

**Country Profile on  
Disability**

**FEDERAL DEMOCRATIC  
REPUBLIC OF ETHIOPIA**

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Japan International Cooperation Agency  
Planning and Evaluation Department**

**Country Profile on Disability**  
**Federal Democratic Republic of Ethiopia**

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## Abbreviations

CBM	Christoffel Blind Mission
CBR	Community-based Rehabilitation
FDRE	Federal Democratic Republic of Ethiopia
ILO	International Labour Organization
MOLSA	Ministry of Labour and Social Affairs
NGO	Non-governmental Organization
OJT	On-the Job Training
RAD	Rehabilitation Affairs Department
TGE	Transitional Government of Ethiopia
UNDP	United Nations Development Programme
UNESCO	United Nations Educational, Scientific and Cultural Organization
UNICEF	United Nations Children's Fund
USAID	United States Agency for International Development
WHO	World Health Organization

# 1. Basic Profile

## 1-1. Basic Indicators

### Public Sector Expenditure<sup>1</sup>

Health	1.7%	1990-98
Education	4.0%	1997
Social welfare	N/A	
Defense	1.9%	1997

### Population<sup>2</sup>

Population (total)	62.8 million	1999
% of women	49.8%	1999
% of urban population	17.2%	1999
Life Expectancy (total)	42.4	1999
Male	41.4	1999
Female	43.4	1999

### Medical Care

Medical care personnel		
Population/Doctor	N/A	
Population/Nurse and midwife <sup>3</sup>	12,500	1992-95

<sup>1</sup> World Bank. World Development Report 2000-2001

<sup>2</sup> World Bank. World Development Indicators 2001

<sup>3</sup> UNDP. Human Development Report 2001

**Education<sup>4</sup>**

Education system		
Primary education	6 year	
Compulsory education	6 year	
Adult literacy rate <sup>2</sup>		
Male	42.8%	1999
Female	31.8%	1999
Enrollment ratio		
Primary education (Net enrollment ratio)		
Total	32%	1996
Male	39%	1996
Female	24%	1996
Primary education (Gross enrollment ratio)		
Total	43%	1996
Male	55%	1996
Female	30%	1996
Secondary education (Net enrollment ratio)		
Total <sup>5</sup>	25%	1997
Male	--	
Female	--	
Higher education (Gross enrollment ratio)		
Total	0.8%	1996
Male	1.3%	1996
Female	0.3%	1996

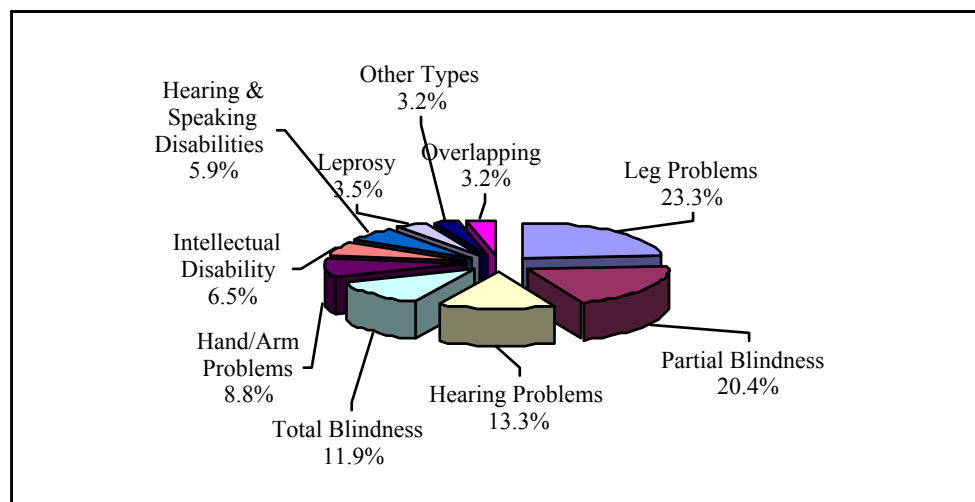
<sup>4</sup> UNESCO. Statistical Yearbook 1999

