NATIONAL PLAN OF ACTION OF PERSONS WITH DISABILITIES (2012-2021)

Ministry of Labour and Social Affairs
April 2012
Addis Ababa
Acknowledgements

The development of the National Plan of Action of Persons with Disabilities, 2012-2021, benefited valued input by a wide range of government ministries and bureaus, regional government representatives, Organizations of persons with Disabilities, Non Governmental Organizations and concerned individuals. The Ministry of Labour and Social Affairs would like to acknowledge with appreciation the advice and suggestions from the following contributors. Federal ministries and regional bureaus DPOs (Ethiopian National Association of the Blind, Ethiopian National Association of the Deaf, Ethiopian National Association of the Deaf-Blind, Ethiopian National Association on Intellectual Disability, Ethiopian National Association of the Physically Handicapped, Federation of Ethiopian National Associations of Persons with Disabilities, Ethiopian Women with Disabilities National Association and the Tigray Disabled Veterans Association Local and International NGOs working in the field of disability.

MOLSA would also like to express its deep gratitude to UNICEF and ILO-Irish Aid Partnership Programme on Disability for their financial contribution to prepare and print this National Plan of Action of Persons with Disability.
List of Acronyms and Abbreviations

AAU  Addis Ababa University
ARI  African Rehabilitation Institute
AU   African Union
BEN  Basic Education Network
BOLSA Regional Bureau of Labour and Social Affairs
CBR  Community-Based Rehabilitation
CBRNE Community Based Rehabilitation Network in Ethiopia
CDW  Community Development Workers
CHEW Community Health Extension Workers
CRC  Convention on the Rights of the Child
CRPD Convention on the Rights of Persons with Disabilities
CSA  Central Statistical Agency
DCDC Disability and Career Development Center of AAU
DFP  Disability Focal Point
DPO  Organization of Persons with Disabilities
ECDD Ethiopian Center for Disability and Development
EDRP Emergency Demobilization and Reintegration Project
EFA  Education for All
EIO  Ethiopian Institution of the Ombudsman
ENAB Ethiopian National Association of the Blind
ENAD Ethiopian National Association of the Deaf
ENADB Ethiopian National Association of the Deaf-Blind
ENAI Ethiopian National Association on Intellectual Disability
ENAPAHD Ethiopian National Association of Persons Affected by Hansen’s disease
ENAPH Ethiopian National Association of the Physically Handicapped
ENDAN Ethiopian National Disability Action Network
ESDP  Education Sector Development program
ETP  Education and Training Policy
EWDNA Ethiopian Women with Disabilities National Association
FDRE  Federal Democratic Republic of Ethiopia
MSEDA Federal Micro and Small Enterprise Development Agency
FENAPD Federation of Ethiopian National Associations of Persons with Disabilities
GO   Government Organization
GDP  Gross Domestic Product
GPDD Global Partnership for Disability and Development
GTP  Growth and Transformation Plan
HAPCO HIV/AIDS Prevention and Control Office
IEC  Information, Education, Communication
ILO  International Labour Organization
MDGs Millennium Development Goals

MFI  Micro-Finance Institution
MCT  Ministry of Culture and Tourism
MOA  Ministry of Agriculture
MoCS Ministry of Civil Service
MOE  Ministry of Education
MOI  Ministry of Information
MOH  Ministry of Health
MOJ  Ministry of Justice
MOLSA Ministry of Labor and Social Affairs
MST  Ministry of Science and Technology
MST  Ministry of Transport
Msi Ministry of Industry
MWCYA Ministry of Women, Children and Youth Affairs
MUDC  Ministry of Urban Development and Construction
NBE  National Bank of Ethiopia
NGO  Non-Governmental Organization
NPA  National Plan of Action
NIMCC National Implementation and Monitoring Coordinating Committee
NPAPwDs National Plan of Action of Persons with Disabilities,
NPC  National Para Olympics Committee
NRC  National Rehabilitation Center
OPM  Office of the Prime Minister
PANE Poverty Action Network of Civil Society in Ethiopia
PASDEP Plan for Accelerated and Sustainable Development to End Poverty
POC  Prosthetics and Orthotics Center
PSNP  Productive Safety Net Program
PWDs Persons with Disabilities
REB  Regional Education Bureau
RemSEDA Regional Micro and Small Enterprise Development Agency
SC  Sport Commission
SNE  Special Needs Education
SSA  Social Security Agency
TDVA Tigray Disabled Veterans Association
TEI  Teacher Education Institution
TVET  Technical and Vocational Education and Training
TVETA TVET Agency
TVETC TVET College
UN  United Nations
UNCRPD UN Convention on the Rights of Persons with Disabilities
UNECU UN Economic Commission for Africa
UNESCO UN Educational, Scientific and Cultural Organization
UNICEF UN Children’s Fund
WHO World Health Organization
WPA  World Programme of Action
EXECUTIVE SUMMARY

The Ethiopian National Plan of Action of Persons with Disabilities (NPAPWDs), 2012-2021, presents a plan for enabling Ethiopia to become a more inclusive society. It addresses the needs of persons with disabilities in Ethiopia for a comprehensive rehabilitation services, equal opportunities for education, skills training and work, and full participation in the life of their families, communities and the nation. It has been developed in consultation with key Government Ministries, UN organizations, persons with disabilities and their organizations, parents of children with disabilities and organizations working on disability in Ethiopia.

Disability is not something individuals have. What individuals have are impairments. They may be physical, sensory, intellectual, psychiatric, or other impairments. Disability is what happens when people with impairments encounter a society created by and for people without impairments. For the purposes of this NPA, persons 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” (UNCRPD, Article 1).

Like other Ethiopians, persons with disabilities aspire to a better life. However, they face many barriers to achieve such a life. Society is organized in a way which assumes that everyone can see signs, hear announcements, climb stairs, and understand things. Persons with disabilities are prevented from accessing health care and other services, going to school or learning skills, engaging in work or employment, and participating in family and community life due to the inaccessible environment, as well as traditional beliefs, prejudice and discrimination.

