# Disability-Inclusive Education and Employment: Understanding the experiences of young men and women with disabilities in Ethiopia

## About this report

This report was developed by the International Centre for Evidence in Disability at the London School of Hygiene & Tropical Medicine, and Addis Ababa University, in partnership with the Mastercard Foundation.

The report aims to inform Mastercard Foundation’s disability and inclusion programming and strategy development. It draws on in-depth qualitative interviews with young men and women with disabilities, exploring their lived experiences related to education and employment in Ethiopia. This report is part of a series developed for each of the seven countries for this project Disability-Inclusive Education & Employment: (1) Country brief: Ethiopia; and (2) Understanding the context: Ethiopia.

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# Disability-Inclusive Education and Employment: Understanding the experiences of young men and womenEthiopia

## Executive Summary

* This research explored the lived experiences of young men and women with disabilities in Ethiopia through in-depth interviews with 30 young persons with disabilities. The study included a mix of participants with various disabilities (including physical, visual, hearing, psychosocial, and intellectual impairments), aged between 15-35 years, based in urban and rural parts of Ethiopia. Participants were purposively selected to reflect varied access to education and vocational training, and employment in the agricultural and the manufacturing sectors.
* Participants reported navigating numerous barriers to accessing appropriate, inclusive schools including distance, a lack of accessible transportation, negative attitudes from family members, and the inability to meet the costs of education. These costs included school fees, books, uniforms, the opportunity cost of family members accompanying the students to school, assistive products, and inclusive learning materials and support.
* Experiences of youth with disabilities during education were shaped by inaccessibility, and a general lack of accommodations, as well as exclusionary teaching practices. Several young people did, however report the benefits of inclusive and enabling environments created by supportive teachers, staff, and peers, although these experiences were not consistent.
* Most young people with disabilities faced challenges securing employment, due to discriminatory hiring practices. Those in employment struggled with inaccessible workplaces and a lack of workplace accommodations. Many young people needed support to develop their capacity, employability, and skills to improve their chances in successfully transitioning into employment.
* Youth with disabilities in the agricultural sector were mostly working on family farms, generally due to exclusion from education and other career opportunities, lack of opportunity in rural areas, and challenges due to impairment rather than by choice. The data indicates that training and financial support could attract more youth with disabilities to engage with this sector.
* Youth engaged in the manufacturing sector reported challenges including limited opportunities, financial barriers, and difficulties gaining entry to trainings.
* Access to assistive products and to digital skills training were noted as facilitating factors in education and employment. Support from family members, friends, peers, and community members were also strong enablers of participation and attainment.
* Many youth participants had experienced stigma including negative attitudes and stereotypes, bullying, violence, and abuse, and discrimination and exclusion in education and employment settings. Drivers of stigma included lack of awareness of the capabilities of youth with disabilities, and misconceptions about disability.
* This study also explored the intersectionality of other factors with disability in shaping youth experiences. Young women with disabilities experienced compounded discrimination as both disability and gender carry unique forms of marginalisation and stigma. There were distinct differences in young people with disabilities experiences along urban and rural lines, and access to education, employment opportunities, assistive products, and to diagnostic services were harder for rural youth.
* The extent of voice and agency among the young people varied with the type and severity of impairment, household factors, and family dynamics. Participants reported being forced to attend schools that were not their first choice, working jobs out of obligation or necessity, and restrictions from parents around participation, job seeking, and routine life decisions.
* There was a discrepancy between what youth with disabilities aspired for, are confident doing, and the opportunities available to them.
* Recommendations include strengthening educational institutions and teachers to better deliver inclusive education; improved policy implementation to increase inclusiveness of persons with disabilities in education and employment; improving opportunities for young people with disabilities to access financial support for skills trainings, the job seeking process, and start-up capital for small businesses; more efforts to create awareness and sensitise employers and communities to address drivers of stigma; wider availability of assistive products and digital skills; and wider range of interventions and financial support options to better match the aspirations of young people with disabilities with opportunities.

# Introduction

## About Disability

According to the United Nations Conventions on the Rights of Persons with Disabilities
(UNCRPD) people with disabilities include those who have *“long-term physical, mental, intellectual, or sensory impairments, which in interaction with various barriers, may hinder their full and effective participation in society on an equal basis with others.”* [1]

Estimates suggest that there are 1 billion people (15% of the world’s population) living with a disability globally [2]. People with disabilities often experience barriers to accessing education and employment and this can cement cycles of poverty and exclusion [2, 3]. Globally, people with disabilities also face marginalisation in other aspects of society [3].

Research in Sub-Saharan Africa shows that with the right support, people with disabilities can achieve economic success. Investing in education and employment for people with disabilities should be part of development efforts, as based on an economic rationale, as well as social justice [4].

## Disability in Ethiopia

Ethiopia has a population of 112 million people, the second largest in Africa [5]. The disability prevalence is estimated to be 2.8% for people aged 15 and older [5], although this is likely a low estimate, given the above-mentioned global prevalence of 15% [2]. [NOTE: Disability is complex to measure. Differences in the way disability is measured and defined in different surveys may explain some of the variation in prevalence estimates. This includes the questions used, how they are asked and thresholds applied to define disability for the purposes of disability statistics.]

Evidence on the inclusion of youth with disabilities in Ethiopia is relatively limited. Studies suggest there is poorer access to education for young people with disabilities compared to their non-disabled peers and that barriers include inaccessible learning materials and buildings, as well as limited staff training in disability inclusion and attitude change [7]. People with disabilities are also less likely to be working, with barriers including inaccessible buildings and transport, discrimination, and lack of awareness about disability among employers [8-9].

## Disability policy context in Ethiopia

The Ethiopian government ratified the UNCRPD in 2010 [13]. In addition, the constitution, national strategies, and legal instruments such as the Right to Employment of Persons with Disability Proclamation No.568/2008 address and recognize the rights of persons with disabilities. There are policy provisions to mainstream disability across society, including equal opportunities for persons with disabilities in education, skills training and work, and full participation in the lives of their families and communities [14-15]. Research done for Phase 1 of this project involving interviews with key stakeholders (including government agencies, Organisations of Persons with Disabilities, educators, and employers) revealed that despite this supportive policy landscape which aims to mainstream disability across society, the extent of implementation is thought to be slow [16].

Education in Ethiopia

In Ethiopia, young people with disabilities are among the most disadvantaged in terms of access to and completion of elementary and secondary education. Young people with disabilities have a lower enrolment rate in school than non-disabilities across many sectors: urban vs. rural, by type of schooling, by level of the schooling, and in primary versus secondary and tertiary schooling [5, 16]. Estimates from the Disability Data Portal [5] with 2015 as a reference year suggest that primary and secondary school completion rates were very low in general (≤15%) and even lower among children with disabilities (5%).

Our Phase 1 study indicated that key challenges in education include lack of enforcement and monitoring of inclusive education policies, inadequate teacher training, insufficient resources for accessible materials and assistive technology, and weak support systems for enrolling students with disabilities in technical and vocational education programmes [16].

## Employment in Ethiopia

On employment, estimates from the ILOSTAT database (using 2013 as reference year), youth (15- 29 years) with disabilities (32%) were more likely to be not in employment, education, or training compared to youth without disabilities (10%) [10]. The same estimates and analysis indicate that monthly earnings for adults with disabilities was equivalent to 59% of earnings for people without disabilities [10]. Findings from our Phase 1 study suggest that despite that several supportive policy strategies and legislature, implementation, and enactment of these was weak, contributing to the exclusion of people with disabilities in work. Implementation gaps were found to stem from lack of specific mechanisms and disability data to monitor inclusion of people with disabilities in various sectors of employment [16]. (For an in-depth analysis, refer our [Phase 1 report](https://mastercardfdn.org/disability-diversity-inclusion/#resources)).

# About this study

This study aimed to explore the lived experiences of young men and women with disabilities in Ethiopia, highlighting barriers, facilitators, gaps, and opportunities regarding their inclusion in education and employment. This research involved in-depth interviews with 30 young people with various disabilities (including physical, visual, hearing, psychosocial, and intellectual impairments), aged between 15-35 years, based in urban and rural parts of Ethiopia.

Regarding education, we collected data from youth with disabilities currently in formal education (secondary, tertiary, and vocational), those who had received some formal education but were not working, and those who were not in education and not working. In terms of work, the research focus for Ethiopia included disabled youth engaged in the agriculture and manufacturing sectors.

Further details of methods, and breakdown of participant characteristics are provided in the Appendix.

# Findings

The findings of this study are presented in five parts: (1) education; (2) experiences in the agricultural sector; (3) experiences in the manufacturing sector; (4) reflections on cross-cutting issues that shape the experiences of young people with disabilities in Ethiopia. Case studies are provided throughout each section, to portray stories of selected youth participants (all names and identifiers have been replaced to preserve confidentiality and privacy).

## Education

It was reported during our Phase 1 study that education policy and programme frameworks in Ethiopia have generally shifted in emphasis from ‘integration’ (where children with disabilities usually attend special/separate classes within mainstream schools) to ‘inclusion’ (where mainstream school systems are adapted to respond to the diversity of students, enabling children with disabilities to participate and learn effectively) of disability within the education system [16]. Inclusive Education Resource Centres were introduced in 2006 by the Ministry of Education in collaboration with the government of Finland [17]. They were established as hubs within communities, providing services, specialist staff, resources, training, and support for students with disabilities and teachers in local mainstream schools, and engaging with wider community to build disability inclusion [17].

Inclusive education is where learners with disabilities are in classes together with learners without disabilities in mainstream schools. This differs from special education where learners with disabilities may attend some or all classes separate from nondisabled learners. Typical issues with special education schools are that they may be of poorer quality, while inclusive education, if not implemented well, may include learning material or teaching methods that are not adapted to suit a learner’s impairment [18].