<sup>5</sup> USAID ESDS. GED2000 Retrieved February 21, 2002, from <http://qesdb.cdie.org/ged/index.html>

## 1-2. Indicators on Disability

### Disability-specific Data

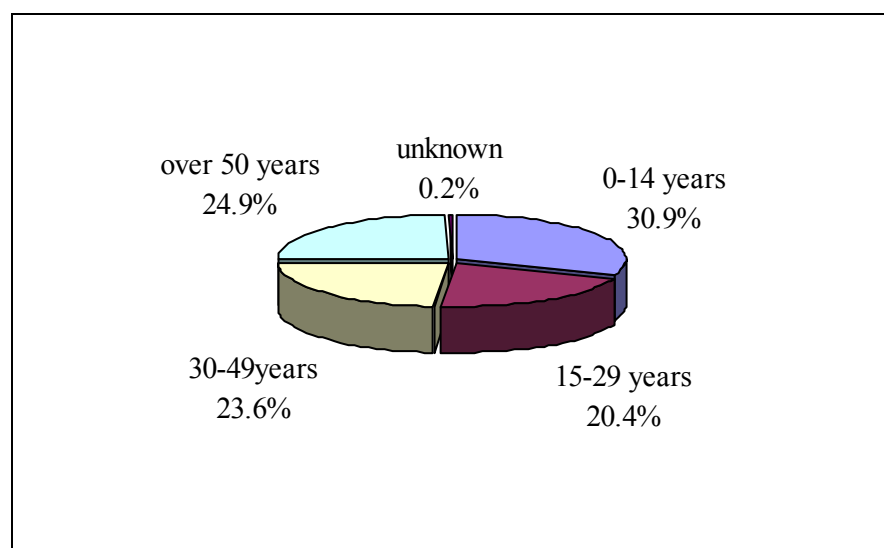
Figure 1: Types of Disability in Ethiopia in 1994



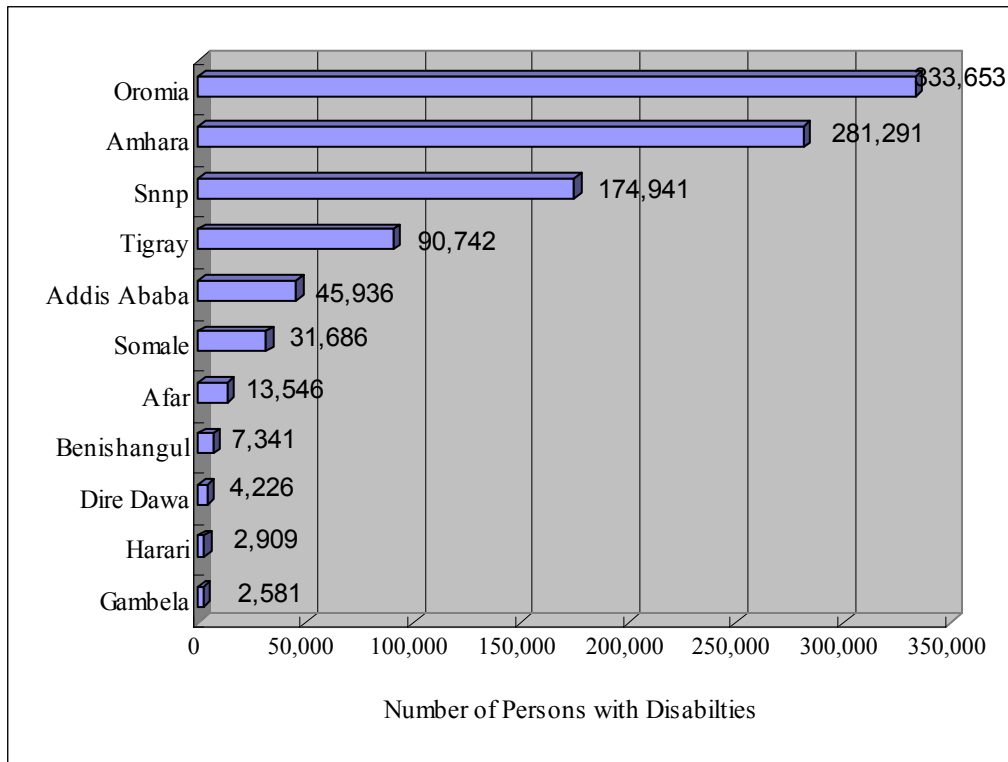
Source: Wa'el International Business and Development Consultant (2000), *Country Profile Study on Persons with Disabilities, Ethiopia*.

