability of road infrastructures.

In contrast to other policies and action plans, the issues of PWDs received better recognition in the recent National Human Right Action Plan of 2016. It articulated specific needs of PWDs and the required emphasis was given to their real problems. Obviously, the action plan reiterated disability as a prohibited ground of discrimination and stood in support of article 41/5 of the 1995 FDRE Constitution.

To further protect and promote the rights of PWDs, the following main activities were envisioned by the national human right action plan. Ensuring accessibility of buildings, roads, and transport service, availing educational facilities, accessible toilets, inclusion of disability within the curriculum of higher education law, building the capacity of organizations of

PWDs, and grounding of guiding principles for disability related policies and programs are worth mentioning.

In relation to the provision of education for PWDs, the official policy followed by the Ethiopian government is inclusive education (A Master plan for Special Needs Education/Inclusive education, 2016). For the effective implementation of this policy, the Ministry of Education (2016) issued special needs education policy under the name of a master plan for special needs education/inclusive education. Despite the fact that the policy exclusively focuses on special needs education, the master plan is the only policy specific to PWDs in Ethiopia.

For the provision of education and implementation of special needs education/inclusive education, the following actions are envisioned by the master plan, of which ensuring equal access of all levels of education and vocational training to PWDs, building and upgrading disability sensitive education facilities, provision of safe, non-violent and inclusive learning environment, and enacting education law that obliges provision of education for people with special needs are of great importance.

It is equally clear that the master plan has identified a number of policy gaps and barriers in special needs education and proposed the necessary steps to be taken to improve education participation of students with special needs. Improper organization of education environment, the absence of teachers educated along inclusive lines, low level of people's awareness about disability, inaccessibility of built environment of towns and cities, and low enrolment of students with special needs at all education levels are some of the gaps revealed by the master plan.

There is little reference to PWDs in the recent Ethiopian Education Development Roadmap (2017). The roadmap is prepared to create enabling environment for the awaited policy change in relation to Ethiopian education and training system. A number of reforms in education sector are envisioned by the roadmap, among which access, equity, and quality are more emphasized. Within the reform agenda, PWDs are little noticed despite the fact that they face numerous barriers to access to education.

Perhaps, what the roadmap proposed is that there should be education law that obliges the enrollment and participation of groups with special needs and persons with physical disabilities. Making the physical environment of schools accessible to all learners including PWDs is one more positive reform envisioned by the roadmap. Contrary to expectations, the recent Ethiopian education development roadmap (2017) fails to take the real problems and education reform needs of PWDs into account. This entails that the more PWDs are overlooked by the proposed education reforms the less they are embraced in the upcoming policy changes in education.

In-depth interviewees and participants of FGDs suggested that representatives of PWDs were not consulted during the development of the policy documents, action plans, and their implementation strategies. With reference to this contention, one participant commented:

To your surprise, I did not have any experience of participating in the process of formulating policies and strategies that empower and support the well-being of PWDs. Regardless of my contribution as an expert in the office of Social and Labor Affairs of the city government, I did not get such chance to participate. (Male, age 48, TOD visual impairment, POI office of Labor and Social Affairs of Arada sub city, year 2019).

The above quote exemplifies that involvement of PWDs in decision making about issues that affect their way of life is very limited. They have as well little opportunity to participate in the implementation process of programs intended to benefit PWDs. The above citation further

illustrates that policy makers and those who are in charge of decision making are not aware of the capability and contribution of PWDs.

Generally, despite some of the positive changes such as better recognition of the rights of PWDs, the available policies and action plans remain ignorant of their different policy needs. In addition, a variety of systematic strategies are not in place. Put it another way, PWDs are addressed in the same parlance with other vulnerable groups by the existing policies and action plans. This raises questions about the applicability of the policies, action plans and stakeholder's commitment to effectively execute them.

Concluding this section, the absence of disability specific policy which is designed to protect and promote the rights of PWDs is critical problem. It is certainly true that they could not enjoy the rights on an equal basis with others as a result of the poor policies and action plans. The denial of meaningful participation of PWDs during the development and implementation phases, prioritizing social welfare issues rather than encouraging independent way of life, and the absence of strong institutions for the regulation and implementation of the action plans are among some of the weaknesses of the existing policies and action plans.

6.3 Legal Well-being of Persons with Disabilities

In our time, PWDs are at least theoretically gaining legal protection in their activities. Internationally, for example, the UN CRPD is the most recent convention welcomed by numerous state parties to promote and respect human rights of PWDs (Steinf, 2007; Degener, 2016). Ethiopia is one of these state parties to ratify the Convention and accept it as part of its domestic legal system (Belayneh, 2013; Wesen, 2019).

Despite Ethiopia's accession to the UN Convention, as discussed by Belayneh (2013), there are very few domestic legal norms that deal with the protection of the rights of PWDs. Even the existing ones are not adequately implemented due to lack of implementation strategies. Incredibly, the very few provisions that do not require mechanisms and directly doable such as Proclamation No. 568/2008 and Proclamation No. 1064/2017, section 5/49 of the proclamation are not functioning in promoting the rights of PWDs and protecting them from discrimination. As a result, PWDs are still exposed to a number of violations of their human rights (Wesen, 2019).

To fully grasp the level of legal protection accorded to PWDs, it would be relevant to trace how the concept of disability evolved in the Ethiopian legal system. Accordingly, the definitions provided under some legal documents are cautiously reviewed in the light of structural barriers below.

6.3.1 Imperial Order No 70/1971

For the first time, as reported by Belayneh (2013), disability entered into Ethiopian legal system by Imperial Order No. 70/1971. According to this order, PWDs are understood as: "People who, because of limitations of normal physical or mental health, are unable to earn his livelihood and does not have someone to help him and shall include any person who is unable to earn his livelihood because of young or old age."

This definition highlights that PWDs are those who may not earn living by work and almost all types of disabilities do not allow participation in jobs that benefit for living. Beyond undermining potentials of PWDs, Imperial Order 70/1971 is in many instances blamed for initiating their authorized exclusion from earning a living by work (Belayneh, 2013). The

order also fails to discern between the actual problems ensue from disability incidence and issues that result from either ageing or juvenile.

One can argue that by the time Imperial Order 70/1971 was issued, disability was internationally viewed as something constructed by social factors, callings for societal change were gathering momentum (UPIAS, 1976). Hence, enhancing the place PWDs have in the society and improving their quality of life must be a priority. This suggests that Ethiopia is really lagging behind international community in showing its commitment to promote and protect the rights of PWDs.

Even though Imperial Order 70/1971 marked the official need for the state intervention in the lives of PWDs, it endorsed state's segregation policy against them through officially established rehabilitation agency for the disabled. By this policy, PWDs were put into institutions leaving their families and the larger community aside. In this regard, my own experience can be more illustrative.

Prior to loss of my sight, I began to attend primary class around my homeland. A year later, I became blind and stopped going to school. After the failure of some cures, I was taken to Boarding School for the Blind. I departed from my parents at the age of 9 and continued my classes in a school only for the blind. Since my departure, I never returned to homeland for permanent living.

The above quote was an example of long-term institutional policy followed by the Ethiopian government to respond to disability occurrence. The response was not only a matter of institutionalizing disability but it was also a policy of segregation, causing many PWDs to live in isolation and making them not to adapt to social and community way of life. The above quotation further articulates that institutionalization of disability continued to be a source of social stigma and loneliness for PWDs.

6.3.2 Proclamation No. 101/1994

For more than two decades, Imperial Order 70/1971 was not replaced by any legislation dealing with the protection of the rights of PWDs despite regime change (Belayneh, 2013). In 1994, proclamation concerning the rights of PWDs to employment was issued aiming to improve their smooth employability. By this piece of legislation, however, the traditional understanding of disability in Ethiopian context was not significantly changed (Seyoum, 2005; Belayneh, 2013).

According to Proclamation No. 101/1994, persons with disabilities are those:

Who are unable to see, hear or speak or is suffering from mental retardation or from injuries that limit him or her due to natural or manmade causes; provided, however, that the term does not include persons who are alcoholic, drug addicts and those with psychological problems due to socially deviant behaviors.

This delineation focuses on the alleged incapability of PWDs to function and support themselves due to their body anomaly. When analyzed, Proclamation No. 101/1994 meant to protect only a particular right to employment of PWDs, making their legal protection incomplete and unwarranted. Despite its destination to provide protection for the rights of government and private employees with disabilities, the Proclamation is not fully practiced and respected by practitioners and state bureaucrats.

Beyond its poor understanding of disability, interviewees who have legal clues stated that Proclamation No. 101/1994 is filled with discouraging expressions such as helping and providing treatment. These languages uphold charitable outlooks leading PWDs to develop the sense of dependency and needy. The inclusion of these phrases within the proclamation can adversely affect the way the society view PWDs. Based on their limited understanding of disability, one can conclude that the above two legal provisions provide little protection for the rights of PWDs.

6.3.3 The 1995 FDRE Constitution

The FDRE Constitution is by far the most promising Ethiopian legal norm intended to promote and protect human rights of citizens. However, as discussed by Dawit (2019), the FDRE Constitution lacks specific provision dealing with the rights of PWDs. The only indication that refers to PWDs is article 41/5 of the Constitution. This article reads as follows:

“The State shall, within available means, allocate resources to provide rehabilitation and assistance to the physically and mentally disabled, the aged, and to children who are left without parents or guardians”. Despite high expectation for better endorsement, this provision remains the same as previous piece of legislations regarding disability rights. It fails to recognize PWDs as rights holders and lacks articulation that empowers and provides protection for PWDs.

By the provision of article 41/5 of the constitution, PWDs are defined in terms of recipients rather than productive members of the society. As discussed by Dawit (2019) Wesen (2019), the provision of 41/5 of FDRE constitution underlines dependence of PWDs on assistance and institutional living through rehabilitation. This mistreatment is the result of the existence of fixed social structures organized to benefit the mainstream on the one hand and ignore the vulnerable population on the other hand.

In interviews, participants stated that while the FDRE Constitution provides better protection for the rights of women and children, the rights of PWDs are not adequately addressed by the Constitution. This was articulated by one interviewee as follows:

In my opinion, the problem is that law makers are not aware of the rights and needs of PWDs. For example, there are articles that deal with the rights of women and children in the FDRE Constitution. But, in that constitution, there is no a single article that talks about the rights of PWDs. For me, this is prodigious discrimination (Male, age 40, TOD visual impairment, POI ENAB, year 2019).

The above excerpt suggests two important facts. First and foremost, it informs that legislatures are not well aware of legal provisions needed to protect the rights of PWDs. This ignorance adversely affects the legal status of PWDs under Ethiopian legal system. Secondly, despite their vulnerability like women and children, legal protection provided for PWDs is extremely meager. In other words, their exclusion from legal benefits has negative policy implications since legislations can be foundational for state policies.

6.3.4 The Right to Employment of Persons with Disability (Proclamation No. 568/2008)

Compared with earlier disability employment specific legislation, as reported by Belayneh (2013), Proclamation No. 568/2008 is progressive form of law destined to ensure the right to employment of PWDs. While the right to employment was issued two times and had received better coverage at federal level, other rights of PWDs such as the right to accessibility and education were extremely ignored (Wesen, 2019).

According to Proclamation No. 568/2008, a “person with disability is an individual whose equal employment opportunity is reduced as a result of his physical, mental or sensory impairments in relation with social, economic and cultural discrimination”. This definition underlines the interaction between bodily impairment and the physical and social environment with which PWDs interact on a daily basis.

Article 5 and 6 of the Proclamation No. 568/2008 are particularly relevant to the prohibition of discrimination against PWDs and the responsibility of employers to assign an assistant for employees with disabilities. Article 5/1 proclaims that “any law, practice, custom, attitude, or other discriminatory situations that impair the equal employment of persons with disabilities

are illegal”. Article 6 letter c of the Proclamation says that “Any employer shall assign an assistant to enable a person with disability to perform his work or follow his training.” Despite these provisions, employees with disabilities remain disproportionately discriminated and excluded from Ethiopian labor market.

Despite its progressive provisions, Proclamation No. 568/2008 is not all-inclusive. For example, it fails to recognize the importance of incorporating reasonable accommodations before PWDs enter into the work industry. A similar point is made by Wesen (2019) that there are situations in which PWDs require reasonable accommodations before employment. This failure to recognize the need for accommodations before the commencement of work is not only discrimination against but it is also violations of human rights of PWDs.

FGDs participants and interviewees expressed the belief that the current challenge that PWDs face when they seek employment is the reluctance of employers and other concerned stakeholders to comply with the legal norms endorsed to protect the right to employment of PWDs. For example, one participant said: “Available Acts and policies are on the paper only. Some of them are not binding and supported by directives. In addition, many employers are either unaware or unwilling to implement the legislations” (Female, age 33, TOD visual impairment, POI ENAb, year 2019).

To bring up my own experience to the above account:

I am not still allowed to have an assistant in my workplace which is the duty of the employer to fulfill. One of the clauses of Proclamation No. 568/2008 obliges employers to hire an assistant for employees with disabilities. This is to enable us to execute our everyday jobs without hindrances. However, despite my frequent claim, no one in the institution where I am working is still willing to fulfill this duty and abide by the law.

From the above citations, it is conceivable that the mere presence of statute may not provide legal protection for the rights of PWDs and their treatment on an equal basis with others.

Unless the employers and other concerned stakeholders are enforced to act in accordance with the official rules, discrimination against them in employment and other public services would not cease immediately. In general, like prior provisions, there are many issues which are left unspoken on the right to employment of PWDs such as the absence of binding law that mandates employers to fulfill accessibility needs of PWDs.

6.3.5 Other Legislations

In addition to the aforementioned major legal provisions, there are scattered and fragmented legislations endorsed in all-purpose proclamations. Among others, the FDRE Building Proclamation No. 624/2009 and the new Federal Civil Servants Proclamation No. 1064/2017 are the most important norms in relation to the rights of PWDs. While it is preferable to promulgate specific legislation that encompasses comprehensive rights of PWDs, until now, there is no single document dealing with the rights of PWDs both at federal and regional levels.

The right to accessibility is essential for PWDs as it facilitates their independent way of life. Accessibility is not only about physical environment, as stated by Belayneh (2013), but it also encompasses access to buildings and information /communication. Put it another way, barrier free access to buildings, information and physical environment is a prerequisite for PWDs to enjoy other rights.

6.3.5.1 Building Proclamation No. 624/2009

As a state party to the UN CRPD, Ethiopia is required to ensure the right of access to physical environment, information, and communication. Accordingly, article 36 of the Building

Proclamation No. 624/2009 is endorsed to make Buildings accessible to PWDs. This provision reads:

Any public building shall have a means of access suitable for use by physically impaired persons, including those who are obliged to use wheelchairs and those who are able to walk but unable to negotiate steps...Where toilet facilities are required in any building, an adequate number of such facilities shall be made suitable for use by physically impaired persons and shall be accessible to them.

Despite the fact that the government's initiation to ensure the right to accessibility is okay, this provision applies only to public buildings, making the effort of government incomplete and halfhearted. Access needs of PWDs to private buildings are ignored by the proclamation. In particular, in Addis Ababa where privately owned academies, shopping centers, hotels, and apartments are on construction and plentiful, failing to make private buildings under legal observance is serious fault.

Even most of the started public buildings are not in accordance with the article 36 of the Building Proclamation No. 624/2009. This claim has real ground that justifies the offices where I and many participants are currently working. See for example my own experience and other participant under chapter 5.3.3. These experiences are typical cases showing the failure of employers to comply with the requirements of Building Proclamation No. 624/2009. This entails that the more the government representatives are responsible for the rights of PWDs, the better the private owners are accountable.

6.3.5.2 Federal Civil Servants Proclamation No. 1064/2017

In this proclamation, PWDs are mentioned two times showing the responsiveness and commitment of the government to protect and promote their right to employment. Under section 1/13/2 of the proclamation, disability is formally recognized as one prohibited ground of discrimination. This prohibition may reduce discrimination against employment of PWDs.

In practice, however, discrimination is still underway chiefly throughout recruitment, selection, and promotion by engendering different defenses.

In interviews, participants established that there is a huge gap between the practice and the theoretical address relating to legal provisions. They urge the concerned stakeholders to take necessary steps to ensure the application of legislations into practice. One interviewee for example, states that “if employers refuse to meet the legal provisions and if there are no mechanisms of enforcement, the provisions would remain on paper.” (Male, age 32, TOD physical impairment, POI Ministry of Labor and Social Affairs, 2019).

Another interviewee also reinforced the contention by describing her feelings as follows:

Regardless of their duty, employers or your school where you work do not provide the necessary tools and materials that allow you to carry out your responsibility. If you request your right, no one takes your concern into account. For example, if your institution denies to assign or hire an assistant in the name of financial constraint, no way to enforce your employer to do so. (Female, age 36, TOD physical impairment, POI ECDD, 2019).

The above two extracts communicate the existence of widespread gaps between what is real on the ground and the mere legislation on the paper, showing that state bureaucrats and other stakeholders ought to endorse additional provisions and apply the current legislations for the enhancement of employment level of PWDs. In this regard, the more the legislations are explicitly applied, the better the rights of PWDs are protected and their lives improved.

One more valid point is that specific article is endorsed under the Federal Civil Servants Proclamation No. 1064/2017 for the protection of the right to employment of PWDs. Accordingly, section 5 /49 of the proclamation is entirely devoted to the conditions of work applicable to PWDs. This article covers 3 key issues including affirmative action, reasonable accommodation, and assignment of assistant. It also urges the applicability of other laws that protect the rights of PWDs.

In this article, it is clear that the duty of employing assistant for employees with disabilities is more qualified than Proclamation No. 568/2008. As endorsed under 49/3, it says that “Any government institutions shall have the responsibility to assign a person who shall provide proper assistant for those civil servants with disabilities that requires assistant.” One reading of this would be that the employers are required to assign or hire an assistant who provide proper support for those civil servants with disabilities who need assistant.

To critique the city charter of Addis Ababa, it gives no place for the rights of PWDs. The charter aimed to define the power and duties of the city government. It also gives the power for the city government to formulate directives, specific rules, and to make decisions that benefit all inhabitants of the city including PWDs. Unlike the Federal Civil Servants Proclamation, the charter requires the city government to pursue a policy of special support with reference to PWDs. However, this policy is not a form of empowerment rather it marginalizes and excludes them from mainstream development.

While it may well be true that Federal Civil Servants Proclamation can be applicable to regions and city councils, Addis Ababa city government fails to include directive and special support in its employment law. The only directive issued at Addis Ababa city council level is the rule that gives priority in the provision of shades and workplace for self-employing PWDs. Accordingly, ground floor or first floor working places are reserved for those who are interested to run small scale business.

One more piece of legislation where PWDs are listed along with other vulnerable segments of the society is Proclamation No. 1097/2018. This proclamation meant to provide for the definition of the powers and duties of the executive organs of Federal Democratic Republic of Ethiopia. Under the section that describes the common powers and duties of ministries, it

requires each ministry to create conditions that allow PWDs to fully participate and enjoy equal opportunities.

Without disregarding the importance of this piece of legislation, one could say that from the current thinking of the rights of PWDs, the mere listing of them in the proclamation may not make them beneficiary of social, political, and economic opportunities on an equal basis with others and facilitate their full participation in every activity. This reminds us that the more the legislation is clearly articulated and detailed, the better it becomes inclusive and participatory.

6.4 Coping Mechanisms

This section gives a brief outline of the various coping strategies used by PWDs. While the way they address their life difficulties may vary, many PWDs employ common strategies though not identical to survive daily problems and barriers they faced and increase their social acceptance. The creation of disability specific organizations and membership, self-discriminatory behaviors, downplaying disability for gaining social acceptance, and friendship and intimacy with one's own group and others are some of the coping mechanisms reported by majority of participants.

6.4.1 Creation of Disability Specific Organizations and Membership

Disability advocacy is the most visible form of coping mechanism employed by PWDs to curtail day-to-day difficulties. It is an organized campaign undertaken by advocates or disability specific organizations to promote and protect human rights of PWDs. Disability specific organizations are responsible for making them aware of their rights and initiating them to come together (Dagnachew, 2011; Abebe, 2015).

In Ethiopia, there are disability specific organizations which are working on disability advocacy. Most of them are centered in Addis Ababa and more functional than governmental institutions in promoting and defending the rights of PWDs. They are aware of the devalued identity of their members with disabilities. As discussed by Dagnachew (2011) and Abebe (2015), the level of social isolation experienced by PWDs induces them to establish their own specific organizations in order to withstand daily challenges.

Participants reported that disability specific organizations are one of the practical ways of surviving barriers that PWDs face on a daily basis. Using their specific organizations, they increase their level of social acceptance and make their voice heard. With reference to this assertion, one interviewee stated:

I am a member of one of the disability specific organizations, which is part of the Federation of Ethiopian Associations of Persons with Disabilities (FEAPD). My membership is a good opportunity for me to create strong tie with other members. The Federation is also working on raising awareness and disability activism. The Federation is becoming our voice and we are represented in any public events by it. Using state media, the Federation makes our voice heard and induces the government to work for the respect of our rights (Male, age 52, TOD physical impairment, POI FEAPD, 2019).

The above quote communicates at least two important facts. First and foremost, it attests that PWDs use their specific organizations as a mechanism to push the government to treat them on an equal basis with others. The second point construed from the extract is that PWDs are privileged by their membership to build better relationship with each other and fight for their rights together. The quotation reminds us that the more people are united, the better they survive challenges and gain social acceptance.

Participants of the members of the disability specific organizations indicated that they are not interested in the membership of other social gatherings. When they asked why they do not want to participate in other social groups, participants said that they do not feel relaxed and

they might be mistreated and rejected as a result of their disability. This claim is reported by one interviewee as follows:

I and many of my acquaintances are little interested in local community groupings. If you take, for example, the case of (Iqub and Idir), I am not a member to any of them. I am more attracted to disability membership than community associations. I feel panic when membership comes to my mind to such groupings (Female, age34, TOD, visual impairment, POI Ministry of Women and Children Affairs, 2019).

From the above extract, one can deduce that PWDs resort to disability membership to survive community rejection and discrimination against them. While this appraisal may be persuasive, one could in fact also states that the tendency to narrow oneself to disability membership is self-discriminatory rather than surviving social isolation. Without disregarding the two readings, being a member of disability specific organization provides certain benefits for PWDs such as collective rights and social recognition.

Despite their robust commitment to advance the issue of disability, FGDs participants and interviewees stated that disability specific organizations remain disproportionately uncoordinated and dispersed, making the challenges of PWDs lingering and unresolved perpetually. In particular, participants of the management members of office of Labor and Social Affairs of Addis Ababa highlighted that financial constraints, inadequate manpower and their limited capacity, and lack of adequate support from government bodies and other stakeholders are major problems, hindering proper function of disability specific organizations.

6.4.2 Self-discriminatory Behaviors

Typical comments by interviewees indicated that there are instances of self-discrimination from the rest of the community as a result of disability. PWDs isolate or distance themselves in various ways. FGDs participants reported that they believe that the society do not feel

comfortable about their disability. This aversion may induce PWDs to discriminate and isolate themselves from shared way of life.

The following quote illustrates the reasons why some PWDs resort to self-discrimination. “It would not be surprising if we discriminate ourselves. As disabled, there are many issues that discourage us in the community. If you are ignored and rejected, you would go for isolation and look for alternatives. This is natural.” (Male, age40, TOD visual impairment, POI office of Labor and Social Affairs of Gulale sub city, 2019).

The above quote reveals that self-discrimination seems to be a response to community’s rejection faced by PWDs. Whereas segregating oneself from the community is risky, it is practiced by a number of PWDs to survive society’s maltreatment and rejection. Without disregarding the abuse of PWDs by some sections of the society, it is equally clear that self-discriminatory practices are insecure for those who prefer discriminated way of life.

Furthermore, a common view amongst interviewees was that the perception of the society about the capability of PWDs and their contribution is more or less rigid. This sweeping statement can be considered as one factor for self-discrimination of PWDs. This claim is supported by the accounts of interviewees. They reported that many PWDs are disinclined to take part in social activities around their residential. This might be related to community’s negligence about the sociability and input of PWDs.

The above disinclination of PWDs to participate in community life is not only an example of self-discrimination but it is also a coping mechanism by which they survive social exclusion and societal ignorance. It is self-evident that the more PWDs are welcomed and accepted by the community, the better they included and become part of the society.

6.4.3 Downplaying Disability

Disability downplaying is one of the tactics employed by PWDs to overcome barriers. As coping mechanisms, more than a few PWDs make things easier and socialize themselves without worrying about their situations. Participants stated that they show negligence or downplay societal negative attitudes. Even though the behaviors are explicitly discriminatory, these individuals do not care and respond rigorously to societal misbehaviors.

FGDs participants and interviewees argued that showing one's own strength of mind and trying to convince the society about the capability of PWDs is an example of downplaying disability. This claim suggests that if PWDs actively participate in every activity of the public, they can certainly gain social acceptance. For example, one interviewee said, "Nowadays, on the streets of Addis Ababa, it is common to see PWDs who are vending, selling lottery, and participating in other dealings" (Female age 40, non-disabled, POI office of Labor and Social Affairs of Gulale sub city, 2019).

Another participant, when asked the way he reacts to everyday challenges, he said that "in my opinion, we should demonstrate our capacity to overcome our problems. Indecision not to accept our disability is another problem itself" (Male, age 30, TOD hearing impairment, POI yemisrach Center, year 2019).

The above quotes demonstrate that PWDs remain determined to take part in economic dealings despite numerous challenges they face. This determination is not only to gain financial benefits but it is also one way of coping with barriers. The quotations further articulate that there is a trend among some PWDs to use disability as self-protective mechanism. However, this trend is extremely discouraging which adversely affects the lives

and life choices of PWDs. In general, the more they determined and involved, the better they compete and become successful.

6.4.4 Friendship and Intimacy

One more coping mechanism employed by many PWDs is creating friendship and intimacy. It is common way of forming social bridge for PWDs to deal with their everyday challenges. While some participants argued that the friendship among PWDs themselves is self-discriminatory, others indicated that it is fairly self-protective mechanism.

Despite some disagreements among participants, PWDs are likely to create friendship between themselves to cope with shared problems. The extract below shows how they build attachment with each other rather than other communities.

As a person who has acquaintance with many of them, I observe there is a sense of fellow feeling amongst PWDs. You can see when they create friendship with the same members of their group, for example, those who are visually impaired persons with other visually impaired persons and those who are hearing impaired persons with other hearing impaired persons. (Male, age 44, non-disabled, POI office of Labor and Social Affairs of Addis AbabaCity Administration, 2019).

As noted by the above citation, there are noticeable exertions by some PWDs to cope with the problems they faced by creating friendship and intimacy with each other. While the trend tends to isolate them from the rest of the community and discriminate others, there is no doubt that people's friendship and intimacy including that of PWDs can be supportive to overcome their common challenges. It is true that the more people are friendly, the better they resolve their difficulties.

With reference to friendship and intimacy as a coping mechanism, one more contention is that there are some PWDs who make attachment and intimacy with persons without disabilities. This trend is to get the support of those without disabilities in their effort to cope with daily

barriers. As suggested by interviewees and FGDs participants, this group of persons is likely to create friendship and intimacy with those who do not experience common problem.

Whether the friendship is between PWDS or not, it is by no means an exaggeration to state that friendship and intimacy remain one of the tactics employed by PWDs at least to soften the difficulties they faced on a daily basis. This does not mean, however, that PWDs should only create friendship and intimacy with each other. It is rather to highlight the importance of psychological attachment to deal with shared challenges.

6.5 Discussion

Internationally, disability is gaining better policy attention and legal recognition. Conversely, it is self-evident that there are very few policy documents and legislations which deal with the concerns of PWDs in Ethiopia. The need for disability specific legislation and policy is not merely to ensure the inherent human rights of PWDs but it is also needed to acknowledge their contribution, including in the social, economic and political aspects of society (Steinf, 2007; Meekosha & Soldatic, 2011; Degener, 2016).

The UN Convention (2006) asserts that PWDs require better protection and recognition of rights, as they live in an environment ideal for ablest society. Contrary to these expectations, most PWDs in Ethiopia are largely forgotten, discriminated against, and marginalized. Even though they are mentioned in some general policies and regulations such as National Social Protection policy of 2014 and Proclamation No. 568/2008, the protection provided by these policies and proclamations is nominal and discounted (Shimels, 2014; Wesen, 2019; Zerihun, 2020).

There is a growing body of evidence to suggest that if pertinent policies, strategies, and legal protections are in place, PWDs can perform effectively at work, school, and participate in societal activities (Bach and Gallant, 2012;Lema, 2019). However, as demonstrated in a recent article by Iyassu and Mckinnon (2021), there is widespread lack of general understanding about disability, poor policy initiative, and unawareness of legal provisions on the rights of PWDs.

It is certainly true that policy interventions and legal provisions remain the larger structural systems that shape the everyday lives of PWDs (Palmer, 2013). The well-being of PWDs requires not only interventions intended to remove barriers but also policies and laws expected to change the imbedded social structures and improve the quality life of PWDs (Zerihun, 2020; Iyassu & Mckinnon, 2021).

This study argues that structural disparities continue to greatly affect the realization and effective implementation of policies and legislations in the field of disability. They have underhand effects on the general welfare of PWDs, including their enjoyment of education and employment services on an equal basis with others. This reminds us that the more the structural systems are adjusted on the basis of disability specific needs, the better they enjoy the available services.

Generally, research on PWDs has concentrated on proximate problems rather than focusing on the impacts of the larger structural systems upon the lives and life choices of PWDs. What is certain is that the barriers faced by PWDs on a daily basis may not be fixed, if not changes are made at the level of structural system. It is widely accepted that policy changes and legal improvements are urgent need in the field of disability.

The Ministry of Social and Labor Affairs (MOLSA) is the single federal institution which has disability desk within its office. This desk is organized at directorate level, headed by director position. Among others, this department is responsible for initiating disability specific policies and legal instruments that support the protection and promotion of the rights of PWDs (Iyassu & Mckinnon, 2021). Interviewees and FGDs participants , however, indicated that this ministry remains impotent and incapacitated to advocate for the rights of PWDs and try to ensure the implementation of the existing ones.

Some of the participants of officials of Office of Labor and Social Affairs of Addis Ababa City Administration claim that the disability desk is on the implementation of a variety of programs to change negative portrayals of PWDs. These programs include raising people's awareness using talk shows, panel discussions, sport festivals, public events, and international disability day. Whereas these initiatives are said to be encouraging, they are not well-organized and inclusive of all PWDs. Furthermore, the programs lack applicable policy and strategy support.

Taking everyday difficulties they experience into account and the absence of policies specific to disability and the very few presence of legal norms, it would not be mistaken if PWDs are likely to cope with the problems using their own coping strategies. Even though most of these coping mechanisms are not uniform and systematic, they remain useful at least to minimize the negative impacts of the barriers upon the lives and life choices of PWDs. In support of this, Strug (2019) describes coping as the efforts people use to manage difficult living conditions. This understanding makes the coping approaches employed by PWDs natural.

6.6 Chapter Summary

This chapter has investigated three important issues which are considered to have dominant role in the improvement of the quality life of PWDS. These are policy considerations, legal protections, and coping strategies. More specifically, disability exact policy and legal issues are essential for the protection and promotion of human rights of PWDs. However, until now, they are not suitably formulated and efficiently applied as a result of the prevailing disability unawareness and negligence of concerned stakeholders.

The findings of this study may have important implications for policy makers and legislatures to pinpoint the existing policy and legal gaps. This point is particularly relevant to formulate better-quality policies, strategies, and improved legal norms that comply with the current global and local thinking on disability. Logic would suggest that the more the unseen challenges are identified and shown the better we find way out of the problem.