In Ethiopia, implementation of inclusive education policies is limited, largely because government investment is insufficient for schools and education institutions to acquire necessary accessible learning materials or assistive products to help students with disabilities learn [16]. This leaves the financial burden of procuring assistive products and other accessible learning materials on students and parents. (See our Phase 1 report here for an in-depth analysis).

Out of the 30 interview participants, 6 had never attended school, 3 had stopped in primary school, and 12 had attained secondary or tertiary education. A few young people reported having dropped out of school or that they did not attend school. Where possible, we highlight the ways in which their access to and experiences differ by their level of education.

### 1.1. Access to education

Findings in this section are presented according to key stages along the journey to accessing education including: (i) identifying schools and other educational institutions; (ii) enrolling; (iii) paying for education; and (iv) reaching schools and other educational institutions.

#### Identification and enrolment

The process of identifying and enrolling young people with disabilities into schools varied with type and severity of impairment, socioeconomic factors, availability or proximity of schools, and the level of education. Starting education in a mainstream school was common, but learners with disabilities were sometimes moved to special needs schools.

For most participants, identifying appropriate schools was largely dictated by proximity to their neighbourhood and family preference. For many, this meant attending mainstream schools near their home and sacrificing the inclusion and accessibility of a special needs school.

“My family chose the kind of school I go to. The schools are public schools because it's the closest place to me, many schools would not like to accept me, and they put a lot of pressure on me.” (Female, 18-24 years old, has a physical impairment)

While the young people enrolled in special needs schools may experience more support and inclusion than those in mainstream schools, the lack of decision-making power was highlighted as a frustration for those enrolled in special needs schools because they might be far away from their family.

“It wasn’t my choice because I came here from far away. The only reason that I came here is because of its special need and inclusive education. I have sacrificed so many things for my education.” (Male, 18-24 years old, has a hearing impairment)

For some young people, the lack of autonomy over choosing an appropriate school made them feel powerless, including participants enrolled in both mainstream and special needs schools.

“I have no choice on whether to go to public school, private or special needs school, I am voiceless in my family and the community.” (Female, 18-24 years old, has a physical impairment)

Participants highlighted that many mainstream are often unaware of accessibility needs within their facilities and do not provide adequate support to students. Furthermore, interviews indicated that accessible facilities and reasonable accommodations for students with disabilities are typically insufficient in mainstream schools.

“It is a private institution [detail removed]. It is distance education. I chose it because I will have no problem with the distance or transportation issues, and also with school facilities.” (Female, 25-35 years old, has a physical impairment)

Many young people preferred studying at a special needs school but didn’t always have the opportunity or school fees to attend.

“I wanted to go to a special needs school because there is easy communication between the deaf people than the normal people and I will also feel alone when I learn at the integrated school. I usually feel discriminated from other students and have a feeling of loneliness especially when I learn at the integrated [mainstream] school. Some students have bad attitude towards me.” (Male, 18-24 years old, has a hearing impairment)

Participants in tertiary education highlighted that some universities still refuse to grant admission to students with disabilities.

“Furthermore, while the university is still in its early stages of accepting and teaching students with disability students, it has made significant progress over time. It is all I can say from that point of view.” (Female, 25-35 years old, has a visual impairment)

Participants urged ending discriminatory admissions practices at Ethiopian universities, as well as for the provision of more scholarships, economic support, and reasonable accommodations for students with disabilities.

“The government can support by facilitating sponsorships to the students. Not all universities are open for visually impaired students. Only a few of them accept such a student. It is good of other universities give admission to blind students. Visually impaired student should have economic support. They should have adequate study materials and accommodations.” (Female, 25-35 years old, has a visual impairment)

The participants reported navigating numerous barriers in identifying and enrolling in appropriate, inclusive schools including distance, transportation, and negative attitudes from family members. However, one of the foremost barriers highlighted in the data was the unattainable cost of education, which we explore in the next section. Ultimately, interviews suggest that much more targeted support is needed to help young people with disabilities navigate key transition points—both into, and through education systems—and to identify facilities that accommodate their specific needs.

#### Paying for education

Young people described the overwhelming economic burden of education, particularly inclusive education, as a central barrier preventing them from accessing appropriate education institutions, or any education institution at all. Participants cited the high cost of transportation, tuition and fees, scholastic materials like books or uniforms, the opportunity cost of family members accompanying the students, assistive products, and inclusive learning materials and support. These factors make it less likely that children with disabilities will attend school than their non-disabled peers.

“I live in a very small house, my family are very needy and couldn’t afford any assistive products and any study materials for my education. It’s like an overlapping problem for me with my impairment.” (Female, 18-24 years old, has a physical impairment)

Participants described experiencing negative attitudes from family, such as assumptions that they cannot succeed or are incapable of learning, and refusal to pay school fees.

“My family doesn’t think I am capable of going to school as my friends, [because] I need the psychosocial support. When I don’t go to school and stay home, I behave differently, [so] it’s good for me to go to school and meet my friends.” (Male, 18-24 years old, has a psychosocial impairment)

The young people also required learning support such as people to read or transcribe, assistive products, or inclusive learning materials like books in braille, all of which tend to be expensive and difficult to obtain.

“Sometimes I need someone to read for me. That is not a free service, so I need to pay. So financial problem is major issue to cover cost of readers.” (Female, 25-35 years old, has a visual impairment)

The cost of communication support such as sign language interpreters or hearing aids were also underscored as prominent barriers hindering enrolment and meaningful participation in schools. If students are unable to effectively communicate, understand, or participate in class, schools may be less likely to accept them or parents reluctant to invest in school fees.

“Communication is very difficult for me. Once I get hearing aids from school […] that’s the support I haven’t got. And any school fee support. I am not exposed to technological devices.” (Male, 18-24 years old, has a hearing impairment)

We elaborate further on challenges related to assistive products and technology later in this report; however, the data made it very clear that the financial burden of both an individual’s impairment and necessary support are difficult and often unattainable for young people with disabilities in Ethiopia. Easing economic stress on young people and their families remains a top priority for improving overall access to education for this population.

#### Accessing schools and other educational institutions

Participants also provided insights into challenges associated with transportation and reaching appropriate schools. Specific obstacles vary by impairment, but the young people reported mobility challenges, a lack of affordable or accessible transport options, and requiring assistance from a caregiver to access education institutions.

“At first, I was a 12th grade student where I was using a crutch, I used to take bajaj [electric three-wheeler] for transportation on a monthly contract basis which costs around 250-300 birr [4.50 – 5.50 USD] per month, which is covered by my aunt. Even if I use a contract bajaj, I might face difficulties when some technical problems happen to the bajajs, which I find it difficult to walk to home.” (Male, 18-24 years old, has a physical impairment)

Many young people with disabilities who cannot afford, or access adequate transportation rely on friends and family to assist them on the journey to and from school. Some participants reported positive experiences receiving help from friends or family, which successfully enabled them to reach school safely.

“I experience [a] very hard environment. I can’t access transportation. My home is very far from my school. This means my [only] positive experience is the relationship with my friends, we can understand each other.” (Male, 18-24 years old, has a hearing impairment)

Other young people described experiencing limited support from friends and family because of the opportunity cost of accompanying students to and from school, or due to negative attitudes. In the next section we will delve further into how these and additional factors shape young people’s experiences throughout their education.

**Case study: Abebech**

Abebech is a 24-year-old woman with a visual impairment living in an urban area of Ethiopia. She is currently attending in public secondary school and her biggest challenge in school is a lack of financial support for teaching materials in formats that she can easily read and understand. She uses braille to help in her studies and everyday life, but it is rarely available. The school she attends provides some support to students with disabilities, such as accessible educational materials, but it is typically provided toward the end of the academic year. Additionally, the school gives students with disabilities an allowance for transportation. Abebech is supported by her friends at school, but sometimes feels afraid to participate in different clubs because the other students might make fun of her.

Abebech emphasised other challenges around a lack of support and sign language interpreters during exams, the need for more accessible study materials, and basic needs like food and shelter.

### 1.2. Experiences during education

For those youth with disabilities in Ethiopia who successfully navigated access to educational institutions, their experiences during education were shaped by three main factors: (i) accessibility and accommodations; (ii) teaching practices; and (iii) enabling or exclusionary environments. These are in addition to the other cross-cutting enablers and challenges reported under Reflections.

#### Accessibility and accommodations

Accessibility and reasonable accommodations are an essential component of inclusive education, as well as a fundamental human right for people with disabilities, yet they are often inadequate, inappropriate, or entirely non-existent. The participants’ experiences varied by type and severity of impairment, as this dictated the nature and level of support required to effectively learn and participate in school.

Students with physical and mobility impairments described facing barriers related to inaccessible infrastructure such as a lack of ramps and lifts, difficult terrain between buildings, and challenging distances from home to school.

“There is a problem of accessibility. As a physically disabled person, I can’t go upstairs to attend classes. We are assigned classes upstairs and the elevator doesn’t work so that is the major problem. It will be good if tutorial classes as compensation are organised and different assistive materials are given. Most of disabled families including me came from poor families. There were times that I lack to buy even a pen. I think all stakeholders should collaborate to work towards accommodation.” (Male, 18-24 years old, has a physical impairment)

Young people with sensory impairments cited challenges obtaining inclusive learning materials such as books in braille, screen-readers such as JAWS (Job Access With Speech), adaptive software converting text to audio, voice recorders, E-readers, and behavioural adjustments from teachers like speaking loudly, enlarging text, or lending mentorship and emotional support to enable better learning.

