

Addis Ababa University

Faculty of Business and Economics

**Department of Public Administration and Development
Management**

**Role and Challenge of NGOs to Improving the
Livelihood of People with Disability in Urban Areas:
Case of Kirkos Sub-city of Addis Ababa City
Administration**

By

Frew Bogale

Advisor: Ato Shumey Berhie

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Department of Public Administration and Development Management

This is to certify that the thesis prepared by FrewBogale, entitled The Roles and Challenges of NGOs in Improving the Livelihood of People with Disability (PWDs) in urban area: The Case on Kirkos Sub-city in Addis Ababa, which is submitted in partial fulfillment of the requirements for the Degree of Masters in Public Management and Policy (MPMP), complies with the regulation of the university and meets the accepted standards with respect to originality and quality.

Approved by Board of Examiners:

Mr. ShumeyBerhie

Advisor

Signature

Date

Internal Examiner

Signature

Date

External Examiner

Signature

Date

Chair of Department or
Graduate Program Coordinator

Signature

Date

Signature of Declaration Sheet

I, the undersigned, declare that this thesis is my original work and has not been presented for a degree in any other university, and that all the sources of materials used for the thesis have been duly acknowledged.

Declared by:

Name: FrewBogale

Signature: _____

Date: May 24, 2019

Confirmed by Advisor:

Name: ShumeyBerhie

Signature: _____

Date: May 24, 2019

**Place: Addis Ababa University Department of Public Administration & Development
Management Graduate Program**

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Table of Contents

CHAPTER ONE	6
1. Introduction.....	6
1.1 Background.....	6
1.2. Statement of the Problem.....	8
1.3. Research Questions.....	9
1.4. Objective of the Study	10
1.5. Significance of the Study	10
1.6. Scope of the study.....	11
1.7. Limitation of the Study	11
2. Literature Review	12
2.1 Concepts and Definitions.....	12
2.1.1 Definition of Persons with Disability	12
2.1.2 Definition of Disability in Ethiopia.....	13
2.2. Livelihood of PWDs	14
2.2.1 Definition of Livelihood	14
2.2.2 Status of Livelihood on Developing Countries.....	14
2.2.3 Situation of Disability in Ethiopia	16
2.3 The Role of NGOs	17
2.3.1 Introduction.....	17
2.3.2 The Role of NGOs in improving the Livelihood of PWDs.....	19
2.4. Approach of Role of NGOs	20
2.5 Models of Sustainable livelihood	22
2.6 Models of disability and livelihoods of disabled people.....	25
2.7 The Role of NGOs in improving the Livelihood of PWDs in Ethiopia.....	26
2.8 Major Challenges of NGOs in Providing Livelihood Supports	26
3. Methodology.....	30
3.1. Research Approach and Design	30
3.2. Target Population and Sampling Technique	30
3.4. Data Collection Techniques.....	31
3.5. Data Analysis Techniques.....	32

3.6 Framework of the livelihood Analysis.....	32
4. Data Presentation, Analysis and Interpretation.....	34
4.1 Introduction.....	34
4.1.1. Charitable Activities and Category in Ethiopia	35
4.1.2 NGOs working on PWDs.....	36
4.2 Basic Service NGOs providing to PWDs in Kirkos Sub-city	37
4.2.1 Role of Federation of Ethiopia National Association of Person with Disability (FENAPD)	37
4.2.2 Role of Cheshire Ethiopia (CE)	39
4.3 The Complementary, Supplementary and adversarial role of NGOs to help PWDs in Kirkose Sub-city	40
4.3.1 Advocacy Role of FENAPD	42
4.3.2 Complementary and Supplementary Role of Cheshire Ethiopia (CE).....	44
4.4 Opportunities and Challenges in the Realization of Livelihoods of Disabled People in Kirkos Sub-City.....	45
4.4.1 Demographic Characteristics of the Respondent	45
4.4.2 Back ground in Livelihood Situation of Respondent.....	47
4.4.3 Challenge of the Respondent Prevent the Livelihood.....	48
4.4.4 Family Support in realization of livelihoods of the Respondent:.....	50
4.4.5 NGOs and Government Assistance and Support in Improving the Livelihood of the Respondent	52
4.5 Major Challenges NGOs Improving the Livelihood PWDs	55
4.5.1 Challenge of your organization to improve the livelihood of people with disability in FENAPD	56
4.5.2 Challenge of Cheshire Ethiopia to improve the livelihood of PWDs	56
4.6. Discussion.....	57
5 Summaries, Conclusion and Recommendation.....	59
5.1. Summary of Findings	59
5.1.1 Finding concerning the roles and challenges of selected institution	59
5.1.2 Lack of family support and the powerlessness of disabled people	61
5.2 Conclusion	63
5.3 Recommendation.....	64
References.....	65
Appendixes	67

List of Table

- Table 1 Register NGOs with category in Ethiopia
- Table 2 Register NGOs on ECSA to help people with disability
- Table 3 Type of disability in Kiros Sub City
- Table 4 Sample taken in type of disability in kirkos Sub City
- Table 5 Source of Income PWDs in Kirkos Sub-city
- Table 6 Educational Statues PWDs in Kirkos Sub-city
- Table 7 The Table Shows what prevent from further study PWDs?
- Table 8 The Table Shows whether impairment affect income
- Table 9 The Main Reason impairment affects income
- Table 10 Have PWDs under go any treatment
- Table 11 whether PWDs have family support
- Table 12 Challenge from the Family
- Table 13 Accessing government Schemes
- Table 14 Willingness to Change
- Table 15 Level of Motivation
- Table 16 Socio Economic Availability
- Table 17 Government Support
- Table 18 NGO Availability

Acronym

A.A	Addis Ababa
AIDS	Acquired Immune deficiency syndrome
CRPD	Convention on the Right of Persons Disability
CSO	Charity and Society Organization
CE	Cheshire Ethiopia
DFID	Department for International Development
ECSA	Ethiopia Charity and Society Agency
FENAPD	Federation of Ethiopia National Association PDWs
FDRE	Federal Democratic Republic of Ethiopia
HIV	Human Immunodeficiency Virus
ILO	International Labor Organization
LSAO	Labor and Social Affairs office
MDGs	Millennium Development Goals
MOLISA	Ministry of Labor and Social Affaire
NGO	Non-Government Organization
PWDs	People with Disability
SLF	Sustainable Livelihood Frame work
UN	United Nation
UNICEF	United National International Emergency Fund
USAID	United State Agency International Development
UPIAS	Union of Physically Impaired Against Segregation
WB	World Bank
WHO	World Human Organization

Abstract

Like in other countries, non-governmental and civil society actors are visible on the overall institutional landscape of Ethiopian society. Because of the specific contexts, compared to many other African countries, the Ethiopian NGO/CSO community is not that developed in terms of diversity, size and capacity. The NGOs perform various functions for the benefit of society. The range of NGO activities is huge and is spread in all fields. NGOs have a big responsibility to play to improve the livelihood of PWDs.

The main objective of the study is to show and find out the roles and challenges of NGOs to improve the livelihood of PWDs in Kirkos Sub-city in case study of CE and FENAPD from NGO side towards improving the livelihood of PWDs by applying descriptive research method using purposive sampling techniques. Data was collected through interview and questionnaires from the selected NGOs managers, PWDs Lives in Kirkos Sub city and different stakeholder.

The findings show that the roles being played by the NGOs towards improving the livelihood of PWDs is insignificant and inefficient comparing to the need and sensitivity of the issue due to lack of proper attention. And the roles being played by the selected NGOs is not have coordination with the government institution and it is difficult to know whether the role of NGOs complementary, supplementary and advisory because of insignificant role. NGOs like FENAPD despite the fact that there are limitations in their service and challenges that have much advisory role in the help of PWDs. And CE also despite of its challenge it has supplementary and complementary role to help PWDs. Finally, the study concludes that NGOs should and must give all the necessary attention to improve the livelihood of PWDs who are very vulnerable and who needs support, NGOs must work as complements to government in a partnership relationship the institutions must get all the necessary resource to conduct their tasks and NGOs also need to be encouraged to continue rendering service to PWDs in a consistent manner.

CHAPTER ONE

1. Introduction

1.1 Background

Different strands of economic theory support alternative notions of the nonprofit sector as supplementary, complementary, or adversarial to government (*Young, 2000*). In the supplementary model, nonprofits are seen as fulfilling the demand for public goods left unsatisfied by government (*Young, 2000*). In this view, the private financing of public goods can be expected to have an inverse relationship with government expenditure. As government takes more responsibility for provision, less needs to be raised through voluntary collective means. In the complementary view, nonprofits are seen as partners to government, helping to carry out the delivery of public goods largely financed by government. In the adversarial view, nonprofits prod government to make changes in public policy and to maintain accountability to the public. Reciprocally, government attempts to influence the behavior of nonprofit organizations by regulating its services and responding to its advocacy initiatives as well. The three perspectives are by no means mutually exclusive. Nonprofits may simultaneously finance and deliver services where government does not, deliver services that are financed or otherwise assisted by government, advocate for changes in government policies and practices and be affected by governmental pressure and oversight. Throughout the developing world, NGOs play an important part in development.

The NGOs perform various functions for the benefit of society. The range of NGO activities is huge and is spread in all fields: environment concern, age care, rural development, health, culture and heritage, women empowerment, child care and upliftment, basic education to all children, animal welfare, disaster management and many more. Ethiopia, being a largely populated

country, it is not easy to meet all social and human needs by the government without the help of NGOs. NGO takes efforts to satisfy the needs of a common man and development of the nation by undertaking various projects and thus helps the Government to fulfill its objectives.

The World Report on Disability from 2011 estimates the prevalence of people with disabilities (PWDs) in Ethiopia is representing on **17.6** percent. (WHO, 2011) If actually **17.6**percent of the Ethiopian population is disabled, the exact number in 2011 would amount to **14,449,952**people. This is difficult to ensure economic, social and political growth without including and giving opportunity 17.6 percent of the population. Given opportunities to flourish as others might, PWDs have the potential to lead fulfilling lives and to contribute to the social, cultural and economic vitality of their communities. Yet, surviving and thriving can be especially difficult with disabilities. They are at greater risk of being poor than peers without disabilities. Even where human share the same disadvantages, human with disabilities confront additional challenges as a result of their impairments and the many barriers that society throws in their way.

In many countries, responses to the situation of human with disabilities are largely limited to institutionalization, abandonment or neglect(World report on disability, 2011). These responses are the problem, and they are rooted in negative or paternalistic assumptions of incapacity, dependency and difference that are perpetuated by ignorance. What is needed is a commitment to these human rights and their futures, giving priority to the most disadvantaged – as a matter of equity and for the benefit of all.

The Ethiopian Government appears to show commitment to by ratifying different international conventions and enshrining them in its various domestic laws, policies, strategies, and programs to help PWDs. However, the reality on the ground indicates that there is limited progress towards implementing these legal instruments when it comes to the help of human with special needs or disability because of mainly the capacity of the institution and organization to execute policy and Plan on the ground .A part from, enacting laws and passing deliberation there is an increasing interest from the UN and Major donor to commit resource toward meeting the objective set out in those declaration.

For many people with disabilities in Ethiopia, assistance and support are prerequisites for participating in society. The lack of necessary support services can make people with disabilities overly dependent on family members – and can prevent both the person with disability and the family members from becoming economically active and socially included. Throughout the world, people with disabilities have significant unmet needs for support. Despite the magnitude of the issue, it is obvious difficult to the government to provide assistance and support to achieve a good quality of life and to be able to participate in social and economic life on an equal basis with others. So what is the role of NGO to address the problem to help PWDs. How strands of economic theory support alternative notions of the nonprofit sector as supplementary, complementary, or adversarial to help PWDs in urban area.

This paper examined the role and challenge of NGO in addressing the need of Disability in urban area specifically in Kirkos Sub-City, and also highlights the importance of improving the quality of institutions and governance to consolidate the developmental gains of the disability in the past years and work towards further progress.

1.2. Statement of the Problem

The rapid rise of NGO sector within the urban setting of Addis Ababa is clear, with the number of registered organizations climbing annually (Roe, 2009). NGO now form a very prominent part of the aid delivery sector in Ethiopia but in regard to their contribution, accomplishment and challenge, it is very difficult to know what and how role of this NGOs contribution in urban area how could be lead to more successful and effective aid delivery for the beneficiary.

Today, an estimated 3490 NGOs are involved in activities throughout the country, with over 292 being based and working in people with disability. It is important to know the role and challenges of these NGOs for the development of the urban areas because it utilizes for make rectification the existing policy and make a new vital key policy.

Disability is increasingly on the development agenda and is one of the major challenges to be focused on the overall development of the society (World report on disability, 2011). Disability

is one of the major causes of dependency and deprivations throughout the world (World report on disability, 2011) however; causes leading to it and its magnitude vary across different cultural setups.