The NPA is based on a vision of a fully inclusive Ethiopian society, where children, youth and adults with disabilities, regardless of gender or kind of disability, as well as their parents and families, enjoy the same rights to participate in the same civil, political, economic, social and cultural spheres and to access the same medical, educational, social services, training, work and leisure opportunities enjoyed by other citizens. In such an inclusive society, people with disabilities are accepted, their abilities are valued, their diversity and independence are recognized, their human rights are protected, and they participate actively in the life and development of their communities and the nation.

Achieving this vision will involve ensuring that persons with disabilities and their organizations have a meaningful partnership with Government, their local communities, service delivery agencies and other organizations, based on respect and equality.

To advance Ethiopia towards a fully inclusive society and to achieve the Ethiopian development plan the NPA includes 13 objectives with detailed outputs and activities. The objectives are:

1. Promote and raise awareness for a non-disabling society
2. Provide community-based rehabilitation, specialized medical rehabilitation services and technical aids
3. Provide inclusive HIV/AIDS prevention, care and support services for persons with disabilities
4. Provide the best education and vocational skills training
5. Create opportunities for work and employment
6. Provide social protection for the poor, marginalized and vulnerable sector of the society
7. Support accessible living and transport in the community
8. Support culture, sports, and recreation opportunities
9. Promote full participation and equality for women with disabilities
10. Foster leadership by people with disabilities and their organizations
11. Support research and information dissemination
12. Develop an aware and responsive public service
13. Promote international technical cooperation

Key Government Ministries, Bureaus, Agencies and other Institutions will be responsible for ensuring that their respective NPA outputs and activities are included in their annual work plans and budgets. Planning and implementation of the NPA will be coordinated by the National Implementation and Monitoring Coordinating Committee (NIMCC), composed of representatives of key Federal Ministries DPOs Religious Institutions, other relevant bodies and chaired by the MOLSA.

Regional Coordinating committee will have the same responsibility at Regional level, with the respective Regional Labour and Social Affairs Bureau. The National and Regional Bureaus will create NPA Technical Committees composed of representatives of key Government Ministries or Bureaus, DPOs and appointed technical specialists to undertake the planning and coordination work. The Ministry of Labour and Social Affairs will receive reports from the National and Regional Coordinating Committees.
MOLSA will undertake a full review of progress of implementation and impact of the NPA at the end of the first five years of implementation, and make any necessary adjustments.

Monitoring of the implementation of the NPA will be the responsibility of the National and Regional Implementation and Monitoring Coordinating Committees. The National Coordinating Committee will prepare periodic reports on the implementation of the NPA, and on new and emerging disability policy issues affecting individuals with disabilities at Federal, Regional, and local levels, and in the private sector.

The National Coordinating Committee will make periodic recommendations to MOLSA and to specific Ministries, on ways to improve the delivery of services, ensure the inclusion of persons with disabilities and to address emerging policy and coordination issues.

The budget of the NPA will be planned by each implementing agency and all of the mainstreaming government organizations in addition to MOLSA’s responsibility on budgeting for the strengthening of the DPOs and Social Protection to PWDs.
CHAPTER ONE

1. INTRODUCTION

The Ministry of Labour and Social Affairs (MOLSA) in 1999 adopted a “National Programme of Action of Rehabilitation of Persons with Disabilities”. The main objective of the Programme was "to promote the goals of full participation and equal opportunities for persons with disabilities in all spheres of life through the involvement of the concerned governmental and non-governmental organizations and the community as a whole.”

The Programme was drafted by a technical committee, composed of members of MOLSA, the Ministry of Education, the Ministry of Health, the Ethiopian Federation of Persons with Disabilities and the Community-Based Rehabilitation (CBR) Network. The draft Programme was presented at national workshop of stakeholders including representatives of relevant Federal and Regional government bodies, NGOs, associations of persons with disabilities and others in June 1999. The workshop reviewed the National Programme of Action and made suggestions that were subsequently included in the final draft.

The 1999 National Programme of Action included a situational analysis of persons with disabilities in Ethiopia, and specific objectives, strategies and activities for nine “Programme Focus Areas”, including:

a) Disability prevention
b) Medical rehabilitation
c) Educational rehabilitation
d) Vocational rehabilitation and employment
e) Accessibility
f) Awareness-raising
g) Organizations of persons with disabilities
h) Religion
i) Culture, sports, recreation, family life and personal security

The Programme also described the national and regional organization/structure and executing bodies for the Programme.

Emerging issues and priorities such as poverty reduction strategies, technological advancements, the HIV/AIDS epidemic and the legal framework related to UNCRPDs among others require the National Programme of Action of 1999 to be revised. On top of that the previous NPA had no time frame and the necessary budget for its implementation. As a result, MOLSA has decided to prepare a replacement “National Plan of Action of Persons with Disabilities, 2012-2021” (NPA) to guide National and Regional efforts to provide comprehensive rehabilitation and other services to improve the situation of persons with disabilities in the country and ensure their full and equal participation in the life of their families, communities and the nation.

For the purposes of this NPA, persons 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” (UNCRPDs, Article 1).
This NPA was prepared by a team of consultants which interviewed key stakeholders, including government institutions, NGOs, DPOs and parents of children with disabilities (see Acknowledgements). It was reviewed by a national consultative workshop on 20 April 2010 which involved representatives from MOLSA, the Regional Labor & Social Affairs, other concerned Federal Ministries, and representatives of civil society organizations including DPOs. The workshop made recommendations and it was subsequently finalized.

1.1 Situational analysis of persons with disabilities in Ethiopia

According to available survey results, namely a demographic survey undertaken in 1979/80, the national census of 1984, a base line survey in 1999, the national census of 1994 and the national housing and population census of 2007, the incidence and prevalence of disability in the country is 5.48%, 3.65%, 2.95%, 1.9% and 1.2% respectively. According to the Central Statistical Agency (CSA) 2007 census of a total population in Ethiopia of 73,750,932, there were 864,218 (1.17%) persons with disabilities of which 464,202 were males and 400,016 females. Given the growth in population since 2007, it can be estimated that the national population in 2010 could have increased to over 80 million people, of which approximately 1 million are persons with disabilities (1.25%).