“As I previously stated, when I entered [detail removed], I received no support, advice, or assistance, so it was very strange when I arrived because I expected blind students to sit and study in braille, but as I discovered, they do not. They just sit and listen. Those who don't have voice recorders just sit and listen, and there is no such type of education using braille. Another thing is screen-reading software called JAWS, I didn’t have any experience with that [...] That affected me.” (Female, 25-35 years old, has a visual impairment)

One participant with a hearing impairment, described dropping out of university due to learning challenges resulting from the lack of sign language interpretation, sharing that this is a common occurrence among peers with hearing impairment.

“When I was a university student, I got an F grade in one course. However, when I was trying to fix it, there was no sign language interpreter to communicate with the teachers and people in the department, so no one could give me information. Because of that, I dropped out of school for a year while being able to study well. Of course, I wasn't the only one, there were four or five other deaf students who dropped out because of the same problem. There are also deaf students who have given up and gone to work in agriculture because of this problem.” (Male, 18-24 years old, has a hearing impairment)

The lack of reasonable accommodations and support often contributed to feelings of isolation and hopelessness, adding additional mental and emotional burdens to young people already struggling to keep up in a disabling environment.

“And for one thing, there was no support, there was no one to mentor, there was no one to share experiences with, and I was facing everything by myself.” (Female, 25-35 years old, has a visual impairment)

Students with psychosocial and intellectual impairments also highlighted the need for sensitivity and support for mental health challenges as a much-needed form of accommodation to support more functional learning experiences. They also cited the need for access to essential medication and counselling services to facilitate inclusive and healthy learning environments.

“I lost the ones I love. I had suicidal ideation. I had memory loss and I deteriorated in my education. I can’t concentrate. I become an introvert. I disliked the people around […] The medications are not working for me. I want to be as an ordinary student. I am highly dependent on medications I need it to survive.” (Male, 18-24 years old, has a psychosocial impairment)

In contrast, students attending mainstream schools providing sufficient accessibility, accommodations, and support—which, according to the findings of this research, tend to be rare in both Ethiopia and Africa more generally—foster an inclusive environment enabling students with disabilities to successfully learn alongside their non-disabled peers. This was shared in detail by one deaf student attending an inclusive mainstream school, often referred to in the Ethiopian context as an “integrated” school with disabled and non-disabled students learning together.

“It is good to teach the deaf [people] together in this school. It does not support inclusive education if we only learn with students who have disabilities. There are sign language translators, libraries, a special needs office, and there are also some organisations that support us. And when we get any new information, we use them here together, we read here, and also so many things that we can find here in this school than others. This is the only school I am aware of that provides an inclusive education by combining hearing-impaired and non-disabled students.” (Male, 18-24 years old, has a hearing impairment)

The data indicates that assistive products, inclusive learning materials, and one-to-one support are more likely to come from external sources such as scholarship programmes or disability-focused organisations than from institutions themselves.

“At the University [detail removed], where I did my second degree, I was also a Mastercard Scholarship student, and it was good at providing materials and had a personal assistant to hire for us. That means we would hire someone to read to us and support us academically. In addition to that, there were various mentorship services and various soft skills training, and those things are good.” (Female, 25-35 years old, has a visual impairment)

That these forms of support are tied to scholarships rather than the educational institutions may mean that accessibility challenges for students with disabilities in the same institution may remain unaddressed. It may also exclude students who do not have information about these support options or how to access them. Therefore, wider availability of support as well as institutional readiness to provide accommodations to all its students with disabilities, regardless of scholarships, are needed to improve their experiences and educational outcomes.

#### Teaching practices

There were reports of negative attitudes and exclusionary teaching practices from teachers, including some who neglected to make even small adjustments such as allowing additional time for sign language interpretation to accommodate hearing-impaired students:

“The majority of teachers do not have a positive attitude toward people with disabilities. In the classroom where there is a hearing-impaired student, it should be appropriate to give an explanation after giving a note, because a hearing-impaired person only uses his eye as an eye and ear; therefore, for that reason, they should wait until we finish the note they write.” (Male, 18-24 years old, has a hearing impairment)

One participant reported that students with disabilities were forced to take only half the classes taken by their non-disabled classmates, as well as experiencing other forms of discrimination.

“We took six subjects. I mean the visually-impaired students will only take six subjects as opposed to non-blind students who take 12 subjects. Then I stood first in my class, but the school administration denied me because they said I should not compete with the non-blind students. In addition to these, some teachers show negative attitude towards me. They think that I am not able to do it in the correct ways. They don’t trust me.” (Male, 18-24 years old, has a visual impairment)

As is evident throughout the entirety of this report, negative attitudes, and the marginalisation of young people with disabilities is a fundamental issue extending through all aspects of participants’ lives and compounding multiple forms of discrimination. Addressing these attitudes is a crucial step toward improving the lived experience and quality of life for young people inside and outside education.

#### Enabling and inclusive environments

While many participants experienced countless challenges during their education journey, several also described the profoundly positive impact of support from peers and teachers in fostering an enabling learning environment. Particularly in mainstream schools where disability support is inadequate, most students rely on friends, classmates, and teachers to overcome academic challenges and fill in learning gaps.

“I had a good relationship with my friends since they help with my study by reading a book and guiding me. I have also good relationship with my teachers. I have no problem […] it is known that we study with help of our fellow students. They will read for us, and we hear them and take notes.” (Female, 25-35 years old, has a visual impairment)

It is important to highlight that although peer support can enhance a disabled learner’s experience by helping address lapses in accessibility and teaching practices, the responsibility of ensuring inclusivity lies with the education providers.

The data suggests that these forms of inclusion have a powerful impact not only on early learning experiences, but also on young people’s long-term education and career trajectory.

“The positive thing is, I was active and participated actively in the school. My teachers had a good attitude towards me. I have an attitude that as a disabled person, I should show my potential, that I can do whatever task given to me. I used to give lectures to my friends. It encouraged me in my next step of life.” (Female, 25-35 years old, has a physical impairment)

Several young people described the important role teachers and staff can have in creating either a positive or negative environment.

“My teachers and the school directors understood my situation. I quit for one semester at school when I get the treatment, so they wait for me till I got back. I can mention this as positive feedback. That helped me to continue my education. At the university also there are teachers who had good intention about me. That motivates me. When I come to the negative experience I had, I was in depression when this happened, and I was in self-crisis. I felt like I was nothing after that. So I took much lesson from this.” (Male, 18-24 years old, has a physical impairment)

Findings from this research indicate that disability sensitisation and increased awareness to create inclusive and enabling environments in schools could vastly improve education experiences for students with disabilities.

## 2. Transition to employment

The young people described varied experiences while transitioning from education to employment, with most expressing difficulties.

### 2.1. Challenges securing employment

The majority cited barriers around accessing employment opportunities and information, discriminatory attitudes from employers, lack of transportation to the workplace, and difficulty proving their skills and qualifications due to cost barriers or negative attitudes.

From the beginning of this transition, the young people faced obstacles like family members forbidding them from looking for employment, difficulty accessing information about job vacancies, and a lack of mentorship to navigate the job seeking process.

“My family do not let me go and search work and they consider me as a charity case that needs to be supported.” (Female, 25-35 years old, has a visual impairment)

The young people also reported discrimination in the recruitment and interview process.

“I finished studying three or four years ago. The problem I'm having is not getting the ads right, because the ads most company posts say they want a ‘healthy’ [person]. Even if it's not saying disability directly, but that's what they're try to say in another way. They say it as ‘completely healthy’. When I go there, they said, "well, we expected a healthy one; we posted that for completely healthy, didn't you see it?" It begins with moral condemnation. Then you try to convince him and pass him and you will pass the written test and when you enter the interview session, you will be challenged by other interviewers.” (Female, 18-24 years old, has a physical impairment)

Participants also reported instances where non-disabled people without qualifications were selected over a qualified person with a disability.

“I have been registered to one vacancy announcement. But I heard that a non-disabled person without having the required qualification was hired and we were cast out […] The employers should trust in our skills. We acquired the skills through hard work. They should believe us. We should be given an opportunity to show our skills.” (Female, 25-35 years old, has a visual impairment)

###  2.2 Challenges during employment

Young people who managed to overcome these challenges and gain employment opportunities often then faced accessibility and environmental challenges within the workplace.

“I get stressed when I think of going to my workplace, it doesn’t have any elevator, its congested and unfriendly.” (Male, 18-24 years old, has a physical impairment)

Likewise, participants experienced a lack of reasonable accommodations and inclusive job support which can significantly diminish work performance, the perception of supervisors or colleagues about their capability and potential growth, and ultimately, their chances of remaining in the job long-term. One interviewee described being forced to prove her ability to work for six months before the employer provided necessary disability support.

“As the result of I passed the test and the interview, they hired me, but they didn't hire an assistant for me until I showed my ability for about six months. Materials were not provided for me, for example, computers and other things were not given to me. I know I don't have that obligation and it is the institution that is obliged to provide the work materials, but if my performance drops on the last day, no one will help me in that time, so I had to go through that period of duty, so I went through that thing in my way.” (Female, 25-35 years old, has a visual impairment)

### 2.3. Need for support

All these barriers can prevent young people with disabilities from seeking jobs at all, as well as from successfully making the transition from education into gainful, long-term employment. These challenges caused socioeconomic, emotional, and mental stress for the majority of young people interviewed.

When I joined university, I was so happy and had great hopes for the future of my life. I was dreaming of a good life and planned big goals. And I completed my studies in this inspired mood. But after I completed the studies, things did not become as I planned and dreamed” (Male, 25-35 years old, has a hearing impairment)

The data revealed the need for additional financial and emotional support during this key transition point from education to employment, yet almost none of the participants reported receiving this kind of support during their transition. For some, this disproportionate burden led them to give up on seeking employment altogether.