There must be a new approach towards the disability problem, particularly in developing countries like Ethiopia, shows a new policy drive to make productive people with disabilities. Due to this close attachment with people with disability and local institution, NGO can play a critical role in ensuring the benefit go to marginalized groups, and in mobilizing community organization to benefit the disability section of the society.

Charity organizations are expected to be active partners with the government in helping disability of the country. Their role is vital in supporting the government's sustainable development and contributes towards the socio-economic development. According to the previous researches, their contribution to the development is highly challenged due to problems related with their operation, collaboration and networking and legal and policy issues. (Dessalegn , et.al., 2008; Gesit, 2009; Fantahun, 2010).

1.3. Research Questions

An attempt was made to answer the research questions so as to find out the roles and challenges of NGOs concerning the livelihood of PWDs.

1. What are the basic services that NGOs are providing to the PWDs in Kirkos sub-city?
2. How do the NGOs operating in the sub-city play their complementary, supplementary and adversarial roles in delivering the services to the PWDs in Kirkose Sub-city?
3. How do the services being produced and delivered by the NGO affect the livelihood of the PWDs in the Sub-city?
4. What are the major challenges that the NGOs are facing in delivering their services in improving the livelihood of PWDs?

1.4. Objective of the Study

The general objective of the study is to find out the main roles and challenges that NGOs are playing and facing towards improving the livelihood of People with disability

The Specific objectives are:

1. To access challenges faced by people with disability
2. To assess the Role and extent of NGOs in relation to the needs of people with disability
3. To review the existing policy with regard to NGOs role in the improvement of livelihood people with disability
4. To examine the NGOs activity in relation to the improvement of livelihood of people with disability
5. To find out the strength and weakness of NGOs role improvement livelihood level of people with disability.

1.5. Significance of the Study

NGOs have gained recognition in modern economic societies as new channels of education, empowerment and economic dynamism. The voluntary action was both historically and philosophically conceived as intrinsic to that of a mediation role on safeguarding the local resources and protecting the local interest and rights. The role and relevance of the voluntary sector were clear from the fact that the people and the society's conscious about development have recognized and accepted the voluntary organizations as much more efficient and less expensive in promoting development.

This was equally applied to the community and social services provided especially to weaker sections in the society with NGOs gradually taking over this role from the state. Therefore, it is significant to study the role of NGOs in people with disability.

In addition to this, the study also uses to evaluate the efficiency and effectiveness of the contribution of NGOs in people with disability.

1.6. Scope of the study

The voluntary organizations or the NGOs are the instruments through which the citizen voluntaries establish an identity and legal recognition for the collective endeavor. NGO provide their organizational support system and their means of aggregating resources for an endeavor that requires more than individual action.

The NGOs could collaborate with the government in a different way and it can be visualized in their activity undertaken in the common interest of all the members in the society. The scope of the study will be due to the fact that,

- NGO can enable people with disability to access the government programs
- NGOs can directly access the government program for the benefit of the people with disability and the marginalized in the society
- NGOs can advocate and lobby the government and the individual to change their perception as to what is thinking about people with disability.

The present study designed as the case study of people with disability in Kirkos ub-city and a major NGO working in Kirkos Sub-city district in help of PWDs. The area selected for the study will be Kirkos sub-city it is because of difficult to work the research throughout Addis Ababa and KirkosSub-city are representative the other Sub city.

1.7. Limitation of the Study

The study was more representative and inclusive if it carried out by conducting all NGOs throughout Addis Ababa. To conduct a study on the member it is practically difficult and exhaustive due to different reasons like:

- 1 shortage of time to engage fully in the study
- 2 shortage of resource
- 3 costly and impossible to conduct the research in all the area

CHAPTER TWO

2. Literature Review

2.1 Concepts and Definitions

2.1.1 Definition of Persons with Disability

In every country, there are persons who suffer from one kind of disability or the other that may be congenital or acquired. Disability is also caused by aging. The term “disabled persons” which is used commonly to refer to persons with disability should not be misinterpreted to imply that the ability of the individual to function as a person has been disabled. The term is used in this report with this caution. Globally efforts are made by several agencies to improve the quality of life of the disabled people. The work of the UN constitutes the most important action taken by an international agency in the area of disability (<http://www.stat.go.jp/info/meeting/campodia>).

It is difficult to compare the number of persons with disability in the various countries of the world mainly due to lack of a uniform definition of disability. However, it is generally agreed that the number of persons with disability among the population in the developing countries is much higher than that in the developed countries. Poverty increases the risk of disability through poor health and malnutrition. Disability with lack of support and social exclusion leads to the extreme poverty level. Though many Governments have evolved policies regarding the welfare of this section of the population, much remains to be done to improve their lot globally. Persons with disabilities face all forms of discrimination and prejudices as well as all types of barriers. Women and children in the disabled population are the worst sufferers. These barriers have to be removed and participation of persons with disabilities in all relevant decision-making process has to be promoted. Special efforts are needed to ensure that anyone with disability has equal opportunities and is able to lead a dignified life (<http://www.stat.go.jp/info/meeting/compodia/>).

The implementation of the welfare measures for the persons with disability depends on reliable data on their population size and characteristics. In the absence of administrative data, the number of disabled persons with the types of their disabilities has to be estimated either by

surveys or censuses. This is a challenging task as there are several constraints involved in collecting information on personal characteristics which are not common. The question on disability is very sensitive. The U.N Statistical Division has recommended that population census could include questions on disability. Sample surveys on disability do provide estimates at the national level. Population census, however, has the advantage of providing data for small areas which are very important for planning and implementing welfare measures at the grass-roots level (<http://www.stat.go.jp/info/meeting/Cambodia/>).

2.1.2 Definition of Disability in Ethiopia

Following the World Health Organization (WHO) and International Labor Organization (ILO) definitions on disability, “Disability” is defined as follows in Ethiopia,

“A disabled person is any person unable to ensure by himself or herself a normal life, as a result of deficiency in his or her physical or mental capabilities”(Tirussew,1991)

According to the newspaper “NagaritGazeta”, the Emperor Haile Selassie I, in the Order No. 70 of 1970, described the “disabled” as people who, because of limitations of normal physical or mental health, is unable to earn their livelihood and do not have anyone to support them; and shall include any persons who is unable to earn their livelihood because they are too young or too old.

In “NegaritGazeta” the Transitional Government of Ethiopia, Proclamation No. 101 of 1994 referred to “a disabled person” as a person who is unable to see, hear or speak or is suffering from mental retardation or from injuries that limit him or her due to natural or man-made causes; provided, however, that the term does not include persons who are alcoholics, drug addicts and those with psychological problems due to socially deviant behaviors.

The terms “handicap” and “impairment” are used according to international standards.

2.2. Livelihood of PWDs

2.2.1 Definition of Livelihood

When asked what a livelihood is, few would struggle to answer. Making a living, supporting a family, or my job all describe a livelihood. The term is well recognized as humans inherently develop and implement strategies to ensure their survival. From extensive learning and practice, various definitions have emerged that attempt to represent the complex nature of a livelihood. Chambers and Conway definition suggests:

A livelihood comprises the capabilities, assets (including both material and social resources) and activities required for a means of living. A livelihood is sustainable when it can cope with and recover from stress and shocks and maintain or enhance its capabilities and assets both now and in the future, while not undermining the natural resource base. (Chambers & Conway, 1991)

In order to better understand how people develop and maintain livelihoods, the UK Department for International Development (DFID), building on the work of practitioners and academics, developed the Sustainable Livelihoods Framework (SLF). This framework is an analysis tool, useful for understanding the many factors that affect a person's livelihood and how those factors interact with each other. The SLF views livelihoods as systems and provides a way to understand:

- the assets people draw upon
- the strategies they develop to make a living
- the context within which a livelihood is developed
- and those factors that make a livelihood more or less vulnerable to shocks and stresses

2.2.2 Status of Livelihood on Developing Countries

Quantitative research on the socio economic status of persons with disabilities in developing countries, while small, has recently grown.

As with developed countries, descriptive data suggest that persons with disabilities are at a disadvantage in educational attainment and labor market outcomes. The evidence is less

conclusive for poverty status measured by asset ownership, living conditions, and income and consumption expenditures.

The majority of studies find that persons with disability have lower employment rates and lower educational attainment than persons without disability (Eide AH, Loeb ME, 2009). In Chile and Uruguay the situation is better for younger person with disability than older cohorts, as younger cohorts may have better access to education, through the allocation of additional resources. Most of the cross-section data for education suggests that children with disabilities tend to have lower school attendance rates (Eide AH, Loeb ME, 2009). An analysis of the *World Health Survey* data for 15 developing countries suggests that households with disabled members spend relatively more on health care than households without disabled members (Mitra S, Posarac A, Vick B, 2009).

A study on Sierra Leone found that households with persons with severe or very severe disabilities spent on average 1.3 times more on health care than did non-disabled respondents (Trani J, 2010). While many studies find that households with disabled members generally have fewer assets (Eide AH, Loeb ME, 2009) and worse living conditions compared with households without a disabled member (Eide AH, Kamaleri Y, 2011) some studies found no significant difference in assets or living conditions (Eide AH, Loeb ME, 2009). Data for income and household consumption expenditures are less conclusive. For example households with disabilities in Malawi and Namibia have lower incomes while households in Sierra Leone, Zambia, and Zimbabwe do not (Eide AH, Loeb ME, 2009). In South Africa research suggests that, as a result of the provision of disability grants, households with a disabled member in the Eastern Cape Province had higher income than households without a disabled member (Loeb M, 2008). Evidence on poverty as measured by per capita consumption expenditures is also mixed. An analysis of 14 household surveys in 13 developing countries found that adults with disabilities as a group were poorer than average households. However, a study of 15 developing countries, using *World Health Survey* data, found that households with disabilities experienced higher poverty as measured by non-health per capita consumption expenditures in only 5 of the countries (Eide AH, Loeb ME, 2009).

Data in developing countries on whether having a disability increases the probability of being poor are mixed. In Uruguay disability has no significant effect on the probability of being poor except in households headed by severely disabled persons. By contrast, in Chile disability is

found to increase the probability of being poor by 3–4 percent (Contrevas DG, 2006). In a cross country study of 13 developing countries disability is associated with a higher probability of being poor in most countries – when poverty is measured by belonging to the two lowest quintiles in household expenditures or asset ownership. But this association disappears in most of the countries when controls for schooling are introduced (Filmer D, 2008). One study attempted to account for the extra cost of disability in poverty estimates in two developing countries: Viet Nam and Bosnia and Herzegovina. Before the adjustments, the overall poverty rate in Viet Nam was 13.5% and the poverty rate among households with disability was 16.4%. The extra cost of disability was estimated at 9.0% resulting in an increase in the poverty rate among households with disability to 20.1% and in the overall poverty rate to 15.7%. In Bosnia and Herzegovina the overall poverty rate was estimated at 19.5% and among households with disability at 21.2%. The extra cost of disability was estimated at 14%, resulting in an increase in the poverty rate among households with disability to 30.8% and in the overall poverty rate to 22.4% (Braithwaite J, Mont D, 2009).

Very few studies have looked at the prevalence of disability among the poor, or across the distribution of a particular welfare indicator (income, consumption, assets), or across education status. A study of 20 countries found that children in the poorest three quintiles of households in most countries are at greater risk of disability than the others. Disability across expenditure and asset quintiles in 15 developing countries, using several disability measures suggests higher prevalence in lower quintiles, but the difference is statistically significant in only a few countries (Mitra S, Posarac A, Vick B, forthcoming).

2.2.3 Situation of Disability in Ethiopia

According to the International Rehabilitation Review, (UNICEF 1988), nearly 10% of the world's population has disabilities, of which 80% live in developing countries. Most of those in developing countries do not have access to rehabilitation services due to a lack of resources and other various factors (Tirussaw, T. 1998).

Based on the World Report on Disability jointly issued by the World Bank and World Health Organisation¹, there are an estimated 15 million children, adults and elderly persons with disabilities in Ethiopia, representing 17.6 per cent of the population (WHO, 2011). A vast majority of people with disabilities live in rural areas where access to basic services is limited. In

Ethiopia, 95 per cent of all persons with disabilities is estimated to live in (where?) (MOLSA 2010). Many depend on family support and begging for their livelihoods.

The state of persons with disabilities in Ethiopia is even more tragic and severe due to the presence of diversified pre and post-natal disabling factors (like infectious diseases, difficulties contingent to delivery, under-nutrition, malnutrition, harmful cultural practices, lack of proper child care and management, civil war and periodic drought and famine) and the absence of early primary and secondary preventive actions.

