

**ADDIS ABABA UNIVERSITY**  
**COLLEGE OF SOCIAL SCIENCES**  
**SCHOOL OF GRADUATE STUDIES**  
**DEPARTMENT OF SOCIAL ANTHROPOLOGY**

**THE CONCEPTION OF DISABILITY AND CHALLENGES**  
**OF PERSON WITH DISABILITY: IN SEBETA HAWASS**  
**DISTRICT SOUTHWESTERN ZONE OF OROMIYA**  
**REGIONAL STATE**

**BY:**

**ADUGNA LEMA**

**MARCH 2015**  
**ADDIS ABABA ETHIOPIA**

**THE CONCEPTION OF DISABILITY AND CHALLENGES  
OF PERSON WITH DISABILITY: IN SEBETA HAWASS  
DISTRICT SOUTHWESTERN ZONE OF OROMIYA  
REGIONAL STATE**

**A THESIS SUBMITTED TO THE SCHOOL OF GRADUATE  
STUDIES, ADDIS ABABA UNIVERSITY IN PARTIAL  
FULFILLMENT OF THE REQUIREMENT FOR THE DEGREE OF  
MASTER OF ARTS IN SOCIAL ANTHROPOLOGY**

**BY:**

**ADUGNA LEMA DANDENA**

**ADVISOR: GEBRE YNTISO (PHD)**

**MARCH 2015  
ADDIS ABABA, ETHIOPIA**

**THE CONCEPTION OF DISABILITY AND CHALLENGES  
OF PERSON WITH DISABILITY: IN SEBETA HAWASS  
DISTRICT SOUTHWESTERN ZONE OF, OROMIYA  
REGIONAL STATE**

**Deceleration**

I the undersigned, student, hereby declare that this thesis is my original work and to the best of my knowledge and belief this thesis contains no material previously published by any other person except where proper citation and due acknowledgement has been made. I do further affirm that this thesis has not been presented or being submitted as part of the requirements of any other academic degree or publication, in English or in any other language

Name: Adugna Lema Dandena

Signature: \_\_\_\_\_

Place: Addis Ababa University

Date: \_\_\_\_\_

APPROVED BY BOARD OF EXAMINERS

_____	_____	_____
Advisor	signature	Date

_____	_____	_____
External Examiner	Signature	Date

_____	_____	_____
Internal Examiner	Signature	Date

## **Certification**

I the undersigned certify that the thesis entitled “The Conception of Disability and Challenges of Person With Disability: In Sebeta Hawass District Southwestern zone Oromiya Regional state” which is submitted to the school of graduate studies of Addis Ababa University to award a degree of Master of Arts in Social Anthropology is the original work of Adugna Lema Dandena.

---

**Dr. GebreYntiso (PhD)**

**Date**

**Department of Social Anthropology,**

**Faculty of Social Sciences,**

**Addis Ababa University**

## **Abstract**

This research explores the Conception of disability and Challenges of Person with Disability in Sebeta Hawss Districts. Field data collected through interview, observation and focused group discussion methods. From the field result the belief system of the local area is highly determined the conception of local people towards disability and person with disability. Accordingly, some religious acts and religious document represent person with disability as cursed and sinful and associated with unfortunate happening. It also indicates that lack of accessibility and challenges related with accessibility of education health care services, adequate school environment, school materials, adequate information, as well as the presence of disability based stake holder. Lastly, the study focuses on resilience and the factors of resilience by looking the life of succeeds disabled individuals.

## **Acknowledgment**

I would like to express my deepest gratitude and heartfelt thanks to my advisor, Dr. Gebre Yntiso for his scholarly assistance in reading and correcting this thesis. His corrections and critical remarks from the preparation of the proposal to the completion of the thesis were very useful and constructive. I owe special thanks to Yhunbelay Teshome (PhD candidate in Addis Ababa University in the department of social anthropology) who was influential in my decision to conduct this research on the topic. His stimulating advises and encouragement has been sources of incredible inspiration. It is also my pleasure to acknowledge Dr Meron Zelek for her good willingness to edit my thesis and her kind advices and supports.

I am greatly indebted to all my informants without whose contributions my work would not have been possible; especially, disabled informants and social affairs worker of the districts for offering kindness and answering my questions with patience and openness and providing me with productive information. There are too numerous friends to mention, who helped me in the course of the writing up period. I am particularly grateful to Hambissa Hinsermu, Efreem Zeberga, Million Tegegnework Badilu Assefa, Tariku Ayana, Hayat Nurhusen, Henok Mengistu, Teferi kumas and Girma Hundessa for their willingness to discuss my work and for their clever insight, they indirectly have contributed to this work, and I thank them for their grace in doing so.

I also owe my heartfelt thanks to my father Lema Dandena and my mother Tsige Jemema and my brothers and sisters; they provided me consistent encouragement, company, laughter, a listening ear and much more over the years and along the way, both in person and over the phone. I am grateful to them all for taking their parental roles. It is also my pleasure to acknowledge my parallel brother Yosan Tesfaye who share his home with me and allowed me to use everything during my lifetime to complete schooling in Addis Ababa. Last, but not least, my special appreciation is due to the school of graduate Program of Addis Ababa University and SIDA for open this opportunity and its financial support to carry out the study as well as all staff members of social anthropology department for their unlimited supports. From this department I received much more than I can possibly say.

# Table of Contents

<b>Contents</b>	<b>Pages</b>
Abstract .....	i
Acknowledgment .....	ii
Glossary .....	vii
CHAPTER ONE .....	1
Introduction.....	1
1.1 Background of the study .....	1
1.2 Statement of the Problem .....	3
1.3 Objective of the study .....	4
1.3.1 General Objective .....	4
1.3.2 Specific Objectives .....	4
1.4 Research Approach .....	5
1.4.1 Methods of Data Collection.....	5
1.5 Secondary sources .....	8
1.6 Significance of the Study .....	8
1.7 Limitation of the Study .....	9
1.8 Filed work experience .....	9
CHAPTER TWO .....	16
Literature Review.....	16
2.1 Related Literature Review.....	16
2.1.1 The concept of social exclusion.....	17
2.1.2 The Concept of Resilience.....	19
2.2 General Over View of Disability .....	16
2.3 Disability and the Concept of Social Exclusion.....	21
2.4 The Conception of Other on Persons with Disability .....	22
2.5 Accessibility Challenges and Indicators of Exclusion .....	24
2.5.1 Accessibility Challenges and Exclusion in Ethiopia .....	26
2.6 Factors of Resilience and Successes .....	31

CHAPTER THREE .....	<b>Error! Bookmark not defined.</b>
3.1 Description of Study Area.....	10
3.1.1 Geographical Location of the Study Area .....	10
3.1.2 Economic System of the Study Area .....	11
3.1.3 Social Organization of the Study Area .....	12
CHAPTER FOUR.....	34
Findings and Discussion on Conception of Disability.....	34
4.1 Types of Stereotypes .....	35
4.1.1 Perceiving the Disabled as Dependent and Charitable.....	35
4.1.2 The Conception of Evil, Curse and Sin .....	38
4.1.3 Inability and Low Intelligence.....	48
4.1.4 Uniqueness.....	49
CHAPTER FIVE .....	53
5. Indicators of Exclusion of Disabled Persons .....	53
5.1 Community Level Participation .....	53
5.1.1 Participation in <i>Idir</i> .....	54
5.1.2 Participation in Religious Activities.....	57
5.1.3 Participation in <i>Daboo</i> .....	60
5.2 Marriage .....	63
5.2.1 Mate Selection .....	63
5.2.2 Establish Family and Long Live Relationship .....	65
5.3 Exclusion on Economic Sphere.....	66
5.3.1 Utilization of Farming Land .....	67
5.3.2 Employment Opportunity and Disability .....	68
5.3.4 Establish Private Property .....	70
5.4 Exclusion on Education.....	71
CHAPTER SIX.....	73
6 Accessibility and Challenges .....	73
6.1 Environment .....	73



6.2 Education.....	75
6.2.1 Well Trained Teachers.....	76
6.2.3 Material accessibility.....	80
6.3 Health accessibility .....	81
6.4 Information Accessibility.....	83
6.5 Stakeholder Accessibility.....	85
CHAPTER SEVEN .....	89
Resilience.....	89
7.1 Factors of Resilience .....	89
7.1.1 Family.....	90
7.1.2 Social Network .....	91
7.1.3 Peer Pressure.....	93
7.1.4 Self esteem.....	94
CHAPTER EIGHT .....	100
Concluding Remarks and Recommendations .....	100
8.1 Concluding Remarks .....	100
8.2 Recommendations .....	102
Reference	
Appendices	

## **Glossary**

Aantee	Minimal lineage
Abbaa Caffee	A Religious and political leader
Afaan Oromo	Oromo Language
Amachiisa	Oromo traditional naming system
Ateetee	Exclusively married women ritual ceremony
Axaarii	A purification ceremony of dead
Balbla	Sub clan
Belzzubel	Devil spirits
Buddaa	Evil eye
Buttaa	A form of abduction marriage
Cabse	Break
Caffee	Oromo's traditional sacred place
Cidha	A form of formal wedding marriage
Cubbuu	Sin
Cubbama	Sinfulness
Dabo	A form of cooperation between farmers
Debtera	Educated in religious myth
Diqaala	A child whose father do not know (baster)
Eegsisa	Made him or she a keeper
Faloo	Ritual purification
Fira Dhiyoo	Close kin
Foqqotee	Move on the floor
Gaafata	A ritual practice related with the fertility of seeds
Gabaree/Hojjataa	Labor of a family
Gabbara Abdaari	Ritualizing and scarified on the scared place
Galcha	Gift for God
Galma	A Sacred Cult
Ganen	Dominic
Garee	A government arrangement in small village

Gooxii	A group of people in the village
Gosa	Clan
Haawiissa	Bride's wealth
Harkaa Fudhaa	Gifts for bride's parent
Hirtaa	Give farming land in form of sharing cash
crop	
Hooda	Taboo
Horii Faloo	A ritual purification animal
Idirii	A Traditional Life Insurance
Ilmoo Harreeti Kan Haadhan Waamamu.	Donkey's child that is known after its mother
Imx	Small scale enterprises
Irra	On
Irra Dhaaba	Unintentional wedding marriage
Irreecha	Blessing ceremony during Meskal Festivity
Jaamse	Made blind
Jaarii	Ritual Practices in summer time
Jigii	A group of people who are working together
Kadhattuu	Beggar
Kellaaa Fayaa	Mini Health Institution
Lafa	Floor
Maatii	Nuclear and extended family
Malkaa	Sacred River
Mana Citaa	Small hut
Manatti	Inside home
Mehaber	A group of religious society
Muuda Abbaa Caffee	Nominating religious and political leader
Naaffise	Make paralyze
Ofkaltii	Blessing for permission
Qaalluu	Oromo religious priest
Qirca	Sharing of cattle's meat

Sanbatee	A group of religious people
Seera Namaa	Law Of man
Seera Uumaa	Law of God
Sii	You
Sillet	Made promise to God
Sinbiroo	Birds
Tokko Shanee	Government arranged people 1to 5 in village
Tsebel	Holly water
Tullema	The big branch of Oromo clan
Tulluu	The Scared Mountain
Waanfala	exchange labor force
Waaqa	God of the sky
Waaqeffannaa	Traditional Oromo religion
Wallagadii	Give farming land to contract.
Warra	Lineage
Warra Ekeru Dubbistuu	Death spirit calling institution
Warra Mooraa	Death spirit calling institution
Warra Qaalluu	Oromo religious institution

# CHAPTER ONE

## Introduction

### 1.1 Background of the study

The overall studies on disability are not well studied in anthropology also there are no full-fledged and anthropologists are under represented among the scholars. Many of them are psychologists, social workers, or people in the health profession. So it is possible to say that it is both a loss for disability studies and a lost opportunity for anthropologists.

People with disabilities face social, psychological, environmental and other problems. The history of disability is often characterized by exclusion, discrimination, and stigmatization. In other words, members of persons with disabilities are usually isolated from society, and are regarded as objects of charity and submissive recipients of welfare. Also low expectations of people with disabilities are discriminatory and undermine the confidence and aspiration of people with disabilities themselves (Tirussaw, 2005:24; Misrak 2006:8).

Indicators of social exclusion are associated with unequal employment opportunities, lack of access to education, inadequate health services, social connection, belongings of cultural or religious norms and personal safety (Peters, 2009).

Similarly, while discussing about disabilities in Ethiopia, Tirussaw (2005:7) states that a large member of the community keep individuals with disabilities in their home secretly because of the social stigmatization. The societal reactions are by large and widely manifested in marginalized interpersonal relationship and poor participation at family, neighborhood and community level. They might also include limited provision of public service. The range of their participation in community affairs such as local community organization, festivals, wedding ceremony, funerals activities and other social occasions are highly limited. Besides, communities' misconceptions about persons with disabilities are the major barriers and creating obstacles not to carry out their tasks and achieve their life goals. The negative attitudes are including prejudice, misunderstanding of abilities and stereotyping. Discrimination is prohibited by refusing adequate service and open opportunities. The refusing acts are exercised through treating disabled persons less

favorably in the standard of service or in manner in which it is provided. Interaction with various barriers may hinder their full involvement and effective participation in society on an equal basis with other. As a result of stigma and discrimination individual with disabilities are viewed as outsider and are not included in cultural activities and not given the chance to participate in any public sphere and didn't receive any formal education (Almaze, 2011:20). Living with disabilities makes life a series of perpetual negotiation, not only with doorways or stairs of but also with language, stares, and assumptions and policies (ibid).

In developing countries, most of persons with disabilities live with lack of access to key areas of development, including health, education, training and employment. Even at a time when they have been hired to work, persons with disabilities are most likely to be underemployed, got less salary, and have fewer chances for advancement ILO(2011). Traditionally, peoples associate persons with disabilities with sin, shame and feeling of humbleness. They often assume that disabled persons are unproductive, unskilled and ignorant (Savolainen, 1997; Tirussew, 2005:6). According to World Health Organization reports, there are about 15 million estimated persons with disabilities living in Ethiopia. Of these, 95 percent of persons with disabilities live in rural areas where access to basic service is limited. They fulfilled their basic needs depending on family support and begging. A research conducted in Oromiya Regional State shows this fact; 55 percent of person with disabilities lead their life based on the aid of their families, neighbors, and friends (WHO, 2011 and MoLSA, 2010)

Therefore, the aim of this study is to investigate the situation of person with disabilities in Sebeta Hawass district. It will try to give information onto local conception and challenges of person with disabilities. Specifically the study will attempted to assess the existing misconception and misunderstanding about persons with disabilities. And it will discussed the indicators of social, economic and cultural exclusion among the society. The study also looks resilience and success stories through the research.

## **1.2 Statement of the Problem**

People with disabilities in developing countries like Ethiopia faced with different barriers, which would become obstacles to their social life and livelihoods. However, in the developed countries such as America and UK, disabled individuals have good access to different facilities and exploit the available opportunities as well (Misrak, 2006: 24).

Ethiopian government signed the United Nations convention on the right of person with disabilities. This convention aimed to give status, authority and visibility as human rights issues as well as to increase awareness of the community about person with disabilities. Despite the efforts made by the policy makers to ease the problem of discrimination against the disabled individuals in relation to education and employment, the problem still persists (in that the exclusion still continues) (Almaz, 2011: 9). There were attempts made by different scholars to study about the issue of disabled people. However, the main causes that lead to misunderstanding disability and its indicators are not yet sufficiently studied. Tirussew (2005) for instance, examined disability in Ethiopia in relation to education and child disability. He, however, did not deeply entertain the aforementioned gap. Besides, some other writers e.g., Alemu, 2001) conducted research on the attitude of the society towards disability. Almaze (2011) also examined Ethiopian college students' attitudes towards person with visible disabilities. Misrak (2006) conducted research on challenges and opportunities of access and mobility in Addis Ababa: the case of people with motor and visual impairment. She states that disabled people in urban environment face considerable discrimination regarding mobility and accessing infrastructure service. These researchers indicated misconceptions and misunderstandings about disability, causes of disability and challenges and opportunities for disabled individuals.

According to the above authors misconceptions and misunderstandings of disabilities are the result of religious and socio-cultural norms. Nonetheless, these researchers failed to comprehensively and specifically examine the root causes of misunderstanding about disabilities and its indicators. It is true that identifying the underlying and proximate causes for misunderstanding about disabilities could maximize the suffering of disabled individuals. Also, as I am experienced in the study area, effective interventions and programs have not been taken place by government officials, policy makers and other

stakeholders. In addition, currently, inclusive opportunities for disabled persons have faced various barriers in order to accomplish socio-cultural and economic satisfaction.

Therefore, the main aim of this research is to investigate the misunderstanding of disability and its indicators in the Sebeta Hawass district. It focuses on the socialization of the local community regarding their religious institution about disability. It also explores what the religious accounts; example, bible says about disability and how the religious leader or preachers preach the religious norms and values for the followers. In line with this, I would focus on the following problematic situations, which are highly visible in the study area. Accordingly, misconception on disability and disabled individuals; discrimination and exclusion of disabled individuals from social, cultural and economic sphere; inadequate social accessibility and inaccessible environment are the major problematic situation and it would deeply addressed in this research.

### **1.3 Objective of the study**

Objectives of this study are classified into two: General and Specific objectives.

#### **1.3.1 General Objective**

The main objective of this study is to investigate local conception of disability and challenges of person with disability in Sebeta Hawas district.

#### **1.3.2 Specific Objectives**

In line with the main objective, the specific objectives of this study attempts to:

- To understand the perception of local people about person with disability and the causes of possible misconception.
- Assess inclusive accessibility of service and challenges of person with disabilities.
- Identify and analyze the indicators of discrimination and exclusion of person with disabilities.
- To explores self-resilience experience of person with disabilities and factors of resilience.



## **1.4 Research Approach**

With the purpose of giving qualitative explanatory insights to the issues under study, to meet the suggested objectives I employed a qualitative research paradigm. This approach helps to realize the perception, attitude, and perspective of informants towards the disability among the local community. Furthermore, I tried to analyze issues from a diachronic and synchronic perspective. Diachronically the local people attitudes towards disability due to the cultural norms and custom and the socialization system of people in traditional believes institution and the earlier preaching system of bible by Christian believers. Synchronically, the present situations of preaching system and the government's activities and disable based stakeholders practice on disability issues are assessed.

### **1.4.1 Methods of Data Collection**

Relating to the study conception and challenges of disability using an anthropological approach both primary and secondary sources of data employed in this research to obtain the required data for conducting the research. In order to secondary data I had been used library research to look for the related published and unpublished sources. These sources helped me to develop a conceptual and theoretical framework for the study and to substantiate the first hand information. For instance information related with religious perception about disabled persons collected from bible and also information associated with the rights of persons with disabilities' conventions, policy and programs collected from secondary sources. Besides, I used also conduct archival studies in the study area (district court, police stations and *Gandaas*-small administrative units) and outside it. Generally, the secondary sources had been used to crosscheck the oral information in this research.

Therefore, throughout the field work I had been employed various data collecting methods: interview method, observation method and FGD (focus group discussion) applied in this research.

### **a) Interview**

(Bernard, 2006:213) states that methods of interviewing informants is used to studying sensitive issues, particularly unstructured in depth interview can be used for studying issues like “sexuality, racial or ethnic prejudice or hot political topics.” Therefore, in order to collect data on the issues of disabilities interviews were conducted with different inhabitants of the area to gather relevant data.

In the process of gathering information I employed interview with different informants at different places and times. Throughout the data collection time, unstructured and semi-structured interviews were employed with key informants and informants of the subject of the study. Besides, I used to make informal conversations with local people during my field stay to add and support the formal interview I had. Thus, by employing certain interview techniques local people's understanding towards disability, indicators of disability exclusion, challenges and accessibility for disabled people and the way of resilience of disabled people were collected.

In this research the researcher interviewed a total of 20 informants; 15 informants and 5 key informants. The basic criteria for selecting key informants were based on purposive sampling. This is because selected key informants were considered as more knowledgeable about the researched issues. Besides, they were selected based on their willingness and availability for the various interview sessions I had. The two key informants from government office and the other two key informants are disabled people and the remaining one was from the local elder. The other 15 informants were selected from different backgrounds; these were from school teachers, students, local residents, religious institutions based on their relation with the subject matter of the study.

Interviews with all informants were made with the purpose of unpacking informants' perspectives, attitudes, and perceptions of disabled issues. Interview questions were prepared based on the actual understanding levels of the informants. However, I also developed questions in the course of the interviews because some of the answers given by my interviewees led me to other questions. The questions were constructed in both languages;

Amharic and Afan Oromo to make easy and collected sufficient information from the interviewees.

#### **a) Observation**

In this study, observation used as one of the critical method to gather information with the other firsthand information gathering method. During observation field work getting close to people and making comfortable relation with people is the most compulsory one. In this method, the involvement of field work observation and the most necessary to identify the actual practice with in the local community towards person with disabilities. It helped to collect real and observable information about the current practice and situation (indicators of exclusion, inaccessibility of social and environmental conditions) among the researched area towards disabled persons. Hence, the researcher to be observed and record information about the life condition of disabled people, which are focusing on the practice of local people, government office, religious practice, as well as the practice of targeted group.

Therefore, observation method was employed by the researcher to generate information about conception and challenges of person with disabilities. For this reason, during the field work, observation made for almost four months, January 23, 2014 to May 1, 2014. During my observation time both planned and unplanned observation applied. For instance, planned observations in villages, community's events like on wedding, funeral, religious event attended on the Christian preaching events. On the other hand at different time of my field stay, I made unplanned observation as I used to watch every day activities of local people related with disabled people and observed mode of disability's life in the local area. Besides, throughout field work time I tried to use covert and overt techniques of observation. For instance, observing the preaching system of Christian churches was through covert techniques.

#### **b) FGD (Focus Group Discussion)**

(Bryman, 2004: 247-8) states that FGD helps the researcher to develop an understanding about the way people think and the way they do. The participants of FGD forwarded their idea and opinion about the issues closer to the real life, attitudes and experience. Also, the

participants raised their opinion in freely way. In this method, the homogenous and heterogeneous groups made a discussion on the issues of disabilities. Those homogenous groups were including the disabilities group and government officials. Two different focus group discussions made to identify the challenges and opportunities of persons with disabilities connected with the misconceptions of the community and related with accessibility's for person with disabilities.

A total of two separated focus group discussion sessions were conduct in different time and place. Participants for the focus group discussion selected from different sets of informants. Of the one FGD sessions was consisted of individuals who belong from the homogeneous group and the remaining one FGD sessions consisted of heterogeneous group from the local community members, disabled persons, and religious leader and government officials. For the first two session's member of the FGD 10 in number held in Sebeta town. And the second FGD session had 8 members and had been held in Awash Melka.

### **1.5 Secondary sources**

To study challenges and opportunities of persons with disabilities in the local area secondary sources were also significantly used. Articles, theses, books, and other related published and unpublished materials together with electronic sources were reviewed and relevant materials were used in the thesis as deemed necessary. Particularly, the book of bible and some electronic materials were reviewed for the purpose of analyzes the notion of bible towards disability. Focusing on Christ's preaching system, and understanding of the believers of Christian religion.

### **1.6 Significance of the Study**

This research has been academic and practical benefit from the following points of view. Academically, it will enable us to know the root causes of misconception and misunderstandings of community towards person with disabilities. So far, the existing knowledge generated on misconception and misunderstanding about person with disability related with beliefs system is very limited. Thus, this study focusing on the

main cause of misconception of local people towards person with disability and its consequence and then provides knowledge on it.

Secondly, the study provides an insight and concrete results on person with disability may be used by stake holders for awareness rising. Likewise, knowledge on accessibility challenges could be used by government officials to take appropriate action. As well, the resilience and success stories can be used as lesson and be replicated. Besides, it is hoped that the results of the study will serve as an inputs and assist policy makers to have insight about the issue.

### **1.7 Limitation of the Study**

The scope of the study is limited in Bachoo Oromo clan in Sebeta Awass district among Melka Awash, Dibe Bakani, Walle, Tafkii, and Sebeta Town out of 41 rural Keble. Although, the study tried to address its objectives efficaciously, the study had encountered several limitations. The first problem I came across is that the financial and time constraints because the research is not funded by any stakeholders (government and non-government organization) the budget was a big problem. Secondly, are that building a rapport with informants as well as searching for key informants who have intimate knowledge about the subject matter was quite difficult and some government official's unwillingness and carelessness was a limitation in this study.

### **1.8 Filed work experience**

As a trained, anthropologist, intensive fieldwork for this thesis is my first experience. I have learned a lot more than I can say in words here. Throughout my field stay, I have taken lessons in practice. I might not be able to write all what I experienced here but I want to mention some of the challenges that I encounter.