“When they hurt me over and again, my mind went into the mindset that I can't do it either. I mean, sometimes when a good thing is repeated the result will also be good, and when bad things repeated the result is bad. Even if I want to, my heart won't let me. Even if I go, I can see the effort. The things I told you before come to my mind and I feel them and then I wonder if I should just sit down.” (Female, 18-24 years old, has a physical impairment)

Participants advocated in their interviews for more inclusive and accessible recruitment processes, provision of workplace accommodations and support, as well as increased awareness of the skills, qualifications, and capabilities of young people with disabilities among employers. They also recommended pushing for more opportunities for young people with disabilities to develop their capacity, employability, and skills to improve their chances as successfully transitioning into employment.

**Case study: Hanna**

Hanna is a 35-year-old woman with a hearing impairment who lives with her husband. With information from her husband, she once attended a two-year training on manufacturing wood works, which was organised and funded by a local NGO. In additional to the skills she learned from the training, Hanna benefited from the social interaction with other people with disabilities. She enjoyed socialising with other trainees without a language barrier.

Hanna missed some of the training sessions because she could not always afford the transport cost to the venue and the pocket money she received from the training centre was very low. Despite the challenges, the training had a significant impact on Hanna’s life. She found the training to be very helpful and even got her current job through the opportunity. Hanna recommends that trainings like these could greatly benefit with hearing impairments if there is sufficient information and the training is made accessible to people like her.

### 2.4 Vocational training

Participants indicated that Technical and Vocational Education and Training (TVET) programmes have the potential to provide valuable skills and improve both employment opportunities and quality of life for young people with disabilities. However, the data illustrates that the intention of TVET and the actual impact are often misaligned. Despite the common assumption that vocational training is the best alternative to schools that lack sufficient disability inclusion, the young people reported that TVET centres in Ethiopia often have the same accessibility, transport, and accommodation issues found at other schools.

“...libraries were not comfortable. Another challenge for people with disabilities is that there are no accessible toilets anywhere. When we have urinary cysts, we face other diseases. And they were challenges for me. I was walking a long distance on the road and that was also a challenge for me…” (Female, 25-35 years old, has a physical impairment)

These challenges can make it more likely that young people with disabilities drop out of their programme or never access vocational training at all.

“I have almost adapted the situation, but previously I used a taxi for transportation, so transport was difficult for me. The other thing was the building and other facilities are not suitable for me. The stairs were not suitable for me. When I was a TVET student I was assigned to a classroom on 3rd floor. But I just quit to that school because I couldn’t climb the stairs. The infrastructure is poor and not suitable for a person who has disability. Even some buildings have a ramp which is not properly constructed. Sometimes it might be steep or sloppy.” (Female, 25-35 years old, has a physical impairment)

Participants also echoed similar experiences and concerns around negative attitudes as those attending traditional education institutions. One young person shared the damaging effect this had on their mental health and willingness to continue attending.

“I spend more of my time on depression than attending the class. There were teachers who asked me ‘why did you choose this field of study, do you join by your choice, or it is because you haven’t options?’ and other exhausting questions. It was difficult for me because there were inappropriate questions from the teachers.” (Female, 25-35 years old, has a physical impairment)

While vocational training might offer alternative and helpful education opportunities for some students with disabilities, it is essential that these programmes implement the same accessibility and accommodations supports needed at other places of education.

## 3. Experiences in the agricultural sector

Agriculture is the main economic activity in Ethiopia, constituting 77% of the country’s export commodities [19]. Although it remains a priority in the Ethiopia 2030: The Pathway to Prosperity Ten Years Perspective Development Plan (2021–2030) [20], specific programmes and strategies to engage people with disabilities in the sector are lacking.

Eight participants were sampled to provide deeper insight into experiences of people with disabilities working in the agricultural sector in Ethiopia. However, this sub-group is comprised only of people with intellectual and/or psychosocial impairments. Therefore, the findings are less likely to apply to other impairment groups and cannot be generalised across all categories. Further research on experiences in agriculture for young people with other types of impairments in Ethiopia would be useful in the future.

The analysis on experiences of young people with disabilities in agriculture shed light on two key insights, including a lack of autonomy and choice for young people with disabilities in agriculture, as well as negative attitudes and significant stigma toward those with intellectual and psychosocial impairments.

**Case study: Abebe**

Abebe is a 28-year-old man with intellectual impairment. He is from a rural area of Ethiopia and is currently engaged in farming. Abebe can’t do everything by himself, especially when he relapses into his illness. When this happens, his family and neighbours help do the harvesting. He can’t be effective in his work because of the side-effects of his medications, so he chooses to work every other day. He is still engaged in agriculture because it’s the only way to support his family even though he is not satisfied with his job.

Abebe sometimes has to borrow money from other people to sustain himself. Finances are a major challenge for him due to the high cost of commodities like fertilisers, seeds, and equipment for agriculture.

### 3.1 Lack of autonomy and choice

Nearly every participant sampled for their experience in agriculture described a lack of autonomy and choice around their involvement in the sector. For most, they were forced into agriculture because they did not perform well in school, their families did not wish to support the cost of their education, alternative opportunities were limited in rural areas, or because agriculture was a family business, and they were expected to contribute labour as a familial obligation.

“My family’s livelihood is agriculture work and I work with them. I started since I was a child, about 9 or 10 years ago. Because as I told you it’s my family’s, so I should support and work with them as a family member.” (Female, under 18 years old, has an intellectual impairment)

The majority of the young people interviewed stated their desire to continue in school or pursue a different career but lacked the necessary resources and support to do so. Only one of the eight participants expressed a passion for working in agriculture; the others felt they had no other choice.

“I was left with no option. In the rural area, I am assumed to be a farmer, not to go to school because of my mental problem. They tell me I must wait for the day I die since I was born a human. Till then I do the farming.” (Male, under 18, has an intellectual impairment)

Several participants also described dropping out of school due to mental illness and other challenges related to their impairment, which led to working at home in agriculture. Some sought support in hospitals or attempted treatment with medication; however, these efforts often proved ineffective or inaccessible (e.g. too expensive, medication didn’t work well, etc.) and prevented their return to school. For some, ineffective treatment options also influenced their productivity in agriculture itself.

“I don’t have anyone to assist me, so I work all the things by myself. So, the illness started, and I become inefficient with my work. I discontinued the medication for 5 years since I have not much improvement. Then my family intervened, and they urged me to restart the medication […] But I was not effective since my illness started. I started to take medications. It is very difficult for me to continue in agriculture.” (Male, 25-35 years old, has an intellectual impairment)

The participants’ accounts highlight the pivotal role of autonomy and decision-making power in employment choices, the burden of poverty on young people with disabilities in rural areas, and the need for increased access to treatment that is appropriate, effective, and affordable for intellectual and psychosocial impairments. However, from these specific interviews, the foremost issue highlighted by participants is that of negative attitudes and stigma toward mental health challenges, which can have drastic consequences on the education and career trajectory, as well as overall wellbeing, of young people with disabilities.

### 3.2 Negative attitudes and stigma

The young people shared numerous accounts of negative attitudes, stigma, and discrimination from family and community, which significantly shaped their engagement in agriculture. This section touches only on negative attitudes related specifically to agriculture. We explore attitudes and stigma in-depth as a cross-cutting issue in a later section on ‘Reflections.’

The most common manifestations of stigma described by participants include assumptions around their inability to succeed in education or an alternative career, refusal to support their education financially, treating non-disabled siblings differently, and using agricultural work as a means of keeping young people with mental health issues hidden from the community, out of embarrassment. All of these facets of stigma contributed to young people’s lack of autonomy to work in a sector other than agriculture.

“I was sitting at home after I dropped out of school. I was selected for farming from our family because I have a mental illness. They perceive that I may not be successful with school. My brother and sisters go to school. […] I have no option. I am left with only being a farmer.” (Male, under 18 years old, has an intellectual impairment)

Several participants illustrated the compounding effect of stigma, poverty, and living in a rural area as significant factors keeping them out of school and engaged in agricultural work. With access to land or a family farm, agriculture is often seen as the more practical option than a costly or distant education, particularly if the young person is not expected to perform well in school.

“I live in a rural area where there is no school. And my father died when I was a child. So, I continued with the agriculture instead of going to school. […] I have my own land. I will sow seeds and collect the harvest. I was doing my job by my own. I was living with my mother. She was very old. I was the one who was responsible.” (Male, 25-35 years old, has an intellectual impairment)

In one case, a young person shared an account of mistreatment, exclusion from school, and forced labour on the family farm, including pressure to perform tasks beyond their capacity.

“The major problem is my stepmother; she forces me to do jobs beyond my capacity. I want to go to school, but my stepmother doesn’t allow me to go out. She wants me to stay home and do the agriculture work.” (Female, under 18 years old, has an intellectual impairment)

This participant also described suffering physical abuse, as well as being isolated in the home and on the farm in the parent’s attempt to hide the young person’s impairment and mental health problems from the community.

“I have a fear of socialising because my stepmother tells me not to socialise, [and] instead she hides me. […] She hits me, and she tell me not to go to neighbours.” (Female, under 18 years old, has an intellectual impairment)

While these findings are limited by the sample size and impairment type, they suggest that some young people with disabilities are working in agriculture largely due to exclusion from education and other career opportunities, lack of opportunity in rural areas, and because of mental health challenges rather than by choice. Increased effort should be made to identify and include young people with disabilities in rural areas in education and employment initiatives. Most importantly, more work needs to be done to reduce stigma and change negative attitudes, beginning at the family level, so that young people with intellectual and psychosocial impairments can exercise their right to dignity, autonomy, and self-determination.