Major current problems concerning disability are:

- Lack of public understanding
- Lack of information on the number and status of disabilities
- Shortage of basic needs, such as vocational training placement, health facilities etc.
- Inaccessibility to assistive devices

In Ethiopia, some associate disability (handicap) with spiritual evil and do not let disabled persons to go out in public. This leads to families hiding disabled family's members which lead to inaccurate information and statistics on disabilities.

To alleviate the problems of disability the Ethiopian Federal Democratic Government has organized a Rehabilitation Department under the Ministry of Labor and Social Affairs (MOLSA). The main activities of the department are to realize rehabilitation, capacity building, and awareness rising. Government administration has been decentralized from the central to regional levels with structures extending from the zones to the "Woreda" districts.

With respect to organizations, persons with disabilities have formed five associations and one federation to advocate their rights.

2.3 The Role of NGOs

2.3.1 Introduction

Private nonprofit institutions account for a sizable and growing share of our nation's economic activity (US Department of commerce, 1977). The sectors in which these institutions are most common-education, research, health care, the media, and the arts-are vital elements in the

modern economy. Moreover, these are sectors that present particularly pressing and difficult problems of public policy. The existing literature in law and economics, however, has largely overlooked nonprofit institutions; while we are reasonably well supplied with positive and normative perspectives on both profit-seeking and governmental organizations, to date there has been extraordinarily little effort to understand the role of nonprofits (B. Weisorod, 1977).

Organizations similar to NGOs and the debate surrounding the meaning of the term go back at least to the middle of the nineteenth century. Some of these organizations have lasted for over a hundred years and evolved from relatively simple beginnings to become complex organizations(<https://www.jstor.org/stable/1049563>). Most of these associations were known as public associations, voluntary associations, social welfare organizations, charities, and missions during the colonial period. The term "NGO" was first used by the United Nations in 1949. During this early period, the term became widely applied to a broad spectrum of organizations. Since then, terms used to identify these organizations have multiplied. Some of these terms include "voluntary associations," "nonprofit associations," "international nongovernmental organizations," "nongovernmental development organizations," "new social movement organizations," "people's organizations," "membership organizations," "grassroots support organizations," and "membership support organizations," to name but a few. These terms embrace a broad range of organizations varying in terms of ideology, organization, and operation. They include schools, hospitals, charities, clubs, religious fraternities, development agencies, professional associations, cooperatives, mutual aid societies, foundations, and lobby groups. One might even make a reasonable claim that international crime rings, terrorist and separatist organizations, secret societies, and trade associations could be classified as NGOs. Despite the lack of consensus about the meaning of the term "NGO," a large literature has been produced on NGOs and many claims have been made concerning their role, as if there were a true and authentic NGO, consistent over time and context.

The term "nongovernmental organization" (NGO) is a post-World War II expression which was initially coined by the United Nations (UN) (Kerstin Martens, Sep 2002). Today, though, the term NGO (and its respective equivalent) is the prominent word in most languages (Kerstin Martens, Sep 2002).

In recent decades, especially since the 1980s, the term NGO has also become popular for societal actors of all sorts engaged outside the U N frame work, internationally and nationally, and has indeed been increasingly adopted more broadly by academics as well as by activists themselves. Before the dissemination of the word "NGOs" became solidified through UN practice, authors also employed other expressions. For example, they referred to "private organizations" (White, 1933) or "international pressure groups" (Meynaud, 1961; Willetts, 1982). The League of Nations, for example, used the expression "voluntary agencies" or "volas" (Ziegler, 1998, p. 26). Today, though, the term NGO (and its respective equivalent) is the prominent word in most languages (Kerstin Martens, Sep 2002).

2.3.2 The Role of NGOs in improving the Livelihood of PWDs

Prior to the 1960s, issues related to PWDs (such as deprivation of access to economic opportunity and discrimination) have rarely been considered as human right issues. In the international arena, declarations related to the rights of disabled people were generally disguised in the broader umbrella of human rights. Major human rights declarations of the UN such as the Universal declaration on Human Rights in 1946, the UN convention on economic, social and cultural rights in 1966 and the UN convention on civil and political rights in 1966 did not distinctly mention the case of PWD. Policies and institutions formed in the name or for the cause of PWDs were merely focused on providing compassionate services in what can be described as purely a social welfare approach. The shift towards treating disability as a separate issue and in a “right based” approach began with a series of conventions notably from the International Labour Organization (ILO) and with the declarations of various UN agencies and consolidated in the period after the 1970’s.

For many people with disabilities, assistance and support are prerequisites for participating in society. The lack of necessary support services can make people with disabilities overly dependent on family members – and can prevent both the person with disability and the family members from becoming economically active and socially included. Throughout the world people with disabilities have significant unmet needs for support. Support services are not yet a core component of disability policies in many countries, and there are gaps in services everywhere.

No one model of support services will work in all contexts and meet all needs. A diversity of providers and models is required. But the overarching principle promoted by the United Nations *Convention on the Rights of Persons with Disabilities* (CRPD) is that services should be provided in the community, not in segregated settings. Person-centered services are preferable, so that individuals are involved in decisions about the support they receive and have maximum control over their lives.

Many persons with disabilities need assistance and support to achieve a good quality of life and to be able to participate in social and economic life on an equal basis with others. A sign language interpreter, for instance, enables a Deaf person to work in a mainstream professional environment. A personal assistant helps a wheelchair user travel to meetings or work. An advocate supports a person with intellectual impairment to handle money or make choices. People with multiple impairments or older persons may require support to remain in their homes. These individuals are thus empowered to live in the community and participate in work and other activities, rather than be marginalized or left fully dependent on family support or social protection.

Most assistance and support comes from family members or social networks. State supply of formal services is generally underdeveloped, not-for-profit organizations have limited coverage, and private markets rarely offer enough affordable support to meet the needs of people with disabilities. State funding of responsive formal support services is an important element of policies to enable the full participation of persons with disabilities in social and economic life. States also have an important role in setting standards, regulating, and providing services. Also by reducing the need for informal assistance, these services can enable family members to participate in paid or income-generating activity. The CRPD sees support and assistance not as ends in themselves but as means to preserving dignity and enabling individual autonomy and social inclusion. Equal rights and participation are thus to be achieved, in part, through the provision of support services for people with disabilities and their families.

2.4. Approach of Role of NGOs

Economic theories of the nonprofit sector suggest several different ways of understanding the relationship between government and private, not-for-profit organizations. In particular, different strands of theory support the alternative views that nonprofits (a) operate independently as

supplements to government, (b) work as complements to government in a partnership relationship, or (c) are engaged in an adversarial relationship of mutual accountability with government.

2.4.1 Nonprofits as supplements to government: The thesis that nonprofit organizations provide collective goods on a voluntary basis was first advanced by Weisbrod (1977) in his seminal work on government failure. The basic premise is that citizens have individual preferences about the levels, qualities, and types of public goods they desire and how much they are willing to pay for them. Governments decide on the quantity and quality of public goods provision based on citizens' preferences, and are constrained by considerations of equity and bureaucratic procedure to tax and offer levels of public good in a uniform way (Douglas, 1987). Given democratic voting and policy-making procedures, governments follow preferences of the median voter or of a dominant political coalition (Buchanan&Tullock, 1962) in choosing those uniform tax rates and levels, types, and qualities of services. If citizen preferences are not homogeneous, some citizens (e.g., those whose preferences vary substantially from those of the median voter) will be left unsatisfied, either paying for and receiving more (of various types of) public goods than they want, or paying less and receiving less than they want. It is the citizens in the latter group who are presumed to be willing to provide additional (supplementary) levels of public good by mobilizing resources on a voluntary collective basis through the nonprofit sector.

2.4.2 Nonprofits and government as complements :Salomon (1995) has been the principal advocate for the view that nonprofits and government are engaged primarily in a partnership or contractual relationship in which government finances public services and nonprofits deliver them. Aspects of both economic theory of public goods and economic theory of organizations help clarify the rationale behind this thesis. First, the theory of collective action as advanced by Olson (1965) highlights the phenomenon of “free riding” when people attempt to provide collective goods on a voluntary basis. Where the good to be provided is “nonrival,” meaning that it can be consumed by one party without reducing the amount available to others, and “nonexcludable,” meaning that it cannot be made available to one party without making it simultaneously available to others, then people have the incentive to avoid contributing to its provision but to consume it once it is provided by others. As a result, such goods will not be

provided at efficient levels through voluntary collective effort. The problem of free riding is exacerbated where groups are large and relatively homogeneous in their preferences (so that no single party is tempted to provide the good on its own). Solutions to the public goods problem include social pressure (e.g., appealing to conscience, peer to peer solicitations, etc.), tying together of private incentives with public goods support (e.g., bonuses given to members of public radio stations), and coercion (e.g., using the police power of the state to collect taxes). It is the latter solution that suggests that government should undertake to finance public goods, either directly or through tax incentives, although not necessarily becoming the vehicle for their delivery.

2.4.3 Nonprofits and government as adversaries. To date, the advocacy role of nonprofit organizations in public policy and the role of government in controlling nonprofit organizations have not been explicitly addressed by economic theories of nonprofit organizations. To a certain extent, nonprofit advocacy and government pressure on nonprofits can be understood through the complementary lens of nonprofit-government relations. Often, nonprofits and government are collaborators in passing legislation or changing public attitudes. Similarly, there are instances when government undertakes to encourage, prod, and stimulate private, voluntary activity in support of social goals. But advocacy activity suggests that there is also a third way of characterizing the relationship between nonprofit organizations and government: as adversaries in policymaking and service delivery.

2.5 Models of Sustainable livelihood

Participation, sustainability, empowerment and poverty alleviation have become common rhetoric of the development discourse. And are considered as key elements for success of development projects. In the last decade, the concept of “sustainable livelihood” has been introduced to describe the integration of poverty reducing strategies, sustainable development, participation and empowerment process into a framework for projects planning and analysis (DFID 1999, UNDP 1999)

UNDP (United Nations Development Programme)

UNDP'S Sustainable Livelihood approach provides a tool to improve the sustainability of livelihoods among poor and vulnerable groups. According to its framework, strengthening the resilience of the poor in coping and adapting to situations will help in making the livelihood sustainable. It also gives emphasis in introduction of improved technologies, social and economic investments to the livelihood options and addresses the issues of policy and governance that interrupt on people's livelihoods. The various support activities are organized as per the specificity of the Sustainable Livelihood programmes. It usually implemented at a district level with an effect at the community and household level.

DFID (Department for International Development)

DFID's Sustainable Livelihood approach aims to increase the agency's effectiveness in poverty reduction in two main ways as:

- a. Mainstreaming a set of core principles which determine that poverty-focused development activity should be people-centred, participatory, and conducted in partnership,
- b. Arrange support activities in a holistic way, to ensure that these match to issues or areas of direct relevance for improving poor people's livelihoods.

A central element of DFID's approach is the Sustainable Livelihood Framework, an analytical structure to facilitate a broad and systematic understanding of the various factors that limit or enhance livelihood opportunities, and to show how they relate to each other in order to make a clear plan of action.

Principles

- **People-centered:** sustainable poverty elimination will be achieved only if external support focuses on what matters to people, understands the differences between groups of people and works with them in a way that congruent with their current livelihood strategies, social environment and ability to adapt.

- **Responsive and participatory:** poor people themselves must be key actors in identifying and addressing livelihood priorities. Outsiders need processes that enable them to listen and respond to the poor.
- **Multi-level:** poverty elimination is an enormous challenge that will only be overcome by working at multiple levels, ensuring that micro-level activity informs the development of policy and an effective enabling environment, and that macro-level structures and processes support people to build upon their own strengths.
- **Conducted in partnership:** with both the public and the private sector.
- **Sustainable:** there are four key dimensions to sustainability – economic, institutional, social and environmental sustainability. All are important – a balance must be found between them.
- **Dynamic:** external support must recognise the dynamic nature of livelihood strategies, respond flexibly to changes in people’s situation, and develop longer term commitments.

CARE

CARE’s organizational directive as an international NGO is to focus its programmes on helping the poorest and most vulnerable, either through regular development programmes or through relief work.

Since 1994 CARE has used Household Livelihood Security (HLS) as a framework for programme analysis, design, monitoring, and evaluation. It has derived the framework from the classic definition of livelihoods developed by Chambers and Conway (1992), which embodies three fundamental attributes as:

- A. the possession and expansion of human capabilities (such as education, skills, health, psychological orientation),
- B. Providing access to tangible and intangible assets and

C. Provide support in the existing economic activities.

The interaction between these three attributes defines what livelihood strategy a household will pursue. CARE puts particular emphasis on strengthening the capability of poor people to enable them to take initiatives to secure their own livelihoods. It therefore stresses empowerment as a fundamental element of its approach.

2.6 Models of disability and livelihoods of disabled people

Different models of disability consider the economic role of disabled people and economic implication of disability in different ways (Turmusani, 2003).