During my filed stay sometimes people perceived me as a donor who went there for a charitable aim. Hence, when people felt that way, I continuously and repeatedly tried to tell them that I am a student and I do not have any incitement to donate them. As evidence, during my field stay an informant of a disabled's mother saying, *"I think you come from Addis Ababa, I heard that in Addis Ababa there is a lot of aid organization. Please my daughter is troubles with me so, took her and do whatever it."*

Consequently, in that way I tried to build a rapport with the people whom I met. During the course of visiting villages or visiting my informants, the lack of transport service and the hot weather condition of the area was hard to walk on foot. Indeed, sometimes I used carts and ride horse and mule go to informant's house or to visit villages especially the place of interview in Dibe Bakani was too far from the main road it took approximately one and half (1½h) horse back.

In addition, some religious leaders of the churches refused to provide any secondary data from the bible, especially information about issue of the notion of bible towards disability healing from their disability and the like. Despite those challenges, my determination to successfully finish the thesis, support from my supportive group of people particularly my advisor Gebre Yintso (PhD) and the welcome of my informants helped me to successfully accomplish the data gathering task.

## **9 Description of Study Area**

In the part of this section I discuss the ethnography of the study area by focusing on geographical location, livelihood of the local people and social organization of the area which includes religion, marriage and kinship structure of Bachoo Oromo society. The intension of this chapter tried to correlate the aforementioned structure with the conditions of disability by focusing exclusion, marginalization and discrimination. Therefore the subsequent sections briefly discuss the ethnography of the studied area.

### **9.1 Geographical Location of the Study Area**

Sebeta Hawas Woreda is one of Finfine surrounding Zone in Oromiya region Finfine (also Addis Ababa) is the capital city of Ethiopia. It is located on Southwest of Addis Ababa and surrounded on the Northeast by Wolmera, on the north Burayu, on the Northeast by capital city of Addis Ababa, on the east by Akaki and the Awash River defines this District's boundary with Southwest Shewa Zone. The district is largely inhabited by the Oromo ethnic group and according to the 2007 national census reported the district has the total population of 132, 294 in 41 rural Keble. According to the district's agricultural and development offices 87.2% of the land is devoted to agriculture. The altitude of district is from 1700m above sea level to 3385m. The district divided into

two climatic zones locally called Baddaa (temperate) and Badda Daree (sub-tropical) (.....). The local elder mentions that the name Sebeta Hawass is a combination of two terms Sebeta and Hawas. According to oral tradition the place currently known by Sebeta in meaning Oromo language ‘belt’ and Hawass (represent Awash River which is cross the district) named by King *Jimma Abbaa Jufar*.

### **9.1.2 Economic System of the Study Area**

Land has a special place in the socio-economic life of Bacho Oromo and it is the base of their livelihood. The concept of land for Bachoo Oromo is associated with God’s property and the founder of a clan or tribes who were the first settler in the area. The majority of Sebeta Hawas district residents are settled agriculturalists. Depending on the climatic zones, the inhabitants are engaged in mixed agriculture (farm and maintain animals). For instance, they produce *Qamadii* (lit. wheat), *Garbuu* (lit. barley), *Baaqelaa* (lit. beans broad), *Miisingaa* (lit. sorghum) and *Midhaan Zayitaa* (lit. oilseeds). They produce different cash crops for consumption purpose as well as for market purpose. Particularly, the three cash crops include *Xaafii* (lit. teff); *Shumburaa* (lit. chickpea) and *Missira* (lit. lentil) are dominantly produced for market purpose. According to the local people suggestion *Xaafii* is highly demanded by the nearest urban consumer and it is a selective crop called by the special name *yebachoo magna teff* (lit. specialty of Bacho’s teef).

Besides, inhabited farmers maintain animals like, *Horii Gaafaa* (lit. cattle), *Hoolota* (lit. sheep), *Re’oota* (lit. goats), *Harroota* (lit. donkeys); *Farda* (lit. horses), *Kanniisa Horsiisuu* (lit. beehives) and *Lukkuu* (lit. poultry) are dominantly practiced in the local area. Each type of animals has their own specific function. For instance in the life system of the local people ox has important place and it is seen as the private property of husband. It is used for plowing land and threshing crops and used as source of income. However, a cow is seen as the private property of the wife and the source of income from milk and milk products. Animals like sheep and goats are the source of meat and they also play important roles in the social lives. Especially, the value of sheep in the study area is very important. They used it for several purposes to blessing and to the purification process. They slaughtered it at different sacred place like *Melka Awash* (lit. a

scared river ford awash) at *Abdaarii* (lit. the scared place at homestead) at *Tulluu* (lit. the scared mountain) and at *Galma* (lit. a sacred cult). Moreover, they used it as means of quick money, in terms of selling at market.

Animals like mule, horse and donkey used for the purpose of transporting services. Male are responsible for taking care of mule and horses. In the study area the two animals horse and mule used as means of transportation of people and symbolized economic strength or economic status of an individual. Donkey plays a very important role in the routine economic activities of the local community. It is the best means of transporting sacks of cereals to and from market and mill; seeds, fertilizers, farming equipment to the field; and the harvested crop is transported from farm land to homestead by donkey. Also, in the current time the local community used it for threshing purpose as well. Similarly, poultry and rearing honey bee are practiced by some farmer for house hold consumption and selling. The field results indicate disabled individuals cannot wisely utilize the aforementioned economic activities and sidelined from economic benefit. They sidelined due to behave of some able bodied individuals' and institutional discrimination acts.

Therefore, this study will examine the general conditions of disabled people associated with economic domain. Particularly, it focuses on how disabled persons limited from the economic advantageous and show the existence of discrimination acts and stigmatization practices of other able bodied and identifies indicators of discrimination from utilizing farming land and establish private property.

### **9.1.3 Social Organization of the Study Area**

#### **a) Religion**

According to the ethnographic studies of the research area '*Waaqa*' is God of the Oromo who is believed to be the creator of everything on this planet (Omniscient), available everywhere (Omnipresent) and sees everybody equally (Omnipotent) (Gada 1988: 19; Bartles 1983: 14; Knutsson 1967: 47-48). Traditional, orthodox and protestant religion widely followed in the local area. Correspondingly, the study showed that there is no homogenous society in aspect of religion. The traditional believe system of Bacho Oromo is interacting with Christian religion (especially with an orthodox religion).



The traditional belief system of the Bacho society is at the very heart of their culture. They believe that in their everyday life system the will of *Waq*a (lit. God) is necessarily barge in. The believers of traditional religion attend the religious institution to get several services such as healing services, solving conflict among them, getting mercy from *Waq*a (*Faloo*), giving gift (*Galcha*), receiving name for a new born child (*Amachiisa*) and blessing (*Ofkaltii*) as well as giving thanks (*Irreecha*) for God. According to the local informants, the traditional belief system of the society dominantly acceptable, honorable, respectful, much of frightful and controls much of the people life system. Each social domain of the local people such as marriage, affinal relationship, economic activities, and dispute settlement are highly controlled by a traditional belief system.

Besides, in Bacho clan different cultural practices perform in accordance of their traditional religion. Such cultural practices are including ritual practice of (*Ateete*) which is exclusively practiced by married women, *Jaarii* a ritual practice during the beginning of summer, (*Gaafata*) a ritual practice related with production of seeds, (*Faloo*) a ritual practice related with cured from *Cubbuu* (lit. sin). As the elder's point of view these cultural practices vastly perform and have a great social value. From the field work result I found out that the local people's religion and religious practices and notions are the major factors in ordered to create adversity on disabled people.

Hence this study examines the challenges of persons with disabilities in light of local religious beliefs system. By focusing on particular practices of the society related with their religion. Therefore, it could be conducted on the common practices of the community in the traditional, orthodox and protestant religion. Also, it focused on the notion of the bible towards disability and the preaching system.

### **b) Marriage**

Marriage has been a universal human institution regulating the reproduction of children, families, and society. It is a civil contract, founded in the social nature of man, and intended to regulate, and refine, the intercourse between the sexes; and to multiply, preserve, and improve the species. Besides, it is an engagement, by which a single man and a single woman, of sufficient discretion, take each other as husband and wife. From

the nature of the contract, it exists during the lives of the two parties. Similarly, among Bacho Oromo society's marriage is an important social good, associated with an impressively broad arrangement of positive outcomes for children and adults alike. Among the local community it is arranged through both side of family and through the commitment of the two couples. According to the local peoples' culture there are three types of marriage such as *Buttaa* (lit. abduction), *Irradhaaba*, (lit. minimal arrangement of wedding) and *Cidha* (lit. formal wedding marriage).

These three types of marriage have their own distinctive characteristics. According to local culture the major distinction of each type of marriage is related with the bride wealth (*Haawiissa* and *Harkaa Fudhaa*) and the producers of the marriage arrangements. The two forms of marriage *Butta* and *Irrdhaaba* are usually held by the families who are economically weak and cannot afford bride wealth and marriage ceremony. Unlike the two kinds of marriage the third type of marriage is more complex and it has a complex procedure. On this type of marriage selection of mate has big part. In the producers before the arrangement of marriage (*Sadeeta*) the background of the family as well as the condition of the selected mate (particularly selected girl) has been investigated. Consequently, if the girl is disabled then the process of marriage arrangement could be broken. This situation indicated that disabled people are isolated and discriminated by the discrimination acts of local people.

Therefore, in this study I will discuss the condition of marriage in the study area in order to mate selection, bride wealth and the formation of family in consequence of difficulties related disabled people and the condition of local marriage.

### **c) Kinship structure**

According to Tilahun (2011) stated that genealogically the community of the study area is Bacho society. He discuss that Bacho is one of the three sons of Tullema branch. It divided into moieties, clans and lineage. In the Bacho tradition decent and clan categorization is the core of social organization. Oromo in general and Bacho in particular distinguish him/herself to a certain clan and decent is determined through the male line. They support a patrilineal ideology tracing decent through a mother line is

unacceptable. In this concern Bacho tradition undermine a person who traces decent through female line. They refer such decent as *Ilmoo harreeti kan haadhan waamamu*. (Lit. it is only a donkey's child that is known after its mother).

Bacho Oromo identified as nuclear family and extended family *Maatii* (lit. family), *Warra* (lit. lineage), *Balbala* (lit. sub clan) and *Gosa* (lit. clan). As, Tilahun (2011) mentions in the Bacho people lineage is operational; therefore, it is sub divided into minimal and maximal lineage. Within the lineage structure, the Bacho Oromo emphasizes on close relatives referring as *fira dhihoo* (lit. close kin) and *aantee* (lit. minimal lineage). In fact, there are cases when matrilineal ideology is also observed. Descent is identified through both lines and *Durbii* (cousin). *Durbii* could extend at least up to two or three as *durbii dura* (lit. first cousins), *durbii lammaffa* (lit. second cousins), and *durbii sadaffaa* (lit. third cousins.) The paternal cousin has a special status; however, maternal cousin unofficially have equal status. In line with the concept of genealogical descent Bacho Oromo count his descent up to seven generation. Accordingly, the local people considered that the live family, lineage or clan shared everything from his ancestral relatives. Usually, the wrong doing of the past parent descend in to the next generation. *Waqaa* pay it forward for their bad doing in by creating different barriers. In line with this concept the local people perceived that being disabled and born with disability is the wage of ancestral sin and families' sin.

Therefore, in the subsequent chapters I will depicts the associations of ancestral descent and the present living family related with genealogical traditional religion. As the field result indicates the believers of the religion believe that being disabled and born with disability is widely associated with ancestral sin. Hence, ritual and ritual purification from sinfulness and bless the next generation is highly performed by the traditional religion believers. Accordingly, related with this the research will be mainly emphasizes on the cause of misconception linked with Bacho Oromo society's concept of descent and disability.

## **CHAPTER TWO**

### **Literature Review**

#### **2.1 Related Literature Review**

Regarding to disability issues several scholars and researchers have been discussed about the challenges and opportunities of person with disabilities. They traced those environmental, social economic and physical barriers. Therefore, the study will be employed social exclusion approach and resilience theory in order to addressing challenges and opportunities of persons with disabilities in accompanying with misconception of the local people, accessibility for disabled people and to indicate the indicators of exclusion of disabled persons. Thus social exclusion and resilience approach give a good picture on the problems that I want to analyze.

#### **2.2 General Over View of Disability**

The difference in definition of disability can be explained by various sphere while, I used the world health organization (WHO). The world health organization's definition is concerned on social perspectives. As general the WHO describes disability as a multidimensional and complex concept that covers impairments, limitations in activity and participation restrictions (WHO, 2012:11). Impairment qualifies if it affects one or more of the following mobility, physical condition, ability to life, carry everyday objects, speech, hearing or eyesight, memory or ability to concentrate, and learn or understand. On the other hand, Disability is used to describe the condition where by physical and/or social barriers prevent a person with impairments from taking part in the normal life of the community on an equal footing with others. Hence, according to world health organizations' (WHO's) definition disability means an impairments, an activity limitations and participation restriction, symbolizing the negative kind of interactions between an individuals and related with health conditions and the individual contextual factors that connect with environmental and personal factors (ibid).

On the other hand, disabled persons define as, *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* (MOLSA 2010:4). Also, the United Nation Convention on the Rights of Persons with Disabilities to describe persons with disabilities. In this convention, disabled persons *include those who have long term physical, mental, intellectual or sensory impairment which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with other.*) (UNCRPWD, 2011).

Kudlik(2003: 776) states that classical thinker Aristotle's view who is the father of western taxonomy and political thought. Historically disability viewed as an account of social body which is connected with incapacity to wield power. Aristotle had established a particular understanding of the perfect human body. He saw "imperfect bodies" related with "mutilated", "monstrous" and "deviant" his views raised that parents were not taking when deformed body child born. Concerning on this view disability are a social category rather than as an individual characteristics. The filed challenges long held perception that relegate it to the unglamorous backwaters primarily of interest to people in rehabilitation, special education and other applied professionals (ibid ).

Additionally, Misrak(2006:13) mentions the views of a historical materialist (Marxist) thought towards disability on her work. Historical materialist (Marxist) thinkers state that disability is associated with oppression. According to Marxist point of view disability is social experiences which arise from specific way. It is a state imposed by society to exclude people with different physical disability, visual impaired, and hearing impaired and intellectual disability.

### **2.3 The concept of social exclusion**

To carry out the issues of disability there are different model such model are include traditional model, medical model, social model, charity model, right model, etc. Therefore with regard to assess the local conception about disability, attitude, and indicators of exclusion and accessibility challenges I had employed social exclusion theory. The concept of social exclusion initiated from Western Europe in the latter part of the twentieth century. Before 1990s it was limited in the stated region while the early

1990s it was started to diffused from the northern hemisphere to southern. Besides, the historical root of social exclusion concept can be traced back to Aristotle's work social cohesion and solidarity. And also the contemporary notion of social exclusion emerged in France in 1960s in the context of on the rise unemployment and socio-economic inequalities. Also, its emergence has been linked with the rise of neo-liberalism ideology and individualism from the 1970s (Mathieson J. et.al 2008:9).

It has the potential to provide new understanding in to the nature, cause and consequence of poverty, deprivation, inequalities, and discrimination and give new direction to remedial policies. Besides, the concept is developed in industrialized states where 'exclusion is very much associated with long-term unemployment, the loss of rights associated with work and the welfare state, and the process of breakdown of social ties and affiliations (ibid).(Gore & Figueiredo,1997:9;Landman, 2006:19): defines the concept of social exclusion as it involves discrimination against individuals and groups based on one or many different social attributes or elements of social identities. Such discrimination can occurred as the result of formal or informal activities of the state as well as institutions and organization in the private sector including families, villages and community association. Accordingly, the definition of social exclusion is states in (walker, 1997:8).

Society and social exclusion as a more and comprehensive formulation which refers to the dynamic process of being shut out, fully or particularly, from any of the social, economic, political or cultural system which determines the social integration of a person in society.

Social exclusion is a process which carries a cumulative disadvantage or the accumulation of disadvantage and multifaceted notion to refer both individual and societies and to disadvantage alienation and lack of freedom. It is characterized as socially embedded concept. Also, social exclusion is multi-dimensional concept involving economic, social, political and cultural aspects of disadvantage and deprivation. Often described as the process by which individuals and group are wholly or partially closed out from participation in their society, as a consequences of low income and constricted access to employment, social benefits and social services and to varies aspect of cultural

and community life (Flotten, 2006:63; Bhalla and Lapeyre 1997:425; Gijbbers and Voorma, 2007:7). Additionally, (Flotten,2006:62) discusses about the concept of social exclusion as being outside society, being out of work and have a poor social network.

Silver(1994:544) points out the process of exclusion which is might lead to a permanent division of insider and outsiders of society and thereby a certain social structure. An additional explanation of Social exclusion can be defined in terms of social indicators or risk factors. These risk factors are assumed that to exert a negative influence on the prospects of social exclusion. Such risk factors included low income, unskilled labor, poor health, immigration, low education level, school dropout, gender inequality, discrimination, and racism, old age, divorce, drug abuse, alcoholism, and living in “problem accumulation area.”(Gijbbers and Voorma, 2007: 15-16). Besides, Burchardt et.al(1999: 231)mentionsthat the societal activities of social exclusion indicators in the social arena. They argue that the most important indicators arenas for social exclusion are exclusion from social citizenship right, exclusion from the labor market, exclusion from participation in public activities and exclusion from social network or social activities.

In addition, considering social exclusion(Gijbbers and Voorma 2007:20) indicatetwo main aspects in order to enhance theoretical and methodological development.The first aspect is economic structural exclusion, which refers that a distribution dimension. Within this aspect two dimensional parts are identified: a material (incomes and goods) and non-material (social rights). The second social exclusion concept is socio-cultural exclusion. Socio-cultural exclusion also divided in to two social integration and cultural integration. Socio-cultural integration refers that social relation and networks. Cultural integration aspects emphasized on values and norms (Ibid).

### **2.1.2 The Concept of Resilience**

The aim of looking at resilience theory is in order to find out the most valuable adaptive or effective efforts of individuals to resolve crisis and identifying system to reduce risk and mitigate the outcome of crisis.The concept of resilience employed throughout different discipline particularly it dominantly used in psychology and ecology. And also, it increasingly used in political science, business administration, sociology, history,

disaster planning urban planning and international development(Breen and Anderies,2011:5).

Resilience has been defined in a variety of ways most definitions emphasize a capacity for successful adaptation in the face of disturbance, stress, or adversity and a process linking a set of adaptive capacities to a positive trajectory of functioning and adaptation after a disturbance (Norris, et.al. 2007:129).Resilience is sometimes defined as a psychological process developed in response to intense life stressors that facilitate healthy functioning (Polusny et.al.2009: 39).

As, I reviewed majority of the documents resilience implies bouncing back faster after stress, enduring greater stress and being disturbed less by given amount of stress and it is the ability of to recover, or bounce back from the adverse effects of natural and manmade event. “Stress” can imply both chronic difficulty and an acute crisis. In this basic sense, to be resilient is to withstand a large disturbance without in the end, changing, disintegrating, or becoming permanently damaged; to return to normal quickly; and to distort less in the face of such stresses(Breen and Anderss, 2011:7; Rose 2009: 3).

Additionally,it is also the ability of systems household, people communities, ecosystem, and nation to generate new ways of operating new systematic relationship. If we consider that parts or connections in systems is fail or become untenable, adaptive capacity is a key determiner of resilience. Hence, in complex adaptive system resilience is best defined as the ability to withstand, recover from and organize in response to crisis.Moreover, Resilience is one of several ways to reduce vulnerability, the others being adaptation and the entirely separate strategy of mitigation and resilience as “the capacity over time of a system, organization, community or individual to create, alter, and implement multiple adaptive actions (ibid).

As, Bruneau *et.al* (2003: 736) state about the resilience;it can be understood as the ability of the system to reduce the chances of shocks to absorb as shock if it occurs and to recover quickly after as shock happen. More specifically they asserted that a resilient system is shows reduced failure in terms of lives lost, damaged and negative economic



and social consequence and restoration of a specific system or set of system to their normal level of performance.

### **2.3 Disability and the Concept of Social Exclusion**

In Yitzhak(2000:300) the notion of social exclusion states as social exclusion is related to marginalization, or detachment from a moral order associated with a status hierarchy or collectivities of right duties and obligation. Again, Room(1997) in Yitzhak (2000: 307) state social exclusion focuses on primarily in relational issues; inadequate social participation, lack of social integration and lack of power. In line with this, Peter (2009: 79) states the risk of exclusion may be based up on personal characteristic. Associated with this concept social exclusion of person with disabilities occurs in combination with several forms of discrimination. Liwise and Lockheed(2006:49) state that socially excluded groups are sidelines from other groups. Often they are prevents from receiving the social rights and protections meant to be extended to all citizens. They are also excluded from economic advantages. The distinctive characteristic of that group status is systematic, socially contingent disadvantage.

In connection with the concept of social exclusion Azbaraties(2013:14) states the result of social exclusion monitors. According to his discussion the indicators of social exclusion domains are identifies into seven. Such indicators are included material resource, employment, education and skill, health and disability, social connection, community and personal protection. In line with this the social exclusion approach to disadvantage explicitly recognizes the importance of multiple and interrelated factors in determining the capacity of individuals to fully participate in society (Ibid). In the context of Ethiopia Almaze(2011:8) specifically, states that individual with disabilities are misjudged on their ability to perform work task and contribute to their community. It is often has taken the form of negative attitudes, displayed in terms of exclusion from social activities and stigma for disclosing disabilities. Therefore, I used the concept of social exclusion to discuss and explain the facts about persons with disabilities that occurred in the study area.

## **2.4 The Conception of Others on Persons with Disability**

Different studies conducted to explore the attitude of the public towards person with disabilities; and it shows that stereotyped, used derogatory terms and figurative expression of disability. Negative social conceptions about person with disabilities are not only to found in African communities that are numerous prevailing views based on cultural and religious conviction. These are prejudicial to person with disabilities globally such views find expression in behavior and legislation discriminating against person with disabilities. Also, physical barriers are preventing persons with disabilities from equal access and participation in community life. With regard to, the conception of people towards disabilities Dembo, Levinton, & Wright, (1956); Mussen & Barker (1944) state the conception of nondisabled about persons with disabilities in western culture. For instance, in western culture person with disability has been that he/she has intellectual disability. Similarly, Tirussew (2005:13) mentions the conception of disability in eastern culture particularly in Ethiopia. According to his suggestion nondisabled people's attitude about persons with disability is provide the biases for negative attitude. Accordingly, Almaze (2011) mentions that the image of people about persons with disabilities in both western and eastern culture. Commonly, most of nondisabled people have a negative image on disability's personality, behavior and potential.

As, Savlainen (1997) discusses in his work traditionally people considered that disability is the outcome of god like disadvantage and it is transmitted from one generation to the next generation. As a result, people come to be fear, shame, and discriminate person with disabilities. They are used to directly address a person with disabilities or are figuratively used to convey dissatisfaction or inability to perform tasks (Ibid). For example, Bagenstos (2000:43) states that "Disability" is a condition in which people because of present, past, or perceived "impairments" are viewed as somehow outside of the "norm" for which society's institutions are designed and therefore are likely to have systematically less opportunity to participate in important areas of public and private life.

Besides, (Puri and Abraham, 2004:22) state that the birth of child is always a cause for great happiness and jubilation for the parents, immediate family and friends. The child become the central attraction, receives all attention, love and tendencies and is nurtured

with care to become an important member of the family. However, the birth of child with disability is greeted with disappointment, frustration and anger. They are excluded in all circumstance from the opportunities of love, nurture and of simply being a child. Similarly in Ethiopian case living with disability is still considered shameful, and persons with disability are stigmatized and excluded from community life in many places(Tirussew, 2005:7).Furthermore, (Tirusew, 2005:172) states that negative attitude have led the perception that person with disabilities is limited physically and intellectually, cannot live independently and cannot form a family. People without disability comprehensively understood that person with disabilities are hopeless, dependent, and unable to learn and they considered as a subject of charity.

Moreover,Almaze(2011: 6) lists that disabled peopleare the largest invisible and voiceless group live in inaccessible situation. They are not engaged in any public, economic, and on other societal sphere. They considered as have low skill, strength and restriction to perform physical tasks.(Mulatu, 1999) states that in Ethiopia people with disabilities often not involved in any public activities because of the overall beliefs that disabilities are a result of a curse and/or are punishments from a god.

The information present on promoting the right of persons with disabilities by (UNICEF, 2007: 5) states that historically people with disabilities are discriminated excluded and stigmatized. Often they are segregated group from the society and led hardship condition of life. Also, it showed that disabled people have been regarded as object of charity and passive recipients. Charity based legacy create and affect the perception and attitude of disabled and nondisabled people. It provides that social barriers which limits and restricts participation within the society and create underestimation of abilities and potential of disabled individuals.

People with disabilities are often made to feel and accept that they are not useful citizen due to societal and cultural negative attitude. They are internalized disabling stigmatizing feeling, and often they are failing to challenge the status quo. Hence they fail to demand their right to participation in community and national development activities. Also, people with disabilities continue to experience prejudice, stereotypes and discrimination(A-PODD2011: 6).

Tirusew(2005:7) generalizes in the work of “*Disability in Ethiopia.*” states that other able bodied persons perceive disabled people as hopeless, dependent, and unable to learn and they considered as jobless and charity receiver. In addition he asserts that persons with disabilities are the largest invisible and voiceless group live in inaccessible situation. They do not engage in any social domain. The community perceives them as they have low skill, strength and restriction to perform any physical tasks.