### Age-specific Data

Figure 2: Percentage of Persons with Disabilities from Total Number of Persons with Disabilities in Each Age Group in 1994



Source: Wa'el International Business and Development Consultant (2000), *Country Profile Study on Persons with Disabilities, Ethiopia*.

**Area-specific Data****Figure 3: Number of Persons with Disabilities in Each Region in 1994**

Source: Wa'el International Business and Development Consultant (2000), *Country Profile Study on Persons with Disabilities, Ethiopia*.

**Grade-specific Data**

N.A.

**Cause-specific Data**

N.A.



## Gender-specific Data

Figure 4: Percentage of Disabilities<sup>7</sup> by Gender

<sup>7</sup> “Deaf”, “Dumb” and “Lame” are the terms used in the local consultant report, which takes its figures from the Population and Housing Census, CSA, Ethiopia 1984. Therefore the original terms have not been changed.

## 2. Issues on Disability

### 2-1. Definition of Disability in Ethiopia

Following the World Health Organization (WHO)<sup>6</sup> and International Labour Organization (ILO)<sup>7</sup> definitions on disability, “Disability” is defined as follows in Ethiopia,

“A disabled person is any person unable to ensure by himself or herself a normal life, as a result of deficiency in his or her physical or mental capabilities”<sup>8</sup>

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

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

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

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<sup>6</sup> “Disability is any restriction or lack (resulting from impairment) of ability to perform an activity in the manner or within the range considered normal for human beings”<sup>6</sup> (WHO in 1976 by Helander, 1993 *Prejudice and Dignity, Introduction to Community Based Rehabilitation*. New York: UNDP)

<sup>7</sup> “Disability is a state in which functional limitation and/or impairments are causative factors of the existing difficulties in performing one or more activities which, (in accordance with the subject’s age, sex and normative social roles,) are generally accepted as essential, basic components of daily living, such as self-care, social relations and economic activity.”

<sup>8</sup> Guide for Services for the Handicapped in Ethiopia by Tirussew Tefera June, 1991. Addis Ababa

## 2-2. Current Situation

According to the International Rehabilitation Review<sup>9</sup>, nearly 10% of the world's population has disabilities, of which 80% live in developing countries. Most of those in developing countries do not have access to rehabilitation services due to a lack of resources and other various factors<sup>10</sup>.

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

Major current problems concerning disability are:

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

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

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

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

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<sup>9</sup> United Nations Children's Fund -UNICEF (1988), *Rehabilitation International Technical Support Program to Prevent Childhood Disabilities and to Help Disabled Children Vol. 7*, UNICEF.

<sup>10</sup> Tirussaw, T. (1998), *Persons with Disabilities of High Achievement Profile in Ethiopia*, Radd Barner.

### 2-3. Documentation and Survey on Disability

#### National Census

【Title】	Population and Housing Census (Central Statistical Authority)
【Last published】	1994 (every 10 years)
<p>【Items regarding disability】</p> <p>Some statistics were compiled on disabilities. This data did not include disability-related data by location, cause, and facilities. The 1984 census focused on relevant information on disabilities, but the recent 1994 census lacked this emphasis.</p>	

#### Other Surveys

【Title】	Baseline Survey on Disability in Ethiopia (Institute of Educational Research, Addis Ababa University)
【Last published】	1995
<p>【Items regarding disability】</p> <p>The survey was intended to investigate the differential factors related to the conditions of persons with disabilities with the general purpose of:</p> <ul style="list-style-type: none"> <li>- determining type and level of disabilities in the country,</li> <li>- assessing the general condition of persons with disabilities in the country,</li> <li>- collecting quantitative and qualitative information on disabilities,</li> <li>- identifying and describing the socio-cultural factor affecting persons with disabilities,</li> <li>- securing information on attitude and perception of disabilities,</li> <li>- compiling statistical data on disabilities.</li> </ul>	