### 3.3 Needs

Analysis of youth narratives highlighted three ways in which youth with disabilities may be supported in the agriculture sector. These are in addition to cross-cutting enablers like assistive products that are detailed under Reflections.

Training

As outlined above, nearly all participants reported a disinterest in working in the agriculture sector. One participant who expressed an interest was one who had received some form of training, highlighting a potential strategy to attract more disabled youth to this sector.

“I need language skills, and I wanted to be educated to become a modern farmer. But the training I got is enough so I can perform my job. […] It could be good if trainings are given nearby. Transportation service and accommodations are necessary.” (Female, under 18 years old, has an intellectual impairment)

The quote also emphasises two key points: that the training needs to be (1) comprehensive enough to bridge gaps in literacy among youth who have been excluded from formal education; and (2) accessible to accommodate their accessibility requirements.

Financial support

The data highlighted how financial support could address many of the challenges faced by young people with disabilities working in agriculture. It could help create interest and retain youth who enjoy farm-based work.

“I feel comfortable when I spent my time alone. I was stressed when I was in education but now, I just spent my time with the cattle. And agriculture is my passion, so I like farming […] I need some farming instruments. I can’t afford the farming works.” (Male, under 18 years old, has an intellectual impairment)

With financial support, youth could source the appropriate tools and equipment to scale up their endeavours.

“I don’t have any supports to enhance my profitability on my work. Especially I need updated farming materials to become more effective and profitable. (Male, 18-24 years old, has a psychosocial impairment)

The data highlights the different forms of support needed by youth with disabilities working in agriculture, ranging from being able to afford hiring people to help with the manual labour to medication necessary to better function in daily life and work.

“Because of this disease I could not perform my day-to-day activities. I seek people’s help to work on farming. I just want to sleep most of the times, I have no morale to work. I need help to perform home activities like baking, bringing water from the lake. I need medication to perform my daily jobs otherwise I can’t perform anything. I need every support to perform my job.” (Female, under 18 years old, has an intellectual impairment)

These needs described by youth with disabilities highlight clear gaps to which programmes could respond, to promote their interest and engagement in the agricultural sector.

## 4. Experiences in the manufacturing sector

The Ethiopian government has ambitious plans to develop the manufacturing sector under the Growth and Transportation Plan II (GTPII). Despite strong growth, the sector’s share in GDP and total employment are lower than the African average [21]. Our Phase 1 study revealed an absence of policies, programmes, or strategies to promote disability inclusion in the manufacturing sector. Information is lacking about the proportion of people with disabilities employed in the manufacturing sector.

Seven participants were sampled to provide deeper insight on experiences of people with disabilities working in the manufacturing sector in Ethiopia. The analysis highlighted key challenges including limited opportunities, financial barriers, and the need for a Certificate of Completion to successfully acquire new skills and gain employment in the sector.

**Case study: Saba**

Saba is a 35-year-old woman with a physical disability. She lives with her husband an urban area of Ethiopia. She is engaged in a small-scale enterprise to manufacture wood works like puzzles. She got her job through a manufacturing training for people with disabilities that was facilitated by the government. She loves her job and appreciates her income, but her workplace is very congested, overcrowded, and is not accessible. The lack of accessibility at work restricts her to movement and causes her stress.

Saba said she is not aware of her rights as a person with a disability, and she doesn’t know about accessibility or tax considerations for people with disabilities under Ethiopian law. Saba doesn’t think she is a beneficiary of these policies or programmes due to a lack of awareness and information. She does believe that digital skills training would benefit her in promoting her work and easing job-related demands.

Out of the seven participants sampled for their experience in manufacturing, only three reported having access to training opportunities. These young people participated in manufacturing trainings on furniture, art, puzzles, electronics, and household appliances. However, for the few who had access to these programmes, they described challenges around the availability of trainings, accessibility issues, and the need for financial support, both during and after trainings, as young people attempt to use new knowledge to start a business.

“Basically, I should know something on the things I am going to work on. So, I need various trainings and work experience opportunities. Then I should be able to support it with finance. Many of our friends have taken training for 6 months, but they are sent home back without any financial support. This prevents them from implementing their skills which they acquire during the training. So financial support is mandatory, in addition to the skills and the trainings.” (Male, 18-24 years old, has a physical impairment)

The young people working in manufacturing also highlighted the financial barriers they faced, particularly in the beginning stages of starting work or creating a business. One participant reported successfully obtaining approval for a project proposal and receiving financial support from the Ethiopian government; however, this proved to be the exception and not the rule among the majority of participants.

“I can say we started from zero. The government provided us with working area/shelter, facilitated the working licence. There is also an organization, where we provided our project proposal. And they donated around 52,000 ETB and we bought small machines with it. And again with the help of the same institution that helped us, we were able to buy a large machine. We were able to broadcast our products on EBS [TV]. Thanks to them they have helped us. This helped us to promote our products to the market and population.” (Female, 25-35 years old, has a physical impairment)

One prominent challenge shared by young people involved in both TVET and manufacturing was being excluded from Certificate of Completion (COC) exams to demonstrate their qualifications and acquire a business license. This participant highlighted the need for more inclusive TVET opportunities in manufacturing, as well as giving young people with disabilities access to COC exams.

“I suggest the [TVET] institution’s electricity department accept disabled people. It’s not possible to get COC exam, to get licence. So, it starts from government and institutions, then the community will change its attitude.” (Male, 25-35 years old, has a visual impairment)

One participant working in manufacturing electronics and household appliances shared his successful experience in the sector, citing the importance of learning new skills, making connections, and utilising new technology like social media to market products. Although he has been successful starting and marketing his business, he still pointed out the issue of not being given any type of certificate to prove his qualifications.

“I learned them by myself. And if you get [any] tips, you can broaden your knowledge. If you have an interest to know and to learn skills, you can develop your skill in a very short period of time. I was involved in displaying my manufacturing products to different institutions but none of them have given me a recognition certificate. I have also displayed my products on different mass media, which helped me develop my connections.” (Male, 25-35 years old, has a visual impairment)

Another participant shared her experience with an inclusive manufacturing training on making puzzles that helped her get her current job. The training was organised with the help of a family member who ensured it was inclusive to people with disabilities, covered transport expenses, and provided pocket money for participants. Not only did the young person get a job as a result of the training, but she reported having a highly positive experience of inclusion and relationship-building with other people with disabilities.

“Disabled people there in the training had good communication and relationships with each other. It was the perfect training for me. The training materials were helpful and makes it feasible. It was very helpful. It was my dream to take this kind of training. It helped me to get the job that currently am doing.” (Female, 25-35 years old, has a physical impairment)

These positive insights offer a roadmap for the types of skills trainings and knowledge gaps that should be targeted to improve opportunities for other young people with disabilities interested in manufacturing.

## 5. Reflections

Described below are reflections on cross-cutting factors that shape the experiences of young people with disabilities in Ethiopia.

**Case study: Aberash**

Aberash is a 29-year-old woman with a visual impairment. She lives in a rural area of Ethiopia with her family. She is educated but not currently working. She uses a cane and eyeglasses to move from place to place, but she was not able to buy these devices on her own. She received her cane from the government as a donation after three months of registration. She needs it to go everywhere.

Aberash doesn't use any other assistive product related to her impairment. She knows assistive products would help her to search for and get a job, but she doesn’t know where to access them. She also receives no financial support, which is a major barrier to obtaining and using this technology.

### 5.1 Assistive products

Assistive products are equipment or devices that enhance an individual’s functioning in education, work, and daily life. The table below shows the type of assistive products used by the study participants, noting that this study did not involve assessing the need (or unmet need) for assistive products.

|  |  |  |
| --- | --- | --- |
| Impairment type | Number of participants | Assistive products used |
| Physical  | 6 (Of these, 5 had mobility difficulties) | Wheelchair=2Walking stick/cane=1 |
| Visual | 6 (Of these, 4 could not see at all) | Stick/local version of white cane=1 |
| Hearing  | 9 (Of these, 6 could not hear at all) | Hearing aid=5, but none were using them |

The analysis of narratives on assistive products revealed three aspects: (i) variation in access; (ii) lack of awareness; and (iii) the high cost of products limiting initial access, replacement, and upgrading to more effective models.

#### Variation in access

Access to assistive products varied greatly across participants. Some young people had no access to assistive products and others discontinued use over time due to faulty products. However, the central theme throughout was the exclusionary cost of purchasing, replacing, and upgrading appropriate assistive technology.

A limited number of participants reported receiving appropriate and effective assistive products. Some products were provided through government programmes, education institutions, or other non-governmental organisations.

“Yes, we are given assistive products like papers, canes, and stylus […] I have get technologies after I graduated from university from the government. Like special eyeglasses […] it is special eye glass which has camera on it. It has speaker and tells you what is in front of you.” (Female, 25-35 years old, has a visual impairment)

Some young people had access to assistive products but reported that they either did not help them or made their impairment worse. This was a recurring theme across hearing-impaired participants who experienced difficulties with faulty or ineffective hearing aids. Out of the nine hearing-impaired participants, five had hearing aids, but none used them in everyday life.

“Yes, there is also a hearing aid, but I don’t use it because it’s not helping me, rather it’s disturbing me.” (Male, 25-35 years old, has a hearing impairment)

One participant reported being provided with a support person to assist with reading, as well as having access to screen-reading software on the computer and phone. Unfortunately, this experience was not the norm among the majority of participants.