Besides, USAID/Ethiopia mention the current practice in Ethiopia related with stigma and discrimination. Due to the discrimination and stigma attached to disabilities, people with disabilities are often not challenged or encouraged to succeed. Primarily as a result of discrimination, many Ethiopians with disabilities, particularly leprosy, leave their homes and migrate to other areas(USAID/Ethiopia, 2012:2). Accordingly, Stigma often leads to a denial of access to services such as education, employment and health care, but also, at times, food. Specifically, women and girls with disabilities are one of the most marginalized groups in society, disadvantaged based on their gender and their disability (Ibid).

## **2.5 Accessibility Challenges and Indicators of Exclusion**

The UN Convention on its publication state comprehensive community based rehabilitations services including poverty reduction, equalization opportunities, and social inclusion and participation in all aspects of life’ (UN,2008). However, 1 Billion People worldwide who lived with disability are absent from the MDGs. Most of people with disabilities and household with disabled members is always significantly poorer, with scarcer resources, and more brittle support network than nondisabled individual and household with no disabled members (UN, 2011: 14). Besides, on the United Nations (UN, 2011) standards of equalization opportunities for people with disabilities can be mentioned in terms of full access of service, activities, information and documentation and intended to protect the rights and dignities of persons with disabilities. In line with this the Convention calls upon all ratified states should be recognizing, respect and ensure equal rights and opportunities for all persons with disabilities in all aspects of society. However, disabled persons are often limited in possibilities to effectively participate in their community, caused by physical and social barriers in society (ibid).

World health organization WHO(2011) reported that in the developing countries the ratified aim and goals did not well implemented. The state's communities deprived person with disabilities rather protecting and enhancing the right of persons with disabilities. Often they assume that disabled persons are unproductive, unskilled and ignorant. High prevalence of disabilities is live in developing countries; 210 million out of 300 million people with disabilities live in poor countries where they experience material deprivation and social exclusion (WHO, 2011; and Strien 2007: 76). Additionally, person with disabilities are largely in unfavorable condition even the united nation's seven core treaties are not practically applied rather theoretically employed on the paper. Hence, persons with disabilities are not yet a group with available protection. For instance, among the ratified states the world over children with disabilities and their families continue to face discrimination and are not yet fully able to enjoy their basic human rights (Bagenstos,2000: 79; UNICEF, 2007:v ).

On the vast documents it is widely reports that due to stigma and discrimination person with disabilities are excluded. In this state the United Nation reports UN(2011: 14) shows that because of stigma and discrimination a vast majority of disabled people are excluded from basic service. Also, according to American statutory finding in America indicated that people with disabilities historically discriminated. Society has tended to isolated and segregated. Such forms of discrimination against individual with disabilities continue to serious and pervasive problem. And that discrimination occurs across a wide spectrum of economic, social and political activities. Discrimination against individual with disabilities persist in such critical areas as employment, housing, public accommodations, education, transportation, communication, recreation, institutionalization, health services, voting and access to public services(Bagenstos, 2000:422).As evidence a research conducted in Cambodia, Rwanda and Indian show that disabled people have fewer opportunities informed about development activities and not selected by village's and community's leaders. They are always excluded from taking part in community level on public, economic and political sphere (Thomas, 2005: 6).

And also, to a large majority of persons with disabilities in Africa public facilities, transport, training, working opportunities, communication and even access to information

are unavailable and inaccessible. An exclusion and discrimination of persons with disabilities are being commonly founded by the reason of cultural, religious convictions and beliefs system. This entails that social and physical obstacles prevent and impede their access to and participation in social activities on the same basis as these obstacle are brought about by conduct of other people. Hence, such obstacles and impediments entail exclusion, marginalization and infringements of the right of persons with disabilities. Therefore, persons with disabilities are the largest minority group but also, one of the worlds' most disadvantaged minority group (ibid).

### **2.5.1 Accessibility Challenges and Exclusion in Ethiopia**

According to World Bank and World Health Organization reports, there are about 15 million estimated persons with disabilities are living in Ethiopia. Of these disables, 95 present of persons with disabilities live in rural areas where access to basic service is limited. Absence of rehabilitations center, lack of equal accesses to education, employment and other social service are the major challenges in rural Ethiopia for disabled people. As a result of these situations they are imposed to migrate in urban center in order to makes their live as beggar or depended on the merit of some charity organization. Besides, the situation of disability make difficult for disabled individual to get out of poverty (WHO, 2011; MoLSA, 2010). Furthermore, Bereket, 2008:23) mention challenges to disability inclusive programming exists in all sectors, but most prominently in the education, economic, and health sectors.

Similarly, Ministry of Labor and Social Affairs (MOLSA, 2010) states in Descent Work For People With Disabilities: *Inclusion Of People With Disabilities In Ethiopia* (2013:4) a survey of house hold in rural Ethiopia on 2004 examine that the effects of disability. The reports of this research showed the negative effects of disability which are connected with the challenges of physical barriers working on farming land, less opportunities to household wealth, and most disabled individuals have to rely on friends and family to survive their life.

Moreover, the disability inclusion strategy of USAID in Ethiopia stated the current situation of challenges and opportunities related to disability in Ethiopia. As, it stated that limited awareness of the needs of people with disabilities and their ability to fully

participate in society; negative attitudes towards people with disabilities; inaccessible information and infrastructure; limited capacity and resources of local organizations and the GOE to achieve their objectives; limited and unbalanced availability of services and supports; and limited educational and employment opportunities. Additionally, various actors are engaged in addressing disability, including local disability organizations, international organizations, and donors, nonetheless efforts are generally limited and lack of coordination, leaving many of gaps that are not being adequately addressed (USAID/Ethiopia, 2011:1)

#### **a) Education Accessibility and Exclusion**

Hellen Najjingo points out that (2004, 9-11) several variables of challenges in all inclusive access for education in Uganda. Some of these factors include socio-cultural factors, economic factors, environmental policy factors and school related factors. According to her discussion those factors are causal factors for the inadequate access to education for disabled children. She stated that some of those factors are interrelated and depended on each other. For instance, lack of effective policy environment may observe by disability excluded curriculum, unequal distribution of resource with nondisabled persons, environmental barriers and absence of disability friendly in the school (ibid).

Similarly, in Ethiopian case different research indicate that a number of factors that challenges disability inclusion education. A research conducted in some schools show that inclusive education is highly influenced by the nature of disability and other several factors. Such factors include that class size, inadequate resource, lack of adopting curriculum and lack of inadequate training. Also, the above factors affects teachers' attitude (Gezahegne & Yinebeb, 2010: 91). Besides, Lewis(2009:17) states that many children and adults with disabilities are out of school in Ethiopia. A research suggested that disabled children's needs are not being identified before they started school. This means that many disabled children are not receiving the early support they need. As a result, of this situation disable individual's subsequently drop out in the first grade due to unfavorable quality of education, unrelated curriculum and lack of inaccessible environment.

Furthermore, Bereket(2008:16) stated in the education sector, though progress has been made through a few pilot projects in the country, the majority of the country is not implementing the GOE's special needs education/inclusive education policy. According to his suggestion there are continues to be a serious lack of supplemental education materials, trained and available human resources, and physically accessible classes. Teachers are not trained to accommodate students with disabilities appropriately, support and supplemental materials are lacking, and, in some cases, included students with disabilities have requested to go back to segregated programs because the instructors were not prepared them to support appropriately.

On the other hand, a research conducted in Ethiopia by Misrak(2008: 11-12) suggests that a vast majority of disabled children are vulnerable to violence. According to the research finding the main factors of violence are stigma towards disability, less chance to education access and community's negative cultural beliefs. Because of disabled children's families' and parents having low awareness of educating disabled people inclusive education not really practices. Particularly, girls with disabilities are participate even less in educational services because of their high risk on physical suffer and sexual abuse. The study also shows that there are gaps in the legal protection in order to prevent violence against children with disabilities.

#### **b) Employment Accessibility and Exclusion**

Many countries, governments pursue a policy of offering persons with disabilities greater opportunities for participation in society, based on the assumption that this will also improve their subjective well-being. While, USAID/Ethiopia(2012:2) states people with disabilities in Ethiopia face money barriers. The barriers which they faced are related with accessibility, discrimination, stigma, negative attitude, and low expectation low self-esteem, lack of organizational support and safety and security. These barriers are categorized under the structure of policy, institutions, environmental and attitudinal.

A majority of researches conducted on accessibility of employment and services for people with disabilities. Accordingly, these researches showed that the opportunities and access are widely restricted. Attitudinal barriers are the most cause of hindrance to full



involvement in employment opportunities and society setting activities for people with disabilities (Almaz, 2011:9). Groce(2004:8-9) states that employment rate of disabled youth are tracked in developing countries. Unemployment rate of disabled youth is higher than for all others young people. They are in higher risk on to the job market. Particularly, unemployment of young disabled women in all societies is higher than unemployment among comparably disabled young men. Additionally, Groce(2004) mentioned young disabled people get few opportunities for jobs advancement and have less job security and less prospects of advancement than do their nondisabled peer.

Also, in accordance to the suggestion of Martha Kibru on “*employment challenges in Ethiopia*” unemployment and under employment condition continue to be serious social problem in Ethiopia. It is high and one of the socio economic problems for all in general (Martha 2012:2). Again, in ECDD reports (2010) on *the commentary on the right to employment of persons with disabilities* mentioned that in economic sector given the large number of people with disabilities live in poverty. It is a critical problem to ensure employment opportunities for the largest employer of persons with disabilities. In line with this, circumstance employment opportunities for people with disabilities typically concerned on low paid labor position in segregated setting.

### **c) Health Careaccessibility and exclusion**

Enhancing health care for people with disabilities is clearly necessary through providing access to health care and health care setting, by use of restorative technologies, providing the effective of various rehabilitative services and motivating health providers (Clancy and Anderson, 2002:389). Besides a research conducted in Ohio showed that children with disabilities access health care services at a much higher rate than those who are without disabilities. Particularly, they should utilize primary care,mental health and therapy services more intensively than children without disabilities (Goudie, 2010). However, a Swedish International Development Authority SIDA (1995) mentioned the availability of rehabilitative care, prosthetic devices and age appropriate health care need to be singled out both because of a significant lack of such services and because all too often, social and economic discussions about disabled young people are side tracked by their presumed medical or rehabilitative needs. There are two areas of concern: unmet

rehabilitative needs for some young people that may lessen their ability to fully participate in society; and lack of access to general health care and health promotion services that may lessen a young person's ability to maintain good health and productivity.

There is substantial evidence that people with disabilities use more health and health-related services than their able-bodied counterparts, and that timely access to such services has more direct and profound implications on their lives, their health, and their well-being. There also is substantial evidence, from various sources and for various reasons, that their service needs have not been met. (Andresen, et.al, 2000: 1-2)

In the three African's country Uganda, Tanzania and Kenya persons with disabilities faced myriad obstacles in accessing health and rehabilitative services station which are aggravated for disabled. Stairs or other physical barriers to treatment facilities, far the way of wheelchair and Similarly in Ethiopia case In USAID/Ethiopia articles (USAID/Ethiopia, 2012) health care and rehabilitative needs of people with disabilities are only marginally addressed in Ethiopia. Barriers related to health care for people with disabilities include: lack of physical access, including transportation and/or proximity to clinics; lack of accessible facilities and equipment,such as ramps and adapted examination tables; lack of accessible information and materials.

#### **d) Other Social Accessibility and Exclusion**

A research conducted in Australia regarded social disadvantage take many different forms of deprivation and exclusion and its indicators and factors of restricts people's ability to acquire the items and participate in the activities that are widely regarded as essential for full membership of society. In line with this, on this research the researcher has been distinguished three different forms of exclusion such as disengagement which is mainly focused on lack of participation in society and community level activities. And the second form of exclusion is services exclusion which is rely on lack of adequate access to key services when it needed and the third exclusion form is restricted access to economic resources and low economic capacity (Saunders, et.al: 12,17). For instance, a woman with a disability may not claim protection based on her disability status alone, but may claim protection from torture or from sex discrimination (Stein, 2007:76).A research

conducted in Uganda, Kenya and Tanzania showed that government assistance to persons with disabilities and the collaboration between the local district and central government level is limited in order to handling disability issues. Persons with disabilities are generally excluded from the provision of development assistance. In addition physical security is highlighted for persons with disabilities which are socially constructed to be weak and vulnerable hence, primary targets for exploitation. Sexual violence is a major problem for disabled women and girls (Ibid)

Furthermore, Alemu(2002:25) mentions that persons living with leprosy are stigmatized and isolated from all interaction in society. For instance, the marriage unions between two lovers that have broken because of one of the parents have leprosy. Particularly making marriage with female with leprosy have leprosy can transmit or communicate their disability to others hence; those females with disabilities have no chance to marry able bodied males.

## **2.6 Factors of Resilience and Successes**

The primary focus of this section is fully discussing the resilience of disabled individual, and a brief review on the factors of disabled people's resilience will be used to illustrate the success stories of a disabled individual.

As, I discussed in section 2.2 "The word 'resilience' refers to the ability to adjust to altering situations and survive and swiftly get well from distraction due to difficulties" (The White House, 2011:6). And the concept of resilience is the skill, abilities, knowledge, and awareness that accumulate over time as people fight to overcome harsh conditions and challenges, invulnerability from harmful opposing and difficult situation (VanBreda, 2001).

The notion of resilience, invulnerability from harmful influences emerged from longitudinal developmental studies of 'at risk' groups of children as they encountered many life stressors during their development, through childhood and adolescence to adulthood Werner & Smith (1987); Silva & Stanton (1996) cited in (Tirussew 2005:210).

Different barriers have been occurred in many forms as a result of environmental and social factors. Due to these factors some groups (children, disabled individual) are

become at risk by circumstance of poverty, violence, discrimination, abuse and neglect (Boyden and Mann, 2005:3). Regarding to mitigating the risks of manmade and natural adversity some scholars stated that the factors of resilience. They classified it into three categorizations the first classification of resilience as a process influenced by culture, individual attributes, and life changes the second categorization of resiliencies is the treatment of the family at house hold as the context of development and the third classification of resilience is the potential environmental supports for the development of resilience contained in societal institutions, friendship networks, and the extended family (Tirussew, 2005: 256:226).

Tirussew(2005:225) states that possible social and personal factors which might have contribute to the resilience and success life of persons with disabilities. According to his discussion regarding to social factor the early experience of parent child or adult child interaction plays a vital role. And also he mentioned that personal factors role which is focused on disabled individuals' self-esteem, self-efficiency and the source of personal strength. Those two factors has a critical significant for life long happiness, success and better life.

Besides, Ayalew, et.al(2009: 69) state that the coping strategies of risks had been taken by the children who are working prostitution.Those protecting factors are protecting them from risks of adversity which is associated with sexual abuse/exploitation of children. Such, protective factors include family love and inspiration, positive peer influence, and institution like school, NGOs, religious organization and private sectors. These protective factors are active in the forms of motivation, fund, material support, and skill training, and encourage them to exhibit appropriate social behavior and kept them away from risky situation. Moreover, Bahadoer et.al, (2013) states that NGOs play a major role in shaping schemes for disabled persons. These NGOs advocate protecting the right of disabled people and designated for equal opportunities and participation in the sociocultural participation. Also, committed to accountability and transparency and ensuring access to education, health care and protection.

Some individuals have been resistant different forms of social and environmental obstacles which are mainly concerned on misconception and negative attitude to their

disabilities. Disabled person like, Helen Keller, Aristotle, Henry Wood, Samuel Johnson challenged different life hindrances, difficulties and contributed an excellent inspiration to disabled people and to the entire world (Tirussew, 2005:211).

## **CHAPTERFOUR**

### **Findings and Discussion on Conception of Disability**

The purpose of this study was to find out the main cause of misconception of local people towards disability. Thus, to investigate the conception of local people I employed interview, observation and focused group discussion. To that end, this chapter tries to answer the following research question raised at the beginning of the study, what are the main causes of misconception or misunderstanding of local community?

Many studies show that persons with disabilities are facing several challenges. Such barriers include cultural barriers which are related with cultural norms, custom, socialization of disabled child and some cultural practices. Religious challenges are the major barriers which are associated with religious norms and custom as well religious categorization of disabilities. The other challenges are related to social barriers which are interlocked with the conception of local people towards persons with disabilities, and community level challenges linked with equal access of social services and participation on community level participation. House hold poverty, unemployment, exclusion from economic resources, is related with economic barriers. Likewise, in the study area environmental barrier is the major challenges for disabled people.

Therefore, in the following section, I will discuss local community's misperception towards persons with disabilities. Subsequently, I will present how the local misconception towards disability is one of the socio cultural barriers which are commonly prevailing in all levels of society. A majority of local people often communicate negative attitude towards disabled people in their daily routine and through their everyday communicative speech, myths and proverbs as well as in some religious practices. Accordingly, due to misconception towards disability, most of the local people perceive disabled individuals as dependent, people who lack capacity, those who lack knowledge, as people living with evil spirit, cursed and sinful.

Hence, in this section, I attempt to discuss and largely examine misconception of local people.

In line with misconception about disabled people, the major aim of this paper is to investigate the main cause of those misconceptions. These include belief system of the local people such as Traditional Religion, Orthodox religion and Protestant religion as well as the conception of bible towards disability. The other cause of misconception is related with cultural element of the society that includes socialization system of disabled child, cultural practices and some environmental conditions. Each cause of misconception highly affected the life of disable people regarding the interaction with their environment, neighborhood, and teenagers; lead sustainable life as well as, establishing family and own private property.

In general, person with disability is widely isolated, marginalized and deprived the right of humanity. Hence, in the subsequent sections, I will discuss each type of misconception and the main cause of each misconception.

## **4.1 Types of Stereotypes**

### **4.1.1 Perceiving the Disabled as Dependent and Charitable**

One of the major findings of the study shows the predominant view existing in the study community who often tend to see the disabled as being dependent and charitable. The discussions which were raised during the focused group discussions and interview have clearly shown this view. The focused group discussants mentioned that persons with disabilities are dependent and charitable group of people. They have accented that the disabled always receive charity from different sectors. Most of the informants of the study point out that persons with disabilities are the most dependable, poor, homeless, and mostly they do not have their own income resources rather they generate their income through the support of third person. They are commonly depending on their friends, aid organization (non-governmental organization and government organization) and depending on their extended family.

Furthermore, a disabled informant who was interviewed in Awash Melka responded:

Disabled persons are dependent people. As they do not have any chance to work them often end up being dependent. The only chance for them is to be involved in begging.

He also mentioned that begging is an evidence for the notion of dependency often raised by other informants. As he stated, “disabled people are often begging on the street, in the church and by going home to home.”

Most of the key informants of the study mentioned that disabled people are engaged in begging. Regarding the local people’s assumption, they often consider disabled people could not generate income by themselves due to their physical conditions. They are often earning their living by depending on family, aid organization and government support.

Furthermore, related with the disabled beggars, focused group discussion mentioned their experiences. As most participants of the focus group discussion allude, they are generous for disabled people rather than able bodied beggar. According to their suggestions, able bodied people have other chances in life and are in a better condition to generate their income. However, for disabled beggar, it is difficult to employ on work and generate their income for fulfilling their basic need and necessities. Despite, they portrayed as able bodied beggar can work, but disabled cannot work. Therefore, everybody should be generous for disabled people and receive its reward from God. Therefore, the dominant public view has it that, begging is permitted for disabled people rather than able bodied people.

Concerning the response to the main cause of this existing perception in the community, scholar suggested that societal attitudes towards disabled people are shaped through cultural norms, custom and beliefs. Therefore, a cultural element is a variable that affects attitude and understandings of society about disability (Almaze, 2011:10 and Livneh 1998). Likewise, the sociocultural setting of Bacho Oromo widely shaped the attitudes and understanding of local people towards disability which are prohibited persons with disabilities.

For instance, the following norms and customs widely shape the understanding of local people.

*‘Disabled people always are in need of help, people with disability can only stay at home and keep hen and birds. All people with disabilities are less intelligent than able bodied people. Disabled people are often dependent and are charity receiver. They cannot work*



*in a position requiring physical labor such as farming. All people with disabilities are often coward are not in a situation to defend themselves. Marriage with disability is considered as taboo (Hooda) and all disabled people are considered as a buda i.e evil eye.'*

Regarding the response to the aforementioned expression of society towards disabled people a disabled informant states as follows:

The local people always said people with disability can only stay at home. They consider that persons with disabilities have no chance to engage in others tasks due to the disability they have. Their responsibility is often to protect a cereal from hens and birds. Because, the task does not needs much energy and movement. In general people believe that disable people can only work domestic works and the task that require less energy and movement.

Furthermore, according to the common tradition in the area, when people express their aggressiveness towards someone who tends to be lazy, they use concepts that equate the person with disability calling him or her as weak, dependent and unable to work. As evidence; *“Sin Naafisee Lafarra Sii’oofa”*, (lit. I would paralyzed you and then you would be unable to move) *“Sin Jaamsee Manati Sii Hnbisee Sinbiroo Sii Heegsisa”*, *Sin Cabsse Lafa I’ra Foqoqtee Aka Kadhatuu Sii Godhaa* (lit. I will make you blind; paralyzed and then you will be a beggar).

Additionally, cultural socialization of a disabled child also is the main cause for misconception of charitable and dependent person. Due to the marginalization in the overall socialization process, disabled children are often kept at home and are socialized as inferior group of society. They are often ostracized from engaging in the community life. They also sideline them from job opportunities and to serving themselves and their family. In general, disabled children are refused to work and are often labeled being inferior than other children of their age. Related with the socialization system of disabled child, a disabled informant whom I interviewed in Sebeta town reports the following:

Mostly, parents socialize their disabled children by distancing them from themselves. This distancemethod of socialization significantly affects the relationship between parents and their disabled child. The relationship is characterized as one way supportive relationship and

the parents do not give enough time and attention. An outsider also considers the child with disability as begin unfamiliar person.

Furthermore, informants reported that in different religious institution a majority of disabled people engaged on begging. In addition to this, in some parts of the Bible, mostly disabled people are presented as beggars. For instances, I found out from the bible the representation of a blind man as beggar in the gospel of Mark 8: 1-3 reads as Jesus heals a blind beggar. In line with this, in associated with the presentation of beggar on the Bible, a preacher who preached in Apostolic Church about on the conception of disable people, he said that disable people are charitable and dependent by mistakenly quoting the verses of the Bible. On that session, he employed that the disabled individual as vulnerable and charity seeking group. They always need the support of God and others fellow group of church such as pastors, monks, prophets and other believers. As evidence, he cited the New Testament in (John 5: 2-9). In fact, the direct quotation of this part says: Jesus heals a man who had been ill for thirty eight years. In line with this quotation, the preachers interpreted it and preached the believers as,

A paralyzed man usually attends the pool (holy water) for the sake of his financial business. He engaged in begging for thirty eight years near to the pool. For this reason, he could not want to be cured because he needs to continue begging. But, when the son of God (Jesus Christ) looked him and asked him 'why you are not preserved from your problem ?' then the guy respond him I have no relative who insert me when the holy water started to giving remedial services. Then the son of God (Jesus Christ) said to him your sin is forgiven stand up and move here and there.

From the above preacher's speech, the disabled man needs to beg rather he is cured from his disability. Hence, regarding the misconception about disabled people related with their capacity and intelligence, the above speech of the preacher's system of interpretation and preaching system is highly influenced the attitude of local believers. From this speech, it is possible to conclude that his speech highly influenced the attitude of the local believers.

#### **4.1.2 The Conception of Evil, Curse and Sin**

In the study area, person with disability are highly subordinated and oppressed due to the perception of local people. The conception of local people about disability is associated

with evil spirit, curse and sin. The local people considered disability as being related to a curse and resulting from God's Wrath and Punishment, and it would have been believed to be transmitted through generation to generation. Abundantly, due to the conception of disabled people, they are believed to be afflicted, living with evil spirit, cursed and sinful. In this case, disabled people are panicked, feel fear and shameful on their disability. Similarly, some families who have disabled children are supposed to be left alone and kept them secretly at home from the eyes of able bodied people. Because disabled people are considered to be as a sinful, cursed man in the society.

Along with the conception of carrying evil spirit, cursed and sinfulness, most of the disabled individuals are highly aggressive, cruel and psychologically venerable. Moreover, in connection with this conception, they are marginalized themselves from public sphere, economic and environmental domain. Moreover, in connection with this conception the local people perceived person with disability as evil eye (*Buddaa*). The local people customary kept their child out of disabled when a disabled individual coming their home. Additionally, they did not feed their child near to disabled; in case if disabled people observing their child (particularly when the mother feeding breast and drink milk); they often supposed that the children is affected by evil spirits. In order to find out and trace the main cause of these misconceptions, the following methods were used: interview method, focused group discussion and observation method. Through these methods, I found out various causes of misconception about disability which are publicizing that disabled people are carrying evil spirits, cursed and sinful. Such major causes are includes traditional religion, orthodox religion and Protestant religion as well as biblical notion on disability.