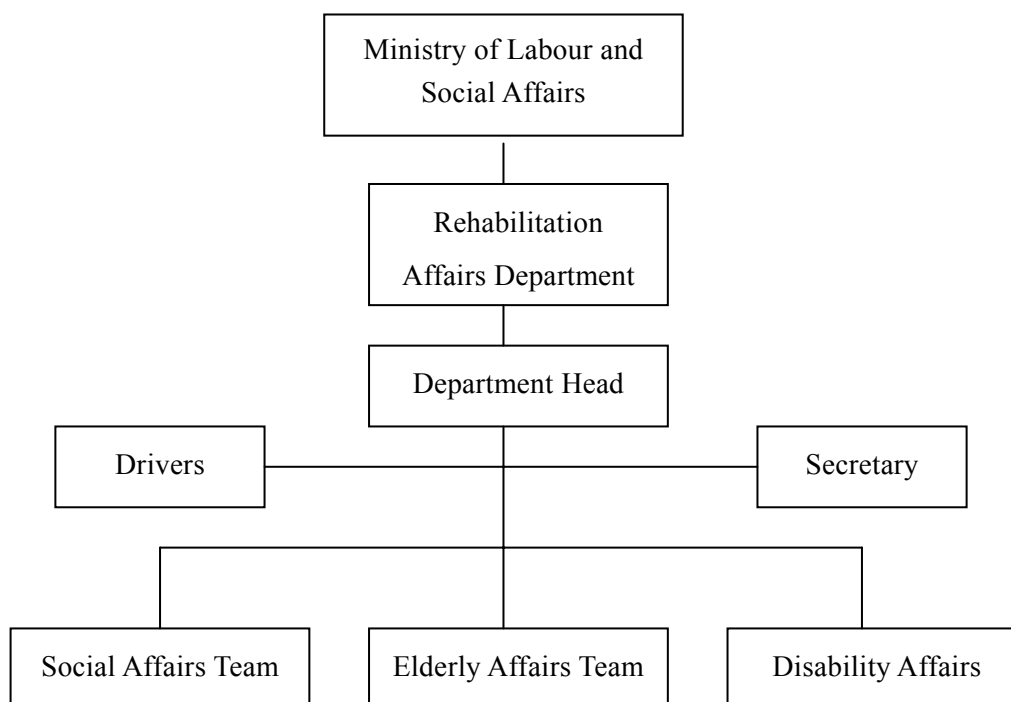
### 3. Administration and Policy on Disability