One more conclusion might be that this chapter has attempted to present some of the coping mechanisms used by many PWDs to deal with the barriers they faced on a daily basis. Despite the fact that the coping strategies are more of an individual preference and distinctive, most of PWDs use surviving mechanisms that support them to endure daily challenges. However, this does not mean that they should always rely on their own coping mechanisms. As the mechanisms are not lasting solutions, the way out of the problem is to change the way the society is organized.

Chapter Seven

Conclusion

7.1 Introduction

This chapter concludes the argument advanced in the dissertation. Thereby, the chapter presents its contributions to the body of knowledge in general and peace and security studies in particular. Focusing on the most salient discussions, the chapter outlines the policy implication of this study and suggests some recommendations for further research directed towards humanizing built environment of Addis Ababa for PWDs who live/work in the city.

The main objective of this study was to ascertain what barriers affect human security of PWDs in Addis Ababa and how they survive the exclusionary physical, social, and economic structures that characterize the built environment of the city. Coping mechanisms employed by PWDs to survive everyday barriers have also been addressed. For the purpose of intelligibility, the summary of the findings of this study is presented below by portioning into 4 parts.

7.2 Summary of Findings

This qualitative study sought to understand the experiences of PWDs who made their permanent residence in the built urban environment of Addis Ababa. To be precise, it was an attempt to explore the place PWDs are given in the course of making the physical and social environment of the city conducive for living. The orientation that this study adhered was human security and structural violence perspectives.

The findings of this study have indicated that public spaces of Addis Ababa are violent, painful, intimidating, and source of human insecurity for urban inhabitants of PWDs. They are obstructed by a number of barriers of varying degrees and types. The institutions that are largely exclusionary towards urban inhabitants of PWDs are urban road and transport service areas, school environment and modes of education provisions, and employing sectors. These areas are conclusive in defining the survival, livelihood, and dignity of PWDs in Addis Ababa.

7.2.1 Overview of the Findings of Sidewalk Accessibility

The results of this study have indicated that urban inhabitants of PWDs are not considered as worthy of sidewalk accessibility in Addis Ababa. The majority of these areas are littered with the various forms of barriers that endanger the safe and independent mobility of urban inhabitants of PWDs. This implies that a barrier-free walking environment is an important prerequisite for the full realization of the rights and social inclusion of PWDs in mainstream society.

From the findings of this study, we can deduce that PWDs have not been protected from sidewalk barriers which are source of their human insecurity. Especially, they are fraught with difficulties in urban areas where historically the physical structures have typically been planned and built for mainstream society. This dominant ideology takes no notice of the vulnerable members of the society such as PWDs who are excluded from the enjoyment of public services on an equal basis with others.

The way urban environments, infrastructures, facilities and services are planned and built can impede or enable Access, participation and inclusion of members of society (Psatha, Deffner, &Psycharis, 2011). This claim is true of PWDs who are further marginalized by historical and

cultural antecedents, religious beliefs, socio-economic structures, and state ideology all impact on their access, participation, and inclusion in society.

Ethiopia as a country and Addis Ababa as an urban administrative region in particular is troubled by sidewalk inaccessibility, showing lack of attention of urban planners, practitioners, decision makers and policy designers to accessibility needs of urban inhabitants of PWDs. There can be little doubt that walkways are typically designed and built for the mainstream society, particularly for those without disabilities. This implies that whether knowingly or not, urban planners and built environment practitioners do not consider the need for the empowerment and protection of marginalized members of the society such as PWDs.

The findings from this study have further demonstrated that source of threats to human security of urban inhabitants of PWDs are not only walkway barriers but their lives are at risk due to the transporting of domestic animals on the walkway built for commuters. By extension, ordinary daily activities of PWDs such as going to school, getting to workplace, visiting health care center, and going to recreational areas are endangered by both the broken and unpaved sidewalks as well as troublesome domestic animals.

The evidences from this study has also illustrated that the built environment practitioners and state bureaucrats have little consideration to accessibility needs of PWDs. Despite the fact that the international and local decrees require stakeholders to live up to access needs of PWDs to build environment, there is little progress and willingness of concerned stakeholders to do so.

7.2.2 Impression of the Findings of Transport Accessibility

Transport accessibility is an important determinant of urban life and social inclusion. Access to public transport service is among the major urban challenges that urban inhabitants of

PWDs face on a daily basis. Transport difficulties are not only obstacles for safe and independent travel but they are also problems for obtaining employment, education, health care, social interaction, and other services. Public transport accessibility is therefore a matter of survival, livelihood, and dignity for urban inhabitants of PWDs.

The findings of this study have further shown that PWDs are not protected from public transport related barriers. The challenges range from attitudinal behaviors to physical features of vehicles. The most pervasive barriers reported by participants encompass negative manners of motorists and their coworkers, unfriendly steps on vehicles, unreceptive interior layout of vehicles, and lack of verbal and visual information at crossings. Considering these barriers that urban inhabitants of PWDs face in accessing transportation service, there are lots of issues that need significant improvement in the public transport system in Addis Ababa.

Furthermore, the results of this study have indicated that transport accessibility needs of urban inhabitants of PWDs are neglected in the Ethiopian constitution, policy documents as well as other legislations. This shows that they are little accommodated within the existing social, economic and political systems. Precisely, in a country where a culture of deep seated prejudice is pervasive and socio-economic development is extremely poor, the absence of policy decisions and legal provisions may exacerbate human insecurity of PWDs.

The results of this study have also revealed that barriers that ensue from poor public transportation service remain lethal endangering the well-being and lives of persons with disabilities. The verbatim quote from a participant who experienced fall from the landing stages of public service bus (see page 72) and the traffic accident I and my acquaintances faced (see page 69) are confirmation of this claim. This implies that if access to public transportation service is not friendly to users with disabilities, the likelihood of misfortune

and intimidation to be faced by PWDs would remain inescapable.

7.2.3 Summary of the Findings of Education Accessibility

Education is one of the most known public sectors in Addis Ababa in which considerable number of PWDs involve. In this sector, they are largely participants as students or teachers. It is certainly true that built environment accessibility issues of walking environment and public transport are intertwined with accessibility concerns in education. Put it another way, the more walking environment and transportation service is accessible to urban inhabitants of PWDs the better they feel secure to enjoy education.

The results of this thesis have further suggested that a barrier free delivery of education service to urban inhabitants of PWDs is ensuring their human security. In other words, accessible education requires making teaching space more suitable and learning resources and information more available in the format they need. This fulfillment further demands enabling PWDs to dwell and move in a safe and viable environment which is part of securing education for urban inhabitants of PWDs. The question posed about Accessibility of school built environment of Addis Ababa to its inhabitants of PWDs is therefore relevant and of urgent need.

This study has attempted to show that education environment is said to be accessible when the design and physical features, curriculum, information, teaching methods, policy environment and practice accommodates all students and staffs including those with disabilities without discrimination. Unless these facilities are fulfilled, the attempt to place urban inhabitants of PWDs within mainstream education cannot be inclusive and protective of their human security.

From human security perspective, this study has provided conclusive evidence for the need to protection and empowerment of urban inhabitants of PWDs in the school environment by fulfilling their access needs at all level of education. To reiterate this claim, it is by no means an exaggeration to state that the education environment must be accessible and inclusive for PWDs. The more school buildings, playgrounds, toilets, curriculum, and assessments are inclusive, the better the education environment will be to all PWDs.

7.2.4 Accessibility Issues in Employment

This dissertation has demonstrated that the main source of human insecurity of urban inhabitants of PWDs is not their impairment, but the problems that come from the mainstream society including the norm that views them as incompetent and rejects their full humanity, the belief that associates their impairment with wrongdoings of their ancestors and parents, and the acceptance that the befalling of impairment is God's punishment for their evil behaviors.

This study has also provided conclusive evidence for the widespread physical and social abuses confronted urban inhabitants of PWDs that threaten their livelihood and personal well-being in Addis Ababa. Though community perceptions towards disability are unpredictable and the built environment accessibility remains disproportionate, the propensity to view the impaired body as incapacity and those living with disabilities as burdens dictate the current employment situation of urban inhabitants of PWDs.

It is clear from the current study that employment opportunities of urban inhabitants of PWDs are fraught with difficulties ranging between employer's misperception towards the competency of trained individuals with disabilities and the inhospitality of workplace. Despite the existing of very few pieces of legislations such as Proclamation No. 568/2008 and section 5/49 of the Proclamation No. 1064/2017, employment conditions of PWDs is not significantly

improved. Particularly, employing offices and workplaces continued to be disproportionately discriminatory and exclusionary.

The results of this study have further shown that employment experiences of urban inhabitants of PWDs in Addis Ababa are intertwined into the wider historical circumstances, socio-economic conditions, and political and cultural narratives. In other words, the challenges arising out of built environment faced by urban inhabitants of PWDs in terms of employment is largely the result of the historical position they are given in the society, the very limited opportunities and choices they have in the economy, and the lack of all-encompassing political and cultural tireless support.

While the findings of this study do not represent the everyday reality of all urban inhabitants of PWDs in Addis Ababa, it is by no means an exaggeration to state that the experiences shared, the explanations presented, the problems addressed, and the way out suggested provide conclusive evidence about the sad experiences of urban inhabitants of PWDs. To reiterate this assertion, the more we are aware of the lived experiences of urban inhabitants of PWDs the better we realize, care, and live up to their needs.

7.3 Contribution of the Study to Peace and Security Literature and

Disability

These days, the field of peace and security research, as Muguruza (2007) states, is a very wide area of intellectual discourse and policy debate. Academics are generating a vast body of knowledge focusing on the nexus between peace and security. However, little attention has been paid to the urban lived experiences of PWDs in line with human security and structural violence orientations. This study has therefore attempted to fill this knowledge gap by

identifying and analyzing the source of human insecurity of urban inhabitants of PWDs and how they can be empowered and protected from pervasive barriers.

Speaking of the discipline of peace and security, this study has demonstrated that precarious built environment conditions constitute one of the threats to human security of PWDs in Addis Ababa. In doing so, it contributes to human security literature by drawing attention to harsh physical and social environment that threaten the well-being and empowerment of the wider public in general and urban inhabitants of PWDs in particular. As such, these barriers constitute an indirect and passive form of violence, i.e., structural violence against individuals with disabilities.

By tracing the root of the barriers that urban inhabitants of PWDs faced on a daily basis to structural causes, this study has provided empirical validation for the physical and social barriers faced by urban inhabitants of PWDs as structural problems rather than individual matters. This underlines the role of structural violence in the lives and life choices of PWDs (see for example, sections 4.4, 5.4, and 6.5). Put it another way, human insecurity is duly caused by structural factors that prevent people from meeting their basic survival needs and personal development. It is therefore worth noting that the utility of human security as a concept becomes complete when it combines with the analysis of structural violence.

Furthermore, to the discipline of peace and security, this study contributes to our understanding of disability by bringing new perspectives into existing debates. This approach differentiates this thesis from previous studies which were typically analyzed within the social model of disability. While the social model of disability gives much attention to the conceptual distinction between the social and medical models of disability, human security focuses on the protection and empowerment of urban inhabitants of PWDs.

One more contribution of this study is that it engrosses the interest of academics, practitioners, and disability activists to involve in disability issues and work towards solutions. To reiterate, the more disability becomes the topic of research the better the problems identified, the more disability taken seriously by practitioners the better built environment can be accessible, and the more activists call for disability rights the better built environment challenges receive the attention of policy and decision makers.

7.4 Implications of the Study

According to Koh, Rubenstein, and White (2015), the identification of the implication of any study requires pinpointing various actors upon which the research can have an impact. Based on this, system-level actors, stakeholders in the field of disability, and PWDs are the three different arenas on which this study may have implications.

7.4.1 System-level actors

Speaking of system-level actors, the lives and life choices of urban inhabitants of PWDs are intimately related to the social, economic and political structures within which they inhabit. To be specific, whether PWDs are socially valued or not, whether they are enjoying barrier-free economic opportunity or not, whether their daily movement is barrier-free or not, whether they are accessing barrier-free education or not, whether they have a voice or participation in political dealings or not, whether they can decide on their matters or not, and generally whether they feel protected or not remains to be seen within the existing social, economic, and political structures.

In line with this understanding and in the light of the results of this study, improvement of urban built environment necessitates adjusting the way the social, economic and political structures operate at the various levels in accordance with the accessibility needs of urban inhabitants of PWDs. The various difficulties that urban inhabitants of PWDs encounter in accessing services are greatly attributed to the unfair and restrictive institutional arrangements. In this regard, Hick and Murray (2009) state that difficulty of a person in accessing services is a matter of institutional practice and arrangement.

In this current study, institutional restraints are noticeable when urban inhabitants of PWDs face difficulties in accessing walking environment, traveling by public transportation, when they are unable to enjoy education on an equal basis with others, and when they are unfairly prevented from being employed. These violent restraints ought to be circumvented, or at least significantly regulated, to enhance built environment accessibility for urban inhabitants of PWDs. One way of doing this is to reconsider and go through the existing arrangements and programs and replace them by new and more inclusive mechanisms.

In maintaining touch with the structural violence and human security orientations, this study implies that human security-driven policy designs, decisions, guidelines, and implementation strategies are imperative at least for three reasons. First, human security is essentially a concept that focuses on the physical safety, economic well-being, dignity and worth of life of human beings. Secondly, the very few, discrete, blended, and the outdated existing policies and strategies should be transformed and switched to a more protective, inclusive, and well-timed disability specific policies and strategies. Thirdly, Urban inhabitants of PWDs are worthy of human security agenda in which human rights and development received due attention.

7.4.2 Relevant Stakeholders

The findings of this study may have a number of implications for those who are interested in disability or have responsibility for addressing issues of disability. These include professionals or people in public and private service, human rights institutions, disability organizations, members of parliament, academic institutions, and development agencies. Accordingly, this study may encourage these stakeholders to work towards the advancement of the rights and inclusion of PWDs.

In practical terms, this study inspires policy and decision makers, urban planners including architects and builders, administrators at various levels, and legislatures to reassess the way they understand disability, plan and execute provision of public services, realize their responsibility, and accordingly look the way out for the problem that urban inhabitants of PWDs experience on a daily basis.

This study has also practical implications in the areas that demand meaningful headways including legislative and policy documents, adaptation of new technologies and innovations, provisions of resources in accessible format, and making all stakeholders to participate in public awareness activities. In this way, the level of inclusion and participation of urban inhabitants of PWDs in social, economic, and political life can be promoted and their human security maintained.

A further important implication of this study is that stakeholders ought to closely work with individuals with disabilities and their organizations to get necessary information about their accessibility needs, to understand their living options, to recognize their specific thoughts and emotions, and to help them develop positive self-image and self-sufficient. This understanding and intimacy may help urban inhabitants of PWDs reduce their negative feelings and hopelessness and get socially included.

7.4.3 Persons with Disabilities

Apart from having implication upon system-level actors and relevant stakeholders, this study has wider implications for PWDs. One of these implications is its inspiration for social acceptance among their family, among their colleagues with whom they work or learn, and the larger community within which they live. To put this implication succinctly, the more they

are socially accepted and included, the better they can be successful in their lives individually and collectively.

This study also asserts that PWDs should be part of the solution in the attempt to create favorable urban built environment of Addis Ababa. While this study does not claim that there can be solution for every difficulties they encounter, urban inhabitants of PWDs are expected to demonstrate some ways that can be applicable by the concerned actors. The more they are part of the solution the better the difficulties can be avoidable or at least lessened.

The motivation that this study creates upon urban inhabitants of PWDs to contribute to the community may be an important implication. The belief that the government or the society cures all ills is a wrong assumption. Instead, they ought to contribute something to their own lives and the community at large that increase their social acceptance. They should also understand their duties and accordingly demand their rights instead of limiting oneself to articulating the challenges.

One more significant implication of this investigation is that PWDs not only ought to accept their impairment but they should also convince others that their impairment will not hinder them from full participation and inclusion of the mainstream society. One way that this can be achieved is by downplaying the implications of their impairment on their efficiency and productivity, as well as role in society. If the challenges mainly emanate from perception and culture, the solution lies (at least partly) on communicating this clearly and convincing mainstream society that PWDs are an equal members of the society. This requires PWDs to and become communicative and sociable.

While the suggested implications reflect the findings of this study, it is by no means to claim that this investigation is representative of all types of disability. One significant problem is the

complexity of the area of disability for investigation. It is complex in terms of multitude category of impairments, whether the impairment is severe or not, whether disability is alternative expression to impairment or not, the possible vulnerability of impairment to multiple problems, and the complication of accessibility needs of PWDs. All these complexities do not make this study representative and complete rather it offers an opportunity for further research.

7.5 Recommendation for Further Research

Before concluding this chapter and the dissertation, it makes sense to show directions towards future research on the basis of some emerging findings and limitations of this study. Accordingly, the findings presented here provide a starting point for further investigation of experiences of PWDs living in urban environment. The four themes, which are worthy of further research are recommended in the following paragraphs.

- For further research about the nexus between disability and the built environment of Addis Ababa, data needs to be collected from persons without disabilities including policy and decision makers, urban planners, and managers to understand more about the way they provide service for PWDs. Put it another way, research into the policy actions, implementation strategies, feelings, and thoughts of officeholders and decision makers about urban mobility of inhabitants of PWDs is useful for improving built environment accessibility.
- There is a need for further research on gender specific experiences of disability in urban areas. To be specific, research into the experiences of women with disabilities living in urban environment of Addis Ababa is needed to determine gender difference in accessing

physical and social urban environment. This type of study allows the concerned stakeholders to arrange gender specific policies, strategies, and actions.

- Further research into self-employment potential of PWDs is also necessary to enlarge their employment choices in the Ethiopian labor market. One way of reducing disability specific constraints in the public sectors is to increase self-employed individuals with disabilities. This employment specific research allows identifying the challenges faced by self-employed individuals and opportunities available for them.
- This study also encourages that much work remains to be done on disability specific accessibility needs of PWDs. Despite the fact that this study has attempted to explore some aspects of their accessibility needs, reexamination in detail is required in more specific terms.

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Tables

Table 1. Showing Demographic Profile of key Informants

Sex	Age	Type of Disability (TOD)	Place of Interview (POI)	Profession/ position	Year
Male	50	Physical Impairment	Federation of Ethiopian Associations of Persons with Disabilities (FEAPD)	Expert	2018
Female	40	Physical Impairment	National Association of Women with Disabilities (NAWD)	Director	2018
Female	30	Visual Impairment	Ethiopian National Association for the Blind (ENAB)	Teacher	2019
Female	33	Visual Impairment	Ethiopian National Association for the Blind (ENAB)	Lawyer	2019
Male	35	Physical impairment	Ethiopian Center for Disability and Development (ECDD)	Director	2019
Male	42	Physical Impairment	Ethiopian Center for Disability and development (ECDD)	Expert	2019
Female	60	Visual Impairment	Addis Hiwot	Director	2018
Male	48	Visual Impairment	Office of Labor and Social Affairs of Arada Sub City	Expert	2018
Male	42	Physical Impairment	Beherawi Mezinagna (National Recreational Center)	Journalist	2018
Female	54	Visual Impairment	National Association of Women with Disabilities (NAWD)	Worker of National Association of Women with Disabilities (NAWD)	2019
Male	44	Physical Impairment	Yemisrach Center	Worker of Federation of	2019

				Ethiopian Associations of Persons with Disabilities (FEAPD)	
Female	34	Visual Impairment	Ethiopian National Association for the Blind (ENAB)	Expert	2019
Male	30	Physical Impairment	Yemisrach Center	Worker of Yemisrach Center	2019
Female	32	Visual Impairment	Ethiopian National Association for the Blind (ENAB)	Teacher	2019
Female	49	Physical Impairment	Federation of Ethiopian Associations of Persons with Disabilities (FEAPD)	Expert	2018
Male	29	Visual Impairment	Ethiopian National Association for the Blind (ENAB)	Teacher	2019
Male	40	Visual Impairment	Ethiopian National Association for the Blind (ENAB)	Director	2019
Female	44	Physical Impairment	Federation of Ethiopian Associations of Persons with disabilities (FEAPD)	Expert	2019
Male	44	Visual Impairment	Private Office	entrepreneur	2018
Male	30	Visual Impairment	Ethiopian National Association for the Blind (ENAB)	Lawyer	2019
Female	24	Visual Impairment	Ethiopian National Association for the Blind (ENAB)	Expert	2019
Female	25	Visual Impairment	Addis Ababa University (AAU)	University Student	2019
Male	26	Hearing Impairment	Addis Ababa University (AAU)	University Student	2019

Female	34	Hearing Impairment	National Association of Women with Disabilities (NAWD)	Worker of National Association of Women with Disabilities (NAWD)	2019
Female	30	Hearing Impairment	National Association of Women with Disabilities (NAWD)	Unemployed	2019
Male	30	Physical Impairment	Yemisrach Center	Worker of Yemisrach Center	2019
Male	36	Hearing Impairment	Ethiopian Center for Disability and Development (ECDD)	Worker of Federation of Ethiopian Associations of Persons with Disabilities (FEAPD)	2019
Male	27	Visual Impairment	Ethiopian National Association for the Blind (ENAB)	Expert	2019
Female	36	Physical Impairment	Ethiopian Center for Disability and Development (ECDD)	Worker of Ethiopian Center For Disability And Development (ECDD)	2019
Female	34	Visual Impairment	Ministry of Women and Children Affairs	Expert	2019
Male	32	Physical Impairment	Ministry of Labor and Social Affairs	Expert	2019
Male	40	Physical Impairment	Ethiopian Center for Disability and Development (ECDD)	Worker of Ethiopian Center For Disability And Development (ECDD)	2019
Male	41	Visual Impairment	Ethiopian National Association for the Blind (ENAB)	lawyer	2019
Female	31	Physical Impairment	Ethiopian Center for Disability and Development (ECDD)	Worker of Ethiopian Center For Disability And	2019

				Development (ECDD)	
Male	52	Physical Impairment	Federation of Ethiopian Associations of Persons with Disabilities (FEAPD)	Worker of Federation of Ethiopian Associations of Persons with Disabilities (FEAPD)	2019
Male	40	Visual Impairment	Office of Labor and Social Affairs of Gulale Sub City	Expert	2019
Male	44	Non-disabled	Office of Labor and Social Affairs of Addis Ababa City Administration	Director	2019
Female	40	Non-disabled	Office of Labor and Social Affairs of Gulale Sub City	Expert	2019
Male	30	Hearing Impairment	Yemisrach Center	Worker of Yemisrach Center	2019
Male	45	Visual Impairment	Private Office	Public prosecutor	2018

Table 2. Showing Profile of Focus Group Discussions (FGDs)

Focus Group Discussions (FGDs)	Number of Participants	Place of Interview (POI)	Year
Men with Disabilities	7	Yemisrach Center	2019
Women with Disabilities	9	National Association of Women with Disabilities (NAWD)	2019
Men and Women with Disabilities	7	Ethiopian Center for Disability and Development (ECDD)	2019
Men with Disabilities	6	Federation of Ethiopian Associations of Persons with Disabilities (FEAPD)	2019
Women and Men with Disabilities	6	Addis Hiwot	2019
Women with Disabilities	8	Ethiopian National Association for the Blind (ENAB)	2019
Men and Women with disabilities	6	Federation of Ethiopian Associations of Persons with Disabilities (FEAPD)	2019

Table 3. በ2012 በጀት አመት የመንግስት ስራ ላይ ያሉ የአካል ጉዳተኞች መረጃ

ተ.ቁ	የአካል ጉዳት ዓይነት	ወንድ	ሴት	ጽምር	Type of Disabilities
1	መስማት የተሳናችው	64	69	133	Hearing Empaired
2	መናገር የተሳናችው	27	12	39	Speaking Empaired
3	ማየት የተሳናችው	286	219	505	Visually Empaired
4	በአካል ድጋፍ ማሳሪያ የሚንቀሳቀሱ	69	49	118	Phyisical Disabled
	4.1 የእጅ ጉዳት	68	34	102	Hand Injury
	4.2 የእግር ጉዳት	204	117	321	Leg Injury
5	ሌላ	22	23	45	Others
ጽምር		740	523	1,263	
		Male	Female	Total	

Source: Civil Service office of Addis Ababa City Administration

Table 4: የኢትዮጵያ አካል ጉዳተኞች ማህበራት ፌዴሬሽን በአዲስ አበባ ከተማ አስተዳደር የሚገኙ የፌዴሬሽኑ አባል ማህበራት ዝርዝር

ተ.ቁ.	ስም	አድራሻ
1	ለኢትዮጵያ መስማት የተሳናቸው ብሔራዊ ማህበር	አዲስ አበባ፣ ጉለሌ ክ/ክ፣ ወረዳ 3
2	ለኢትዮጵያ ሥጋ ደዌ ተጠቂዎች ብሔራዊ ማህበር	አዲስ አበባ፣ ኮልሬ ቀራኒያ ክ/ክ፣ ወረዳ 1
3	ፍቅር ኢትዮጵያ የአእምሮ ዕድገት ውስንነት ብሔራዊ ማህበር	አዲስ አበባ፣ ቦሌ ክ/ክ፣ ወረዳ 4
4	ለኢትዮጵያ ማየትና መስማት የተሳናቸው ብሔራዊ ማህበር	አዲስ አበባ፣ አራዳ ክ/ክ፣ ወረዳ 6
5	ለኢትዮጵያ አካል ጉዳተኞች ልማት ብሔራዊ ማህበር	አዲስ አበባ፣ አራዳ ክ/ክ/ የኢትዮጵያ ስታትስቲክስ ኤጀንሲ አካባቢ
6	ለኢትዮጵያ አካል ጉዳተኛ ሴቶች ብሔራዊ ማህበር	አዲስ አበባ፣ የካ ክ/ክ፣ ወረዳ 8
7	ለኢትዮጵያ ዓይነሥውራን ብሔራዊ ማህበር	አዲስ አበባ፣ አራዳ ክ/ክ፣ ወረዳ 6
8	ለኢትዮጵያ የሕግ ባለሙያ አካል ጉዳተኞች ማህበር	አዲስ አበባ፣ ክ/ክ ቂርቆስ፣ ወረዳ 7
9	ለኢ.ኳ.ል አፖርቸኒቲ አሶሲዬሽን አፍ ውሜን ሊቪንግ ዊዝ ኤች.አይ.ቪ/ኤድስ	አዲስ አበባ
10	ለአክሴሰብል ኢትዮጵያ	አዲስ አበባ፣ አራዳ ክ/ክ፣ ወረዳ 2
11	ለአዲስ ሕይወት የዓይነ ሥውራን ማህበር	አዲስ አበባ፣ አራዳ ክ/ክ፣ ወረዳ 6

Source: Federation of Ethiopian Associations of Persons with Disabilities (FEAPD)

Appendices

Interview/FGDs Guidelines

Introduction

First of all, it is my allegiance to thank all of you for your compliance to participate in this interview and FGDs. Before the discussion, let me introduce myself. My name is Asfaw Kasa and I am a PhD candidate at Institute for Peace and Security Studies of Addis Ababa University. This interview is part of my academic fulfillment for my doctoral Degree in Peace and Security Studies. My research interest is the human security of persons with disabilities with reference to their accessibility challenges in Addis Ababa.

The purpose of this interview is to solicit information about barriers that persons with disabilities face in urban built environment in Addis Ababa. The data obtained from this interview serves as a guideline for the analysis of this study. The interview will take more or less one hour depending on what you wish to say. With your permission, I will be taping the session because I don't want to miss any of your comments. Please be sure to speak up so that I don't miss your remarks.

I will promise you that any information you shared will not be disclosed to any person and your interview responses will only be used for scholarly purpose. All responses will be kept confidential and No institution and individual will be named in the final report without their prior consent. Please feel free to share your point of view.

For this study, eligible interviewees are both men and women who are above 18 years old. Before starting the interview, I would like to remind you that there are no right and wrong answers in this discussion. I am interested in knowing what each of you think about the topic under discussion. Hence, you are kindly requested to contribute to the maturity of this

dissertation and my scholarly accomplishment. I also pledge that your voice will be heard in this study and will contribute to decent policy and legal arrangements. Many thanks in advance for your cooperation!

The following are core participants of the Interview and focus Group Discussion (FGD).

1. Persons with Physical, Visual, and Hearing Disabilities
2. Workers or Representatives of the Organizations of Persons with Disabilities
3. Workers or Representatives of Labour and Social Office of Addis Ababa City Administration
4. Non-disabled people who work for disability based organizations

Contents of Interview Guide

General Perception about the onset of Disability

General Information about Barriers/Challenges

General Information on legislations and policies in relation to Persons with Disabilities

General Information about Sidewalk, transport , and building related barriers in Addis Ababa

Major Reasons behind the prevalence of accessibility problems for persons with disabilities

Information about the Perpetuation and the threatening capacity of barriers

Major Social Settings where accessibility challenges Frequently Occur

Coping Mechanisms Used by Persons with Disabilities for surviving barriers

Appendix A

Questions about attitudes towards Disability

Can you tell me about your experience of living with a disability?

- Do you openly discuss about your disability with your family and community at large?
- How do other people (your family and neighbours) perceive your disability?
- What are the most difficult or challenging things for you about living with disability?
- Have you been treated badly because of your disability?
- What do you feel about negative remarks your disability?
- What behaviors, beliefs, norms, attitudes, and values are found in the society that prevent persons with disabilities access to services?
- Do you think that community based myths are in charge of the persistence of accessibility challenges?
- Do you think that religious convictions are to be blamed for the physical and social exclusion of person with disabilities

Appendix B

Questions for None-disabled people who work on disability

- How do you perceive disability?
- Do you openly discuss about disability with those who are living with disability?
- Have you ever thought of disability might happen to you?
- How do you treat persons with disabilities in your local area?
- do you think that persons with disabilities have mobility challenges in Addis Ababa?
- If your answer is yes, What are mobility challenges of persons with disabilities in Addis Ababa?
- Are there policies and legal frameworks that support the fulfillment of accessibility needs of persons with disabilities?
- Can you suggest some strategies or solutions that may improve built environment accessibility for persons with disabilities?

Appendix C

General information about barriers /challenges

- What are the most difficult barriers or challenges that you face in your life?
- What barriers do you face when you walk/go to school or work?
- What are some key sidewalk barriers that persons with disabilities face in Addis Ababa?
- What strategies are needed to reduce these challenges?
- What barriers do you encounter when you travel by vehicles in Addis Ababa?
- how can barriers to the inclusion of persons with disabilities be addressed in Addis Ababa locally?
- Can you mention some key strategies that may support improvement of mobility of persons with disabilities?
- Is there any advantage or opportunity for persons with disabilities in Addis Ababa?

Appendix D

Questions about sidewalk accessibility

- are there barriers on the sidewalk of Addis Ababa? If your answer is yes, what are they?
- Do you have sidewalk accident experience? If your answer is yes, would you tell me?
- Do you think that decision makers or architects are aware of walking needs of persons with disabilities?
- How can be accessibility needs of persons with disabilities fulfilled?
- Do you think that sidewalk challenges are a threat to the very survival of persons with disabilities?
- What mechanisms do you use to survive the barriers you face?

Appendix E

Questions about accessibility issues around school environment and provisions of education for persons with disabilities in Addis Ababa

- How do you describe educational accessibility for persons with disabilities?
- Do you face barriers around your school environment? if your answer is yes, what are the major barriers for persons with disabilities?
- Would you tell me your experience of barriers in school environment?
- What kind of barriers do persons with disabilities face within and outside school environment?
- What kind of information related barriers are there around school environment?
- Do you think that persons with disabilities access to education on an equal basis with others?
- How do persons with disabilities access to school noticeboards?
- What solutions do you suggest to improve educational accessibility needs of persons with disabilities?