#### **a) Traditional Religion**

According to local people informants, the traditional religion (*waqeefanaa*) is widely practiced in the study area. It controls the totality of the local people's life including their social, cultural and economic settings. Besides, the believers of the religion have a great fear and respect for it. Along with disability and traditional religion, the respondents of the study mentioned that the traditional religion has a significant contribution towards reinforcing the dominant negative attitude towards disability. It extremely influences the

perception of individuals in creating negative perception and understanding. Accordingly, the conception of local religion is widely promoting misfortune, curse, evil and sinfulness of disable people.

According to the customary law of the local Oromo society in Bachoo, there are two major reasons that make human beings sinful. These are breaking the law of God (*Seera Umaa* or *Seera Waaqa Cabsuu*) and breaking the law of man (*Seera Namaa Cabsuu*). Consequently, if any individual or household has broken one of the given laws, they tend to be cursed and sinful. Hence, the wage of sinfulness is reflected in various tragedies which are including facing with different cultural, social and economic calamities and difficulties.

The local elders stated as evidence a sinful family is being in repetitive death, destructive of crops, harmed of cattle and presence of barrenness within the family. In the same way, being disabled and giving birth to a child with disability is believed to be a result of a sin committed by one or both of the parents. The local people associate all kinds of barriers including disability with sin specially they associate it with ancestral sin. According to an information obtained from an informants, the Bachoo Oromo trace their genealogical descent up to seven generations (an ancestor is a blood relative of a family shared common ancestry and blood). Those families who are having a disabled member in the lineage are often considered to be due the affliction caused by the wrong deed or sin of one of their predecessors.

Consequently, breaking of the law (both or one of the two) needs a ritual purification based on the level of the denied law. As the local elders stated, different ritual practices are performed related with sinfulness such ritual practices includes *faloo*, and *axaarri*. Aritual purification is the common practice among the local people specifically; believers of traditional religion (*Waaqeezana*) performed those ritual practices when they are faced with various tragedies. The ritual practices are performed in order to get *Waaqa's* mercy and forgiveness and then cured from sin (*Cubuu*) as well as blessing the existing family.

In order to know ancestral sin, the local people are widely visiting the traditional religious institution. Such traditional institutions are including *Qaluu* institution (*Waaqa*

*Qaalu*) and Dead Spirit calling institution (*Waara Heekeraa Duubistuu or Waara Moraa*). Accordingly, these two institutions are supposed to manifest the reason why the living family lead their life in suffering wrath and harmfully and in the consequent of the destruction of life. After they identified the reason why, they are living in hardship condition. The next step is performing the ritual purification. The process of ritual purification is performed according to the instruction of traditional religious institutions.

Related with the process of ritual purification and disability, one of the disabled informants suggested that the local practices of curing their family from sinfulness to stop the continuity of a child born with disability and being disabled after birth.

In most case the rural area of Bacho Oromo society believes that having a disabled child is the wage of ancestral sin. Regarding to ancestral sinfulness the new born child and being disabled to be continuing unless the process of ritual purification takes place among the family and ancestral relatives. Therefore, alive households are visited the traditional religious institution and they should be performed ritual purification. In the process of ritual purification all of the ancestry closes kin (*Fiiraa Dhiyoo*) directly participated on the purification and minimal lineage (*antee*) should be participated indirectly. If from the members of the family or relatives of ancestry absent from the process of purification the disasters perhaps persistent on the missing families. Therefore, due to, fearing of the barriers every members and relatives involved on the purification process directly and indirectly.

As indicated in the above local elder's speech, born with disability and being disabled is dominantly associated with ancestral sin. Without the process of ritual purification, a new born child would be disabled and being a disabled from the member of the family or relatives is continued up to the next seven generation. Hence, the practice of ritual purification to clean from ancestral sin is widely influenced the conception of local people on disable people.

Moreover, the local elder discussed about the process of ritual purification which extremely manipulated the mind of local people; in the process of ritual purification, sacrifice is a major part of the process. All members of the clos kin together slaughtered the sheep secretly (the outsiders are not allowed to observe them when they slaughter) and left it where they sacrificed it with other ritual materials which include *Jirbii* (lit.

cotton), *Jalqaba Hodhaa* (lit. traditional plates), different coins and *BuqeeDuudaa* ( lit. ....). As the elder reported, all materials including the slaughtered sheep's meat have been taken by a person who has disability. This situation is held according to the orders of religious institution. Particularly, the instruction is applied based on the broken law (law of God and law of man) by the ancestors. In line with this, the purpose of a scarified sheep for ritual purification (*Faloo*) is different from the other slaughtered sheep. It specifically, called *Hoorii Faloo* (lit. restricted for ritual scarification) accompany a circumscribed in physically, cooler and be injured one of its body parts. The scarified sheep did not permit to eat by able bodied people while it is only endorsed to eat by disabled people.

As clearly stated in the above paragraphs, it is possible to conclude that the traditional religion concluded that disability is the wage of ancestral sin and some mysteries happening. It is highly deprived and suffered the mind of persons with disabilities. Specifically, in connection with ritual purification, disability and disabled people are connected with curse and sin.

Regarding to this conception, the local people classify disabled people are cursed and sinful, and that person with disability is considered as taboo (*Hoodaa*). Therefore, disabled people are ashamed of being disabled and disappointed by what they are to be. As a result, they isolate and marginalize themselves from any of the sociocultural setting and community participation.

## **b) Orthodox Religion**

In the response to the notion of orthodox religion, the conceptions of disabled people are living with evil spirits, cursed and sinfulness. Here, I also employed interview method and observation method in order to trace the situation of the religion about disability. As the data revealed through these methods, I found out that orthodox religion has a significant contribution to the conception of persons with disabilities are living with evil spirits, cursed and sinful. Many of the subjects believed that disability is happened through the will of evil spirits as well as the wages of sin.

An interview with 'Mergeta' (lit. Servant in the church) said that the works of *Debtera* or *Yeqinee Awaaqi* (lit. the man who is knowledgeable in religious mysteries in orthodox religion) his task is serving the church through different works and by doing superstition works such as remedial (*Ashen Kitab*) things (made mysteries) for the followers. For instance, when a child is ill, he heals the child by preparing some medicines by refereeing the religious book which is known (*Yekine Metshave*) and also using different the plants' leaves. Therefore, in the process of the superstition works, he knows every difficulty which is ended by *Ganen* (lit. devil). Furthermore, he stated that one *Debtera* by the works of superstition, he can make somebody disable and cure him from disability. As he mentioned that one *Debtera* has an ability to create '*Danqaara*' (lit. barriers which is forced some body to be disabled) even if he or she is able bodied person. In the same way, he (*Debtera*) has an ability to return a disable person into able bodied person through the ability superstition's deed. He can also create barriers on the baby during pregnancy.

Moreover, during my field work observation, I visited the sacred place of holy water at Sebeta Town. In the place of holy water pool, I heard that the evil spirit was manifested and narrated himself through an intellectual disabled teenage according to the believer's point of view when somebody baptized by holy water evil spirit is cast out from somebody by narrating himself. This is what I heard when the priest was casting out the evil spirit narrating himself as follows:

I am his ancestral origin of evil spirits. I stayed on him because his alive family left me then I occupied him and made him like this (the child has an intellectual disability). If they are worshiping me and give blood scarification to me then I would be cast out from him. Through blood scarification he will be wellbeing but they brought him here rather they give blood scarification to me I swear I could not leave him easily.

As indicated in the above cases, the priests, the believers and the child's parents considered that disability is happened on to somebody due to the possession of evil spirits. The priest instructed the evil spirit when he was pouring out the holy water on the child's head asking as "*who are you? Leave him alone; are you Budaa (lit. evil eye) or Ganen (lit. evil spirit)?*" The believers generalized that every type of disability is the

cause of evil spirit due to family or ancestral descent's connections with the experience of the devil. They perceived that when the family had broken the relationship, the devil made their child disabled to avenge and create fear and frustration in the mind of the family.

### **c) Protestant Religion**

Concerning to the assumption of disabled people, the protestant believers are also no different. In order to find out the cause, I also used observation and interview methods to come to the conclusion regarding the issue. As the data revealed, the ways of preaching in the church portrayed the conception of disability is linked with evil spirits, curse and sin. I, the researcher, was frequently attending several preaching session and festivals in the protestant Religion at Apostolic (only Jesus) and Pentecostal (believe in trinity) Church. As I observed, the current preaching system was really a heart breaking session. The preacher believed that disability is associated with the charge of the devil. The majority of the believers usually associated disability with unfortunate circumstance, distinct; assistance pursuing and vulnerable group of society.

In addition to this, I even had a discussion with informants of protestant believers and the preacher. The assumption of the preacher's and disabled informants' sometimes contradicted each other. The preacher argued that in fact disabled individual was not completely possessed by evil spirit or the result of sin.

However, he further stated that the devil could make people disable and lead them into hard ways of life. Nonetheless, through strong faith on Christ's deed on the cross make disabled people free from the bondage of the devil. In this way, the preacher believed that disabled people's body could be restored. This is only happened on the basis of the disabled person's faith to be healed.

Furthermore, many of the informants' points of views towards the current preaching system of protestant religion is unlike with the preachers' suggestion. Informants stated that the preaching system is held in different Medias such as different TV channels (God channalles), duplicating fliers, and magazine. Through these media, they set specific healing event, praying program for different people particularly, for those who are



considered as patient (blind, mute, paralyzed, leprosy, dropsy including other internal problem like HIV/AIDS). Those means of broadcasting are highly disseminated healing of disability through the community.

In each type of event, they propagated about the session as,

great healing festival at [...] during this event the God's man preach the gospel, pray for patient, on this event a withered hand stretch out, a mute speak out leper could be cured, dropsy stretch out.

They also publicized the wittiness of a cured individual through a certain types of media how he or she is healed from the possession of the devil. In this regard, related with healing from disability, an informant whom interviewed in Sebeta Town stated what a protestant's prophet told him about his life beforehand as,

He said that Almighty God is with you. "His mercy finger is coming on you. You become free from your disability because the system of evil spirits is cast out from you and God will make miracle on your life; please glorify your God." That word directly came to me because I was the only disabled man in that worshipper. Additionally, in that time, I was in the member of choir B in the church. Surprisingly, I waited it for years to be cured from my disability rather accepting the reality. To speak honestly, I was frustrated by the situation; by then, I often realized what the prophet said to me and praying too much to get mercy of God. However, nothing came to my physical disability. Consequently, I discharged from the religion. But, occasionally when I met the prophet who told me the prophecy, he criticized my faith. He said "God gave you a chance, but you did not believe in the mercy of God."

From the above witnesses, it is possible to conclude that the preaching system of the church is predominantly manipulating the conception of believers towards disability and disabled people. Certain kinds of preaching methods linked disability with unfaithful and demonstrated the association of disability and evil spirits. Particularly, the healing session make the believers to take the issues very seriously and makes the matters worse on the

disabled people. It indirectly propagated person with disability are possessed by evil spirit and also it denied the reality of disability.

In line with this, the preacher also spread misconceptions about disability when they preach the bible in the church. Through their preaching system, they used powerful and awaken words to conceive the believers' mind and disabled people. Commonly they talked about mercy of Christ and they instructed the believers to be trusted in God, and they voiced how sick persons to be cured from any difficulties. In certain churches in order to their best wish and willingness they are too ambushed to heal the believers from any difficulties including from disability. In this regard, they clean the believers from evil spirits and profane by ordering the evil spirits saying:

In the name of Jesus, I ordered you out from [...], in the name of Jesus shout and leave him or her now. You made him or her paralyzed, mute but now the power of God is coming on you. I command you to leave him or her. You do not have the right on the children of God.

Therefore, from my observation, I found out that the preaching system of protestant religion is widely humiliating the conception of believers towards disability. The preacher of the religion preached the words of the Bible based on the sympathetic associated with devil spirits. It is preached in related with issue of misfortune, curse and sinful which is negatively manipulating the attitude of the local believers in the church. They concluded that being disabled and born with disabilities is associated with evil spirits. Any type of disability could be restored if a disabled person trusted in God and believes in Christ's mercy. From this assumption, it is possible to conclude that living with disability is denied rather accepted the reality of disability and living with it.

#### **d) Biblical notion and Christ's Healing**

In the response to biblical notion to the conception of disability, I tried to observe some parts of the New Testament. Bible has its own significance contribution regarding influences the attitude of readers and believers in order to create misconception about disabled people. It is disseminating the conception of disabled people are carrying evil spirits, cursed and sinful. From certain citation of the bible, I found out that disability is

considered as sinful, connected it with evil spirits as well as unfaithful. As evidence, from the quotation of *Mathew 15: 29 and Mathew 12: 22 I observed that a demonic that was blind and mute healed from their problem* through curing services of Christ. From this quote of the bible I found out that the term demonic refers an evil spirits. Additionally, on the mark 2: 3 Jesus cured a man from his sin. Again, on John 5: 2-9 Jesus cured the man from his sin and from his paralytic who was a paralyzed for thirty eight years. Accordingly, the curing of Christ is through the process of casting out the spirits of devil (in the bible devil sprits refers by the term *belzubel*). Through the way of casting out evil spits (*belzubel*) he made them (disabled people) be able bodied people.

In associated with the biblical notion, I had interviewed an informant who was protestant believer. He argued that the bible is the sources of peace and strength although, he stated that he is feeling afraid and frustrated rather he feel peaceful and relaxation on it. Also, he mentioned the reason why he frustrated and restless when he read some parts of the bible specifically the citation which is presenting disability issues. Such specific citations of the bible are publicizing faiths of disabled people, connection of disability and sinfulness. As evidence he quoted Mark 2:3-11. As, he discussed the part this bible mentioned the faith of a paralyzed man and curing of Christ.

On Mark 2:3-11 some people come bring a paralyzed man carried by four of them. When they could not bring him to Jesus because of the crowded, they removed the roof above him and after having dug through it they let down the mat on the paralytic lay. And then when Jesus saw their faith he said to the paralytic 'son your sin forgives because your faith healed you'. After Jesus said your sin forgive a man stand up and take his mat and walk.

In line with the above informant's discussion on the specific parts of the bible linked with disability I found out that the bible by itself promoting that the association of disabilities with sinfulness and evil spirits. Therefore, when disabled people are read the specific parts of the bible they become suffered, torero, ashamed and disappointed. Because, the representation of disability in the bible is understood as disability is happen and live with it due to the weakness of faith and unstrengthen fellowship with Christ.

### **4.1.3 Inability and Low Intelligence**

Along with the conception of inability and lack of intelligence in the local area, the discussions raised during interview with key informants have helped me to understand the predominance of such stereotype. As the informants of the study stated people with disability are considered as people who do not compute to perform public level activities and they are less productive due to their lack of capacity and low intelligence. They are considered as not being equal with nondisabled individuals in terms of knowledge and physical ability.

In the two sessions of focused group discussion, discussant discussed that the local people associated disability with low intelligence, weakness and imperfect body. They also mentioned that the disabled people cannot protect themselves from any difficulties and could not protect their families and relatives from any enemy. Besides, related with the conception inability and lack of intelligence, informants of the study reported that most of the disabled children are often secretly kept at home due to fear of societal stigma and potential physical attack. Because disabled people cannot defend themselves from all form of calamities in which they face. Such difficulties include being in conflict with their peer, rape (if they are female) some accidents, fire, flooding, etc. Consequently, most of the disabled people are excluded and marginalized from external environment and from local community. Usually the local people look down on the disabled people as weak, and they suppressed their effort when tries to do anything. Hence, due to these kinds of experience, the majority of disabled people tend to develop sense of fear and insecurity.

In order to find out the main cause for the conception of disabled individuals having low intelligence and low ability to perform any task, I already employed an interview method. Accordingly, informants of the study reported that the perceptions' of local people is highly influenced and abundantly manipulated by cultural elements of the local people, biblical notion, and by socialization system of disabled child.

Besides, from my filed work observation, I found out that the local people's experiences who are the followers of traditional religion intricately with the Orthodox Christians. According to informants of the study stated that the traditional religion is the main cause for misconception of disabled people has low intelligence capacity and low ability.

Similarly, the focused group discussion held at Melka Awash and Sebeta Town stated that the traditional religion is commonly convinced the mindset of the believers. From this, it is possible to conclude that traditional religion has a great connotation and contribution as regard to think negatively about the ability of disabled people

In line with this, a focused group discussants presented that in most cases, the rural area of society actively visited the traditional religious institution for multiplicity of issues. Likewise, a disabled's parents visited the institution to seeking various services from the leaders of the institution (*Abbaa Qaaluu*). From various services which are given in the traditional religious institution *Amachissa* (receiving name for the new born child) is the major one for the cause for aggravating the issues of isolating disabled people in any aspects of their lives. In the process of *AmachisaAbba Qaalluu* depicted that the condition of disability which is indicated the ability and vulnerability of the disabled child based on the disability type he or she has. The discussant mentioned as evidence the name like [Fedhaissaa, Humnissa, Hirkoo, Waqbekaa, Jabeesa, Hirkatuu, ool'qabaa] are described the condition of the child. According to the suggestions of informants, such kind of given name is the means of psychic therapy which is compensating the vulnerability of disabled individuals which is associated with lack of intelligence and inability. In addition to this, the members of the family sometimes called them by the nick name which showed that the vulnerability conditions of disabled individuals and the disability they have. This could clearly show that regarding to what the disability they have; disabled people are restricted to do what they could do in their life span.

Moreover, in the local proverbs such stereotypes are reflected. As, evidence in the local area people have lower place for a leper man "*Rakkoodhaa Jeddee Qomaxan Durbaa Fudhee*" the leper man said "it is too difficult after having married a virgin girl. This saying shows the dominant view in the community specifically how incapability is associated with disability including this issue of being sexually incompetent.

#### **4.1.4 Uniqueness**

As the findings of the interview clearly show most informants have indicated that disabled people are often considered by the society as being unique. They suggested that disabled people often lead different life styles than people without disabilities. They can

be considered as special creatures who lead their life out of the normal trend and doing things differently. In addition to this, they think that disabled people have tragic life style and often tend to get sympathy from the non-disabled individuals.

Additionally, through my field work experience, the local community widely specified the uniqueness of disabled people. Specifically, in their day to day communicative words, they invoked that the image of disabled people represented differently than the other able bodied people. They more illustrated and measured disabled people and they perceived them as absolutely not the same as the nondisabled individuals. Moreover, they are considered to be stereotyped, discriminated and subordinated as well as illustrated the weakness, unproductiveness, and dependences of disability. Regarding creating a unique image on disabled people, a woman who was interviewed in Tefki Town stated the following:

The local community see person with disability as a unique creature. Let's give you an example when somebody calls a disabled they usually use derogatory terms and figurative expression like '*Mucaa harka cittaa sanii* (lit. a boy with a withered hand), *Nitii fula buree sanii* (lit. a woman who is with a leper face), *Namitii miila naafaa sanii* (lit. a man who is a lame ), *Jaartii ijaa jaama sanii* (lit. a woman who is a blind) and *Jaarsa guura duudda sanii* (lit. a man who is mute)' even they never called them by their normal name they gave name based on what disability they have. Such nick name also highly magnified the uniqueness of disabled people.

Furthermore they depicted the uniqueness of disability through the aforementioned saying and such widely used proverb "*Qubnii takka qoomaxatii birqiidhaa.*" *a finger is a treasure for a leper* thus; this proverb magnified the nature of leper man and showed impossibility. As clearly indicated in the above mentioned derogatory terms and figurative names, this kind of threatening ways create an image in the minds of people that disabled people are unique from the rest of the society. This clearly shows that people often label disabled people according to their conditions or limitation. Likewise, most of the local community commonly used that a particular reference in their everyday communication words. They called disabled people based on the type of disability they have as evidence '*Naafaa*' (lit. withered hands or legs), '*Jaamaa*' (lit. blind), '*Duudaa*'

(lit. deaf), '*Qoomaxaa*' (lit. leprosy) and like. In such kinds of terms, they displayed a negative outlook about disabled people and the image of individuals.

As the data and interviews from focused group discussion revealed, the main cause of the conception of disability's uniqueness in the local area. The respondents mentioned that allocation of derogatory terms among the local community in communicative speech is due to lack of awareness about disability. In addition to this, the cause of lack of awareness towards disability is also lack of adequate information about disability. As they stated that raising the awareness of the community about disability is a task which is very limited. Due to this situation, the local people often develop such sense of stereotypes and figurative terms which enhance the view of uniqueness attached to disability.

Despite the United Nation Convention (UNC) on the right of persons with disabilities ratified there are still derogatory terms in the communicative words, memos, codes and written and unwritten documents. But, the UN's convention on this issue is not practically applied by the ratifying states like Ethiopia. Likewise, this situation is widely observed in the researched area. Regarding on the respondent's discussion most of the local people utilized those derogatory terms in their day to day activities; for example in local primary and secondary school, health institutions, and in other government office.

Additionally, informants of the study mentioned that some written documents are also inclusive of derogatory terms. Written materials like bible, memos, civil code, and different printed materials conveyed those derogatory terms. Throughout those documents derogatory terms are widely utilized for instance the words like *Shiba* (lit. lame), *iwir* (lit. blind), *Duda* (lit. deaf), *Lemtsam* (lit. leper), *Hiju Yeselelech* (lit. withered hand) *Gobaxa* (lit. dropsy). In line with this usually those figurative terms which are listed in the written document are utilized by the government, believers of Christian (orthodox and protestant) the communicative speech; the preachers utilized it during the preaching session at church again on their songs they portrayed the image of disabled people and throughout the published of spirituals books they are wisely utilized.

Furthermore, in the bible I found out the preaching way of Christ which is listed in the place of Luke 11: 34 which is specifically figurative in relation to his reference to a blind people. This has in one way or the other extremely influenced an understanding of believers indicating the uniqueness of disability. On the citation of Luke 11: 34 Christ discussed about the light of body which is the part of eye, *“your eyes is the lamp of your body if your eye is healthy, your whole body is full of light; but if it is unhealthy your body is full of darkness.”* this citation often creates an image about a blind man by magnified that the darkness for blind person. It illustrated that without the body part of eye an individual’s whole body parts losing of light. Hence, some parts of the bible create misconception of disability.

Generally speaking from field result I found out that the uniqueness of disabled people is highly promoted in various means and through day to day communication. Accordingly, these figurative terms negatively manipulated the understanding of disabled and other people.



## CHAPTER FIVE

### 5. Indicators of Exclusion of Disabled Persons

Social exclusion primarily focuses on relational issues: inadequate social participation, lack of social integration and power. It threatens society as a whole with the loss of collective values and the destruction of the social fabric, and it is an expression of social disintegration and an individual detachment from local order. In a person's life, trajectory exclusion occurs at different places and in different social spheres (Room, and Saraceno, 1997: 55; Silver, 1994:55). Commonly, persons with disabilities among the local community are the most neglected group in the domain of economic, social and political spheres. They restricted to the key activities and the social domain of local people. Besides, they do not have full accesses to the most basic needs such as health services, education, and proper treatment in the household. Moreover, they would usually be poorly participated at the community level activities and have problem with choice of partner to establish family. As I discussed in the previous chapter, local communities' misconception about disability induces marginalization, which would often leads to the development of stereotype having different indicators of discrimination towards disabled people.

Therefore, the aim of this chapter is to discuss the indicators of discrimination and exclusion of disabled people. These include being excluded from community level activities, sidelined from *Idir* (lit. local based helping institution), *Dabo* (lit. local based group work activities) and religious activities. So, institutional, environmental and economic segregations are the major challenging factors in the local community in which I have conducted my study. Whilst discussing and analyzing such conditions i.e., in connection with difficulties and cumulative effects of exclusion, I have employed the social exclusion theory.

#### 5.1 Community Level Participation

At the local level, there are various community based activities that are performed by organizing the people of the village (*Goxi*) and the neighborhood. Such community based activities include wedding and funeral ceremonies, religious activities, group work

activities in the economic sphere, political activities and other public domain activities. However, according to informants' point of view, most disabled individuals are experiencing high level of exclusion from community level participation. That is, the participation of disabled people in socio-cultural activities like *Idir* and *Mahber* (lit. religious group of society) establishing relationships and friendships and choice of mate selection to establish family are widely restricted. And their participation in new government's structures like *Garee* is also minimal i.e., they are less represented within the political domain where their role becomes minimal in decision making. Ultimately, these kinds of exclusions have various social and psychological effects on disabled individuals.

Regarding the causes of exclusion from community based activities, the respondents mention marginalization and stereotype as the main causes of exclusion against disabled people in the society. According to informants, the major reason for this is the perception of the local people with regard to the contribution of disabled individuals in community based activities. Local people conceived that disabled people have a restricted potential to perform all activities compatible with nondisabled individuals. They concluded that all disabled persons have no contribution and weak participation in all types of activities. And hence, such conceptions among the society would usually force disabled individuals to avoid interaction with their community, which, in turn, motivated their marginalization and poor participation in the social activities.

In the proceeding sections, therefore, I will discuss the discrimination of disabled people by focusing on indicators of exclusion in the community level participation, like *Idir*, *Mahaber* and *Dabo*.