#### 3-1. Administration on Disability

##### Central Government

【Organizational chart】

Chart 1. Organizational Chart of Federal Government on Disability-related Issues

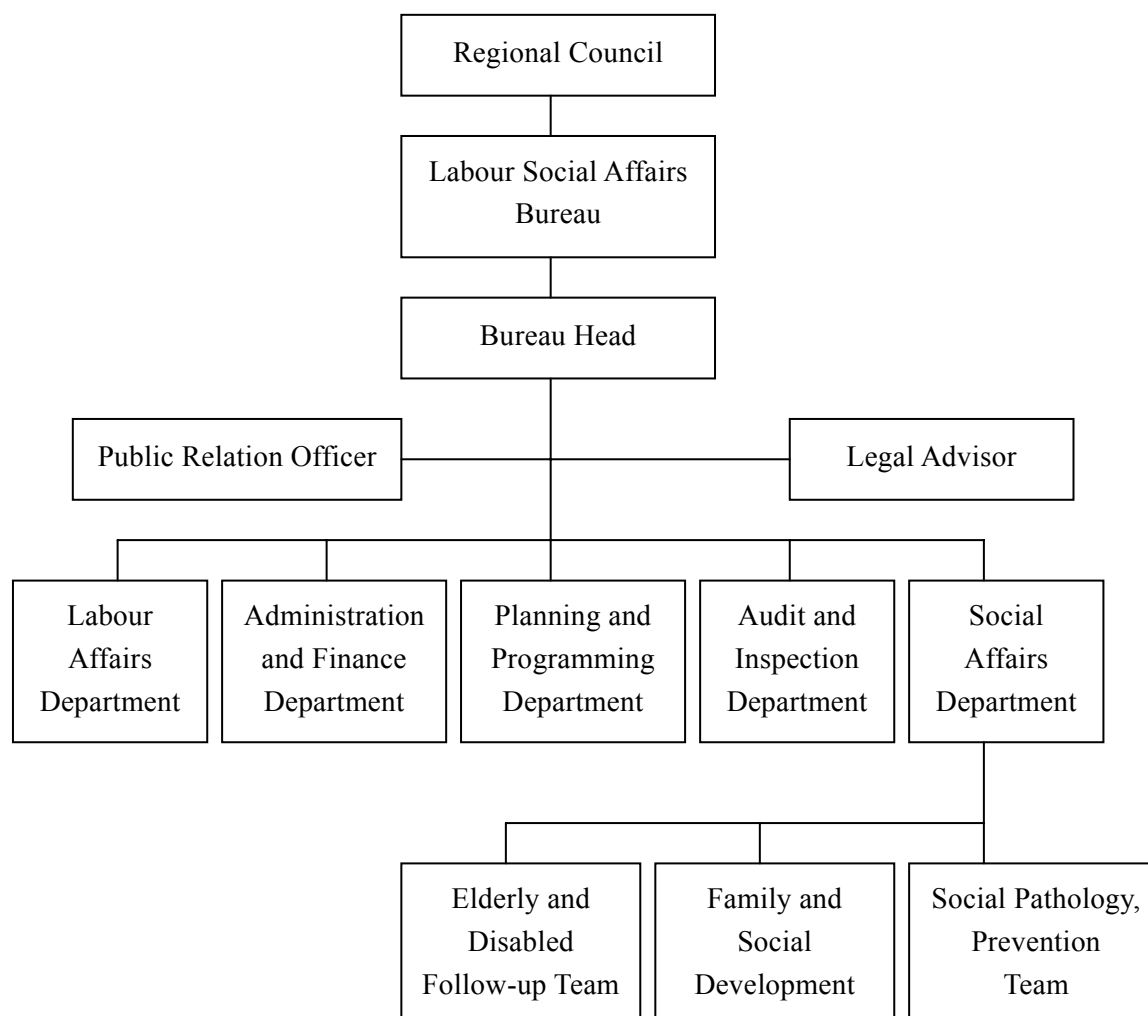


##### 【Disability-related Governmental Organizations】

【Name】	【Description】
The Ministry of Labour and Social Affairs (MOLSA)	Previously responsible to the Rehabilitation Agency for the Disabled. Currently taken over duties and responsibilities of that Agency.
Rehabilitation Affairs Department (RAD)	Creates policies on disability-related rehabilitation, capacity building, awareness raising, etc. Located within MOLSA. There are three teams under this department, as shown in the organizational chart above.

**Local Government**

【Organizational chart】

**Chart 2. Local Agencies Responsible for Disability-related Issues****【Disability-related Organizations in Local Government】**

<b>【Name】</b>	<b>【Description】</b>
Labour and Social Affairs Bureau	Handles all matters on social affairs including disability-related issues.

There are nine regional states, one special administration (Dire Dawa), and one capital city of the Ethiopian Federal Democratic Government. Each regional council has a Labor and Social Affairs Bureau, which handles all social affairs matters, including disability-related welfare. The structure at the regional level is more or less similar to that of the federal government. Rehabilitation, integration, prevention, and placement are handled by bureaus at the regional level, headed by a team leader.

The Elderly and Disabled follow up team is comprised of one team leader, two senior experts, one assistant for disability-related matters, and one typist.

### 3-2. Laws and Regulations on Disability

Laws and regulations are enacted under various constitutions. There is no specific statement or article on disabilities in these constitutions. However, there are some proclamations to protect and secure the rights of citizens with disabilities.

