



**ST. MARY'S UNIVERSITY  
SCHOOL OF GRADUATE STUDIES**

**ASSESSMENT OF THE CHALLENGES OF PERSONS WITH PHYSICAL  
DISABILITIES IN THE WORK PLACES:  
THE CASE OF SELECTED MINISTRIES IN ADDIS ABABA.**

**BY  
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JUNE 2023

ADDIS ABABA, ETHIOPIA

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**THESIS SUBMITTED TO ST. MARY'S UNIVERSITY SCHOOL OF GRADUATE  
STUDIES IN PARTIAL FULFILMENT OF THE REQUIREMENTS FOR THE  
AWARD OF DEGREE OF MASTER OF SOCIAL WORK (MSW)**

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## DECLARATION

I, Sisay Tilahun, hereby declare that the thesis entitled “**Assessment of the challenges of Persons with Physical Disabilities in the Work Place; the Case of Some Selected Ministries in Addis Ababa**” is my original work. I have carried out the present study independently with the guidance and support of the research advisor, Dr. Telahun Gebrehiwot. Any other contributors or sources used for the study have been duly acknowledged. Moreover, this study has not been submitted for the award of any Degree or Diploma Program in this or any other Institution.

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## LETTER OF CERTIFICATION

This is to certify that Mr. Sisay Tilahun Gebremeskel has completed his thesis entitled **“Assessment of the Challenges of Persons with Physical Disabilities in the Work Place: The Case of Some Selected Ministries in Addis Ababa”**. In my opinion, all the materials used for the paper has been duly acknowledged and this paper is appropriate to be submitted as a partial fulfilment of the requirements for the award of Degree in Masters of Social Work.

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Dr. Telahun Gebrehiwot

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**ST. MARY’S UNIVERSITY**  
**SCHOOL OF GRADUATE STUDIES**  
**MASTER OF SOCIAL WORK (MSW)**

This is to certify that the thesis is prepared by Sisay Tilahun, entitled; “Assessment of the Challenges of Persons with physical Disabilities in the Work Places; the Case of Some Selected Ministries in Addis Ababa”. In partial fulfilment of the requirements for the award of the Degree of Master of Social Work, (MSW) with the regulation of the University and the accepted standards with respect to originality.

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## **ACRONYMS AND ABBREVIATIONS**

ENAPD: Federation of Ethiopian National Associations of Persons with Disabilities

GOs: Governmental Organizations

IDA: International Disability Alliance

IDDC: International Disability and Development Consortium

ILO: International Labour Organization

MoWSA: Ministry of Women and Social Affairs

NGOs: Non-Governmental Organizations

OPDs: Organizations of Persons with Disabilities

PWDs: Persons with Disabilities

SDGs: Sustainable Development Goals

UN: United Nations

UNCRPD: United Nations Convention on the Rights of Persons with Disabilities

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## ABSTRACT

*Examining the issues that people with physical disabilities face in particular selected ministries in Addis Ababa was the main objectives of the study. Its specific objectives were to: (1) examine the infrastructure of governmental organizations to see whether it enables people with physical disabilities to access services and live comfortably; Data collection and analysis for the study used both quantitative and qualitative research methodologies. Two ministries' infrastructure conditions were examined using document reviews and site visits. Additionally, information from 21 adults with physical disabilities was gathered through interviews and questionnaires. These methods were also utilized to gather information from 50 individuals DPO members, 64 civil servants without impairments, 10 directors, and 5 CEOs of the organizations. Based on the findings, the infrastructures of seventy five per cent (75%) of governmental organizations were found to be present but insufficient. Eighty five (85%) per cent of the infrastructure was difficult or impossible for individuals with physical impairments to access, whereas thirty five per cent (35%) and twenty five per cent (25%) of the infrastructure overall were in average or bad condition. The study also indicated that supporting assistive equipment were generally insufficient. As a result, it was advised that the government and other interested parties take particular care and precautions to accommodate people with physical disabilities in governmental organizations.*

# CHAPTER ONE

## INTRODUCTION

### 1.1. Background of the Study

Disability is an evolving concept and it results from the interaction between persons with impairments and attitudinal as well as environmental barriers that hinders their full and effective participation in society on an equal basis with others (UN, 2006).

Disabilities can occur at any stage in a person's life from infancy to old age. The major causes of disabilities include: infections, poisoning, radiation, genetic defects, accidents, violence including war, lack of oxygen during birth, harmful traditions, poverty and ignorance, lack of sufficient and balanced food, lack of social contact, and the occurrence of chronic diseases (MoLSA, 2021).

Although there are divergent understandings and classifications in different countries, we can categorize the major types of disabilities into four: i ) Sensory Impairments: deficiency or constraints in sight, hearing, smelling and/or tasting; ii) Physical Disabilities: disabilities that are related to hands, legs, chest, backbone, shoulder, bottom and the like; iii) Intellectual Disabilities (autism as well as other defects in understanding one's environment, learning, and writing; and iv) Psychosocial Disabilities: psychosocial problems such as depression, isolation, sleeping for long hours, as well as failure to achieve personal and social goals (MoLSA, 2021).

Although reports from the world health organization (WHO) and the World Bank (WB) show that there are about 1 billion persons with disabilities (PwD) that account for 15 percent of the global population, little is empirically known about the disability prevalence rates in low-income countries. This is particularly true in the case of Ethiopia where a severe lack of data on disability statistics becomes more acute when taking into consideration the intersection of disability and gender. In both developed and developing countries, the world's about one billion persons with disabilities are more likely to experience poverty and exclusion than persons without disabilities. Attitudinal and environmental barriers to participation have profound social, economic and cultural effects on persons with disabilities, resulting in exclusion and creating often overwhelming obstacles in accessing health services, education and employment (UN Division for Social Policy Development, ND).

Disability-inclusive development means that all stages of development processes are inclusive and accessible to persons with disabilities. It requires that all PwDs be afforded equal access to education, health care services, employment opportunities, and social protection, among others (UN Division for Social Policy Development, ND)

At global, national and local levels, there have been promising movements to address the needs and problems of PwDs. For instance, the 2030 Agenda states that people who are vulnerable must be empowered. Those whose needs are reflected in the 2030 agenda include all children, youth, and persons with disabilities; about 80 per cent of the PwDs live in poverty, and therefore deserve special attention. Out of the 17 Sustainable Development Goals (SDGs), 10 are particularly related to persons with disabilities, but only seven targets have an explicit reference.

Implementing the SDGs must be in line with and built upon existing international and national commitments and mechanisms. Therefore, the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD) should serve as a guiding framework for implementing the SDGs in order to realize the full inclusion and empowerment of persons with disabilities. More specifically, the National Plan of Action of Persons with Disabilities (2012 to 2021) represents a plan for enabling Ethiopia to become a more inclusive society. It addresses the needs of Persons with Disabilities in Ethiopia for comprehensive rehabilitation services, equal access to education, skills trainings, job opportunities, and full participation in the lives of their families, communities and nation at large.

When one goes directly to the issue of the study, accessibility is a basic issue for people with physical disabilities throughout the country. Inaccessible environment creates a dead, tiresome, unpleasant environment to people with disabilities who come to service delivery organizations: ministry offices. Inaccessible environment disturbs the dynamic service delivery environment and adversely affects the overall wellbeing of human life. In quality terms, inaccessible environment is a waste of resources, time and human potential.

The researchers have observed that there is a problem of persons with physical disabilities in the context of the ministries. So, the researcher has developed an interest to undertake research on the issue. Therefore, the main purpose of the study was to Assess the

Challenges of Persons with Physical Disabilities in Ministry of Women and Social Affairs and Ministry of Justice.

## **1.2. Statement of the Problem**

Article 31 of UNCRPD has given due emphasis to take appropriate measures to ensure to persons with disabilities access, on an equal basis with others, to the physical environment, to transportation, to information and communications, including information and communications technologies and systems, and to other facilities and services open or provided to the public, both in urban and in rural areas. These measures, which shall include the identification and elimination of obstacles and barriers to accessibility, shall apply to, inter alia: (a) Buildings, roads, transportation and other indoor and outdoor facilities, including schools, housing, medical facilities and workplaces; (b) Information, communications and other services, including electronic services and emergency services.

States Parties shall also take appropriate measures to: (a) Develop, promulgate and monitor the implementation of minimum standards and guidelines for the accessibility of facilities and services open or provided to the public; (b) Ensure that private entities that offer facilities and services which are open or provided to the public take into account all aspects of accessibility for persons with disabilities; (c) Provide training for stakeholders on accessibility issues facing persons with disabilities; (d) Provide in buildings and other facilities open to the public signage in Braille and in easy to read and understand forms; (e) Promote the design, development, production and distribution of accessible information and communications technologies and systems at an early stage, so that these technologies and systems become accessible at minimum cost.

Despite the ever increasing number of persons with disabilities (PwDs) in Ethiopia and the resulting conditions of abject poverty, efforts made to curb the existing situation and improve their lives have been minimal. Consequently, poverty and insufficient participation of PwDs continue to be the distinctive features characterizing the disability sector and movement in Ethiopia (Dagnachew, 2011).

Currently, many people with physical impairment do not show active attendance in their day to day activities, especially in the work place and giving in the allotted time due to certain inhibiting factors. Their shortcomings may occur because of certain challenges. That is why the researchers developed a keen interest to do research in the area. So, those

factors that make people with physical impairment challenge to access services from selected ministry offices will be investigated thoroughly. To meet this purpose the following research questions were forwarded.

### **1.3. Research Questions**

The purpose of this study was to find answers for the following basic research questions:

- i) Do the infrastructural situations in governmental organization in Addis Ababa support persons with physical disabilities?
- ii) What are the most crucial problems of Persons with physical disabilities/ PwDs in the selected ministries?
- iii) What social problems do persons with physical disabilities encounter in governmental organizations in Addis Ababa?
- iv) What are the stakeholders' views on the means through which the society can address problems that are facing persons with physical disabilities in governmental organization in Addis Ababa?

### **1.4. Objectives of the Study**

#### **1.4.1 General Objective**

- i) To assess the challenges of persons with physical disabilities in selected ministries with reference to the challenges/barriers they face and service provision to them.

#### **1.4.2 Specific Objectives**

The specific objectives of this study are to:

- i) Analyse the infrastructure of governmental institutions to see if it allows people with physical disabilities to work comfortably.
- ii) Investigate those factors that make people with physical impairment be absent from service providers.
- iii) Examine the social issues that people with physical disabilities face in Addis Ababa's governmental organizations.
- iv) Determine stakeholders' opinions on ways the society can solve issues that people with physical disabilities face in Addis Ababa's governmental organizations.

### **1.5. Scope of the Study**

The study focuses on investigating challenges and status of life of Persons with physical disabilities in Addis Ababa, specifically, ministry of women and social affairs and ministry of justice as a study area. And, the ministries were selected because of its convenience to have frequent contacts as needed. The research site selection is done purposively.

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

The results of the study would have the following contributions:

- It will create awareness especially for persons with physical disabilities and concerned stakeholders about factors that are causing inaccessibility for persons with physical impairment;
- It will sound an alert for the community in general and the stakeholders in particular to develop alternate options for those with physical disability to prevent their absenteeism from service providers;
- It will help other researchers as a springboard to conduct further studies on this area.