Appendix F

Questions about employment related challenges in Addis Ababa

- How do you describe employment accessibility for persons with disabilities?
- Is there any barriers that prevent employment of persons with disabilities? If your answer is yes, what are the key barriers?
- Would you tell me your employment experience?
- What barriers do persons with disabilities face in their workplace?
- Do you think that persons with disabilities face challenges during employment process? If yes, what are they?
- How do persons with disabilities access to vacancy announcement?
- What kind of vacancy challenges do persons with disabilities face?
- How can be employment related challenges of persons with disabilities mitigated and their participation improved?
- Is there any affirmative action for employment of persons with disabilities?

Appendix G

questions about transport accessibility and building related barriers in Addis Ababa

- What kind of barriers do persons with disabilities face when they travel by vehicles?
- Which form of transportation do you often use?
- What barriers are prevalent in transportation sector?
- Would you tell me your experience of barriers in relation to transport service?
- Do you think that your office or classroom where you work or teach is accessible to persons with disabilities? if no, what are the main challenges?
- Do you feel that workplaces and classrooms are inclusive of persons with disabilities?
- What barriers do persons with disabilities experience when they move within and outside their workplace or school environment?
- Do you believe that architects or building designers/planners are aware of accessibility needs of persons with disabilities?
- What resolutions do you recommend for the improvement of building accessibility for persons with disabilities?

Appendix H

questions about disability specific policies and legal issues

- Is there any legislation or policy in relation to persons with disabilities in Ethiopia?
- Do you think that existing legislations and policies are inclusive of persons with disabilities?
- If your answer is no, why do these policies and legislations fail to include them?
- What kind of policy and legal problems are there in relation to persons with disabilities?
- Are there policies and legal provisions for the safe mobility of persons with disabilities?
- Why do you think that the country's educational policy is not inclusive of persons with disabilities?
- Is there any disability specific employment policy for persons with disabilities with regard to recruitment, promotion, and training?
- Which challenges require immediate policy responses and legislative provisions?
Do you think that persons with disabilities are consulted and invited by concerned bodies like government institutions to suggest their views about policy formulations and legal endorsements??
- Do you think that policy makers and legislatures are aware of accessibility needs of persons with disabilities?
- Do you think that organizations of persons with disabilities are sensitive to policy and legal needs of persons with disabilities?
- Do you think that the mainstream media represent persons with disabilities positively?
- What kind of an image do the mainstream media moralize regarding persons with disabilities?

Let's summarize some of the key points from our discussion.

- Is there anything else that you want to add more?
 - Do you have any question?

Thank you for taking the time to talk to me!

Appendix I

Article 36. Facilities for Physically Impaired Persons

1/ Any public building shall have a means of access suitable for use by physically impaired persons, including those who are obliged to use wheelchairs and those who are able to walk but unable to negotiate steps.

2/ Where toilet facilities are required in any building, an adequate number of such facilities shall be made suitable for use by physically impaired persons and shall be assessable to them.

Source: Democratic Republic of Ethiopia (FDRE) (2009). Building Proclamation No. 624/2009

Appendix J

Article 41 Economic, Social and Cultural Rights

1. Every Ethiopian has the right to engage freely in economic activity and to pursue a livelihood of his choice anywhere within the national territory.
2. Every Ethiopian has the right to choose his or her means of livelihood, occupation and profession.
3. Every Ethiopian national has the right to equal access to publicly funded social services.
4. The State has the obligation to allocate ever increasing resources to provide to the public health, education and other social services.
5. The State shall, within available means, allocate resources to provide rehabilitation and assistance to the physically and mentally disabled, the aged, and to children who are left without parents or guardian.
6. The State shall pursue policies which aim to expand job opportunities for the unemployed and the poor and shall accordingly undertake programmes and public works projects.
7. The State shall undertake all measures necessary to increase opportunities for citizens to find gainful employment.
8. Ethiopian farmers and pastoralists have the right to receive fair prices for their products, that would lead to improvement in their conditions of life and to enable them to obtain an equitable share of the national wealth commensurate with their contribution. This objective shall guide the State in the formulation of economic, social and development policies.
9. The State has the responsibility to protect and preserve historical and cultural legacies, and to contribute to the promotion of the arts and sports

Source: Federal Democratic Republic of Ethiopia (FDRE) (1995). Federal Democratic Republic of Ethiopian Constitution.

Appendix K

Article 49. Conditions of Work Applicable to Persons with Disabilities

1/ Persons with disabilities shall be entitled to affirmative actions in recruitment, promotion, transfer, redeployment, education and training.

2/ Any government institution shall ensure that its working environment is conducive to civil servants with disabilities, provide them with the necessary tools and materials and train them how to use such tools and materials.

3/ Any government institution shall have the responsibility to assign a person who shall provide proper assistant for those civil servants with disability that requires assistance.

4/ Privileges prescribed by other laws to persons with disabilities shall be applicable for the implementation of this Proclamation.

Source: Federal Democratic Republic of Ethiopia (FDRE) (2017). Federal Civil Servants Proclamation No. 1064/2017.



የኢትዮጵያ ፌዴራላዊ ዲሞክራሲያዊ ሪፐብሊክ

ፌዴራል ነጋሪት ጋዜጣ

FEDERAL NEGARIT GAZETA

OF THE FEDERAL DEMOCRATIC REPUBLIC OF ETHIOPIA

አሥራአራተኛ ዓመት ቁጥር ፳
አዲስ አበባ መጋቢት ፲፮ ቀን ፪ሺህ ዓ.ም

በኢትዮጵያ ፌዴራላዊ ዲሞክራሲያዊ ሪፐብሊክ የሕዝብ ተወካዮች ምክር ቤት ጠባቂነት የወጣ

14th Year No 20
ADDIS ABABA 25th March, 2008

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ገጽ ፬ሺ፳፯

Right to Employment of Persons with Disability
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አዋጅ ቁጥር ፭፻፷፰/፪ሺህ

PROCLAMATION NO. 568/2008

ስለአካል ጉዳተኞች የሥራ ስምሪት መብት የወጣ አዋጅ

A PROCLAMATION TO PROVIDE FOR THE RIGHT TO EMPLOYMENT OF PERSONS WITH DISABILITY

በማህበረሰቡ ዘንድ ሥር ሰዶ የቆየው ስለአካል ጉዳተኝነት ያለው የተሳሳተ ግንዛቤ በአካል ጉዳተኞች የሥራ ስምሪት መብት ላይ የራሱን አሉታዊ ተጽእኖ ያሳደረ መሆኑን በመረዳት፤

WHEREAS, the negative perception of persons' disablement in society is deep rooted that, it has adversely affected the right of persons with disability to employment;

በሥራ ላይ የቆየው የአካል ጉዳተኞች የሥራ ስምሪት መብት አዋጅ ለአካል ጉዳተኞች የተወሰኑ የሥራ መደቦች እንዲለዩ መደንገጉ አካል ጉዳተኞች በችሎታቸው ተወዳድረው መሥራት የማይችሉ አድርጎ የሚቆጥር፤ ምቹ የሥራ ሁኔታ የማይፈጥር እና ተገቢውን የሕግ ከለላ የማይሰጥ ሆኖ በመገኘቱ፤

WHEREAS, the existing legislation on the right of disabled persons to employment created, by providing for reservation of vacancies for disabled persons, an image whereby people with disabilities to be considered as incapable of performing jobs based on merit and failed to guarantee their right to reasonable accommodation and to provide for proper protection;

አገሪቱ ከምትከተለው እኩል የሥራ ዕድል መርህ ጋር የሚጣጣም፤ ለአካል ጉዳተኞች ምቹ የሥራ ሁኔታ የሚፈጥርና በሥራ ስምሪት የሚደርስባቸውን መድልዎ በፍርድ መድረኮች በቀላሉ ለማስረዳት የሚያስችል አሠራር የሚዘረጋ አዲስ ሕግ ማውጣት አስፈላጊ ሆኖ በመገኘቱ፤

WHEREAS, it has become necessary to enact a new law that complies with the countries policy of equal employment opportunity, provides reasonable accommodation for people with disabilities to employment and lays down simple procedural rule that enable them to prove before any judicial organ discriminations encountered in employment;

በኢትዮጵያ ፌዴራላዊ ዲሞክራሲያዊ ሪፐብሊክ ሕገ መንግሥት አንቀጽ ፶፭ /፩/ እና /፫/ መሠረት የሚከተለው ታውጇል።

NOW, THEREFORE, in accordance with Article 55 (1) and (3) of the Constitution of the Federal Democratic Republic of Ethiopia, it is hereby proclaimed as follows:

የንዱ ዋጋ Unit Price 3.40

ነጋሪት ጋዜጣ ፖ.ሣ.ቶ. ፴፩፮ Negarit G. P.O.Box 80001

፪. አጭር ርዕስ

ይህ አዋጅ «የአካል ጉዳተኞች የሥራ ሥምሪት መብት አዋጅ ቁጥር ፭፻፷፰/፪ሺሀ» ተብሎ ሊጠቀስ ይችላል።

፫. ትርጓሜ

የቃሉ አገባብ ሌላ ትርጉም የሚያሰጠው ካልሆነ በስተቀር በዚህ አዋጅ ውስጥ

፩/ “የአካል ጉዳተኛ” ማለት በደረሰበት የአካል ፣ የአእምሮ ወይም የሰሜት ሕዋሳት ጉዳት ተከትሎ የሚመጣ የኢኮኖሚያዊ ፣ የማህበራዊ ወይም የባህላዊ መድሎ ሳቢያ በሥራ ሥምሪት የእኩል ዕዳል ተጠቃሚ ያልሆነ ሰው ነው።

፪/ “የሥራ ሥምሪት” ማለት ቅጥር፣ ዕድገት፣ ሥልጠና፣ ዝውውርና ሌሎች የሥራ ሁኔታዎችን ጨምሮ በማንኛውም የአካል ጉዳተኛና በአሠሪ መካከል በሥራ ምክንያት የሚፈጠር ግንኙነት ነው።

፫/ “አሠሪ” ማለት ማንኛውም የፌዴራል ወይም የክልል መንግሥት መሥሪያ ቤት ወይም በአሠሪና ሠራተኛ አዋጅ የሚተዳደር ማንኛውም ድርጅት ነው።

፬/ “መድልዎ” ማለት የሥራ ዕድልን በሚመለከት በአካል ጉዳት ላይ ተመስርቶ የሚደረግ ልዩነት ሲሆን ከሥራው ፀባይ የተነሳ ወይም ለአካል ጉዳተኛው አወንታዊ ድጋፍ ለማድረግ ሲባል የሚደረጉ አሠራሮችን አይጨምርም።

፭/ “ተመጣጣኝ ማመቻቸት” ማለት የአካል ጉዳተኛ ሠራተኛን የሥራ ሁኔታ ለማመቻቸት ሲባል በመሥሪያ መሣሪያዎች፣ በሥራ ይዘት መዘርዘር፣ በሥራ ሰዓት፣ በሥራ አደረጃጀትና የሥራ አካባቢ ላይ የሚደረግ ለውጥ ወይም ማስተካከያ ነው።

፮/ “ያልተመጣጠነ ጫና” ማለት ለአካል ጉዳተኛ ምቹ የሥራ ሁኔታ ለመፍጠር ሲባል ከሚወሰደው የማስተካከያ እርምጃ ባሕርይ፣ ከድርጅቱ ስፋት ወይም ከአጠቃላይ ሠራተኞች ብዛትና ስብጥር አንፃር ሲመዘዝን በአሠሪው ላይ ከፍተኛ የአሠራር ችግር ወይም የውጭ ጫና የሚያስከትል እርምጃ ነው።

1. Short Title

This Proclamation may be cited as the “Right to Employment of Persons With Disability Proclamation No. 568/2008”.

2. Definitions

In this Proclamation, unless the context requires otherwise:

1/ “Person with disability” means an individual whose equal employment opportunity is reduced as a result of his physical, mental or sensory impairments in relation with social, economic and cultural discrimination ;

2/ “Employment” means a relationship that exists between any person with disability and an employer, which includes recruitment, promotion, training, transfer and other conditions of work;

3/ “Employer” means any federal or regional government office or an undertaking governed by the Labor Proclamation;

4/ “Discrimination” means to accord different treatment in employment opportunity as a result of disability; provided, however, that any inherent requirement of the job or measures of affirmative actions may not be considered as discrimination;

5/ “Reasonable accommodation” means an adjustment or accommodation with respect to equipment at the work place, requirement of the job, working hours, structure of the business and working environment with a view to accommodate persons with disabilities to employment;

6/ “Undue burden” means an action that entails considerable difficulty or expense on the employer in accommodating persons with disabilities when considered in light of the nature and cost of the adjustments, the size and structure of the business, the cost of its operations and the number and composition of its employees;

፯/ “ፍርድ ቤት” ማለት እንደአግባቡ የፌዴራል የመጀመሪያ ደረጃ ፍርድ ቤት ወይም የክልል ከፍተኛ ፍርድ ቤት ወይም የፌዴራል ወይም የክልል የሲቪል ሰርቪስ የአስተዳደር ፍርድ ቤት ነው።

፰/ “የሥራው ፀባይ የማይፈቅድ” ማለት ተፈላጊ ውን ችሎታ የሚያሟላ የአካል ጉዳተኛ ተመጣጣኝ ማመቻቸት ተደርጎለትም ቢሆን ሊያከናውነው የማይችል ሥራን ያመለክታል።

፱/ በዚህ አዋጅ ውስጥ በወንድ ጾታ የተደነገገው የሴትንም ጾታ ያካትታል።

፫. የተፈጻሚነት ወሰን

ይህ አዋጅ በማንኛውም ሥራ ፈላጊ አካል ጉዳተኛ ወይም አካል ጉዳተኛ ሠራተኛና በአሰሪ መካከል በሚኖር የሥራ ስምሪት ግንኙነት ላይ ተፈጻሚነት ይኖረዋል።

፬. የአካል ጉዳተኞችን የሥራ ስምሪት መብት ስለመጠበቅ

፩/ የሥራው ጠባይ የማይፈቅድ ካልሆነ በስተቀር የተፈላጊ ችሎታ መመዘኛዎችን አሟልቶ የተገኘና በውድድር ውጤቱ ብልጫ ነጥብ ያገኘ ማንኛውም የአካል ጉዳተኛ በምንም ዓይነት መልኩ መድልዎ ሳይደረግበት፤

ሀ/ በማንኛውም መሥሪያ ቤት ወይም ድርጅት ውስጥ የሚገኝ ክፍት የሥራ ቦታን በቅጥር፣ በዕድገት፣ በድልድል ወይም በዝውውር ለመያዝ ወይም

ለ/ በአገር ውስጥም ሆነ በውጭ አገር በሚሰጥ የሥልጠና ፕሮግራም ለመሳተፍ፣ መብት አለው።

፪/ በዚህ አንቀጽ ንዑስ አንቀጽ /፩/ ላይ የተደነገገው እንደተጠበቀ ሆኖ የተፈላጊ ችሎታ መመዘኛዎችን አሟልቶ የተገኘና ለውድድር ውጤት እኩል ወይም ተቀራራቢ ነጥብ ያገኘ ማንኛውም የአካል ጉዳተኛ በምንም ዓይነት መልኩ መድልዎ ሳይደረግበት በዚህ አንቀጽ ንዑስ አንቀጽ ፩/ሀ/ እና /ለ/ ለተመለከቱት መብቶች ቅድሚያ ይሰጠዋል።

፫/ በሥራው ጠባይ አስገዳጅነት ካልሆነ በስተቀር ማንኛውም የመወዳደሪያ መሥሪያ ቤት በተወዳዳሪው ላይ ያለውን ጉዳት የሚመለከት መሆን የለበትም።

7/ “Court” means the Federal First Instance Court or regional High Court or federal or regional civil service administrative tribunal;

8/ “Unless the nature of the work dictates” means a job that could not be performed by a qualified person with disabilities even if reasonable accommodation is provided.

9/ provisions of this Proclamation set out in the masculine gender shall also apply to the feminine gender.

3. Scope of Application

This Proclamation shall be applicable to the Employment relationship between a qualified worker or job-seeker with disability and an employer.

4. Protection of the Right of Persons with Disability to Employment

1/ Unless the nature of the work dictates otherwise, a person with disability having the necessary qualification and scored more to that of other candidates shall have the right with out any discrimination:

a) to occupy a vacant post in any office or undertaking through recruitment, promotion, placement or transfer procedures; or

b) to participate in a training programme to be conducted either locally or abroad.

2/ Subject to the provision of Sub-Article (1) of this Article, where a person with disability acquires the necessary qualification and having equal or close score to that of other candidates, preference shall be given to the conditions provided for in Sub-Article 1 (a) and (b) of this Article.

3/ No selection criteria shall refer to disabilities of a candidate unless the nature of the work dictates otherwise.

፬/ ማንኛውም የአካል ጉዳተኛ የተመደበበት የሥራ መደብ የሚያስገኘውን ደመወዝና ሌሎች ጥቅሞች የማግኘት መብት አለው።

4/ Any person with disability shall have the right to get the wage and other benefits of the position he occupies.

፭. መድልዎ ስለመከላከል

5. Prohibition of Discrimination

፩/ የማንኛውንም አካል ጉዳተኛ እኩል የሥራ ዕድል የሚያጣብብ፣ ሕግ፣ አሠራር፣ ልማድ፣ ዝንባሌ ወይም መድልዎ የሚፈጥር ሌላ ሁኔታ ሕገወጥ ነው።

1/ Any law, practice, custom, attitude or other discriminatory situations that impair the equal opportunities of employment of a disabled person are illegal.

፪/ በዚህ አንቀጽ ንዑስ /፩/ የተደነገገው እንደ ተጠበቀ ሆኖ በቅጥር፣ በዕድገት፣ በድል ድል፣ በዝውውር ወይም በሌሎች የሥራ ሥምሪት ሁኔታዎች ለማወዳደሪያ የሚቀመጡ መስፈርቶች የአካል ጉዳተኞችን የሥራ እድል የሚያጣብቡ ሆነው ከተገኙ እንደመድልዎ ይቆጠራሉ።

2/ Without prejudice to Sub-Article (1) of this Article, selection criteria which, can impair the equal opportunity of disabled persons in recruitment, promotion, placement, transfer or other employment conditions shall be regarded as discriminatory acts.

፫/ ተመጣጣኝ የሆነ ምቹ የሥራ ሁኔታ ባለመፈጠሩ የተነሳ አካል ጉዳተኛ በእኩል የሥራ ዕድል መብቱ መጠቀም ባለመቻሉ የሚፈጠር የሥራ እድል መጣብብ መድልዎ እንደመፈጸም ይቆጠራል።

3/ When a disabled person is not in a position to exercise his equal right of employment opportunity, as a result of absence of a reasonable accommodation, such an act shall be regarded as discrimination.

፬/ የአካል ጉዳተኛን የእኩል የሥራ ዕድል ተጠቃሚ ለማድረግ ሲባል የሚፈጸም አዎንታዊ ተግባር ወይም ከሥራው ፀባይ አስገዳጅነት የተነሳ የሚደረግ ልዩነት መድልዎ እንደመፈጸም አይቆጠርም።

4/ Affirmative actions taken to create equal employment opportunity to persons with disabilities or exclusions dictated by the nature of the work may not be regarded as discrimination.

፮. የአሠሪ ኃላፊነቶች

6. Responsibilities of Employers

፩/ ማንኛውም አሠሪ፣

1/ Any employer shall have the responsibility to:

ሀ/ ለአካል ጉዳተኞች የሥራና የሥልጠና አካባቢን የማመቻቸትና ተስማሚ የሆነ የሥራ ወይም የሥልጠና መሣሪያዎችን የማሟላት፣

a) take measures to provide appropriate working and training conditions and working and training materials for persons with disability;

ለ/ ለሴት አካል ጉዳተኞች በጾታና በአካል ጉዳት ምክንያት ያለባቸውን ተደራራቢ ጫና ያገናዘበ ተገቢ የሆነ ማስተካከያና የድጋፍ እርምጃዎች የሞውሰድ፣

b) take all reasonable accommodation and measures of affirmative action to women with disability taking into account their multiple burden that arise from their sex and disability;

ሐ/ ማንኛውም ረዳት የሚያስፈልገው አካል ጉዳተኛ ሥራውን ለመስራት ወይም ሥልጠናውን ለመከታተል የሚያስችለው ረዳት የመመደብ፣

c) shall assign an assistant to enable a person with disability to perform his work or follow his training;

መ/ ሴት አካል ጉዳተኞች በሥራ ቦታ የሚደርሰባቸውን ጾታዊ ጥቃት የመከላከልና ተፈጽሞ ሲገኝም ፈጻሚው በመጀመሪያ ህግ የመጠየቁ ሁኔታ እንደተጠበቀ ሆኖ አስተዳደራዊ እርምጃ የመውሰድ፣ ኃላፊነት አለበት።

፪/ ማንኛውም አሠሪ በዚህ አንቀጽ ንዑስ አንቀጽ /፩//ሀ/ እና /ለ/ የተደነገገውን እንዲፈጽም የማይገደደው እርምጃው ያልተመጣጠነ ጫና የሚፈጥርበት ሆኖ ሲገኝ ነው። ሆኖም በማናቸውም ሁኔታ ለአካል ጉዳተኛ ረዳት መመደብ ያልተመጣጠነ ማመቻቸት በአሠሪው ላይ አስከትሏል ሊባል አይችልም።

፮. የማስረዳት ግዴታ

፩/ ማንኛውም አካል ጉዳተኛ በአካል ጉዳት ምክንያት ብቻ በቅጥር፣ በዕድገት፣ በድል ድል፣ በዝውውር ወይም በሌሎች የሥራ ሁኔታዎች ላይ መድልዎ ተፈጽሞብኛል የሚል ጭብጥ በማስያዝ ብቻ ለሚመለከተው ፍርድ ቤት ክስ ማቅረብ ይቻላል።

፪/ በአካል ጉዳተኛ ክስ የቀረበበት ወገን ድርጊቱ አድጋዊ እንዳልነበረ በማስረጃ የማረጋገጥ ኃላፊነት አለበት።

፯. የአካል ጉዳተኛ ሠራተኛ ኃላፊነት

፩/ ማንኛውም የአካል ጉዳተኛ የተመደበበትን ሥራ በሙሉ ኃላፊነት የማከናወን ግዴታ አለበት።

፪/ የአካል ጉዳተኛው የሥራ ኃላፊነቱን በትክክል ባይወጣ ወይም ጥፋት ቢፈጽም የአካል ጉዳቱ ከተጠያቂነት አያደነውም።

፱. ስለአዋጁ አፈጻጸም

፩/ የሚኒስትሮች ምክር ቤት ይህንን አዋጅ በሚገባ ለማስፈጸም የሚያስፈልጉ ደንቦችን ሊያወጣ ይችላል።

፪/ የዚህ አንቀጽ ንዑስ አንቀጽ /፩/ ድንጋጌ እንደተጠበቀ ሆኖ የሠራተኛና ማህበራዊ ጉዳይ ሚኒስቴር፣ የፌዴራል ሲቪል ሰርቪስ ኤጀንሲ እና አግባብ ያላቸው የክልል አካላት ይህን አዋጅ በሚገባ ለማስፈጸም የሚያስፈልጉ መመሪያዎችን በየሥልጣን ክልላቸው ለማውጣት ይችላሉ።

d) protect women with disabilities from sexual violence that occur in work places and, without prejudice to other sanctions to be taken against the offender under the relevant laws, take administrative measures against the perpetrator of acts of violence.

2/ An employer shall be relieved from taking any measure as provided in Sub-Article (1) (a) and (b) of this Article where it creates an undue burden to him; provided, however, that the assignment of an assistant for a person with disability shall, under no circumstance, constitute undue burden to an employer.

7. Burden of Proof

1/ Any person with disability who alleges that discrimination on the ground of his disability existed with respect to recruitment, promotion, placement, transfer or other conditions of employment may institute a suit to the competent court on the issue with out the requirement of the burden of proof.

2/ The defendant to a suit instituted pursuant to Sub-Article (1) of this Article shall be responsible to prove that there was no act of discrimination. the.

8. Responsibility of Employee with Disability

1/ Any employee with disability shall perform his duty with full responsibility.

2/ Where an employee with disability does not perform his duty appropriately or commits a fault, his disability shall not relieve him from responsibility.

9. Implementation of the Proclamation

1/ The Council of Ministers may issue regulations necessary for the proper implementation of this Proclamation.

2/ Without prejudice to the provisions of Sub-Article (1) of this Article, the Ministry of Labor and Social Affairs, the Federal Civil Service Agency and the appropriate regional organs may, in their respective jurisdiction, issue directives necessary for the proper implementation of this Proclamation.

፫/ የሠራተኛና ማህበራዊ ጉዳይ ሚኒስቴር፣ የፌዴራል ሲቪል ሰርቪስ ኤጀንሲ እና የሚመለከታቸው የክልል አካላት ይህ አዋጅና በአዋጁ መሠረት የወጡ ደንቦችና መመሪያዎች በትክክል ሥራ ላይ መዋላቸውን በየ ሥልጣን ክልላቸው የመከታተልና የመቆጣጠር ሥልጣን ተሰጥቷቸዋል።

፲. ክስ የመመስረት መብት

፩/ የዚህ አዋጅ ድንጋጌዎች ወይም ይህን አዋጅ ለማስፈጸም የወጡ ደንቦች ወይም መመሪያዎች ባለመከበራቸው ምክንያት መብቱ የተነካበት ማንኛውም የአካል ጉዳተኛ ወይም አካል ጉዳተኛው አባል የሆነበት የአካል ጉዳተኛ ማህበር ወይም አካል ጉዳተኛው አባል የሆነበት የሠራተኞች ማህበር ወይም ይህን አዋጅ የሚያስፈጽም አግባብ ያለው አካል ለሚመለከተው ፍርድ ቤት ክስ ማቅረብ ይችላል።

፪/ ክሱ የቀረበለት ፍርድ ቤትም ጉዳዩ በቀረበለት በጅ ቀናት ውስጥ ውሳኔ መስጠት አለበት።

፲፩. ሰለቅጣት

፩/ በወንጀለኛ መቅጫ ሕግ የበለጠ የሚያስቀጣ ካልሆነ በስተቀር የዚህን አዋጅ ድንጋጌዎች ወይም በአዋጁ መሠረት የወጡ ደንቦችን ወይም መመሪያዎችን የተላለፈ አሠሪ ከብር ፪ሺ /ሁለት ሺህ ብር/ በማያንስና ከብር ፭ሺ /አምስት ሺህ ብር/ በማይበልጥ መቀረጫ ይቀጣል።

፪/ ፍርድ ቤት በሚሰጠው ውሳኔ መሠረት የተጣሰው ግዴታ በአንድ ወር ጊዜ ውስጥ በአሠሪው ካልተስተካከለ የቅጣቱ መጠን በእጥፍ ጨምሮ ሊወሰን ይችላል።

፫/ አሠሪው ግዴታውን ያልተወጣው በሚመለከተው ኃላፊ ወይም ሠራተኛ ጥፋት ምክንያት ከሆነ ኃላፊውን ወይም ሠራተኛውን አግባብ ባለው ሕግ መሠረት ተጠያቂ ሊያደርገው ይችላል።

፲፪. የተሻሩና ተፈጻሚ የማይሆኑ ሕጎች

፩/ የአካል ጉዳተኞች የሥራ ሥምሪት መብት አዋጅ ቁጥር ፩፻፩/፲፱፻፹፮ በዚህ አዋጅ ተሸሯል።

3/ The Ministry of Labor and Social Affairs, the Federal Civil Service Agency and the appropriate regional organs shall have the power to follow up and ensure the proper implementation of the provisions of this Proclamation and regulation and directive issued pursuant to this Proclamation..

10. Right to Institute an Action

1/ Any person with disability whose rights are infringed due to non-observance of the provisions of this Proclamation, regulations or directives issued for the proper implementation of this proclamation or the association of persons with disabilities of which he is a member, or the trade union of which he is a member, or the concerned organ entrusted to implement this Proclamation may institute a suit before the competent court.

2/ The court shall render its decision within 60 days from the date on which the suit is instituted.

11. Penalty

1/ Unless the provisions of the Criminal Code provide more severe penalties, an employer who contravenes the provisions of this Proclamation or regulations or directives issued pursuant to this Proclamation shall be penalized by a fine not less than Birr 2,000 or not exceeding Birr 5,000.

2/ Where the employer fails to rectify the contravention, within one month, in accordance with the decision of the court, the penalty shall be increased by twofold.

3/ The employer may, in accordance with the appropriate law, hold responsible its officer or employee where the contravention is attributable to the fault of such officer or employee.

12. Repealed and Inapplicable Laws

1/ The Right of Disabled Persons to Employment Proclamation No. 101/1994 is hereby repealed.

፪/ ይህን አዋጅ የሚቃረን ማንኛውም ሕግ፣ ደንብ፣ መመሪያ ወይም የአሠራር ልምድ በዚህ አዋጅ ውስጥ በተመለከቱ ጉዳዮች ላይ ተፈጻሚነት አይኖረውም።

፫. የመሸጋገሪያ ድንጋጌ

ሥልጣን ባለው አካል በመታየት ላይ ያለ የአካል ጉዳተኞች የሥራ ስምሪት ክርክር ይህ አዋጅ ከመጽናቱ በፊት በነበረው ሕግ መሠረት ፍጻሜ ያገኛል።

፬. አዋጁ የሚፀናበት ጊዜ

ይህ አዋጅ በፌዴራል ነጋሪት ጋዜጣ ታትሞ ከወጣበት ቀን ጀምሮ የፀና ይሆናል።

አዲስ አበባ መጋቢት ፲፮ ቀን ፪ሺ ፩ ዓ.ም

ግርማ ወልደጊዮርጊስ

የኢትዮጵያ ፌዴራላዊ ዲሞክራሲያዊ ሪፐብሊክ ፕሬዚዳንት

2/ No law, regulation, directive or practice shall, in so far as it is inconsistent with this Proclamations, have force and effect in respect of matters provided for in this Proclamation.

13. Transitory Provisions

Labor disputes pending before any competent body prior to the coming into force of this Proclamation, shall be settled in accordance with the law which was in force before this Proclamation come into force.

14. Effective Date

This Proclamation shall enter into force up on Publication in the Federal Negarit Gazeta.

Done at Addis Ababa, this 25th day of March, 2008

GIRMA WOLDEGIORGIS

PRESIDENT OF THE FEDERAL DEMOCRATIC REPUBLIC OF ETHIOPIA

፪/ ይህን አዋጅ የሚቃረን ማንኛውም ሕግ፣ ደንብ፣ መመሪያ ወይም የአሠራር ልምድ በዚህ አዋጅ ውስጥ በተመለከተ ጉዳዮች ላይ ተፈጻሚነት አይኖረውም።

፲፫. የመሸጋገሪያ ድንጋጌ

ሥልጣን ባለው አካል በመታየት ላይ ያለ የአካል ጉዳተኞች የሥራ ስምሪት ክርክር ይህ አዋጅ ከመጽናቱ በፊት በነበረው ሕግ መሠረት ፍጻሜ ይገኛል።

፲፬. አዋጁ የሚፀናበት ጊዜ

ይህ አዋጅ በፌዴራል ነጋሪት ጋዜጣ ታትሞ ከወጣበት ቀን ጀምሮ የፀና ይሆናል።

አዲስ አበባ መጋቢት ፲፮ ቀን ፳፯ኛው ዓ.ም

ግርማ ወልደጊዮርጊስ

የኢትዮጵያ ፌዴራላዊ ዲሞክራሲያዊ ሪፐብሊክ ፕሬዚዳንት

2/ No law, regulation, directive or practice shall, in so far as it is inconsistent with this Proclamations, have force and effect in respect of matters provided for in this Proclamation.