Researchers and disability experts note that inadequate definitions of what constitutes disability, confusion and misconception of terms, omission of persons with certain types of disabilities, unwillingness of parents to disclose that they have a child or family member with a disability, as well as the exclusion of some geographical areas in surveys due to security reasons, are among the drawbacks that could account for past survey and census efforts to undercount and to capture accurate and reliable statistical information on persons with disabilities in Ethiopia.

Whatever the number, poverty is the main characteristic of persons with disabilities (PWDs) and their families in the country, as majority of the causes of disability are directly or indirectly related to poverty. Poverty is both the cause and consequence of disability. An estimated 95% of all persons with disabilities in the country are living in poverty. With 84% of the population living in rural areas of Ethiopia, it can be assumed that a majority of persons with disabilities also live in rural areas, where basic services are limited and often inaccessible to PWDs and their families. In addition, the few available rehabilitation services in the country are concentrated in towns and urban centers. As a result the great majority of PWDs do not have access to basic health, education and social services that could help reduce their dependency and facilitate their independent living with a sustainable livelihood.

The FDRE has designed and implemented a Plan for Accelerated and Sustainable Development to End Poverty (PASDEP), to address the needs of the poor in the country. The Plan consisted of the following eight pillars of development:

1. Building an all-inclusive implementation capacity
2. Massive push to accelerate growth
3. Creating balance between economic development and population growth
4. Unleashing the potentials of Ethiopian Women
5. Strengthening the infrastructure backbone of the country
6. Strengthening human resource development
7. Managing risk and volatility
8. Creating employment opportunities

The PASDEP, however, made little mention of persons with disabilities and did not include or directly address their needs and the needs of their families. Their exclusion from mainstream poverty reduction and development efforts can aggravate their current situation, making them more dependent and poor. Whereas, the GTP (2011-2015) has given due attention for persons with disabilities to be encouraged to fully participate in economic, political and social development of the country. Development plans are advised to incorporate the following:

- development of community-based rehabilitation (CBR) programs and comprehensive medical rehabilitation services;
- expansion of special needs education of children with disabilities and their inclusion in ordinary schools;
- implementation of special needs education in Technical and Vocational Education and Training (TVET) institutions;
- inclusion of persons with disabilities in micro and small enterprise development programs and micro-finance institutions (MFIs) savings and credit services;
- Creation of a program of social protection for those persons with disabilities unable to work.

While poverty is a fundamental barrier, there are many other barriers facing children, youth and adults, men and women, in accessing the same services and opportunities enjoyed by other citizens. These include:

- Multiple or aggravated forms of prejudice and discrimination on the basis of type and cause of impairment, age, birth, gender, language, religion, ethnic, social origin, poverty, and other status;
- Physical inaccessibility of ordinary health care facilities and negative attitudes of health care personnel;
- Limited number of community-based rehabilitation (CBR) programs, inadequate or nonexistent specialized medical rehabilitation services, and lack of availability of affordable assistive aids and devices;
- Physical inaccessibility of ordinary schools and training centers and lack of adequate numbers of special needs education teachers and instructors;
- Discrimination in employment and lack of self-employment work opportunities;
- Inaccessibility of information and communication for blind/visually impaired and deaf/hearing impaired persons;
- General inaccessibility of the physical environment and infrastructure, including buildings, housing and offices;
- General inaccessibility of transportation systems, including buses and taxis;
- Greater risk, both within and outside the home, of violence, injury or abuse, neglect or negligent treatment, maltreatment or exploitation, faced by women and girls with disabilities;
- General lack of knowledge of development planners and practitioners on how to include persons with disabilities in mainstream development efforts.

1.2 Understanding disability

There is no commonly agreed international definition of disability, although the World Health Organization (WHO) in 2001 adopted an "International Classification of Functioning, Disability
and Health”, also known as ICF, as a classification of the health components of functioning and disability. Disability remains an evolving concept. For the purposes of this NPA, persons 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” (UNCRPDs, Article 1).

Thus disability results from the interaction between persons with impairments and the attitudinal and environmental barriers that hinder their full participation in society. There are four “models” or understandings about disability that have evolved over time: Charity, Medical, Social and Human Rights models. Today, the Social and Human Rights models are replacing the outdated Charity and Medical models of disabilities, and form the conceptual basis of this NPA.

Charity Model
The Charity model of disability views persons with disabilities as being dependent and helpless. They are considered as:
• Being objects of charity
• Having nothing to give, but only to receive
• Being inherently poor, needing and depending upon charity or welfare for survival
The Charity model is often related to and reinforced by cultural and religious beliefs and practices such as the giving of alms, thus encouraging PWDs to beg and seek charity. Society has a responsibility to take care of them.

Medical Model
The Medical model of disability views PWDs as having medical problems that require medical solutions. It assumes that:
• The problem rests with the individual and his or her impairment
• PWDs are sick or have a medical problem, and are considered as patients
• Disability is a medical problem requiring a medical solution
Society has a responsible to fix the sickness or problem of PWDs through medical rehabilitation and related service delivery.

Social Model
The Social model of disability views PWDs as being disabled not by their impairment but by society’s reaction, or lack of reaction to them. It views:
• Disability as a socially constructed phenomenon
• The problem resting not with the individual or the individual’s impairment, but with society
• Barriers as the problem – legal, physical, information, communication and attitudinal – created by society
Society has the responsibility to make society inclusive, to remove barriers, end discrimination, and embrace disability as one of the diversities among human beings.

Human Rights Model
The Human Rights model of disability complements the social model. It considers:
• All human beings as equal and entitled to respect for their human rights without distinction of any kind

The rights of PWDs as equal to all citizens and the basis for all action to support their equal access to services and opportunities
Society and especially governments have the responsibility to promote and protect the rights of persons with disabilities through legislation and enforcement of anti-discrimination laws. The UN, in the Universal Declaration of Human Rights and in the International Covenants on Human Rights, has proclaimed and agreed that everyone is entitled to all the rights and freedoms set forth therein, without distinction of any kind. The UN Convention on the Rights of Persons with Disabilities recognizes that discrimination against any person on the basis of disability is a violation of the inherent dignity and worth of the human person.

1.3 Standards and Policy Frameworks

a) International
The UN Convention on the Rights of Persons with Disabilities (UNCRPDs) and its Optional Protocol was adopted on 13 December 2006 during the sixty-first session of the UN General Assembly (Resolution 61/106). The FDRE signed the Convention on 30 March 2007 and ratified it on June 2010.