### **1.7. Limitations of the Study**

The major limitation of this study was related to its geographic delimitation to the two ministries at Addis Ababa, and consequently it may have some gaps in showing the situations of other urban centres and the vast rural areas in Ethiopia. Therefore, there is a need to conduct a more extensive study that covers both urban and rural areas of the country.

### **1.8. Thesis Structure**

The study was organized in five chapters: chapter one contains the introduction, background of the study, statement of the problem, research questions, general objective and specific objectives, scope of the study, significance of the study, limitation of the study, research site selection and thesis structure. Chapter two comprises description of study area, operational definitions of basic concepts and terminologies, theoretical literature, empirical literature and conceptual framework research design. Chapter three covers research methods, qualitative research methods, quantitative research methods, sampling procedures, sample frame, sample size, data analysis and ethical consideration. Chapter four covers the research findings, analysis and discussion, and finally, chapter five covers summary, conclusions and recommendation.

## **CHAPTER TWO**

### **REVIEW OF RELATED LITERATURE**

#### **2.1 Introduction**

This chapter is a comprehensive presentation of the relevant literature of previous studies that related to the research problem. It explores the concept of physical disability in general, historical overview of the problem as well as the empirical studies on the problem.

#### **2.2 Understandings of Disability**

Although the current global discourse of disability lacks a universally agreed global definition of what constitutes disability, an international treaty named the CRPD aims to fill this gap and symbolizes a landmark in the history of disability rights (Iriarte 2016, 11).

This international treaty provides a framework in the global understanding of disability. The CRPD describes ‘persons with disabilities’ as those “who have long-term physical, mental, intellectual or sensory impairments which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others (as cited in Iriarte 2016, 11).” This description is widely acknowledged and implemented and represents a paradigm shift in thinking about disability (Lewis et al. 2015, 69). According to Iriarte (2016, 12), the description refers to the so-called ‘social model’ which is increasingly mentioned in the disability and development debate, and endorsed and channelled by numerous (international) development organizations, such as, the WHO and UNDP (Grech 2009, 773). The social model of disability breaks the direct connection between impairment and disability – referring to the social, environmental and attitudinal factors which in interaction with the impairment cause disability (Iriarte 2016, 12).

The acknowledgment of the social model represents an evolutionary step in thinking about disability, as it diverts from a previously dominant model, namely, the medical model. This model views all disabilities as a result of some physiological impairment due to damage or to a disease process (Llewellyn and Hogan 2000, 158). In this way, the model locates disability within people (Marks 1996, 85). The emphasis in this way of thinking is on changing the minority who cannot fit into mainstream society and adapt them rather than organising the environment in ways to make social life accessible for

everyone (Marks 1996, 85). The adaptation process primarily consists of treatment and therapy in clinical terms. This model has been criticized by the disability movement consisting of activists and academics. They have argued that the approaches have failed to acknowledge the impact of the environment by mainly focusing on the defects of the functional body (Marks 1996, 86).

Environmental factors are included in the social model by conceptualizing disability as arising from the interaction of a person's functional status with their physical, cultural, and policy environments (Loeb et al. 2008, 34). In terms of interaction, disability can range from mild to severe, can be constant or episodic, and whether a person is considered to have a disability is dependent on their environment (Braithwaite and Mont 2009, 220). According to the social model, disability is not something that exists in the individual (Iriarte 2016, 17), but is the outcome of an oppressive relationship between people with impairments and the rest of society (Burckhardt 2004, 736). According to Iriarte (2016, 17), the social model assumes that it is "society that actually disables the person and generates the problems associated with disability." Since the social model breaks the direct link between impairment and disability, it politicizes disability as "an expression of wider socio-economic, political and cultural formations of ... the exclusion of people with impairments (Godley 2007, 5; Grech 2009, 773)."

The social model tries to shift the focus towards social barriers while acknowledging that impairments can have psycho-emotional effects for disabled people (Iriarte 2016, 18). Acknowledging that disability arises from the interaction of a person's functional status with their physical, cultural and policy environments creates a 'symbiotic' relationship, which, according to Kuyayama (2011, 167), requires the environment to minimize psychological, geographical, economic and cultural obstacles so that disability challenges are manageable. In his view, if society fails to be sensitive and responsive to the plight of children with disabilities, a situation will develop whereby these children remain the marginalized of the marginalized (Kuyayama 2011, 167). This highlights society's responsibility in managing the environment in order to stimulate development of PwDs and by this, the development of society as well.

Whereas the international understanding of disability, based on the CRPD, informs the work of international agencies, previous ways of thinking are not completely rejected and can still influence understanding of disability on a local level. Lewis et al. (2015, 69)

point out that the lives of people with disabilities vary considerably depending on the country where they live. Besides the context of a country, also age, gender, socio-economic status and living in city or rural areas affect the lives of over 1 billion people with disability worldwide. According to Lewis et al. (2015, 69), individuals' experience of disability may largely be formed by cultural understandings of ability and disability. Many of these cultural views put most emphasis on physical competence, which results in the belief that PwDs are inferior (Campbell 2009 as cited in Lewis et al. 2015, 69). This belief arises from the perspective of the able-body as the 'normative' body, which functions as the comparison standard. In this way, it continues to regard PwDs as disadvantaged and maintains their discrimination around the world (Lewis et al. 2015, 69).

The stigmatized perception of disability as inability leaves children with disabilities as 'objects of pity', which leads to compromises in their development of self-esteem and positive self-concept (Kuyayama 2011, 165). In line with this, Saetermoe et al. (2001, 699) argue that PwDs adjust their expectations of themselves downwards in order to cope with stigmatic responses. This results in a decreased self-esteem and self-confidence, which, in turn, affects their functioning. Saetermoe et al. (2001, 699) claim that this takes its toll in outcomes such as employment, income, college participation and physical activity (Saetermoe et al 2001, 699). This can lead to a feeling of powerlessness and marginalization, which creates the inferior position of PwDs in society.

Many people in the world may not yet understand that disability is a product of a person-environment interaction (Lewis et al 2015, 71). Especially in the Africa, certain myths and cultural beliefs associate disability with misfortune or a bad spell and witchcraft. These beliefs result in discrimination of people with disabilities because disability is seen as a punishment from God or the ancestral spirits (Kuyayama 2011, 163). These spiritual perceptions of disability lead to stigma (Barg et al. 2010, 371). This results in isolation of the PwDs, since no one wants to be associated with sinners or victims of angered spirits and ancestors.

## **2.3 Impairment, Disability and Handicap**

As understandings and the concepts of disability differ from one country to the next, the World Health Organization (WHO) in cooperation with other international agencies has taken initiative to work on a series of general definitions and models of disability. In 1980, the World Health Organization (WHO) published a document entitled International Classification of Impairments, Disabilities and Handicaps (ICIDH) in order to promote a comprehensive understanding of impairment, disability and handicap.

Impairment is "any loss or abnormality of a psychological, physiological, or anatomical structure or function" (WHO, 1980, p. 47). Disability is "any restriction or lack (resulting from an impairment) of ability to perform an activity in the manner or within the range considered normal for a human being" (WHO, 1980, p. 143).

Handicap is "any disadvantage for a given individual, resulting from impairment or a disability, that limits or prevents the fulfilment of a role that is normal (depending on age, sex, and social and cultural factors) for that individual" (WHO, 1980, p. 183). The ICIDH was criticized for the way in which it implied that impairment itself caused "restriction of activities", and "limited opportunities," (Gray, Welch & Hollingsworth, 2000, pp. 171-178). This implication made "limited opportunities" seems inevitable for persons with impairments, and thus seemed to remove responsibility from governments and citizenry to ensure equal opportunities for persons with disabilities.

In addition, examples of different disability rates of developed and developing countries lead to the conclusion that disability is difficult to measure and to define. The World Health Organization (WHO) estimates the prevalence rates of disability is about 10 percent worldwide (WHO, 2006). In some developed countries like Australia, Britain, Canada and the USA, disability prevalence is about 18 percent (Krefting, 2002). In developing countries, figures vary widely as compared to those of developed countries.

Definitions of disability reflect society's view of disability and people with impairments. For this reason, disability scholars and activist groups have developed alternative definitions and models of disability as a way to explain their role in society. Most influential among these models has been the social model, developed by persons with disabilities in response to the medical model of disability (Oliver, 1990). The social model has been developed with the aim of removing social barriers so that persons with

disabilities have the same opportunities as everyone else, to establish their own life styles. The social model sees persons with disabilities as part of our economic, environmental and cultural society.

The barriers that prevent any individual from fully participating in society are the problems of society, not the individual. One criticism against the social model from a developing country perspective, however, is that government services have a fairly minor role in the everyday lives of poor people in developing countries. Families, kin, religious groups, neighbourhoods are more important to quality of life since people see themselves very much as part of larger groups, and also because governments are doing a little in terms of social welfare. The social model emphasizes barriers but does not emphasize mutual help and solidarity. As Shakespeare (1996) suggests, sometimes the values of the disability movement - for example, autonomy, independence, choices and rights - may in fact be specifically white, *Community Approaches to Handicap in Development (CAHD)*.

#### **2.4 Disability, Poverty and Exclusion**

It is widely acknowledged that there is a strong correlation between poverty and disability (WHO, 2004). Much has been written about the mutual relationship between poverty and disability, but there is a lack of empirical evidence that poverty causes disability in most literature (Kampen, Zijverden, & Emmett, 2008). As many researchers have defined the relationship between poverty and disability, it is necessary to review their definitions prior to making any claim that poverty causes disability. In their study *Reflections on Poverty and Disability: A Review of Literature*, Kampen et al. (2008) note that “the way poverty is conceptualized is inherently about value preferences that vary between individuals, organizations and societies” (p. 21).

According to Miles (2006), the United Nations describes poverty as “the denial of opportunities and choices most basic to human development-to lead a long, healthy, creative life and to enjoy a decent standard of living, freedom, dignity, self-esteem and the respect of others”(as cited in Kampen et al., 2008, p. 21). The more practical definition is developed by the World Bank. The Bank determined monetary indicator to identify poverty using a poverty line of income of less than US \$ 1 a day. As seen by the different definitions of poverty, one can realize that poverty is multidimensional in nature and many different factors influence the poverty of a country. It is hard to

consider a universal definition of poverty. However, efforts have already been initiated by a number of development organizations in developing countries to eliminate poverty, but there is no such notable initiative has undertaken for the majority of persons with disabilities. Therefore, “Poverty is still among the most important causes of impairment in most Asian and Developing Countries” (Nagata, 2007, p. 5).

The linkage between disability and poverty has gained global recognition. The international communities have turned their focus towards disability mainstreaming and the empowerment of persons with disabilities in developing countries. They proposed that poverty is a cause and consequence of disability (DFID, 2000; Khan & Bari, 2002). For this reason, development donors and program implementers in many developing countries have sought out new ways and means to reduce the causes and consequences of disability through eliminating poverty from society (CNDD, 2006; DFID, 2000). Nagata (2007) notes that “poverty is not only a dependent variable of social processes and social barriers, but also a root cause of many forms of impairments and disability” (p. 1).