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14. Effective Date

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Done at Addis Ababa, this 25th day of March, 2008

GIRMA WOLDEGIORGIS

PRESIDENT OF THE FEDERAL DEMOCRATIC REPUBLIC OF ETHIOPIA



**NATIONAL PLAN OF ACTION OF
PERSONS WITH DISABILITIES
(2012-2021)**

**Ministry of Labour and Social Affairs
April 2012
Addis Ababa**

Article 4. Protection of the Right of Persons with Disability to Employment

"1. Unless the nature of the work dictates otherwise, a person with disability having the necessary qualification and scored more to that of other candidates shall have the right without any discrimination:

- a) to occupy a vacant post in any office or undertaking through recruitment, promotion, placement or transfer procedures: or
- b) to participate in a training programme to be conducted locally or abroad.

Article 5. Prohibition of Discrimination

1. Any law, practice, custom, attitude or other discriminatory situations that impair the equal opportunities of employment of persons with disabilities are illegal.
2. Without prejudice to Sub-Article 1 of this Article, selection criteria which can impair the equal opportunity of persons with disabilities in recruitment, promotion, placement, transfer or other employment conditions shall be regarded as discriminatory acts.
3. When a person with disability is not in a position to exercise his/her equal right of employment opportunity, as a result of absence of a reasonable accommodation, such an act shall be regarded as discrimination.
4. Affirmative actions taken to create equal employment opportunity to persons with disabilities or exclusions dictated by the nature of the work may not be regarded as discrimination.

Ethiopian Building Proclamation (No. 624/2009)

The Ethiopian Building Proclamation (Article 36) specifically addresses the accessibility of design and construction for physically impaired persons, as follows:

"Any public building shall have a means of access suitable for use by physically impaired persons, including those who are obliged to use wheelchairs and those who are able to walk but unable to negotiate steps (36.1).

Where toilet facilities are required in any building, an adequate number of such facilities shall be made suitable for use by physically impaired persons and shall be accessible to them (36.2).

CHAPTER Two

2. THE NATIONAL PLAN OF ACTION ON DISABILITY

Building upon the priorities of the "Developmental Social Welfare Policy" (1996), the "National Programme of Action for Rehabilitation of Persons with Disabilities" (1999), the draft document of Social protection Policy (2012) of the Ministry of Labor and Social Affairs and the UNCRPDs the National Plan of Action (NPA) of Persons with Disabilities (2012-2021) was prepared in order to promote, protect and ensure the full and equal enjoyment of fundamental rights, public services, opportunities for education and work, and the full participation in family, community and national life by all persons with disabilities in Ethiopia. The NPA was formulated to address specific priorities during the implementation to overcome barriers to equality of opportunity and the full participation of persons with disabilities in society, and thus contribute to achieving a society inclusive of all.

National Context

The development policies of the country aim at reducing poverty and ensuring the overall economic growth. The sectoral development programs and national plans of action of the respective Federal Ministries contribute to the achievement of the national development goals. As disability is a cross-cutting, multi-sectoral issue, the respective sectoral development programs and national plans of action of other Federal Ministries must also provide for the inclusion of persons with disabilities. The participation of persons with disabilities and their organizations in the revision of existing sectoral development programs and national plans of action of other Ministries, or the formulation of new ones is essential for the design of relevant programs and the delivery of effective services that address the economic and social needs, and the full inclusion and participation of persons with disabilities in the country.

Basic Principles

The NPA is based on UN Convention on the Rights of Persons with Disabilities (UNCRPD) as the framework for all actions in support of equality of opportunity and full participation of persons with disabilities which sets out the following basic principles:-

- Respect for the rights and evolving capacities of children with disabilities
- Non-discrimination
- Full and effective participation of persons with disabilities in decision-making
- Respect for difference and acceptance of persons with disabilities in society
- Equality of opportunity
- Accessibility
- Equality between men and women
- Respect for the rights and evolving capacities of children with disabilities

These principles are based on those contained in the World Programme of Action concerning Persons with Disabilities and in the Standard Rules on the Equalization of Opportunities for Persons with Disabilities. Together with the UN Convention, the principles contained in these documents are the basis for promotion, formulation and evaluation of policies, plans, programs and actions at national, regional and international levels to further equalize opportunities for persons with disabilities.

2.1 Goal of the NPA

Based on these basic principles, the goal of the NPA is to create an inclusive Ethiopian society, in which children, youth and adults with disabilities, regardless of gender or kind of disability, as well as their parents and families, enjoy the same rights and have access to the same medical, educational and social services, training, work and leisure opportunities enjoyed by other citizens. In such an inclusive society, people with disabilities are accepted, their abilities are valued, their diversity and independence are recognized, their human rights are protected, and they participate actively in the life and development of their communities and the nation.

2.2 STRATEGIES OF THE NPA

a) Twin Track approach

Twin track approach promoting and facilitating equality of opportunity and full participation of persons with disabilities (PWDs) in society provides for the inclusion of PWDs in both mainstream and disability-specific development initiatives. One track focuses on mainstream programs and services which are not specifically designed for persons with disabilities such as comprehensive community development programs, ordinary schools, public health services, transportation, communications, etc. Efforts are required to promote and facilitate the inclusion of persons with disabilities and their families in mainstream programs and services as participants and beneficiaries.

The other track focuses on disability-specific programs and service provision required to address the individual needs of PWDs, such as community-based rehabilitation (CBR) programs, orthopedic centers, special schools, medical and vocational rehabilitation centers, etc. Efforts are required to expand required disability-specific programs and services at community level to meet the individual needs of persons with disabilities and their families in all Regions of the country.

Neither track is better or more important than the other; both are required to ensure that the needs of children, youth and adults with disabilities are met, and to provide for equality of opportunity and full participation of PWDs in society.

The NPA incorporates the twin track approach and includes both mainstream and disability-specific actions.

b) Partnerships

The NPA recognizes that improving the situation of persons with disabilities is not only the responsibility of Government but also all Ethiopians. The proposed actions of the NPA are therefore based on partnerships between Government, civil society – including organizations of persons with disabilities (DPOs) – the private sector and the general public, in keeping with the general principles of the Government's Developmental Social Welfare Policy.

Encouragement and support for networks of civil society organizations, including DPOs, able to mobilize and coordinate the actions of many NGOs, in cooperation with Federal, Regional and local government, will provide support the effective implementation of the NPA.

c) Leadership by persons with disabilities and their organizations

Too often, government officials, teachers, disability specialists, and the general public assume that they know what persons with disabilities want and need. This often results in poorly designed programs and services that fail to meet real needs. "Nothing about us without us" is the appropriate slogan of persons with disabilities and their organizations. In planning, implementing and evaluating the NPA persons with disabilities and their organizations (DPOs) must be consulted and involved actively in all stages, in keeping with the principles of the UN Convention. In order for DPOs to play their required role, Government will strengthen the organizational capacity of DPOs by providing office and meeting space, supporting the training of DPO members, and providing financial assistance. Moreover, leaders of DPOs as well as individual persons with disabilities and expertise in technical fields will encourage playing leadership roles in all Government structures, including the National and Regional Disability Councils to be created to monitor the implementation of the NPA.

d) Psychosocial development of children with disabilities

The low understanding of society regarding the strength and potentials of persons with disabilities hinders their psychosocial development during early childhood and leads to a negative self-image by a majority of individuals with disabilities,

Therefore, the concerned government ministries and bureaus, NGO CBR programs, as well as DPOs will focus on early childhood development programs and services for children with disabilities; provide adequate training and encouragement to parents, guardians and their children with disabilities.

2.3 NPA PRIORITY SECTORS FOR ACTION

OBJECTIVES, OUTPUTS, ACTIVITIES, AND INDICATORS

The Government of the FDRE is committed to improving the situation of persons with disabilities in the country and to achieving an inclusive society. This NPA was formulated with this goal in mind. It is based upon the principles of the UN Convention on the Rights of Persons with Disabilities and the policy standards set forth in other international and African regional instruments as well as national legislation. The NPA benefited from input by Government, UN, NGOs, DPOs and other key organizational and individual stakeholders. It seeks to address the objective reality facing children, youth and adults with disabilities, women and men in Ethiopia and to create the conditions necessary for their full inclusion in society.

The following priority sectors for action, with objectives, outputs, activities, and indicators have been identified and form the basis of the NPA for the period 2012-2021. Disability is a cross-cutting, multi-sectoral issue, and it is expected and required that each concerned Federal Ministry or Agency includes the relevant objectives, outputs, activities and indicators for which they are responsible in their respective sectoral development programs and plans of action. MOLSA will provide overall policy guidance and technical support.

2.3.1 Priority 1: Public Awareness

Lead Agency: MOLSA

Collaborators, MOE, MOH, Ministry of Culture and Tourism, Ministry Urban Development and Construction, Ministry of Women, Children and Youth Affairs, Sport Commission, Ministry of communication and Information Technology, Ministry of Agriculture, Ministry of Transport, the respective regional bureaus, DPOS, NGOS, etc

In Ethiopian culture, disability is assumed to be something originating from external forces or a divine origin. A person with a disability is often believed to be cursed and punished by God. Such beliefs contribute to negative attitudes towards persons with disabilities. Lack of knowledge about the potentials and capabilities of PWDs, coupled with misconceptions of the causes of disability contribute to their marginalization and exclusion from education, training, work and other opportunities in life. Prejudice and discrimination are common and often discourage PWDs from participating in family and community activities. In addition, persons with disabilities, especially children and women often suffer physical and psychological abuse and violence.

In keeping with the UNCRPDs (Article 8), efforts are required to raise awareness throughout society, including at the family level, regarding persons with disabilities, and to foster respect for the rights and dignity of persons with disabilities; to combat stereotypes, prejudices and harmful practices relating to persons with disabilities, including those based on sex and age, in all areas of life; and to promote awareness of the capabilities and contributions of persons with disabilities.

Objective 1: Increased awareness by government and society in general about disability and the rights of persons with disabilities

The ultimate responsibility for raising awareness about disability and promoting the inclusion of persons with disabilities in society rests with the Ministry of Labour and Social Affairs (MOLSA), in collaboration with Regional Bureaus of Labour and Social Affairs or their equivalent. MOLSA will do this working in close collaboration with other Federal Ministries, the Federal Communication Office and the media, UN agencies, DPOs and disability NGOs.

Disability is a cross-cutting issue requiring a multi-sectoral response by all concerned Federal Ministries, Agencies and Regional Bureaus. Such a response requires leadership, policy guidance, technical support and coordination to be provided by MOLSA and the National Social Forum.

Outputs

During the period of the NPA, the following outputs will be produced:

- 1.1 Members of Parliament and personnel of Federal Ministries, Institutions and Agencies whose collaboration is required for implementation of the multi-sectoral NPA, better informed about existing national laws, policies, strategies, guidelines as well as international standards related to disability and persons with disabilities.

- 1.2 Regional Governments, Regional Labour & Social Affairs, DPOs, NGOs and the general public better informed about existing national laws, policies, strategies, guidelines as well as international standards related to disability and persons with disabilities.

- 1.3 All national laws brought into conformity with the provisions of the UNCRPDs.

- 1.4 The general public having increased awareness and information about disability and the capabilities and contributions of persons with disabilities to society.

- 1.5 Annual International Day of Persons with Disabilities (3 December) events organized at national and regional levels.

- 1.6 Disability themes included in National observances of other International days including: International Women's Day (8 March), World Health Day (7 April), World Day Against Child Labour (12 June), International Youth Day (August 12), World Mental Health Day (October), International Day for the Eradication of Poverty (17 October), International Day of Tolerance (16 November), International Day for the Elimination of Violence against Women (25 November), World AIDS Day (1 December) and Human Rights Day (10 December).

- 1.7 Quality and frequency of disability awareness-raising radio programs increased.

- 1.8 Exchange of disability-related and other information between MOLSA and Regional Labour & Social Affairs increased.

- 1.9 Outstanding disability awareness-raising and mainstreaming efforts by Government, civil society and the private sector publicly recognized annually.

- 1.10 Capacity of Regional Labour & Social Affairs to prepare IEC materials and plan and implement disability awareness-raising events increased through training of personnel.

- 1.11 Capacity of local officials (Idir, Woreda, Kebele) to include persons with disabilities in their service delivery increased through training.

- 1.12 MOLSA capacity to prepare IEC materials and plan and implement disability awareness-raising events increased through training of personnel.

- 1.13 National Implementation and Monitoring coordinating committee established composed of representatives of key stakeholders including concerned Federal Ministries, Agencies, DPOs, NGOs and the private sector.

- 1.14 Regional Implementation and Monitoring coordinating established in each Region composed of representatives of key stakeholders including concerned Regional Bureau, Agencies, DPOs, NGOs and the private sector.

Activities

To produce the above Outputs, the following activities will be undertaken (by responsible national entity or entities in brackets):

1.1 Prepare an information booklet on existing disability-related laws, policies, strategies, guidelines, the NPA and the UNCRPD and disseminate it to members of Parliament, other Ministries, the Regional Governments and Regional Labour & Social Affairs, DPOs and relevant NGOs, and to the general public.(MOLSA)

1.2 Provide ongoing policy guidance and technical support to other Federal Ministries on the inclusion in their national plans and annual budgets of the respective NPA objectives, outputs, activities and indicators for which they are responsible (MOLSA).

1.3 Undertake a review of all existing national laws and regulations to identify revisions required to end discrimination against persons with disabilities and to bring all laws into conformity with the provisions of the UNCRPD (MOJ).

1.4 Prepare an annual disability information campaign with the Federal Communication Agency and Regional information bureaus, using the media to disseminate information and positive messages (in national languages) to the public about disability and the capabilities and contributions of children, youth and adults with disabilities to society. (MOLSA)

1.5 Support the inclusion of disability information in other national information campaigns on various topics.

1.6 Support the organization by UN agencies and DPOs of the annual International Day (3 December) of Persons with Disabilities event, and mobilize the participation of civil servants in the Day's activities (MOLSA).

1.7 Support the inclusion of disability information in the observances of other international days(MOLSA).

1.8 Support annual disability awareness-raising activities by the Regional Labour & Social Affairs with information as well as technical and material support (MOLSA).

1.9 Support the various radio programs produced by DPOs and NGOs to raise awareness of disability issues with information as well as technical and material support(MOLSA).

1.10 Strengthen the Internet-based information exchange system for the timely sharing of information between MOLSA and the Regional Labour & Social Affairs on disability-related and other issues (MOLSA).

1.11 Create annual awards to be awarded to Regional Labour & Social Affairs and to civil society and private sector organizations to publicly recognize outstanding efforts to raise awareness about disability and promote the inclusion of persons with disabilities in their Regions and local communities(MOLSA).

1.12 Provide in-service training on disability awareness to Regional BOLSA personnel to plan, organize and implement disability awareness-raising materials and events (MOLSA).

1.13 Produce IEC materials and provide disability awareness training to local officials (Idir, Woreda, Kebele).

1.14 Liaise with UN and other international organizations to obtain information and technical and material support for disability awareness-raising efforts (MOLSA).

1.15 Ensure the inclusion of disability issues and coordination of the implementation of the NPA on the agenda and in the actions of the National Implementation and Monitoring Coordinating Committee.

1.16 Establish a National Implementation and Monitoring Coordinating Committee composed of representatives of concerned Federal Ministries, Agencies, DPOs, NGOs and the private sector to advise and monitor the implementation of the NPA .

1.17 Establish a Regional Implementation and Monitoring Coordinating Committee in each Region composed of representatives of concerned Regional Bureaus, Agencies, DPOs, NGOs and the private sector to advise on and monitor the implementation of the NPA (Regional Executive).

Indicators

- Number of IEC information materials produced
- Number of radio programs that include disability content
- Number of disability awareness-raising events
- Number of Regional Government plans that include persons with disabilities
- Number of BOLSA personnel (M/F) trained
- Number of local officials (Idir, Woreda, Kebele, M/F) trained
- Minutes of the National and Regional Social Forums
- Annual Reports of the National and Regional Disability Councils
- Value (in Birr) of international technical and material support

2.3.2 Priority 2: Health and Medical Treatment

Lead Agency: MOH

Collaborators, Ministry of Communication and Information Technology, MoLSA and the respective regional bureaus, DPOS, NGOS, etc

Persons with disabilities in Ethiopia often have limited access to health care facilities and services. This is due to the physical inaccessibility of many health centres, negative attitudes of health care professionals towards PWDs, lack of knowledge of health care professionals about disability, and inability to meet the cost of treatment and medicines.

The UNCRPDs (Article 25) recognizes that “persons with disabilities have the right to the enjoyment of the highest attainable standard of health without discrimination on the basis of disability. Governments are required to take all appropriate measures to ensure access for persons with disabilities to health services that are gender-sensitive, including health-related rehabilitation. In particular:

- a) Provide persons with disabilities with the same range, quality and standard of free or affordable health care and programmes as provided to other persons, including in the area of sexual and reproductive health and population-based public health programmes;
- b) Provide those health services needed by persons with disabilities specifically because of their disabilities, including early identification and intervention as appropriate, and services designed to minimize and prevent further disabilities, including among children and older persons;
- c) Provide these health services as close as possible to people’s own communities, including in rural areas;
- d) Require health professionals to provide care of the same quality to persons with disabilities as to others, including on the basis of free and informed consent by, inter alia, raising awareness of the human rights, dignity, autonomy and needs of persons with disabilities through training and the promulgation of ethical standards for public and private health care;
- e) Prohibit discrimination against persons with disabilities in the provision of health insurance, and life insurance where such insurance is permitted by national law, which shall be provided in a fair and reasonable manner;
- f) Prevent discriminatory denial of health care or health services or food and fluids on the basis of disability.

In addition, the UNCRPDs recognizes (Article 26) that effective and appropriate measures are required, including through peer support, to enable persons with disabilities to attain and maintain maximum independence, full physical, mental, social and vocational ability, and full inclusion and participation in all aspects of life. To that end, Governments are required to organize, strengthen and extend comprehensive habilitation and rehabilitation services and programmes, particularly in the areas of health, employment, education and social services...

Governments shall also promote the development of initial and continuing training for professionals and staff working in habilitation and rehabilitation services, and the availability, knowledge and use of assistive devices and technologies, designed for persons with disabilities.”

Objective 2: Community-based rehabilitation (CBR), specialized medical rehabilitation services and technical aids available to persons with disabilities throughout the country

The ultimate responsibility for ensuring the provision of health care and specialized medical services and technical aids and devices to persons with disabilities and their families rests with the Ministry of Health, in collaboration with the Regional Health Bureaus.

Throughout the country, Community Health Centers and Community Health Extension Workers are often the first point of contact for parents of children with disabilities, as well as for persons with disabilities seeking health care. In addition, in some Regions, Community-based Rehabilitation (CBR) Programs and CBR Workers provide home-based support to parents and children with disabilities as well as to older persons with disabilities. These CBR Programs are primarily run by NGOs which belong to the CBR Network in Ethiopia (CBRNE).

CBR programs and employees working with persons with disabilities, parents and family members in the home to improve the lives of children with developmental, physical and sensory impairments. Skills for essential daily activities such as proper positioning, feeding, bathing and dressing are provided. Other services include mobility orientation for the visually impaired, sign language for the hearing impaired and simple physical exercise therapy. Home-based CBR programs prepare children with disabilities to join special and inclusive education programs. The psychosocial needs of children with significant impairments can also be addressed through home-based CBR programs.

There are a number of orthopedic centers in the country providing prosthetic and orthotic appliances, crutches, artificial limbs, wheelchairs and other technical aids and devices, often with physical therapy services, to persons with physical disabilities.

These centers operate in mostly an autonomous manner, using a variety of technologies, materials and trained personnel, with technical and financial support from various local and international organizations. There is a need to improve, expand and standardize the provision of these orthopedic services.

In addition, there is a new National Rehabilitation Center (NRC) located on the grounds of the Black Lion Specialized Hospital in Addis Ababa, operating under the AAU Faculty of Medicine and the Ministry of Health. Constructed with funds provided by the World Bank under the Emergency Demobilization and Reintegration Project (EDRP) implemented by MOLSA, the NRC is currently operating under capacity.

Outputs

- 2.1 Capacity of Community Health Extension Workers and Community Development Workers (CDW) for the early identification and service delivery to persons with disabilities increased.
- 2.2 Strategy for CBR formulated by MoLSA in collaboration with Ministry of Health and respective Bureaus, NGOs, other responsible bodies for promoting CBR, training CBR workers and supporting the development of CBR Programs.
- 2.3 Capacity of CBR Workers in service delivery to persons with disabilities increased.
- 2.4 Capacity of Regional, Woreda and Kebele Community Development Workers to identify and assist persons with disabilities increased.
- 2.5 Existing CBR Programs strengthened in Regions where they exist and new CBR Programs initiated in new Regions.
- 2.6 National network of CBR programs and organizations strengthened.
- 2.7 National physical rehabilitation Strategy of persons with disabilities finalized and implemented by MoLSA, MoH, ICRC and the NRC.
- 2.8 Guideline on Rehabilitative Care, addressing comprehensive and specialized support services including rehabilitation medicine, clinical psychology, physiotherapy, occupational therapy, audiology, speech therapy, and counseling finalized.
- 2.9 Comprehensive rehabilitative care piloted in 5 regional hospitals.
- 2.10 Strategy for the standardization, expansion and strengthening of orthopedic service delivery prepared by MoLSA in consultation with the existing orthopedic centers, ICRC and concerned NGOs.
- 2.11 Strategy and plan for the production and dissemination of appropriate wheelchairs prepared by MoLSA, in consultation with Regional Bureaus of Labour and Social Affairs, WHO, ICRC, DPOs and with interested national and international NGOs.
- 2.12 Strategy and plan for the provision and fitting of hearing aids for children, youth and adults with hearing-impairments prepared.
- 2.13 Strategy for the training and employment of physical therapists formulated by Joint collaboration with MOH, and in consultation with training institutions and interested NGOs.
- 2.14 Appropriate training on disability issues, including disability prevention, early detection and interventions through medical and social rehabilitation, included in the curriculum for all institutions provide training for medical and health care personnel.

- 2.15 Capacity of health care personnel in public and private health facilities to provide inclusive family planning and reproductive health services to women and girls with disabilities increased.
- 2.16 HIV/AIDS prevention, care and support services coordinated by MOH and HAPCO extended to persons with disabilities.

Activities

To produce the above Outputs, the following activities will be undertaken by responsible national entity

- 2.1 Train Community Health and Community Development Workers in techniques of early identification, early intervention and service delivery to persons with disabilities.
- 2.2 Formulate a national CBR Strategy in collaboration with Regional Bureau and NGOs. MoLSA takes responsibility for promoting CBR, training CBR workers and supporting the development of CBR Programs.
- 2.3 Train 500 CBR Workers in service delivery to persons with disabilities.
- 2.4 Train Regional, Woreda and Kebele Social Workers service delivery to persons with disabilities.
- 2.5 Strengthen existing CBR Programs with technical and material support in Regions where they exist and initiate new CBR Programs in Regions where they do not yet exist.
- 2.6 Provide technical and material support to the national network of CBR programs and organizations.
- 2.7 Implement National physical rehabilitation Strategy of persons with disabilities in collaboration with the AAU Faculty of Medicine, MoLSA, and ICRC.
- 2.8 Produce and disseminate Guideline on Rehabilitative Care, addressing comprehensive and specialized support services including rehabilitation medicine, clinical psychology, physiotherapy, occupational therapy, audiology, speech therapy, and counseling.
- 2.9 Pilot the plan for comprehensive rehabilitative care in 5 regional hospitals.
- 2.10 Formulate and implement a strategy for the standardization, expansion and strengthening of orthopedic service delivery in consultation with the existing orthopedic centers, ICRC and concerned NGOs.
- 2.11 Formulate and implement a strategy and plan for the production and dissemination of appropriate wheelchairs, in consultation with Regional Bureau of Health and Labour and Social Affairs, WHO, ICRC, DPOs and with interested national and international NGOs.

- 2.12 Formulate and implement a strategy and plan for the provision and fitting of hearing aids for children, youth and adults with hearing-impairments prepared.
- 2.13 Formulate and implement a Strategy for the training and employment of physical therapists, in consultation with the relevant training institutions and interested NGOs.
- 2.14 Ensure that appropriate disability awareness and skills training becomes part of the curricula of relevant universities, training centers and courses, so that newly qualified persons have the appropriate skills and awareness to provide services and to include persons with disabilities in service delivery.
- 2.15 Provide appropriate training on disability issues, including disability prevention, early detection and interventions through medical and social rehabilitation, in the curriculum for all institutions provide training for medical and paramedical health personnel.
- 2.16 Train health care personnel in public and private health facilities at all levels in the delivery of inclusive family planning and reproductive health services to women and girls with disabilities.
- 2.17 Extend HIV/AIDS prevention, care and support services coordinated by MOH and HAPCO to persons with disabilities

Indicators

- Number of Community Health Extension Workers (M/F) trained
- Number of Community Development Workers (M/F) trained
- Number of CBR Workers (M/F) trained
- Number of institutional health care personnel (M/F) trained
- Number of general training courses that include disability information
- Strategies and Plans formulated
- Number of rehabilitative care pilot hospitals
- Number of ortho-Prosthetic centers strengthened
- Number of PWDs (M/F) having access to orthopedic /Physiotherapy services
- Number of PWDs (M/F) having access to inclusive family planning/reproductive health services
- Number of PWDs (M/F) having access to HIV/AIDS prevention, care and support services
- Value (in Birr) of international technical and material support

2.3.3 Priority 3: HIV/AIDS and Persons with Disabilities

Lead Agency: MOH/HAPCO

Collaborators: Ministry of Communication and Information Technology, the respective regional bureaus, DPOS, NGOS, etc

Persons with disabilities, especially women and girls with disabilities, are vulnerable to HIV/AIDS. A World Bank global survey (2006) found that persons with disabilities were at twice the risk of becoming infected as non-disabled persons. Yet HIV/AIDS education, prevention, care and support programs and services do not target and are often not accessible to persons with disabilities. As a result, many persons with disabilities in Ethiopia are unaware of the risks of becoming HIV infected, and do not know their status.

Adolescents and adults with disabilities are sexually active just like their non-disabled peers. Yet society in general and health practitioners in particular, assume that persons with disabilities are not sexually active and therefore at little risk of becoming HIV positive. Moreover, HIV/AIDS information is not readily available to persons with certain types of disabilities. Blind and visually-impaired persons do not have access to printed information. Deaf and hearing-impaired persons do not have access to information via radio or TV. Intellectually disabled persons often cannot understand the information that is available and need information in simple language.

Objective 3: HIV/AIDS education, prevention, treatment, care and support information and services available to persons with disabilities throughout the country.

The ultimate responsibility for ensuring coordination and access to prevention, VCT, treatment, care and support services rests with the Federal and Regional HIV/AIDS Prevention and Control Offices (HAPCO), working in collaboration with government ministries, civil society and international partners. The Federal HAPCO prepare strategies and plans that serve as a common basis for all partners to attain the goal of universal access to HIV/AIDS prevention, treatment, care and support in Ethiopia.

Outputs

During the period of the NPA, the following outputs will be produced:

- 3.1 Capacity of personnel of all government and NGO HIV/AIDS personnel to provide HIV/AIDS education and prevention information to persons with disabilities will be increased.
- 3.2 Strategy and plan for reaching persons with different types of disabilities formulated by HAPCO in collaboration with MoH and Regional Health Bureaus, MOLSA, NGOs, and DPOs.
- 3.3 HIV/AIDS educational materials available in Braille disseminated via sign language and prepared in simplified language.
- 3.4 Capacity of VCT facility personnel in providing services to persons with disabilities increased.

- 3.5 Capacity of HIV/AIDS care and support personnel to assist persons with disabilities will be increased.
- 3.6 Capacity of DPOs to provide HIV/AIDS information to their members increased.
- 3.7 National network of HIV/AIDS organizations provide services to persons with disabilities strengthened.
- 3.8 Guidelines on inclusive HIV/AIDS service delivery to persons with disabilities, addressing accessible VCT, care and support services, among others, finalized and disseminated.
- 3.9 Comprehensive HIV/AIDS and persons with disabilities education, prevention, treatment, care, and support program piloted at Regional level.
- 3.10 Appropriate training on HIV/AIDS and disability issues, including HIV prevention, VCT and treatment, included in the curriculum for all institutions providing training for medical and health care personnel.
- 3.11 Capacity of HIV/AIDS service personnel in public and private health facilities to provide appropriate services to women and girls with disabilities will be increased.
- 3.12 All mainstream HIV/AIDS prevention, care and support services coordinated by MOH and HAPCO extended to persons with disabilities.

Activities

To produce the above Outputs, the following activities will be undertaken (by responsible national entity in brackets):

- 3.1 Train 1,000 HIV/AIDS service delivery personnel in disability awareness and how to provide services to persons with different types of disabilities.
- 3.2 Formulate and implement a national Strategy and Plan for inclusive HIV/AIDS services for persons with disabilities, in collaboration with Regional Health Bureaus, MOLSA, NGOs and DPOs.
- 3.3 Prepare, in collaboration with DPOs, HIV/AIDS information materials in Braille, simplified language, and arrange for information to be disseminated via sign language.
- 3.4 Train 500 VCT service personnel in service delivery to persons with seeing, hearing, mobility and intellectual impairments.
- 3.5 Train 500 HIV/AIDS care and support personnel in service delivery to persons with disabilities.

- 3.6 Train DPO members and personnel on HIV/AIDS prevention for onward dissemination to their members (DPOs).
- 3.7 Provide technical and material support to the national network of HIV/AIDS and disability organizations (HAPCO).
- 3.8 Prepare Guidelines on HIV/AIDS service delivery to persons with disabilities and disseminate them, in collaboration with MOH, MOLSA and DPOs (HAPCO).
- 3.9 Pilot a program for comprehensive HIV/AIDS and persons with disabilities education, prevention, treatment, care, and support services in 5 Regions (MOH).
- 3.10 Provide appropriate training on disability and persons with disabilities in the curriculum for all institutions providing training for medical and paramedical health personnel (AAU, MOH).
- 3.11 Train health care personnel in public and private health facilities at all levels in the delivery of appropriate HIV/AIDS services to women and girls with disabilities (MOH).
- 3.12 Extend all mainstream HIV/AIDS prevention, care and support services coordinated by MOH and HAPCO to persons with disabilities (MOH, HAPCO).

Indicators

- Number of HIV/AIDS service delivery personnel (M/F) trained
- Number of VCT service personnel trained
- Number of HIV/AIDS care and support service personnel trained
- Strategy and Plan formulated and implemented
- Guidelines prepared
- Number of PWDs (M/F) trained in HIV/AIDS prevention
- Number of pilot programs at Regional level
- Number of medical students and others trained in disability and service delivery to persons with disabilities
- Number of PWDs (M/F) having access to mainstream HIV/AIDS prevention, care and support services
- Value (in Birr) of international technical and material support

2.3.4 Priority 4: Education and Training

Lead Agency: Ministry of Education

Collaborators: Ministry of Urban Development and Construction, Ministry of Women, Children and Youth Affairs, Ministry of Agriculture, Ministry of Communication and Information Technology, the respective regional bureaus, DPOs, NGOS, etc

It has been estimated that one third of the 77 million children still out of school in African countries are children with disabilities (UNESCO, 2006). The same report also estimated that fewer than 10% of children with disabilities in Africa attend school. Globally, ensuring the inclusion of children with disabilities is critical to achieve the goal of universal primary education by 2015. Given the relationship between disability and poverty, the participation of children with disabilities in education from early ages is essential to poverty alleviation.