The Convention is intended as a human rights instrument with an explicit, social development dimension. It adopts a broad categorization of persons with disabilities and reaffirms that all persons with all types of disabilities must enjoy all human rights and fundamental freedoms. It clarifies and qualifies how all categories of rights apply to persons with disabilities and identifies areas where adaptations have to be made for persons with disabilities to effectively exercise their rights and areas where their rights have been violated, and where protection of rights must be reinforced.” (from UN Enable website www.un.org/disabilities)

UN Millennium Development Goals (MDGs)
The Millennium Development Goals (MDGs), adopted by the UN General Assembly during the UN Millennium Summit in September 2000, establish a unifying set of development objectives for the global community. Bringing together UN agencies, governments and civil society around eight key development issues, the MDGs encourage collaborative action to address development problems that impact lives of the poor and marginalized sections of society, by reducing poverty, improving health increasing educational opportunities and addressing environmental concerns.

However, nowhere in the MDGs persons with disabilities explicitly mentioned. The World Bank estimates that persons with disabilities make up 10% of the world’s population, and they constitute 20% of the world’s poor. Their non-inclusion in the MDGs makes it unlikely that all the MDG targets can be achieved. The UN General Assembly considered the issue and adopted on 7 October 2009 a Resolution on “Inclusion of persons with disabilities in realizing the MDGs” (Resolution 63/4731).
UN Convention on the Rights of the Child

The fundamental guiding international instrument concerning the rights of children is the UN Convention on the Rights of the Child (CRC), adopted by the UN General Assembly on 20 November 1989 (Resolution 44/25). All the Convention rights extend to all children, without exception, under 18 years of age. However, the CRC introduces specific rights for disabled children for the first time in international human rights law (Article 23): The FDRE acceded to the UN Convention on the Rights of the Child on 14 May 1991.

UN Convention on the Prohibition of the Use, Stockpiling, Production and Transfer of Anti-Personnel Mines and on their Distribution

The Convention, commonly known as the Ottawa Convention or the Anti-Personnel Mine Ban Convention, was adopted on 18 September 1997 at an international conference in Oslo, Norway and entered into force on 1 March 1999. Since then, 156 countries have become States Parties to the treaty, thereby committing to prevent future suffering from anti-personnel mines, and also to resolve the problem of existing landmines. The main obligations of the Convention are to stop all use, production and transfer of anti-personnel landmines, clear all mined areas within 10 years of entry into force of the treaty, destroy all anti-personnel mines in stockpiles within 4 years of entry into force, provide mine awareness programs, and assist the victims. The FDRE became a State Party to the Convention on 14 December 2004.

ILO Convention No. 159 on the Vocational Rehabilitation and Employment of Persons with Disabilities

ILO Convention No. 159 was adopted by the International Labour Conference on 20 June 1983 along with its companion Recommendation No. 168, and came into force on 20 June 1985. As of July 2010 the Convention has been ratified by 81 countries.

Salamanca Statement and Framework for Action on Special Needs Education

The Salamanca Statement on Principles, Policy and Practice in Special Needs Education was adopted by the UNESCO-organized World Conference on “Special Needs Education: Access and Quality”, 7-10 June 1994 in Salamanca, Spain. The Salamanca Statement and Framework for Action are based on the principle of inclusion by recognizing the need to work towards “schools for all” - institutions which include everybody celebrate differences, support learning, and respond to individual needs.

ILO-UNESCO-WHO Joint Position Paper on CBR 2004

Community-based rehabilitation (CBR) promotes collaboration among community leaders, people with disabilities, their families, and other concerned citizens to provide equal opportunities for all people with disabilities in the community. The CBR strategy, initiated by WHO in the 1980s, continues to promote the rights and participation of people with disabilities and to strengthen the role of their organizations in countries around the world.

b) Africa

Continental Plan of Action for the African Decade of Persons with Disabilities (1999-2009)

The African Decade of Persons with Disabilities (1999-2009, and extended to 2019) is the result of a recommendation made by the Labour and Social Affairs Commission of the Organization of African Unity (OAU, now AU) during its 22nd Session in April 1999 in Windhoek, Namibia, and adopted by the 35th Session of the OAU Assembly of Heads of State and Government held in Algiers, Algeria in July 1999. A formal Declaration of the Decade was subsequently adopted by the 36th Session of the OAU Heads of State and Government in Rome, Togo in July 2000. The Decade was extended for another 10 years by the “Windhoek Declaration on Social Development”, adopted by African Union (AU) Ministers in Charge of Social Development in October 2008.

The original Decade Plan of Action calls upon member States to, among other actions:

- “Formulate or reformulate policies and programmes that encourage the full participation of persons with disabilities in social and economic development;
- Create or reinforce national disability coordination committees, and ensure effective representation of disabled persons and their organizations.”

African Charter on the Rights and Welfare of the Child


c) Ethiopia – policies, legislation, strategies

Constitution of the Federal Democratic Republic of Ethiopia

The Constitution of the FDRE states that “The State shall, within available means, allocate resources to provide rehabilitation and assistance to the physically and mentally disabled” (Article 41.5).


The policy is revised in view of social protection with due attention to include persons with disabilities (PwDs).

Education and Training Policy 1994

Education is a fundamental human right and one of the main factors in reducing poverty in Ethiopia to eradicate poverty and ensure sustainable economic and social development, as well as to provide universal primary education by 2015. The Ministry of Education designed an Education and Training Policy in 1994. The Education and Training Policy requires expansion
of basic quality education and training for all, the development of the physical and mental potential and problem solving capacity of individuals, including those of children and youth with special needs. The Policy gives attention to the enormous number (10-20%) of children and students with special needs. The Policy recognizes the substantial efforts required to achieve Universal Primary Education by the year 2015, and the need to expand and strengthen special needs education and training provision, enhance inclusive education and enrich the regular education curricular as per the Education Sector Development Program (ESDP).