It is now widely accepted that poverty and disability have reinforced each other and contributed to the increased vulnerability and exclusion of persons with disabilities (Khan & Bari, 2002). Being aware of this situation, international development organizations and their interest groups have begun to realize that the needs and rights of persons with disabilities cannot be fully addressed unless the underlying causes of poverty are tackled. In 2000, the Millennium Declaration by UN Member States set eight Millennium Development Goals (MDGs). The following three goals are directly related to persons with disabilities and their families: Eradicate severe poverty and hunger; Achieve universal primary education; Promote gender equality and empower women (WHO, 2004, p. 5).

Persons with disabilities in developing countries are not only experiencing unreasonably high rates of poverty, but being poor increases the probability of disability. In this way, negative attitudes towards persons with disabilities are reinforced by poverty, which creates impairments and these impairments in turn lead to disabilities. The linkage between poverty and disability shows that the vicious cycle of under development begins as a result of economic poverty, which then leads to malnutrition that causes disease, which then further leads to impairment and disability.

It assumes in many situations that people with impairments have low productivity; they could not contribute as much to the labour market as their peers. Their income levels become lower and they live in poverty. As this increases the effect of his or her impairments and leads to permanent disability, they continually face discrimination, segregation and stigma the moment they are perceived to be affected by impairment (World Bank, 2004). Recent research shows that persons with disabilities are systematically excluded from all development activities in many societies. This, in turn, limits their rights and challenges their ability to fulfil their socio-economic obligations (Nagata, 2007).

## **2.5 . General Description of the Study Area**

Physical disability has been defined in a variety of ways by scholars. Physical impairment is a type of disability that includes illnesses and diseases with a high incidence of disability. Physical disabilities are also those that necessitate the use of special services, training, resources, tools, or facilities due to physical restrictions or health issues that significantly impair the capacity to attend or learn at school. Although some children with physical difficulties also have visual or auditory impairments as secondary issues, these individuals are not included in our definition. In addition to mental retardation, learning difficulties, emotional or behavioural issues, communication disorders, or unique abilities, children with physical disabilities may also experience any of the following conditions.

The physical impaired and the health impaired is two subcategories of physical disability. Physical impairments also include issues brought on by conditions that impact the central nervous system, the loss of limbs or other body parts, or other bodily functions. These ailments have an impact on how youngsters use their bodies or their motor skills. Physical impairment, in short, is a condition that affects the skeletal system physically and is linked to motor function, such as affecting the muscular and skeletal system and the central nervous system, which negatively impacts children's psychological, educational, and developmental milestones.

Physically disabled people being kept out of the workforce have a negative economic effect on the family, community, and nation levels. The biggest barrier to adult income generation and long-term financial stability for people with physical disabilities is the accessibility deficit they suffer. According to recent studies, accessibility for people with

disabilities increases wages, while keeping them out of the workforce costs a nation's GDP anywhere between 3% and 7%.

## 2.6 Operational Definition of Basic Concepts and Terminology

- **Impairment** is a partial or entire loss of function in a body component or organ; this includes temporary or permanent loss of physical, mental, visual, auditory, and other physical and sensory impairments. Activity restriction is an indicator of a person's medical condition, visual or hearing loss, mental illness, and physical restrictions when the body experiences physical, emotional, and mental sickness.
- **Disability** is a long-term physical, mental, intellectual, or sensory (vision and hearing) impairment that, when combined with institutional, environmental, social, and psychological impediments, may prevent a person from fully and equally participating in society (UNCRPD, 2006).
- **Disability Inclusion** entails involving persons with disabilities in regular activities and encouraging them to take on roles that are comparable to those of their peers who are not disabled. Making sure that appropriate rules and procedures are in place in a community or organization entails more than just encouraging people.
- **Communication** includes languages, display of text, Braille, tactile communication, large print, accessible multimedia as well as written, audio, plain-language, human-reader and augmentative and alternative modes, means and formats of communication, including accessible information and communication technology.
- **Language** includes spoken and signed languages and other forms of non-spoken languages.
- **Reasonable Accommodation** refers to the necessary and appropriate medications and adjustments not imposing a disproportionate or undue burden where needed in a particular case, to ensure the enjoyment or exercise on an equal basis with others of all human rights and fundamental freedoms, irrespective of disability, gender or age. E.g. Sign language interpreter, screen readers, etc.
- **Discrimination on the Basis of Disability** means any distinction, exclusion or restriction on the basis of disability which has the purpose or effect of impairing

or nullifying the recognition, enjoyment or exercise, on an equal basis with others, of all human rights and fundamental freedoms in the political, economic, social, cultural, civil or any other field. It includes all forms of discrimination, including denial of reasonable accommodation;

- **Universal Design** is defined as the design of products and environment to be used by all people, to the greatest extent possible, without the need for adaptation or specialized design. The approach focuses on design that works for all people regardless of age, ability or situation.
- **Assistive device** or technology refers to a device or technology that aids a person in completing a task that they otherwise won't be able to perform

## **2.7 Theoretical Framework**

### **2.7.1 Disability Models**

Though different definitions were given by different concerned bodies, conceptualizing the models and theories are important in changing society's perception on the status of persons with disabilities within the environment they live per (Kaplan, (2000). These models are moral or religious model, individual or medical model and social or political model as Amaze cited Hamele's, McLean's & Williamson's work (Amaze, 2013). For the purpose of this study, disability model was conceptualized as per Kaplan (2000) study and enrich the research inquiries.

Furthermore, knowing the models can clear people's illusion and believed to direct them on the right track of understanding about disabilities in general and realize the importance of giving the necessary services and supports at least to overcome the challenges they face during their university enrolment or study (Kaplan, 2000). Disabilities are characterized from the point of view of disability models, which are categorized into four different historical and social models, such as a moral model, a medical model, a rehabilitation model and the disability model (Kaplan, 2000).

The disability model, under which the problem is defined as a dominating attitude by professionals and others, services when compared with society generally, as well as attitudinal, architectural, sensory, cognitive, and economic barriers, and the strong tendency for people to generalize about all persons with disabilities missing the large variations within the disability community (Kaplan, 2000).

The disability model recognizes social discrimination as the most significant problem experienced by persons with disabilities and as the cause of many of the problems that are regarded as inherent to the disability under the other models (Kaplan, 2000). Disability paradigm that has emerged in the last two decades, describes disability not as a medical condition or a personal tragedy of the individual, but the product of the interaction between the individual and his or her environment (Almog, 2011). What are described by Kaplan (2000), as a disability model is most related to social model as mentioned by Almong (2011) and other researchers. The theoretical framework of this research is also depends on the disability model. Adjusting the environment will bring educational, material, economical and psychological achievement for PWDs in governmental institutions.

## **2.8 Empirical Literature**

### **2.8.1 Misconceptions about Disability and the Disability Rights Movements in Ethiopia**

In Ethiopia, there have been traditional beliefs and misconceptions about disabilities portraying disability as a direct consequence of curses, witchcraft and bad omens. Persons with disabilities have for a long time been viewed as sub-humans, devoid of rights, equality and dignity (Dagnachew 2006, cited in Dagnachew, 2011).

The way PwDs are described in nearly all of the major legislations and codes governing the country, such as the *Civil Code*, *Penal Code* and *Commercial Code*, is dehumanizing of this group. Most of these legislations were promulgated in the 1960s, and still exist without any modifications to the terminologies they employ in describing PwDs. For example, both the English and Amharic (which is the Ethiopian national language) versions of the Civil Code of Ethiopia use terms such as ‘insane person’ and the ‘feeble minded’ to refer to people with intellectual impairments; ‘cripples’, to refer to persons with physical impairments and ‘infirm person’ for people with sensory impairments (Dagnachew 2006, cited in Dagnachew, 2011). To date, some of these expressions are being used as they are without any replacement by presently acceptable disability-friendly terms (Dagnachew, 2011).

The first national policy document addressing issues of disability came to light in 1971 under the rule of Emperor Haile Selassie, with the adoption of an imperial order known as the Rehabilitation Agency for the Disabled Order No. 70/71. Through this Order,

the Emperor had founded a stand-alone organization named the Rehabilitation Agency for the Disabled, which operated on the principles of the then-dominant charitable and medical rehabilitation paradigms. The Ethiopian National Association of the Blind (ENAB), founded in 1960, is the country's first recognized organization that focuses on disabilities (The Federation of Ethiopian National Associations for Persons with Disabilities, 2010, cited in Dagnachew, 2011).

Early in the 1990s, a legitimate disability movement started to take shape in Ethiopia. A few clusters of DPOs, primarily distinguished by a single-disability representation, started to emerge in Ethiopia as a corollary to the various international and regional disability movements of the 1980s and 1990s. Also, it was during this time that the Ethiopian Constitution explicitly mentioned disabilities for the first time (Constitution of the Federal Democratic Republic of Ethiopia, 1995, cited in Dagnachew, 2011).

### **2.8.2 Disability Inclusion and Development**

Over the past two decades, understanding about disability and persons with disabilities has evolved dramatically in many parts of the world. There is a growing realization that limitations on the participation of persons with disabilities in society and its institutions stem from interactions between the individual's impairment and attitudinal as well as environmental barriers. This trend has fostered an increasing recognition of the rights and abilities of persons with disabilities, and their potential to contribute to society (International Labour Organization, 2011).

Program objectives should explicitly and clearly state that the target population includes people with a range of different disabilities (cognitive, intellectual and other developmental disabilities, mobility, visual, hearing, and mental health disabilities). Moreover, program development, implementation, and evaluation should include inputs from people with a range of different disabilities and their representatives, such as community members or other experts with disabilities, potential participants with disabilities and their family members, personal assistants, and caregivers (Centre on Disability at Public Health Institute, 2014).

Programs should also be accessible to people with disabilities and other users socially, behaviourally, programmatically, in communication, and in the physical environment. Similarly, programs should address individual needs of participants with disabilities through accommodations that are specifically tailored to those needs. Besides,

Programs should be affordable to people with disabilities and their families, personal assistants, and caregivers (Centre on Disability at Public Health Institute, 2014). Women and men with disabilities can and want to be productive members of society. In both developed and developing countries, promoting more inclusive societies and employment opportunities for people with disabilities requires improved access to basic education, vocational training relevant to labour market needs and jobs suited to their skills, interests and abilities, with adaptations as needed. Many societies are also recognizing the need to dismantle other barriers – making the physical environment more accessible, providing information in a variety of formats, and challenging attitudes and mistaken assumptions about people with disabilities (ILO and Irish Aid Fact Sheet, 2013).

In Ethiopia, there are an estimated 15 million people with disabilities, including children, adults, and elderly people, or 17.6% of the total population. Most people with disabilities reside in rural regions with limited access to essential services. It is believed that 95% of Ethiopia’s disabled population is impoverished. Many people rely on their families and begging to make ends meet (World Bank and World Health Organization, 2011; and MoLSA, 2010, cited in ILO and Irish Aid Fact Sheet, 2013).