The charity model of disability promoted by religious organisations considers disability as a punishment and treats them as unfortunate individuals (Coleridge, 1993). Furthermore, this model considers disabled people as appropriate passive recipients of any social and economic support (UN, 2011).

With technological advancement the medical/individual model of disability was introduced. The model linked with medicalization of disability, which regards disabled people as ‘having something wrong with them’ and that is the source of the problem (Oliver, 2009:44). Barron and Amerena (2007) argue that the medical model is associated with negative ideas of permanency, dependency and passivity, and focuses on deficit rather than talent. Furthermore, it ignores basic needs and rights, such as education, employment, housing and the role of society in disabling the people.

Disabled people around the world introduced the social model of disability by discarding the medical model. This model defines disability as the restriction of activity resulting from cotemporary social organization where society does not consider people with impairment, restricts their participation and marginalizes them from the mainstream of society (UPIAS, (1976a:14) cited in Barnes and Mercer, 2010:30). The strength of this model is that it looks beyond impairment and focuses on social, economic, cultural, legal and political dimensions with a rights-based perspective (Turmusani, 2003). It considers disabled people’s unemployment as the outcome of development where faulty policies exclude them from work (ibid). Barron and Amerena, (2007) further add that the model, based on a human rights approach, focuses upon meaningful determinants of social inclusion including access to education, employment and community facilities like transport, housing and public places.

Braithwaite and Mont (2008) argue that concepts of the social model of disability resemble Sen's (1999) ideology of poverty as deprivation of capability.

2.7 The Role of NGOs in improving the Livelihood of PWDs in Ethiopia

Taking examples of some key international declaration over several decades, Ethiopia had no problem of ratifying/adopting the conventions. The Ethiopian government has been moderately prompt in adopting international standards and reflecting those in the domestic policies and strategies. The problem as we shall see latter has been mainly on the capacity of institutions and organization to execute policies and plans on the ground. Apart from enacting laws and passing deliberations there is an increasing interest from the UN and major donors to commit resources towards meeting the objectives set out in those declarations. Major donors have made significant stride to mainstream disability into their funding strategy. The shift came with the growing understanding of the link between poverty and disability. Poverty and disability are self-reinforcing factors. Poverty can be a good cause of disability as can be revealed in the situation of poor nutrition, unsafe living situation, poor health and sanitation facilities etc and at the same time disability can also be hindrance to strive for better life because of the barriers disabled people face to take full advantage of economic and social opportunities.

Taking this fundamental link between poverty and disability, the United States Agency for International Development (USAID) adopted a pioneering policy in 1997. The policy, among other things, indicated that USAID will not discriminate against PWD and that it will ensure the inclusion of disability focused activities in all its program funding. USAID has further institutionalized this policy in 2003/04 by issuing another supportive policy that state all USAID funded physical infrastructures have to ensure suitable access to PWD. Similarly, the WB embarked on mainstreaming disability in to the Banks operation and analysis in 2002.

2.8 Major Challenges of NGOs in Providing Livelihood Supports

Assistance and support are complex, because they are provided by different suppliers, funded in different ways, and delivered in different locations. In supply, the main divide is between informal care, provided by families and friends, and formal services, provided by government, non-profit organizations, and the for-profit sector. The cost of formal support can be met through state funding, raised through general taxation, through social insurance contributions by those covered by the scheme, through charitable or voluntary sector funding, through out-of-pocket

payment to private service providers, or through a mixture of these methods. The services can be provided within a family setting or single occupancy, or congregate living in group homes or institutional settings. The major barriers to assistance and support to the livelihood of PWD include:

Lack of funding

Social safety net programmes in developing countries typically amount to between 1% and 2% of gross domestic product, and to about twice that in developed countries, although rates are variable. Upper middle-income and high-income countries often provide a combination of cash programmes and a variety of social welfare services. In contrast, in many developing countries, a significant share of safety net resources is often allocated to cash programmes targeted at the poor and vulnerable households, with only a fraction going to the provision of social welfare services to vulnerable groups, including individuals with disabilities or their families. In low-income settings, social welfare services are often the only safety net, but the spending is low and programmes are fragmented and of a very small scale, reaching only a fraction of the needy population.

Lack of adequate human resources

Personal support workers – also known as direct care workers or home aides – play a vital role in community-based service systems, but there is a shortage of such workers in many countries. As the proportion of older people in a country increases, the demand for personal support workers will grow.

Inappropriate policies and institutional frameworks

From the 18th and 19th century onwards, the main framework for formal services was to provide support by placing persons with disabilities in institutions. Until the 1960s people with intellectual impairments, mental health conditions, and physical and sensory impairments usually lived in segregated residential institutions in developed countries. In developing countries institutions along similar lines were sometimes initiated by international NGOs, but the sector remained minimal compared with high-income countries. Although it was once thought humane

to meet the needs of people with disabilities in asylums, colonies, or residential institutions, these services have been widely criticized. Lack of autonomy, segregation from the wider community, and even human rights abuses are widely reported. People with disabilities worldwide have been demanding community-based services that offer greater freedom and participation. They have also promoted supportive relationships that allow them to exercise more control over their lives and to live in the community. The CRPD promotes policies and institutional frameworks that enable community living and social inclusion for people with disabilities.

Inadequate and unresponsive services

In some countries support services are available only to people living in sheltered housing projects or institutions and not to those living independently. Institution-based services have had limited success in promoting independence and social relationships. Where community services do exist, people with disabilities have lacked choice and control over when they receive support in their homes. Disabled people often see relationships with professionals, seldom disabled themselves, as unequal and patronizing. Such relationships have also led to an unwanted dependency.

Some recent reviews reveal that while community living shows significant improvements over institutional living, people with disabilities are still far from achieving a lifestyle comparable to that of people not disabled. For many people with intellectual impairments and mental health conditions, the main community service is attendance at a day centre, but a review of a range of studies failed to find good evidence of benefits. The community service often fails to provide an entry to employment, produce greater satisfaction, or deliver meaningful adult activities.

Poor service coordination

Where services are delivered by different suppliers – at local or national level, or from health, education, and housing, or from state, voluntary, and private suppliers – coordination has often been inadequate. Existing services and support schemes may be operated, in any given place, by a range of public or private providers. In India different NGOs or agencies serve different impairment groups, but the lack of coordination between them undermines their effectiveness. Multiple assessments and often been inadequate. Existing services and support schemes may be

operated, in any given place, by a range of public or private providers. In India different NGOs or agencies serve different impairment groups, but the lack of coordination between them undermines their effectiveness. Multiple assessments and different eligibility criteria make life more difficult for people with disabilities and their families, particularly in the transition between services for young people and those for adults. Lack of knowledge about a disability can be a barrier to referrals for effective support services and care coordination, as can a lack of communication between different health and social care agencies.

Awareness, attitudes, and abuse

People with disabilities and their families often lack information about the services available, are disempowered, or are unable or unwilling to express their needs. Empowerment through disability rights organizations, community-based rehabilitation organizations, self-advocacy groups, or other collective networks can enable individuals with disabilities to identify their needs and lobby for service improvement.

Negative attitudes are a cross-cutting issue in the lives of people with disabilities. Negative attitudes towards disability may have particular implications for the quality of assistance and support. Families hide or infantilize children with disabilities, and caregivers might abuse or disrespect the people they work with.

Negative attitudes and discrimination also undermine the possibility for people with disabilities to make friends, express their sexuality, and achieve the family life that non-disabled people take for granted.

People who need support services are usually more vulnerable than those who do not. People with mental health conditions and intellectual impairments are sometimes subject to arbitrary detention in long-stay institutions with no right of appeal, in contravention of the CRPD. Vulnerability – both in institutions and in community settings – can range from the risk of isolation, boredom, and lack of stimulation, to the risk of physical and sexual abuse. Evidence suggests that people with disabilities are at higher risk of abuse, for various reasons, including dependence on a large number of caregivers and barriers to communication. Safeguards to protect people in both formal and informal support services are therefore particularly important.

CHAPTER THREE

3. Methodology

3.1. Research Approach and Design

The research objective is to assess the role and challenge of NGOs in improving the Livelihood of PWDs in Kirkos Sub-city of Addis Ababa. To conduct this research the researcher used case study approach. In order to achieve the objective of the research it employed both primary and secondary, qualitative and quantitative data were approached and collected.

This study is descriptive research whose purpose is to describe and show the activities of PWDs in Kirkos Sub-City and The role and challenge of Federation of Ethiopia National Association (FENAPD) and Chehire Ethiopia (CE) from NGO's whose main purpose is related PWDs. Data was collected and analyzed using qualitative method in order to get access to different sources that enabled us to see the case in-depth. A questionnaire was used and interviews were conducted with key informants on their opinions, practices and attitude towards the issue.

The information has been collected from primary sources through qualitative interviews, such as focus group discussion and semi-structured interview. It reveals details about people's ideas and feelings, and answers the questions 'how' and 'why' (Laws et al., 2003).

3.2. Target Population and Sampling Technique

This study employed purposive sampling and will selected and decide sample I use during filed work how much Ethiopian resident charities and foreigner NGOs that are working in area people with disability and try to access the contribution and challenge in Improving the Live hood of people with disability . selected these NGOs based on experience they have been working with PWDs because he finds it helpful to achieve the research objectives.

The population includes Federation of Ethiopia of Ethiopian National Association (FENAPD) and Cheshire Ethiopia (CE). The researcher used Purposive sampling technique in selecting the institutions and NGO's which are mentioned above for their relevance to achieve the research objective since they all are directly engaged or otherwise one way or another related with the issue of PWDs. A total of 50 PWDs from Kirkos Sub-city, out of 50 Questionnaires 48 where filed and

returned where 31 of them were male and the remaining 17 respondents women. The researcher used a total population size of 50 because of financial constraints, time constraints and the researcher encountered/found out that the responses from the respondents (PWDs) were similar or/and repetitive so the researcher believed using the population and collected data would not bias the research output. Finally the data that was gathered from the Institutions, NGO's and that of PWDs were used as primary source.

3.4. Data Collection Techniques

Data collection was made through the use of primary and secondary data collection instruments. The primary data was collected through quantitative and qualitative methods. The data for the quantitative section was collected using survey questionnaire prepared by addressing all important variables. A close ended self-administered questionnaire was prepared in English and Amharic. Qualitative data is collected using key informants interview and personal observation. The interview was conducted for the government officers working with the NGO/Charity organizations, NGO/Charity organizations leaders and workers, and Beneficiaries.

The research also has a component of quantitative method for which data has been collected from a survey report of NGO in Kirkos sub cities and on disabled people's livelihoods in the Sub cities. The objective is that quantitative data can provide information about bodily discrimination in accessing livelihoods to justify that the individual model is discriminatory (Abberley, 1992). Besides that, the report helped me in finding the statistics, level of education, status of livelihoods and health of disabled people in the Sub-city. The information was used to prepare the list of participants who are people with physical, visual and hearing impairments among the age group 19-60. I also used the list to visit participants individually prior to the interview and discussed the research. This helped me to develop a rapport with them. Furthermore, comparing and contrasting the survey report with information of qualitative interviews helped in validating my findings.

3.5. Data Analysis Techniques

The study used data analysis instruments like frequency and percentage then interpreted the outcome of the findings. The qualitative data that are collected through key informant interviews and the quantitative data are analyzed separately. The units of analysis being themes and concepts, the findings are presented in a descriptive manner. The data gathered through qualitative and quantitative methods, primary as well as secondary sources have been analyzed based on descriptive analysis. Based on the findings conclusions and recommendations are given.

3.6 Framework of the livelihood Analysis

The sustainable livelihoods approach, based on the concept of capability approach, defines livelihoods as ‘access to capitals and activities needed to lead a meaningful life’ (Carney, 1998). This study, therefore, considers different attitudinal, physical and social barriers that prevent disabled people from accessing their livelihoods.

Of the three approaches discussed in this paper, one of them is DFID approach. This approach recognizes specific issues to be initiated for empowerment of disabled people and disability issues to be included in all areas of work.

In this particular paper I used DFID (Department for International Development) organizations approach to address the livelihoods of disabled people. A central element of DFID’s approach is the Sustainable Livelihood Framework, an analytical structure to facilitate a broad and systematic understanding of the various factors that limit or enhance livelihood opportunities, and to show how they relate to each other in order to make a clear plan of action, self-employment, wage employment, and financial and social protection schemes as the major areas of intervention to improve the livelihoods of disabled people (WHO, 2010b, Coleridge, 2007). Skill development activities include basic education, home-based training, apprenticeships, business development skills and vocational training in both mainstream and specialized institutions. Self-employment support targets individual businesses, self-help groups and group businesses focusing upon disabled women and access to savings, micro-credit and start-up capital. Employment support activities are enabling and assisting people to find and retain the jobs, and social protection support measures are the inclusion of disabled people in poverty

alleviation programmes, social assistance schemes, compensation and enhancing family and community support.