In Ethiopia during the period 2007-2008, the enrollment of children with special educational needs in primary education (grades 1-8) was 35,177 (excluding Somali Region due to absence of data). The total number of school aged children (7-14 years) in the country was 16,050,077. Without Somali region, this number is 15,045,047 (MOE Education Statistics Annual Abstract). If it is assumed that in general at least 10% of any school aged population has special education needs, the number of children in Ethiopia requiring special needs education should be about 1.5 million. The number in school is thus only about 2.3% (35,177 of 1.5 million).

The great majority of children with disabilities can study in ordinary schools and classes, if there is sufficient support available. A minority of children require teaching in special classes. Blind children/students need short-term training in mobility, daily living skills, Braille reading and writing, and using technical aids. Deaf children/students need to teach in Sign language and written languages. Children/students with intellectual disabilities need teaching in daily living skills, communication and vocational skills. Children with multiple disabilities need individual planning and teaching.

The UNCRPDs (Article 24) recognizes the right of persons with disabilities to education. With a view to realizing this right without discrimination and on the basis of equal opportunity, Governments are required to ensure an inclusive education system at all levels and lifelong learning, and to ensure:

- a) Persons with disabilities are not excluded from the general education system on the basis of disability, and that children with disabilities are not excluded from free and compulsory primary education, or from secondary education, on the basis of disability;
- b) Persons with disabilities can access an inclusive, quality and free primary education and secondary education on an equal basis with others in the communities in which they live;
- c) Reasonable accommodation of the individual's requirements is provided;

- d) Persons with disabilities receive the required support, within the general education system, to facilitate their effective education;
- e) Effective individualized and disability specific support measures are provided in environments that maximize academic and social development, consistent with the goal of full inclusion.

To enable persons with disabilities to learn life and social development skills to facilitate their full and equal participation in education and as members of the community, Governments will take appropriate measures, including:

- a) Facilitating the learning of Braille, alternative script, augmentative and alternative modes, means and formats of communication and orientation and mobility skills, and facilitating peer support and mentoring;
- b) Facilitating the learning of sign language and the promotion of the linguistic identity of the deaf community;
- c) Ensuring that the education of persons, and in particular children, who are blind, deaf or deaf-blind, is delivered in the most appropriate languages and modes and means of communication for the individual, and in environments which maximize academic and social development.

In order to ensure the realization of this right, Governments will take appropriate measures to employ teachers, including teachers with disabilities, who are qualified in sign language and/or Braille, and to train professionals and staff who work at all levels of education. Such training shall incorporate disability awareness and the use of appropriate augmentative and alternative modes, means and formats of communication, educational techniques and materials to support persons with disabilities.

Governments "will ensure that persons with disabilities are able to access general tertiary education, vocational training, adult education and lifelong learning without discrimination and on an equal basis with others. To this end, ensure that reasonable accommodation is provided".

Objective 4: Best possible education and vocational skills training available to children and youth with disabilities

The ultimate responsibility for providing educational opportunities to persons with disabilities rests with the Ministry of Education (MOE), in collaboration with the Regional Education Bureaus (REBs) and special schools. The MOE has produced a Special Needs Education Program Strategy (2006) that provides an overview of the current situation of special needs education; defines national objectives, strategic priorities and division of responsibilities; identifies resources and possibilities for cooperation; and proposes key elements for inclusive education system development.

Existing special needs education services in the country are provided in ordinary schools either by MOE/REBs or in special schools operated by NGOs and charitable organizations. The government has established over 300 special needs education classes attached to ordinary schools. There are 15 special schools, mainly for blind and deaf students in the country, run mostly by NGOs and DPOs.

There are about 30 organizations promoting inclusive education or supporting students with disabilities who study in ordinary schools. In order to promote and support special needs and inclusive education development in the country, coordination of needs assessment, data collection and national-regional cooperation is required.

Special needs education (SNE) is a new course in all teacher education. However, very few of the teacher education colleges and universities have succeeded to recruit teacher educators trained in special needs education. Among the private and government universities only the Addis Ababa University provides a possibility to specialize in SNE. Some of the TEIs have produced teacher education material packages. However, most of the professional literature used in special needs education studies is out-dated in approach and concepts, and difficult to apply in the challenging contexts of the country.

Outputs

During the period of the NPA, the following outputs will be produced:

- 4.1 Regional SNE Strategic Plans formulated and implemented.
- 4.2 Guidelines for data collection, reporting, planning and budgeting prepared and disseminated.
- 4.3 Guidelines for Cluster Center and Regional support system development formulated and implemented.
- 4.4 SNE teacher education training strengthened and expanded among the major universities in the regions.
- 4.5 Guidelines for curriculum modification prepared.
- 4.6 Good examples of SNE and inclusive education practice identified, shared and publicly recognized.
- 4.7 Framework Document on SNE in TVET finalized and disseminated.
- 4.8 Manual on the practical implementation of SNE in TVET prepared for teachers in TVET institutions.
- 4.9 Study undertaken on the need and means, and plan prepared for expanding special schools for blind/visually impaired and deaf/hearing-impaired students in the country.
- 4.10. 70% increase in number of children with disabilities enrolled in ordinary primary schools.
- 4.11. 70% increase in number of children with disabilities enrolled in ordinary secondary schools.

- 4.12 70% increase in number of students with disabilities enrolled in higher education.
- 4.13 60% increase in number of female students with disabilities at all levels.
- 4.14 90% increase in number of trainees with disabilities enrolled in ordinary TVET institutions.
- 4.15 Expansion of SNE and inclusive education for children with disabilities included in all national and regional education sector development plans, budgets and reporting.
- 4.16 Official Ethiopian Sign Language Dictionary disseminated.

Activities

To produce the above Outputs, the following activities will be undertaken (by responsible national entity in brackets):

- 4.1 Formulate and implement Regional SNE Strategic Plans .
- 4.2 Prepare and disseminate guidelines for data collection, reporting, planning and budgeting.
- 4.3 Formulate and implement guidelines for Cluster Center and Regional support system development.
- 4.4 Increase and strengthen SNE teacher education training through in-service training of TEI personnel.
- 4.5 Prepare guidelines for curriculum modification to include SNE.
- 4.6 Identify, share and publicly recognize good examples of SNE and inclusive education practice .
- 4.7 Prepare and implement a Practical Manual on SNE in TVET, for use by teachers and instructors in TVET institutions.
- 4.8 Undertake a study on the need and means, and prepare a plan for expanding special schools for blind/visually impaired and deaf/hearing-impaired students in the country.
- 4.19 Increase by 70% the number of children with disabilities enrolled in ordinary primary schools.
- 4.10 Increase by 60% the number of children with disabilities enrolled in ordinary secondary schools.
- 4.11 Increase by 90% the number of students with disabilities enrolled in higher education by requiring and assisting all universities in the country to enroll students with disabilities.
- 4.12 Increase by 60% the number of female students with disabilities at all levels.

- 4.13 Increase by 90% the number of trainees with disabilities enrolled in ordinary TVET institutions (MOE, Regional TVET Agencies).
- 4.14 Ensure the inclusion of SNE in all national and regional education sector planning, budgeting and reporting.
- 4.15 Distribute the official Ethiopian Sign Language Dictionary.

Indicators

- Primary school enrolment rates (GER and NER) in correlation with repetition and dropout rates, with special attention to first grade and fourth grade enrolment and dropout, and including numbers of students with special needs
- Secondary school enrolment rates (GER and NER) in correlation with repetition and dropout rates, including numbers of students with special needs
- TVET enrolment rates (GER) and numbers of students with disabilities
- Higher education – numbers of students (M/F) with special needs receiving assistance
- Identification activities carried out in first grades and cooperation with CBR programs
- Numbers of kebele education boards, school managers, head teachers and teachers provided awareness raising and capacity building in special needs education
- Number of teachers trained in special needs education and working as itinerant resource teachers to support ordinary schools
- Number and type of special needs education classes, units and schools, students enrolled (M/F) and special needs education teachers working in them
- National and Regional Education Sector Development plans, budgets and reports
- Value (in Birr) of international technical and material support.

2.3.5 Priority 5: Employment and Work

Lead Agency: MOLSA

Collaborators: Ministry of Justice, Ministry of Civil Service, Ministry of Industry, Ministry of Agriculture, Ministry of Trade, Micro-Finance Institutions, the respective regional bureaus, DPOS, NGOS, etc

In Ethiopia, work opportunities for youth and adults with disabilities are limited. Although some PWDs are engaged in self-help, individual or group income-generating activities, and some educated PWDs have found salaried employment in government and the private sector the vast majority of working-age persons with disabilities in Ethiopia are unemployed.

Work is an important life activity. It contributes to maintaining the individual, the family and household. It provides services and/or goods to the family, to the community and to society at large. Most importantly it provides opportunities for social and economic participation, which enhances personal fulfillment and a sense of self-worth. It enables individuals with or without disabilities to be role models and resource persons for peer support and training.

There are many different types of work:

- work in the home;
- work in a family enterprise;
- individual production, service, or trade activities;
- individual or group small enterprise and income generating activities;
- paid work for someone else in the informal economy;
- wage employment in a public or private organization or firm in the formal economy;
- Paid work in adapted and sheltered settings.

Work may involve manual labour or be entirely a mental activity. It may require little technical skill or highly developed skills. Some type work is based on traditional family production and income-generating activities and some type work is based on new technologies. The advent of communications technology, such as mobile phones and computers, is creating many work opportunities for people with disabilities, especially for those with significant impairments.

Not all types of work are desirable. It is important to distinguish between decent work and work which exploits and perpetuates poverty and is lacking in dignity. Decent work is work which dignifies and does not demean.

The UN CRPD (Article 27) recognizes the right of persons with disabilities to work, on an equal basis with others. "This includes the right to an opportunity to gain a living by work freely chosen or accepted, in a labour market and work environment that is open, inclusive and accessible to persons with disabilities. Governments are required to safeguard and promote the right to work, including for those who acquire a disability during the course of employment, by taking appropriate steps, including through legislation to:

- a) Prohibit discrimination on the basis of disability with regard to all matters concerning all forms of employment, including conditions of recruitment, hiring and employment, continuance

of employment, career advancement and safe and healthy working conditions;

- b) Protect the rights of persons with disabilities, on an equal basis with others, to just and favourable conditions of work, including equal opportunities and equal remuneration for work of equal value, safe and healthy working conditions, including protection from harassment, and the redress of grievances;
- c) Ensure that persons with disabilities are able to exercise their labour and trade union rights on an equal basis with others;
- d) Enable persons with disabilities to have effective access to general technical and vocational guidance programmes, placement services and vocational and continuing training;
- e) Promote employment opportunities and career advancement for persons with disabilities in the labour market, as well as assistance in finding, obtaining, maintaining and returning to employment;
- f) Promote opportunities for self-employment, entrepreneurship, the development of cooperatives and starting one's own business;
- g) Employ persons with disabilities in the public sector;
- h) Promote the employment of persons with disabilities in the private sector through appropriate policies and measures, which may include affirmative action programmes, incentives and other measures;
- i) Ensure that reasonable accommodation is provided to persons with disabilities in the workplace;
- j) Promote the acquisition by persons with disabilities of work experience in the open labour market;
- k) Promote vocational and professional rehabilitation, job retention and return-to-work programmes for persons with disabilities."

Objective 5: Opportunities for work and employment available to all youth and adults with disabilities who want to work

The ultimate responsibility for ensuring non-discrimination in work and employment rests with the Ministry of Labour and Social Affairs (MOLSA), particularly with the Department of Labour, in collaboration with the Regional Labour & Social Affairs and the Ministry of Justice must promote and enforce the provisions of the Proclamation No. 568/2008.

Efforts to promote the employment of persons with disabilities by raising the awareness of employers and the general public of the work capabilities of women and men with disabilities are

being undertaken by NGOs, in collaboration with private employment agencies. The Ministry of Civil Service practices affirmative action by giving priority to hiring candidates with disabilities if ranked the same as non-disabled candidates for a position. There are at present, no tax or other incentives for individual private sector employers to employ persons with disabilities.

Numerous Government, UN and NGO programs are being implemented to support the self-employment of individuals and groups of persons with disabilities through income generating activities, including training in basic business skills, business development services, access to micro credit and startup capital, and marketing assistance. These are often implemented in cooperation with the Ministry of Trade (MT).

Outputs

During the period of the NPA, the following outputs will be produced:

- 5.1 Public and private sector employers, including civil society organizations, and the general public better informed about the provisions of Proclamation No. 568/2008.
- 5.2 Public and private sector employers informed about the ILO Code of Practice on Managing Disability in the Workplace (2001).
- 5.3 Technical advisory services and tax incentives provided to private sector employers who employ registered persons with disabilities.
- 5.4 System for the registration of persons with disabilities introduced by MOLSA Department of Labour and Regional Labour & Social Affairs.
- 5.5 Annual Job Fair organized in collaboration with the Federal Civil Service Agency, private employment agencies, universities and NGOs.
- 5.6 Priority in Government procurement of selected goods and services given to organizations, cooperatives and companies employing a majority of workers with disabilities.
- 5.7 Establishment of "social enterprises" (profit-making as well as non-profit firms that have as a mission to employ persons with disabilities) facilitated and supported.
- 5.8 Discrimination in the provision of banking and micro-finance services to persons with disabilities made illegal.
- 5.9 Self-help groups of persons with disabilities engaged in income generating activities have increased access to business skills training and business development services.
- 5.10 Capacity of micro-finance institutions and business development service organizations to provide services to clients with disabilities increased.
- 5.11 Greater international donor support obtained for the development of businesses run by individuals or groups of persons with disabilities.

Activities

To produce the above Outputs, the following activities will be undertaken (by responsible national entity in brackets):

- 5.1 Prepare informational materials and organize events to increase the awareness of public and private sector employers, including civil society organizations, and the general public about the provisions of Proclamation No. 568/2008 (MOLSA, regional Labour & Social Affairs).
- 5.2 Prepare and disseminate the ILO Code of Practice on Managing Disability in the Workplace in national languages (MOLSA).
- 5.3 Formulate and introduce legislation to provide for tax incentives to private sector employers who employ registered persons with disabilities (MOLSA).
- 5.4 Develop and implement a system for the registration of persons with disabilities (MOLSA and regional Labour & Social Affairs).
- 5.5 Support the organization and participate in an annual Job Fair, organized in collaboration with the Ministry Civil Service, private employment agencies, universities and NGOs (MOLSA).
- 5.6 Develop and implement a system for the preferential procurement of Government selected goods and services from organizations, cooperatives and companies employing a majority of workers with disabilities (MOLSA).
- 5.7 Support and facilitate the establishment of "social enterprises" employing persons with disabilities (MOLSA, MT).
- 5.8 Formulate and introduce legislation making discrimination in the provision of banking and micro-finance services to persons with disabilities illegal (MOLSA, NBE).
- 5.9 Provide increased access to business skills training and business development services (BDS) for self-help groups of persons with disabilities engaged in income generating activities (MT).
- 5.10 Provide training to personnel of micro-finance institutions (MFIs) and business development service organizations in service delivery to clients with disabilities (MT).
- 5.11 Require all MFIs to eliminate discriminatory provisions in their criteria for providing credit (NBE).
- 5.12 Solicit greater international donor technical and material support for the development of businesses run by individuals or groups of persons with disabilities (MOLSA, MT).

Indicators

- Information materials produced
- Legislation introduced
- System for registration of workers with disabilities
- Number of persons with disabilities (M/F) participating in job fairs
- System for preferential procurement of Government goods and services
- Number of social enterprises established
- Increased number of groups of persons with disabilities accessing skills training and BDS
- Number of MFI and BDS program personnel trained
- Value (in Birr) of international technical and material support

2.3.6 Priority 6: Social Protection

Lead Agency: MOLSA

Collaborators: MOE, MOH, Ministry of Justice, Ministry of Civil Service, Ministry of Agriculture, Ministry of communication and Information Technology, the respective regional bureaus, DPOS, NGOS, etc

Many Ethiopians with disabilities are forced to beg for survival. This is not only demeaning for the individual but does not guarantee a steady and adequate means of existence.

The UN CRPDs (Article 28) recognizes the right of persons with disabilities to an adequate standard of living for themselves and their families, including adequate food, clothing and housing, and to the continuous improvement of living conditions, and shall take appropriate steps to safeguard and promote the realization of this right without discrimination on the basis of disability. It recognizes the right of persons with disabilities to social protection and to the enjoyment of that right without discrimination on the basis of disability. Governments are required to take appropriate steps to safeguard and promote the realization of this right, including measures:

- a) To ensure equal access by persons with disabilities to clean water services, and to ensure access to appropriate and affordable services, devices and other assistance for disability-related needs;
- b) To ensure access by persons with disabilities, in particular women and girls with disabilities and older persons with disabilities, to social protection programmes and poverty reduction programmes;
- c) To ensure access by persons with disabilities and their families living in situations of poverty to assistance from the State with disability-related expenses, including adequate training, counseling, financial assistance and respite care;
- d) To ensure access by persons with disabilities to public housing programmes;
- e) To ensure equal access by persons with disabilities to retirement benefits and programmes.

Objective 6: provide social protection for the poor, marginalized and vulnerable sector of the society

The Ministry of Labour and Social Affairs (MOLSA) and the social security agency are the major responsible bodies to facilitate the social assistance to individuals, including persons with disabilities who cannot work or support themselves. Although at present the Government lacks sufficient resources to provide social protection to all those who are unable to work, various social protection and social security systems are under consideration.

Many persons with disabilities are forced to rely upon the charity of others through begging for their survival. Although the giving of “alms” to the poor is encouraged by the major religions of Ethiopia, it is a practice that is demeaning for the individual and does not provide a regular and adequate source of income. As Ethiopia develops, an institutionalized system of social protection will be required.

Outputs

During the period of the NPA, the following outputs will be produced:

- 6.1 Existing social security systems expanded to cover an increased number of beneficiaries, including persons with disabilities.
- 6.2 System of social protection through micro-insurance designed, implemented in a pilot Region.
- 6.3 Study completed on the viability of introducing a system of social allocations to needy persons with disabilities, their families and care-givers.
- 6.4 Plan formulated, in collaboration with religious authorities, to create alternate ways of supporting the poor, in order to limit the practice of begging.
- 6.5 Number of persons with disabilities and their families participating in the Productive Safety Net Program (PSNP) increased.
- 6.6 Policy guidance and technical support provided to Regional Labour & Social Affairs for the provision of social protection services to poor persons with disabilities.
- 6.7 Charitable organizations providing social welfare services and support to meet the needs of persons with disabilities living in poverty strengthened.
- 6.8 Programs and facilities providing day care, services by care-givers and other services to children and adults with intellectual, developmental and other disabilities strengthened.
- 6.9 Organizations and programs providing services to persons with disabilities, including housing, transport, wheelchairs and adaptive equipment, counseling, referral and other services strengthened.
- 6.10 MOLSA and the social security agency have capacity to plan and implement social security schemes covering persons with disabilities increased.
- 6.11 Developed strategies to enhance the productivity of persons with disabilities.

Activities

To produce the above Outputs, the following activities will be undertaken (by responsible national entity in brackets):

- 6.1 Expand existing social security systems to cover an increased number of beneficiaries, including persons with disabilities.
- 6.2 Design and implement in a pilot Region a system of social protection through micro-insurance targeting among other, persons with disabilities.
- 6.3 Undertake a study on the viability of introducing a comprehensive social protection program, including a system of social allocations to needy persons with disabilities and their families (MOLSA 6.4 Formulate a Plan, in collaboration with religious authorities, to create alternate ways of supporting the poor, in order to limit the practice of begging .
- 6.5 Increase the number of persons with disabilities and their families participating in and benefiting from the Productive Safety Net Program (PSNP) (MOFED, BOFEDs).
- 6.6 Provide policy guidance and technical support to Regional Labour & Social Affairs for the provision of social welfare services to poor persons with disabilities.
- 6.7 Strengthen through material and other support charitable organizations providing social welfare services and support to meet the needs of persons with disabilities living in poverty.
- 6.8 Strengthen through material and other support programs and facilities providing day care and other services to children and adults with intellectual and other developmental disabilities.
- 6.9 Strengthen through material and other support organizations and programs providing services to persons with disabilities, including housing, transport, wheelchairs and adaptive equipment, counseling, referral and other services.
- 6.10 Liaise with UN and other international organizations to obtain information and technical and material support for social security and other social assistance schemes.
- 6.11 Implement comprehensive social protection policy of Ethiopia (MOLSA).

Indicators

- Number of persons with disabilities covered by social security systems
- Number of persons with disabilities receiving social assistance
- Number of persons with disabilities benefiting from the PSNP
- Plan for providing support to persons with disabilities who dependent on begging
- Number of children with disabilities assisted by charitable organizations
- Number of persons with intellectual disabilities assisted
- Number of organizations providing services at national and regional levels
- Value (in Birr) of international technical and material support
- Endorsed social protection policy.

2.3.7 Priority 7: Living Environments

Lead Agency: Ministry of Transport

Collaborators : Ministry of Justice, Ministry Urban Development and Construction, Ministry of Communication and Information Technology, Ministry of Agriculture & the respective regional bureaus, DPOs, NGOS, etc

Persons with physical, visual, hearing or other impairments in Ethiopia are citizens, consumers, students and workers. They need, deserve and have a right to access services and opportunities provided to everyone else. Yet the built environment, especially of towns and cities, is inaccessible. By building and maintaining barriers, society excludes and discriminates against persons with disabilities. By doing so, society loses the contribution of persons with disabilities.

An accessible infrastructure and environment not only benefits people with disabilities but a wide range of people such as elders who have difficulties in walking, pregnant women and young mothers pushing baby strollers, people with cardiac problems, persons carrying heavy loads, and people with temporary impairments such as a broken leg. Anyone can or will join one of these categories sooner or later in life; creating accessibility and inclusive living environments thus concerns a much larger public than only persons with disabilities.

Buildings and homes, roads and sidewalks, parks and sports grounds, recreational areas and other structures and spaces should be designed or adapted in a way that meets the needs of as many people as possible, including persons with disabilities. It is much easier to consider accessible designs at the beginning of a project because if taken into account during the conception phase accessible design represents only 2%, often less, of the total cost of a building. It is never too late to make accessible modifications to an already existing building; often the cost of such “retro-fitting” is minor.

The UN CRPDs recognizes the right of persons with disabilities to live independently and participate fully in all aspects of life. In order to do so, Governments are required to “take appropriate measures to ensure to persons with disabilities access, on an equal basis with others, to the physical environment, to transportation, to information and communications, including information and communications technologies and systems, and to other facilities and services open or provided to the public, both in urban and in rural areas. These measures, which shall include the identification and elimination of obstacles and barriers to accessibility, shall apply to:

- a) Buildings, roads, transportation and other indoor and outdoor facilities, including schools, housing, medical facilities and workplaces;
- b) Information, communications and other services, including electronic services and emergency services.
- c) Develop, promulgate and monitor the implementation of minimum standards and guidelines for the accessibility of facilities and services open or provided to the public;

- d) Ensure that private entities that offer facilities and services which are open or provided to the public take into account all aspects of accessibility for persons with disabilities;
- e) Provide training for stakeholders on accessibility issues facing persons with disabilities;
- f) Provide in buildings and other facilities open to the public signage in Braille and in easy to read and understand forms;
- g) Provide forms of live assistance and intermediaries, including guides, readers and professional sign language interpreters, to facilitate accessibility to buildings and other facilities open to the public;
- h) Promote other appropriate forms of assistance and support to persons with disabilities to ensure their access to information;
- i) Promote access for persons with disabilities to new information and communications technologies and systems, including the Internet;
- j) Promote the design, development, production and distribution of accessible information and communications technologies and systems at an early stage, so that these technologies and systems become accessible at minimum cost.”

Objective 7: Accessible living and transport available to persons with disabilities in all communities

The Developmental Social Welfare Policy of MOLSA calls for the gradual removal of physical barriers in order to make a more accessible environment for persons with disabilities in the community. The Ethiopian Building Proclamation No. 624/2009 requires all new buildings to be accessible for persons with physical and mobility impairments. Regulations providing technical specifications for the construction of accessible buildings are being prepared by the Ministry of Works and Urban Development (MWUD). The Proclamation is an important first step towards ensuring that all future urban construction is accessible to persons with disabilities.

Outputs

During the period of the NPA, the following outputs will be produced:

- 7.1 Technical standards for accessible building design in Ethiopia published in English and Amharic.
- 7.2 Architects, building contractors, government officials and the general public having greater awareness of accessibility issues.
- 7.3 Guide to Accessible Addis Ababa published.
- 7.4 Good examples of accessible building design identified, shared and publicly recognized.
- 7.5 Study on accessible transportation alternatives for Addis Ababa completed.
- 7.6 Hearing-impaired persons allowed to operate motor vehicles.

- 7.7 All public and private transportation vehicles (buses, taxis) clearly indicate in writing their destination, for ease of use by deaf and hearing impaired persons.
- 7.8 Module on “universal design” (design solutions that produce buildings, products and environments that are usable and effective for everyone, not just people with disabilities) introduced in university courses for architects.
- 7.9 Federal and Regional Government services made accessible to persons with disabilities.
- 7.10 Public housing, including condominiums, includes at least 10% housing accessible for persons with disabilities.
- 7.11 Tax incentives introduced for employers to partially meet the cost of reasonable accommodations as well as building modifications and equipment adaptations required for the employment of individuals with disabilities.
- 7.12 Parliament, City Hall, the National Theatre, and other important public buildings are made accessible.
- 7.13 All newly constructed university classrooms, dining halls, dormitories and other facilities are made accessible for students with disabilities.
- 7.14 Parks, recreational and sports facilities are made accessible for persons with disabilities.
- 7.15 MUDC capacity to plan and implement universal design, accessible building and other accessible design increased.

Activities

To produce the above Outputs, the following activities will be undertaken (by responsible national entity in brackets):

- 7.1 Prepare and publish in English and Amharic a manual of technical standards for accessible building design in Ethiopia (MUDC).
- 7.2 Organize information materials and seminars for architects, building contractors, government officials and the general public on accessibility issues, standards and universal design (MUDC).
- 7.3 Support the preparation and dissemination of a Guide to Accessible Addis Ababa (MOLSA).
- 7.4 Identify, share and publicly recognize good examples of accessible building design (MUDC).
- 7.5 Undertake a study on accessible transportation alternatives for Addis Ababa and other cities and towns (MUDC).

- 7.6 Change the regulations to allow hearing-impaired persons to operate motor vehicles, as is the case in other countries (MTC).
- 7.7 Design and introduce a module on universal design for university courses for architects (MOE).
- 7.8 Identify key Federal and Regional Government services and make them accessible to persons with disabilities (MOLSA).
- 7.9 In the design and construction of public housing, including condominiums, ensure that at least 10% of all housing units are accessible and available for persons with disabilities (MUDC).
- 7.10 Introduce tax incentives for employers to partially meet the cost of reasonable accommodations, including building modifications and equipment adaptations required for the employment of individuals with disabilities (MOLSA).
- 7.11 Commission and implement studies on how to make Parliament, City Hall, the National Theatre, and other important public buildings accessible (MUDC).
- 7.12 Require that all newly constructed university classrooms, dining halls, dormitories and other facilities are made accessible for students with disabilities (MOE).
- 7.13 Commission and implement a study on how to make public parks, recreational and sports facilities accessible for persons with disabilities (MUDC).

Indicators

- Manuals, guides on accessibility technical standards
- Number of persons informed about accessibility issues
- Study report on accessible transport alternatives for Addis Ababa
- Number of university courses that include information on accessibility issues and universal design
- Number of university students exposed to accessible design concepts and standards
- Government services accessible to persons with disabilities
- Number of accessible public housing units available to persons with disabilities
- Number of employers obtaining tax relief for the employment of persons with disabilities
- Study reports on making important public building accessible
- Number of accessible buildings at AAU and universities in the Regions
- Study report on making public parks, recreational and sports facilities accessible
- Value (in Birr) of international technical and material support.

2.3.8 Priority 8: Culture, Sports and Recreation

Lead Agency: Ministry of Culture and Tourism,
Collaborators: Sport Commission, Ministry of Agriculture, Ministry of Communication and Information Technology & the respective regional bureaus, DPOS, NGOS, etc

Participation in community cultural, sporting and recreational activities and events by persons with disabilities in Ethiopia is limited. This is due to a variety of reasons: lack of accessibility, lack of welcome, lack of adapted facilities and equipment lack of accessible communication and information, cost, etc.

The UNCRPD recognizes the right of persons with disabilities to take part on an equal basis with others in cultural life. Governments are required “to take all appropriate measures to ensure that persons with disabilities:

- a) Enjoy access to cultural materials in accessible formats;
- b) Enjoy access to television programmes, films, theatre and other cultural activities, in accessible formats;
- c) Enjoy accesses to places for cultural performances or services, such as theatres, museums, cinemas, libraries and tourism services, and, as far as possible, enjoy access to monuments and sites of national cultural importance.”

Governments will also “take appropriate measures to enable persons with disabilities to have the opportunity to develop and utilize their creative, artistic and intellectual potential not only for their own benefit but also for the enrichment of society, and take all appropriate steps, in accordance with international law, to ensure that laws protecting intellectual property rights do not constitute an unreasonable or discriminatory barrier to access by persons with disabilities to cultural materials.

Persons with disabilities shall be entitled on an equal basis with others to recognition and support of their specific cultural and linguistic identity including sign languages and deaf culture.”

With a view to enabling persons with disabilities to participate on an equal basis with others in recreational, leisure and sporting activities, Governments will “take appropriate measures:

- a) To encourage and promote the participation to the fullest extent possible, of persons with disabilities in mainstream sporting activities at all levels;
- b) To ensure that persons with disabilities have an opportunity to organize, develop and participate in disability-specific sporting and recreational activities and, to this end, encourage the provision on an equal basis with others, of appropriate instruction, training and resources;

- c) To ensure that persons with disabilities have access to sporting, recreational and tourism venues;
- d) To ensure that children with disabilities have equal access with other children to participation in play, recreation and leisure and sporting activities, including those activities in the school system;
- e) To ensure that persons with disabilities have access to services from those involved in the organization of recreational, tourism, leisure and sporting activities.”

Objective 8: Culture, sports, and recreation opportunities available to persons with disabilities

The Ministry of Culture and Tourism (MCT) and Sport Commission (SC) have a responsibility to ensure that children, youth and adults with disabilities have opportunities to access and participate in cultural, sports and recreational activities in the community. In addition, the Ministry of Communication & Information Technology has a responsibility to ensure access to television by deaf and hearing impaired persons.

Outputs

During the period of the NPA, the following outputs will be produced:

- 8.1 Cultural information materials are available in alternative accessible formats.
- 8.2 Closed captioning introduced and sign language interpretation available for an increased number of television programs.
- 8.3 Films are made available with sub-titles.
- 8.4 All theatres, cinemas and museums in the country are accessible to persons with mobility impairments.
- 8.5 All major cultural activities and performances are organized in physically accessible venues and feature sign language interpretation.
- 8.6 All libraries in the country include books in Braille.
- 8.7 Tourist facilities, including the offices of tourist agencies, are accessible to persons with disabilities.
- 8.8 Major historical monuments and sites of national cultural importance are accessible to persons with disabilities.
- 8.9 The facilities and courses of music schools and schools of art and design are accessible to persons with disabilities.