In 2010, Ethiopia ratified and accepted the UN Convention on the Rights of People with Disabilities (UNCRPD), one of the most important international legal instruments pertaining to the rights of people with disabilities. There is still a huge need to engage with people with disabilities toward their full inclusion in all sectors of society, and for the different stakeholders to collaborate more closely, despite the government’s efforts and the endeavours of national and international non-governmental organizations (Light for the World, ND).

The Ethiopian government issued “Right to Work of People with Disability” Proclamation No. 568/2008 to emphasize the importance of PWDs. This declaration defines a “Person with Disability” as a person whose access to equitable employment is limited due to physical, mental, or sensory disabilities in connection with social, economic, or cultural discrimination. This proclamation is based on Article 55 of The Federal Democratic Republic of Ethiopia’s Constitution. Unless the nature of the job requires otherwise, a person with a disability who possesses the required credentials and scored higher than other applicants is entitled, without facing any discrimination:

a) to fill a vacancy in any office or undertaking through procedures for recruitment, promotion, placement, or transfer; or b) to take part in a training program that will be held either locally or abroad.

### **2.8.3 Health and Rehabilitation Services**

Disability is a multifaceted and intricate notion that includes impairments, activity constraints, and participation limitations. The main goals of rehabilitation and assistive technology services are to help persons with disabilities and improve their functional limits. These services are essential and crucial in helping those with physical, sensory, communication, and cognitive challenges participate in society and integrate (Ministry of Health-Ethiopia, 2020).

Global data suggests that non-communicable diseases (NCD), such as diabetes, stroke, and hypertension, are important contributors to disability in addition to environmental hazards like traffic accidents. In order to meet the demands of both the disabled and the aging populations with increased non-communicable disease prevalence, rehabilitation is a crucial health service.

Currently there are more than 15 physical rehabilitation centres operating in Ethiopia. Medical rehabilitation service is about compensating for the loss of body functioning, restoring body functioning as much as possible and preventing or slowing deterioration in functioning in every area of a person's life. It includes a wide range of activities including rehabilitative medical care, physiotherapy, speech therapy, occupational therapy, assistive technology service delivery, eye health, as well as ear and hearing service. The physical rehabilitation services in a medical rehabilitation centres include production and provision of a wide range of appropriate orthotic and prosthetic devices, wheelchairs, mobility aids, physiotherapy and occupational therapy (Ministry of Health-Ethiopia, 2020).

In Ethiopia, the prevalence of blindness and low vision is 1.6% and 3.7% respectively, representing one of the highest prevalence rates in Sub-Saharan Africa and the world. There are only around 130 general ophthalmologists and 20 subspecialists practising in the country of which around 60% reside in Addis Ababa and only about 51% work in the public sector. Light for the World is among the major actors in the eye health sector in the country by supporting 2 tertiary eye units, 13 secondary eye units (SEU)

and 28 primary eye units and is also supporting the elimination of blinding trachoma in Oromia and Tigray in partnership with their Regional Health Bureaus (RHB). Ethiopia has one of the highest prevalence rates of active trachoma worldwide with more than 73 million people being at risk of infection. It is estimated that 15.7 million people are at risk of infection of Onchocerciasis, and around 10 million people are at risk of Lymphatic Filariasis (LF), the second leading cause of disability worldwide. Light for the World supports the elimination of Onchocerciasis and LF in western Oromia and Lymphatic Filariasis Tigray Region (Light for the World, ND).

#### **2.8.4 Mobility and Safety Issues**

Mobility and safety are basic human needs for all persons who travel for different purposes. Public transport has a key role in ensuring accessibility to activities and services. There are many influences on the use of public transport, including special access, cost, physical accessibility, information and attitudes which all contribute to people's ability and motivation to use those transportation systems (Rahel, 2017).

Contrary to what one might think, Addis Ababa's urban transportation system is unable to meet particular needs in either the public or private sectors, despite poor traffic management and control. Many persons with disabilities are excluded from daily life activities, do not have equitable access to health care, education, and career prospects, and do not get the disability-related services they need. The unique demands of PwDs, children, women, and the elderly are not adequately met by the urban transport management system (Rahel, 2017).

#### **2.8.5 The Roles of ICT and Assistive Devices**

With the advent of Information and Communications Technology (ICT), new hopes are emerging for PwDs. Despite the huge challenges, sincere efforts are being undertaken to implement the use of ICT to tackle obstacles related to disability. The information society represents at once significant opportunities but also potential new barriers for the social inclusion of disabled people (Eid, ND).

Information and communications technology and assistive technology offer new opportunities for everyone, but these opportunities are specifically more useful for PwDs, who use assistive technology for their daily activities to a higher extent than people without any disability. Today's assistive technology, which is adapted to

everyone's abilities, means that end users with some impairments are able to participate in all aspects of social life on more equal terms than ever before. It is vital that people are able to benefit on an equal basis from the rapid development of ICT, to enable them to engage in an inclusive and barrier-free information society. Hence, ICT should be properly planned and implemented.

### **2.8.6 Employment Opportunities for PwDs**

People with disability are excluded from most walks of life in all sectors including employment and education. Misconceptions about disabilities, combined with lack of knowledge about the potentials of these members of our society, have contributed a lot to the limitation of employment opportunities (Tirussew, 2005, cited in Tirussew et al, 2013). Females with disabilities are at a further disadvantage because of gender role stereotyping which leads to double discrimination (Tirussew et al, 2013).

Graduates with disabilities in Ethiopia tend to face serious labour market barriers and are at higher risk of unemployment. There are fragmented evidences showing that university graduates with hearing, motor and visual disabilities are not served on equal basis to secure jobs, despite having the required qualifications; this is mainly due to attitudinal and related factors (Tirussew et al, 2013).

## **CHAPTER THREE**

### **RESEARCH DESIGN AND METHODOLOGY**

#### **3.1 Introduction**

This chapter described the research design and methodology the researcher adopted in carrying out the study. According to Sharma (cited in Prince, 2015), “methodology refers to as system of principles and methods of organizing and constructing theoretical and practical activity. Therefore, this section framework the research design, the research approach, target population, sampling techniques, sample size, sources of data, data collection tools, method of data analysis, validity and reliability and ethical considerations.

#### **3.2 Research Design**

According to DeVaus (2006), the research design is the overall approach you select to integrate the various study components in a coherent and logical way, ensuring you will effectively address the research problem. It also serves as the guide for the data collection, measurement, and analysis processes. (pp 175).

To better understand their perspective on the supports and services that the community provides to people with disabilities, the researcher has chosen a qualitative and quantitative research methodology that involved the collection and analysis of primary and secondary data. In order to describe a phenomenon and its traits, the research has also used descriptive case studies. This study is more interested in what occurred than in how or why it occurred. As a result, the researcher believes that this design is appropriate for addressing the study's research topic.

Descriptive research is an investigation in which the researcher examines, codes the data for descriptions of themes, and interprets the meaning of the data using personal perspectives (Williams, 2007).

#### **3.3 Research Methods**

Both Quantitative and Qualitative research were used because the research is an open ended thought of problems and need to explore and understand the situation. On the one hand as Bryman & Bell, indicated (cited in Daniel C.N and Berinyuy L.P, 2010, p. 21) among the five different types of research designs the researcher chooses a

descriptive case study design to accomplish the research. As Yin (2009) stated that descriptive case study is chosen to explore more specific representative that comprises the cases in the study.

### **3.4 Area of the Study**

The Study was conducted at Addis Ababa, Ministry of Women and Social Affairs and Ministry of Justice. The study area has been purposefully chosen by the researcher since the researchers' prior knowledge of the service provision for persons with physical disabilities and has deep knowledge about the two organizations. This enables the researcher to understand the reality and easily collect data from the research participants.

### **3.5 Population, Sample and Sampling Procedure**

#### **3.5.1 Population for the Study**

According to Omari (2011), a population is the sum of all units that share one or more traits that the researcher is interested in. It involves a bigger group of individuals, an organization, or something that shares one or more traits with the topic of the study. It comprises of all instances of people or things that meet a given criteria (Kothari, 2004). The ministry of women and social affairs, the ministry of justice, including its unity of study, and all physically challenged people within the mentioned organizations were the study's target populations.

#### **3.5.2 Sample of the Study**

Ary et al. (1996) defined a sample as a small group or subset of a population that a researcher chooses for the study's objectives and from which generalizations about the population's characteristics are made. People with physical disabilities in both organizations, CEOs, directors of the organizations, non-disabled people, and organizations for people with disabilities /DPOs/ were all sampled for this study.

### 3.5.3 . Governmental Organizations

According to the proclamations 1263/2014, there are twenty two (22) federal ministries. Due to the purpose of this study, data was gathered from two (2) carefully selected ministries. According to Kothari (2004), this social sample unity comprises members who are pertinent for information, such as heads of institutions, directors, and people who do not have disabilities.

Table 1. shows organizations that were involved in the study.

No	Name of Ministries
1	Ministry of Women and Social Affairs /MoWSA/
2	Ministry of Justice /MoJ/

### 3.5.4 Sample of Persons with Physical Disabilities

All physical impaired people in the two sampled ministries in Addis Ababa were intended to participate in the study. A list of individuals with physical disabilities was created using the public services offered at public service offices. There were twenty one (21) physically challenged people who were directly involved in the study as respondents and who were currently employed by both ministries in Addis Ababa. Their number relied on their availability and willingness to participate in the study. To uncover issues at all levels in organizations, this involved all physically challenged people.

### 3.5.5 CEOs of the Organizations, Directors, Non-Disabled Persons in the Organizations

In order to get their experiences and opinions about the issues faced by people with physical impairments in government organizations, the study included a sample of CEOs of organizations, directors, and people without disabilities. According to the number of organizations included in the study, five (5) CEOs of organizations, ten (10) directors from each sampled ministry, and sixty-four (64) people without disabilities from both selected sampled ministries were also included. Additionally, fifty (50) DPO members were asked for their opinions on how to address issues that physically challenged people face in the workplace. It was anticipated that the phone number created for institution heads, directors, and DPOs would be accessible,

pertinent, and sufficient in delivering information on issues impacting physically challenged people in the organizations.

Table 2: Persons with Physical Disabilities, CEO of Organizations, Directors, DPOs, Persons without Disabilities

No	Sample Type	No. of Respondents	No. of Respondents
1	Persons with Physical Disabilities	21	21
2	CEO of Organizations	5	4
3	Directors	10	7
4	DPO Members	50	46
5	Persons without Disabilities	64	51
	Total	150	129

### 3.5.6 Sampling Techniques

According to Oddho and Kombo (2002), sampling is the process of choosing a number of people or things from a population so that the chosen group has aspects that are typical of the qualities prevalent in the full group. For the sampled ministries, where all the study's units - including all physically challenged people, CEOs, Directors, DPOs, and non-disabled people - were included, a purposive sampling technique was used. Purposive sampling strategies, according to Omari (2011), involve selecting units that are most pertinent to the issue or knowledgeable about it and studying them.