CHAPTER FOUR

4. Data Presentation, Analysis and Interpretation

4.1 Introduction

Throughout the developing world, both international and national NGOs play an important part in development. NGOs offer service national governments are unable to provide for citizens. There are two important aspects to the evolution of voluntary sector in Ethiopia that have had an enduring impact. First, until recently, the sector consists of small number of organization focused solely on relief effect, and secondly, they have operated under very difficult and circumstance.

In 1995, the government implemented guidelines for NGOs which was attempted to closely monitor escalating amount of organization operating in the country. The government took a very ambulant toward NGOs, and the new guidelines for the sector proved problematic for organizational wanting to gain registration, work permit and import license but the new political reform in the country try to discuss with perspective stakeholders in order to eliminate or reduce his guidelines.

According to Ethiopian Non-Government Organization Agency before New guidelines applied by Ministry of justice in 1995 there was 1656 registered NGO but the agency appealed that after a new guidelines the agency registered additional 1567 for the period of 1995 up to 1998 for three years.

According to the proclamation the agency have been established the purpose of

1. According to the proclamation register, support and coordinate and accelerate the organization work
2. Make sure the organizations work according to legal induce
3. Audit the organization's annual work activity and cash flow according to standard
4. Make sure and help the organization to have transparency and accountability and control the organization according that standard

5. With collaboration with state government, identify the number of Non-government organization and there type of there support, register the there beneficiary and accumulate a central data base for use different information delivery.
6. Facilitate different meeting federal and state government with organization
7. To surmount his responsibility work with different stakeholders.
8. Facilitate and support the organization in order to participate policy and law making process.
9. To make a research and deliver about what is role of NGOs in democracy growth, human right and various development and advice the government.
10. Make sure and make directive the organization plan compliance with the government goal.
11. Refinement and approve organization manual and changes.
12. Collect administration service income according to proclamation.
13. Other

4.1.1. Charitable Activities and Category in Ethiopia

Proclamation No. 621/2009 identifies the following areas as charitable purposes:

- a. Disaster prevention and poverty alleviation
- b. Economic and social development
- c. Environmental protection
- d. Animal welfare
- e. Arts, culture, heritage and science
- f. Education
- g. Health and the saving of lives
- h. Amateur sport and youth welfare
- i. Relief of the needy because of age, disability, financial hardship or other disadvantage
- j. Capacity building on the basis of the country's long term development directions
- k. Human and democratic rights
- l. Promotion of ethnic, religious and gender equality
- m. Promotion of child rights and the rights of disabled persons

- n. Conflict resolution and reconciliation
- o. Supporting justice and law enforcement
- p. Other purposes prescribed by the agency

Only Ethiopian Charities/Societies can engage in the activities listed under k - o in the list above. In other words, Foreign and Ethiopian Resident Charities are not allowed to work on human and democratic rights, religious, ethnic or gender equality, child rights and the right of disabled persons, conflict resolution and reconciliation, and supporting justice and law enforcement sectors.

So the new charities/ societies proclamation may be it try to progress this situation in the future because all that want help easily in society.

Table-1 Register NGOs with Category in Ethiopia

Type of NGOs	Number	Percent
Adoption foreign Charity	36	1.07%
Consortium	52	1.53%
Ethiopian Charity	142	4.17%
Ethiopian Residence Charity	2311	67.83%
Ethiopian Resident Society	83	2.44%
Ethiopian Society	368	10.80%
Foreign Charity	415	12.18%
Total	3407	100%

Source Data from ECSA

4.1.2 NGOs working on PWDs

Today, an estimated 3490 NGOs are involved in activities throughout the country, with over 292 being based and working in people with disability.

Ethiopia is highly dependent on external assistance and a large majority of funds are channeled through NGOs because they have gain vast support from the donor community. This highlights

the pressing need for NGOs to be effective development partner on the ground. Today only a small number the 292 NGOs throughout Ethiopia there is no NGOs are participating in program or project that involve the improvement of livelihood of people with disability in Kirkos sub-cities. To know why the role of NGOs are limited and there challenged the researcher has interviewed three NGOs that have a large experience the issues of People with disability in Ethiopia.

Table- shows that from the total 292 NGOs that register on charity and Society agency and support, 120 (40%) of engaged in handicaps support, 103(35%) generally all type of disable rehabilitation support,31 (11%) blind support, 16(5%) Deaf support and 22(8%) Mental disorder supports.

Table 2 Table shows Register NGOs on ECSA to help People with Disability

Type of disability support	frequency	Percent
Handicap support	120	41%
Disable Rehabilitation	103	35%
Blind support	31	11%
Deaf Support	16	5%
Mental disorder	22	8%
Total	292	100%

Source Data from ECSA

4.2 Basic Service NGOs providing to PWDs in Kirkos Sub-city

4.2.1 Role of Federation of Ethiopia National Association of Person with Disability (FENAPD)

Federation of Ethiopia National Association of Person with Disability FENAPD is the first consortium of disability association established in December 1996 to amplify the united voice of person with disability.

Initially the federation had been working intensively on enhancing public awareness on disability and the issues related to equality and right of person with disability. Later, particularly after the issuance of the new civil society legislation, the federation began to focus mainly on the development and capacity building in addition to awareness rising. FENAPD has is also been taking a role in law and policy making as well as strategy design.

FENAPD Member Association

- Ethiopia National Association of the Blind
- Ethiopian National Association of the Deaf
- Ethiopian National Association of person affected by Leprosy
- Ethiopian National Association on Intellectual Disability
- Ethiopia National Association of Deaf-Blind
- Ethiopian National Association of Physically Disability

According to FENAPD even if it is source of income different by type of disability and they are unemployed and dependent on their Owen family the major source of income with disability is

- Begging
- Small type trade such as Lottery selling, Book selling and other
- Daily labor

FENAPD involved in enhancing the livelihood of people

1. Support member of association in their effort to achieve their common goal
2. Develop the capacity of member of association
3. Raise Awareness, collect and disseminating disability information and share experience
4. Promote ethics and good governance both in the federation and member association
5. Enhance the participation of women with disability in the member association

Major intervention

- Capacity building
- Awareness raising
- Inclusive education
- Health/HIV-AIDS
- Economic empowerment
- Disability research, Development of women, Children and Youth disability

4.2.2 Role of Cheshire Ethiopia (CE)

Cheshire Ethiopia (CE) was established in 1962 by group captain Leonard Cheshire at the request of Emperor Haile Selassie's grandchildren. CE is a local independent NGO, staffed by Ethiopians and registered as an Ethiopian Resident Charity, while playing a leading role in enhancing social functioning persons with disability in Ethiopia, mainly children.

What Cheshire Ethiopia offer

- Physical rehabilitation for children any young people, post-operative rehabilitation, design manufactured and fitting of walking appliance and wheel chairs.
- Manufacture ordinary and customized fitting of prosthetic and orthotic device
- Rehabilitation for children with development delay.
- Accessing rural person with disability to rehabilitation service
- Livelihood initiative helping people them selves
- Role model development leading to greater understanding and acceptance in the society people with disability
- Educational and Physiological support for children and their family and their community
- Knowledge and rehabilitation skill transfer for parent of children disability
- Awareness education on disability prevention right, need and social inclusion of person with disability

4.3 The Complementary, Supplementary and adversarial role of NGOs to help PWDs in Kirkose Sub-city

Development is deliberate efforts to secure positive changes in people's quality of life in economic social and political terms. NGOs are involved in relief emergency and aid works. Development relates to economic empowerment and rights; relief work is an immediate response to the natural and man-made disasters (distributing goods, services and technical assistance to those in need). Emergency signals that there are areas of insecurity, instability and disorder. Development, relief and emergency works take place not only in countries of Asia, Africa and Latin America where the scale of poverty is most severe and where the needs are greatest but also in the marginalized communities in the USA and Mexico and India also in Japan. Some NGOs focus only on aid because aid is the source and a way to get reach for some individual.

Economic theories of the nonprofit sector suggest several different ways of understanding the relationship between government and private, not-for-profit organizations. In particular, different strands of theory support the alternative views that nonprofits (a) operate independently as supplements to government, (b) work as complements to government in a partnership relationship, or (c) are engaged in an adversarial relationship of mutual accountability with government.

The Federal Government of Ethiopia has a lot of responsibilities and duties in making sure of the well beings of its citizens in general other than national security, protection of the sovereignty of the country and so on. To do so the federal government has the mandate/the power to formulate and implement the country's policies, strategies and plans in respect of overall economic, social and development matters. In order for the government to do its duties, a number of ministerial offices are set in different areas to address the overall economic and social life of its people. Because it is difficult to government to do all this responsibility only by its self the NGOs must take some responsibility by participating whether engaged complementary, supplementary and an adversarial relationship. For this particular research we are restricted to look in to one selected sub cities namely Kirkos Sub-cities Social problem protection affairs office department concerning government institution so as to know the roles that these offices are playing in their

jurisdiction and the challenges that they face towards improving the livelihoods of People with disability and to know whether as complementary, supplementary and adversarial relationship with NGOs.

The department of Social Problem Protection office is the first and foremost responsible office in dealing with the issue of people with disability with any issues concerning disability under the Sub-cities. These departments have a lot of responsibilities and many functions. The people with disability Affairs department managers (coordinators) of the sub cities was interviewed about the main role that the department they manage or coordinate is playing towards improving the livelihood of PWDs and the role of NGOs in the sub city to improve the livelihood of PWDs. According to the coordinators, the main roles that their department is:

- Prepare income generation project for Association
- Prepare awareness creating training
- Providing Legal advice
- Provide Various information for the stakeholders

According to the department of Social problem protection office, the coordinators and case team leaders of Kirkos Sub-City —The challenges that the department has towards improving the livelihoods of PWDs through interview and the coordinators explained the main challenges as follows:

- Lack of sufficient budget to implement the departments ‘plan which could possibly change and improve the PWDs livelihood.
- The work by itself is full of challenges hence we deal with the neediest/ poorest segment of the society.
- No means to conduct proper research to address the issue of PWDs and to come up with better livelihood means.
- The department is not getting enough attention by higher governmental body as it should be and due attention has not been given towards improving the livelihood of PWDs from higher government body.

I ask what is the role of NGO to improve the Livelihood of PWDs in Kirkos Sub-city According to the Social problem protection office no Non-Government Organization has been made a connection to the sub city to try improving the livelihood of PWDs in the Sub-city.

According to the coordinator NGOs to become a viable alternative institution for the improvement of Livelihood of PWDs in the Kirkos Sub-city because of the above challenge the Sub-City have, so it must improve the Coordination between and as well as increase collaboration with other actors that are working towards the same goals.

4.3.1 Advocacy Role of FENAPD

According to FENAPD However, the NGO sector in Ethiopia also has a vital role to play in this process and NGOs have been active in the process of implementation the National Strategy. A number of general advocacy goals can be illustrated in their general approach to the development of projects targeting people with disabilities.

Promoting the social model of disability: overcoming barriers of exclusion

In the past, actions in favour of people with disabilities were usually based on the ‘medical’ (or individual) model of disability, according to which people with disabilities are viewed as ‘sick’ and in need of being ‘cured’ or cared for by medical professionals. Impairment and chronic illness exist, and they sometimes pose real difficulties for people with disabilities. This does not make them less suitable to participate in society, but most people have not been brought up to accept them as they are fear, ignorance and prejudice all contribute to the development of barriers and discriminatory practices, including, for example, an ‘inferiority complex’ and sense of isolation on the part of PWDS, and exclusionary attitudes on the part of the general public. However, thanks to the advocacy of NGOs, and also to the new governmental initiatives, these barriers are starting to be addressed.

The medical model is gradually being replaced by the new ‘social model’, which is premised on active participation, equal opportunities, and the integration of people with disabilities into mainstream life. At its simplest, the Social Model shifts the focus from people's impairments, to removing the barriers that people with disabilities face in their everyday life and acknowledging

society's failure to take diverse needs into account. It aims to move policy away from a medical, charity and care agenda, towards a rights-based, equality agenda.

Addressing the environmental and psychological barriers that people with disabilities face

In its broadest sense, the social model of disability is about a clear focus on the economic, environmental and cultural barriers encountered by people who are viewed by others as having some form of impairment - whether physical, sensory or intellectual. The barriers encountered by people with disabilities include inaccessible education systems and working environments, inadequate disability benefits, discriminatory health and social support services, Inaccessible transport, houses and public buildings and amenities, and the devaluation of PWDs through negative images in the media.