Special Needs Education Program Strategy 2006

The Ministry of Education prepared a Special Needs Education (SNE) Program Strategy in 2006. The strategy emphasizes that all children and students can learn but many of them may need some form of support in learning and active participation. Providing Education for All requires identifying barriers that hinder learning, and reducing or removing these barriers in early education, schools, technical and vocational training, higher education, teacher education, and education management.

The Strategy is, therefore, directed to:
- Implement the Education and Training Policy, and the International Principles endorsed by the government to keep up the rights of citizens to education;
- Develop and implement guidelines for curriculum modification and support system development in schools for learners with special needs;
- Facilitate the participation of learners with special needs in technical and vocational education and other higher education institutions;
- Strengthen special needs education programs in teacher education institutions;
- Improve the supply of trained manpower and appropriate materials to schools, training and other higher education institutions.”

Special Needs Education /SNE/ in TVET Framework Document 2009

The MOE Education and Training Policy (1994) states that attempts shall be made to enable persons with disabilities to learn in accordance to their potential and needs (sub article. 2.2.3). The Policy further states that all pupils, after the completion of general education can enter either the preparatory education programs or Technical and Vocational Education and Training (TVET).

The overall objective of the National TVET Strategy (2008) is to create a competent, motivated, adaptable and innovative workforce in Ethiopia contributing to poverty reduction and social and economic development through facilitating demand-driven, high quality technical and vocational education and training, relevant to all sectors of the economy, at all levels and to all people.

Health Sector Policy

The policy emphasizes the provision of primary health care services to all segments of the population. The community based health extension program targets households, particularly women and children at grass roots level, to prevent and control major killing diseases. A Health Sector Development Program (HSDP) coordinates donor assistance in support of the development of health infrastructure and human resources in the country.

Multi-sectoral Plan of Action for Universal Access to HIV Prevention, Treatment, Care and Support in Ethiopia, 2001-2010

The Plan of Action on HIV/AIDS was prepared by the Government HIV/AIDS Prevention and Control Office (HAPCO) in collaboration with government ministries, civil society and international partners. The Plan serves as a common action plan for all partners to attain the goal of universal access to HIV prevention, treatment, care and support in Ethiopia.

The National Physical Rehabilitation Strategy of Ethiopia 2011

The Ministry of Labour &Social Affairs in collaboration with concerned bodies designed a comprehensive National Physical Rehabilitation Strategy, which will help national planning and program implementation and contribute to the realization of the overall goal of providing accessible, affordable, efficient, good quality, sustainable physical rehabilitation services that contribute to the full rehabilitation and inclusion of persons with disabilities in society.

Population Policy 1993

The main objective of the Population Policy is to balance the rate of population growth with the development of natural resources in order to upgrade the living condition of citizens. It recognizes that the existing rapid rate of population growth is incompatible with development and describes specific actions to reduce the birth rate, reduce the mortality rate of mothers and children, and promote the education of girls and women, among other actions. The Policy does not mention the issues of persons with disabilities directly.

Environmental Policy 1997

The overall goal of the Policy is to improve and enhance the health and quality of life of all Ethiopians and to promote sustainable social and economic development. The Policy does not incorporate the issues of persons with disabilities.

National Action Plan for Gender Equality 2006-2010

The five-year Plan was prepared by the Ministry of Women’s Affairs with the objective of promoting gender equitable development in the country. The ultimate goal of the Action Plan is to ensure equality between men and women in social, political and economic aspects of development. The Plan is one of the components of the PASDEP and addresses the problems women face in seven areas, including poverty and economic development, education, health and reproductive rights, human rights and violence, decision making, environment, and institutional mechanisms.

Right to Employment of Persons with Disability Proclamation No. 568/2008

The Proclamation is the only proclamation of the FDRE that specifically and exclusively addresses disability rights, protects the right of persons with disabilities to employment, and prohibits discrimination as follows:
Article 4. Protection of the Right of Persons with Disability to Employment

"1. Unless the nature of the work dictates otherwise, a person with disability having the necessary qualification and scored more to that of other candidates shall have the right without any discrimination:
   a) to occupy a vacant post in any office or undertaking through recruitment, promotion, placement of transfer procedures or
   b) to participate in a training programme to be conducted locally or abroad.

Article 5. Prohibition of Discrimination

1. Any law, practice, custom, attitude or other discriminatory situations that impair the equal opportunities of employment of persons with disabilities are illegal.

2. Without prejudice to Sub-Article 1 of this Article, selection criteria which can impair the equal opportunity of persons with disabilities in recruitment, promotion, placement, transfer or other employment conditions shall be regarded as discriminatory acts.

3. When a person with disability is not in a position to exercise his/her equal right of employment opportunity, as a result of absence of a reasonable accommodation, such an act shall be regarded as discrimination.

4. Affirmative actions taken to create equal employment opportunity to persons with disabilities or exclusions dictated by the nature of the work may not be regarded as discrimination.

Ethiopian Building Proclamation (No. 624/2009)

The Ethiopian Building Proclamation (Article 36) specifically addresses the accessibility of design and construction for physically impaired persons, as follows:

"Any public building shall have a means of access suitable for use by physically impaired persons, including those who are obliged to use wheelchairs and those who are able to walk but unable to negotiate steps (36.1).

Where toilet facilities are required in any building, an adequate number of such facilities shall be made suitable for use by physically impaired persons and shall be accessible to them (36.2).

CHAPTER Two

2. THE NATIONAL PLAN OF ACTION ON DISABILITY

Building upon the priorities of the "Developmental Social Welfare Policy" (1996), the "National Programme of Action for Rehabilitation of Persons with Disabilities" (1999), the draft document of Social protection Policy (2012) of the Ministry of Labor and Social Affairs and the UNCRPDs the National Plan of Action (NPA) of Persons with Disabilities (2012-2021) was prepared in order to promote, protect and ensure the full and equal enjoyment of fundamental rights, public services, opportunities for education and work, and the full participation in family, community and national life by all persons with disabilities in Ethiopia. The NPA was formulated to address specific priorities during the implementation to overcome barriers to equality of opportunity and the full participation of persons with disabilities in society, and thus contribute to achieving a society inclusive of all.