- 8.10 Travel agents, tour operators, and personnel responsible for maintaining historical and cultural sites trained in disability awareness.
- 8.11 Capacity of the Ministry of Culture and Tourism increased to provide guidance to and collaborate with the relevant responsible Ministries (MUDC and others) to improve the accessibility of cultural and tourist facilities.
- 8.12 Sports facilities, including stadiums, swimming pools and fitness centers accessible to persons with disabilities
- 8.13 Community recreation centers and programs accessible to persons with disabilities.
- 8.14 All national sporting events, including national competitions and university competitions, include events for athletes with disabilities.
- 8.15 Capacity of national, regional and local sports associations of persons with disabilities strengthened.
- 8.16 Capacity of the National Para Olympics Committee (NPC) strengthened.
- 8.17 Sports and recreation personnel trained in disability awareness and how to conduct sporting activities for persons with disabilities, including women with disabilities.
- 8.18 Capacity of Sport Commission increased to provide guidance to and collaborate with the relevant responsible Ministries (MUDC and others) to improve the accessibility of sports and recreation facilities.

Activities

To produce the above Outputs, the following activities will be undertaken (by responsible national entity in brackets):

- 8.1 Prepare, print and disseminate cultural information materials in accessible formats (MCIT).
- 8.2 Introduce closed captioning system for television, and make sign language interpretation available for an increased number of television programs (MCIT).
- 8.3 Require sub-titling of all films shown in Ethiopian cinemas (MCIT).
- 8.4 Mandate and facilitate modifications to all theatres, cinemas and museums in the country to make entrances and seating accessible to persons with mobility impairments (MCIT).
- 8.5 Encourage and facilitate the organization of all major cultural activities and performances in physically accessible venues and with sign language interpretation (MCIT).
- 8.6 Mandate and facilitate the acquisition of books in Braille and electronic format by all libraries in the country (MOE)

- 8.7 Mandate modifications to tourist facilities, including the offices of tourist agencies, to make them accessible to persons with disabilities (MCIT).
- 8.8 Undertake modifications to make major historical monuments and sites of national cultural importance accessible to persons with disabilities (MCIT).
- 8.9 Require and facilitate facilities and courses of music schools and schools of art and design to be made accessible to persons with disabilities (MOE).
- 8.10 Provide disability awareness training to travel agents, tour operators, and personnel responsible for maintaining historical and cultural sites (MCIT).
- 8.11 Liaise with UN, other international organizations and local DPOs and NGOs to obtain information and technical and material support for cultural accessibility modifications and disability awareness-raising training (MCIT).
- 8.12 Require sports facilities, including stadiums, swimming pools and fitness centers to be made accessible to persons with disabilities (SC).
- 8.13 Require community recreation centers and programs to be made accessible to persons with disabilities (SC).
- 8.14 Require and facilitate all national and regional sporting events, including university competitions, to include events for athletes with disabilities (SC).
- 8.15 Provide technical and material support to national, regional and local sports associations of persons with disabilities (SC).
- 8.16 Provide technical and material support to the National Sports Federation and the National Paralympics Committee (NPC) to organize inclusive athletic events (SC).
- 8.17 Provide training in disability awareness to sports and recreation personnel and how to conduct sporting activities for persons with disabilities (SC).
- 8.18 Liaise with UN, other international organizations and local DPOs and NGOs to obtain information and technical and material support for sports accessibility modifications and disability awareness-raising training (SC).

Indicators

- Number of informational materials in alternative, accessible formats
- Number of films shown with sub-titles
- Number of accessible theatres, cinemas and museums
- Number of major cultural events that are accessible
- Number of libraries with Braille books
- Number of accessible travel agencies
- Number of accessible stadiums, swimming pools and fitness centers
- Number of accessible community recreation centers and programs
- Number of athletes with disabilities participating in organized national regional and local sports competitions, including university sports competitions
- Numbers of national, regional and local sports associations of persons with disabilities
- Number of sports and recreation personnel (M/F) trained
- Value (in Birr) of international technical and material support

2.3.9 Priority 9: Full Participation of Women with Disabilities

Lead Agency: Ministry of Women, Children and Youth Affairs

Collaborators: MOLSA, Ministry of Culture and Tourism, Sport Commission, Ministry of Agriculture, Ministry of Communication and Information Technology & the respective regional bureaus, DPOS, NGOS, etc

Women with disabilities in Ethiopia, as in other countries, face the double discrimination of being a woman and having a disability.

The UNCRPDs (Article 6) recognizes that women and girls with disabilities are subject to multiple discrimination, and in this regard Governments are required to "take measures to ensure the full and equal enjoyment by them of all human rights and fundamental freedoms, and to ensure the full development, advancement and empowerment of women, for the purpose of guaranteeing them the exercise and enjoyment of the human rights and fundamental freedoms set out in the present Convention.

Objective 9: Full participation and equality for women with disabilities

The ultimate responsibility for ensuring equality of opportunity and full participation of women with disabilities in society rests with the Ministry of Women, Children and Youth Affairs (MWCYA), in collaboration with Regional Bureaus of Women Children and Youth Affairs. Throughout the country activities are organized to strengthen the capacity of women and their organizations to undertake literacy, income generating and other empowerment activities. Few women with disabilities participate in these activities.

Outputs

During the period of the NPA, the following outputs will be produced:

- 9.1 Women leaders at national and regional levels and women with disabilities have information on how to include women and girls with disabilities in mainstream women empowerment programs.
- 9.2 The general public is better informed about the capabilities and contributions of women with disabilities.
- 9.3 90% increase in the number of women with disabilities participating in mainstream women's organizations.
- 9.4 70% increase in number of women with disabilities participating in income generating activities.
- 9.5 70 % increase in number of women with disabilities employed in public and private sector jobs.
- 9.6 Women leaders at national and regional levels trained in disability awareness.
- 9.7 Good examples of the inclusion of women with disabilities in mainstream women empowerment activities are identified shared and publicly recognized.
- 9.8 Capacity of national, regional and local associations of women with disabilities increased.
- 9.19 Capacity of the Ministry of Women, Children and Youth Affairs to promote and facilitate the inclusion of women with disabilities in its programs increased.
- 9.10 Capacity of other Ministries to ensure that women, including women with disabilities, have access to the programs and services that they provide.

Activities

To produce the above Outputs, the following activities will be undertaken (by responsible national entity in brackets):

- 9.1 Guide for women leaders at national and regional levels on how to include women and girls with disabilities in mainstreaming women empowerment programs produced and disseminated (MWCYA).
- 9.2 Informational materials prepared and disseminated for women with disabilities about mainstream women empowerment programs (MWCYA).
- 9.3 Radio and TV programs are planned and produced about the capabilities and contributions of women with disabilities (MWCYA).
- 9.4 Increase by 100% through active recruitment the number of women with disabilities participating in mainstream women's organizations (MWCYA).
- 9.5 Increase by 100% through active recruitment the number of women with disabilities participating in income generating activities (MWCYA).
- 9.6 Provide training to women leaders at national and regional levels in disability awareness (MWCYA).
- 9.7 Identify, share and publicly recognize good examples of the inclusion of women with disabilities in mainstream women empowerment activities (MWCYA).
- 9.8 Provide technical and material support to national, regional and local associations of women with disabilities (MWCYA, MOLSA).
- 9.9 Liaise with UN, other international organizations and local DPOs and NGOs to obtain information and technical and material support to promote and facilitate the inclusion of women with disabilities and disability awareness-raising training (MWCYA).
- 9.10 Provide technical support to other ministries to increase their capacity to include women with disabilities in their programs and services (MWCYA).

Indicators

- Guides, other informational materials
- Number of radio, TV programs
- Number of women with disabilities participating in mainstream women's organizations and programs
- Number of women with disabilities participating in income generating activities
- Number of women with disabilities employed in the public and private sectors
- Number of women leaders trained
- Number of examples of good practice identified and publicly recognized
- Number of associations with women disabilities
- Value (in Birr) of international technical and material support.

2.3.10 Priority 10: Self-representation through DPOs

Lead Agency: MOLSA

Collaborators: Sport Commission, Ministry of Communication and Information Technology, the respective regional bureaus, & DPOS, NGOS, etc

Persons with disabilities have established a variety of organizations for self-representation, self-help and to advocate for their rights. These organizations exist at national, regional and local levels, and can be composed of persons, women and men, with similar impairments, for example persons who are blind and visually impaired (uni-disability organizations), or of persons having a variety of impairments but living in the same community (cross-disability organizations). These organizations are often referred to as organizations of persons with disabilities (DPOs) and play an important role in giving persons with disabilities a voice to advocate for their rights and equal access to services and opportunities. United by the slogan "Nothing about us without us", DPOs are extremely important partners in all government and NGO programs, projects and service delivery. The UNCRPDs recognizes the right of persons with disabilities to self-representation and the exercise of this right needs to be encouraged and strengthened.

Objective 10: Persons with disabilities and their organizations playing leadership roles in local communities, regionally and nationally.

Persons with disabilities and their organizations are the first concerned and are the first to be consulted on all matters affecting and concerning them. The Ministry of Labour and Social Affairs consult systematically and regularly with the national associations of persons with disabilities and their umbrella organization, the Federation of Ethiopian National Associations of Persons with Disabilities (FENAPD). FENAPD is the leading organization for the organization of the annual national observance of the International Day of Persons with Disabilities. The Regional Implementation and Monitoring Coordinating Committee on Disability include DPOs representatives, as do various national steering committees, including the National Decade Steering Committee. Locally registered DPOs carry out important advocacy work on behalf of persons with disabilities.

Outputs

During the period of the NPA, the following outputs will be produced:

- 10.1 Capacity of national and regional associations of persons with disabilities strengthened.
- 10.2 Capacity of the Federation of Ethiopian National Associations of Persons with Disabilities (FENAPD) and its regional networks strengthened.
- 10.3 Capacity of persons with disabilities to understand their rights, recognize discrimination and be self-advocates increased.
- 10.4 Rights advocacy work of local DPOs strengthened.

- 10.5 Formal Government recognition that persons with disabilities are experts on their own experience.
- 10.6 Representatives of DPOs included on all Government consultative bodies, committees and task forces.
- 10.7 Representatives of DPOs consulted on all matters that affect persons with disabilities.
- 10.8 Public recognition of the achievements and leadership of persons with disabilities.
- 10.9 Leadership development and mentoring programs for persons with disabilities established.
- 10.10 National DPOs and FENAPD participating in and benefiting from membership in international disability organizations.

Activities

To produce the above Outputs, the following activities will be undertaken (by responsible national entity or entities in brackets):

- 10.1 Provide technical and material support to national and regional associations of persons with disabilities (MOLSA).
- 10.2 Provide technical and material support to the Federation of Ethiopian National Associations of Persons with Disabilities (FENAPD) and its regional networks (MOLSA).
- 10.3 Arrange for training to ensure that persons with disabilities understand their rights, recognize discrimination and are better able to be self-advocates (MOLSA, FENAPD, EIO).
- 10.4 Provide technical and material support for the rights advocacy work of local DPOs (MOLSA).
- 10.5 Prepare and disseminate formal Government statement that recognizes that persons with disabilities are experts on their own experience (MOLSA).
- 10.6 Invite a representative of DPOs to be a member of all Government consultative bodies, committees and task forces (OPM).
- 10.7 Ensure representation of DPOs in all Government decisions that affect persons with disabilities (OPM, MOLSA).
- 10.8 Organize annual event to publicly recognize the achievements and leadership of persons with disabilities (MOLSA).
- 10.9 Establish a leadership development and mentoring program for persons with disabilities (MOLSA, FENAPD).
- 10.10 Encourage and support national DPO and FENAPD membership and participation in international disability organizations (MOLSA, FENAPD).

Indicators

- Number of associations of persons with disabilities at all levels
- National network of DPOs
- Number of local DPOs engaged in rights advocacy work
- Number of Government consultative entities, committees, task forces, etc. having representation of DPOs
- Number of DPOs consulted
- Number of public recognition events
- Number of PWDs (M/F) trained
- Value (in Birr) of international technical and material support

2.3.11 Priority 11: Research and Information

Lead Agency: Central Statistical Agency (CSA)

Collaborators: MOLSA, MOE, MOH, Ministry of Agriculture, the Ministry of Communication and Information Technology, Universities & the concerned regional offices DPOs, NGOs, etc.

A major constraint in the preparation of the present NPA was the lack of reliable data and statistics about disability and persons with disabilities in the country. Little valid research has been carried out, and the accuracy of data that exist is often questionable. In addition, there has been a rapid growth in organizations working on disability in the country, but little comprehensive information about their activities and impact, despite the creation of a network for this purpose, the Ethiopian National Disability Action Network (ENDAN).

Comprehensive and accurate data on disability is a basic element for the planning, implementation and monitoring of services for persons with disabilities. The lack of reliable information impacts negatively on the planning and development of services and strategies for creating an enabling environment for the equalization of opportunities. Government, specifically the Central Statistical Agency (CSA), is responsible for compiling and disseminating information on disability and persons with disabilities to federal and regional authorities, and other interested organizations.

According to the UN CRPDs Article 31, Governments are required to collect appropriate information, including statistical and research data, to enable them to formulate and implement policies to give effect to the Convention.

Many persons with disabilities don't have access to information due to difficulties in communication. This is particularly the case of blind and visually impaired persons who don't have access to printed materials, and of deaf and hearing impaired persons who don't have access to radio, TV and other audio means of communication.

The UN CRPDs (Article 21) recognizes the right of persons with disabilities to freedom of expression and opinion. Governments are required to ensure this freedom, "including the freedom to seek, receive and impart information and ideas on an equal basis with others and through all forms of communication of their choice, as defined in Article 2 of the present Convention, including by:

- a) Providing information intended for the general public to persons with disabilities in accessible formats and technologies appropriate to different kinds of disabilities in a timely manner and without additional cost;
- b) Accepting and facilitating the use of sign languages, Braille, augmentative and alternative communication, and all other accessible means, modes and formats of communication of their choice by persons with disabilities in official interactions;
- c) Urging private entities that provide services to the general public, including through the Internet, to provide information and services in accessible and usable formats for persons with disabilities;

- d) Encouraging the mass media, including providers of information through the Internet, to make their services accessible to persons with disabilities;
- e) Recognizing and promoting the use of sign languages.”

Objective 11: Increased information on disability and persons with disabilities available and accessible information disseminated.

The Central Statistical Agency (CSA) has the responsibility to produce statistical data and information on disability and persons with disabilities in the country. The periodic CSA national housing and population census includes questions related to disability. Sample surveys conducted by NGOs also produce disability information. However, the full extent of disability and the number of persons with disabilities in the country remains unknown. In addition, information intended for the general public is seldom provided to persons with disabilities in accessible formats and technologies appropriate to different kinds of disabilities.

Outputs

During the period of the NPA, the following outputs will be produced:

- 11.1 The use of sign language, Braille, augmentative and alternative accessible forms of communication, used for official communications, information and interactions.
- 11.2 Internet service providers and website designers using software and formats accessible for persons with disabilities.
- 11.3 Additional information through research on the incidence and prevalence of disability in the country collected and available.
- 11.4 Information on the situation of children with disabilities in the country collected and available.
- 11.5 Capacity of MOLSA and CSA to conduct research on disability issues increased.
- 11.6 Committee of stakeholders established to identify priority areas and topics for research.
- 11.7 Committee at AAU established to identify priority areas and topics, and encourage research by students and faculty.

Activities

To produce the above Outputs, the following activities will be undertaken (by responsible national entity in brackets):

- 11.1 Promote the use of sign language, Braille, augmentative and alternative accessible forms of communication for official communications, information and interactions (MOLSA).
- 11.2 Encourage and train Internet service providers and website designers to use software and formats accessible for persons with disabilities (MOLSA).

- 11.3 Conduct supplementary sample surveys on the incidence and prevalence of disability in the country (CSA).
- 11.4 Conduct research on the situation of children with disabilities in the country (MOLSA).
- 11.5 Liaise with UN and other international organizations to obtain technical and material support (MOLSA).
- 11.6 Establish a committee of stakeholders, to include representatives of MOLSA, MOE, MOH, AAU, DPOs, and NGOs, to identify priorities for disability-related research (MOLSA).
- 11.7 Establish a committee, under the AAU Disability and Career Development Center (DCDC), to coordinate university research on disability-related topics (AAU).

Indicators

- Number of official Government communications available in alternative accessible formats
- Number of accessible Government and organization websites
- Information on incidence and prevalence of disability
- Information on situation of children with disabilities
- Value (in Birr) of international technical and material support

2.3.12 Priority 12: Human Resource Development

Lead Agency: MOLSA

Collaborators: MOE, MOH, Ministry of Women, Children and Youth Affairs, Ministry of Civil Service, Ministry of Science and Technology, Ministry of Agriculture the respective regional bureaus, DPOS, NGOS, etc

The lack of trained personnel to provide services and to work with persons with disabilities is a major constraint to the expansion of services and opportunities for persons with disabilities in Ethiopia. Such personnel include community health workers, community development workers, community-based rehabilitation personnel, specialized medical rehabilitation personnel, physical therapists, occupational therapists, orthopedic technicians, vocational counselors, teachers and TVET instructors trained in special needs and inclusive education, among others.

The UNCRPDs (Article 4.i) “promotes the training of professionals and staff working with persons with disabilities in the rights recognized in the Convention so as to better provide the assistance and services guaranteed by those rights.”

Objective 12: A public service that is aware and responsive to the rights and needs of persons with disabilities.

Disability is a cross-cutting issue, requiring the engagement of all ministries, government officials and civil servants in promoting and facilitating access to public services and the inclusion of persons with disabilities in all government programs. The Ministry of Labour and Social Affairs, being the lead Federal Ministry on disability issues, has a responsibility to provide guidance on inclusion and to increase the disability awareness of all government entities and personnel, at both Federal and Regional level, in collaboration with the Ministry of Civil Service.

Outputs

During the period of the NPA, the following outputs will be produced:

- 12.1 Federal and Regional civil servants informed about disability issues and the provision of inclusive services to persons with disabilities.
- 12.2 Zonal and Woreda level government officials informed about disability issues and the provision of inclusive services to persons with disabilities.
- 12.3 Disability audits of government service delivery conducted at Federal and Regional level.
- 12.4 Information and communications on all Government services made available in alternative accessible formats and methods, including Braille and electronic formats.
- 12.5 Increased numbers of sign language interpreters trained and employed in the civil service to facilitate service provision and the employment of deaf and hearing-impaired persons.

- 12.6 Rights advocacy activities of national and local organizations of persons with disabilities (DPOs) strengthened.
- 12.7 Capacity of the Federal and Regional Civil Services to promote and facilitate the provision of inclusive public services increased.
- 12.8 Capacity of the Ethiopian Institution of the Ombudsman (EIO) and the Ethiopian Human Rights Commission to promote and protect the rights of persons with disabilities increased.
- 12.9 Capacity of the Ministry of Labour and Social Affairs to provide leadership as an advocate for a disability aware and responsive civil service increased.

Activities

To produce the above Outputs, the following activities will be undertaken (by responsible national entity in brackets):

- 12.1 Prepare and disseminate a Guide for Federal and Regional civil servants on disability issues and the provision of inclusive services to persons with disabilities (MOLSA, MCS).
- 12.2 Prepare in national languages and disseminate a Guide for Zonal and Woreda level government officials on disability issues and the provision of inclusive services to persons with disabilities (MOLSA, MCS).
- 12.3 Organize and conduct disability audits of government service delivery at Federal and Regional level (MOLSA, MCS).
- 12.4 Provide information and communications on Government services to the public in alternative accessible formats and methods (MOLSA).
- 12.5 Increase the training and employment of sign language interpreters (MOE).
- 12.6 Provide technical and material support to the rights advocacy activities of national and local organizations of persons with disabilities (MOLSA).
- 12.7 Provide training to personnel of the Federal and Regional Civil Services on disability awareness and inclusive service delivery (MOLSA).
- 12.8 Provide disability awareness training to personnel of the Ethiopian Institution of the Ombudsman (EIO) and the Ethiopian Human Rights Commission on how to promote and protect the rights of persons with disabilities (MOLSA).
- 12.9 Liaise with UN, other international organizations and local DPOs and NGOs to obtain information and technical and material support to promote and facilitate inclusive service delivery and disability awareness-raising training (MOLSA).

Indicators

- IEC Informational guides on disability issues
- Information on building, service accessibility from disability audits
- Personnel trained
- Value (in Birr) of international technical and material support

2.3.13 Priority 13: International Cooperation

Lead Agency: MOLSA,
Collaborators: MOE, MOH, Ministry of Agriculture, Ministry of Communication and Information Technology & the respective regional bureaux, DPOs, NGOS, etc,

Persons with disabilities are benefiting from a variety of donor-funded initiatives to address the needs of persons with disabilities. However, they are inadequate in face of the challenges facing the Government in providing needed services and equal opportunities to the large number of children, youth and adults with disabilities in the country.

The UNCRPDs (Article 32) recognizes the importance of international cooperation and its promotion, in support of national efforts for the realization of the purpose and objectives of the Convention. Governments "will undertake appropriate and effective measures in this regard, between and among States and, as appropriate, in partnership with relevant international and regional organizations and civil society, in particular organizations of persons with disabilities. Such measures could include:

- a) Ensuring that international cooperation, including international development programmes, is inclusive of and accessible to persons with disabilities;
- b) Facilitating and supporting capacity-building, including through the exchange and sharing of information, experiences, training programmes and best practices;
- c) Facilitating cooperation in research and access to scientific and technical knowledge;
- d) Providing, as appropriate, technical and economic assistance, including by facilitating access to and sharing of accessible and assistive technologies, and through the transfer of technologies.

Objective 13: Increased international technical cooperation in support of inclusive programs and services for persons with disabilities

The UN Convention calls upon international organizations, national governments and development cooperation agencies to support efforts by developing countries to implementation of the provisions of the Convention. In order to do so, they need to receive requests for technical and material assistance from Governments and responsible ministries. The requests can be in the form of support for the inclusion of persons with disabilities in ongoing mainstream sector development and poverty reduction programs or support for disability-specific programs.

Outputs

- 13.2 Capacity of networks of Ethiopian DPOs and NGOs working on disability to support implementation of the NPA strengthened.
- 13.3 International partnerships created for the exchange of information with Government Ministries, Ethiopian DPOs and NGOs.
- 13.4 Government officials, DPOs and NGOs participate in and get information from international conferences related to disability, and to support implementation of the NPA.
- 13.5 Accessible and assistive technologies and technologies with adaptive equipment obtained.

Activities

To produce the above Outputs, the following activities will be undertaken (by responsible national entity in brackets):

- 13.1 Prepare and submit project proposals for international technical and financial support for the implementation of specific components of the NPA (MOLSA).
- 13.2 Provide technical and material support to networks of Ethiopian DPOs and NGOs working on disability to support implementation of the NPA (MOLSA).
- 13.3 Promote the creation of international partnerships for the exchange of information with Government Ministries, Ethiopian DPOs and NGOs (MOLSA).
- 13.4 Encourage and support Government officials, DPOs and NGOs to participate in and get information from international conferences related to disability, to support implementation of the NPA (MOLSA).
- 13.5 Request international organizations to share accessible and assistive technologies, and technologies and adaptive equipment obtained (MOLSA).

Indicators

- Number of proposals to donors
- Number of local partner networks assisted
- Number of international partnerships
- Number of officials participating in international conferences
- Value (in Birr) of international technical and material support

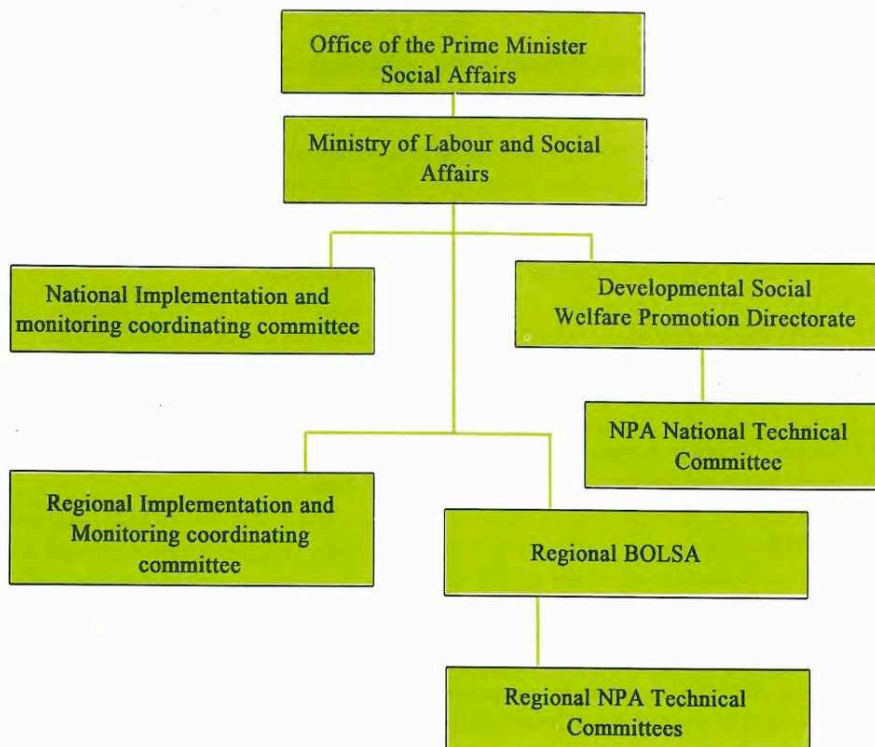
Chapter Three

3. Implementation Modalities

3.1 Institutional Arrangements

As disability is a cross-cutting issue requiring a multi-sectoral response, implementation of the NPA requires action by a number of Federal Ministries and Regional Bureaus, working in close collaboration with local authorities, organizations of persons with disabilities (DPOs), disability service providing NGOs, development NGOs, and the private sector. Although the Ministry of Labour and Social Affairs is the lead Federal Ministry in most of the disability matters, all Ministries have a responsibility to mainstream disability issues in their respective areas of technical competence. are indicated in the following figure.

Structure for the Implementation of the NPA



Institutional arrangements for implementation and monitoring of the NPA respective major roles, responsibilities of Federal, Regional and local authorities, other partners

3.1.1 Committee

3.1.1.1 National Implementation and Monitoring Coordinating Committee

Planning and implementation of the NPA will be coordinated by the National Implementing and Monitoring Committees, composed of representatives of key Federal Ministries and Regional Bureaus, relevant NGOs working on disability, DPOs, religious institutions etc. chaired by the Ministry of Labour and Social Affairs. Members of the NIMCC will be responsible for ensuring that their respective organization's plan NPA outputs and activities are included in their annual work plans and budgets. MOLSA will provide the Secretariat for the NIMCC. The National Coordinating Committee will meet periodically to review and coordinate the plans and budgets of the implementing Committee required for the implementation of the NPA. The National coordinating committee will receive reports from the Regional Coordinating Committees and prepare periodic reports on the implementation of the NPA, and on new and emerging disability policy issues affecting individuals with disabilities at Federal, Regional, local levels, and in the private sector.

3.1.1.2 Technical Committee

The National and Regional Implementation and Monitoring Coordinating Committees will establish NPA Technical Committees composed of representatives of key Government Ministries or Bureaus, NGOs and DPOs active in the Region and of appointed individual technical specialists to undertake planning and coordination work related to the NPA. The NPA Technical Committees report to their respective Coordinating Committees.

The Ministry of Labour and Social Affairs will represent the NIMCC to make recommendations to the Prime Minister, to the Council of Ministers, to appropriate Standing Committees of the House of Peoples' Representatives, and to specific Ministries, on policy and legislative issues, and on ways to improve the delivery of services and ensure the inclusion of persons with disabilities, and to address emerging policy and coordination issue.

The following is a summary of the respective roles and responsibilities of each Federal Ministry (and their corresponding Regional Bureaus), and of key implementing partners.

3.1.2 Federal Ministries

Ministry of Labour and Social Affairs (MOLSA)

implementation of the NPA, mobilize the allocation of resources, and provide information, guidance and technical and material support to other Federal Ministries, Regional Labour & Social Affairs, partner organizations (DPOs, NGOs) in the implementation of NPA activities. Provide a secretariat, chair and guide the work of the National Coordinating Committee. Ensure funding and support the monitoring of NPA implementation by the National and Regional coordinating committees. Provide policy guidance and training of the personnel of the Regional Labour & Social Affairs. Identify and recognize examples of good practice by Regions.

The Ministry of Labour and Social Affairs will receive reports from the National and Regional coordinating committees and report to Parliament annually on progress in the planning and implementation of the Plan. MOLSA will undertake a full review of progress of implementation and impact of the NPA at the end of the first five years of implementation, and make any necessary amendments.

Ministry of Health (MOH)

Roles and responsibilities: Develop and implement NPA activities to improve health care delivery to persons with disabilities, focusing on early detection, intervention, community-based rehabilitation and specialized medical rehabilitation, physiotherapy, and other hospital-based services. Ensure the inclusion of services for persons with disabilities in the Health Sector Development Programs. Provide guidance and support to Regional Health Bureaus for the implementation of NPA activities. Collaborate with MoLSA to develop and implement a strategy for the national coordination of provision of orthopedic services and devices, Support Regional Bureaus of Health to ensure the inclusion of modules on disability in training programs and curriculums of medical students at public and private universities, colleges, and other schools, in cooperation with the AAU Faculty of Medicine and MOE. Annual progress report on NPA implementation to be submitted to the NIMCC.

Ministry of Education (MOE)

Roles and responsibilities: Develop and implement the special needs and inclusive education activities of the NPA, as per the Special Needs Education Program Strategy and in collaboration with teacher education institutions (TEIs), the Regional Bureaus of Education and TVET institutions and agencies. Provide guidance on curriculum development to TEIs. Ensure the inclusion of educational opportunities for children with disabilities in Education Sector Development Programs. Annual progress report on NPA implementation to be submitted to the NIMCC.

Ministry of Culture and Tourism (MCT)

Roles and responsibilities: Organize awareness raising programs in cooperation with the Ministry of Transport on disability issues and persons with disabilities in order to promote the participation of persons with disabilities in cultural, sports, recreation and other activities. Annual progress report on NPA implementation to be submitted to the NIMCC.

Ministry of Industry (MOI)

Roles and responsibilities: Promote the inclusion of persons with disabilities in vocational skills training and income generating activities organized by the Federal Micro and Small Enterprise Development Agency (FeMSEDA), and in the activities of the Regional Micro and Small Enterprise Development Agencies (ReMSEDA). Promote and facilitate the development and provision of business development services to persons with disabilities engaged in micro and small business activities. Annual progress report on NPA implementation to be submitted to the NIMCC.

Ministry of Transport (MOT)

Roles and responsibilities: Undertake studies, develop and implement a plan for the provision of accessible transport to persons with disabilities in Addis Ababa, in Dire Dawa and in secondary cities and towns (roads, means of transport such as city bus & taxis). Annual progress report on NPA implementation to be submitted to the NIMCC.

Ministry of Science and Technology (MST)

Roles and responsibilities: Review needs and develop technologies required to enhance the mobility, communications and participation of persons with disabilities in society. Annual progress report on NPA implementation to be submitted to the NIMCC.

Sport Commission (SC)

Roles and responsibilities: Implement programs to facilitate the participation of persons with disabilities in organized youth activities, including recreation and community sports activities. Support the Ethiopian Sports Federation and the National Paralympics Committee to develop national and regional sports competitions for athletes with disabilities. Provide technical and material support to associations of athletes with disabilities. Facilitate the participation of athletes with disabilities in international sports tournaments. Annual progress report on NPA implementation to be submitted to the NIMCC.