### 3.6. Data Collection Tools

Despite the fact that both qualitative and quantitative research can use a wide range of data collection techniques, the researcher has choose to use questionnaires, in-depth interviews, key informant interviews, document analyses, and observation/ field visits.

### **3.6.1 Questionnaire**

A questionnaire which contained close and open ended questions was developed for persons with disabilities. The questionnaire solicited information from persons with disabilities about their demographic data, accessibility challenges` during their services searching, and service provisions and modifications in their respective organizations.

### **3.6.2. In-Depth Interview**

The person with physical limitations who were chosen for the interview underwent a thorough interview. This is due to the fact that they are direct consumers of the community's services and supports, and it is thought that they are familiar with many supports and services available, the difficulties encountered, and the opportunities realized. They are able to express what they believe to be the problems' remedies.

In order to accomplish this, semi-structured interview questions have been designed in order to comprehend the underlying causes, viewpoints, and circumstances as well as to get a sense of how the person with a physical disability perceives the difficulties they encountered, the opportunities they were given, and the quality of the services the office gave to them. Participants were interviewed using the guided interviewing method, with the questions written in English. Interviews were held anywhere was convenient within the chosen ministries, according to the interviewees' preferences.

### **3.6.3. Key Informant Interview**

In addition the workers in the ministries and selected OPDs found in Addis Ababa were also interviewed as a key informant to triangulate the data collection. This is because these key informants have direct connection with the support and service provision so that they know and understand about the services & support provisions, the challenges faced and opportunity gained by the person with physical impairment.

### **3.6.4. Observations and Document Review**

To understand the overall situations and to achieve the research goals, data collections were combined through observation. In the interim, a personal observation was conducted in the location where the persons with disabilities work and receive services and where individuals with disabilities encounter difficulties in obtaining and giving services on a daily basis.

In order to fully comprehend the study problem, a small number of documents were examined as a key source of data. As a result, material pertaining to the study's goal was validated, and it also served to support whether or not a similar study was conducted (Marshall & Rossman, 1995).

### **3.7. Data Organization, Analysis and Report Writing**

Data collection and analysis can co-occur when conducting qualitative research. This indicates that data gathering and analysis are carried out concurrently. Thus, the researcher began to analyse the data that had been gathered from the respondents in the form of notes from interviews and focus groups, observation, as well as carefully examined relevant documents.

As indicated on the design part of this chapter, the data analysis was descriptive data analysis where interviewees' responses were directly narrated and analysed to draw findings. Themes were checked whether one is construct on the other or not and as necessary a further breakdown were made. Contents or the data set of each final theme were analysed for purposes of classification, summarization and tabulation. In general, data were recorded, transcribed, coded, categorized, and themes developed.

### **3.8. Ethical Considerations**

William (2011) asserts that ethical concerns are necessary while conducting research involving human subjects. In order to conduct the interview and talks with people with physical disabilities in an ethical manner, the researcher made sure to explain the goal and significance of the research as well as to treat them with respect. The study's participants were made aware that taking part was completely up to them and that they could opt out of the interview or group discussion at any point if they felt uncomfortable. All participants were also made aware of the confidentiality of their responses both during and after the investigation, according to the researcher.

## **CHAPTER FOUR**

### **THE RESEARCH FINDINGS, ANALYSIS AND DISCUSSION**

#### **4.1. Introduction**

The purpose of the study, the research objectives, and the research questions were discussed in this chapter along with an analysis and presentation of the findings. The Statistical program for Social Science (SPSS) for windows software program, version 16.0, was used to analyse quantitative data. To ascertain the percentage of answers for specific items, frequencies were run. Thematic analysis, on the other hand, was used to gather qualitative data. The study's goal was to examine the infrastructures and social issues that people with disabilities are dealing with in specific selected ministries in Addis Ababa as a case study. It also looked at the infrastructure situation and sought input from stakeholders on how society can deal with these issues.

This study focuses on the situation of persons with disabilities in the selected ministries. It attempts to describe the situation of persons with disabilities in terms of barriers and challenges in the ministries, service provisions in the selected ministries. More specifically, the availability of services, the challenges they face on the organizations and the barriers and the measures taken by the organization officials in order for the people with disabilities to provide accessible environment were addressed in this study.

#### **4.2. Persons with Physical Disabilities Background Information**

The study collected information on gender, civil servants with physical disabilities who were the main respondents, as the study wanted to explore problems that they faced at selected ministries in Addis Ababa.

##### **4.2.1 Persons with Physical Disabilities by Gender, Age, Level of Severity and Onset of Disability**

According to data gathered on the gender of persons with physically disabilities in Addis Ababa's sampled ministries, out of the 21 physically disabled people from the two ministries that were visited, seventeen (17) were males, making up 81 percent of the sample as a whole, and four (4) were females, making up 19 percent. Physically challenged people are more clearly displayed in Table 3.

Table 3: Distribution of Participants' Numbers, Age, and Gender, Level of Severity and Onset of Disability

Variables	Category	Number	Total	
			Number	Total
Number	Type	21	21	100%
Age	20-30	2	2	9.5%
	30 -40	15	15	71.4%
	> 40	4	4	19.04%
Sex	M	17	17	80.9%
	F	4	4	19.4%
	T	21	21	100%
Level of Severity	Mild	6	6	28.5%
	Moderate	11	11	52.3%
	Severe	2	2	9.5%
	Profound	2	2	9.5%
Onset of Disability	Before	3	3	14.2%
	During	1	1	4.7%
	After	17	17	80.9%

Respondents were also asked the level of severity of their disabilities. In terms of severity, 28.5% of the respondents reported to have mild disabilities while 52.3% have moderate, 9.5% have severe and 9.5% have profound disabilities. In a similar manner, people with disabilities were asked to report the time of onset of their disabilities. In response, people with disabilities reported the time of onset of disability in this study. Surprisingly, 80.9% of them reported that the onset of disability was 'after birth' whereas only 14.2 and 4.7 percent of the persons with disabilities reported the onset as 'before birth' and 'during birth' respectively.

### 4.3 Infrastructure Situations at Selected Ministries

In order to ascertain if the environments in Addis Ababa's sampled ministry organizations assist people with physical disabilities to work and live comfortably, the study tracked infrastructure problems in contexts of availability, accessibility, and

condition. Offices, cafeterias, administrative offices, and toilets areas were among the places that the study looked at. These are presented under the following points.

#### 4.3.1 Infrastructure Availability at Selected Ministries Organizations

The study found that, 63.8% of the facilities at the sampled ministries organizations visited were available but inadequate. These facilities included offices, cafeterias, administrative offices, and toilets. The researcher also discovered that just 10.46% of all facilities were both available and adequate, compared to an average of 63.8% of all infrastructures that were available and inadequate. 20% of the infrastructures of the sampled ministries' organizations were available but highly inadequate. Only 5% of the facilities are non-existent not available. Results of infrastructure availability at sampled ministries in Addis Ababa are shown in Table 4.

Table 4: Infrastructure Availability at Selected Ministries in Addis Ababa

Infrastructure	Availability							
	Available and Adequate		Available but Inadequate		Available but Highly Inadequate		Not Available	
	Frequent	Percent	Frequent	Percent	Frequent	Percent	Frequent	Percent
Offices	4	19%	11	52.3%	6	28.5%	0	0%
Cafeterias	2	9.5%	14	66.6%	1	4.7	1	4.7%
Administrative Offices	2	9.5%	11	52.3%	7	33.3%	1	4.7%
Toilets	3	14.2%	10	47.6%	7	33.3	1	4.7%
Total	11	10.46	46	63.8 %	21	20%	3	5%

The study's findings indicate that while many critical infrastructural areas appeared to be readily available but severely insufficient, very few ministry organizations have readily available and suitable infrastructural systems for physically challenged people. Physically impaired persons are hampered in their work growth by this predicament, which forces them to rely on their peers and, as a result, causes them to work more theoretically than practically. By making sure that the necessary facilities are sufficient and inclusive, the issue can be prevented. The researcher saw that many persons, particularly those with physical disabilities, depended on less useful work resources like soft copy and notes while avoiding competence-based working tools that are present in inaccessible facilities like soft copy materials.

In order for all persons, persons without disabilities and persons with disabilities to work more practically, it is advised that something to be done to ensure that at least all relevant working resources are provided. Physically challenged persons will be able to obtain crucial job knowledge and skills via practical activities that will not only assist them compete in the job/labour market but also enable them to engage in self-employment.

#### 4.3.2 Infrastructure Accessibility in Ministerial Organizations

We also looked at the sensitive issue of infrastructure accessibility at governmental organizations, which directly impacts the lives of people with physical disabilities. Out of the two ministry organizations examined for this study, around 85% of their infrastructure was accessible with difficulty to people with physical disabilities. Only 7.5 percent of the infrastructure at two ministry organizations was readily accessible, and 7.5 percent of the infrastructure was not accessible to those with physical disabilities. Table 5 presents more thorough results.

Table 5: Infrastructure Accessibility at Governmental Organizations in Addis Ababa

Infrastructure	Easily Accessible		Accessible with Difficulty		Not Accessible	
	Frequent	Percent	Frequent	Percent	Frequent	Percent
	Offices	5	23.8%	14	66.6%	2
Toilets	1	4.7%	15	71.4%	5	23.8%
Administrative Offices	1	4.7%	13	61.9%	7	33.3%
Cafeteria	1	20%	5	100%	1	20%
Total	8	7.5%	22	85%	3	7.5%

Both ministries have significant issues with the accessibility of their infrastructure for physically challenged persons. There were many places around ministries that were difficult for physically impaired persons to access, including offices, cafeterias, administrative offices and toilets.

Despite having the same right to work as other peoples, governmental organizations do not take into account physically disabled persons, and as shown in figures 4 and 5, many infrastructural systems have barriers like stairs, narrow paths, higher chairs and tables in offices and administrative offices, and unsupportive toilets that are not

friendly for them. Persons with physical disabilities who used wheelchairs and grab bars found it challenging to get to several locations because of the infrastructure's lack of accessibility. Those physically challenged persons who do enrol in ministries are more likely to leave their work early, according to Filmer's (2005) argument.

As witnessed by a researcher, in both ministries the situation is not convincing at all, as many infrastructure are not accessible easily for persons with physical disabilities. For example, one of the physically disabled male person in one of the institution exposed his experience to the researcher on how he suffered to access to toilet which was not designed to suit his condition. In parallel to that, the toilet was used by more than twenty other persons without disabilities to the sense it was very dirty and worse enough and was not accessible by wheel chair, and he had to crawl instead.

It is advisable that both governmental organizations have plans that all buildings and infrastructure such as offices, cafeterias, toilets and administrative offices by considering people with disabilities like putting slopes, ramps and lifts in higher buildings so that every persons in spite of his/her condition could move and make the use of any environment that are comparable to their needs easily.

Figure 1: Unsupportive Infrastructures for Physically Disabled Persons at one of Sampled Governmental Organizations in Addis Ababa.