National Context

The development policies of the country aim at reducing poverty and ensuring the overall economic growth. The sectoral development programs and national plans of action of the respective Federal Ministries contribute to the achievement of the national development goals. As disability is a cross-cutting, multi-sectoral issue, the respective sectoral development programs and national plans of action of other Federal Ministries must also provide for the inclusion of persons with disabilities. The participation of persons with disabilities and their organizations in the revision of existing sectoral development programs and national plans of action of other Ministries, or the formulation of new ones is essential for the design of relevant programs and the delivery of effective services that address the economic and social needs, and the full inclusion and participation of persons with disabilities in the country.

Basic Principles

The NPA is based on UN Convention on the Rights of Persons with Disabilities (UNCRPD) as the framework for all actions in support of equality of opportunity and full participation of persons with disabilities which sets out the following basic principles:
- Respect for the rights and evolving capacities of children with disabilities
- Non-discrimination
- Full and effective participation of persons with disabilities in decision-making
- Respect for difference and acceptance of persons with disabilities in society
- Equality of opportunity
- Accessibility
- Equality between men and women
- Respect for the rights and evolving capacities of children with disabilities

These principles are based on those contained in the World Programme of Action concerning Persons with Disabilities and in the Standard Rules on the Equalization of Opportunities for Persons with Disabilities. Together with the UN Convention, the principles contained in these documents are the basis for promotion, formulation and evaluation of policies, plans, programs and actions at national, regional and international levels to further equalize opportunities for persons with disabilities.
2.1 Goal of the NPA

Based on these basic principles, the goal of the NPA is to create an inclusive Ethiopian society, in which children, youth and adults with disabilities, regardless of gender or kind of disability, as well as their parents and families, enjoy the same rights and have access to the same medical, educational and social services, training, work and leisure opportunities enjoyed by other citizens. In such an inclusive society, people with disabilities are accepted, their abilities are valued, their diversity and independence are recognized, their human rights are protected, and they participate actively in the life and development of their communities and the nation.

2.2 STRATEGIES OF THE NPA

a) Twin Track approach

Twin track approach promoting and facilitating equality of opportunity and full participation of persons with disabilities (PWDs) in society provides for the inclusion of PWDs in both mainstream and disability-specific development initiatives. One track focuses on mainstream programs and services which are not specifically designed for persons with disabilities such as comprehensive community development programs, ordinary schools, public health services, transportation, communications, etc. Efforts are required to promote and facilitate the inclusion of persons with disabilities and their families in mainstream programs and services as participants and beneficiaries.

The other track focuses on disability-specific programs and service provision required to address the individual needs of PWDs, such as community-based rehabilitation (CBR) programs, orthopedic centers, special schools, medical and vocational rehabilitation centers, etc. Efforts are required to expand required disability-specific programs and services at community level to meet the individual needs of persons with disabilities and their families in all Regions of the country.

Neither track is better or more important than the other; both are required to ensure that the needs of children, youth and adults with disabilities are met, and to provide for equality of opportunity and full participation of PWDs in society.

The NPA incorporates the twin track approach and includes both mainstream and disability-specific actions.

b) Partnerships

The NPA recognizes that improving the situation of persons with disabilities is not only the responsibility of Government but also all Ethiopians. The proposed actions of the NPA are therefore based on partnerships between Government, civil society - including organizations of persons with disabilities (DPOs) - the private sector and the general public, in keeping with the general principles of the Government’s Developmental Social Welfare Policy.

Encouragement and support for networks of civil society organizations, including DPOs, able to mobilize and coordinate the actions of many NGOs, in cooperation with Federal, Regional and local government, will provide support the effective implementation of the NPA.

c) Leadership by persons with disabilities and their organizations

Too often, government officials, teachers, disability specialists, and the general public assume that they know what persons with disabilities want and need. This often results in poorly designed programs and services that fail to meet real needs. ‘Nothing about us without us’ is the appropriate slogan of persons with disabilities and their organizations. In planning, implementing and evaluating the NPA persons with disabilities and their organizations (DPOs) must be consulted and involved actively in all stages, in keeping with the principles of the UN Convention. In order for DPOs to play their required role, Government will strengthen the organizational capacity of DPOs by providing office and meeting space, supporting the training of DPO members, and providing financial assistance. Moreover, leaders of DPOs as well as individual persons with disabilities and expertise in technical fields will encourage playing leadership roles in all Government structures, including the National and Regional Disability Councils to be created to monitor the implementation of the NPA.

d) Psychosocial development of children with disabilities

The low understanding of society regarding the strength and potentials of persons with disabilities hinders their psychosocial development during early childhood and leads to a negative self-image by a majority of individuals with disabilities.

Therefore, the concerned government ministries and bureaus, NGO CBR programs, as well as DPOs will focus on early childhood development programs and services for children with disabilities; provide adequate training and encouragement to parents, guardians and their children with disabilities.

2.3 NPA PRIORITY SECTORS FOR ACTION

OBJECTIVES, OUTPUTS, ACTIVITIES, AND INDICATORS

The Government of the FDRE is committed to improving the situation of persons with disabilities in the country and to achieving an inclusive society. This NPA was formulated with this goal in mind. It is based upon the principles of the UN Convention on the Rights of Persons with Disabilities and the policy standards set forth in other international and African regional instruments as well as national legislation. The NPA benefited from input by Government, UN, NGOs, DPOs and other key organizational and individual stakeholders. It seeks to address the objective reality facing children, youth and adults with disabilities, women and men in Ethiopia and to create the conditions necessary for their full inclusion in society.

The following priority sectors for action, with objectives, outputs, activities, and indicators have been identified and form the basis of the NPA for the period 2012-2021. Disability is a cross-cutting, multi-sectoral issue, and it is expected and required that each concerned Federal Ministry or Agency includes the relevant objectives, outputs, activities and indicators for which they are responsible in their respective sectoral development programs and plans of action. MOLSA will provide overall policy guidance and technical support.
2.3.1 Priority 1: Public Awareness

Lead Agency: MOLSA
Collaborators, MOE, MOH, Ministry of Culture and Tourism, Ministry of Urban Development and Construction, Ministry of Women, Children and Youth Affairs, Sport Committee, Ministry of Communication and Information Technology, Ministry of Agriculture, Ministry of Transport, the respective regional bureaus, DPOs, NGOs, etc.