【Title】	Order No. 70
【Year legislated】	1971
【Description】 An order announced during Emperor Haile Selassie's reign established a rehabilitation agency for persons with disabilities. The rehabilitation agency is to give assistance to those in need of social, physical, and mental rehabilitation. Moreover, it was to maintain the long-standing tradition among the people to render assistance whenever the well-being of certain groups or individuals was threatened or affected.	

【Title】	Proclamation No. 101
【Year legislated】	1994
【Description】 A proclamation by the Transitional Government of Ethiopia (TGE). The objectives are as follows;	
<ul style="list-style-type: none"> <li>- to assist people within society suffering from disabilities due to natural and manmade causes.</li> <li>- to alleviate the problems of disabilities by creating appropriate access to job opportunities through appropriate training or skill.</li> <li>- to eliminate discrimination and protect the rights of persons with disabilities to compete for and obtain employment based on their qualifications.</li> </ul>	

【Title】	Proclamation No. 1
【Year legislated】	1995
【Description】 A proclamation to enact the constitution of the Federal Democratic Republic of Ethiopia (FDRE). The democratic right of every citizen including persons with disabilities is protected under the following articles, Article 11, 14, 16, 18, 20, 25, 28, 31.	

### 3-3. Policies on Disability

**National Development Plan**

<b>【Title】</b>	National Development Plan
<b>【Period】</b>	n.a.
<b>【Items regarding disability】</b>	
<ul style="list-style-type: none"> <li>▪ Conditions shall be facilitated that will enable persons with disabilities to use their abilities as individuals or in association with others to contribute to the development of society as well as to be self-supporting by participating in the political, economic and social activities of the country.</li> <li>▪ Efforts that instill a sense of confidence and self-reliance within persons with disabilities through education, skillful training, gainful employment opportunities, and other services shall be increased and appropriate legislative measures be taken to ensure their welfare.</li> <li>▪ A mechanism shall be created by which persons with physical and mental disability will receive appropriate medical/ health services and supportive appliances.</li> <li>▪ Mechanisms in which persons with physical and mental disability will receive appropriate support services in the context of their families and community environment shall be created.</li> <li>▪ All efforts shall be made to establish special centers where persons with disabilities without any family support and persons with physical mental disability will be cared for.</li> <li>▪ Appropriate and sustainable educational programs shall be launched to significantly raise the level of public awareness of the disabilities. This is by way of changing the prevailing harmful traditional attitude, norms and practices towards disabilities.</li> <li>▪ Support and assistance shall be provided to community action-groups, non-governmental organizations (NGOs) and voluntary associations providing services to persons with physical and mental disability.</li> <li>▪ Strategies and programs designed to increase understanding of the cause and prevalence of physical and mental disability and thereby prevent and mitigate their spread shall be formulated.</li> <li>▪ All efforts shall be made to gradually remove all physical impediments and make residential areas, work, and other public places physically more accessible to persons with disabilities.<sup>11</sup></li> </ul>	

**3-4. Measures on Disability****Prevention, Identification and Early Intervention****【Current situation】**

Most disabilities in Ethiopia such as blindness, polio, hearing impairment, intellectual disability, leprosy, and the like are preventable provided the necessary measures are taken. In order to strengthen these measures the Ministry of Labor and Social Affairs has developed

<sup>11</sup> MOLSA; Developmental Social Welfare Policy of FDRE, 1996



the following action plan.

- Propagate necessary education through mass media and gatherings on the causes of disabilities and the care required
- Conduct proper research and studies
- Conduct a national vaccination campaign
- Expand health institutions
- Teach proper care at the scene of traffic accidents
- Alleviate socio-economic problems of society
- Encourage persons with disabilities and their associations to participate in prevention campaigns
- Include disability education in the curriculum
- Make available trained manpower for occupational safety and health control

In order to accomplish the above plan, responsibilities have been assigned to the Ministry of Health, the Ministry of Labor and Social Affairs, the federation and associations of persons with disabilities, the Ministry of Justice, the Ministry of Agriculture, the Ministry of Culture and Information, the Ministry of Transport and Communication, the regional administrations, non-government organizations, Labor Association Federation and public associations.