Ministry of Agriculture (MOA)

Roles and responsibilities: Provide agricultural extension services to farmers with disabilities, and facilitate the inclusion of farmers with seeing, hearing and physical impairments in agricultural extension training and support programs. Ensure disability inclusive productivity. Annual progress report on NPA implementation to be submitted to the NIMCC.

Ministry of Urban Development and Construction (MUDC)

Roles and responsibilities: Provide technical guidance on accessible design and collaborate with relevant ministries and agencies on the construction of new public works and the upgrading of existing public buildings to ensure their accessibility for persons with disabilities, in accordance with the Ethiopian Building Proclamation and international standards. Provide technical guidance on accessible design and building standards to architects and contractors. Annual progress report on NPA implementation to be submitted to the NIMCC.

Ministry of Finance and Economic Development (MOFED)

Roles and responsibilities: Ensure adequate financing to Federal Ministries and Agencies for the implementation of the NPA. Collaborate with MOLSA in issuing guidance on the use of allocated NPA budget resources. Include NPA activities and financing in development plan of Ethiopia.

Ministry of Women, Children and Youth Affairs (MWCYA)

Roles and responsibilities: Promote the inclusion of women, Children and Youth with disabilities in all the programs and services of all ministries. Ensure non-discrimination towards women and disabilities in women literacy, empowerment, and livelihood initiatives. Encourage women with disabilities to participate as members in mainstream women's organizations. Promote the prevention of disability at early childhood and the involvement of the youth with disability in development programs. Annual progress report on NPA implementation to be submitted to the NIMCC.

Ministry of Justice (MOJ)

Roles and responsibilities: Undertake a review of all laws and legislation to identify discriminatory provisions, and act to remove all such discrimination towards persons with disabilities. Propose new laws and required legislation to ensure equality of opportunity and respect for the rights of persons with disabilities. Annual progress report on NPA implementation to be submitted to the NIMCC.

Ministry of Civil Service (MCS)

Roles and responsibilities: Promote and facilitate the recruitment, hiring and advancement of persons with disabilities in the federal civil service. Undertake assessment to ensure the affirmative measures are in place as per the proclamation. Provide guidance to regional civil service agencies on the employment of persons with disabilities.

Undertake a review of the capacity-building needs of all Federal Ministries concerning their ability to implement the required actions of the NPA, and develop capacity-building programs to address the capacity deficits and needs identified. Annual progress report on NPA implementation to be submitted to the NIMCC.

Office of Government Communication Affairs

Roles and responsibilities: Raise public awareness and advocate the issues of PWDs in collaboration with MoLSA and other relevant bodies. Ensure accessibility of telecommunications systems to persons with different types of disabilities, and the dissemination of information through alternative, accessible formats. Facilitate the use of radio and TV by DPOs and NGOs for disability awareness-raising purposes. Braille and other innovations related with new technologies. Annual progress report on NPA implementation to be submitted to the NIMCC.

3.1.3 Commissions and Institutions**Federal and Regional Police**

Roles and responsibilities: Ensure non-discrimination in protecting the security and rights of children, youth and adults with disabilities. Ensure police officers have training in disability

Ethiopian Institution of the Ombudsman

Roles and responsibilities: Promote and protect the rights of citizens with disabilities by investigating complaints of discrimination and government maladministration reported by individuals and groups of persons with disabilities.

3.1.4 Regional Committee**3.1.4.1 Regional Implementation and Monitoring Coordinating Committees**

Regional coordinating committee, composed of representatives of the Regional Executive and concerned Regional Bureaus, relevant NGOs working on disability, DPOs, religious institutions will have the same responsibility as the national one in ensuring adequate planning and coordination of actions required for implementation of the NPA at Regional level. The respective Regional Bureaus of Labour and Social Affairs will provide the Secretariat for the Regional Coordinating committee.

3.1.4.2 Technical Committee

The Regional Coordinating Committees will establish NPA Technical Committees composed of representatives of key Regional Bureaus, NGOs and DPOs active in the Region and of appointed individual technical specialists to undertake planning and coordination work related to the NPA. The NPA Technical Committees report to their respective Coordinating Committee.

3.1.5 Regional Bureaus

Roles and responsibilities: coordinate the implementation of relevant NPA activities, support regional organizations of persons with disabilities, provide policy guidance, mobilize and allocate local resources in support of NPA activities at Regional and Woreda levels, gather disability data and information, identify and recognize examples of good practices, Attend regular and extra ordinary meetings of the NIMCC. Ensure adequate annual financial support for the Regional coordinating committee.

3.1.6 Local authorities (zonal, woreda levels)

Roles and responsibilities: Realize that the implementing the NPA is part of the development agenda. identify people with disabilities, mobilize local resources, develop and implement policies and promote the delivery of social services, implement NPA activities at local level. Ensure the participation of persons with disabilities and their families in the Productive Safety Net and other Program. Promote and facilitate income generation activities by individuals and groups of persons with disabilities. Provide material support to local associations of persons with disabilities and involve them in the implementation of NPA activities

3.1.7 Other Stakeholders**3.1.7.1 DPOs, Networks of DPOs**

Roles and responsibilities: being the first interested party on all disability matters, provide guidance to Federal Ministries and Regional Governments and Bureaus on disability policy and

legislation, participate actively on all Government committees, task forces and other consultative entities including the National and Regional Disability coordinating committees, participate in the planning and implementation of activities of the NPA, mobilize persons with disabilities and provide self-advocacy and leadership training so as to better influence the implementation on Government policies and the NPA. Advocate to increase the number of persons with disabilities to their respective associations.

3.1.7.2 Disability NGOs, Networks of NGOs

Roles and responsibilities: provide technical guidance, delivery of services and support for the implementation of NPA activities, in collaboration with Government and DPOs. Participate actively on the Regional Disability coordinating committees.

3.1.7.3 Development NGOs

Roles and responsibilities: Ensure the inclusion of persons with disabilities in the development programs and projects, in support of the objectives of the NPA. Collaborate with Government Bureaus and local authorities in the implementation of NPA activities.

3.1.7.4 Private sector

Roles and responsibilities: The full participation of persons with disabilities in the Ethiopian labour force is the responsibility of all: government, employers' organizations, trade unions and public and private sector employers. The private sector has the responsibility to lead the way by employing persons with disabilities and ensuring that no discrimination takes place in the recruitment, hiring, promotion and firing of workers with disabilities. Private sector employers also identify skills training needs for workers and suggest which are appropriate for persons with disabilities.

3.2 Monitoring and Evaluation System

Implementation of the NPA requires the need to establish a monitoring & evaluation (M & E) mechanism as an essential part to facilitate the outcome and ensure the impact during and after the implementation. This will be done through periodic review and appraisal in view of socio-economic situation of the country as well as the government Growth and Transformation Plan /GTP/. Both national and regional coordinating committees shall be responsible to review and update the plan of action periodically. The time for M&E shall be made through decision forwarded by the National Implementation and Monitoring Coordinating Committee.

Although there have been some efforts being made by various bodies to put Management Information System /MIS/ in place, they are fragmented and does not give enough room for a comprehensive national programme for PWDs. Therefore, all key stakeholders will be informed and supported to utilize the current e-government and future innovations in the Information and Communication Technology /ICT/ in running the plan of action.

To bring the NPA in its achievable goal, to improve and scale-up its implementation to a maximum level and to learn more from the best practice, there will be a mechanism of experience sharing with in the country and abroad

Chapter Four

4. Budgeting for the National Plan of Action of Persons with Disability 2012-2021

Implementation of the NPA involves coordinated, concurrent actions by multiple Ministries and all Regional Governments. Thus it is not possible to prepare one comprehensive federal implementation budget for the ten year implementation period. Each responsible federal ministry and each regional government of the country will include funds for their required NPA actions in their respective annual budgets. These governmental bodies will reflect in their budgets the specific roles and activities they will play and implement for mainstreaming and implementing the NPA. The Federal Ministry of Labor and Social Affairs will request an annual budget for the NIMCC and its NPA Technical Committee. Each Regional Government will take the responsibility of providing the required budget for its Regional coordinating committee and its respective NPA Technical Committee.

National DPOs need to be reinforced and their capacity increased to advice on support the implementation of the NPA at both federal and regional levels. The budget for DPOs capacity building will be planned and provided by the Ministry of Labor and Social Affairs. Government will be responsible for providing social security support for persons with disabilities who are not able to earn their own means of living per social protection policy directions.

NGOs will be encouraged to mainstream disability and persons with disabilities in their ongoing program activities, and will include such costs in their annual budgets. Disability services-providing organizations will plan and seek funds in their annual budgets to increase the coverage of their services to include increased numbers of rural towns and communities during the period of the NPA.

The NPA therefore does not include a total annual, or 10-year, cost figure or implementation budget. It is for each responsible Federal Ministry and Regional Government to determine a budget and provide funds for the implementation of their respective annual NPA-related implementation activities.

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፩. አጭር ርዕስ

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፪. የኮንቪንሽኑ መጽደቅ

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፬. አዋጁ የሚፀናበት ጊዜ

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A Proclamation to Ratify the Convention on the Rights of Persons with Disability

WHEREAS, The Convention on the Rights of persons with Disability has been adopted by the United Nations General Assembly on the 13th day of December 2006;

WHEREAS, The House of Peoples' Representatives of the Federal Democratic Republic of Ethiopia has ratified the said Convention at its session held on the 1st day of June, 2010;

1) Short Title

This Proclamation may be cited as the "Convention on the Rights of Persons with Disability Ratification Proclamation No. 676/2010."

2) Ratification of the Convention

The Convention on the Rights of Persons with Disability adopted by the United Nations General Assembly on the 13th day of December 2006 is hereby ratified.

3) Power of the Ministry of Labour and Social Affairs

The Ministry of Labour and Social Affairs is here by empowered to undertake all acts necessary for the implementation of the Convention.

4) Effective Date

This Proclamation shall enter into force up on the date of Publication in the Federal Negarit GaZeta.

Done at Addis Ababa, This 11th day of June, 2010

**GIRMA WOLDEGIORGIS
PRESIDENT OF THE FEDERAL
DEMOCRATIC REPUBLIC OF
ETHIOPIA**

ERRATUM

- At the bottom of page 62 title 3.1.3. Commission and Institutions please include

... awareness and know where to seek technical guidance and support in cases involving persons with different types of disabilities. Ensure the availability of sign language interpreters when dealing with individuals with hearing impairments.

- At the top of page 63 please include a topic Human Right Commission Roles and Responsibilities

Promote and protect the rights of citizens with disabilities through disability rights awareness raising campaign

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By the Ministry of Labour and Social
Affairs*

*This Document is available on the following
web site*

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Convention on
the Rights of Persons
with Disabilities and
Optional Protocol



UNITED NATIONS

CONVENTION ON THE RIGHTS OF PERSONS WITH DISABILITIES

Preamble

The States Parties to the present Convention,

(a) *Recalling* the principles proclaimed in the Charter of the United Nations which recognize the inherent dignity and worth and the equal and inalienable rights of all members of the human family as the foundation of freedom, justice and peace in the world,

(b) *Recognizing* that the United Nations, in the Universal Declaration of Human Rights and in the International Covenants on Human Rights, has proclaimed and agreed that everyone is entitled to all the rights and freedoms set forth therein, without distinction of any kind,

(c) *Reaffirming* the universality, indivisibility, interdependence and interrelatedness of all human rights and fundamental freedoms and the need for persons with disabilities to be guaranteed their full enjoyment without discrimination,

(d) *Recalling* the International Covenant on Economic, Social and Cultural Rights, the International Covenant on Civil and Political Rights, the International Convention on the Elimination of All Forms of Racial Discrimination, the Convention on the Elimination of All Forms of Discrimination against Women, the Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment, the Convention on the Rights of the Child, and the International Convention on the Protection of the Rights of All Migrant Workers and Members of Their Families,

(e) *Recognizing* that disability is an evolving concept and that disability results from the interaction between persons with impairments and attitudinal and environmental barriers that hinders their full and effective participation in society on an equal basis with others,

(f) *Recognizing* the importance of the principles and policy guidelines contained in the World Programme of Action concerning Disabled Persons and in the Standard Rules on the Equalization of Opportunities for Persons with Disabilities in influencing the promotion, formulation and evaluation of the policies, plans, programmes and actions at the national, regional and international levels to further equalize opportunities for persons with disabilities,

(g) *Emphasizing* the importance of mainstreaming disability issues as an integral part of relevant strategies of sustainable development,

(h) *Recognizing also* that discrimination against any person on the basis of disability is a violation of the inherent dignity and worth of the human person,

(i) *Recognizing further* the diversity of persons with disabilities,

(j) *Recognizing* the need to promote and protect the human rights of all persons with disabilities, including those who require more intensive support,

(k) *Concerned* that, despite these various instruments and undertakings, persons with disabilities continue to face barriers in their participation as equal members of society and violations of their human rights in all parts of the world,

(l) *Recognizing* the importance of international cooperation for improving the living conditions of persons with disabilities in every country, particularly in developing countries,

(m) *Recognizing* the valued existing and potential contributions made by persons with disabilities to the overall well-being and diversity of their communities, and that the promotion of the full enjoyment by persons with disabilities of their human rights and fundamental freedoms and of full participation by persons with disabilities will result in their enhanced sense of belonging and in significant advances in the human, social and economic development of society and the eradication of poverty,

(n) *Recognizing* the importance for persons with disabilities of their individual autonomy and independence, including the freedom to make their own choices,

(o) *Considering* that persons with disabilities should have the opportunity to be actively involved in decision-making processes about policies and programmes, including those directly concerning them,

(p) *Concerned* about the difficult conditions faced by persons with disabilities who are subject to multiple or aggravated forms of discrimination on the basis of race, colour, sex, language, religion, political or other opinion, national, ethnic, indigenous or social origin, property, birth, age or other status,

(q) *Recognizing* that women and girls with disabilities are often at greater risk, both within and outside the home, of violence, injury or abuse, neglect or negligent treatment, maltreatment or exploitation,

(r) *Recognizing* that children with disabilities should have full enjoyment of all human rights and fundamental freedoms on an equal basis

with other children, and recalling obligations to that end undertaken by States Parties to the Convention on the Rights of the Child,

(s) *Emphasizing* the need to incorporate a gender perspective in all efforts to promote the full enjoyment of human rights and fundamental freedoms by persons with disabilities,

(t) *Highlighting* the fact that the majority of persons with disabilities live in conditions of poverty, and in this regard recognizing the critical need to address the negative impact of poverty on persons with disabilities,

(u) *Bearing in mind* that conditions of peace and security based on full respect for the purposes and principles contained in the Charter of the United Nations and observance of applicable human rights instruments are indispensable for the full protection of persons with disabilities, in particular during armed conflicts and foreign occupation,

(v) *Recognizing* the importance of accessibility to the physical, social, economic and cultural environment, to health and education and to information and communication, in enabling persons with disabilities to fully enjoy all human rights and fundamental freedoms,

(w) *Realizing* that the individual, having duties to other individuals and to the community to which he or she belongs, is under a responsibility to strive for the promotion and observance of the rights recognized in the International Bill of Human Rights,

(x) *Convinced* that the family is the natural and fundamental group unit of society and is entitled to protection by society and the State, and that persons with disabilities and their family members should receive the necessary protection and assistance to enable families to contribute towards the full and equal enjoyment of the rights of persons with disabilities,

(y) *Convinced* that a comprehensive and integral international convention to promote and protect the rights and dignity of persons with disabilities will make a significant contribution to redressing the profound social disadvantage of persons with disabilities and promote their participation in the civil, political, economic, social and cultural spheres with equal opportunities, in both developing and developed countries,

Have agreed as follows:

Article 1 Purpose

The purpose of the present Convention is to promote, protect and ensure the full and equal enjoyment of all human rights and fundamental freedoms by all persons with disabilities, and to promote respect for their inherent dignity.

Persons with disabilities include those who have long-term physical, mental, intellectual or sensory impairments which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others.

Article 2 Definitions

For the purposes of the present Convention:

“Communication” includes languages, display of text, Braille, tactile communication, large print, accessible multimedia as well as written, audio, plain-language, human-reader and augmentative and alternative modes, means and formats of communication, including accessible information and communication technology;

“Language” includes spoken and signed languages and other forms of non spoken languages;

“Discrimination on the basis of disability” means any distinction, exclusion or restriction on the basis of disability which has the purpose or effect of impairing or nullifying the recognition, enjoyment or exercise, on an equal basis with others, of all human rights and fundamental freedoms in the political, economic, social, cultural, civil or any other field. It includes all forms of discrimination, including denial of reasonable accommodation;

“Reasonable accommodation” means necessary and appropriate modification and adjustments not imposing a disproportionate or undue burden, where needed in a particular case, to ensure to persons with disabilities the enjoyment or exercise on an equal basis with others of all human rights and fundamental freedoms;

“Universal design” means the design of products, environments, programmes and services to be usable by all people, to the greatest extent possible, without the need for adaptation or specialized design. “Universal design” shall not exclude assistive devices for particular groups of persons with disabilities where this is needed.

Article 3 General principles

The principles of the present Convention shall be:

- (a) Respect for inherent dignity, individual autonomy including the freedom to make one's own choices, and independence of persons;
- (b) Non-discrimination;
- (c) Full and effective participation and inclusion in society;
- (d) Respect for difference and acceptance of persons with disabilities as part of human diversity and humanity;
- (e) Equality of opportunity;
- (f) Accessibility;
- (g) Equality between men and women;
- (h) Respect for the evolving capacities of children with disabilities and respect for the right of children with disabilities to preserve their identities.

Article 4 General obligations

1. States Parties undertake to ensure and promote the full realization of all human rights and fundamental freedoms for all persons with disabilities without discrimination of any kind on the basis of disability. To this end, States Parties undertake:

- (a) To adopt all appropriate legislative, administrative and other measures for the implementation of the rights recognized in the present Convention;
- (b) To take all appropriate measures, including legislation, to modify or abolish existing laws, regulations, customs and practices that constitute discrimination against persons with disabilities;
- (c) To take into account the protection and promotion of the human rights of persons with disabilities in all policies and programmes;

(d) To refrain from engaging in any act or practice that is inconsistent with the present Convention and to ensure that public authorities and institutions act in conformity with the present Convention;

(e) To take all appropriate measures to eliminate discrimination on the basis of disability by any person, organization or private enterprise;

(f) To undertake or promote research and development of universally designed goods, services, equipment and facilities, as defined in article 2 of the present Convention, which should require the minimum possible adaptation and the least cost to meet the specific needs of a person with disabilities, to promote their availability and use, and to promote universal design in the development of standards and guidelines;

(g) To undertake or promote research and development of, and to promote the availability and use of new technologies, including information and communications technologies, mobility aids, devices and assistive technologies, suitable for persons with disabilities, giving priority to technologies at an affordable cost;

(h) To provide accessible information to persons with disabilities about mobility aids, devices and assistive technologies, including new technologies, as well as other forms of assistance, support services and facilities;

(i) To promote the training of professionals and staff working with persons with disabilities in the rights recognized in the present Convention so as to better provide the assistance and services guaranteed by those rights.

2. With regard to economic, social and cultural rights, each State Party undertakes to take measures to the maximum of its available resources and, where needed, within the framework of international cooperation, with a view to achieving progressively the full realization of these rights, without prejudice to those obligations contained in the present Convention that are immediately applicable according to international law.

3. In the development and implementation of legislation and policies to implement the present Convention, and in other decision-making processes concerning issues relating to persons with disabilities, States Parties shall closely consult with and actively involve persons with disabilities, including children with disabilities, through their representative organizations.

4. Nothing in the present Convention shall affect any provisions which are more conducive to the realization of the rights of persons with disabilities and which may be contained in the law of a State Party or international law in force for that State. There shall be no restriction upon or derogation from any of the

human rights and fundamental freedoms recognized or existing in any State Party to the present Convention pursuant to law, conventions, regulation or custom on the pretext that the present Convention does not recognize such rights or freedoms or that it recognizes them to a lesser extent.

5. The provisions of the present Convention shall extend to all parts of federal States without any limitations or exceptions.

Article 5 **Equality and non-discrimination**

1. States Parties recognize that all persons are equal before and under the law and are entitled without any discrimination to the equal protection and equal benefit of the law.

2. States Parties shall prohibit all discrimination on the basis of disability and guarantee to persons with disabilities equal and effective legal protection against discrimination on all grounds.

3. In order to promote equality and eliminate discrimination, States Parties shall take all appropriate steps to ensure that reasonable accommodation is provided.

4. Specific measures which are necessary to accelerate or achieve de facto equality of persons with disabilities shall not be considered discrimination under the terms of the present Convention.

Article 6 **Women with disabilities**

1. States Parties recognize that women and girls with disabilities are subject to multiple discrimination, and in this regard shall take measures to ensure the full and equal enjoyment by them of all human rights and fundamental freedoms.

2. States Parties shall take all appropriate measures to ensure the full development, advancement and empowerment of women, for the purpose of guaranteeing them the exercise and enjoyment of the human rights and fundamental freedoms set out in the present Convention.

Article 7 **Children with disabilities**

1. States Parties shall take all necessary measures to ensure the full enjoyment by children with disabilities of all human rights and fundamental freedoms on an equal basis with other children.

2. In all actions concerning children with disabilities, the best interests of the child shall be a primary consideration.

3. States Parties shall ensure that children with disabilities have the right to express their views freely on all matters affecting them, their views being given due weight in accordance with their age and maturity, on an equal basis with other children, and to be provided with disability and age-appropriate assistance to realize that right.

Article 8 **Awareness-raising**

1. States Parties undertake to adopt immediate, effective and appropriate measures:

(a) To raise awareness throughout society, including at the family level, regarding persons with disabilities, and to foster respect for the rights and dignity of persons with disabilities;

(b) To combat stereotypes, prejudices and harmful practices relating to persons with disabilities, including those based on sex and age, in all areas of life;

(c) To promote awareness of the capabilities and contributions of persons with disabilities.

2. Measures to this end include:

(a) Initiating and maintaining effective public awareness campaigns designed:

(i) To nurture receptiveness to the rights of persons with disabilities;

(ii) To promote positive perceptions and greater social awareness towards persons with disabilities;

(iii) To promote recognition of the skills, merits and abilities of persons with disabilities, and of their contributions to the workplace and the labour market;

(b) Fostering at all levels of the education system, including in all children from an early age, an attitude of respect for the rights of persons with disabilities;

(c) Encouraging all organs of the media to portray persons with disabilities in a manner consistent with the purpose of the present Convention;

(d) Promoting awareness-training programmes regarding persons with disabilities and the rights of persons with disabilities.

Article 9 Accessibility

1. To enable persons with disabilities to live independently and participate fully in all aspects of life, States Parties shall take appropriate measures to ensure to persons with disabilities access, on an equal basis with others, to the physical environment, to transportation, to information and communications, including information and communications technologies and systems, and to other facilities and services open or provided to the public, both in urban and in rural areas. These measures, which shall include the identification and elimination of obstacles and barriers to accessibility, shall apply to, inter alia:

(a) Buildings, roads, transportation and other indoor and outdoor facilities, including schools, housing, medical facilities and workplaces;

(b) Information, communications and other services, including electronic services and emergency services.

2. States Parties shall also take appropriate measures:

(a) To develop, promulgate and monitor the implementation of minimum standards and guidelines for the accessibility of facilities and services open or provided to the public;

(b) To ensure that private entities that offer facilities and services which are open or provided to the public take into account all aspects of accessibility for persons with disabilities;

(c) To provide training for stakeholders on accessibility issues facing persons with disabilities;

(d) To provide in buildings and other facilities open to the public signage in Braille and in easy to read and understand forms;

(e) To provide forms of live assistance and intermediaries, including guides, readers and professional sign language interpreters, to facilitate accessibility to buildings and other facilities open to the public;

(f) To promote other appropriate forms of assistance and support to persons with disabilities to ensure their access to information;

(g) To promote access for persons with disabilities to new information and communications technologies and systems, including the Internet;

(h) To promote the design, development, production and distribution of accessible information and communications technologies and systems at an early stage, so that these technologies and systems become accessible at minimum cost.

Article 10 Right to life

States Parties reaffirm that every human being has the inherent right to life and shall take all necessary measures to ensure its effective enjoyment by persons with disabilities on an equal basis with others.

Article 11 Situations of risk and humanitarian emergencies

States Parties shall take, in accordance with their obligations under international law, including international humanitarian law and international human rights law, all necessary measures to ensure the protection and safety of persons with disabilities in situations of risk, including situations of armed conflict, humanitarian emergencies and the occurrence of natural disasters.

Article 12 Equal recognition before the law

1. States Parties reaffirm that persons with disabilities have the right to recognition everywhere as persons before the law.
2. States Parties shall recognize that persons with disabilities enjoy legal capacity on an equal basis with others in all aspects of life.
3. States Parties shall take appropriate measures to provide access by persons with disabilities to the support they may require in exercising their legal capacity.
4. States Parties shall ensure that all measures that relate to the exercise of legal capacity provide for appropriate and effective safeguards to prevent abuse in accordance with international human rights law. Such safeguards shall ensure that measures relating to the exercise of legal capacity respect the rights, will and preferences of the person, are free of conflict of interest and undue influence, are proportional and tailored to the person's circumstances, apply for the shortest time possible and are subject to regular review by a competent, independent and impartial authority or judicial body. The

safeguards shall be proportional to the degree to which such measures affect the person's rights and interests.

5. Subject to the provisions of this article, States Parties shall take all appropriate and effective measures to ensure the equal right of persons with disabilities to own or inherit property, to control their own financial affairs and to have equal access to bank loans, mortgages and other forms of financial credit, and shall ensure that persons with disabilities are not arbitrarily deprived of their property.

Article 13
Access to justice

1. States Parties shall ensure effective access to justice for persons with disabilities on an equal basis with others, including through the provision of procedural and age-appropriate accommodations, in order to facilitate their effective role as direct and indirect participants, including as witnesses, in all legal proceedings, including at investigative and other preliminary stages.

2. In order to help to ensure effective access to justice for persons with disabilities, States Parties shall promote appropriate training for those working in the field of administration of justice, including police and prison staff.

Article 14
Liberty and security of person

1. States Parties shall ensure that persons with disabilities, on an equal basis with others:

(a) Enjoy the right to liberty and security of person;

(b) Are not deprived of their liberty unlawfully or arbitrarily, and that any deprivation of liberty is in conformity with the law, and that the existence of a disability shall in no case justify a deprivation of liberty.

2. States Parties shall ensure that if persons with disabilities are deprived of their liberty through any process, they are, on an equal basis with others, entitled to guarantees in accordance with international human rights law and shall be treated in compliance with the objectives and principles of the present Convention, including by provision of reasonable accommodation.

Article 15
**Freedom from torture or cruel, inhuman or degrading
treatment or punishment**

1. No one shall be subjected to torture or to cruel, inhuman or degrading treatment or punishment. In particular, no one shall be subjected without his or her free consent to medical or scientific experimentation.
2. States Parties shall take all effective legislative, administrative, judicial or other measures to prevent persons with disabilities, on an equal basis with others, from being subjected to torture or cruel, inhuman or degrading treatment or punishment.

Article 16
Freedom from exploitation, violence and abuse

1. States Parties shall take all appropriate legislative, administrative, social, educational and other measures to protect persons with disabilities, both within and outside the home, from all forms of exploitation, violence and abuse, including their gender-based aspects.
2. States Parties shall also take all appropriate measures to prevent all forms of exploitation, violence and abuse by ensuring, inter alia, appropriate forms of gender- and age-sensitive assistance and support for persons with disabilities and their families and caregivers, including through the provision of information and education on how to avoid, recognize and report instances of exploitation, violence and abuse. States Parties shall ensure that protection services are age-, gender- and disability-sensitive.
3. In order to prevent the occurrence of all forms of exploitation, violence and abuse, States Parties shall ensure that all facilities and programmes designed to serve persons with disabilities are effectively monitored by independent authorities.
4. States Parties shall take all appropriate measures to promote the physical, cognitive and psychological recovery, rehabilitation and social reintegration of persons with disabilities who become victims of any form of exploitation, violence or abuse, including through the provision of protection services. Such recovery and reintegration shall take place in an environment that fosters the health, welfare, self-respect, dignity and autonomy of the person and takes into account gender- and age-specific needs.
5. States Parties shall put in place effective legislation and policies, including women- and child-focused legislation and policies, to ensure that instances of exploitation, violence and abuse against persons with disabilities are identified, investigated and, where appropriate, prosecuted.

Article 17
Protecting the integrity of the person

Every person with disabilities has a right to respect for his or her physical and mental integrity on an equal basis with others.

Article 18
Liberty of movement and nationality

1. States Parties shall recognize the rights of persons with disabilities to liberty of movement, to freedom to choose their residence and to a nationality, on an equal basis with others, including by ensuring that persons with disabilities:

(a) Have the right to acquire and change a nationality and are not deprived of their nationality arbitrarily or on the basis of disability;

(b) Are not deprived, on the basis of disability, of their ability to obtain, possess and utilize documentation of their nationality or other documentation of identification, or to utilize relevant processes such as immigration proceedings, that may be needed to facilitate exercise of the right to liberty of movement;

(c) Are free to leave any country, including their own;

(d) Are not deprived, arbitrarily or on the basis of disability, of the right to enter their own country.

2. Children with disabilities shall be registered immediately after birth and shall have the right from birth to a name, the right to acquire a nationality and, as far as possible, the right to know and be cared for by their parents.

Article 19
Living independently and being included in the community

States Parties to the present Convention recognize the equal right of all persons with disabilities to live in the community, with choices equal to others, and shall take effective and appropriate measures to facilitate full enjoyment by persons with disabilities of this right and their full inclusion and participation in the community, including by ensuring that:

(a) Persons with disabilities have the opportunity to choose their place of residence and where and with whom they live on an equal basis with others and are not obliged to live in a particular living arrangement;

(b) Persons with disabilities have access to a range of in-home, residential and other community support services, including personal assistance necessary to support living and inclusion in the community, and to prevent isolation or segregation from the community;

(c) Community services and facilities for the general population are available on an equal basis to persons with disabilities and are responsive to their needs.

Article 20 **Personal mobility**

States Parties shall take effective measures to ensure personal mobility with the greatest possible independence for persons with disabilities, including by:

(a) Facilitating the personal mobility of persons with disabilities in the manner and at the time of their choice, and at affordable cost;

(b) Facilitating access by persons with disabilities to quality mobility aids, devices, assistive technologies and forms of live assistance and intermediaries, including by making them available at affordable cost;

(c) Providing training in mobility skills to persons with disabilities and to specialist staff working with persons with disabilities;

(d) Encouraging entities that produce mobility aids, devices and assistive technologies to take into account all aspects of mobility for persons with disabilities.

Article 21 **Freedom of expression and opinion, and access to information**

States Parties shall take all appropriate measures to ensure that persons with disabilities can exercise the right to freedom of expression and opinion, including the freedom to seek, receive and impart information and ideas on an equal basis with others and through all forms of communication of their choice, as defined in article 2 of the present Convention, including by:

(a) Providing information intended for the general public to persons with disabilities in accessible formats and technologies appropriate to different kinds of disabilities in a timely manner and without additional cost;

(b) Accepting and facilitating the use of sign languages, Braille, augmentative and alternative communication, and all other accessible means,

modes and formats of communication of their choice by persons with disabilities in official interactions;

(c) Urging private entities that provide services to the general public, including through the Internet, to provide information and services in accessible and usable formats for persons with disabilities;

(d) Encouraging the mass media, including providers of information through the Internet, to make their services accessible to persons with disabilities;

(e) Recognizing and promoting the use of sign languages.