In Ethiopian culture, disability is assumed to be something originating from external forces or a divine origin. A person with a disability is often believed to be cursed and punished by God. Such beliefs contribute to negative attitudes towards persons with disabilities. Lack of knowledge about the potentials and capabilities of PWDs, coupled with misconceptions of the causes of disability contribute to their marginalization and exclusion from education, training, work, and other opportunities in life. Prejudice and discrimination are common and often discourage PWDs from participating in family and community activities. In addition, persons with disabilities, especially children and women often suffer physical and psychological abuse and violence.

In keeping with the UNCRPDs (Article 8), efforts are required to raise awareness throughout society, including at the family level, regarding persons with disabilities, and to foster respect for the rights and dignity of persons with disabilities; to combat stereotypes, prejudices and harmful practices relating to persons with disabilities, including those based on sex and age, in all areas of life; and to promote awareness of the capabilities and contributions of persons with disabilities.

Objective 1: Increased awareness by government and society in general about disability and the rights of persons with disabilities

The ultimate responsibility for raising awareness about disability and promoting the inclusion of persons with disabilities in society rests with the Ministry of Labour and Social Affairs (MOLSA), in collaboration with Regional Bureaus of Labour and Social Affairs or their equivalent. MOLSA will do this working in close collaboration with other Federal Ministries, the Federal Communication Office and the media, UN agencies, DPOs and disability NGOs.

Disability is a cross-cutting issue requiring a multi-sectoral response by all concerned Federal Ministries, Agencies and Regional Bureaus. Such a response requires leadership, policy guidance, technical support and coordination to be provided by MOLSA and the National Social Forum.

Outputs
During the period of the NPA, the following outputs will be produced:

1.1 Members of Parliament and personnel of Federal Ministries, Institutions and Agencies whose collaboration is required for implementation of the multi-sectoral NPA, better informed about existing national laws, policies, strategies, guidelines as well as international standards related to disability and persons with disabilities.
1.1 Prepare an information booklet on existing disability-related laws, policies, strategies, guidelines, the NPA and the UNCRPD and disseminate it to members of Parliament, other Ministries, the Regional Governments and Regional Labour & Social Affairs, DPOs and relevant NGOs, and to the general public (MOLSA).

1.2 Provide ongoing policy guidance and technical support to other Federal Ministries on the inclusion in their national plans and annual budgets of the respective NPA objectives, outputs, activities and indicators for which they are responsible (MOLSA).

1.3 Undertake a review of all existing national laws and regulations to identify revisions required to end discrimination against persons with disabilities and to bring all laws into conformity with the provisions of the UNCRPD (MOJ).

1.4 Prepare an annual disability information campaign with the Federal Communication Agency and Regional information bureaus, using the media to disseminate information and positive messages (in national languages) to the public about disability and the capabilities and contributions of children, youth and adults with disabilities to society (MOLSA).

1.5 Support the inclusion of disability information in other national information campaigns on various topics.

1.6 Support the organization by UN agencies and DPOs of the annual International Day (3 December) of Persons with Disabilities event, and mobilize the participation of civil servants in the Day’s activities (MOLSA).

1.7 Support the inclusion of disability information in the observances of other international days (MOLSA).

1.8 Support annual disability awareness-raising activities by the Regional Labour & Social Affairs with information as well as technical and material support (MOLSA).

1.9 Support the various radio programs produced by DPOs and NGOs to raise awareness of disability issues with information as well as technical and material support (MOLSA).

1.10 Strengthen the Internet-based information exchange system for the timely sharing of information between MOLSA and the Regional Labour & Social Affairs on disability-related and other issues (MOLSA).

1.11 Create annual awards to be awarded to Regional Labour & Social Affairs and to civil society and private sector organizations to publicly recognize outstanding efforts to raise awareness about disability and promote the inclusion of persons with disabilities in their regions and local communities (MOLSA).

1.12 Provide in-service training on disability awareness to Regional BOLSA personnel to plan, organize and implement disability awareness-raising materials and events (MOLSA).

1.13 Produce IEC materials and provide disability awareness training to local officials (Idir, Woreda, Kebele).

1.14 Liaise with UN and other international organizations to obtain information and technical and material support for disability awareness-raising efforts (MOLSA).

1.15 Ensure the inclusion of disability issues and coordination of the implementation of the NPA on the agenda and in the actions of the National Implementation and Monitoring Coordinating Committee (MOLSA).

1.16 Establish a National Implementation and Monitoring Coordinating Committee composed of representatives of concerned Federal Ministries, Agencies, DPOs, NGOs and the private sector to advise and monitor the implementation of the NPA (MOLSA).

1.17 Establish a Regional Implementation and Monitoring Coordinating Committee in each Region composed of representatives of concerned Regional Bureaus, Agencies, DPOs, NGOs and the private sector to advise on and monitor the implementation of the NPA (Regional Executive).

Indicators

- Number of IEC information materials produced
- Number of radio programs that include disability content
- Number of disability awareness-raising events
- Number of Regional Government plans that include persons with disabilities
- Number of BOLSA personnel (M/F) trained
- Number of local officials (Idir, Woreda, Kebele, M/F) trained
- Minutes of the National and Regional Social Forums
- Annual Reports of the National and Regional Disability Councils
- Value (in Birr) of international technical and material support
2.3.2 Priority 2: Health and Medical Treatment

Lead Agency: MOH
Collaborators, Ministry of Communication and Information Technology, MoLSA and the respective regional bureaus, DPOS, NGOs, etc

Persons with disabilities in Ethiopia often have limited access to health care facilities and services. This is due to the physical inaccessibility of many health centres, negative attitudes of health care professionals towards PWDs, lack of knowledge of health care professionals about disability, and inability to meet the cost of treatment and medicines.