“Yes, because I am person with disability who is blind, some jobs require sight because they are vision-related, and this is especially true now that I am doing work-related research and that requires a lot of reading and writing. And now the technology is there to do that. There are screen-readers on computers and our phones, but sometimes there are hardcopy materials that I can't read, and I need human help to access them.” (Female, 25-35 years old, has a visual impairment)

This young person was also aware of new assistive technology being developed and distributed through the Office of the Prime Minister, but hadn’t yet received this technology.

“But now the technology is developing, and maybe you have the information: Orcam My Eye, a pair of glasses for the blind, is now available […] You can also move on the road, and it will tell you the obstacles in front of you. It also helps you identify people if it's someone you already know, and that kind of technology has come, and it is now being distributed through the Prime Minister's Office, through the First Lady. So, there are such technologies that are helpful for the blind. And I think such devices are useful.” (Female, 25-35 years old, has a visual impairment)

Many participants had limited or no access to necessary assistive products due to access barriers, a lack of awareness, or because assistive technology was too expensive. In addition to removing barriers to assistive products, the data highlighted a gap in awareness of assistive products which needs to be addressed.

#### Lack of awareness

A key step for young people with disabilities is knowing what assistive products are available to them, their rights under the law, and how to advocate for the products they need to navigate environmental challenges. The data indicated a key gap in awareness of assistive products and technology, particularly in the rural areas in Ethiopia.

“I have no access to the most necessary issues. This is a rural area, we don’t know anything about assistive products, I have never heard about this before.“ (Female, under 18 years old, has an intellectual impairment)

When asked about assistive products, many of the rural participants did not know the names of products, how they were used, or where to go to obtain them.

“Things are not accessible in the rural area I even don’t know the name of the technology devices.” (Female, 18-24 years old, has an intellectual impairment)

This lack of awareness may be influenced by the nature of participants’ impairments, in this case intellectual impairments, which typically do not require the more well-known assistive products like hearing aids or wheelchairs. However, the data still highlights the need for improved awareness of disability support and assistive products in rural areas of Ethiopia.

Prohibitive cost of assistive products

The prohibitive cost of assistive products and technology was reflected in the data as one of the biggest barriers for young people with disabilities. Participants’ needs and the cost of products varied by impairment type but remained a prominent theme in the majority of interviews.

Young people with physical and mobility impairments reported facing cost barriers for products like crutches and wheelchairs. Those who successfully obtained these products often acquired them through involvement with OPDs.

“They were not easy. We can't buy the crutches in ourselves; the money is too expensive. I get it when I participate, it is in terms of using the support that comes from associations.” (Female ,18-24 years old, has a physical impairment)

Young people with sensory impairments described the high cost of support services, products, and software. For example, participants with visual impairments reported needing expensive services and technology like personal readers, E-readers, and text-to-audio software, which are almost never provided through education institutions or the workplace.

“Sometimes I need someone to read for me. Or there are screen-readers and computers. That is not a free service, so I need to pay. So financial problem is major issue to cover cost of readers.” (Female, 25-35 years old, has a visual impairment)

In order to improve access to assistive products, more work must be done to diminish cost barriers, especially for those most vulnerable to poverty.

“I really want to have those assistive products that can help my disability, but I have no money to buy them.” (Male, 25-35 years old, has a visual impairment)

As this young person aptly stated, assistive products are a fundamental human need for those with disabilities and should be conveniently accessible. When products are affordable and accessible, young people with disabilities are much more likely to succeed in their education and employment endeavours.

“First, their assistive products should be convenient. There are three basic things for a human being, and there is a fourth basic thing for a person with disability, which is assistive products. Assistive products that work perfectly. If you are given the right support, which is full or active, is convenient, it will be an advantage and you go a long way.” (Female, 18-24 years old, has a physical impairment)

These narratives highlight the vital need for better overall access to technology and products, improved awareness among young people with disabilities in rural areas, and assistive products which are accessible, affordable, and effective.

### 5.2 Digital Skills

Access to and awareness of digital skills among participants was similar to that of assistive products. Many participants were unaware of digital skills, had no information or access to training in this area, or felt that learning digital skills was relevant only to those who could afford expensive technology like smartphones and laptops. Participants also reiterated a lack of knowledge and awareness of digital skills specifically in the rural areas.

“My thought is these digital technologies are expensive to have, so I don’t have the courage to know more about them since I can’t afford and it’s a new term for our community.” (Female, under 18 years old, has a hearing impairment)

The data highlighted challenges with digital skills in the urban areas as well, particularly around affordability, family support, and lack of access to technology. One participant was studying Information Technology (IT) and felt it was an integral step toward progressing in her education; however, she had no access to a personal computer or laptop to continue using these skills outside the classroom.

“There is no helpful tool that I am using now. But, for example, the course I am currently studying is IT Database. I need always to practice the IT Database on a computer so that I can learn a good level of education. And I would love to have a computer or a laptop. I mean, I'd love to have that kind of help to be different or better.” (Female, 18-24 years old, has a physical impairment)

Limited access to digital skills trainings, information, and technology can have a significant impact on young people’s education and employment. Yet, despite limited opportunities, participants expressed a keen interest in developing their digital skills.

“I want[ed] to continue my education, I was dropped out from Grade 8. Also, if I get knowledge on digital skills, then after 5 years I can have good technological skills. I want to teach sign language to many people so that we can easily communicate with the community.” (Female, 25-35, has a hearing impairment)

Moving forward, effort should be made toward improving the accessibility and affordability of opportunities in the digital space in Ethiopia, as well as increasing awareness and digital literacy in both urban and rural areas.

### 5.3 Stigma

Participants described experiencing stigma and in many aspects of their lives, including from family members, peers, teachers, prospective employers, and the community at large. Below, we outline the ways in which stigma affects education and employment, highlighting key forms of stigma that young people with disabilities often experience including (i) negative attitudes and stereotypes; (ii) bullying and violence; and (iii) discrimination and exclusion.

#### Negative attitudes and stereotypes

For some young people with disabilities, negative attitudes are experienced first within their own family. Negative attitudes from family can encompass things like refusing to pay schools fees, overprotection resulting in isolation, and harmful stereotypes around capability.

“I hate my life, I don’t think people around me consider me as a human, I am isolated even within my family, they tell me I am useless.” (Female, 18-24 years old, has an intellectual impairment)

In some cases, negative attitudes within the family can also result in coerced labour or experiences of domestic violence, as we saw in the section on agriculture.

“My aunt took me from a rural area, and she said she will let me go to school in the urban area. But she let me work as a house maid. Then when my eyes were sick, they fired me and returned me back to my aunt. And she said she ‘you don’t want to work, you are lazy’ and fired me from her house. Then I went to braille training institution where they accepted me and gave me a shelter. So, in general it was a difficult journey. There are times that I don’t eat, don’t have shelter. So, it is difficult.” (Female, 18-24 years old, has a visual impairment)

The young people’s narratives make it clear that early experiences of negative or positive attitudes within the family can have a monumental impact on all aspects of life, including self-esteem and confidence.

“I don’t have full self-confidence, it means I decide something to do, but I back from taking the risk that thing requires. Because as I told you before I was grown in difficult growing condition, and I think that is the main reason for the view of myself. Even if I have full confidence to it, I fear taking the risk.” (Female, 25-35 years old, has a psychosocial impairment)

The data illustrated that negative attitudes in the family can influence access to education and employment opportunities, exposure and relationship-building within the wider community, and one’s sense of confidence and self-acceptance. Therefore, the work of changing attitudes should first begin at the family level.

**Case study: Adanech**

Adanech is a 35-year-old woman with a visual impairment. She is currently in the manufacturing sector. She always experiences negative attitudes and behaviour from people, especially when there are social gatherings in her community. She says people look at her as a different creature and talk behind her back. Adanech is also a mother and has experienced negative attitudes about herself and her child.

Adanech recommends creating more awareness about disability to improve negative attitudes and stigma. She thinks the youth, teachers, and community members should take mandatory trainings on disability. Adanech says these trainings should include representation of people with visual impairments and show that people with disabilities also have the ability to give birth and raise a baby, move from place to place, and eat by themselves. She hopes messages like this will improve negative attitudes and stigma toward people with disabilities.

#### Discrimination and exclusion

Discrimination and exclusion based on disability is a pervasive form of stigma highlighted by many of the participants. In the interviews, young people reported discrimination and exclusion in education, employment, social spaces, and in daily life.

“Sometimes we fight with our friends, who think of us as unable and inferior. There are also many people who have a lack of awareness and who think of a person with a disability as inferior and powerless. Due to that I face some challenges due to discrimination.” (Female, 18-24 years old, has a hearing impairment)

The participants described facing common stigma from others who believed people with disabilities to be inferior, as well as battling internalised feelings of inferiority.

“I have never got psychological support, and also, I have less socialisation so I never get social support. The community advises me to stay home. For example, I have ‘edir’ [traditional contribution] so they always tell me not to go when they gather. I have no social interaction at all. Because I feel inferior. I have never had financial support.” (Female, 25-35, has a visual impairment)

Young people excluded from social spaces often experienced in increased isolation and resulting mental health challenges. One interviewee was isolated because of community misperceptions and fear around mental illness.

“I am weird in my community, the community isolates me, they think I may harm them, so I always keep distant from people.” (Female, 18-24 years old, has an intellectual impairment)

This isolation proved to shape many young people’s self-esteem and self-confidence.

“I have low self-esteem. I hated myself and I feel isolated from the society. This has impacted my life badly.” (Male, 18-24 years old, has a psychosocial impairment)

One prominent form of exclusion highlighted by many participants in school was being denied participation in sports and other extracurricular activities. Several participants were rejected from participating in clubs altogether, while other were only allowed to join activities specifically for people with disabilities.