Article 22 **Respect for privacy**

1. No person with disabilities, regardless of place of residence or living arrangements, shall be subjected to arbitrary or unlawful interference with his or her privacy, family, home or correspondence or other types of communication or to unlawful attacks on his or her honour and reputation. Persons with disabilities have the right to the protection of the law against such interference or attacks.

2. States Parties shall protect the privacy of personal, health and rehabilitation information of persons with disabilities on an equal basis with others.

Article 23 **Respect for home and the family**

1. States Parties shall take effective and appropriate measures to eliminate discrimination against persons with disabilities in all matters relating to marriage, family, parenthood and relationships, on an equal basis with others, so as to ensure that:

(a) The right of all persons with disabilities who are of marriageable age to marry and to found a family on the basis of free and full consent of the intending spouses is recognized;

(b) The rights of persons with disabilities to decide freely and responsibly on the number and spacing of their children and to have access to age-appropriate information, reproductive and family planning education are recognized, and the means necessary to enable them to exercise these rights are provided;

(c) Persons with disabilities, including children, retain their fertility on an equal basis with others.

2. States Parties shall ensure the rights and responsibilities of persons with disabilities, with regard to guardianship, wardship, trusteeship, adoption of children or similar institutions, where these concepts exist in national legislation; in all cases the best interests of the child shall be paramount. States Parties shall render appropriate assistance to persons with disabilities in the performance of their child-rearing responsibilities.

3. States Parties shall ensure that children with disabilities have equal rights with respect to family life. With a view to realizing these rights, and to prevent concealment, abandonment, neglect and segregation of children with disabilities, States Parties shall undertake to provide early and comprehensive information, services and support to children with disabilities and their families.

4. States Parties shall ensure that a child shall not be separated from his or her parents against their will, except when competent authorities subject to judicial review determine, in accordance with applicable law and procedures, that such separation is necessary for the best interests of the child. In no case shall a child be separated from parents on the basis of a disability of either the child or one or both of the parents.

5. States Parties shall, where the immediate family is unable to care for a child with disabilities, undertake every effort to provide alternative care within the wider family, and failing that, within the community in a family setting.

Article 24 **Education**

1. States Parties recognize the right of persons with disabilities to education. With a view to realizing this right without discrimination and on the basis of equal opportunity, States Parties shall ensure an inclusive education system at all levels and lifelong learning directed to:

(a) The full development of human potential and sense of dignity and self-worth, and the strengthening of respect for human rights, fundamental freedoms and human diversity;

(b) The development by persons with disabilities of their personality, talents and creativity, as well as their mental and physical abilities, to their fullest potential;

(c) Enabling persons with disabilities to participate effectively in a free society.

2. In realizing this right, States Parties shall ensure that:

(a) Persons with disabilities are not excluded from the general education system on the basis of disability, and that children with disabilities are not excluded from free and compulsory primary education, or from secondary education, on the basis of disability;

(b) Persons with disabilities can access an inclusive, quality and free primary education and secondary education on an equal basis with others in the communities in which they live;

(c) Reasonable accommodation of the individual's requirements is provided;

(d) Persons with disabilities receive the support required, within the general education system, to facilitate their effective education;

(e) Effective individualized support measures are provided in environments that maximize academic and social development, consistent with the goal of full inclusion.

3. States Parties shall enable persons with disabilities to learn life and social development skills to facilitate their full and equal participation in education and as members of the community. To this end, States Parties shall take appropriate measures, including:

(a) Facilitating the learning of Braille, alternative script, augmentative and alternative modes, means and formats of communication and orientation and mobility skills, and facilitating peer support and mentoring;

(b) Facilitating the learning of sign language and the promotion of the linguistic identity of the deaf community;

(c) Ensuring that the education of persons, and in particular children, who are blind, deaf or deafblind, is delivered in the most appropriate languages and modes and means of communication for the individual, and in environments which maximize academic and social development.

4. In order to help ensure the realization of this right, States Parties shall take appropriate measures to employ teachers, including teachers with disabilities, who are qualified in sign language and/or Braille, and to train professionals and staff who work at all levels of education. Such training shall incorporate disability awareness and the use of appropriate augmentative and alternative modes, means and formats of communication, educational techniques and materials to support persons with disabilities.

5. States Parties shall ensure that persons with disabilities are able to access general tertiary education, vocational training, adult education and lifelong learning without discrimination and on an equal basis with others. To this end, States Parties shall ensure that reasonable accommodation is provided to persons with disabilities.

Article 25 **Health**

States Parties recognize that persons with disabilities have the right to the enjoyment of the highest attainable standard of health without discrimination on the basis of disability. States Parties shall take all appropriate measures to ensure access for persons with disabilities to health services that are gender-sensitive, including health-related rehabilitation. In particular, States Parties shall:

(a) Provide persons with disabilities with the same range, quality and standard of free or affordable health care and programmes as provided to other persons, including in the area of sexual and reproductive health and population-based public health programmes;

(b) Provide those health services needed by persons with disabilities specifically because of their disabilities, including early identification and intervention as appropriate, and services designed to minimize and prevent further disabilities, including among children and older persons;

(c) Provide these health services as close as possible to people's own communities, including in rural areas;

(d) Require health professionals to provide care of the same quality to persons with disabilities as to others, including on the basis of free and informed consent by, inter alia, raising awareness of the human rights, dignity, autonomy and needs of persons with disabilities through training and the promulgation of ethical standards for public and private health care;

(e) Prohibit discrimination against persons with disabilities in the provision of health insurance, and life insurance where such insurance is permitted by national law, which shall be provided in a fair and reasonable manner;

(f) Prevent discriminatory denial of health care or health services or food and fluids on the basis of disability.

Article 26
Habilitation and rehabilitation

1. States Parties shall take effective and appropriate measures, including through peer support, to enable persons with disabilities to attain and maintain maximum independence, full physical, mental, social and vocational ability, and full inclusion and participation in all aspects of life. To that end, States Parties shall organize, strengthen and extend comprehensive habilitation and rehabilitation services and programmes, particularly in the areas of health, employment, education and social services, in such a way that these services and programmes:

(a) Begin at the earliest possible stage, and are based on the multidisciplinary assessment of individual needs and strengths;

(b) Support participation and inclusion in the community and all aspects of society, are voluntary, and are available to persons with disabilities as close as possible to their own communities, including in rural areas.

2. States Parties shall promote the development of initial and continuing training for professionals and staff working in habilitation and rehabilitation services.

3. States Parties shall promote the availability, knowledge and use of assistive devices and technologies, designed for persons with disabilities, as they relate to habilitation and rehabilitation.

Article 27
Work and employment

1. States Parties recognize the right of persons with disabilities to work, on an equal basis with others; this includes the right to the opportunity to gain a living by work freely chosen or accepted in a labour market and work environment that is open, inclusive and accessible to persons with disabilities. States Parties shall safeguard and promote the realization of the right to work, including for those who acquire a disability during the course of employment, by taking appropriate steps, including through legislation, to, inter alia:

(a) Prohibit discrimination on the basis of disability with regard to all matters concerning all forms of employment, including conditions of recruitment, hiring and employment, continuance of employment, career advancement and safe and healthy working conditions;

(b) Protect the rights of persons with disabilities, on an equal basis with others, to just and favourable conditions of work, including equal opportunities and equal remuneration for work of equal value, safe and healthy

working conditions, including protection from harassment, and the redress of grievances;

(c) Ensure that persons with disabilities are able to exercise their labour and trade union rights on an equal basis with others;

(d) Enable persons with disabilities to have effective access to general technical and vocational guidance programmes, placement services and vocational and continuing training;

(e) Promote employment opportunities and career advancement for persons with disabilities in the labour market, as well as assistance in finding, obtaining, maintaining and returning to employment;

(f) Promote opportunities for self-employment, entrepreneurship, the development of cooperatives and starting one's own business;

(g) Employ persons with disabilities in the public sector;

(h) Promote the employment of persons with disabilities in the private sector through appropriate policies and measures, which may include affirmative action programmes, incentives and other measures;

(i) Ensure that reasonable accommodation is provided to persons with disabilities in the workplace;

(j) Promote the acquisition by persons with disabilities of work experience in the open labour market;

(k) Promote vocational and professional rehabilitation, job retention and return-to-work programmes for persons with disabilities.

2. States Parties shall ensure that persons with disabilities are not held in slavery or in servitude, and are protected, on an equal basis with others, from forced or compulsory labour.

Article 28 **Adequate standard of living and social protection**

1. States Parties recognize the right of persons with disabilities to an adequate standard of living for themselves and their families, including adequate food, clothing and housing, and to the continuous improvement of living conditions, and shall take appropriate steps to safeguard and promote the realization of this right without discrimination on the basis of disability.

2. States Parties recognize the right of persons with disabilities to social protection and to the enjoyment of that right without discrimination on the basis of disability, and shall take appropriate steps to safeguard and promote the realization of this right, including measures:

(a) To ensure equal access by persons with disabilities to clean water services, and to ensure access to appropriate and affordable services, devices and other assistance for disability-related needs;

(b) To ensure access by persons with disabilities, in particular women and girls with disabilities and older persons with disabilities, to social protection programmes and poverty reduction programmes;

(c) To ensure access by persons with disabilities and their families living in situations of poverty to assistance from the State with disability-related expenses, including adequate training, counselling, financial assistance and respite care;

(d) To ensure access by persons with disabilities to public housing programmes;

(e) To ensure equal access by persons with disabilities to retirement benefits and programmes.

Article 29 **Participation in political and public life**

States Parties shall guarantee to persons with disabilities political rights and the opportunity to enjoy them on an equal basis with others, and shall undertake:

(a) To ensure that persons with disabilities can effectively and fully participate in political and public life on an equal basis with others, directly or through freely chosen representatives, including the right and opportunity for persons with disabilities to vote and be elected, *inter alia*, by:

(i) Ensuring that voting procedures, facilities and materials are appropriate, accessible and easy to understand and use;

(ii) Protecting the right of persons with disabilities to vote by secret ballot in elections and public referendums without intimidation, and to stand for elections, to effectively hold office and perform all public functions at all levels of government, facilitating the use of assistive and new technologies where appropriate;

(iii) Guaranteeing the free expression of the will of persons with disabilities as electors and to this end, where necessary, at their request, allowing assistance in voting by a person of their own choice;

(b) To promote actively an environment in which persons with disabilities can effectively and fully participate in the conduct of public affairs, without discrimination and on an equal basis with others, and encourage their participation in public affairs, including:

(i) Participation in non-governmental organizations and associations concerned with the public and political life of the country, and in the activities and administration of political parties;

(ii) Forming and joining organizations of persons with disabilities to represent persons with disabilities at international, national, regional and local levels.

Article 30
Participation in cultural life, recreation,
leisure and sport

1. States Parties recognize the right of persons with disabilities to take part on an equal basis with others in cultural life, and shall take all appropriate measures to ensure that persons with disabilities:

(a) Enjoy access to cultural materials in accessible formats;

(b) Enjoy access to television programmes, films, theatre and other cultural activities, in accessible formats;

(c) Enjoy access to places for cultural performances or services, such as theatres, museums, cinemas, libraries and tourism services, and, as far as possible, enjoy access to monuments and sites of national cultural importance.

2. States Parties shall take appropriate measures to enable persons with disabilities to have the opportunity to develop and utilize their creative, artistic and intellectual potential, not only for their own benefit, but also for the enrichment of society.

3. States Parties shall take all appropriate steps, in accordance with international law, to ensure that laws protecting intellectual property rights do not constitute an unreasonable or discriminatory barrier to access by persons with disabilities to cultural materials.

4. Persons with disabilities shall be entitled, on an equal basis with others, to recognition and support of their specific cultural and linguistic identity, including sign languages and deaf culture.

5. With a view to enabling persons with disabilities to participate on an equal basis with others in recreational, leisure and sporting activities, States Parties shall take appropriate measures:

(a) To encourage and promote the participation, to the fullest extent possible, of persons with disabilities in mainstream sporting activities at all levels;

(b) To ensure that persons with disabilities have an opportunity to organize, develop and participate in disability-specific sporting and recreational activities and, to this end, encourage the provision, on an equal basis with others, of appropriate instruction, training and resources;

(c) To ensure that persons with disabilities have access to sporting, recreational and tourism venues;

(d) To ensure that children with disabilities have equal access with other children to participation in play, recreation and leisure and sporting activities, including those activities in the school system;

(e) To ensure that persons with disabilities have access to services from those involved in the organization of recreational, tourism, leisure and sporting activities.

Article 31 **Statistics and data collection**

1. States Parties undertake to collect appropriate information, including statistical and research data, to enable them to formulate and implement policies to give effect to the present Convention. The process of collecting and maintaining this information shall:

(a) Comply with legally established safeguards, including legislation on data protection, to ensure confidentiality and respect for the privacy of persons with disabilities;

(b) Comply with internationally accepted norms to protect human rights and fundamental freedoms and ethical principles in the collection and use of statistics.

2. The information collected in accordance with this article shall be disaggregated, as appropriate, and used to help assess the implementation of

States Parties' obligations under the present Convention and to identify and address the barriers faced by persons with disabilities in exercising their rights.

3. States Parties shall assume responsibility for the dissemination of these statistics and ensure their accessibility to persons with disabilities and others.

Article 32 **International cooperation**

1. States Parties recognize the importance of international cooperation and its promotion, in support of national efforts for the realization of the purpose and objectives of the present Convention, and will undertake appropriate and effective measures in this regard, between and among States and, as appropriate, in partnership with relevant international and regional organizations and civil society, in particular organizations of persons with disabilities. Such measures could include, inter alia:

(a) Ensuring that international cooperation, including international development programmes, is inclusive of and accessible to persons with disabilities;

(b) Facilitating and supporting capacity-building, including through the exchange and sharing of information, experiences, training programmes and best practices;

(c) Facilitating cooperation in research and access to scientific and technical knowledge;

(d) Providing, as appropriate, technical and economic assistance, including by facilitating access to and sharing of accessible and assistive technologies, and through the transfer of technologies.

2. The provisions of this article are without prejudice to the obligations of each State Party to fulfil its obligations under the present Convention.

Article 33 **National implementation and monitoring**

1. States Parties, in accordance with their system of organization, shall designate one or more focal points within government for matters relating to the implementation of the present Convention, and shall give due consideration to the establishment or designation of a coordination mechanism within government to facilitate related action in different sectors and at different levels.

2. States Parties shall, in accordance with their legal and administrative systems, maintain, strengthen, designate or establish within the State Party, a framework, including one or more independent mechanisms, as appropriate, to promote, protect and monitor implementation of the present Convention. When designating or establishing such a mechanism, States Parties shall take into account the principles relating to the status and functioning of national institutions for protection and promotion of human rights.

3. Civil society, in particular persons with disabilities and their representative organizations, shall be involved and participate fully in the monitoring process.

Article 34 **Committee on the Rights of Persons with Disabilities**

1. There shall be established a Committee on the Rights of Persons with Disabilities (hereafter referred to as “the Committee”), which shall carry out the functions hereinafter provided.

2. The Committee shall consist, at the time of entry into force of the present Convention, of twelve experts. After an additional sixty ratifications or accessions to the Convention, the membership of the Committee shall increase by six members, attaining a maximum number of eighteen members.

3. The members of the Committee shall serve in their personal capacity and shall be of high moral standing and recognized competence and experience in the field covered by the present Convention. When nominating their candidates, States Parties are invited to give due consideration to the provision set out in article 4, paragraph 3, of the present Convention.

4. The members of the Committee shall be elected by States Parties, consideration being given to equitable geographical distribution, representation of the different forms of civilization and of the principal legal systems, balanced gender representation and participation of experts with disabilities.

5. The members of the Committee shall be elected by secret ballot from a list of persons nominated by the States Parties from among their nationals at meetings of the Conference of States Parties. At those meetings, for which two thirds of States Parties shall constitute a quorum, the persons elected to the Committee shall be those who obtain the largest number of votes and an absolute majority of the votes of the representatives of States Parties present and voting.

6. The initial election shall be held no later than six months after the date of entry into force of the present Convention. At least four months before the date of each election, the Secretary-General of the United Nations shall

address a letter to the States Parties inviting them to submit the nominations within two months. The Secretary-General shall subsequently prepare a list in alphabetical order of all persons thus nominated, indicating the State Parties which have nominated them, and shall submit it to the States Parties to the present Convention.

7. The members of the Committee shall be elected for a term of four years. They shall be eligible for re-election once. However, the term of six of the members elected at the first election shall expire at the end of two years; immediately after the first election, the names of these six members shall be chosen by lot by the chairperson of the meeting referred to in paragraph 5 of this article.

8. The election of the six additional members of the Committee shall be held on the occasion of regular elections, in accordance with the relevant provisions of this article.

9. If a member of the Committee dies or resigns or declares that for any other cause she or he can no longer perform her or his duties, the State Party which nominated the member shall appoint another expert possessing the qualifications and meeting the requirements set out in the relevant provisions of this article, to serve for the remainder of the term.

10. The Committee shall establish its own rules of procedure.

11. The Secretary-General of the United Nations shall provide the necessary staff and facilities for the effective performance of the functions of the Committee under the present Convention, and shall convene its initial meeting.

12. With the approval of the General Assembly of the United Nations, the members of the Committee established under the present Convention shall receive emoluments from United Nations resources on such terms and conditions as the Assembly may decide, having regard to the importance of the Committee's responsibilities.

13. The members of the Committee shall be entitled to the facilities, privileges and immunities of experts on mission for the United Nations as laid down in the relevant sections of the Convention on the Privileges and Immunities of the United Nations.

Article 35 **Reports by States Parties**

1. Each State Party shall submit to the Committee, through the Secretary-General of the United Nations, a comprehensive report on measures taken to give effect to its obligations under the present Convention and on the progress

made in that regard, within two years after the entry into force of the present Convention for the State Party concerned.

2. Thereafter, States Parties shall submit subsequent reports at least every four years and further whenever the Committee so requests.

3. The Committee shall decide any guidelines applicable to the content of the reports.

4. A State Party which has submitted a comprehensive initial report to the Committee need not, in its subsequent reports, repeat information previously provided. When preparing reports to the Committee, States Parties are invited to consider doing so in an open and transparent process and to give due consideration to the provision set out in article 4, paragraph 3, of the present Convention.

5. Reports may indicate factors and difficulties affecting the degree of fulfilment of obligations under the present Convention.

Article 36 **Consideration of reports**

1. Each report shall be considered by the Committee, which shall make such suggestions and general recommendations on the report as it may consider appropriate and shall forward these to the State Party concerned. The State Party may respond with any information it chooses to the Committee. The Committee may request further information from States Parties relevant to the implementation of the present Convention.

2. If a State Party is significantly overdue in the submission of a report, the Committee may notify the State Party concerned of the need to examine the implementation of the present Convention in that State Party, on the basis of reliable information available to the Committee, if the relevant report is not submitted within three months following the notification. The Committee shall invite the State Party concerned to participate in such examination. Should the State Party respond by submitting the relevant report, the provisions of paragraph 1 of this article will apply.

3. The Secretary-General of the United Nations shall make available the reports to all States Parties.

4. States Parties shall make their reports widely available to the public in their own countries and facilitate access to the suggestions and general recommendations relating to these reports.

5. The Committee shall transmit, as it may consider appropriate, to the specialized agencies, funds and programmes of the United Nations, and other competent bodies, reports from States Parties in order to address a request or indication of a need for technical advice or assistance contained therein, along with the Committee's observations and recommendations, if any, on these requests or indications.

Article 37

Cooperation between States Parties and the Committee

1. Each State Party shall cooperate with the Committee and assist its members in the fulfilment of their mandate.

2. In its relationship with States Parties, the Committee shall give due consideration to ways and means of enhancing national capacities for the implementation of the present Convention, including through international cooperation.

Article 38

Relationship of the Committee with other bodies

In order to foster the effective implementation of the present Convention and to encourage international cooperation in the field covered by the present Convention:

(a) The specialized agencies and other United Nations organs shall be entitled to be represented at the consideration of the implementation of such provisions of the present Convention as fall within the scope of their mandate. The Committee may invite the specialized agencies and other competent bodies as it may consider appropriate to provide expert advice on the implementation of the Convention in areas falling within the scope of their respective mandates. The Committee may invite specialized agencies and other United Nations organs to submit reports on the implementation of the Convention in areas falling within the scope of their activities;

(b) The Committee, as it discharges its mandate, shall consult, as appropriate, other relevant bodies instituted by international human rights treaties, with a view to ensuring the consistency of their respective reporting guidelines, suggestions and general recommendations, and avoiding duplication and overlap in the performance of their functions.

Article 39

Report of the Committee

The Committee shall report every two years to the General Assembly and to the Economic and Social Council on its activities, and may make

suggestions and general recommendations based on the examination of reports and information received from the States Parties. Such suggestions and general recommendations shall be included in the report of the Committee together with comments, if any, from States Parties.

Article 40
Conference of States Parties

1. The States Parties shall meet regularly in a Conference of States Parties in order to consider any matter with regard to the implementation of the present Convention.

2. No later than six months after the entry into force of the present Convention, the Conference of States Parties shall be convened by the Secretary-General of the United Nations. The subsequent meetings shall be convened by the Secretary-General biennially or upon the decision of the Conference of States Parties.

Article 41
Depositary

The Secretary-General of the United Nations shall be the depositary of the present Convention.

Article 42
Signature

The present Convention shall be open for signature by all States and by regional integration organizations at United Nations Headquarters in New York as of 30 March 2007.

Article 43
Consent to be bound

The present Convention shall be subject to ratification by signatory States and to formal confirmation by signatory regional integration organizations. It shall be open for accession by any State or regional integration organization which has not signed the Convention.

Article 44
Regional integration organizations

1. “Regional integration organization” shall mean an organization constituted by sovereign States of a given region, to which its member States have transferred competence in respect of matters governed by the present Convention. Such organizations shall declare, in their instruments of formal

confirmation or accession, the extent of their competence with respect to matters governed by the present Convention. Subsequently, they shall inform the depositary of any substantial modification in the extent of their competence.

2. References to “States Parties” in the present Convention shall apply to such organizations within the limits of their competence.

3. For the purposes of article 45, paragraph 1, and article 47, paragraphs 2 and 3, of the present Convention, any instrument deposited by a regional integration organization shall not be counted.

4. Regional integration organizations, in matters within their competence, may exercise their right to vote in the Conference of States Parties, with a number of votes equal to the number of their member States that are Parties to the present Convention. Such an organization shall not exercise its right to vote if any of its member States exercises its right, and vice versa.

Article 45 **Entry into force**

1. The present Convention shall enter into force on the thirtieth day after the deposit of the twentieth instrument of ratification or accession.

2. For each State or regional integration organization ratifying, formally confirming or acceding to the present Convention after the deposit of the twentieth such instrument, the Convention shall enter into force on the thirtieth day after the deposit of its own such instrument.

Article 46 **Reservations**

1. Reservations incompatible with the object and purpose of the present Convention shall not be permitted.

2. Reservations may be withdrawn at any time.

Article 47 **Amendments**

1. Any State Party may propose an amendment to the present Convention and submit it to the Secretary-General of the United Nations. The Secretary-General shall communicate any proposed amendments to States Parties, with a request to be notified whether they favour a conference of States Parties for the purpose of considering and deciding upon the proposals. In the event that, within four months from the date of such communication, at least one third of

the States Parties favour such a conference, the Secretary-General shall convene the conference under the auspices of the United Nations. Any amendment adopted by a majority of two thirds of the States Parties present and voting shall be submitted by the Secretary-General to the General Assembly of the United Nations for approval and thereafter to all States Parties for acceptance.

2. An amendment adopted and approved in accordance with paragraph 1 of this article shall enter into force on the thirtieth day after the number of instruments of acceptance deposited reaches two thirds of the number of States Parties at the date of adoption of the amendment. Thereafter, the amendment shall enter into force for any State Party on the thirtieth day following the deposit of its own instrument of acceptance. An amendment shall be binding only on those States Parties which have accepted it.

3. If so decided by the Conference of States Parties by consensus, an amendment adopted and approved in accordance with paragraph 1 of this article which relates exclusively to articles 34, 38, 39 and 40 shall enter into force for all States Parties on the thirtieth day after the number of instruments of acceptance deposited reaches two thirds of the number of States Parties at the date of adoption of the amendment.

Article 48 Denunciation

A State Party may denounce the present Convention by written notification to the Secretary-General of the United Nations. The denunciation shall become effective one year after the date of receipt of the notification by the Secretary-General.

Article 49 Accessible format

The text of the present Convention shall be made available in accessible formats.

Article 50 Authentic texts

The Arabic, Chinese, English, French, Russian and Spanish texts of the present Convention shall be equally authentic.

IN WITNESS THEREOF the undersigned plenipotentiaries, being duly authorized thereto by their respective Governments, have signed the present Convention.

OPTIONAL PROTOCOL TO THE CONVENTION ON THE RIGHTS OF PERSONS WITH DISABILITIES

The States Parties to the present Protocol have agreed as follows:

Article 1

1. A State Party to the present Protocol (“State Party”) recognizes the competence of the Committee on the Rights of Persons with Disabilities (“the Committee”) to receive and consider communications from or on behalf of individuals or groups of individuals subject to its jurisdiction who claim to be victims of a violation by that State Party of the provisions of the Convention.
2. No communication shall be received by the Committee if it concerns a State Party to the Convention that is not a party to the present Protocol.

Article 2

The Committee shall consider a communication inadmissible when:

- (a) The communication is anonymous;
- (b) The communication constitutes an abuse of the right of submission of such communications or is incompatible with the provisions of the Convention;
- (c) The same matter has already been examined by the Committee or has been or is being examined under another procedure of international investigation or settlement;
- (d) All available domestic remedies have not been exhausted. This shall not be the rule where the application of the remedies is unreasonably prolonged or unlikely to bring effective relief;
- (e) It is manifestly ill-founded or not sufficiently substantiated; or when
- (f) The facts that are the subject of the communication occurred prior to the entry into force of the present Protocol for the State Party concerned unless those facts continued after that date.

Article 3

Subject to the provisions of article 2 of the present Protocol, the Committee shall bring any communications submitted to it confidentially to the attention of the State Party. Within six months, the receiving State shall submit to the Committee written explanations or statements clarifying the matter and the remedy, if any, that may have been taken by that State.

Article 4

1. At any time after the receipt of a communication and before a determination on the merits has been reached, the Committee may transmit to the State Party concerned for its urgent consideration a request that the State Party take such interim measures as may be necessary to avoid possible irreparable damage to the victim or victims of the alleged violation.

2. Where the Committee exercises its discretion under paragraph 1 of this article, this does not imply a determination on admissibility or on the merits of the communication.

Article 5

The Committee shall hold closed meetings when examining communications under the present Protocol. After examining a communication, the Committee shall forward its suggestions and recommendations, if any, to the State Party concerned and to the petitioner.

Article 6

1. If the Committee receives reliable information indicating grave or systematic violations by a State Party of rights set forth in the Convention, the Committee shall invite that State Party to cooperate in the examination of the information and to this end submit observations with regard to the information concerned.

2. Taking into account any observations that may have been submitted by the State Party concerned as well as any other reliable information available to it, the Committee may designate one or more of its members to conduct an inquiry and to report urgently to the Committee. Where warranted and with the consent of the State Party, the inquiry may include a visit to its territory.

3. After examining the findings of such an inquiry, the Committee shall transmit these findings to the State Party concerned together with any comments and recommendations.

4. The State Party concerned shall, within six months of receiving the findings, comments and recommendations transmitted by the Committee, submit its observations to the Committee.

5. Such an inquiry shall be conducted confidentially and the cooperation of the State Party shall be sought at all stages of the proceedings.

Article 7

1. The Committee may invite the State Party concerned to include in its report under article 35 of the Convention details of any measures taken in response to an inquiry conducted under article 6 of the present Protocol.
2. The Committee may, if necessary, after the end of the period of six months referred to in article 6, paragraph 4, invite the State Party concerned to inform it of the measures taken in response to such an inquiry.

Article 8

Each State Party may, at the time of signature or ratification of the present Protocol or accession thereto, declare that it does not recognize the competence of the Committee provided for in articles 6 and 7.

Article 9

The Secretary-General of the United Nations shall be the depositary of the present Protocol.

Article 10

The present Protocol shall be open for signature by signatory States and regional integration organizations of the Convention at United Nations Headquarters in New York as of 30 March 2007.

Article 11

The present Protocol shall be subject to ratification by signatory States of the present Protocol which have ratified or acceded to the Convention. It shall be subject to formal confirmation by signatory regional integration organizations of the present Protocol which have formally confirmed or acceded to the Convention. It shall be open for accession by any State or regional integration organization which has ratified, formally confirmed or acceded to the Convention and which has not signed the Protocol.

Article 12

1. "Regional integration organization" shall mean an organization constituted by sovereign States of a given region, to which its member States have transferred competence in respect of matters governed by the Convention and the present Protocol. Such organizations shall declare, in their instruments of formal confirmation or accession, the extent of their competence with respect to matters governed by the Convention and the present Protocol.

Subsequently, they shall inform the depositary of any substantial modification in the extent of their competence.

2. References to “States Parties” in the present Protocol shall apply to such organizations within the limits of their competence.

3. For the purposes of article 13, paragraph 1, and article 15, paragraph 2, of the present Protocol, any instrument deposited by a regional integration organization shall not be counted.

4. Regional integration organizations, in matters within their competence, may exercise their right to vote in the meeting of States Parties, with a number of votes equal to the number of their member States that are Parties to the present Protocol. Such an organization shall not exercise its right to vote if any of its member States exercises its right, and vice versa.

Article 13

1. Subject to the entry into force of the Convention, the present Protocol shall enter into force on the thirtieth day after the deposit of the tenth instrument of ratification or accession.

2. For each State or regional integration organization ratifying, formally confirming or acceding to the present Protocol after the deposit of the tenth such instrument, the Protocol shall enter into force on the thirtieth day after the deposit of its own such instrument.

Article 14

1. Reservations incompatible with the object and purpose of the present Protocol shall not be permitted.

2. Reservations may be withdrawn at any time.

Article 15

1. Any State Party may propose an amendment to the present Protocol and submit it to the Secretary-General of the United Nations. The Secretary-General shall communicate any proposed amendments to States Parties, with a request to be notified whether they favour a meeting of States Parties for the purpose of considering and deciding upon the proposals. In the event that, within four months from the date of such communication, at least one third of the States Parties favour such a meeting, the Secretary-General shall convene the meeting under the auspices of the United Nations. Any amendment adopted by a majority of two thirds of the States Parties present and voting shall be

submitted by the Secretary-General to the General Assembly of the United Nations for approval and thereafter to all States Parties for acceptance.

2. An amendment adopted and approved in accordance with paragraph 1 of this article shall enter into force on the thirtieth day after the number of instruments of acceptance deposited reaches two thirds of the number of States Parties at the date of adoption of the amendment. Thereafter, the amendment shall enter into force for any State Party on the thirtieth day following the deposit of its own instrument of acceptance. An amendment shall be binding only on those States Parties which have accepted it.

Article 16

A State Party may denounce the present Protocol by written notification to the Secretary-General of the United Nations. The denunciation shall become effective one year after the date of receipt of the notification by the Secretary-General.

Article 17

The text of the present Protocol shall be made available in accessible formats.

Article 18

The Arabic, Chinese, English, French, Russian and Spanish texts of the present Protocol shall be equally authentic.

IN WITNESS THEREOF the undersigned plenipotentiaries, being duly authorized thereto by their respective Governments, have signed the present Protocol.