### **Medical Services and Rehabilitation**

**【Current situation】**

#### **Medical Rehabilitation**

The program for medical rehabilitation of persons with disabilities is aimed at furnishing devices to support missing or damaged organs and to provide necessary health care such as physiotherapy, hydrotherapy, sound therapy and massage. Strategies in medical rehabilitation include the following:

- Strengthening and expansion of medical rehabilitation services
- Making available strong referral hospitals for persons with disabilities
- Making available adequately trained workers
- Including disability preventive care education in medical training centers
- Expansion of medical service devices for persons with disabilities
- Expansion of the supply of assistive devices and physiotherapy treatment inline with medical services
- Expansion of medical care (treatment) services of intellectually disabled patients
- Encouragement of cultural medicines, with assistance of scientific evidence
- Provision of sustainable and mobile medical services for improved mobility of

persons with disabilities

### **Assistive Devices**

There are approximately 24 centers/ workshops, which produce and supply different assistive devices for persons with disabilities in the country. Devices for commercial sale are imported.

### **Education**

#### **【Current situation】**

A new policy has clearly guaranteed persons with disabilities education suitable to their capability and disability. There were only 2572 students in regular schools in 1996 the reasons being:

- Shortage of special schools and teachers
- Shortage of teaching materials
- Inaccessibility to special schools
- Lack of awareness of the family to send children with disabilities to schools.

To solve these problems a national strategic plan was prepared as follows:

- Expand special education coverage
- Make available special teaching materials
- Create awareness of the society to prevent segregation of persons with disabilities
- Train teachers, school principals and other persons involved in education on basic understanding of disability
- Increase the number of schools and teachers with special talent
- Provide necessary assistance to persons with disabilities at schools
- Have disability-related associations and families participate in curriculum preparation
- Organize schools to be barrier-free
- Mix students with disabilities and non-disabled students in classes
- Arrange special co-ordination among schools of special education
- Raise awareness amongst families to send girls and women with disabilities to school
- Exempt import duty on special teaching materials for persons with disabilities
- Ensure sustainability of programs

## **Social Services**

### **【Current situation】**

Persons with disabilities have been unable to participate in national developments due to lack of assistance and the attitudes of society. The following policies have been drawn up to increase the participation and integration of persons with disabilities.

### **Accessibility**

Roads, buildings, transport facilities and other public recreational areas have limited participation and integration of persons with disabilities in society. The following are strategies to alleviate these problems.

- Establish laws and regulations to construct buildings and roads that are accessible by persons with disabilities
- Instruct public transportation to make special considerations for persons with disabilities
- Have disability-related associations participate in construction designs
- Use of Braille and clearly written alphabets
- Promote sign language use

### **Awareness Raising**

The society, in most cases, assumes that persons with disabilities are incapable of doing anything which has contributed in creating an inferiority complex in persons with disabilities. Policy statements are similar to what have been discussed under other topics.

### **Organizations of Persons with Disabilities**

It is important for persons with disabilities to organize and associate in order to participate in day-to-day activities and make equal decisions in life. Policies are being devised to support organizations of persons with disabilities and their activities.

### **Religion**

Persons with disabilities have the right to believe in any religion, but in reality they are denied free choice. Appropriate policies are being formed to solve this problem.

### **Culture, Sport and Recreation, Family Life and Individual Security**

Persons with disabilities have the right to learn the historical background of their country, the right to participate in sports and recreations for their health and mental well-being and to

interact socially with others. The Ministry of Labor and Social Affairs has made policies with the national committee led by the Social and Security Sector of the Prime Minister's Office, and which comprises of almost all ministerial offices and concerned organizations executing these policies.

### **Vocational Training and Employment Promotion Services**

#### **【Current situation】**

The Ethiopian government announced proclamation No.101/1993, following ILO rules and regulations on the employment of persons with disabilities. The Ministry of Labour and Social Affairs has developed the following action plan.