“She participates in sports activities only that are arranged for them alone. They can’t participate in other clubs. Most of the time, the actively participating students are students without disabilities.” (Caregiver of female, under 18 years old, has an intellectual impairment)

Some young people were involved in mainstream activities and clubs, yet still felt socially and emotionally excluded from their peers.

“I am in literature club in my school, but I don’t feel belonging as other students.’’ (Female, 18-24 years old, has a visual impairment)

Many participants expressed their desire for increased inclusion in sports and other extracurricular activities, as well as to feel more belonging and acceptance from peers in these spaces.

### 5.4 Support structures

Despite the intense stigma and discrimination people with disabilities continue to face, the young people also shared encouraging examples of support from family, friends, teachers, and community members.

#### Family

Family support was said to make a fundamental difference in the lives of many young people, most commonly by helping them achieve personal aspirations and giving them a sense of belonging. One participant first learned disability acceptance and inclusion from his father, who is also disabled, demonstrating the powerful effect of family support and disability role models.

“Sometimes disability is seen as a big problem and bad luck by family members and society. But I am lucky. Since my father is also disabled, he has the knowhow. He participated in different events about disability, so I believe that helped me. My family treated me as if nothing happened. They didn’t treat me as special person. Normal life goes on. So I didn’t find it hard to accept it psychologically.” (Male, 18-24 years old, has a physical impairment)

One young person also stressed the importance of family support, especially emotional support, in developing self-confidence, resisting internalised stigma, and building resilience toward challenges.

“The first and the main thing to continue in their education, they should develop their self-confidence because it’s the problem of lack of self-confidence that leads us to lose lots of things which are relevant for us. When we think and are stressed about what others says about us, first of all it hurts our mind, and we wouldn’t be active in our education. The family should be taking care of its children and at least they should listen and understand their feelings and give good support to protect their psychological attacks. Because students with disabilities could feel bad and think of themselves as inferior, when they face lots of challenges and see the good environments of students without disabilities. Therefore, starting from this the family should support its children in many things. (Male, 18-24 years old, has a physical impairment)

While positive attitudes should ideally begin within the family, participants also emphasised the powerful impact of positive support and empowerment from friends and peers.

“Families are like pillars to persons with disability. It is them who motivate and give continuous support for their children. It is them who can give hope or discourage them. Friends can influence either negatively or positively. So I think friends should give psychological support regarding a positive spirit towards their attitude. (Male, 18-24 years old, has a physical impairment)

#### Friends and peers

The data illustrated that support from friends and peers had a range of benefits including creating a sense of belonging, lessening impairment-related barriers, and reducing the impact of stigma. One young person coping with a psychosocial impairment found that receiving support and solidarity from other young people struggling with mental health had a significant impact on their healing experience.

“There should be support from people. They need someone to talk to and acknowledge them. There are my friends with similar problem and experience that we used to talk. I feel safe and knowing and talking to someone with the same problem makes my mind comfortable and think that I am not alone with this kind of problem.” (Male, 18-24 years old, has a psychosocial impairment)

Peer support was also instrumental in filling the financial, emotional, and mental void left by unsupportive families, teachers, and employers. The findings point toward the immense potential of peer support networks to improve awareness, attitudes, and quality of life for young people with disabilities in Ethiopia.

#### Self-belief

The young people reinforced the importance of self-acceptance, confidence, and self-esteem in navigating challenges, exercising their rights, and advocating for other people with disabilities.

“Acknowledging the disability is a basic thing in itself. You will have the idea and the understanding. You give ideas to someone who has no understanding beyond you. After still having my own awareness, being able to create the awareness of others disability or the use of words when someone speaks, ‘No, this is not like this, this is like this.’ There are things you can do yourself. I think that in and of itself, you admitting your trauma can change other people's stereotypes.” (Female, 18-24 years old, has a physical impairment)

Cultivating a healthy sense of self-confidence was also highlighted as being key to navigating stress, stigma, and fostering resilience toward discrimination more generally.

“Currently I have a good understanding of myself, but in past days I was just fear to go out home and to join with peoples because I was afraid of what would be they say to me and thinking the way how they see me. But now days, I have solved such kind of fears and I am on building my self-confidence, and after that lots of opportunity doors were opened to me. Therefore, the understanding of myself is changing with time and I am seeing myself in better way now.” (Male, 18-24 years old, has a physical impairment)

In addition to improving other people’s understanding of disability, it is imperative that young people with disabilities are encouraged to also foster a positive perception of themselves, their inherent worth, and their potential to achieve their goals. However, without societal change and supportive environments, it is difficult to effectively build positive self-esteem and self-confidence.

### 5.5 Intersectionality

How, where, and in what ways young people with disabilities are included or can participate in education and employment varies greatly based on factors like gender, location, severity and type of impairment, and other aspects of identity. It is important to examine this intersectionality, to better support their inclusion.

Gender

Young women with disabilities often experience compounded discrimination as both disability and gender carry unique forms of marginalisation and stigma. One major challenge that came up for young women with disabilities was stigma around pregnancy and parenting, illustrating how disability and gender can interact in complex ways. For example, several young women were forced to drop out of school after becoming pregnant and all reported various forms of compounded marginalisation, financial stress, and increased mental and emotional weight from gendered discrimination.

“I got pregnant for the first time. And there were many challenges related to this. There are many attitudes from society. They said how I became pregnant. ‘How are you going to raise the child without seeing?’ And ‘your child is going to be blind.’” (Female, 25-35 years old, has a visual impairment)

Several young women with disabilities were excluded or mistreated by their family and community after getting pregnant due to stigma and stereotypes around disability and pregnancy.

“My family had a negative attitude towards me, they say I don’t have any use because of my hearing impairment. They hate me. Even when I gave birth to my first child, I called them, but they even didn’t visit me […] the awareness towards hearing impairment is very limited. When my children grew up, my family started to visit me. So, they witnessed that I could have a life that everyone can live. So, there is little awareness about this.”  (Female, 25-35 years old, has a hearing impairment)

Disability and pregnancy can also cause exacerbated difficulties due to health complications and the need for access to sexual and reproductive health services, which often worsens the economic burden many young people with disabilities already face.

“After I left my home, I started to live with my friend. I was not sharing house rental payments. She was paying the rent. Then she introduced me to a man. I got pregnant. I did 3 surgeries just because of the pregnancy. I stayed at the hospital for 1 year and 3 months. My friend took money from the man initially. Then she always advised me to be with him. She said he will support me, but I got pregnant and was hospitalised.” (Female, 18-24 years old, has a visual impairment)

In addition to difficulties related to pregnancy and parenthood, sexual and gender-based violence was also a concern for young women with disabilities in Ethiopia. This risk applies across all categories of disability, but drivers of sexual violence typically vary by type and severity of impairment.

One participant emphasised the disproportionate risk young girls with hearing impairments face with regard to sexual violence because they cannot hear or easily shout for help.

“The problem is worse when it comes to girls. So, they can be easily vulnerable to sexual violence because they can’t shout.” (Male, 18-24 years old, has a hearing impairment)

This was confirmed by other young people with hearing impairments, such as one young woman who described living in constant fear of men because she cannot sense what is happening around her, particularly at night.

Lastly, several young women underscored difficulties accessing sanitary products for menstrual hygiene management, which are often too expensive. One participant reported an abusive parent withholding sanitary products from her due to the high cost. Another spoke of looking for a job so she can afford her own sanitary products.

“What is difficult for me is my living condition. I couldn’t find a job because of people’s attitude. I can’t make money. I need advice from people as a support. I will work whatever kind of job I get. Since I am a woman, I need so many things like sanitary products at least.” (Female, 18-24 years old, has a physical impairment)

Access to sanitary products should be better prioritised by NGOs and OPDs for young women with disabilities in Ethiopia. Additionally, the data reflects numerous complexities associated with the intersection of disability and gender which beg further research, awareness, and accessibility efforts.

#### Urban-rural differences

This report has already touched on some of the distinct challenges young people with disabilities face in terms of urban and rural experiences in the sections on education, agriculture, and assistive devices. One important obstacle that arose from the data which has not yet been explored, is lack of access to assessments for an accurate diagnosis in rural areas, as well as lack of access to sign language instruction for hearing-impaired youth.

“I was in a rural province with my family until the disability happened on me. I didn’t know anything regarding hearing impairment and the sign language. It was a relative who brought me here, I didn't know anything about it.” (Male, 25-35 years old, has a hearing impairment)

Several other participants highlighted the lack of awareness in rural areas which kept them from being assessed and diagnosed with their disability early in life. Some spoke of not knowing they had a disability for many years and the overwhelming sense of relief when they finally understood their difficulties.

This was an important theme particularly for hearing-impaired youth who had no access to audiologists or opportunities to learn sign language in the rural areas. Similarly, those with psychosocial and intellectual impairments reported experiencing increased stigma due to the invisibility of their impairment, lack of awareness, and late diagnosis.

When I was in the province I had a lot of behavioural problems, I used to fight with people. And because of that, the family was very worried, and I was sent here to Addis Ababa with a relative. When I first came here, I was given a medical test to confirm that I was deaf. Since I had no knowledge of sign language, I joined the Ethiopian National Association of the Deaf and learned it. My parents themselves do not have the understanding about this” (Male, 25-35 years old, has a hearing impairment)

Limited access to diagnostics and appropriate healthcare can have dire consequences for young people with disabilities, including suffering increased discrimination and abuse because their behaviour is misunderstood, missing out on vital early experiences of childhood development and education, and experiencing severe social isolation that is difficult to overcome later in life. Therefore, more effort must be made to identify, evaluate, and diagnose young people with disabilities, especially in rural areas, as early as possible.