### **5 1.1 Participation in *Idir***

The institution of *Idir* is a local based supportive agency founded by the local people. It has a great significance at the time of death, difficulties and special occasions. During such events, community members help each other by contributing in kind, cash and labor force. Particularly at the time of death *Idir* has a crucial function, for instance, the local would help each other in constructing the house in which the deceased person buried, planning on the time when the funeral ceremony would be conducted, preparing food to

be consumed on the funeral ceremony, welcoming guests immediate relatives of the deceased person and others either on the date of burial and then after, treating psychologically (what they locally call *jajabeesu*) the deceased's family and the like, In addition to the time of death and wedding, they also help each other when one of the members lose a cattle in accident i.e., other members share the meat of the cattle in accident (*Qircha*) with an average price so as to share the burden of the individual and compensate his/her lose. So, the role of local institutions like *idir* is paramount in providing assistance to their members in time of peace and difficulties.

In line with such institutions, from the three rural *Gandas* I found out that there are five *idir* institutions in one peasant association. Those local *Idirs* identified themselves as male's and female's *idirs*. As evidence, in Tefki rural *Ganda* there are 8 local *Idirs* (such as *meredaja*, *mariyaam*, *gebriel*, *izgarab*, *yketema wondoch*, *mekael*, *yketema setoch* and also, in the rural *Ganda* of *Hekana Wolle*, 5 local *Idirs* are founded. Also, in the rural area of Dibee Bakani, 4 local *Idirs* are founded. Even though there are large numbers of self-help institutions in the study area, disabled individuals are found segregated or discriminated not to participate in such institutions. In the subsequent paragraphs, I have discussed the experience of disabled persons' participation with in the local institutions like *idir*.

According to informants, the incidences of specific forms of social exclusion are widely spread among the study area inhabitants, and disabled individuals are segregated from community based participations like *Idir*. Legally, disabled people who lived in the local area and whose age is old enough (probably more than 18) and have a family have the right to join and take advantages of the institutions like *Idir* similar to other able bodied people. However, some disabled people are highly marginalized, and they do not wisely take the advantages of public domains' opportunities.

Due to the bad conception of local people towards disabled people, disabled individuals do not have active participation in the activities of *Idir* and in other societal based organizations. They often believe that people with disabilities need help, and they are not capable to fully participate in the common activities like road construction and water and soil conservation. They are always thinking that disabled people need support and cannot

do anything by themselves. And hence, able bodied members of the *Idir* often “care” for disabled members therefore due to such conceptions with which disabled individuals are left out from the activities of *Idir*. However, disabled individuals who are the members of the institution need to participate in the activities of *Idir* and contribute what is needed from them. According to disabled persons informants, even though there are activities disabled persons can do, individuals with dualities cannot participate to do so and usually able bodied are at the fore front to perform large number of activities while disabled persons are sidelined from some activities.

However, the chief of *Idir* do not permit them to perform such kind of activities. Similarly, a visually impaired individual’s do not participate in all activities of *Idir*.

Since, every contribution held in the activities of *Idir* is seen as reciprocity; the acts of limiting disabled people from activities have its own impact in their future life. In this regard, some disabled persons, in the rural Ganda Tefki, have shared their experience to me of the problem of participation in *Idirs* at a time when a disabled person is member of such institutions. In line with this, one of my informants recounted his experience in *idir* as follow:

I am the member of *Idirs* which are founded in this village. I have good interaction with members of *Idirs*, and they contribute what expected from them during any difficulties. However, the chief of *Idir* did not mandate me to perform what is required from me. However, according to the rules and regulations of the *idir*, it was a must for me to participate in one of the activities, but I did not. In this regard, members conceived me as I could not able to perform any task. Consequently, due to my weak participation on the different activities, members did not actively participate on the special occasions of mine like on wedding, funeral ceremony and other events. Particularly, at the time of wedding and special occasions, I faced with different challenges in relation to sufficient labor force. If I had had an experience of participation on different occasions, they would have participated without any regression.

Therefore, from the above case, one can understand that disabled individuals are systematically marginalized though they have the capacity to perform some activities simply by considering them that they could not perform well. As many disabled people discuss, the member and the chief of the *Idirs* did not formally exclude them but they do

the discrimination act in the name of helping them or not to create pressure on them however, disabled people are marginalized and sidelined from the activities of *Idir*. In fact, disabled members have poor participation and unequal contribution on the activities of *Idir*. Therefore, persons with disabilities are disadvantaged during their critical events.

However, the focused group discussants mentioned a contradicting idea with the above case forwarded by my informants. They reported that persons with disability have marginalized themselves from participation of *Idir* like from the funeral and different public occasions because they are afraid of the discrimination of other members. They usually consider that activities of *Idir* require much capacity beyond their abilities. Therefore, they feared to engage themselves into such activities like digging grave, holding the dead body to the funeral place and pulling up the tent. Accordingly, their relationship is highly prohibited due to, distance method interaction with other members of *Idir*.

As it is stated earlier in the above paragraphs, having a disability has diminished the role of an individual particularly, in the local *Idir*. Likewise, the stigma of disability within the community increased isolation of disabled people from local based participation like *Idir*. In addition, disabled people have wrong thinking about their contribution in the activities of *Idir*. With regard to having wrong perception about their contribution in the activities, they are widely excluding themselves from public domain participation, mainly from local *Idir*. But, the federal government of Ethiopia and the local government are promoting that equal access and opportunities in all sorts or setting without any stigma and discrimination. Even though this is the case, in the local contexts, for instance, in the study area, inclusion of disability in social setting is not practically working on the ground.

### **5.1.2 Participation in Religious Activities**

This sub section discusses the situation of person with disability focusing on their participation in the domain of religion, particularly in religious activities and some ceremonies. The local people commonly perform various religious activities in accordance to their religion be it traditional, orthodox and protestant. Similarly, disabled people also engage in these practices according to their religion. However, disabled

informants believe that religion facilitated the way for their suppression among their community. Even though this is the case, like any individual, they may visit a religious institution for the sake of curing their sinfulness or any spiritual gain.

Informants of the study mention the existence of exclusion of disabled people from various religious activities. Unlike those able bodied believers, disabled individuals are isolated and discriminated in delivering different religious practices. The major challenges for disabled people in the religion some able individual's activities. Particularly, those non-disabled believers, religious leaders and other community of religion sidelined disabled people. For example, the relationships of disabled individuals with religious leaders and other believers (who are able bodied) are marked by marginalization and discrimination. In fact, in principle, the different religions' dogmas state that everybody is equal before God without any discrimination and exclusion. However, in reality, in the religious institutions and in the religious activities, able bodied individuals and disabled individuals do not have the same statuses. The main reasons would be discussed as follow.

For example, in the case of Orthodox religion, discrimination acts take place at the time of religious events. In this regard, disabled informants mention that the feedback of some religious leader is a significant problem for disabled individuals. Due to their background thinking, they considered that disabled individuals are sinful, tragic, and distinctive group of people. In line with this, the leaders of religious institutions look disabled people as they have weak faith, and often labeling them as beggars that they are coming to religious institutions for the purpose of begging and receiving mercy of God than for celebration and contributing something to the church. Even though this is the case, disabled persons are usually visiting their respective church for different purposes though some religious leaders have no good attitude towards them. For instance, they are going to the church for the purpose of praying, give thanks and to get some spiritual services from the religious father. In the subsequent paragraphs, I will discuss the notion of the bible in relation with the aforementioned ideas.

According to informants, at the religious institutions persons who have disability are indirectly isolated and segregated by the leaders of religious institutions because

sometimes they connected disability with the wage sinful. For instance, in John 9:38 “a man who cured by mercy of Christ denied from church by the religious leader. They asserted that person with disability born with sin and live with sinfulness.” In this citation, the leader of religion asserted that person with disability is born with sin and live with sinfulness. The only task of disabled people coming to church is for the sake of begging. Besides, in the orthodox religion, certain kind of religious practices are performed by the believers. *Mahaber and sanbate* are the major religious practices which are performed monthly. In such kind of practices, religious ceremony is achieved by preparing *koolo* (lit. roasted grains) *tella* (lit. local beer), *difoo daboo* (lit. bread) and *Injera Bewot* (lit. Ethiopian thin bread with stew). In these religious activities, disabled people have less participation due to the complexity of the activities. In line with these situations, one of my informants, who is living at Tefki town, recounted his experience as follow:

I was a member of *Sanbate* in Tefkki Orthodox Church which is known *Yekidhane Mihret Sanbate*. When my turn came to prepare the religious festivity, every members of *Sanbate* worried, and they did not trust me regarding what I prepared. So, by then they would usually try to contribute the required things in kind and in cash. Meanwhile I quitted the membership due to economic problem to prepare the feast and due to the murmuring of the members because of such failures. There were able bodied members who have the same economic status with me. However, members did not criticize such individuals.

So, one can learn from the informants idea and indented paragraph that there are limited participation of disabled persons in the activities that usually related with religion. So far, I have seen that disabled individuals are restricted due to their disabilities. Again, this is true for those who are poor in addition to their disabilities. But, those who have economic capability can participate in various religious activities particularly in *Sanbate* and *Mahaber* without facing any challenges. Therefore, economic condition and wrong perception of religious leaders and adherents are the major factors to the exclusion of disabled people from some religious activities.

Similarly, in the local area, the different traditional religious ritual practices are exercised by the local believers. These religious practices include *Irreecha* (lit. blessing ceremony at a time of New Year), *Mudaa Abbaa Caffee* (lit. nominating religious

leader), *Gabbara Adbarri* (lit. scarification on sacred place). According to informants, disabled individuals are not taking part equally with able bodied people. One possible indication of discrimination is that in the traditional religious ceremonies, disabled people are not often involved. Due, to the conception of local people have on disabled individuals, disabled individuals are widely isolated and marginalized from ritual ceremony and religious activities. However, in some ritual purification activities disabled individuals are needed. As I discussed in the preceding chapter, the problem of disability associated with ancestral *cubbu* (lit. sin). In line with this conception, members of the society, in the study area, label them as the incest taboo people (*hoodia*). They are limited from the ritual ceremony of *muudaa abbaa cafee* (lit. nominating ceremony of religious and political leader *irreechaa, gabbara adbaarri*). In these types of religious ceremony, disabled people are not formally excluded by the customary law and local people. Every group of people can participate on each type of ceremony, for instance, in order to decide on the election of religious leader, preparing slaughtered sheep, making coffee on the sacred place and preparing a feast for the group of believers. But, the local people do not accept their activities in positive approach. Because, they criminalize their thinking by the notion of disabled people are cursed, carrying evil spirit and sinful.

### **5.1.3 Participation in *Daboo***

Farming activities are commonly exercised in the local area. These activities include ploughing land, sowing seeds, harvesting crops, transporting crop to homestead and threshing the crops. This section also reveals disabilities barriers specifically, an obstacles in the economic domain in relation to group work activities. Along with these circumstances, in the study area, there are various group work associations to perform economic and other activities in groups. Among such society based associations *Jigii* or *Dabbo*, (lit. working in group), *Tookko Shanee*, (lit. one to five) *Garree* (village based arrangement) and *Waanfalla* (working in replacement) are widely existed in the local area. The local people are widely involving in these associations. However, disabled individuals are not wisely employed in these associations. The limitations and challenges for disabled people to participate in the group work activities are created by the local people. Along with this, field work results indicate that the local people give low access and opportunities to include them in the group work activities.



In the response to the involvement and participation of disabled people in the activities of *daboo*, the focused group discussants report that persons with disabilities are discriminated and have limited access to group work activities. According to discussants, persons with disabilities can work or participate in some economic activities with able-bodied people. Perfectly, farming activities are not inadequate for all disabled individuals; some farming activities could easily be performed by disabled individuals. For instance, physically disabled (motor impairment) can do harvesting, and hearing-impaired individuals can do all types of farming activities. In fact, some farming activities like harvesting, ploughing farmland, transporting and planting seeds activities are very difficult for those who are visually and physically impaired (motor and limb impairments), but not all activities are difficult for all disability types. Despite this reality, local communities restricted the opportunities of all disabled people to participate in group work activities. In most cases, the local people's understanding about disabled people is associated with poor quality, inability and low capacity to work. This is because they perceive that disabled people are unable to perform group work activities equally with able-bodied people. Then, their contributions in the group work activities are highly undermined and looked down.

Additionally, the local people denied disabled people from *daboo* activities due to the kindness of care for disabled people. That is, farming activities need more capacity, and it is done forcefully. According to local people's perception, such activities are beyond disabled's capacity, and hence, they do not include disabled people in group farming activities. If the disabled individuals participate in such activities, they become ashamed due to their inability to perform equally with able-bodied people. Therefore, due to the conception of low expectation to disabled people and the notion of sympathy for disabled individuals, the local people excluded and sidelined disabled individuals from *daboo* or *jigii* and *Waan'fala* activities.

In line with the above idea, one of the disabled informants in *Ganda Tefki* provided me information concerning the problems of disabled persons in relation to group work activities like *Daboo* and the situation of exclusion by the local people. From the interview which I have conducted and my own observation, I found out that there exists

exclusion of disabled individuals and related problems which suffered disabled farmers. This informant states that he spends a great deal of money each year to accomplish his farming activities; due to his failure to participate in *Daboo* activities.

According to this informant, group work activities have reciprocal characteristics of sharing labor force. The process of *daboo* activities performed a farmer who has *daboo* activities prepared a party for the participant and then the neighborhood employed on his activities and performed the task; after they finished the activities and involved on the feasting. In the next time an individual reciprocated the labor force for the neighborhood farmer who participated on his *daboo* activities. From this case I found out that *daboo* activities are commonly have reciprocity characteristics

Other informants of the study also mention about the government structure which is called *Tooko-Shanee* (lit. one to five group) and *Garee* (lit. village based arrangement) structure. In the government structure of *Tooko Shanee* and *Garee* groups, disabled groups are almost left out. In fact, in principle (on paper), they have the right to participate, but for the sake of formality. And hence, they do not practically participate in the structure and take of the responsibilities of each structure. That is because they are not initiated by the facilitators of the group to involve in the contribution of local based activities and responsible like other able bodied people. The activities done by this structure include environmental protection, which is called by the local people as *kunuunsa naanoo*, discussion on villages' peace and security, participating in different society based activities. Therefore, in the consequence of local people's exclusion act most of disabled individuals are sidelined from benefits of government structure.

In linewith the aforementioned circumstances, disabled persons often employ daily laborers and members of their family while working on their farming land. This is because they could not able to participate in group activities (e.g., *daboo*, *wanfala* and in *tookko shanee* and *garee* structure) which require the reciprocal relationship in terms of labor force may be because of the poor conception of their society towards them or because of the seriousness of their disability. This condition also forced them to expend additional cost for daily laborers. As one of the disabled farmer states that the cost of daily laborers increasing from time to time and affording such expense would become

difficult for the disabled persons. Due to such factors, their farmland would not usually be tilled in the appropriate time and their crops sometimes damaged by untimely rainfall. This resulted in the failure of crop production or production of poor quality crops, which, in turn, lead them to starvation.

## **5.2 Marriage**

As stated earlier in the previous chapter of this study, there are misconceptions or lack of information about disability and as a result, they are widely excluded from common social settings. In this section, an attempt is made to examine the state of disabled person(s) in the establishment of a family through marriage relationship. Accordingly, this section provides a discussion about mate choice, family establishment and their long-term relationship. In the study area, disabled individuals are highly marginalized from the benefits of marriage. These include regulate, and refine, the intercourse between the sexes; and to multiply, preserve, and improve the species, give legitimized family, and procreate child. According to the gathered data, mate selection, having family and establishing long live relationship is difficult for persons with disabilities. The issue of having bad local conception towards disabled individuals becomes very serious towards females than males. Accordingly, the marital opportunities are very limited for disabled woman rather than disabled men. Therefore, marginalization of disabled individuals from marriage utility is also interlocked with the concept of gender asymmetry.

### **5 2.1 Mate Selection**

According to the 1995 constitution of FDRE (Article 34, Sub-Article 2), marriage shall be entered into only with the free and full consent of the intending spouses. In the study area, mate selection has its own cultural procedure, and mostly it is contradicting the constitutional tenet of the state. For instance, the process of mate selection is mostly done by the families of the two couples. Along with these arrangements, marriage is commonly performed by the confirmation of Groom's and Bride's parents and relatives. In line with this circumstance if the two partners know each other, their parents have an authority to hesitate and can decide on their relationship. In most cases, the community tends to neglect disabled individuals within the marriage systems. As a result, it is considered as shameful to propose or select disabled individuals, particularly disabled

women. Leaving aside the question of marriage, having sexual intercourse with a disabled individual is shameful within the community. It is considered as disability may be transmitted from disabled father/mother to a newborn child, and hence, it is generally believed that selecting disabled persons for marriage is risky. Therefore, most of nondisabled individuals do not prefer to marry a female with disability. Thus, the discrimination acts from marriage setting is widely affected disabled women rather than disabled men.

In the process of mate selection, informants indicated that, disabled women do not usually have the chance to get engaged. For instance, if two partners are agreeing to get in marriage, their families would cancel their marriage. There are different cases in relation to the rejection of disabled women from mate selection. The local people usually believe that selecting disabled women for marriage is increasing the burden of the family. Besides, marrying disabled woman forced the husband to wasting his energy inside home and outside home. In line with the exclusion of disabled women from marriage, informants stated the following assumption:

If two girls live in the same house hold and the younger one is able bodied and the elder one is disabled, an able bodied girl would be selected for marriage whereas, the disabled one would not be selected. Therefore, disabled women are isolated from mate selection at all, particularly those who have visual and hearing impairment.

The other challenging factor in relation to mate selection is related with economic strength. In the study area, when somebody (this is for men) is ready to get engaged, he should be strong enough economically because economic strength is one criterion to get wife. Even though this is the case, in the study area, large numbers of disabled persons are leading their life depending on their family. That is, they do not have their own income source, and they do not generate income as well. And hence, they are usually dependent on others. The consequence of this problem is highly denied disabled people from the fundamental unit of society which is called marriage.

### 5.2.2 Establish Family and Long Live Relationship

As I have discussed in the above sections, disabled individuals who live in the study area have serious difficulties in the process of mate selection. Due to this situation, most disabled individuals lead their life without establishing a lawful family (they do not establish a family according to customary follows). They often remain with their parents throughout their life time. In fact, the local people believe that marriage has a great significance to get beneficial from the collaboration of husband and wife, to regulate the intercourse, between the sexes and multiply, preserve and developed species. That is, marriage has a benefit to support each other in the house hold, on the farming activities and on other community setting sphere. Nonetheless, persons with disabilities are not properly benefiting from such advantages. In the local culture, it had been difficult for disabled individuals to conclude marriage alliance with able bodied person and form a family and start common husband and wife relationship. Such problems are highly manifested on the life of disabled women as compared to men in the study area. Along with this condition disabled persons who are not engaged in marriage loses social, cultural privileges and missed proper motherhood and fatherhood status.

Besides, according to Oromo culture in general and Bacho in particular, starting sex before marriage is prohibited. However, because of the aforementioned challenges persons with disabilities would usually have informal sexual relationship with opposite sexes. Particularly, disabled women who are lived with their family are forced into informal sex with their relatives and family's servant *Gabaree* or *Hoojeeta* (lit. labor of the family). Consequently, they may became pregnant and give birth without marriage. In responses, both the disabled women and a newborn child are mistreated, marginalized, and ignored by their parents and siblings at home. Hence, children who being raised outside of intact marriage could be made prejudicial, socially discriminated and be engaged in economic hardship.

Concerning on establish of family and long live in marriage a disabled woman who lived in Tefki rural Keble with her parents reports as follows:

Marrying females with disability strictly forbidden because community believes that female with disabilities understood as

sick persons, useless persons, unproductive persons and burden to the family. Their disability could be transmitted in to the new born child. So, they are side lined from mate selection and excluded them from forming formal family. Consequently, most of disabled women including me live without formal marriage but had children. In line with this, females with disabilities those who are having children without marriage are socially isolated and neglected. For instance, I have three daughters and all of them born without legal marriage and they grew up without the supports of their father. They are isolated by the community and as well as by their relatives. They are neglected and mistreated by their grand parents and siblings at home. Commonly, the society and the relatives gave a special nick name to them call by, the local term *Diqaala* (lit. bastard).

From the above informant's speech persons with disabilities especially females are confronted with socio cultural barriers related with establishing a family and live with formal family. Many disabled women could not make formal marriage with able bodied males. They do not establish a formal family based on the local culture and procreated children. In line with this, the local people discriminated, prejudiced, oppressed, and abused the children and disabled women. Additionally, the disabled woman and her child would be challenged by economic hard ship.

### **5.3 Exclusion on Economic Sphere**

In the earlier sub section, I have discussed the indicators of disability exclusion on social integrations. In this section, I will discuss about economic exclusion of disability, especially by focusing on distribution of resource, utilization of farming land, having private property, and employment opportunities of disabled people. Concerning the economic indicators of exclusion, disability group is the most excluded group. They are marginalized and sideline from the benefit of economic advantage. An interviewer and group of discussant define that disability's income is so inadequate as to prevent them from having a good enough standard of living. They do not have equal benefits over environmental resources and utilizing the local resources with bodied one. Therefore, in the following sub section I will discuss each indicators of economic exclusion among the study area.

### **5.3.1 Utilization of Farming Land**

As already mentioned in chapter three above, the major economic activities of the study area is agriculture. Land has a special place in the socioeconomic life of the community and it is the bases of their livelihood. As the informant of Sebeta Hawass district's social affairs worker sates, land has a lion share for each household farmer. Two hectares of land is distributed for each house hold (20000m<sup>2</sup>) in an average and the local people are ploughing it for subsistence and market purpose. Due to increasing rate of population, the fragmentation of farming land has also increased in the study area.

Having said the above, focus group discussant and the interviewee of the study point out that usually persons with disabilities in Sebeta Hawass district are in high risk concerning the utilize of farming land efficiently and equitably. The conditions of their disabilities and a certain social factors have neglected them from agricultural activities. In fact, as I discussed in the preceding section, agricultural activities require physical ability and strength. In line with weak participation on farming activities moreover; the disabled people excluded from direct utilization of their farming land. Additionally, they are sidelined from adequate requirement for farming activities like fertilizers, improved seeds, advanced farming equipment, different farming chemicals like pesticide and herbicide. The united nation convention on the right of person with disabilities facilitating accessible opportunities in all sorts is ratified by Ethiopian government. However, disabled individuals are lead hardship condition of life in related with the utilization of resources like farming land.

As the data from field observation in the rural Keble of Sebeta Hwass district indicates, persons with disabilities are the most dependent, poor, homeless and live low standard life. The aforementioned adversity is the major factors to lead the deteriorated life in local area. Disabled informant who lives in Tefki rural Keble mentions the following suggestion:

Access to farming land is not the major problematic factor for disabled people. Because distributions of land is equally accessed with able bodied farmer. However, the big problem is on the utilization of farming land and adequate accessibility to perform farming activities equally with able bodied people. The needed requirements are the

major challenges for disabled land owners. In the local area disabled farmers are predominantly out of direct utilization of the land. a disabled informant in Tefki rural Keble discussed as follows:

Most disabled people including me rented it for the neighbors' farmer in cash (*Waalagadii*) and also gave the land and then share the fruit (*Hirtaa*). Plough of the farming land does not easily perform by disabled people. Consequently, the process of renting land for other is forced disabled people to become economically poor. For instance, my older son started farming but due to my economic weakness he does not work on my own farming land because I have only one ox. Currently, he works as a laborer in the neighbors farming land I hope after years he would be work on my own farming land after I return the farming land from neighbor farmers.”

From the above speech and discussion of other informants I found out that accessibility of farming land is not a serious problem among the study area. The major problem for the local disabled people is associated with utilization of farming land. Persons with disabilities are neglected, and sidelined from the direct utilization of farming land. Related with the exclusion of utilize farming land consequently, in the local area persons with disabilities are secondary beneficiaries from their farming land. Whereas, the farmers who rented the farming land is more beneficiary.

Therefore,access to farming land is not the major problematic factor for disabled people. Because distributions of land is equally accessed with able bodied farmer. However, the big problem is on the utilization of farming land and adequate accessibility to perform farming activities equally with able bodied people. The needed requirements are the major challenges for disabled land owners. Due to this reason disabled farmers are predominantly out of direct utilization of the land.

### **5.3.2 Employment Opportunity and Disability**

The international labor organization (ILO) is widely working on creating employment opportunity and comfort job access for disabled individuals. However, environmental and social barriers are obstacles for well implementation of ILO laws and policies (ILO, 2013: 4). In this section, I will discuss about employment opportunities for people with disabilities in the study area. As I have discussed in the previous chapter, due to a wrong



perception, some governmental and nongovernmental organization are exclude and neglect disabled individuals from economic welfare and employment opportunities. These kinds of exclusion are characterized as institutional exclusion. Hence, persons with disabilities are often unemployed and underemployed due to high level of institutional exclusion from equal access of job opportunities with able bodied people.