Source: Field Data

The study also found long distances from one place to another within organizations a very big barrier to persons with physical disabilities. Many physically disabled persons got trouble in moving from point to point due to long distances between one building and another or between one office and another in one building. For example, long distance from office to toilets. Such long distances hinder physically disabled persons to reach and get different services in time. Due to the nature of their disabilities physically disabled persons spend much time walking comparing to non-

disabled persons when seeking different services at the institutions such as administrative offices and toilets. No extra time or remedial times were provided in case the physically disabled persons reached to offices late or when they miss working times.

Due to that situation it will be a good idea for planners in all governmental institutions to consider distances between one building and another when designing. However, reasonable accommodation should be sensitive to persons with physical disabilities by giving them working priorities through providing extra time if there is need to do so.

### 4.3.3 Infrastructure Conditions at Governmental Institutions

According to the findings of the survey, 35% of the average infrastructures at Addis Ababa's sampled service delivery organizations' offices, cafeterias, administrative offices, and toilets were in good condition. Similarly 35 percent of all facilities had mediocre or average conditions, while 25 percent had extremely poor conditions. Only 5% of all facilities at all service delivery institutions were in excellent shape and acceptable for persons with physical disabilities. Table 6 details the state of the infrastructure of the sampled ministerial institutions.

Table 6: Infrastructure Conditions at Sampled Service delivery Organizations in Addis Ababa.

Infrastructure	Conditions							
	Very Good		Good		Average		Poor	
	Frequency	Percent	Frequency	Percent	Frequency	Percent	Frequency	Percent
Offices	1	20%	2	40%	2	40%	1	20%
Cafeterias	0	0%	4	80%	3	70%	0	0%
Administrative Offices	1	20%	3	60%	4	80%	1	20%
Toilets	0	0%	4	80%	2	40%	2	40%
Total	2	5%	15	35%	15	35%	6	25%

The research revealed that administrative offices and workers offices with similar surroundings, as seen in figure 2, had adequate infrastructural conditions. However, the infrastructural conditions in other locations, such as the restrooms, were significantly worse, especially for people with physical limitations, to the point that their health was in risk. Some people with physical disabilities claimed that using restrooms that were unsupportive, filthy, and shared by many people, as seen in figure

3, made life extremely difficult for them. According to Croft (2010), the infrastructure and overall working environment are less accommodating to physically challenged people working in service provider workplaces.

The condition is not convincing, as stated above, thus one director of the organization needs to take physical impaired people into consideration by paying attention to their unique demands. This is directly related to making sure that all surroundings, including offices, restrooms, and adequate cafeterias are conducive. By doing so, excessive complication will be avoided, and everyone will feel welcome and enjoy the surroundings.

Figure 2: Good and Supportive Infrastructures in Administrative Blocks at Sampled Governmental Organizations in Addis Ababa.



Figure 3: Poor and Unsupportive Infrastructure in Persons Restroom Areas Used by Physically Disabled Persons at Sampled Ministerial Organizations



#### **4.4 Work Place Problems Facing Persons with Physical Disabilities in Governmental Organizations in Addis Ababa**

The study examined work problems that were facing persons with physical disabilities in governmental organizations. The aim was to get experiences and challenges from physically disabled persons on job context and how they cope with the situations basing on their disability condition. The study visited physically disabled persons in

sampled ministerial organizations in Addis Ababa to get diverse responses and experiences basing on institutions they were working. These are presented under 4.4.1 to 4.4.2 consecutively.

#### 4.4.1 Working Materials Availability for Persons with Physical Disabilities

Regarding whether or not working supplies were available for people with physical disabilities, the question called attention to those who are physically challenged. Out of 21 physically challenged people who were visited and interviewed, all of the sampled governmental organizations, 19 of them, or 90.4 percent, agreed that there were working materials accessible for them. Two (2) of the 9.5% of physically challenged people did not agree that there were working materials available for them. The information collected from people who are physically challenged at service delivery organizations in Addis Ababa is summarized in Table 7.

Table 7: Working Materials Availability for Persons with Physical Disabilities at Governmental Organizations

Question	Yes/No	Frequency	Percent
Are working materials available for persons with physical disabilities?	Yes	19	90.4%
	No	2	9.6%
	Total	21	100%

These results show that in most service delivery organizations there were enough working materials for physically disabled persons. Some physically disabled persons argued that in work context they were treated equally with other persons who are not physically disabled hence work materials such as computers, sitting chairs, tables, brushers, pamphlets and all other work materials were distributed equally to all persons.

The majority of people are in a position to easily access working materials, as evidenced by the data. The organization itself or any other stakeholders can help the surviving individuals, who were few in number and had difficulty gaining access to working supplies, so they can fulfil their objectives like others. Additionally, it would be much better if the institutions took extra steps to guarantee that offices were fully furnished with all necessary office supplies that met each person's needs according to their line of work.

#### 4.4.2 The Situations of Work Support from Fellow Persons

In assessment of whether or not persons with physical disabilities got work support from their fellow persons, the study found out that all persons with physical disabilities who responded to the research instruments 100% got work support from their fellow persons.

Table 8. The Situations of Work Support from Fellow Persons

Do you get any work support from your fellow persons?	Frequency	Percent
<b>Yes</b>	<b>21</b>	<b>100%</b>
<b>No</b>	<b>0</b>	<b>0%</b>

Persons without physical disabilities showed real acceptance and appreciation of fellow persons work responsiveness and support to them. In work issues like field works, seminar presentations and all job activities, peoples in the organizations, without considering ability or disability of any one, were very supportive of each other.

*“I’m very free and comfortable when I participate together with my fellow people in various social activities including my job. It was different when I was in the community at grass root levels when some of partners did not gave me full cooperation like I experience now”*

The research revealed good work support given by persons without disabilities to persons with physical disabilities. This shows big level of understanding and acceptance among organization persons towards their fellow persons who are physically disabled. This has been facilitated by great exposure of persons in governmental organization in which they work together with varieties of people with diverse in culture, family background, nationality and physical abilities as well. Ethiopian and other societies in general has to take a good example shown by organization community on how they interact together in different social and work activities with their fellow partners who are physically disabled without showing any kind of discrimination and isolation to them.

## 4.5 Social Problems Facing Persons with Physical Disabilities in Governmental Organizations

Despite the fact that work-related issues are the main activity people engage in, social life is still an extremely important experience at service delivery businesses. Physically disabled people especially require this kind of participation because by their very nature they are social beings. Physically challenged people have a common social life with other people who are not disabled, and they occasionally experience a difficult, complex, and hard life at governmental organizations in a variety of contexts and scenarios. They also experience joyful moments that they can share with their friends or co-workers in a community of learners. The presentation of them is made under items 4.5.1 to 4.5.4.

### 4.5.1 Participation and Interactions of Persons with Physical Disabilities with Other Persons without Disabilities at Selected Ministries.

The purpose of the study was to determine whether individuals with physical disabilities found it challenging to socialize and participate in activities with their peers at organizations that provide services. According to table 9, (91.7%) of people with physical disabilities had no trouble socializing and participating in activities with other people. Only two persons or (8.3%) percent of all persons with a physical disability had considerable trouble engaging with other people.

Table 9: Participation and Interactions to persons with Physical Disabilities with Other people at the governmental organizations

Questions	Yes / No	Frequency	Percent
Do you experience any difficulties in participating and interacting with other students?	Yes	2	8.3%
	No	19	91,7%
	Total	21	100%

The majority of physically disabled people interviewed claimed to live and communicate with friends and other people in a very free and comfortable manner. People without impairments were treated as normal people in service delivery organizations, and they were very free to interact with one another and share social and professional experiences without any barriers. Even though it can be challenging at times because of distances and the nature of gathering locations, one of the

physically impaired people claimed that *"I do not face that much difficulty" since she does her best to interact with her fellow human beings.* A second individual with a physical disability stated, *"I interact with them, but those of them who are not close friends with me are not free to ask me or share.*

Physically impaired people should be treated equally to all other people regardless of their physical limitations because they experience similar emotions, thoughts, and behaviours. In agreement with it, Morley (2010) suggested that people with physical disabilities will feel inferior and have an unhappy existence without interaction and engagement. Regardless of one's physical condition, it is crucial for people to socialize and work together at their places of employment because in order to succeed socially, one needs the support of others. For instance, working together enhances sociability between people with disabilities by allowing them to become familiar with one another.

#### **4.5.2 Perceptions to Physical Disability Condition at Work Place**

Finding out how other people without disabilities see people with physical disabilities in particular workplaces was one of the research's goals. Despite their physical limitations, the majority of people with physical disabilities were found to be regarded as normal. According to one of the physically challenged individual interviewed, *"They perceive me normal, but it depends on how one is familiar with me. Close friends see me as a regular person; however those who aren't close to me have a lot of questions about my health and my emotional state."*

Another person with physical disabilities revealed: *"They think I'm normal. People are open to me, willing to assist me, and supportive anytime I need them, whether I'm in an office, at work, or anywhere else."*

However, a small number of people held the incorrect perception about those with physical limitations. *"Some persons perceive me positively and they give me full cooperation in my works," one physically impaired person claimed, "but few of them had negative perception that I might be incapable of doing certain things especially in working matters."* Physically impaired people participated and worked cooperatively in academic and social settings, just like other people without disabilities, producing high-quality work while also supporting those without disabilities when it came to workplace-related issues.

Disability is actually merely a condition that doesn't prevent or restrict someone from engaging in social activities. Some people think that individuals with disabilities depend on everything, yet this is completely wrong. The researcher looked at how people with impairments had the same confidence, talent, leadership ability, and relationships with others as people without disabilities. Ethiopians and other societies might benefit from education on the value of valuing, respecting, and working with people with disabilities because these individuals deserve the same treatment as others who are not disabled.

#### **4.5.3. A Contributively Environment Created by the Organizations to Support Persons with Physical Disabilities.**

According to the study, the majority of governmental organizations do not have environments that are accommodating to the needs of people with physical disabilities, though they do expect to in the future. In other words, few businesses have settings that, at the very least, catered to the requirements of people with physical disabilities. These include creating ramps and wide walkways so that those who are physically challenged can move around with wheelchairs and other aids with ease.

One organization has plans to build a dedicated office on the first floor so that people with physical disabilities can discuss concerns pertaining to their jobs and social issues with the administrative and work employees. Higher officials and administrative officials will gather in this special office to discuss and find solutions to the various employment and social issues that people with physical disabilities face. Physically impaired people will be able to readily access all necessary services provided by the organizations thanks to the existence of this office, as opposed to offices that are located upstairs or in remote locations.

A researcher in one of the groups also disclosed a plan to construct elevators in buildings with more than five stories to help people with physical disabilities access offices and other facilities that are located above. One of the organizations had plans to construct a ramp from the first floor to the second story, making it possible for people with physical disabilities who use wheel chairs or crutches to access and get to the second floor. This organization serves as a model for other colleagues looking to provide a welcoming environment for those with physical disabilities.

#### 4.5.4 Special Trained Staff for Supporting the Physically Disabled Persons at Governmental Organizations

Additionally, the study looks to establish if there are specialized support staffs for those with physical limitations. The findings shown in table 10 demonstrated that there was no trained staff (100%) available to aid and support people with physical disabilities in Addis Ababa's two (2) ministries.