<b>【Policy/program title】</b>	Action Plan
<b>【Implementation year】</b>	N/A
<b>【Description】</b>	
<ul style="list-style-type: none"> <li>- Expand job training for persons with disabilities</li> <li>- Adapt training centers to the needs of both disabled and non-disabled persons and to the training needs of persons with disabilities.</li> <li>- Train capable and efficient occupational rehabilitation workers</li> <li>- Conduct research on rehabilitation</li> <li>- Organize a system that would encourage persons with disabilities</li> <li>- Establish areas that accommodate persons with disabilities, such as workshop shelters etc.</li> <li>- Encourage institutions that accommodate and hire persons with disabilities</li> <li>- Practice proclamation No. 101/93</li> <li>- Create a self-employment system for persons with disabilities.</li> <li>- Create a conducive working conditions for persons with disabilities.</li> <li>- Encourage women with disabilities to participate in occupational rehabilitation.</li> </ul>	

Occupational rehabilitation is important to enable persons with disabilities to be self-reliant. However, there is a lack of special educational institutions and awareness.

### **Community-based Rehabilitation (CBR)**

#### **【Current situation】**

The Cheshire Foundation has conducted mobile out-reach and CBR programs for children in rural areas. International NGOs such as Christoffel Blind Mission (CBM), Save the Children Fund, and Oxfam have supported local NGOs implementing CBR programs.

### **Communication Tools**

#### **【Current situation】**

Sign language is used as the first language of education for hearing impaired person and is recognized as the main means of communication between hearing impaired person. There are government measures to encourage the media to make their services accessible to persons with disabilities, but there are no measures to make other public information services accessible to them. The following services are provided to facilitate information exchange and communication between persons with disabilities and others: literature in Braille/tape and sign language interpretation at major events.

### 3-5. Experts and Workers in the Field of Disability

【Job title】	【Number of personnel】	【Training and qualification system】
Orthopedic Technician	32 trained	3 year training at assistive device production workshops/centers
Physiotherapist	13 trained	3 year training
Assistant Orthopedic Technician	103 trained	On-the job training (OJT) at assistive device production workshops/centers and 3 month training
Assistant Physiotherapist	39 trained	
Social Rehabilitation worker	6 trained	

The above figures might not include all the trainees, since some health training centers train medical students through optional courses, which might enable them to work as a technician in any one of the above-mentioned areas.<sup>12</sup>

<sup>12</sup> Assessment Report on the status of prosthetic, orthotic and related appliance manufacturers, Amharic Version by MOLSA, March 1999

## 4. Disability-related Organizations and Activities

### 4-1. Activities by Disability-related Organizations

\* See Annex 1. for the list of organizations

#### **Organizations of Persons with Disabilities**

There are 5 associations of persons with disabilities and 1 federation of which the 5 associations are members<sup>13</sup>. Family members represent persons with intellectual disability at their association but persons with disabilities themselves play an active role in the other associations. Each association has an office and managing director which is responsible to a board of directors. The board of directors is appointed by and from the executive committee, which is appointed by the general assembly.

### 4-2. Cooperation Projects on Disability Organized by International and Other Donors

\* See Annex 2. for the list of projects

#### **Assistance by Multilateral/Bilateral Organizations and International NGOs**

The United Nations Educational, Scientific and Cultural Organization (UNESCO) has financed a school for children with hearing impairment. International NGOs such as Save the Children Fund, Oxfam and CBM have played a large role in disability-related assistance in Ethiopia. Programs focus on CBR, vocational training, awareness creation, and educational support.

#### **Assistance by Japan**

In 1999, a grassroots grant was provided for the expansion of a care facility for children with disabilities.

<sup>13</sup> The 5 organizations are the Ethiopian Association of the Physically Handicapped, the Ethiopian National Association of the Blind, the Ethiopian National Association of the Deaf, the Support Organization of the Mentally Handicapped, and the Ethiopian National Association of Ex-leprosy Patient.

## 5. References

**This report is based on a report drafted by a local consultant.**

### **Main source:**

Wa'el International Business and Development Consultant (2000), *Country Profile Study on Persons with Disabilities, Ethiopia*

### **Other references:**

JICA (2002) *Kunibetsu Hinkon Joho Ethiopia (Poverty Information on Ethiopia)* unpublished

USAID Ethiopia homepage <http://www.usaidethiopia.org>