With regard to employment opportunities focused group discussants mention that lack of job opportunities are the major problem for disabled people. Employing disabled individual is not well practice both in governmental organizations and in a various nongovernmental organizations. In the local area, various private organizations open job opportunities for unemployed people. However, employment of people with disabilities, in those organizations is very minimal. That is partly because; the owners and the administrators of those organizations believe that their job will be hampered if they employ disabled individuals. In particular, they concluded that, person with a disability cannot work on positions that require physical ability and performance. Commonly, the various industries which are found in the district employed only physically able bodied people in every department even which are suitable for disabled individuals. In addition, they think that disabled people may cause of problematic situation for others worker in order to achieve their task properly. Furthermore, in governmental and nongovernmental organizations the staff member of the company and office perceived that working with disabled people entails some risks. They generalize that the atmosphere of work place do not appropriate for disabled individuals. Due to, a conception they sidelined disabled persons rather create accessible work environment for all impaired individuals.

Thus, from the focused group discussants' discussion and the interviews report, I found out that the marginalization and exclusion of persons with disabilities from employment opportunities is widely prevail at higher degree as an economic indicator. These facts showed that, institutional exclusion is the major obstacle for persons with disabilities to be access to employment opportunities. Truly speaking, lack of inclusion is more than a loss of employment opportunity; rather, missing job opportunities is also associated with increased of economic, cultural, and social constraint of disabled people.

### 5.3.4 Establish Private Property

Constitution of The Federal Democratic Republic of Ethiopia article 40/1 claimed that, every Ethiopian citizen has the right to the ownership of private property. The private properties may include fixed and unfixed property. However, in the local area there are many structural and practical obstacles for persons with disabilities to having private property. Unlike with able bodied people, disabled people's capability to own a private property is difficult. There is clear and serious uncertainty among the group of disability on this regard. Various cultural, environmental and social difficulties prevail to challenge disabled people to gain their own private property. In the response to having private property from field work observation, I found out that most of disabled people are leading their life in hard conditions. Fulfilling of basic necessities like food, cloth, and shelter is a serious problem. They are sustaining their basic necessity depending on their family and relatives. They are leading their life in low standard quality of life.

Due to uncertainty of the environmental, social and cultural adversity, the majority of disabled people are excluded from establishing of private property similarly with other able bodied people. A restricted access to job opportunities and poor utilization of farming land are prohibited them from owning private property. Hence, in the local area the opportunities of disabled people to having private property are very limited.

An environmental resident in the local area have not appropriate requirements for the life of disabled individuals. Likewise, some of the disabled people are in a serious problem, lack of an adequate shelter to live in, lack of having enough clothes, and they are in food insecurity. Through my filed work, I observed that many disabled individuals live in low standards quality of house, which is called *Mana Ciitta* (lit. hut). The condition of the hut has low standards of quality. Its' roof is passing sunlight and during summer season it simply rained inside the house. Moreover, I found that old age disabled individuals who have no shelter live dependently with their family and relatives.

In the local area, there are a significance differences between disable person and nondisabled people regarding to possessing private property. For nondisabled individuals establishing of private property is easily accessible. Owing private property of domestic animals includes ox, cow, horse, mule, donkey, sheep and goat is limited. However, some

of them have maintained animals like sheep, goat and hen in the minimum amount. The cause to maintain these types of animals is because they did not challenge them to keeping and provided their consumptions. Specially, possession of hen is the most accessible in their life and they used it as quick money.

As I mention in the above paragraphs sideline of disabled people from economic benefit has forced them to live without personal asset. Marginalization and exclusion situation is the major factors for lack of possessing personal property and determine them to lead underdevelopment life. Without having personal property they could not fulfill necessary needs for their life. Therefore, with regard to losing the right of possessing private property they should live low quality life. Hence, the consequence of such neglect implies to further interconnected problems on the life of people with disability.

#### **5.4 Exclusion on Education**

This section focuses on the indicator of exclusion of disabled child from education opportunities. In the local area several children with disabilities are out of school. They have low chance to attend schools than normal children do. The focused group discussants mention that parents are not very keen to help their disabled child to send them to school. Majority of parents saw the purpose of educating a disabled child considered as a waste of property. A few of disabled Childs' parents send their child to school. Due to wrong understanding, the disable's family keeps in the home secretly rather sending to school. This indicates that disabled children in the study area are highly excluded and mistreated in homestead.

In the field work observation, I mate with physical disability girl who live in Tefki rural Keble. She did not go to school in her life like her equals' teenagers and her siblings. She had 6 brothers and 7 sisters. All her brothers and sisters have been to school. Her three brothers and two sisters are college graduates but she left at home. She mentions that the reason why she left from school lonely. In most cases parents are afraid send her to school because, they fear that society's stigma and discrimination. In connection with these an officers of a social affairs of the district mention the following suggestion as follows:

In one household child without disability and child with disability are not equally get education opportunity. Some time we do home to home survey through different rural Kebles. Surprisingly, children with disability who are greater than 15 and 16 year are secretly kept at home. But, other able bodied children are in school. For instance, when we are surveyed in Hiroo, Borro, Kallch, DibeeBakanii, MagnooQantollo and WaalenaHeekha rural Kebles we found out a lot children who are kept secretly at home without education access. Whereas, others able bodied children are in school. Even, we found out those disabled children in the name of aid support then disabled's' parent told to us they have disabled child in their home.

In time, it becomes clear that based on culturally bound, values and beliefs the local community experienced stigmatization and sidelined disabled children from school. Likewise, it is obvious that the practice of stigmatization and sidelined practice is psychologically devastating to those disabled children who are kept secretly at home. Children with disabilities are also supposed by the local members as those who cannot be educated, trainable and cannot equally participate actively with able bodied children. Hence, among the local people, discrimination of disabled children from access to education is commonly experienced. Thus, it is so much serious problem and obstacle towards the development of effective capacity, ability, skill, and interact with their environments.

## **CHAPTER SIX**

### **6 Accessibility and Challenges**

Ethiopia has signed the conventions on the personal right of disabilities. The CRPD contains rights of disabled persons in terms of education, employment, health care, accessibility, non-discrimination in political participation. The purpose of the Convention is ‘to promote, protect and ensure the full and equal enjoyment of all human rights and fundamental freedoms by all persons with disabilities, and to promote respect for their inherent dignity’ (Article 1). Again by ratification of the CRPD, State Parties promise to ‘undertake all possible measures to ensure and promote the full realization of all human rights’ for disabled persons (Article 4), and to ‘take all appropriate steps to ensure non-discrimination’ (Article 5). However, in our country the above mentioned ratified convention is not wisely practiced on the ground, rather it puts only on the white paper.

Therefore, in the subsequent section, I try to discuss the natural relief structure and manmade amenities designs and their challenges for persons with disabilities. Both accessibility and challenges are viewed in terms of natural relief structure and amenity design which include river, up and down land scape, swampy area as well as road, bridge and big public service buildings, schooling and educational aid inputs, health facilities and information availabilities, respectively.

#### **6.1 Environment**

This section deals with environmental features and its challenges on people with disability as the sources of information portrayed, people with disabilities have been facing various challenges due to environmental features and related barriers. These barriers are interrelated and created set of challenges that limit disabled people not only form important opportunities but also in achieving their overall objectives.

As it is indicated earlier by the informants of the study and in the focused group discussion, environmental features, particularly the ups and down nature of the relief structure is one of the challenges in the study area. It is the main barrier for mobility in particular to those who have visual impairment and motor impairment. Most of these

kinds of people face challenges not only for simply mobility but also severely affect their livelihood. The natural physical environment which are some geographical features such as uplifting, gorge and of drainage channel for water have also limited the mobility of disabled people with physical and visuals impairment. Constructions of different infrastructure like road, bridges and even school and building constructions around the public service are another second challenging factor by manmade calamity.

The aforementioned facts have disclosed disabled individuals from different socio economic, political and cultural participation. Concerning about this phenomenon, one of my informants in Tefki rural *Ganda* noted the following evidence related with his life and challenging factors:

I am a 17 years old residence of Tefekki rural village and living with physical impairment. However, in the village, life is very sever for me to live being physically impaired, it is very difficult to move from place to place. Since our village is somewhat barriers; not only for those impaired people like me but also it is a challenge for those who are not. Due to this reason, I injured different times when I went school and lastly I dropped it. If you see the village in the rainy season, oh my God! It is very muddy and no room for people to move anywhere like me... of course God knows... but... when it is? I don't now.....

Concerning man made factors especially, the designs of amenities of the roads, bridges and public service buildings have no room or never attention is given for people with physical and visual impairment. The roads have no out lets and in lets, the bridges are open-ended in their curvature and doesn't protect passenger across it. Most buildings where public service centers have resided are with no consideration for disabled individuals particularly, those motor and visual impairment and guide wall benches or even no gets for wheel chair.

In the study area, disabled people specifically who are using wheel chair faced with the barriers during the rainy season. The problem in rainy seasons was found out to be falling due to slippery places and wheels getting trapped in the holes in most of the streets of rural villages as well as local towns. Commonly, the problems of street environment in the rural and rural towns are often strewn with hurdles and pose problem to all motor and visual disability.

The discussants and disabled informants expressed that in fact mobility with no manmade or natural barrier is an important phenomenon to realize one's own day to day activity and lead lives moving from place to place without hindrance. Of course, its merit doesn't merely belong to the impaired, but also to those not impaired.

Its effect, however, is more severe on the former than the latter. If the built environment is not accessible for disabled persons, it should be challenged by the constructed infrastructure. Concerning challenges and opportunities of access and mobility in Sebeta Hawass district particularly, visually and motor impaired respondents reported that an accessibility of mobility in the district street is an impediment for persons with disability. What makes the problem more severe today in the village and around, is the contemporary road and big building activities in rural town (like Sebeta, Awash and Tefki ) where one can find construction materials like stone, sand, metal tools and soil dumped on the street. Digging roads in the name of development left without reconstructing it in suitable manner. For instance, Ethiopian telecommunication, Ethiopian water irrigation and energy as well as Ethiopian electric power corporation are among them. My field result showed that this challenging factor is widely existed in Sebeta town. In the process, this leads many of impaired even unimpaired people to be injured and some drunken men to broken-down falling inside the hole.

## **6.2 Education**

The 2006 UN Convention on the Rights of Persons with Disabilities focused on Inclusive education for all is ratified by the Ethiopian government which allows education access for all without any discrimination and marginalization. On the convention, particularly, article 24 clearly states on the rights of disabled children as follows:

1. States Parties recognize the right of persons with disabilities to education. With a view to realizing this right without discrimination and on the basis of equal opportunity, States Parties shall ensure an inclusive education system at all levels and lifelong learning.
2. States Parties shall ensure that persons with disabilities are not excluded from the general education system on the basis of disability... can access an inclusive, quality... education on an equal basis with others.

3. Persons with disabilities receive the support required, within the general education system, to facilitate their effective education.
4. In order to help ensure the realization of this right, States Parties shall take appropriate measures to employ teachers, including teachers with disabilities, who are qualified in sign language and/or Braille, and to train professionals and staff who work at all levels of education.
5. States Parties shall ensure that persons with disabilities are able to access general tertiary education, vocational training, adult education and lifelong learning without discrimination and on an equal basis with others.

However, it remains impractical due to reckless implementation and different obstacles. Segregation of disabled people from education accessibility is widely persisted in Ethiopia especially, in Sebeta Awass district in particular. This is due to the challenging factors which include inaccessible school environment, scarce of teaching aids in the school such as different supportive materials like book, stationeries, adequate classroom, school desks, toilet, getaways and the well trained teachers.

Therefore, with regard to the discussion of focused group discussants and informants of the study, each type of disabled child has a unique set of challenges in relation to accessibility of education service. Inclusive education access for disabled individuals and going the nearest school with other able bodied children is highly problematic. The field results showed that the fact that many disabled children were left out from accessible education services except few of them attended local primary schools. Most visual, hearing, motor and intellectual disabled individuals sidelined from local primary schools.

### **6.2.1 Well Trained Teachers**

Children with disabilities who had gotten the chance of schooling need the support of their teachers in school both in classroom and outside the classroom. However, it is usually difficult to find their help due to the weak relationships they have with disabled children. The respondents of the study mentioned that the teachers have no patience for a joint problem resolution with disabled children and sharing their difficulties. In the local primary school, almost the role of the teachers is not in line with solving the problems of impaired students in terms of their skills, knowledge, understanding, interest and abilities



of disabled children. Teachers' interaction with disabled children in the classroom is informal since there is a big communication and understanding gap between them. When they teach in the classroom, they are unprepared and intimidated in the process of surfing children with disabilities.

As the parents of disabled children and disabled students mentioned that some school teachers are not interactive with disabled students in the teaching learning activities, and they are also inactive to support and solve their problems. They have stereotype and negative attitude towards students with disabilities. Usually, they use derogatory terms in communicative language which are not allowed to use in communicative words such as *duda, balla, shiba, gobaxx, naaffa*. This clearly shows that the teachers' interaction with disabled children is characterized as unfair when it's compared to their interactions with able bodied students. Commonly, most teachers believe that disabled students do their learning activities without the support of their teachers, and they do not compromise their interests and abilities. However, many disabled students are in need of more teachers' assistance than those who are not impaired. Hence, due to risky interactions of teachers and disabled students, disabled students do not show interests for education, rather they are irritated and bored.

In addition to this, my field results showed that there are also challenges in integrating regular education and special need education for disabled students. Giving inclusive education for disabled students needed the prerequisite of well-trained school teachers. But, absence of trained teachers in special need education is one among the chronic problems in the local primary schools. This problem is directly linked with lack of well implementations on inclusive education. Most elementary school teachers are not trained on special need education. Accordingly, special need education develops teachers' skill, on how to link with disabled students inside and outside the classrooms. It helps them to establish a good relation when children with disabilities are included in regular class and getting the chance of inclusive education. Meanwhile, the absence of special need education' training and the absence of a good relation among disabled students and teachers often look like unrehearsed and dispassion. Due to these challenging factors, the majority of disabled students dropped out from school and leftovers in their home.

### **6.2.2School**

Provides regular schools with inclusive education are the most effective means of combating discriminatory attitudes, creating welcoming communities, building an inclusive society and achieving education for all Gebre (2013:8). The Salamanca Statement and Framework for Action on Special Needs Education directly and clearly mentions that schools should accommodate all children and youths regardless of their physical, intellectual, social, emotional, linguistic or other conditions (UNESCO 1994) in Gebre (2013:8). In the present day, a number of schools are existed in the local area opting to provide optimal learning environment for disabled students, but couldn't successfully achieved. According to the informant's suggestions, the accessibility of school is the major challenges in terms of distance, ramps and other barriers. Due to inaccessible school environment, the vast majority of children with disabilities living in rural areas are excluded from educational services.

According to the government officials of Sebeta Hawass district, enhancing the qualities of the primary schools is the major problem in favor for disabled students. The problem is associated with shortage of class rooms, school facilities and the relief structure of the school compound. Such barriers posed by stairs, doorways, toilets, water faucets, classroom desks and other architectural facilities in the school. Hence, the environmental conditions of the school is highly obstructs disabled students and enforce to repeat in the same class level, and some others to drop out being in accessible to school services.

In addition to the problem of public schools, informants from disabled students discussed the problem of special need school center in the study area. According to their discussion, special need school center can be found only in Sebeta town which provides services only for visually impaired children. The other disability groups such as hearing impaired, physical impaired and intellectual disability did not access to special need school center and get adequate educational services. Besides this, due to budget deficit, Sebeta Blind School received new entry blind students in a form of quota which is not accessible for all disabled individuals who are found in the local area and need the special need school services. Hence, many of visually impaired children are left out from the chance of getting special need school center, while few of them go to special schools. From this, it is

possible to conclude that special need education school centers are only accessible for a few disabled individuals in the study area. Most of disabled children those who are physically impaired, hearing impaired and learning disabilities are absent from regular school as well as special school. Particularly, children with learning disabilities are widely excluded from inclusion of education. The quality of schooling and social support for disabled children has fallen and very less in the local area.

Regarding to the informant's discussion, the accessibilities of school environment, therefore not just accessible and local primary schools have been built without any consideration for students with disability. In line with the above notion, a disabled informant who lived in Sebeta Awass stated it as follows:

I started school by chance. By then, when I went to hospital, a doctor asked me, are you attending school? I said, "no." Then he asked my family. 'Why you did not send this guy in school?' They responded him, 'Can blind attend regular school just like other able bodied children?' Because, no school was presented for blind in our village, due to this, they kept me in home and I was serving in domestic work rather starting school.' But, a doctor advised them and I started school when I was 10 years. Now, I am a grade three student. I dropout three times when I was in local public school, because no proper inclusive education service existed in the local primary schools. With regard to this situation, I failed to receive what I need from local school.

From this, one can understand that how the local primary school has a significant problem related to fulfilling the necessary services for disabled students. In the study area, challenges of special school center for disabled people is clearly seen. Moreover, special need school centers are mostly concentrated on urban areas. However, not all children with disabilities have been benefiting in the same way. Parents who are well in their economy used to send their disabled children to special need education schools in urban areas, where as a disabled children whose families are not well in their economy, unable to access to special need school center because of the high cost for school fee, rent, accommodation and transport tuition.

### **6.2.3 Teaching Material and Other Devices Accessibility**

In the study area, accessibilities to different teaching aid material for disabled students are the most chronic problem. This insufficiency or accessibility of teaching aid materials exist in school, homestead, and on the work places. Thus, this form of inaccessibility has been highly affecting everyday life of disabled students. Moreover, due to lack of technology and other supportive material make students with disabilities disadvantageous and lead their routine life a full of challenges. Besides, lack of assistive technology such as wheel chair, crunch, white cane, listening devices that include hearing aids Cochlear implants brail, brail books and audio materials are all in all not enough and accessible for students with disability people.

An informant who is working as social affair officer in Sebeta Hawass district mentioned that most disabled individuals (physically impaired and visually impaired)attending their schoolin difficult situations. The consequences of inaccessible to assistive materials have enforced disabled people to dropout school and to be far from educational benefits. Besides, the other problem in fulfilling assistive materials and others supportive resources are the insufficient participation of governmental and non-governmental organization. Any ways, the officers in Sebeta further stated that as the bureau of social affairs is trying to fix the problem. Related with lack of assistive material technology, a physical disabled individual who lived in Tefki rural area stated as follows:

Lack of assistive material technology has the major impacts to move from home to school. So, now I am going to give up my education due to my mobility barriers, because my journey from home to school is not incorporated with me and I have no alternative access. My family's home is far from local primary school, besides, the road is very difficult which is slip and muddy during the rainy season, and there is the existence of stream between my home and local school. Hence, this is challenging to cross the wooden bridge without the support of assistive technology materials like wheelchair or crunch.

This clearly indicates that most students with disabilities experienced mobility hardship due to lack of assistive technology and materials. Even though the hard ships laid on the shoulder of the local government in trying to answer resources for disabled people,

financial funding remains major problem to effectively fulfill the necessary assistive materials.

### **6.3 Access to Health Services**

Health extension workers of the districts mentioned that the Ethiopian government focuses on preventing and reducing disability by providing and designed health policy which is offering vaccines, nutrition and adequate intake of vitamins. It is obvious believed that disabled people need sufficient health services more than other able bodied people. Moreover, government policy and health program promised to ensure people with disabilities to have more health and health related service than other able bodied people. This service includes: specific forms of intervention, providing drugs, medical devices and facilitating equal opportunity for people with disabilities. Of course, all disabled people should access services timely without any restriction with direct and reflective implications on their health and wellbeing. However, those disabled people who lived in the local area acquired limited health care services. They are excluded from general health services, slower deliveries of health care and restricted facilities.

From field work observation and discussion with health extension informants, I found out diverse cases of childhood disability caused by lack of vaccinations, malnutrition and micronutrient deficiencies. In addition, most local people including parents of the disabilities did not have the proper knowledge that it is caused by infectious disease and lack of malnutrition (vitamin, iodine and Iron deficiency), vaccines and micronutrient. They believe that having disabled child is extremely associated with misfortunes and the back pay of their sinful acts and their grandparents. Because of such misunderstanding, parents were forced to keep their children secretly at home and attended religious institution rather they brought their children to health institute. In addition to this, health extension workers also mentioned that during home to home vaccines, most of physically, visually, intellectually and hearing impaired children are ignored or neglected compared with able bodied children.

In addition to a childhood disability, the health extension workers indicated that there is also disability on adult women induced due to the failure of general health care services. It is indicated that most disabled women in the local community have weak participation

on specific interventions, improving health care needs, rehabilitation, preventing and controlling programs. Because of certain factors, they are excluded from rehabilitative services, health care training program and supportive social services. The major causes of exclusion are unwillingness of disabled women due to fearing of community's endorsement. The local people perceived that disabled women could not include in the programs of family planning and using of contraceptive and other related services. This happens because they think that disabled people could not get in marriage and give birth, even sex experience for disabled people particularly, for disabled women is very shameful. Therefore, they are excluding from governmental benefits such as: vaccination program, family planning, awareness creations on HIV/AIDS, and STDs, family planning training, and child and pregnant mother's nutrition training. However, enhancing health care for people with disabilities is clearly required and it has positive impacts in their life.

Commonly, young disabled individuals share common characteristics with other non-disabled individuals. They have identical personal interest, psychological feeling and biological maturities. However, the majority of young disabled men and women, in the societies, are not allowed to receive general health care services linked with the maturities of biological feeling and related outcome. Consequently, missing of reproductive information, adolescent intervention of information and relevant information on enter puberty is forcing young disabled people to sexual violence and interrelated problems like exposing them into unwanted pregnancy and give unwanted birth. So, it is a serious problematic situation for the most adolescents and young adults for their present and future life.

Additionally, lack of access to general health care services and facilities is widely significant barrier among the study area. Suitable facilities are including restorative technologies, necessary medications drug, suitable health care environment (clink, health station, and pharmacy) as well as effectiveness of rehabilitative centers are extensively limited. In the local area, there are min health care centers (*kellaaa fayaa*) are existed in each peasant association and health care institution are found in Tefki rural Town, Melka Awash rural town, and Sebeta Town, but effective services of those health care centers do not wisely provide. Sebeta Town Health Station to some extent gives the necessary

services for disabled people. Comparatively, rehabilitative services for disabled people are tend to be concentrated in urban areas and are excessively expensive. It is evident that the vast majority of young disabled women live in rural area are left out from advocacy of social services and health care services. Due to weak health care services, the recipient groups of people are referred into urban hospital when they need critical health services. With regard to recommendation to urban based services, most of the recipients become boozers to move urban and they left out the services rather they move urban and received the necessary services. The major reason is related with financial problem and the familiarity of urban center.

#### **6.4 Information Accessibility**

In this section, I will discuss about disability and information accessibility for disabled people and for other non-disabled people. Addressing of adequate and relevant information about disability for the local people is restricted. So, the local people have misjudged the information about disability rather knowing the reality of disability. They wrongly understand and treat disabled people and deprive disabled people's rights. The existed information in the local area is related with misfortune, cursed and sinful. In their day to day life, they disseminated their wrong perceptions about persons with disabilities. The concerned bodies whether government institution, or other nongovernmental institution could not promote the necessary information on disability. Due to this limitation, the relevant information is not disseminated for the concerned group, disabled and others.

Even, the disabled informants and other local people did not know the declaration of the rights of disability as human right declaration. This declaration is acknowledging the value of all without any discrimination and ensured the rights for all individuals to be developed and express their talent. Additionally, the Ethiopian government policies, law and standard on disabilities is only written on the paper although it is not practically done on the ground and not clearly promoted for everyone. The responsible group of institution did not even try to promote the ratified declaration on the rights of disability at international and the national levels.

As it is clearly indicated in the above issues, missing of addressing relevant information about the rights of disability is brought the negative impacts on disabled people. Due to ignorance of disability's reality, several groups of non-disabled individuals excluded and ignored disabled people from different opportunities. They are mostly isolated from education, health, social, economic and cultural settings. However, the ratified rights of disability are providing equal opportunities and often against discrimination of disabled people. But addressing and promoting information on these rights for the society in various programs and formats is too limited and existed only on the white paper without reaching the community and adequately implemented.

As a result, the local people are unfamiliar with disability rights and they assembled other barriers which are making more difficulties to disabled people. Particularly, for the vast majority of people with disabilities who lived in the rural areas access to basic information is limited and worth mentioning, rather it created additional problems. For instance, civil code (Constitution of the Federal Democratic Republic of Ethiopia, adopted in 1995; an Article 41(5)) which is constitutionalized the rights of disabled people is not well known by all informants and the local people. Thus, the local people and even disabled persons did not know about UN convention of disabled person's right which is ratified by the Ethiopian government's proclamation on the rights and opportunities of disabled persons. A disabled informant who was interviewed in Sebeta town said about information and its accessibility for disabled public meeting on disability issues is only held by Sebeta Awass district social affairs on the disability day.