Table. 10 Special Trained Staff for Supporting the Physically Disabled Persons at Governmental Organizations.

	Do you have a special trained staff for supporting persons with disabilities?	Yes	No
1	CEOs	0	4 (100%)
2	Directors	0	7 (100%)

As shown the table above, all the heads of organizations and directors who were interviewed stated that they did not need to have specially trained staff to support people with physical disabilities because there were not many physically disabled people working for them compared to people without disabilities. However, the study questioned why those few people with physical disabilities may not be entitled to the support of qualified staff members or other resources. The response was that organizations did not give people with physical disabilities much thought. The claim made by Madriaga (2007) that it wasn't always obvious to people with disabilities who was in charge of taking care of them supported the reality.

One CEOs of the organization said that the nature of that institution's founding as another justification for why they lacked specially trained workers to assist people with impairments.

*"We do not have specially trained workers for the persons with disabilities because to the nature of our regulations, according to one head of the organization."*

It is a good idea if extra effort is made by the government or organization itself to train specialized employees that will be responsible for caring for and helping people with different disabilities, regardless of the number of disabled people admitted in

governmental organizations. This is due to the fact that some disabilities have severe conditions that make it challenging for a person to deal with the environments.

#### **4.6 Stakeholders’ Views on Means to Address Problems those Persons with Physical Disabilities Encounter in Governmental Organizations in Addis Ababa.**

The survey looked at opinions from people without disabilities, employees, and DPOs (People with Disable Organizations) on how to deal with issues that physically disabled people confront in specific selected ministries, Addis Ababa. According to the study, people without disabilities, staff, and DPOs have extensive experience interacting and living with physically challenged people, thus they are well-equipped to handle the obstacles and issues that these individuals confront. This was covered in items 4.6.1, 4.6.2., 4.6.3 and 4.6.4.

##### **4.6.1 Stakeholders’ Experiences Concerning the Life of Persons with Physical Disabilities at Governmental Organization Environments.**

The study required many stakeholders to offer their perspectives on the experiences of people with physical disabilities in settings related to governmental organizations. Many participants highlighted the difficulties that people with physical limitations had adjusting to their surroundings. The majority of them thought that physically challenged people had difficult lives because their surroundings were inhospitable. Physically challenged people do not enjoy their presence in an organizational setting as a result of this circumstance. Accessing offices, administrative offices, and restrooms is typically difficult for people with impairments, especially when the services are far away.

Table 11. Stakeholders’ Experiences Concerning the Life of Persons with Physical Disabilities at Governmental Organization Environments.

No	Is the life of persons with physical disabilities good at governmental organizations?	No of Respondents	Yes	No
1	CEO	4	1(25%)	3(75%)
2	DPOs	46	41(89%)	5(10.8%)
3	Persons without Disabilities	51	41(80%)	10(19.6%)

According to some of the people without impairments, people with physical disabilities at governmental organizations sometimes feel inferior because of their physical issues and are isolated by a small number of classmates. Additionally, the survey discovered that some people without disabilities were unfamiliar with the lives of people with physical disabilities, including how they were perceived as being incapable of performing activities like employment, socializing, and leading others. This supports Hughes' (2005) claim that criminal victimization of people with disabilities within society's institutions has mostly been caused by unfavourable psychological factors like unfavourable attitudes, prejudices, stereotyping, and stigmas. However, a small number of stakeholders claimed to have limited knowledge of how people with physical disabilities live their lives.

The majority of stakeholders also believed that people with physical disabilities lacked basic and essential amenities like wheelchairs, crutches, and specialized support from institutions when they were in governmental organization contexts. This indicates that they did not observe any effort on the part of institutional levels to set aside a special budget to address issues faced by people with various disabilities, including those who have physical disabilities.

The researcher came to the conclusion that it is gravely improper to denigrate people with impairments because of their physical circumstances. If given the chance and support, people with physical disabilities are capable of accomplishing many activities just like people without disabilities (Riddell et al. 2002). People with disabilities possess a variety of talents and life skills in the academic, social, political, cultural, and economic spheres. There is a need for other non-disabled people to accept and cherish their contributions whenever feasible because handicapped people have potential in our cultures.

#### **4.6.2 Major Problem Facing Persons with Physical Disabilities in Governmental Organizations**

The study aimed to examine stakeholders' experiences on problems and challenges facing persons with physical disabilities at governmental environments. The result is showed under table 12 below.

Table 12. Major Problem Facing Persons with Physical Disabilities in Governmental Organizations

No	Do you believe that persons with disabilities get adequate facilities and suitable environment in the given organizations?	Number of Respondents	Yes	No
1	CEOs	4	1(25%)	3(75%)
2	DPOs	46	9(19.5)	37(80.4%)
3	Persons without Disabilities	51	16(31%)	35(68.6%)

Majority of stakeholders, 75% of CEOs of the organizations, 80.4% of the DPOs and 68.6 % of persons without disabilities argued that, there were no adequate facilities and suitable environments for persons with disabilities such as offices, cafeterias, administrative offices, as well as toilets. Whereas 25% of CEOs, 19.5% of the persons with disabilities organizations and 31% of persons without disabilities replied that there are adequate facilities in the organizations for persons with disabilities.

Another problem in relation to that was long distance from one place to another within organization (UNICEF 2012). This made persons with physical disabilities to spend much of their time walking in search of their basic needs and services. Areas like offices, cafeterias and toilets located far distance and scattered to the extent that persons with physical disabilities face difficulties and spent much of their time to reach those areas. The study suggested that organizations must provide adequate facilities, friendly environment and location of other necessary facilities that can be reached easily by physically disabled persons.

Another problem revealed by many stakeholders was lack of funds to address problems facing persons with disabilities. This was true because all heads of organizations interviewed in both ministries in Addis Ababa declared the absence of special funds allocated for persons with disabilities.

Lack of clear policies and its poor implementation for solving problems facing persons with disability was the issue raised by many stakeholders, including peers, directors and persons without physical disabilities and parents who were visited by the researcher. Stakeholders argued that, administrators and decision makers in

government and institution level should see the importance of restructuring and implementing policies efficiently and effectively so as to guide provision of good and conducive environment for persons with disabilities in governmental organizations.

Through interviews conducted to different stakeholders, the issue of wrong perceptions to disabled persons from non-disabled persons, directors and advisors on matters concerning social and work issues was also discussed. For example, some persons without disabilities experienced that, for example, during field works, persons with disabilities were given little chances and mistrusted to contribute their ideas or arguments because of their physical conditions. This perception is totally wrong because persons with disabilities are capable of doing anything including academic and social issues once given chance and support to do so (Croft 2010). Some of persons with physical disabilities are more intelligent and talented than some of persons without disabilities hence, they are supposed to be given chance to exercise and show their capabilities of doing things rather than undermining them.

Most of stakeholders interviewed, argued that there was lack of special trained staff to support persons with physical disabilities in all governmental organizations visited by a researcher. Stakeholders suggested the importance of training special staff to deal and support persons with disabilities. In both governmental organizations visited by the researcher, there was less concern in assisting persons with physical disabilities in most cases. Physically disabled persons are most assisted and depending on their fellow colleagues in work and social matters. The organizations are advised to employ few personnel who will be responsible to assist persons with disabilities rather than depending totally on their fellow persons.

#### **4.6.3 Main Causes to Problems/Challenges that Face Persons with Physical Disabilities in Ministries**

Through questionnaires and interview with stakeholders, the study examined various causes of problems and challenges that face persons with physical disabilities. Majority of stakeholders mentioned that many problems and challenges facing persons with physical disabilities were caused by lack of clear guidelines and policies to direct organizations on dealing and solving problems that face persons with physical disabilities.

Another cause, as revealed by different stakeholders were inadequate of support from government, non-governmental organizations, financial institutions, private people and other stakeholders to the needs of persons with physical disabilities. These challenges and problems facing physically disabled persons as supported by Barnes (1991) can be solved by government and other stakeholders by providing and supporting them with facilities such as wheelchairs, crutches and improving infrastructure by enlarging paths and building ramps in order to enable them to pass through easily.

Some of stakeholders also suggested about the importance of having experts or trained staff to support persons with physical disabilities. Small budget allocated to address the issues of disabilities as revealed by stakeholders' was also the cause to problems and challenges facing persons with physical disabilities. This is in line with Johnstone (2001) who revealed that some physically disabled persons are totally independent, while others may need part- or full-time assistance. As the matter of fact, trained staff to assist and support persons with disabilities cannot be avoided.

Less sensitivity concerning the needs of persons with disabilities from government, administrators, planners, fellow persons and society at large was among the issue many stakeholders revealed to be a cause for problems and challenges facing persons with physical disabilities. Negative attitude to people with disabilities as well, was also termed as one of the contributing factor causing problems and challenges that face persons with physical disabilities inside and outside organizations. Government and other organizational stakeholder should make sure that all persons get equal accessibility to work as stated by Macleod (2014). It is the responsibility of each individual in the society to respect and value the presence of people with disabilities as non-disabled people and have the right to access organizations and all other services.

#### **4.6.4 Solutions to Address Each Challenge Facing the Physically Disabled Persons in Governmental Organizations**

The researcher seeks to explore on what should be done to address each challenge facing persons with physical disabilities in governmental organizations. Majority of stakeholders comment that, government and governmental organizations must prepare special budget in order to accommodate persons with physical disabilities. In parallel

to that ministerial organizations should prepare plans according to its environment in order to favour and support persons with physical disabilities.

Governmental organizations were advised to plan to have special offices and desks to deal with matters pertaining persons with physical disabilities. Infrastructures such as offices, cafeterias, administrative offices and toilets as advised by stakeholders, should consider people with disabilities by building ramps and elevators in tall buildings so as to access different services in different locations. Some respondents suggested on the need to formulate laws that persons with disabilities including those with physical disabilities should have special care at work places. Respondents added that, policies and plans from government to institutional levels concerning people with disabilities must be put into actions.

The study collected various ideas and suggestions including that of ministries managements in their meetings to put forward the issues of persons with disabilities so as to provide necessary services accordingly. Governmental organizations were also advised to have special days for fund raising as well as debating with stakeholders concerning challenges and ways to solve problems that persons with disabilities encountered.

Apart from many suggestions and proposals from different stakeholders, government was also advised to train enough expertise to be used to assist and give support all persons with disabilities in the work places. Government was recommended as well to supply all necessary equipment to persons with physical disabilities in governmental organizations such as wheelchairs, accessible computers, crunches, projectors, sound systems and books so as to assist disabled persons to reach their work and social needs.

Advocacy on helping persons with physical disabilities was also raised as a suggestion to address the issues of persons with physical disabilities at governmental organizations. Communities as argued by Chataika (2010), advised of being aware on the importance of treating equally each member within and outside the community with much love, care and support regardless of condition one has. Communities were also participated that people with disabilities are part and parcel of the community and we should provide them any necessary support when needed.