### 5.6 Voice and agency

The extent of voice and agency among the young people varied with the type and severity of impairment, household factors, and family dynamics. Participants reported being forced to attend schools that were not their first choice, working jobs out of obligation or necessity rather than free will, and restrictions from parents around participation, job seeking, and routine life decisions.

“I am not considered as human, my family and the community think I have no choices, they want to choose where I learn, what I eat and where I go, let alone to participate in different programs, that’s further.” (Female, 18-24 years old, has a psychosocial impairment)

Many young people expressed frustration over the lack of autonomy, independence, and decision-making power experienced in their daily lives. One visually impaired participant working in manufacturing reiterated the struggle for young people with disabilities trying to make independent decisions about their profession and facing negative attitudes and assumptions about their capability.

“The attitude towards us should be improved. The visually impaired people should decide for themselves not others. There should not be a restriction in choosing our profession. To do this or that. With our enabling them, one cannot and should not say you are not able to do this.” (Male, 25-35 years old, has a visual impairment)

While it was encouraging to see some positive examples of young people with disabilities exercising their voice and agency, it seems closely linked to their ability to get an education, work, and earn an income. This indicates that a focus on their economic empowerment is key to promoting their agency, voice, and participation in society.

**Case study: Gelila**

Gelila is a 23-year-old girl with an intellectual disability. Gelila wants to contribute her voice and opinions, but she feels that her community does not listen to her. Even when they do listen, she believes they do not accept her opinions because of her disability. If she were included, Gelila would love to participate and share her thoughts on various programmes, but so far has never been asked. Despite this, Gelila interacts with other people with disabilities and has a good relationship with them. She enjoys participating in disability associations every month. Gelila recommends that the government bring people with disabilities in Ethiopia together and encourage them to participate more in policies and programmes.

### 5.7 Aspirations and opportunities

Despite available information that allowed young people with disabilities to dream about possible education and work prospects, there was a discrepancy between what they aspired for, are confident doing, and the opportunities available to them. Several participants described how opportunities were limited or denied to them because of their disabilities.

“I have a big dream, to get my PhD, to have my own business and a happy married life, but I don’t think I will get the right opportunity that will match me, I have little information about job posts.” (Male, 18-24 years old, has a physical impairment)

Other participants felt there was a mismatch between their goals and opportunities due to a lack of personal relationships, as opportunities are often awarded on the basis of networking or family connections, which can prove difficult for young people who are often severely isolated. When asked if opportunities match the participants’ skills and preferences, one young woman said:

“I don’t think so, because I don’t have connection with people, so it is just my dream. I may not get the opportunities.” Female, 25- 35 years old, has a visual impairment)

The data showed that most young people with disabilities were just seeking an opportunity to prove their skills and realise their passions. Many participants underscored the importance of changing attitudes in effort to expand opportunities for young people with disabilities.

“Yes! While there is an attitude problem, there are also opportunities. If you are competitive, I don't think there is any reason why you shouldn't have the opportunity, but as I said, this lack of an attitude will affect you greatly. Even if you are able to work, even if you are qualified to get the opportunity, the problem with our attitude and the problem with the attitude of the people who give us the opportunity in that place will have an impact.” (Female, 25-35 years old, has a visual impairment)

Many of the young people aspired to achieve their goals, as well as share their experiences in an effort to create change for the next generation of young people with disabilities.

“The main vision of me for the future is education. I would like to, if I can, study and graduate in Astronomy. And I want to support other students with disabilities as much as I can, because I know the challenges and how can I reach this level and I have costed many things to see this day. Maybe they are facing many challenges that bigger than me, therefore, I want to support them as much as I can. That’s my future vision and dream that I want to do.” (Male, 18-24 years old, has a physical impairment)

The young people were passionate about using their own experiences of adversity to advocate for change, improve attitudes, and help other members of the disabled community reach their potential in education, employment, and in life.

“I want to be a change maker even if I am passing through a lot of challenges. It is known that there is a negative attitude and lack of awareness about disability in this country. I want to change that.” (Female, 25-35 years old, has a hearing impairment)

The young people with disabilities interviewed in this research had the passion and potential to achieve their aspirations; however, it is clear that bringing these aspirations to fruition requires substantial societal change. With increased support, awareness, and opportunities, these young people are more likely to live up to their potential, fulfil their aspirations, and set a positive example for other young people with disabilities in Ethiopia to follow.

# Recommendations

This study has built on findings from past phases of this research, highlighting several areas for change to promote inclusive education and employment for young people with disabilities in Ethiopia. These include:

**Improving access to education and vocational training**

· Build the institutional capacity of schools to foster better inclusion for individuals with a diverse range of impairments by investing in human resources, inclusive learning tools, assistive products, and structural accessibility requirements.

· Improve advocacy and awareness of government support and programmes for young people with disabilities to ensure funding reaches and benefits those who need it.

· Train teachers and school directors to identify children with disabilities, create disability-inclusive environments, and sensitise staff to the unique needs of students with disabilities.

· Raise awareness among students on disability to reduce bullying, violence, and stigma.

**Improving access to employment**

· Provide opportunities to gain post-secondary skills for the labour market by strengthening the capacity of vocational and technical training institutions and making them more inclusive and accessible.

· Strengthen policy implementation by developing monitoring frameworks to inform and enforce inclusive employment policies.

· Implement policies and programmes to support young people with disabilities in the agricultural and manufacturing sectors and ensure they are inclusive.

· Improve opportunities for young people with disabilities to access financial support for skills trainings, the job seeking process, and start-up capital for small businesses.

· Increase access to digital skills for young people with disabilities to improve their opportunities in formal and self-employment.

· Improve stakeholder engagement to address employment needs of young people with disabilities and provide avenues for experiential learning.

**For general programmes and policies**

· Develop tools and policy implementation mechanisms to assess, measure, and improve disability inclusion in policy and programmes.

· Document and showcase successful initiatives for and by persons with disabilities to instill societal confidence, combat stigma, and incentivise further action.

· Strengthen child protection mechanisms to address sexual violence, forced labour, and domestic abuse of young people with disabilities, particularly for those most vulnerable and isolated.

· Increase financial support for families of young people with disabilities to offset the economic burden of disability, education, and transport costs, and improve access to assistive products.

**For researchers**

· Improve coverage and utilisation of up-to-date disability-disaggregated data in both rural and urban settings to better understand the needs, risks and challenges faced by young people with disabilities in Ethiopia.

· Investigate underlying factors related to health and quality of life for young people with disabilities that may hinder their access and utilisation of education and employment opportunities.

· Explore, test, and evaluate potential programmes and interventions to address the priority information gaps, needs, and risks identified in existing literature to improve quality of life and disability rights in Ethiopia.

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# Appendix: Methodology

This report is based on in-depth qualitative interviews with 30 young men and women with disabilities in Ethiopia to explore lived experiences around education and employment. For education, we collected data from youth currently in education (secondary, tertiary, vocational), those who were educated but not working, and those not in education and not working. For employment, the research focus was the agricultural sector and the manufacturing sector, selected in discussion with the Mastercard Foundation.

### Qualitative data collection

In Ethiopia, the interviews were conducted by two research assistants (Ariam Hailemariam and Mohammedsani Ali) among whom one was a young person with disability. They were led by Dr. Eshetu Girma from Addis Ababa University, who monitored data quality and progress. Prior to data collection, the research team participated in training workshops (jointly with other country teams) facilitated by LSHTM that covered ethical protocols, interview techniques, maintaining data quality, and in-depth discussion of topic guides. Draft topic guides were pilot-tested, and research teams participated in feedback workshops after conducting at least one pilot interview.

Topic guides for the interviews were developed in discussion with the broader project team, Mastercard Foundation and Youth Advisory Groups comprising youth with disabilities based in Uganda and Ghana. Interviews were conducted in Amharic between September to December 2022.

Ethical approvals for the study were obtained from the Research Ethics Committee at the London School of Hygiene and Tropical Medicine and Addis Ababa University. All participants were provided with information about the study and written informed consent was obtained before the interview. Interviews lasted between 45 minutes to one hour. All interviews were conducted face-to-face and were audio-recorded after informed consent was given by the participant. Interview recordings were transcribed in Amharic and translated into English by Ariam Hailemariam and Mohammedsani Ali for analysis.

After data collection and transcription, the researchers participated in a data analysis workshop held in Uganda with other East African country teams to discuss approaches to coding and analysis. A coding scheme and codebook were developed based on the study objectives and emerging themes. Transcripts were coded using the Open Code software and analysed thematically.

Participants were identified in collaboration with local disabled persons organisations (DPOs) in Addis Ababa (urban) and Butajira (rural) and through snowball sampling.

Table 1. Breakdown of participant characteristics

|  |  |  |
| --- | --- | --- |
|   | **Male** | **Female** |
| **Age**  | 15-17 years | 1 | 2 |
| 18-24 years | 8 | 8 |
| 25-35 years | 5 | 6 |
| **Impairment type** (Note: Some participants had multiple impairments, therefore these totals are different from actual total) | Physical | 2 | 4 |
| Visual | 2 | 4 |
| Hearing | 3 | 3 |
| Psychosocial | 4 | 2 |
| Intellectual | 3 | 3 |
| **Education**  | Currently in education | 6 | 4 |
| Educated but not working | 1 | 2 |
| Not in education, not working | 2 | 1 |
| **Employment**  | Working in Agriculture | 4 | 3 |
| Working in Manufacturing | 6 | 1 |
| Working in other sectors | 0 | 0 |
| **Location**  | Urban | 8 | 10 |
| Rural | 6 | 6 |
| ***Total*** |  | ***14*** | ***16*** |

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