In line with this fact, a focused group discussant and interviewer of the study stated the major reason of the lacking of accessible information for the local people. They stated that in the local area there is the existence of restriction and the shortage of means of dissemination and publicizing information on disability. The resources of publicizing necessary information are not sufficiently accessible for disabled people and for all people, too. It is not provided in the alternative formats due to environmental, financial constraints and lack of stakeholders. For instance, media representation and public based advocacy work is very limited in the local districts. Some advocacy works are held in the local area, for instance, HIV/AIDS advocacy work, family planning program, child based



advocacy are commonly prepared; nonetheless, disability based advocacy sets are missed at all in the local area. Besides, certain kind of media like broadcasting association (radio, television) and means of printing media did not actively transmit and providing relevant information resources on the rights and opportunities, adaptive mechanisms of the barriers, and relevant stories for disabled people.

## **6.5 Stakeholder Accessibility**

In the present day, a number of NGOs and governmental organization are trying to ensure the inclusion of disability. It is working to implement the United Nation Conventions on the Rights of Persons with Disabilities and the Ethiopian government policy, law, programs and activities. Those stakeholders seek to achieve the overall objective, improved opportunities for people with disabilities, coordinate efforts to improve and enabling environment and providing equal opportunities for the provision of necessary rehabilitation and support services for them. In fact, disability based stakeholder must be employed to ensure the overall objective and intermediate result, and sustainable development. However, Gebre et.al (2013:13) states that there are a number of charities and society agencies working on persons with disabilities. These agencies' concentration is distributed in the city, while it rarely operates in the regions and rural areas. Even in the regions, it appears that there are more NGOs operating in the regional capitals than in rural areas.

Similarly, according to the discussion of focused group discussants, lack of disability based stakeholder is the major barrier to improve the capacity and achieving the needs and objectives of disabled people. As Gebre et.al (2013:10) states that commonly, CSOs are working on persons with disabilities have been engaged in a number of disability based activities. That is enabling persons with disabilities to become productive citizen, providing support in educational and training services, providing means of livelihood and material support, providing health services and advocacy services. On the Contrary, the government officials of the district reported that disability based organizations are not existed constantly that are working on preventing different environmental and social barriers, reducing poverty and creating more inclusive opportunities and bring sustainable development among disability.

Thus, due to the nonexistence of disability based stakeholders, the majority of persons with disabilities faced infinite barriers. During my field work study, I found out that most disabled people are economically and socially vulnerable groups of the society. They are excluded from social, cultural and economic settings. They are also sidelined from the advantage of social and cultural settings. Due to these circumstances, they lead underdevelopment ways of life.

Commonly, disabled people, who are living in the local areas, extremely needed institutional supports. Therefore, the life conditions of disabled people need the intervention of disability based and other institutions in order to mitigating that vulnerability. The focused group discussants mentioned that a disability based stakeholders are playing key roles on disability issues which are focusing on preventing disability, improving rehabilitative services, focusing on advocacy works, and establishing supportive aids. Besides, it is providing access to special school, vocational services, inclusive credit services, skill training, appropriate assistive technology and health related services although disability based and other nongovernmental institutions are rarely involved in the local area to facilitate the above tasks.

In the local areas, some governmental stakeholders like government's credit association, small scale enterprise (IMX), youth based associations and the local district's social affairs are organized by the local government and engaged on organized youth and create job opportunities. These stakeholders are concerned on visions of government's plan and policy, and sustainable development for all by coordinating educations, skills and vocational trainings. They also arrange credit services and improved work opportunities for able bodied. Whereas, the role of those governmental stakeholders are fail to develop the general services for disability groups of people. Hence, disabled people suffered a lot by the combination of interrelated problems. Many of young people with disabilities stayed with their family without working any job, working assembling piece of works in the kitchen, but others are doing their income based on begging.

Furthermore, the study found out that the major reasons why disability based associations were not actively engaged among the district. According to the suggestion of social affair workers of the district, lack of promoting disabled people to government sectors is the

major reason for absence of stakeholders working on disability. Commonly, the local communities are not cooperative to register disabled people to government sectors. They hide their disabled child from health extension workers, social workers and from other governmental workers.

On contrary to the above circumstances, disability based organization need deep concern information on disability type and numbers of disabled people found in the local areas. Whereas, social affairs of the district did not have clear statistical information about disability based in terms of numbers, type of disability, and on the major barriers of disabilities found in the local community. With regarding to these, disabilities based and other institution could not attract to involve on the district. Therefore, the involvement of disability based stakeholders almost not worth promising in the local areas. Hence, the consequences of nonexistence of disability based stakeholders also brought additional burden for local government in terms of facilitating needs of disabled people.

## **6.7 Legal and Policy**

The federal democratic republic of Ethiopian government sign international convention on disability right. In addition in national level the government formulated certain policy, legal reference, Social Policy, the Charities and Societies Proclamation and the GTP (2010/11-2014/15) documents are make specific references to person with disabilities (Gebre, 2013:17).

As Gebre, (2013) states the 1991 constitution of the federal democratic republic Ethiopian government under article 41(5) provides that “The state shall, within available means, allocate resources to provide rehabilitation and assistance to the physically and mentally disabled, the aged and to children who are left without parents or guardians.” Moreover, Gebre discuss on article 25 which gives guarantees “the right of everyone to equality before the law, in which all human beings inhabiting the country’s territorial jurisdiction are entitled to an equal and effective protection of the law without any discrimination on the basis of race, sex, color, national origin, religion, language, political or other opinion, property, birth or other status. In general those policy, proclamation and right based legal reference recognized that the provision of social well fare services,

rehabilitative services and insure preventive programme. However, in the study area the aforementioned policy and legal review did not well implemented and very little was done to organize, coordinate and strength the vulnerable group. From field result I found out that the government, nongovernment, community and family do not gave much emphasis for persons with disabilities and they fail to implement the UN convention of right of disability and the national level of policy and legal instrument of disability. Along with this Gebre, (2013:21) point out that in Ethiopia the policy and legal instrument related to person with disability have both encouraging and discouraging aspects. As he mentions ratifying UN Convention on the Right of Persons with Disabilities and formulation of various policies, legal references, and try to addressed the needs and concerns disabled person is the positive parts. While, the existence of outdate and discriminatory legal provisions, lack of specific of certain policy, legal regimes absences mechanisms to enforce proper implementation of the existing provision and lack of unified and the comprehensive national legislation are the disadvantaged parts.

# CHAPTER SEVEN

## Resilience

This chapter depicts the story of resilience concerning on a disabled's experience intended to know more about his or her resilience and the success stories of disabled individuals. Therefore, it mainly focuses on the exposure of perturbation or external stress and the methods of traumatic fixing capacity to adopt. Besides, it also deals with the relationship between the variables of adversities' type, extent and context and looking the factors that determine individuals' resilience.

In this research, the respondents noted three major variables of coping mechanism of adversity. These three variables of coping adversities include family, social network with different institutions, and the third variable is positive peer pressure. These determinant factors have a great significance in the role of decreasing adversity risks and creating positive outlook on the life and success of disabled persons. Generally, speaking these factors of resilience are playing big role to reduce isolation of disabled children from inclusive services as well as maximize disabled children's communications skill and strength parent's child relationship.

The overall notion of resilience would have a great significance to mitigate sociocultural and economic vulnerability conditions and reduce the risk of adversities. Therefore, to address the resilience and adaptive mechanism of individuals, I employed interview method with some disabled informants, who become effective and cope with different challenges. In this regard, informants shared their experience on the coping mechanism of sociocultural adversities and determinant factor forced them to target their objective.

### 7.1 Factors of Resilience

Adversity comes in many forms, for instance, as a result of social, cultural and economic strife, individual acts of omission or commission, and many other causes. In line with this, most disabled children and adolescents are severely affected by these adverse circumstances. Even though this is the case, there are different mechanisms to cope with such adversities. The system is increase solution for the adversity at the expense of some efficiency and endurances. The mechanisms would usually be devised by different

groups. In this case, there are family supports, interventions of stakeholders that include various institutions and social support agencies and positive peer pressures. The supports and interventions made by different groups are playing a great role to mitigate the consequences of calamities.

### **7.1.1 Family**

According to informants, the role of family could play paramount role in relation to the coping ability of the disabled persons. This is because as compared to other groups family members have immediate contact with the disabled persons and could contribute to the psychological development of such individuals on how to adapt to adversities and finally become successful in their life. In line with this, some respondents of the research mention that open communication/discussion with all children, particularly with disabled child, could encourage them to communicate and interact with their environment with somewhat lesser difficulties., In addition, having a positive outlook towards their disabled children and positive relationship as well could encourage the disabled children to explore their capacity and express them without any fear.

From the experience of some families, I found out that caring a child with disability has a positive impact. Some of them told me they have established healthy interaction with their disabled children and gave more attention and enough time. The flexible approaches of interaction made child with disabilities be flexible and easily interact with community and environment. Along with this, when I compared, a child who has parent's support and positive interaction with the one who has less parental support and interaction, I found out visible differences. In addition, some disabled and other informants state that a disabled child who has harmonious and pleasant relationship at home would experience too less emotional stress, depression, anxiety, and mitigate passive behaviors inside home and outside home. As evidence, some disabled informants' families mitigate negative attitudes by promoting the strength of children with disabilities. In line with this, they add that empowering and disseminating the knowledge of disabled people can bring a unique achievement to their families and communities. On the contrary, maltreatment of disabled persons could increase stress and make them feel shame.

The level of family's incomes also determines the success of disabled individuals and creates a gap between individuals. It is common that a family who has sufficient income (who are economically strong farmers) obtains facilities and wisely cares a child with disabilities. On the contrary, those families who have insufficient income do not obtain adequate facilities for their disabled child. In relation to sufficient income resources, one of the hearing impaired individuals states the following points as follows:

I have hearing impairment. It happened when I was 6 years old. By then, I was living in the countryside with my family. After the accident, I have been taken to Addis Ababa to live with my aunt. I have stayed with her until I joined grade four. However, my relation with my aunt was not good while I reached grade four. This was followed by the death of my father because of an accident. Then, my mother took me back to the countryside considering my bad relationship with my aunt. After a year I continued my education in Addis Ababa traveling from Sebeta Town. At the time, a special school center for hearing impairment was not found in Sebeta town I finished elementary and secondary school. And also I completed preparatory class and joined in Addis Ababa University and graduated from the sign language department in 2014.

From the above speech, hearing impaired individuals do not have education access at their nearest residence. The special education schools centers are concentrated in the urban centers. In line with this circumstance, economically wealthy parents are usually sending their disabled child to urban centers and educate them. However, poor families often leave out of school and leave at home, which would lead to illiteracy and the failure of disabled children not to exploit their potential.

### **7 1.2 Social Network**

Similarly, to the role of family on the success of the disabled child disabled informants reported that the community services and social network are offering a strong foundation through facilitating a strong application on child. Also, they are the major determinant of resilience for disabled's problems. So, families' role in social network is one of the systems that could help disabled persons to cope with crises. Access to formal and informal social services and social networks of organization would usually help to develop self-esteem and facilitate conditions to foster diverse links. According to

informants, social services' network and disability based stakeholders are promoting and helping the inclusion of disabled persons into everyday lives. They identify and address physical and social accessibility for disabled individuals. They are powerful to advocate and promote safety of disabled child. A few of successful disabled informants report that creating network with different societal based institution like church, disability based organization and governmental institution are advantageous. These social network organizations are emphasizing on the duty of strengthening parent-children interaction, improving positive parenting attitude, developing healthy relationship of family and disabled child. Besides, some of them are rendering different supports to the disabled children including financial support. Hence, good experience of networking with social serviced institution and utilizing their services were advantageous and brought a significance change to disabled's life.

Some successful disabled individuals mention that the role of churches to overcoming the adversity is so good and opting to develop a daily relationship with local community and environmental condition. They point out that if any individuals establish healthy interaction with God and continuously visit churches, then, almighty God will eliminate their adversity and take care of them. In line with this they suggested that, disabled individuals should strengthen the interaction with God and internalize the sense of spirituality. For instance, different barriers may come from any direction like family's mistreatment, cultural shock, lack of social discrimination and marginalization, and economic crisis. Although every type of challenges will come out with the miracle of God. As they noted that increasing spiritual strength is, the coping mechanism of adversity. Therefore, the spiritual thinking gives the power of effective strength, and it used to manage every challenge that could happen. Accordingly, through faithfulness God will simply prevent their crisis whether it is social, cultural or economical. With regard to this thinking they need to become religious persons and stay with God.

In Sebeta Town, one of my informants mentions the advantage of institutional network from his past experience. He was rehearsing what has happened to him during his early age faced problem on his limb while he was riding horse. However, he was fortuitous because there was a religious based institution (locally called *hitsanaat ambaa*) near his



residence, which was helping children who were facing different problems. That is, he has got the chance to get support from the Protestant based religious institution. With the support of this religious institution, he pursued his elementary education. And this leads him to become successful in his life.

### **7.1.3 Peer Support**

Ayalew et.al(2009:30) states that most people want to have different relationship with others and thus choose friends who accept them and vice versa. Children like to be with their peers, and peers tend to influence each other's attitudes, interests, and actions. Peer influence could be positive or negative. Although some informants avoided association with peers due to perceived negative pressure, the majority reported to have benefited from healthy peer relationships. Peer pressure motivated some to succeed or encourage them to embrace appropriate social behavior. Self-esteem and peer pressure also play great role in order to achieve their objective and had succeeded. Some disabled individuals state based on their experiences that when they are facing different adversities and exhibited resilience. They explain that when sociocultural barriers made heart broke, they staying at home and spent their time on education by studying hard and used effectively their time. Informants noted that loving and caring relation of disabled individuals with their peer group bring a sense of belongingness and security. Additionally the role their peer friends and siblings as a crucial in forming their personality, and as the main sources of support and guidance. They are encouraging and motivating disabled individuals in school, at home and in village. The acts of encouragements and motivations remained vivid in the memories of many disabled individuals served as assistance. Some disabled individuals remembered that their peer friends and siblings loved, advised and guided them on how to get along with other able bodied and avoid fear to interact and promoting learning motivation in the class. An informant who was interviewed in Sebeta town mentions his experience related with the interaction of peer as follows:

Some of my peer friends in school have great contribution on my education. They have also helped me in forming friends and interact with the school community. I remembered that some of my friends scarified their interest for the sake of

including me in group game like football playing. Most of them except a few of them have positive thinking for me and they pulled me out of a very dangerous situation.

From the above speech one can understand that positive interaction with peer friends and siblings is helpful in directing, keeping them in the right line and motivating disabled individuals. The peer groups provide them what they needed and it is the determinant factor to achieving good results in education and life at all. Generally, speaking positive peer pressure displayed that the ability to thrive in adversity and it brought knowledge, experience and increased disabled individuals' self-esteem.

Accordingly, in the subsequent section I will state the two disabled informants' case accompanying with resilience and successes. The two informants' cases show that mechanism of coping adversity and indicate the experience of success in addition to the informants' results.

#### **7.1.4 Self esteem**

Many disabled individuals demonstrated competence in the critical adversity to understand threats around them and devise strategies to overcome those threats. Those who lived in risky sociocultural environments and physical challenges managed to avert the dangers by developing self-esteem. As the informants, there are various determinants that exist to develop the capability of self-esteem. These include family's contribution, different institutions' role in support of disabled individuals, and positive peer pressure. Each of the disabled individuals mentions their own determinant factors to develop self-esteem. Some disabled individuals who are successful note that the role of their family has a big contribution to the development of their self-esteem. The other states that a network with different institutions plays a big role in the capability of building self-esteem. Many of the disabled individuals mention that positive peer pressure has a great role in the development of self-esteem. Peer groups easily interact with each other and possess problem-solving skills that involve networking or mutual cooperation against the threats. An informant states his experience on how he developed self-confidence as follows:

At the time of primary school I was the member of mini media club. I joined in mine media club by the advices of my two able bodied friends. They highly forced me to join the club. Then I joined and participated by preparing different fascinating program with other able bodied students. My parts were disseminating weekly letter, news and sometimes song selection for student. In line with this I was collect good feedback from my class mate students. Along with this I really give deep thanks for those students who were encouraging, admiring and motivating me. The affluent contributions of peer group highly shape my personality. At this time I can freely talk with anybody and everywhere without shame and feeling of inferiority.

From the above speech and informants' point of view positive peer pressure has a big role to create self-confidence. They had to pursue different strategies to protect themselves and against each adversities. Caring of disable child at home and the early parental advice/instruction remained vivid in the memories of many children and served as guidance. It is promoting learning motivation and creates self-confidence of their disabled child. Additionally, spirituality seems to serve as an environment that fosters disabled individuals resilience to adversity. Many of the informants seemed to follow some kind of religious guidance and frequented places of worship, while others, including those who rarely visited religious places, mentioned God as the ultimate protector and opium of the adversity.

In line with the coping mechanism of risks an informant who I Interviewed in Sebeta town mentions his experiences as follows:

His name is Abebe Gutema (synod name) and 38 years old. His birth place is in Oromiya region south western Showa in Melka Awash area in the small village of Saggoo. Both his parents are alive in the rural Keble of Melka Awash at Saggoo peasant association engaged in farming activities. He has 3 sisters and 4 brothers 3 of his sisters just married and live in rural Keble of Awash and 2 of his brothers live with their parents; the disability is happened when he was kid. As he mentioned his parents did not know what the reason is made him disabled but linked his disability with unfortunate. At the currenttime he lives in Sebeta town with his beloved wife and two Children. He is orthodox religion follower. He graduated in the department of accounting from Oromiya

Civil Service College. Currently, he worked in one government institution in Sebeta town as an accountant.

Sociocultural challenges are the key determinants in terms of creating disadvantageous situation in the routine life of disabled people. With regard to this, persons with disability have low opportunities in the local area and they lead under development life. Accordingly, some of disabled people are response intense mechanism that facilitates easy and adequate life mode for the problem that had faced in the earlier time.

In related with this idea Mr. AG expressed that he had sorrow feeling because of cultural, social and environmental barriers. By then, due to cultural background of his families' he stayed at home secretly. His family perceived his disability as wage of curse and the neighborhoods' views about disability were shameful. He reported that his families are highly believed in a traditional religion (*Waaqeefanaa*). They were continuously visited *qaaluu* (traditional religious institution) rather they brought hospital to heal his disability. At that time the leaders of *qaluu* forecasted his life and told to his mother *"his disability is given from gods because his great grandfather damaged person's body and swear untruthfully. But, do not worried about him, his life is endless you will see what comes in his life even he would be change your life."* Until now, he was surprising by what *Abbaa Qaalu* said about him to his mother and he was expected prophesy which would not change into real. His mother had played the best role to curing him from disability. However; her role was not fruitful.

In line with his mobility barriers his families would not sent him school and he stayed for a long time without education access unlike other child. However, when he was 12 years old he went school with his sibling without the permeation of his parent and only he attended the class for two days. The journey of school is takes more than 4 hours to reach school. But, on the third day school administrator and others teachers were told to he should brought his parents if not he could not attend the class. By the time he became terrible he preferred quiet and miss the class rather he told what school administrator and his teacher told him. He was very frustrated by his disability he stayed at home and cry deeply. After a week later his elder brother brought a message from school administrator.

The school administrator talked with him about his and they needed to talk with their father.

After a week the older brother of his mother called *essuma* (lit. uncle) come to their home. They were talk too much about opportunities of his education with his father but his mother was hastate them and she was raise contradict idea. She was not welcomed the two guys' idea (his father and uncle) to move urban and starts school. His uncle and his fathers reached on the agreement and persuade his mother and decided to move to urban with his uncle and starts school at sebeta town in Mulgeta Gale Primary School.

As the informants, state that Sebeta town not welcomed him it was very difficult to integrated himself with school community, neighborhood and with his siblings (his uncle's children). Due to the cultural background the local community perceived disability as shameful and dishonest. Usually they have the mindset of disabled people are vulnerable and dependent. Hence, he faced with discrimination, neglected, and low expectation. Particularly, his peer groups did not include him in various games. Due to, this condition most of the time he excluded from other and he preferred being alone. As he mention he used loneliness as a golden chance to strikes those adversity and try to fix it. Again, only he focused on his education and he made himself busy by study hard and used his time effectively. In related to this mechanism he speeches the following idea as follows:

There is a time for everything. Again every calamity teaches you other new thing and that was good for the individuals who faced various calamities. However, these challenges by itself not good but your reaction to it may prove and then you have been learning from each difficulty.

In his discussion he believes that finds the coping mechanisms for each barrier is a mechanism crucial rather than gave up. The situation of each barrier thought him and forced him to learn hard. He started gives emphases on good opportunities for him and concentrated on better thing. Particularly, when he became mature he improved the solution and nevertheless, do not give up for any difficulties. He developed the impression of "I can rise above any crisis." Sometimes some people in charge him disability is the consequence of wrong doing of his ancestors. But, he didn't give

emphasis to that kind of wrong perception about disability rather he accepted the reality of disability and live with it. Surprisingly, when he became grew up significantly he reinforced his relationship with family, school community, and developed the habit of participation in community level and school clubs. For his success he acknowledged his parent and his uncle very well. According to his suggestion without the support of those fellow he could not be came like person. Those fellow groups play big role for his succession and creating a great endurance to cop up the challenging factors. They provided finical support, gave unlimited encouragement and established health relationship.

The second interviewer who shared his experience is visually impaired man who worked in nongovernment organization in Addis Ababa. This guy finished his school in Addis Ababa University in law school before 12 years go. He was born in Arsii Oromia Regional State in 1965. He became visually impaired when he was 5 or 6 years old child. Yet he did not know the clear cause of being visually impaired but his parent told him he was able bodied till the age of 5 years. When he was 10 years his parent sent him in the local primary school. But, in order to the suggestion of his teachers he joined Shashamane blinded school and he shifted to Sebeta blind School after 6 years and gets the chance of boarding school in Sebeta blind school. He point out that Sebeta boarding school had highest place in his life. After he joined Sebeta Blind School the acts of discriminations and isolations by nondisabled people was some extent mitigated. When he was in Shashamen regularly he visits his parent and then the local people looked him as a unique person this also irritated him.

In Sebetat blind school most of the students have the same impairment and school teachers were handling well also, the jointers and cafe workers had good interaction. At the time, the major problems were outside of school compound. But, the local people have better out looking about disabled people rather than the people of Arsi area. Sometime the local community perceivesvisually impaired individuals as tragic human being. Predominantly when blind went to market they treated differently and did not give similar services with others. In fact, being disabled has its own challenges. With regard to

several adversities situations he started to decrease the risks of adversity by offering different variables of coping and utilizing a number of determinants.

The more interesting experience in the school was the relationship with senior visually impaired students. They were the role model for those visually impaired individuals. In the current time those individuals are on the good position; for instance a great significant of his role model is well known in the protestant church. He often advised him and strengthened his faith, prayed to him and invited him to church and introduced him with many individuals. Again, when he faced economic difficulties he established outside assistance from church and provided income resources. With regard to this he improved believe in God and also, forced him positively response to crisis.

Besides, the strong relationship with religious institution (protestant church) was the best system to coping the crisis. The church was facilitated some innervations opportunities with some faith based nongovernmental organization. Those faiths based NGOs provided social services and facilitated social network for disabled people. This social network opened opportunities for people with disabilities to participate on the social activities, as well as developed self-esteem to eradicating the chronic adversity of fearing to interact with others. Also, those institutions are established access to health care services and the demands of health care services reduced health related adversity and improved welfare conditions for children live with disabilities.

# CHAPTER EIGHT

## Concluding Remarks and Recommendations

### 8.1 Concluding Remarks

Under this work efforts have been made to describe and analyze the conception of local people towards disability and challenges of persons with disabilities among inhabitants of Sebeta Hawass District. It mainly focused on the conception of local people towards disabled people; indicators of disability exclusion; challenges and accessibility in the local area as well as resilience and factors of coping with adversity. From field result in the study area, adversities which persons with densities are usually coming across largely related with social, cultural, economic, and environmental and the like. These barriers are interrelated and created set of challenges that limited disabled people from important opportunities and create the condition of exclusion act sidelined persons with disabilities from the social, cultural and political setting.

In this research, I have tried to deal with the notion of disability in three religion which includes traditional, orthodox and protestant religions. One thing which makes the three religions similar is that large number of adherents, in all of them, believes that disability is the divine punishment and persons with disabilities are carrying evil spirits and hence sinful. In the traditional religion, it is generally believed that the concept of curse and sin is associated with ancestral relatives past wrong doings. Believers believe that the current relatives are committed as sinful because their ancestors violated the law of God (*Seera Uumaa Cabsuu*) and the law of man (*Seera Namaa Cabsuu*). Consequently, born with disability and being a disabled after born is the wage of the aforementioned broken laws. Likewise, the Christians (orthodox and protestant religion) associated disability with an unfortunate happening. Through their preaching system they disseminated that disability is associated with the will of devil. Furthermore, they denied the reality of disability by propagating the idea of prophecies through preached. They used derogatory terms at preaching session the term like curing deaf (*duda/danqoro*), blind (*iwir*), will give healing, trust in god then you will be able bodied. The other cause of misconception is



related with various cultural elements of the society which include socialization system of child with disability, cultural practices and some environmental conditions.