## CHAPTER FIVE

### SUMMARY, CONCLUSION AND RECOMMENDATIONS

#### 5.1 Summary of the Study

The primary objective of the study was to examine the circumstances of people with physical disabilities in a few ministries in Addis Ababa. Its specific objectives are to: (1) examine ministry infrastructure to see if it enables people with physical disabilities to work, and live comfortably; (2) examine work issues for people with physical disabilities in sampled ministries in Addis Ababa; (3) examine social issues that people with physical disabilities face in ministries; and (4) assessing stakeholders' suggestions for resolving problems that those with physical disabilities encountered in Addis Ababa's government organizations.

In order to gather and analyse data for the study, both quantitative and qualitative research methodologies were used. Documentary review guidelines and field visits were used to look at the infrastructure issues in two ministries. Twenty one (21) persons with physical disabilities were surveyed to get information about their work accomplishments and the social issues they encountered in governmental organizations. On the other hand, questionnaires and interview guides that were provided to respondents were used to gather information from 51 persons without disabilities, 46 DPO members, and 7 directors and 4 CEOs who did not have disabilities about their opinions on how to handle the issues and challenges that people with physical disabilities face.

Findings revealed that, 75 percent of governmental organizations were found to be present but insufficient whereas 35% and 25% of the infrastructure conditions were categorized as being between average and bad respectively, while 85% of the infrastructure was accessible but problematic for people with disabilities. The survey also discovered significant deficiencies in the support of adaptive equipment, office space, and infrastructure, as well as a lack of physical disability programs, qualified staff, funding, and financial aid for people with disabilities.

## 5.2 Conclusion of the Study

The researcher was able to draw the following conclusions from the study's findings: Infrastructures at governmental organizations, such as offices, administrative offices, and toilets, were there but terribly insufficient to meet the demands of people with physical disabilities. The majority of governmental organization infrastructure, including offices, administrative offices, cafeterias, and restrooms, was difficultly accessible to those with physical disabilities.

Governmental organizations in Addis Ababa had very poor infrastructure conditions, especially in areas where people with physical disabilities spend a lot of time, like offices, cafeterias, restrooms, and administrative offices. This was because people with physical disabilities who work at these organizations weren't given enough care or attention. Directors and higher-ranking officials did not treat people with physical disabilities with inclusive treatment methods or approaches.

At governmental organizations, people with physical disabilities were only financially supported by the government and their parents or families. A few ministries received limited support from non-governmental groups, financial institutions, and the general public for people with physical disabilities.

No specific fund was established to provide scholarships for people with physical disabilities. At governmental organizations, there were no specially trained staff members to serve people with physical limitations. This demonstrated the ministries' ignorance of the need to create environments that are friendly to people with physical limitations.

## **5.3 Recommendations**

### **5.3.1 Government and Governmental Organizations**

- Trainings and workshops with senior organizations executives, CEOs, and helpful staff and individuals should be organized to address the critical concerns related to a lack of awareness and bad attitudes toward disability.
- The dissemination of information on the employment of people with disabilities in state organizations would rely heavily on publications like leaflets, posters, radio programs, and so forth.
- The leadership bodies of the organization should make a concerted effort to reduce and remove physical obstacles that impede persons with physical impairments from accessing various service centres through their respective offices (such as offices, cafeterias, administrative offices, and restrooms, etc.).
- The organization's leadership should devise strategies for obtaining the funding required to offer specialized services to persons with disabilities.
- Each organization is required to create a structure that guarantees a trustworthy mechanism to ensure that people with disabilities have access to all information released and uploaded to by various entities, thereby creating the most inclusive living and working environment feasible.
- In keeping with the aforementioned suggestion, the responsibility to address disability issues should extend to all sector-ministries and not just one small division under the Ministry of Women and Social Affairs (MoWSA).
- It is strongly advised that, in the future, a ministry dedicated to disabilities be established, much like one now exists for women's, children's, and youth affairs. As PwDs make up 17.6% of the population in Ethiopia, such a ministry would be capable of effectively initiating, closely supervising, and considerably assisting socioeconomic activities relevant to PwDs.
- It is also advised that DPOs be given a fair chance to comply with the new NGO/CSO law, which mandates that groups advocating for human rights in Ethiopia (including disability rights) shall only obtain their operating money from local sources.
- The government should take care that this new law does not ultimately lead to the disappearance of DPOs, which would worsen the disability movement, which has only recently started to emerge in the country. DPOs in Ethiopia currently primarily

rely on funding sources originating from partnerships with similar organizations based abroad.

### **5.3.2 Researchers**

The article also exhorts scholars to prioritize disability-focused research, which is evidently undervalued in Ethiopia. There is undoubtedly a need for more emphasis on research evidence because it is so important in fields related to disability and development.

This study was conducted primarily in Addis Ababa to evaluate the circumstances of people with physical disabilities in a number of ministries. However, more research is required to determine how the solutions offered by this study to issues faced by people with physical disabilities can be put into practice in order to enable the creation of welcoming working environments for all people at governmental institutions.

### **5.3.3 The Public**

On the whole this study made clear that PwDs in Ethiopia have encountered considerably more socio cultural issues that are debilitating than the actual "medical" impacts of the impairment (which are typically characterized by attitudinal views leading to prejudices, stereotypes, and discrimination). This necessitated a clear distinction between "disability" and "impairments," on the one hand, and the "social" and "medical" conceptions of disability, on the other. In light of this, society should gradually accept the notion that PwDs can be empowered and productive so long as preconceived notions and biases are successfully replaced by supportive environments.

The general public and the entire country benefit from PwDs' full participation in the socioeconomic and political affairs of the country since, although being a minority, they are a sizable and potentially productive minority.

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**St. Mary's University**

**School of Graduate Studies**

**Department of Social Work**

**Assessment of the Challenges of Persons with Physical Disabilities in the Work Place**

**The Case of Some Selected Ministries in Addis Ababa.**

Dear Participant,

The purpose of this study is to examine the situation of people with disabilities in terms of service provisions and working conditions. Furthermore, it tries to identify the barriers to Organizations for people with disabilities entry, disability services in government organizations and improvement of accessibilities and equal opportunities.

So as to solicit the required information for the study, you are selected to be one of the participants in this study. Your participation, however, is on a voluntary basis. This study is purely professional and in no way affects you personally or your Organization. We assure you that your response will remain strictly confidential and personal details will be kept anonymous. We, therefore, seek your genuine opinion for all questions.

I thank you in advance for your understanding and cooperation in this matter.

Sisay Tilahun

## APPENDIXES

### APPENDIX 1

#### Questionnaire: People with Physical Disabilities who work in the Organizations

##### Purpose:

The aim of this questionnaire is to explore the accessibility and working conditions of people with physical disabilities in two selected organizations in Addis Ababa, Ethiopia.

##### Part I. Personal Data:

1. Sex:       Female     Male
2. Age: \_\_\_\_\_
3. Place of Birth: \_\_\_\_\_
4. Ethnic Origin (optional): \_\_\_\_\_
5. Mother Tongue: \_\_\_\_\_
6. Could you please indicate the severity of your disability /impairment?
  - a. Mild b. Moderate c. Severe d. Profound
7. Please indicate the onset of your disability /impairment
  - a. Before Birth b. During Birth c. After Birth d. Late Childhood or Youth \_\_\_\_\_

##### Part II.

##### 2. Working Place / Organization

8. Name and place of your Organization: \_\_\_\_\_
9. When did you join this Organization? \_\_\_\_\_EC \_\_\_\_\_GC
10. Name of the department you are enrolled in/ working in? \_\_\_\_\_
11. Please specify your field of study: \_\_\_\_\_ Was this field of study your primary choice? Yes \_\_\_\_\_ No \_\_\_\_\_
12. How do you evaluate your performance? a. Below average b. Average c. Above average
13. Did you get orientations about the Organization life and working environment at entry point? Yes..... No ....., if yes,
14. Could you please describe the contents of the orientations?  
\_\_\_\_\_

15. How do you evaluate the adequacy of the orientations in helping you better adjust to organization life? \_\_\_\_\_

16. How do you see the importance of such orientations for working success?  
\_\_\_\_\_

17. Do you think your current work /field of working is what you “preferred” to work? If yes, Why? \_\_\_\_\_

If no, Why not? \_\_\_\_\_

18. Would you please indicate the challenges you have faced in your work place?  
\_\_\_\_\_  
\_\_\_\_\_

(If you need more space, please use the back of this page)

19. How have you tried to handle the challenges you have faced?  
\_\_\_\_\_ (If you need more space, please use the back of the consecutive pages writing the question number)

20. Could you please indicate the factors that facilitated “your work? “  
\_\_\_\_\_  
\_\_\_\_\_ (if you need more space, please use the back of the consecutive pages writing the question number )

21. Are disability specific provisions made available at your organization? Yes ..... No..... if yes, which among the following are existing, (just put a mark under each column depending on each component’s presence or absence.)

22. Do you think people with disabilities are differentially treated during their stay in the Organization (i.e., both positive and negative discrimination)? Yes..... No..... If yes, please describe how? \_\_\_\_\_

## APPENDIX 2

A Researcher's Guide in evaluating infrastructural availability, accessibility and Conditions  
for Persons with Physical Disabilities at Ministry of Women and Social Affairs and  
Ministry of Justice in Addis Ababa.

Name of Organization .....

Please complete by putting a tick to respective spaces.

Table 1

Infrastructure	Availability			
	Available and Adequate	Available but Inadequate	Available but Highly Inadequate	Not Available
Offices				
Cafeterias				
Administrative Offices				
Rest Rooms/Toilets				
Offices				

Table 2.

Infrastructure	Accessibility		
	Easily Accessible	Accessible with Difficulty	Not Accessible
Offices			
Cafeterias			
Administrative Offices			
Rest Rooms			
Offices			

Table 3

Infrastructure	Conditions			
	Very Good	Good	Average	Poor
Offices				
Cafeterias				
Administrative Offices				
Rest Rooms				
Offices				

**APPENDIX 3**

**Questionnaire and Interview Guides to Persons without Physical Disabilities, CEOs, Directors and DPOs**

1. What do you think are the major problems/challenges facing persons with physical disabilities at governmental organization environments?

.....  
.....

2. What is your experience concerning the life of persons with physical disabilities at governmental organization environments?

.....  
.....

3. If there are problems/challenges to the physically disabled workers, what do you consider to be the causes?

.....  
.....

4. What can be done to address each challenge facing the physically disabled workers in governmental organizations?

.....  
.....

5. Are there any trained staffs that can help persons with physical disabilities in the organization?

.....  
.....

**APPENDIX 4**

**Interview Guide for Persons with Physical Disabilities, CEOs, Directors, DPOs: -  
Social Problems/Challenges**

1. How do you think others people at ministries perceive your physical disability condition?  
.....  
.....
2. Do you experience any difficulties in participating and interacting with other non-disabled persons? Yes ..... No .....
  - a. If yes, what are the reasons? .....
  - b. If no, what are the reasons? .....
3. What are some of institutional schemes for the physically disabled workers in your institution?.....  
.....
4. To what extent does the organization create conducive environment in order to support persons with physical disabilities?  
.....  
.....
5. What do you consider should be done to improve the conditions of the physically disabled workers at government organizations?  
.....
6. What measures do organization taken to create an accommodating working environment for people with disabilities?  
.....