According to FENAPD Serious efforts have been made by NGOs in Ethiopia to mobilise people with disabilities to join local community-based organisations for self-help and self-advocacy purposes. Organisations of people with disabilities have become more open to the public, and placed more emphasis on working to raise public awareness and gaining support for independent living practices. This facilitates the participation of disabled people in the decision-making process, as well as the design of more feasible and sustainable development projects. NGO advocacy initiatives now include providing training and professional orientation for people with disabilities, and strengthening the capacity of their own NGOs.

According to FENADP coordinator Proclamation 568/2000, right to employment PWDs and Proclamation 568/2001 building proclamation that help to PWDs are the result of this advocacy but the coordinator argued that there are no facilities with in cities or in local government for income generation program (employment, self-employment social security) for disabled people and the official also stated that the government have a problem to implement this proclamation.

According to FENADP Coordinator the study found that extreme family control and lack of political power have made disabled people in the sub city voiceless and powerless. In addition, disabled people's ignorance of existing entitlements further reduces their self-esteem and increases their dependency.

According to FENADP Coordinator that disabled women are double disadvantaged due to gender discrimination and their impairment. Furthermore, their engagement in household work is not valued as productive work. Disabled women are deprived their share in parental property due to gender discrimination. It is evident that disabled women are deprived of education and employment due to gender bias, social stigma and parental attempt to protect them from exploitation. Furthermore, the ignorance and powerlessness of disabled women restricts their livelihood options and increases their dependence.

4.3.2 Complementary and Supplementary Role of Cheshire Ethiopia (CE)

Center Based Program

Cheshire Ethiopia provides center based services in its Menagesha, Dire Dawa, Hawassa and Addis Ababa Rehabilitation centers. CE-Menagesha and CE-Dire Dawa admit 140 clients at a time, i.e. 120 and 20 respectively. Menagesha rehabilitation Center is a national rehabilitation and referral center for rehabilitation of Persons with disabilities mainly children aged 5-18 years affected due to post-polio paralysis. The children wing admits 70 clients at a time making the annual intake being over 140 children. With the exception of those serious cases who stay more than a year despite of the average length of stay four to six months.

The comprehensive pre and post-operative care along with physiotherapy, hydrotherapy, occupational therapy, donkey assisted therapy, handicraft training, informal and functional education, life skills training, counseling, mobility and walking appliances fitting and other therapeutic services enhance mobility and social functioning of children under rehabilitation.

Mobile Outreach Services

Historically the mobile outreach service was established to make follow up of children discharged from Menagesha Rehabilitation Center as rehabilitation services are unavailable in distant parts of the country. Currently the mobile outreach is deployed from three centers (Menagesha (22), Hawassa (8), and Dire Dawa (8) making the total outreach post thirty eight. Cheshire Ethiopia Mobile Rehabilitation Team provides follow up service for disabled children and young people in different localities and monitors more than 6,500 clients annually,

by accessing walking aids such as crutches, braces, shoes and walking frames. During field operation new clients are identified and provided with on the spot rehabilitation. In cases where there is need for further evaluation and professional support they are given appointments for admission to Menagesha.

According to Cheshire Ethiopia in 2018, 10,461 people with disability directly and 7,100 people in the community are benefited from its organization throughout Ethiopia.

Cheshire Ethiopia is not specifically work in Kirkose Sub- City but the coordinator believe that different PWDs has been using the service of the organization and also using in the future if they fulfilled the criteria of the organization

4.4 Opportunities and Challenges in the Realization of Livelihoods of Disabled People in Kirkos Sub-City

Limited formal or informal employment opportunities, absence of income and lack of access to finances and safety nets are major challenges for disabled people's livelihoods. This chapter discusses how unavailability of infrastructures, facilities and access to existing resources has affected disabled people's livelihoods in the sub city to the maximum extent. The first section provides demographic characteristics of the Respondent. The second section analyses Background in Livelihood Situation of Respondent in the sub city on it. The final section reflects the factors that deprive disabled people from accessing existing entitlements and push them into poverty; this is followed by the conclusion.

4.4.1 Demographic Characteristics of the Respondent

The sub cite of kirkose is about 14.52 sqkms and the population of 235,441 with male 110,069 female 125,372. As per kirkose sub city survey (2018) there are 470 disabled people in the sub city (336 men and 134 women).

Type of Disability Total Population

Table – 3 Type of Disability in Kirkos Sub-City

Type of Disability	frequency	Percent
Orthopedic Disability	326	69.2%
Cerebral palsy		
Hearing and Speech	22	4.7%
Mental Disability	58	12.34%
Visual Disability	62	13.19%
Other	2	0.4%
Total	470	100%

Source Annual survey report of kirkos sub city 2018

According to Kirkos Sub-cities social and employment affairs, department of social problem protection affairs year 2011 annual people with disability short report Total number of disability 470, 336(71.5%) participants are male and 134 (28.5%) are female.

Table 1, shows that out of 470 people with disability 326(69.2%) are orthopedic disability, 22(4.7%) people with disability with hearing and speech disability, 58(12.34%) people with disability with mental disability , 62(13.19%) people with disability with visual disability and 2 people disability with other disability different from the above type of disability.

Type of Disability of sample

The presentation of data is as per the respondents' perception towards their livelihood. Out of the total number of participants, 31 (65%) participants are male and 17 (34%) are female.

Table 2, shows that out of 48 respondent 28(65%) are orthopedic disability, 7 respondent with hearing and speech disability, 4 respondent with mental disability and 9 respondent with visual disability.

Table – 4 Sample of Type of Disability in Kirkos Sub City

Type of Disability	No
Orthopedic Disability	28
Cerebral palsy	
Hearing and Speech	7
Mental Disability	4
Visual Disability	9
Other	
Total	48

4.4.2 Back ground in Livelihood Situation of Respondent

Table- 5 source of income

Source of Income	frequency
Daily Labor	7
Small Trade	12
Private Employment	5
Government Employment	4
Begging /unemployment	20
Other	
Total	48

Source from the survey April, 2019

Only four out of forty eight eligible disabled people within the age group 19-60 are involved in any kind of waged employment. The participants of the people with disability responded shared the fact that only seven disabled people work as daily laborers and only twelve are work a small trade five are private employment and four are working government employment and the rests are unemployed. According to participant argues that the unemployment of disabled people is due to lack of education and training.

Table 6 Education status of people with disability in Kirkos Sub Citys

Educational status	frequency
illiterate	14
Reading and writing	10
Primary school	7
Secondary school	9
College Diploma and above	8
Other	
Total	48

Source from the survey April, 2019

The survey statistics suggests that majority are disabled people are illiterate; seven have attended primary school but only nine completed secondary school eight studied up to graduation and ten can reading and writing even if they are not finish primary school.

4.4.3 Challenge of the Respondent Prevent the Livelihood

Table 7 Challenges from further study or vocational Training

What prevent you further study or vocational Training	frequency
Financial Problem	28
Family problem	5
Lack of Vocational institution in your area	4
Social Problems	5
Lack of Interest	4
Other	2
Total	48

Source from the survey April, 2019

Table 8 shows, 28 respondent out of 48 have been thinking the main reason what prevent further study or vocational training because of financial problem, five respondent out of 48 have been thinking the prevent further study because of family problem, 4 respondent out of 48 have been thinking there lack of vocational institution in their area, 5 respondent out of 48 have thinking it is because of social problem,4 respondent out of 48 have been thinking prevent them from further study lack of interest to proceed further study and 2 respondent out of 48 they has been taking vocational training that help for livelihood .

Majority of participant argues financial problems have prevented from further study and vocational Training.

Table- 8 how impairment has affects income

Whether the Impairment affected your Income	frequency
yes	45
No	3
Total	48

Source from the survey April, 2019

The table – 6 shows, 45 respondents out of 48 responses have been think there impairment affect their income but 3 respondents out of 48 believe the impairment are not affect their income .

The main reason the impairment has affected their income

Table-9 the main reason the impairment has affected their income

How Impairment affect income people with disability	No	Percent
Because of Discrimination	9	19%
Lack of Support	15	31%
Lack service to people with	8	17%

disability		
Family Problem	2	0.04%
Social awareness about people with disability	14	29%
Total	48	100%

Source from the survey April, 2019

Table 7 shows, 9 respondent out of 48 have been thinking the main reason the impairment affect their income because of discrimination of PWDs, 15 respondent out of 48 have been thinking the impairment affect their income because of Lack of support, 8 respondent out of 48 have been thinking there lack service to PWDs and 14 respondent out of 48 have thinking it is because of limitation of social awareness about people with disability.

Table 10 undergone any treatment

Undergone any treatments	Number	Percent
Yes	25	52%
No	23	48%
Total	48	100%

Source from the survey April, 2019

Table 8 shows, 52% of the respondent have not under gone any treatment, according to the respondent the main reason prevented them undergoing treatment is financial Problem Majority of respondent that responded No when they ask what prevents form undergoing treatment is financial problem

4.4.4 Family Support in realization of livelihoods of the Respondent:

As discussed earlier, inability to earn reduces disabled people’s self-esteem and confidence and makes them powerless. Therefore, not only livelihoods, but also all other aspects of their life, are determined by the family. This was reflected during a field study in Kirkos Sub-city.

This Part analyses the impact of negative attitude and lack of family support on disabled people’s livelihoods. It further discusses the fact that lack of awareness of disabled people on existing entitlements and long-term oppression lower their self-confidence and willpower, which are crucial for selecting appropriate livelihood options.

Table 11 Family Support

Family Support	Number	Percent
Yes	17	35%
No	31	65%
Total	48	100%

Source from the survey April, 2019

Table 9 shows, 17 respondents out of 48 have been got family support to their livelihood, 31 respondents out of 48 has not any support from their family.

Limited opportunities for employment/self-employment and lack of access to entitlements force disabled people to depend upon family to meet their livelihoods. However, the assumption that family is always supportive towards disabled people may be an incorrect notion. It is found from the study that extended family members also have hidden interests in supporting disabled people. The negative attitude of the family and their self-interest restricts the livelihood options for disabled people.

Table 12 Challenge from the family

Challenge from the family	Number	Percent
Yes	22	45%
No	26	55%
Total	48	100%

Source from the survey April, 2019

Table 10 shows, 22 respondents out of 48 has challenge from family that prevent in accessing their livelihoods independently, 26 respondents out of 48 has no challenge that prevent in accessing their livelihoods independently.

Hence, disabled people’s lives depend entirely upon the mercy of family members. The respondent rightly stated that in order to survive, disabled people have to accept and tolerate all the decisions of the family whether right or wrong. These negative situations not only disempower disabled people but also deny their to livelihood choices. Moreover, as discussed earlier, fear of social status and family members’ lack of awareness regarding disabled people’s capabilities and their entitlements also limit their livelihood options.

4.4.5 NGOs and Government Assistance and Support in Improving the Livelihood of the Respondent

Table 13 Accessing education, employment, and self-employment and government schemes

Accessing education, self	Number	Percent
Yes	33	69%
No	15	31%
Total	48	100%

Source from the survey April, 2019

Table 11 shows, 33 respondent out of 48 has challenges from community and other stakeholders for accessing education, employment, self- employment or government schemes and facilities for safety nets, 15 respondent out of 48 has not challenges.

The table – 12 shows; out of the 48 participants who are in any income generation programme and responded to the question “whether they would like to change their income generation programme if support given?” 36 (75%) shown their willingness to change their present occupation. They strongly feel to perform better and can earn more if support is given to start something other than the occupation they are engaged with presently. They are quite confident

that this initiative will fetch more income and would bring better job satisfaction. The hurdles for most of the participants who are willing to start some trade or willing to change their existing trade or expanding their existing trade have been expressed as in limitations in initial investment and in getting the link to the top-end retail market for their products

Table 14 PWDs willingness to change

Willing to Change	Number	Percent
Yes	36	75%
No	12	25%
Total	48	100%

Source from the survey April, 2019

As indicated in the table - 15, quite a few (38%) of the participants have a high level of motivation to start with a livelihood programme of to expand their existing ones. These are the people who have experience in one or the other livelihood programme and have also very well experienced the market. They have knowledge about the trade and its market that makes them confident to go ahead if opportunity is given. Their contribution towards their families' financial need has gained respect for themselves and enhanced standing in their respective family and community. This has been a prime motivation for them to work hard for the livelihood to make a successful programme. They also understand that this little contribution towards the family and society is an effective way to fight with the age old stigma attached with persons with disabilities. Whereas 22 (46%) and 8 (16%) respondents have shown medium and low level of motivation for the programme. One among the 3 respondents of low individual motivation is speech impaired this due to his limitation with communication, he feels less confident to start without help. They are interested to participate in the project but may be comfortable to work under the guidance of other members.