Due to the aforementioned conception, the local people practices some discrimination acts on disabled individuals. The local people's discrimination acts are the major factors for the exclusion of disabled people from social, cultural, economic and political domain. Their participation in the community level like in *idir*, *dabo* and religious activities is very less when compared with other able bodied people. Get in marriage relationship for individuals live with disability particularly for disabled woman is a significant challenge. The condition of exclusion forced disabled women to further problematic situation. They lead their life without establishing formal family and starting sex with their relatives and family's servant.

In addition, in the local area, disabled people are facing shortage of accessibility and lack of equal opportunities. These include environmental, educational, health care, material, information accessibility as well as accessing disability based stakeholders and institutions. Such limitations of accessibility extremely affected the life of persons with disability. In relation with lack of well trained teacher, absence of sufficient school material, and absences of special school center in the local. Improve access and quality of health care services for person with disability is highly limited. such limited services include prevention services and medical care with regard to disability access to reproductive health care programs and family planning and HIV/AIDS services as well as the available rehabilitation.. Missing these services pushed these people to further problematic situation. Furthermore, some environmental conditions create barriers in the routine life of disabled individuals. These include manmade calamities and physical environment associated with feature of land scape like rivers, swamp, and topography of the land. The other environmental barriers related with manmade calamities which are linked with infrastructure like school compound, classroom, toilet, ramp, and gateway. Assistive materials also an obstacle to wisely to satisfied the need of disabled individuals in the local area. Due to lack available supportive requirements like mobility devices, braille, white cane, and other school material disabled people are highly challenged.

Moreover, due to unwise information most of disabled people wrongly understand individuals with disabilities. Missing of reliable information about disabled people is brought negative impacts on the attitude other people about person with disabilities. Lastly, lack of disability based stakeholder is the major obstacles to improve the capacity and achieved the needs and objective of disabled people.

Some succeed disabled individuals pointed certain factors to control social, cultural, environmental advertises. Such determinant factors include health child parent relation, positive peer pressure for providing thoughtful advice or for serving as role models, and institutional network to establish financial, material, skill training on parental child care. Generally speaking thrive informants noted that family, peer and social network play big role in the success of disabled individuals.

## **8.2 Recommendations**

The perpetuation of discrimination and social exclusion has negative implications on the day-to-day lives of disabled people. Therefore, it is important to consider the following recommendations to resolve deep rooted causes of misconception; address the needs of persons with disabilities; acknowledge real achievements and minimize various reasons of discrimination and exclusion in the study area.

- Awareness rising on disability issues has so far not been extensive enough. Hence, intensifying awareness rising to deal with discrimination and social exclusion is mostly significant.
- Disabled children do not go to school because teachers are not patient and do not have skill training on special needs. Therefore, providing skill training for school teachers is highly significant on how to handle students with special needs.
- Lack of assistive materials accessibility is highly challenged disabled people therefore; supply assistive material and establish the compatibility of life for disabled people.
- Environmental accessibility related with mobility is the major challenging factors to lead their day to day life therefore; ensure environmental accessibility and facilitate adequate social services and other opportunities.

- Establish the strength of family and disabled child relationship by arranging the works of advocacy program on disability issues cooperating with foreign and domestic disability based and other stakeholder.
- In the religious institution some figurative terms are widely used by the believers, preachers and religious leader. Also, those figurative terms are widely illustrated in the spiritual books. Therefore, revise/abrogate outdated provision in the spiritual book and do not use on the religious occasion.
- Institutional exclusion is highly practiced among the local area this exclusion is on job opportunities and on some educational training with regard with this circumstance the government agencies make the special arrangement for person with disabilities to facilitate accessible job opportunities and educational and skill training.
- Shortage of information accessibility creates gab on addressing the necessary information for disabled and other people. Hence, it is recommended that mass media and other institution must develop to ensure addressing necessary information for all. Because, the media are one of the most powerful tools to effect this change and have been successful in changing public attitudes
- Meeting the health care needs of persons with disabilities is widely problematic situation particularly those disabled women are highly marginalized from adequate health care program such as from family planning services, HIV/AIDS training services and from other related health care services. Therefore, establish effective interference of government on providing adequate health care center, heath care facilities and heath care man power.
- Families who have enough income caring their disabled child in better way however; families who have lower income do not give wise treatment for their child with disabilities. Hence, strength disabled's parent economically by facilitating fund raising and providing self-aiding program.
- Nonexistence of disability based stakeholder in the local area is the major challenging factor to meeting the needs of disabled people. Therefore, creating an umbrella group of people and formed disability based institution at the local level.

- The presence of exclusion from community setting participation is commonly practices among the local people. Therefore establish health relationship among disabled people and the others by giving motivation and bring the sense of belongs in the mind of disabled people and building disabled's capacities interventions in the participation of social domain. because, the process of participation is a central part of learning to take responsibility, to make decisions and to develop self-esteem and confidence
- Some individuals' experience of resilience is promoting motivation and recounted that those disabled people from difficult situation. It showed that how to able to adjust to or overcome situations of serious adversity. Therefore, arrange sharing experience event and means of get out from difficulties and excel better way of life.

## Reference

- Alemu Abera. 2002. Attitude towards Females with Disabilities: The Case of Wolayitta Ethnic Group. Unpublished Addis Ababa University
- Almaz Tamene Getachew, 2011. Attitudes of Ethiopian college students toward people with visible Disabilities University of Iowa unpublished.
- Anthony Goudie, Susan Havercamp, Lorin Ranbom and Barry Jamieson, 2010. Caring for Children with Disabilities in Ohio: The Impact on Families. Ohio. Developmental Disabilities Council.
- Bartels, Lambert. 1983. Oromo Religion: Myths and Rites of the Western Oromo of Ethiopia. An Attempt to Understanding. Berlin: Dietrich Reimer Verlag.
- Bernard Russell H. 2006. Research Methods in Anthropology: Qualitative and Quantitative Approaches. Oxford: AltaMira Press.
- Bhallan, Ajit and Frederik, Lapeyre. 1999. Poverty and Exclusion in Global World. London: Macmillian Ltd.
- Bruneau, M., S. Chang, R. Eguchi, G. Lee, T. O'Rourke, A. Reinhorn, M. Shinozuka, K. Tierney, W. Wallace, and D. von Winterfeldt. 2003. "A Framework to Quantitatively Assess and Enhance Seismic Resilience of Communities," Earthquake Spectra.
- Bryman Alan. 2004. Social Research Methods (2<sup>nd</sup>ed.). Oxford: Oxford University Press.
- Burchardt, T., J. Le Grand and D. Piachaud. (2002). "Degrees of exclusion: Developing a dynamic, multidimensional measure". Hills, Le Grand and Piachaud (Eds.).
- Carolyn M. Clancy and Elena M. Andresen, 2002. Meeting the Health Care Needs of Persons with Disabilities: *The Milbank Quarterly*, Vol. 80, No. 2 (2002), pp. 381-391. Published by: Wiley on behalf of Milbank Memorial Fund. Stable URL: Accessed: 27/12/2013 05:

- Catherine J. Kudlick. 2003. Disability History: Why We Need Another "Other" Source: *The American Historical Review*, Vol. 108, No. 3 (June 2003), pp. 763-79  
Published by: Oxford University Press on behalf of the American Historical Association.
- Descent Work in Ethiopia: Inclusive of People with Disabilities in Ethiopia. 2013. ILO/Irish Aid Partnership Programme, PROPEL Project, Ethiopia
- Diesfeld K. 2001. 'Disability Matters in Medical Law'. In *Journal of Medical Ethics*, Vol. 27, No. 6. Pp.388-393. Accessed: 07/12/2013 02:22.
- Duffy, K. 1995. *Social Exclusion and Human Dignity in Europe*. Council of Europe, Strasbourg.
- Fafchamps, M. and Bereket Kebede. (2008). *Subjective Wellbeing, Disability and Adaptation: A case Study from Rural Ethiopia*.
- Federal Negarit Gazeta of the Federal Democratic Republic Of Ethiopia 1st Year No.1 Addis Ababa 21st August, 1995.
- Gebre Yntiso, Ayalew Gebre, Rahel Shiferaw, Hiwot Workineh. 2009. *Learning from Children Exposed to Sexual Abuse and Sexual Exploitation: The Bamboo Project Study on Child Resilience: Resilience in Children Living in Merkato, Ethiopia*. Oak Foundation. Addis Ababa, Ethiopia.
- Gerda Jehoel-Gijsbers, Cok Vrooman. 2007. *A theoretical models tested in the Netherlands* The Netherlands Institute for Social Research/scp The Hague.
- Gilbert, S.W. 2010. *Disaster Resilience: A Guide to the Literature*, U.S. Department of Commerce, National Institute of Standards and Technology, NIST Special Publication.
- Gore, C. and Figueiredo, J.B. (eds.). (1997). *Social exclusion and anti-poverty policy: a debate*. International Institute for Labour Studies Research and United Nations Development Programme, research series 110. Geneva: International Labor Organization publications.

Ingrid Lewis. 2009. Background paper prepared for the Education for All Global Monitoring Report 2010. Reaching the marginalized Education for Disabled People in Ethiopia and Rwanda

International Labor Organization. 2011.

Jane Mathieson, Jennie Popay, Etheline Enoch, Sarah Escorel, Mario Hernandez, Heidi Johnston and Laetitia Rispel. 2008. Social Exclusion Meaning, measurement and experience and links to health inequalities a review of literature Institute for Health Research Lancaster University, UK.

Johnson D, Polusny, MA, Erbes, CR, King, D, King, L, Litz, BT, Schnurr, PP, Friedman, M, Pietrzak, RH, Southwick, SM. 2009. Resilience and response to stress: Development and Initial Validation of the Response to Stressful Experiences Scale (RSES).

Landman, T. (2006). Human rights and social exclusion indicators: concepts, best practices, and methods for implementation. University of Essex: Department of Government Human Rights Centre.

Lewis, Maureen A. & Marlaine E. Lockheed. 2006. Inexcusable Absence: Why 60 Million Girls Aren't In School And What To Do About It. Washington, D.C.: Center For Global Development.

Madhumita puri and George Abraham, 2004. Handbook of Inclusive Education for Educator, Administrators and Planers. Sage Publications India Pvt.Ltd New Delhi.

Martha Kibru. 2012. Employment Challenges in Ethiopia. Addis Ababa University unpublished.

Michael Ashley Stein. 2007. Disability Human Rights: California Law Review, Vol. 95, No. 1 (Feb.2007), pp. 75-121 Published by: California Law Review, Inc.  
Accessed: 07/12/2013 02:22.

- Francisco Azpitarte. 2013. Social Exclusion Monitor Bulletin. Melbourne Institute of Applied Economic and Social Research. Australia Brotherhood of St. Laurence.
- Michael Farrell. 2008. Educating Special Children: An introduction to provision for pupils with disabilities and disorders New York, Routledge.
- Michael Farrell. 2009. Foundations of Special Education: An Introduction. Blackwell Publishing.
- Misrak T. 2006. Challenges and Opportunities of Access and Mobility in Addis Ababa: the Case of people with Motor and Visual Impairments. Addis Ababa University School of Graduate Studies unpublished.
- MoLSA. 2010. Base Line Study on the Status of Person with Disabilities and the Influence of the African Decade Pronouncement in Ethiopia.
- Mulatu, S. M. 1999. Perceptions of mental and physical illness in north western Ethiopia: Causes, treatments, and attitudes. *Journal of Health Psychology*, 4, 531-549.
- Nora Ellen Groce. 2004. Developmental Articles: Adolescents And Youth With Disability: Issues And Challenges: 13 Vol. 15 No. 2 2004. *Asia Pacific Disability Rehabilitation*.
- Norris FH, Tracy M, Galea S. 2011. Looking for resilience: understanding the longitudinal trajectories of responses to stress. *Soc Sci Med*.
- Patrick, Martin-Breen and Marty Anderies. 2011. Resilience: A Literature Review School of Sustainability and School of Human Evolution and Social Change, Arizona State University, New York.
- Susan J. Peter. 2009 Review of Marginalization of People with Disabilities in Lebanon, Syria and Jordan. *Education for All Global Monitoring Report 2010*.
- Room, G.1997. 'Social quality in Europe: perspectives on social exclusion', in W. Beck, L. van der Maesen and A. Walker (eds.), *The Social Quality of Europe* (Kluwer Law International, The Hague, Netherlands), pp. 255-262.



- Rose, A. 2009. *Economic Resilience to Disasters*. CARRI Research Report 8. Available at [http://www.resilientus.org/library/Research\\_Report\\_8\\_Rose\\_1258138606.pdf](http://www.resilientus.org/library/Research_Report_8_Rose_1258138606.pdf), Accessed on November 2, 2014.
- Rouch A. and Lanphear P. 2012. Prevention of Disability in Children: *Elevating the Role of Environment*. VOL. 22 / NO.1 / SPRING 2012 193. Child & Family Research Institute in Vancouver, British Columbia.
- Samuel R. Bagenstos, 2000. Subordination, Stigma, and "Disability": *Virginia Law Review*, Vol. 86, No. 3 (Apr., 2000), pp. 397-534. Published by: Virginia Law Review. Accessed: 07/12/2013 02:19.
- Saraceno, C. 1997. 'The importance of the concept of social exclusion', in W. Beck, L. van der Maesen and A. Walker (eds.), *The Social Quality of Europe* (Kluwer Law International, The Hague, Netherlands).
- Saunders. P, et.al. 2007. *Towards New Indicators of Disadvantage: Deprivation and Social Exclusion in Australia*. Social Policy Research Centre, Australia.
- Savolainen, H. 1997. *Between Discrimination and Inclusion: Person with Disabilities and Service for Them in Ethiopia Today*, In H. Kolkkala (ed.) *Providing Special Education for Those Who Need It in Developing Countries*. Helsinki: Department for International Development Co-Operation, Ministry of Foreign Affairs of Finland.
- Silver, H. 1994. 'Social exclusion and social solidarity: three paradigms', *International Labor Review* 133, pp. 531-577.
- Susan J. Peters. 2009. *Review of marginalization of people with disabilities in Lebanon, Syria and Jordan*. Michigan State University, USA.
- Teklehaimanot, R. (1991). *Attitude of Rural People in Central Ethiopia towards Epilepsy*. *Social Medicine*, Vol.32, No., 1991, UK.
- The United Nation Children's Fund (UNICEF). 2007.

- The White House, 2011, Presidential Policy Directive/PPD-8: National Preparedness, March 30, Washington, D.C.
- Thomas Phillippa.2004. Disability Policy Officer. DFID and Disability.A Mapping of the Department for International Development and Disability Issues. [www.disabilitykar.net](http://www.disabilitykar.net) (accessed April 17, 2014).
- Tierney, K., 2003. Conceptualizing and Measuring Organizational and Community Resilience: Lessons from the Emergency Response Following the September 11, 2001 Attack on the World Trade Center, Preliminary paper 329. Newark: University of Delaware.
- Tilahun Negewo. 2013. Bacho Oromo Indigenous Institutions. LAP (LAMBERT Academic Publishing).
- Tirussew T. 2005. Disability in Ethiopia: Issues, Insight and Implication. Addis Ababa, University Printing Press.
- Tone Flatten, 2006. Poverty and Social Exclusion- Two Side of the Same Coin: A Comparative Study of Norway. Norway Allkopi AS.
- United Nations, 2011 Disability and the Millennium Development Goals Review of the MDG Process and Strategies for Inclusion of Disability Issues in Millennium Development Goal Efforts.United Nations Publication, New York.
- UNOs Convention on the Right of Person with Disabilities. 2006.
- Valentina Iemmi, K Suresh Kumar, Karl Blanchet, Sally Hartley, Gudlavalleti VS Murthy, Vikram Patel, Joerg Weber, Richard Wormald, Hannah Kuper, 2012. Community Based Rehabilitation for People with Disabilities in Low- and Middle-Income Countries. The Campbell collaboration.
- Vanbreda, D. 2001. Resilience Theory: A Literature Review. Pretoria, South Africa.

Walker, A. (1997), *“Introduction: the strategy of inequality”* in A. Walker and C. Walker, (eds.), *Britain divided: the growth of social exclusion in the 1980s and 1990s*. London: Child Poverty Action Group.

WHO. 2011 WHO. World Report on Disability. Geneva, Switzerland:

World Health Organization. 2011. World Reports on Disability, Washington, D.C.

World Health Organization, Geneva. 1981.

Yitzhak, Berman and David Phillips, 2000. *Indicators of Social Quality and Social Exclusion at National and Community Level Source: Social Indicators Research*, Vol. 50, No. 3 (Jun., 2000), pp. 329-350 Published by: Springer. Accessed: 08-08-2014 12:10.

## Appendices

### Appendix I: Interview Guide Questions

My name is Adugna Lema. I am a graduate student in Addis Ababa University and I am conducting a research here in Sebeta Hawss district. The general purpose of this research is to investigate about challenges and opportunities of disabled people and produced a fertile data on how local people perceived disabled people and how the wrong conception of local people affect inhabitants of disabled people in the local area. This is an interview guide prepared to collect information from informants of the study and form focused group discussant.

**Thank you for your cooperation!**

#### Personal information

- ❖ Name (optional) \_\_\_\_\_
- ❖ Age \_\_\_\_\_
- ❖ Sex \_\_\_\_\_
- ❖ Marital status \_\_\_\_\_
- ❖ Occupation/status in the institution \_\_\_\_\_
- ❖ grade level \_\_\_\_\_
- ❖ physical status \_\_\_\_\_

1. How do you see a person with disability?
2. How do the communities see persons with disabilities?
3. What are people's attitudes towards person with disability? if people's attitude is that negative what is the main reason?
4. How the local people receive a child born with disability?
5. How the leader of religious institution delivered the biblical view about disability?
6. Does that exists any specific version on the bible about disability and disabled individual? If so, how the preacher preaches it?
7. Is there any saying or proverbs regarding to disability? If so, what its assumption?
8. Are there any specific indicators of exclusion of disabled from social, economic and political sphere?

9. What are the root causes of these exclusions?
10. What are the major barriers to learning and success in quality basic education for all?
11. Are disabled individual and non-disabled child learning together?
12. How exclusion is built into our physical and social environment?
13. How you see environmental condition to disability related with accessibility?
14. Is there any special school center and special attention for disabled in the local area?
15. What is the real condition of job opportunities for person with disability?
16. Is that possible to provide inclusion service for person with disability? If not what are reason behind?
17. Are there any implications of acting disability protection to the existing law of human rights for individual with disability?
18. Are the disabled persons made their choice about marriage long term relationship and having family?
19. Do often disabled people depend on others?
20. Is there any specific polices memo, or constitutional part about disability?
21. How well the health care needs of persons with disability are being met?
22. Is the equality of health service delivered?
23. Is there any early intervention program (support system) within the local community?
24. Is that person with disability use more health care and health related service than nondisabled individual?
25. What kind of specific health related service is given to persons with disability?
26. Is the local person, which includes youth, children, elders used the distancing methods when they connect with persons with disability? If so, why they used this method?

## Appendix II: Key informants participants

name	sex	age	Marital status	Education level	occupation	religion	Place of interview	Date & time	Physical status
Ayale	male	38	married	BA	Accountant	orthodox	sebeta	02/03/2014 4:00-5:30 pm	Motor impairment
Dadafo	male	23	married	BA	lawyer	orthodox	sebeta	23/02/2014 3:00-4:30 pm	Visual impairment
belayinesh	female	28	married	10+3	Social worker	orthodox	sebeta	31/01/2014 &	Able body
girum	male	22	single	10 Complete	unemployed	protestant	sebeta	18/02/2014 6:00-6:45 pm	Motor impairment
kibu	female	27	single	10+3	Health extension	orthodox	Awash	11/03/2014 10:00-12:00pm	Able body

### Appendix III: Non-key informants' participants

name	sex	age	Marital status	Education level	occupation	religion	Place of interview	Date & time	Physical status
kasahun	male	34	married	10+3	Keble administrative	orthodox	tefki	02/02/2014 1:00-1:44 pm	Able body
mergetat	male	47	married	Grade 6	Farmer	orthodox	tefki	02/02/2014 9:00-9:45 am	Able body
Ade worqitu	femal	65	married	illiterate	House wife	orthodox	Dibe baknii	12/03/1014 11:00-12:00 am	Able body
Slomon	male	53	married	MSc (Theology)	Preachers	protestant	sebeta	16/02/2014 2:00-3:00 pm	Able body
Tadese	male	36	married	BA	teachers	waaqee fat a	Wolle	02/02/2014 4:00-5:00 pm	Able body
tilahun	male	35	married	Diploma	Social worker	orthodox	tefki	11/02/2014 5:15-6:27 pm	Able body
Abba bacaa	male	52	married	illiterate	farmer	orthodox	Dable	19/03/2014 5:00-6:00 am	leprosy
Abba caffee	male	64	married	Grade 4	Local elder	orthodox	Awash baloo	3/04/2014 8:00-9:00 am	Able body
butaa	male	19	single	Grade 6 student	Student	protestant	Sebeta	10/02/2014 2:00-3:00 pm	Visually impaired
meseret	female	18	single	Grade 11 student	student	orthodox	Awash baloo	6/04/2014 10:00-11:25 am	Motor impairment
gamachis	male	24	single	Grade 5 student	Shoe shine	protestant	seebeta	22/03/2014 9:00-10:30 am	dropsy
rahel	femle	23	single	illiterate	-	orthodox	Magno qantaloo	9/04/2014 6:00-1:00	Motor impairment
jituu	female	24	single	illiterate	-	orthodox	Awash melka	12/03/2014 4:00-5:35 pm	Visual impaired
Hadha ibissa	female	48	married	illiterate	House wife	orthodox	Magno qantalo	9/04/2014 1:20-2:00 pm	Deaf mother
Alemitu	female	30	single	illiterate	-	orthodox	tefki	11/02/2014 2:00-3:15 pm	leprosy

#### Appendix IV: Focused group discussant group one

Name	sex	age	Marital status	Grade level	occupation	religion	Place of discussion	Date & time	Physical status
Megersa	male	25	single	BA	Social worker	orthodox	Sebeta	1/05/2014 11:00-1:15 pm	Visually impaired
Etenesh	female	37	married	10+3	Social officer	orthodox	Sebeta	1/05/2014 11:00-1:15 pm	Able body
Abebe	male	39	married	10+3	TVET officer	orthodox	Sebeta	1/05/2014 11:00-1:15 pm	Able body
Tamirat	male	43	married	10+2	Woreda supervisor	Orthodox	Sebeta	1/05/2014 11:00-1:15 pm	Able body
Ashebir	male	26	single	10+3	Youth officer	orthodox	Sebeta	1/05/2014 11:00-1:15 pm	Able body
Dhaqaba	male	28	single	Grade 5	unemployed	orthodox	Sebeta	1/05/2014 11:00-1:15 pm	Motor impairment
Slomon	male	53	married	MSc	preacher	protestant	Sebeta	1/05/2014 11:00-1:15 pm	Able body
Buta	male	19	single	Grade 6	student	protestant	Sebeta	1/05/2014 11:00-1:15 pm	Visual impairment
Meskerm	female	27	single	10+3	Cultural/tourism officer	orthodox	Sebeta	1/05/2014 11:00-1:15 pm	Visual impairment
Belynesh	female	28	married	10+3	Social worker	orthodox	Sebeta	1/05/2014 11:00-1:15 pm	Able body





### Appendix V: Focused Group Discussion Group Two

Name	Sex	Age	Marital Status	Grade Level	Occupation	Religion	Place Of Discussion	Date & Time	Physical Status
Gobana	Male	20	Single	Read And Write	-	Orthodox	Awash Melka	27/04/2014 2:00-3:40 Pm	Limb Impairment
Aberash	Female	22	Single	Read And Write	-	Orthodox	Awash Melka	27/04/2014	Motor Impairment
Jittu	Female	24	Single	Illiterate	-	Orthodox	Awash Melka	2:00-3:40 Pm	Visual Impairment
Damassa	Male	26	Single	Read And Write	-	Orthodox	Awash Melka	27/04/2014	Motor Impairment
Diriba	Male	26	Single	Read And Write	-	Waqeefana	Awash Melka	2:00-3:40 Pm	Motor Impairment
Wubinesh	Female	25	Single	Illiterate	-	Protestant	Awash Melka	27/04/2014	Leprosy
Birhanu	Male	24	Single	Illiterate	-	Orthodox	Awash Melka	2:00-3:40 Pm	Low Vision
Dajane	Male	23	Single	Read And Write	-	Orthodox	Awash Melka	27/04/2014	Limb Impairment

## Appendix VI: General Characteristics of Respondents

Persona information	Number of informants		
	Male	female	total
Age group			
15-25	9	6	15
26-35	6	5	11
>36	9	3	12
Religious Affiliation Orthodox			
Protestant waqefana	16	13	29
	6	1	7
	2	0	2
Marital Status Single			
Married	12	9	21
	12	5	17
Educational Level Illiterate			
Primary & Secondary	2	7	9
University College	11	2	13
	11	5	16
Occupation			
Student	2	1	3
Farmer	2	0	2
Gov. Officer	8	5	13
Unemployed	7	6	13
Other	6	1	7
<b>Total</b>	-	-	<b>38</b>