Table-15 Level Motivation to start a new livelihood program

Individual Motivation Level	frequency	Percent
High	18	38%
Medium	22	46%
Low	8	16%
Total	48	100

Source from the survey April, 2019

Initial investment supposes to be the biggest problem for PWDs in the area. The table-13 indicates 9 (19%) of the 48 responses do not have adequate economic support either to or to expand their livelihood programme. Only 4 (8%) respondents have said to have some savings or contacts or the family back up that help them to start with trade or expand. Thirty five (73%) persons said to have their trade going on in a very small way which return too less to continue. If these people will be given some support to expand, they may take it as a livelihood option in a full-fledged manner.

Table–16 Socio-economic availability for PWDs in Kirkos Sub City

Socio economic Availability	frequency	Percent
No	9	19%
Yes	4	8%
Need Support	35	73%
Total	48	100

Source from the survey April, 2019

The respondents were also asked if they think or believe that the government institutions particular that social security Agency & others too are working hard enough to improve their livelihood and help them have better and sustainable livelihood. As shown in the above table, 36 (75%) of the respondents who are from the sub cities and from different wereda's don't believe that the government is working to help them out in any way whereas 6(12.5%) do believe that

the government is working to improve their livelihood and 6(12.5%) said they don't know anything about it.

Table – 17 Government support

Socio economic Availability	frequency	Percent
No	36	75%
Yes	6	12.5%
I don't Know about it	6	12.5%
Total	48	100

Source from the survey April, 2019

All respondents were asked if they know or heard about the existence of any NGO what so ever in their community that they live in and 10(21%) of the respondents out of 48 said they know an NGO who works on people with disability in general whereas 38(79%) said they are not aware of any NGO in their local area who works on a people with disability in general.

Table 16 NGO Availability

NGOs availability	Number	Percent
Yes	10	21%
No	38	79%
Total	48	100%

Source from the survey April, 2019

4.5 Major Challenges NGOs Improving the Livelihood PWDs

Assistance and support are complex, because they are provided by different suppliers, funded in different ways, and delivered in different locations. In supply, the main divide is between informal care, provided by families and friends, and formal services, provided by government,

non-profit organizations, and the for-profit sector. The cost of formal support can be met through state funding, raised through general taxation, through social insurance contributions by those covered by the scheme, through charitable or voluntary sector funding, through out-of-pocket payment to private service providers, or through a mixture of these methods. The services can be provided within a family setting or single occupancy, or congregate living in group homes or institutional settings

4.5.1 Challenge of your organization to improve the livelihood of people with disability in FENAPD

Despite the ever growing NGOs sector in Addis Ababa we witness all but a distinct few avoiding the improving people with disability issue, some mitigate factor this role according to FENAPD is the issue of improving the livelihood people with disability is a long term project, most NGOs want to participate a short term project.

Shortage of fiancé is another challenge of FENAPD because it has limited source of income birr 200,000.00 that collect from the government and collecting from other NGOs According to FENAPD there are few NGOs to improve livelihood of people with disability and believe that there are few compare to problem of people with disability and some NGOs are doing their own business with the name needy. But the officer also told me ILO, CBM, Light for the world, USAID are a NGO worked with FENAPD to improve livelihood of people with disability.

4.5.2 Challenge of Cheshire Ethiopia to improve the livelihood of PWDs

The representative was asked through an interview question —what are the challenges that Cheshire Ethiopia face towards improving the livelihood people with disability and the representative described the main challenges as follows:

- Financial constraints are the biggest challenge and even treat to the organization existence hence the organization pays huge amount of money for rent to run its works.

- Lack of potential donors by which the organization run its programs through volunteer donors and individuals hence the main source of income comes from individuals like from the founder and other.
- Lack of skilled manpower to do the work.
- Material and equipment shortage.
- Perception of the society towards people with disability.
- There is no networking between other similar organization to share experience get assistance and work together.

4.6. Discussion

By observing the discussion above and comparing the responses of institutions on the roles and challenges that they claimed to play and face towards improving the livelihood of people with disability vis-à-vis with the responses of stakeholder, the following difference have been found. Based on the responses of the respondents from the institution side and people with disability side, there exists a difference in opinion. When the institutions claimed to provide services to the people with disability, the beneficiaries have differing opinion. The institutions explained that they support in general but out of the total respondents from Kirkos Sub-city, 79% said they have never got any kind of support or assistance whatsoever from any institutions. But according to Charity and Society agency data shows that there is 292 NGOs are work on people with disability from the total 292 NGOs that register on charity and Society agency and support, 120 (40%) of engaged in handicaps support, 103(35%) generally all type of disable rehabilitation support, 31 (11%) blind support, 16(5%) Deaf support and 22(8%) Mental disorder supports.

This shows that there is gap between registration of Non-government charitable organization and inspection whether the established organization achieving their duty and responsibility

According focused group discussion to the respondent there are no available schemes and facilities of the provided Government of Ethiopia and NGOs for disabled people. Other country has facilities like subsidized loans; disability pension; free housing schemes; free rations for poor people and vocational training centers available for disabled people. According to respondent, and also it is very difficult to use infrastructure 33 respondent out of 48 has challenges from

community and other stakeholders for accessing education, employment, self-employment or government schemes and facilities for safety nets, 15 respondent out of 48 has not challenges. By observing the discussion above and comparing the responses of institutions on the roles and challenges that they claimed to play and face towards improving the livelihood of people with disability government do not is not accomplishing his responsibility to help people with disability by controlling Non-government organization that is established the name and to give a benefit for people with disability.

According to FENAPD representative, the proclamation clearly stipulates that the promotion of the rights of peoples with disability is reserved only for Ethiopian charities or Societies, foreign charity cannot run this project as it's intended. Hence any financial or technical assistance or capacity building for promoting such rights will fall under the restricted activities. An intervention in the area needs to be adjusted in terms of an act of charity for disabled children in line with the proclamation Art. 14(2) (h). Even the identified partner to run the project may not implement it unless registered as an Ethiopian Charity or society. It must be, however, noted that direct support on a need based approach is welcomed by the legislation irrespective of the type of the organization. The proclamation will solved this problem

CHAPTER FIVE

5 Summaries, Conclusion and Recommendation

5.1. Summary of Findings

By observing the analyzed and interpreted data, the researcher found out the following major finding concerning the roles and challenges of selected government institutions and NGO'S which are found in Kirkos Sub-city's, concerning the livelihood situation of people with disability , the concerning the attitudes and feelings of people with disability towards selected Sub-City and NGO'S and future plans that the selected institution and NGO's have to improve the livelihood of people with disability under their jurisdiction.

By understanding the vulnerability of People with disability, all parties have to work together in a consistent manner to solve or reduce the problem PWDs in general and help to recover and improve the livelihood of people with disability in Addis Ababa otherwise it would be difficult to PWDs to improve the livelihood and contribute their part for the development in general

The objective of the research was to identify the role and challenge of NGOs to improving the livelihood of people with disability by exploring an opportunities and challenges of disabled people in accessing livelihoods in urban areas from the perspectives of the social model of disability, capability approach and sustainable livelihoods approach. Therefore, the research identified the existing patterns of disabled people's livelihoods. Furthermore, it explored available facilities and major challenges for disabled people in securing their livelihoods.

5.1.1 Finding concerning the roles and challenges of selected institution

The main finding of this research concerning the roles that the selected NGOs are playing towards improving the livelihood of people with disability. The role of NGOs in urban area is very limited. Moreover; disabled people have fewer chances of initiating any self-employment programmes due to limited education, training, savings, credit and marketing facilities. The sole primary school and nearest high school are not equipped to address the needs of PWDs. Physical

inaccessibility, financial problem and transport prevent them from getting educated. Furthermore, the education of disabled persons is a low priority for parents as there is less likelihood of them getting any employment. Special schools and vocational training centers are not within the reach of disabled people. Besides this, disabled people lack access to credit as they are not included in any self-help groups, and other credit facilities are unavailable in the area around the Sub-city. Moreover, research found that stake-holders' negative feelings about the ability and credit-worthiness of disabled people deprived them from accessing any credit. Non-availability of raw materials and marketing facilities within the Sub-city further reduces their options for self-employment. It was observed that availability of social security schemes like pension, free ration, aids and appliances, and housing are negligible and not easily accessible in the study area. As discussed earlier, the eligibility criteria of many impairment, administrative complications are major hindrances in accessing these facilities. In addition to this, distance from institutes and the cost of treatment deprive them from medical treatment. Furthermore, the negative attitude of family and lack of awareness lower the self-esteem of disabled people and reduce their livelihood options.

The main and common roles that the selected NGOs are playing towards and improving the livelihood of people with disability are as follows:

- Physical rehabilitation for children any young people, post-operative rehabilitation, design manufactured and fitting of walking appliance and wheel chairs.
- Manufacture ordinary and customized fitting of prosthetic and orthotic device
- Rehabilitation for children with development delay.
- Accessing rural person with disability to rehabilitation service
- Livelihood initiative helping people them selves
- Role model development leading to greater understanding and acceptance in the society people with disability
- Educational and Physiological support for children and their family and their community
- Knowledge and rehabilitation skill transfer for parent of children disability
- Awareness education on disability prevention right, need and social inclusion of person with disability
- Capacity building

- Awareness raising
- Inclusive education
- Health/HIV-AIDS
- Economic empowerment
- Disability research, Development of women, Children and Youth disability

Whereas the main finding of the research concerning the challenge that these NGO's are facing are as follows.

- Inconsistence support by government body to do the work
- Character of people with disability
- Awareness of the society about people with people with disability
- Inconsistent donation by donors
- Financial constraints are the biggest challenge and even treat to the organization existences.
- Lack of potential donors
- Lack of skilled manpower to do the work.
- Material and equipment shortage.
- Perception of the society towards people with disability.
- There is no networking or coordination between other similar organization to share experience get assistance and work together.

5.1.2 Lack of family support and the powerlessness of disabled people

As discussed in the earlier, the research finds that most disabled people in Ethiopia depend upon the goodwill of family members for their wellbeing. However, extended family members are not always supportive to disabled people. The study found that they force the disabled person to remain dependent upon them with the intention of hijacking his/her share of paternal property and to get free help in the house. Furthermore, social stigma that disabled people are the objects of pity and charity creates a barrier in the employment of disabled people. Parents do not allow their disabled children to work outside for fear of losing their social status, besides which, family

ignorance regarding disabled people's capabilities and existing entitlements deprive them from securing livelihoods.

Moreover, the study found that extreme family control and lack of political power have made disabled people in the sub city voiceless and powerless. In addition, disabled people's ignorance of existing entitlements further reduces their self-esteem and increases their dependency.

Disadvantages of disabled women

The research finds that disabled women are double disadvantaged due to gender discrimination and their impairment. Furthermore, their engagement in household work is not valued as productive work. The study finds that disabled women are deprived their share in parental property due to gender discrimination. It is evident that disabled women are deprived of education and employment due to gender bias, social stigma and parental attempt to protect them from exploitation. Furthermore, the ignorance and powerlessness of disabled women restricts their livelihood options and increases their dependence.

In short, the study finds that though the disabled people in kirkos Sub-city sustain their livelihoods with support of family but they often feel bored and helpless. However, the limitation of the sample study is that it has been conducted in a short time span and with a small sample size in a specific, inaccessible Sub-city. Therefore, larger sample size and extensive study may be needed to generalize the findings.

5.2 Conclusion

All in all, lack of livelihoods in this area can be viewed from that unemployment of disabled people is associated with financial, education, transport, environment, access, ideology and culture. The livelihoods of disabled people in the study area have been seriously affected due to limited infrastructure and facilities, lack of access to resources and the negative attitudes of stake-holders and family members different prospects. It is very important to clearly understand the main purpose of any government & its functions, responsibilities and mandates for the society and people it governs and administer with all necessary resource and power in hand. But it is difficult to put down all responsibility to the government. NGOs have to participate for the developments of the city dweller more than ever the vulnerable that are not get enclosed by the government. With regard to the role and challenges of the selected institution, under sub city level in their work towards improving the livelihood of people with disability roles being played by the institutions can be considered as insignificant or very little comparing to the needs and the sensitivity of the issue, which is the livelihood of the most vulnerable segment of the society.

The NGOs which were selected for this study are playing a vital role in the livelihood of people with disability in general. But as much as 292 NGOs are register and work on people with disability throughout Ethiopia it is not much to know by the beneficiary may be the NGOs are "briefcase NGO". A briefcase NGO exists, metaphorically or literally, inside a briefcase. It may have well-written proposals and access to western donors but for one reason or another, any funding it receives for programmes goes into the pockets of those running the NGO.

The roles being played by NGOs in general is not have coordination with the government institution and it is difficult to know whether the role of NGOs complementary, supplementary and advisory because of they played insignificant role compared to the problem of PWDs have in the Sub- city but the selected NGOs are played some role to improve the Livelihood of PWDs in Kirkos Sub-City. According to this research people with disability have high motivation, willingness to change their livelihood if various stakeholders increase their role.

5.3 Recommendation

The following recommendation has been forwarded as a possible means to fill the gap that existed towards the work of improving the livelihood of people with disability in general with a hoping to see people sustainable livelihood.

- Higher government body has to give due attention to the issue people with disability and has to give sufficient budget and material for concerned institutions for them to specifically work on people with disability other than their duties to the general public
- It would be best /good if the government provide incentives to NGO's like that of giving work place as long as that organization exists and serve the society
- The institutions and NGOs should work hard and make known of itself to the public by approaching the public or people with disability.
- Research based Training delivery of the people with disability.
- Increase the role of NGOs to provide for skills training and treatment, credit, raw materials and marketing of the product and availability of work in the sub city to improve their livelihoods status.
- This should be supported by awareness generation and collaboration with stake-holders to recognize disability from a human rights perspective and include disabled people in the existing poverty alleviation and social security programmers.
- To improve the livelihoods of the disabled people, legislation should be supported by sufficient funding and focused planning for areas with an emphasis on disabled women followed by strong monitoring and evaluation.

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Appendixes

Questionnaire guidelines for semi structured interview with Stake holders

- i. What are major source of income in the Sub cities?
- ii. How is your institution involved in enhancing the livelihoods of people?
- iii. What are the facilities available in your institution for that?
- iv. How is your institution involved in improving the livelihoods of disabled people?
- v. How many disabled people have been benefited and in what way?
- vi. What are the major challenges for involving disabled people in any income generation activity?
- vii. In your opinion what disabled people can do to secure their livelihoods?
- viii. What are the facilities available within the sub cities or in local government for income generation programme (employment, self -employment, social security) for disabled people?
- ix. What are the challenges for disabled people in availing these facilities?
- x. How your institution can improve the livelihoods disabled people?

Questionnaire guidelines for semi structured interview with disabled people

i. Type of Disability

Type of Disability	Mark (√)
Orthopedic Disability	
Cerebral palsy	
Hearing and Speech	
Mental Disability	
Visual Disability	

ii. What is your age?

iii. Who are the other members in your house?

iv. What is major source of income of the family?

v. Who is the major bread earner of the family?

vi. What is your education background? What prevented you from further study or vocational training?

vii. What income generation activity you do?

viii. How much is your income per the month?

ix. Whether the impairment has affected your income and how?

x. Have you undergone any treatment? What prevented you from undergoing treatment?

xi. What is your average expenditure (including treatment cost) per month and who provides that?

xii. What type of family support you get to for your livelihoods?

xiii. Is there any specific challenge from family that prevent in accessing your livelihoods independently?

xiv. What are the challenges from community and other stakeholders for accessing education, employment, self- employment or government schemes and facilities for safety nets?

xv. Have you faced any challenges from the stake holders in accessing the existing entitlements?

xvi. As disabled men or women do you face any specific challenges?

xvii. What kind of income generation activity you and other disable people can do in the sub cities?

xviii. What are the government and non- government facilities available for employment and self- employment or social security of disabled people? What are the challenges in availing those and how access to these services can be improved?

xix. What should be done to enhance the income of disabled people like you?

ለ አካል ጉዳተኞች የተበተነ በአማረ ጅምር ዘጋጅ መጠይቅ

1. የአካል ጉዳት አይነት

የአካል ጉዳት አይነት	ምልክት (✓)
የትንፋሽ ማጠር	
የአካል አለመታዘዝ	
የመስማት እና የመናገር	
የአእምሮች ግር	
የማየት ችግር	
ሌላ ካለ ይጠቀስ	

2. እድሜዎ ስንት ነው? _____
3. በቤትዎ ውስጥ ያሉት የቤተሰብ አባላት ስንት ናቸው? _____
4. የቤተሰብ ዎ ዋና የገቢ ምን ጭምን ድን ነው?

የስራ አይነት	ምልክት (✓)
የቀንስራ	
ጥቃቅን ነገር አስተኛ ንግድ	
የግል ስራ በተቀጣሪነት	
የመንግስት ስራ በተቀጣሪነት	
ልመና	
ሌላ ካለ ይጠቀስ	

5. ከቤተሰቦቻቸው ስጥከፍተኛ የገቢ ምንጭ ያለው ማን ነው?

1. እርስዎ ነዎት 2. ሌላ የቤተሰቡ አባል ነው

6. የትምህርት ወይንም ደረጃዎ እንዴት ነው?

የትምህርት ደረጃ	ምልክት (✓)
ምንም አልተማሩም	
ማንበብና መጻፍ ይችላሉ	
አንደኛ ደረጃ አጠናቀዋል	
ሁለተኛ ደረጃ አጠናቀዋል	
ኮሌጅ ዲፕሎማ እና ከዛ በላይ	
ሌላ ካለ ይጠቀስ	

7. ተጨማሪ ጥናት ወይም የትምህርት ስልጠና እንዴት ካላደረጉት ምን ዓይነት ምን ድንገት ነው?

ተጨማሪ ስልጠና እንዴት ካላደረጉት ምን ዓይነት ምን ድንገት	ምልክት (✓)
የአቅም እጥረት	
የቤተሰብ ተፅዕኖ	
ማሰልጠኛ በአቅራቢ ያልተገኘ	
የማህረሰብ ተፅዕኖ	
ፍላጎት ማጣት	
ሌላ ካለ ይጠቀስ	

8. የወር ገቢዎ ምን ያህል ነው?-----

9. አካል ጉዳት ምን ያህል ገቢ ያለዎት ድረስ ምን ያህል ነው?

1. አሳድሮ ብኛል 2. አላሳደረ ብኛም

10. ያሳደረብዎትከሆነእንዴትእንዳሳደረብዎትይግለጹ?

አካልጉዳተኛበመሆንበገቢዎላይተዕጽኖያመጣው	ምልክት(✓)
አካልጉዳተኛበመሆንዎደረሰብዎመገለጸበመኖሩ	
ለ አካልጉዳተኛየሚደረግድጋፍባለመኖሩ	
ለ አካልጉዳተኛያማከልአገልግሎትባለመኖሩ	
የቤተሰብተዕጽኖበመኖሩ	
የማህበረሰቡለይደአሰሳሰብኛግርበመኖሩ	
ሌላካለይጠቀስ	

11. ማንኛውምየህክምናክትትልአድርገዋል?

1. አድርጊያለሁ
2. አላደረኩም

የሕክምናክትትልያለማድረግዎምክንያትምንድንነው?

1. የአቅምችግር
2. ምክንያትየለኝም
3. ሌላምክንያትካለ-----

12. ወርሃዊአማካይኝወጪዎምንያህልነው (የህክምናክትትልወጪንጨምሮ)-----

ይህንየሚያቀርበውማንነው?

1. እርሶዎንዎት
2. የቤተሰብአባል
3. ሌላየሚረዳዎትካለይጠቀስ-----

13. ለኑሮዎትምንአይነትየቤተሰብድጋፍያገኛሉ?

1. አላገኝም
2. አገኛለሁ

14. ኑሮዎን በነጻነት እንዳይመሩልዩ የሆነ የቤተሰብ እንቅፋት ይገጥሙዎታል ወይ?

- 1. አዎ ይገጥመኛል
- 2. አይገጥመኝም

15. በትምህርትዎ፣ በስራዎ፣

የግልስራዎ ወይም የመንግስት መርሀግብሮች እና ለደህንነት መጠበቂያ ቁሳቁሶች እንዳይጠቀሙ የሚያግድዎት በህብረተሰቡ እና በሌሎች ባለድርሻ አካላት የሚገጥምዎት አሉ? ካሉ እንቅፋቶች ምን ምን ናቸው?

- 1. አዎ ይገጥመኛል
- 2. አይገጥመኝም

ካሉ ምን ምን ናቸው-

- 1.
- 2.
- 3.

16. የነበርዎት ስራዎ እንዳይጠቀሙ ከባለድርሻ አካላት የገጠመዎት እንቅፋቶች አሉ?

- 1. አዎ አለ
- 2. የለም

ካሉ ምን ምን ናቸው-

- 1.
- 2.
- 3.

17. እንደ አካል ጉዳተኛ ወንድ ወይም ሴትነትዎ የገጠመዎት ልዩ እንቅፋቶች አሉ ወይ?

- 1. አዎ አለ
- 2. የለም

ካሉ ምን ምን ናቸው-

- 1.
- 2.
- 3.

18. በክ/ከተማው-ውስጥ እርስዎ እና ሌሎች የአካል ጉዳተኞች ለገቢ ምን ጭምር ሆኑት ግብራትን ምን ምን ይሰራሉ?

ወቅታዊ የንግድ ስራዎች	ምልክት (✓)
ግብርና	
የቤት ሰራተኛ	
የሱቅ ችርቻሮ ሽያጭ	
የቀንተኛ ሰራተኛ	
ምንም ስራ የሌለው	
የተቋም የቅጥር ሰራተኛ	
የዶሮ እርባታ	
ክሊኒክ	
የተሽከርካሪ መሳሪያዎች መንዳት	
የፍራፍሬ ሽያጭ	
የቤት እመቤት	
የቤት እመቤት + የልብ ስራ	
የቤት እመቤት	
የጽዳት ሰራተኛ	
አስተማሪ (የግል ስራ ህርት ቤት)	
ልብ ስራ	
ሌሎች ካሉ እባክዎ ይግለጹ ዋቸው	

19. ለአካል ጉዳተኞች ሰራተኛ እና የግል ስራ ወይም ማህበራዊ ጥበቃ ስራዎች ሆኑት ምን ግብራት እና ምን ግብራት ይደረግላቸዋል? ከግብራቶቻቸው አንዱን ለማሳሰብ ይረዱ?

- 1. አዎ አሉ
- 2. የሉም

ካሉ ምን ምን ናቸው

- 1.-----
- 2.-----
- 3.-----

20. እነዚህን አገልግሎቶች ለማግኘት ያሉትን እንቅፋቶች ለማስወገድ እና እነዚህን አገልግሎቶች የመጠቀም እድልን እንዴት ማሻሻል ይቻላል?

21. እንደ እርስዎ ያሉትን አካል ጉዳተኞች የገቢ ምንጭን ለማሻሻል ምን መደረግ አለበት?

22. አሁን የሚሰሩትን ስራ ለመቀየር ቆይታ ደኛነዎት አዎ አይደለሁም

23. አዲስ ስራ ለመጀመር ያለዎት ተነሳሽነት ምን ያህል ነው ከፍተኛ መካከለኛ ዝቅተኛ

24. አዲስ ስራ ለመጀመር የማቴሪያ ሎች መኖር (የጥሬ እቃዎች መኖር እና ዋጋ)

በቀላሉ የሚገኙና ቸው በመጠኑም ቢሆን ይገኛሉ ለማግኘት አስቸጋሪ ነው

25. አዲስ ስራ ለመጀመር ያለዎትን ችሎታ

ጥሩ መካከለኛ ስልጠና ያስፈልጋል

26. ለተመረጠው አዲስ ስራ በዝቅተኛ ወጪ የማስኬድ አቅም ከፍተኛ መካከለኛ ዝቅተኛ

27. የተመረጠው ስራ ምርታማነት ከፍተኛ መካከለኛ ዝቅተኛ

28. የመረጡትን አዲስ ስራ ለኑሮዎት መሻሻል እንደሚያመጣላቸው ያላቸውን እምነት ከፍተኛ መካከለኛ ዝቅተኛ

29. ያሉት ሀብቶች (የመጀመሪያውን የኢንሸስትመንት ፣ ሊያደርጉት የሚገባ የገቢ ያጸው ቀት፣ መሬት (አስፈላጊ ከሆነ)

እና ሌሎች ለተመረጠው ስራ ለማካሄድ ጠቃሚ ነገሮች ብለው የሚያስቡ ዋቅው ምንጮች ይገኛሉ ጠመጠኑም ቢሆን አሉ የሉም

30. በተመረጠው አዲስ ስራ ያለዎትን እውቀት

አለ አላውቅም ሊገኝ የሚችል ነው

31. የስራው የስሜት ተያያዥነት

አለ መካከለኛ ምንም የለም

32. የማህበራዊ ኢኮኖሚ ድጋፍ መኖር

አሉ የሉም ድጋፍ ያስፈልጋል

FENAPD

Vision

FENAPD aspires to see an inclusive society where person with disability equally participate in every aspect of life and contribute their best with no discrimination.

Mission

The mission of FENAPD is to improve the life of person with disability through supporting and building capacity member association, enhancing the public awareness on disability serving as a common voice of person with disability.

Cheshier Ethiopia

Vision

To see a disability inclusive society and be a center of excellence in rehabilitation in Ethiopia.

Mission

To work for disability inclusive society by providing compressive rehabilitation service person with all form of disability through an affordable technology, quality service and effective partnership.