The UNCRPDs (Article 25) recognizes that “persons with disabilities have the right to the enjoyment of the highest attainable standard of health without discrimination on the basis of disability. Governments are required to take all appropriate measures to ensure access for persons with disabilities to health services that are gender-sensitive, including health-related rehabilitation. In particular:

a) Provide persons with disabilities with the same range, quality and standard of free or affordable health care and programmes as provided to other persons, including in the area of sexual and reproductive health and population-based public health programmes;

b) Provide those health services needed by persons with disabilities specifically because of their disabilities, including early identification and intervention as appropriate, and services designed to minimize and prevent further disabilities, including among children and older persons;

c) Provide these health services as close as possible to people's own communities, including in rural areas;

d) Require health professionals to provide care of the same quality to persons with disabilities as to others, including on the basis of free and informed consent by, inter alia, raising awareness of the human rights, dignity, autonomy and needs of persons with disabilities through training and the promulgation of ethical standards for public and private health care;

e) Prohibit discrimination against persons with disabilities in the provision of health insurance, and life insurance where such insurance is permitted by national law, which shall be provided in a fair and reasonable manner;

f) Prevent discriminatory denial of health care or health services or food and fluids on the basis of disability.

In addition, the UNCRPDs recognizes (Article 26) that effective and appropriate measures are required, including through peer support, to enable persons with disabilities to attain and maintain maximum independence, full physical, mental, social and vocational ability, and full inclusion and participation in all aspects of life. To that end, Governments are required to organize, strengthen and extend comprehensive habilitation and rehabilitation services and programmes, particularly in the areas of health, employment, education and social services...

Governments shall also promote the development of initial and continuing training for professionals and staff working in habilitation and rehabilitation services, and the availability, knowledge and use of assistive devices and technologies, designed for persons with disabilities.

Objective 2: Community-based rehabilitation (CBR), specialized medical rehabilitation services and technical aids available to persons with disabilities throughout the country

The ultimate responsibility for ensuring the provision of health care and specialized medical services and technical aids and devices to persons with disabilities and their families rests with the Ministry of Health, in collaboration with the Regional Health Bureaus.

Throughout the country, Community Health Centers and Community Health Extension Workers are often the first point of contact for parents of children with disabilities, as well as for persons with disabilities seeking health care. In addition, in some Regions, Community-based Rehabilitation (CBR) Programs and CBR Workers provide home-based support to parents and children with disabilities as well as to older persons with disabilities. These CBR Programs are primarily run by NGOs which belong to the CBR Network in Ethiopia (CBRNE).

CBR programs and employees working with persons with disabilities, parents and family members in the home to improve the lives of children with developmental, physical and sensory impairments. Skills for essential daily activities such as proper positioning, feeding, bathing and dressing are provided. Other services include mobility orientation for the visually impaired, sign language for the hearing impaired and simple physical exercise therapy. Home-based CBR programs prepare children with disabilities to join special and inclusive education programs. The psychosocial needs of children with significant impairments can also be addressed through home-based CBR programs.

There are a number of orthopedic centers in the country providing prosthetic and orthotic appliances, crutches, artificial limbs, wheelchairs and other technical aids and devices, often with physical therapy services, to persons with physical disabilities.

These centers operate in mostly an autonomous manner, using a variety of technologies, materials and trained personnel, with technical and financial support from various local and international organizations. There is a need to improve, expand and standardize the provision of these orthopedic services.

In addition, there is a new National Rehabilitation Center (NRC) located on the grounds of the Black Lion Specialized Hospital in Addis Ababa, operating under the AAU Faculty of Medicine and the Ministry of Health. Constructed with funds provided by the World Bank under the Emergency Demobilization and Reintegration Project (EDRP) implemented by MoLSA, the NRC is currently operating under capacity.
Outputs

2.1 Capacity of Community Health Extension Workers and Community Development Workers (CDW) for the early identification and service delivery to persons with disabilities increased.

2.2 Strategy for CBR formulated by MoLSA in collaboration with Ministry of Health and respective Bureaus, NGOs, other responsible bodies for promoting CBR, training CBR workers and supporting the development of CBR Programs.

2.3 Capacity of CBR Workers in service delivery to persons with disabilities increased.

2.4 Capacity of Regional, Woreda and Kebele Community Development Workers to identify and assist persons with disabilities increased.

2.5 Existing CBR Programs strengthened in Regions where they exist and new CBR Programs initiated in new Regions.

2.6 National network of CBR programs and organizations strengthened.

2.7 National physical rehabilitation Strategy of persons with disabilities finalized and implemented by MoLSA, MoH, ICRC and the NRC.

2.8 Guideline on Rehabilitative Care, addressing comprehensive and specialized support services including rehabilitation medicine, clinical psychology, physiotherapy, occupational therapy, audiology, speech therapy, and counseling finalized.

2.9 Comprehensive rehabilitative care piloted in 5 regional hospitals.

2.10 Strategy for the standardization, expansion and strengthening of orthopedic service delivery prepared by MoLSA in consultation with the existing orthopedic centers, ICRC and concerned NGOs.

2.11 Strategy and plan for the production and dissemination of appropriate wheelchairs prepared by MoLSA, in consultation with Regional Bureaus of Labour and Social Affairs, WHO, ICRC, DPOs and with interested national and international NGOs.

2.12 Strategy and plan for the provision and fitting of hearing aids for children, youth and adults with hearing-impairments prepared.

2.13 Strategy for the training and employment of physical therapists formulated by Joint collaboration with MOH, and in consultation with training institutions and interested NGOs.

2.14 Appropriate training on disability issues, including disability prevention, early detection and interventions through medical and social rehabilitation, included in the curriculum for all institutions provide training for medical and health care personnel.

2.15 Capacity of health care personnel in public and private health facilities to provide inclusive family planning and reproductive health services to women and girls with disabilities increased.

2.16 HIV/AIDS prevention, care and support services coordinated by MOH and HAPCO extended to persons with disabilities.

Activities

To produce the above Outputs, the following activities will be undertaken by responsible national entity

2.1 Train Community Health and Community Development Workers in techniques of early identification, early intervention and service delivery to persons with disabilities.

2.2 Formulate a national CBR Strategy in collaboration with Regional Bureau and NGOs. MoLSA takes responsibility for promoting CBR, training CBR workers and supporting the development of CBR Programs.

2.3 Train 500 CBR Workers in service delivery to persons with disabilities.

2.4 Train Regional, Woreda and Kebele Social Workers service delivery to persons with disabilities.

2.5 Strengthen existing CBR Programs with technical and material support in Regions where they exist and initiate new CBR Programs in Regions where they do not yet exist.

2.6 Provide technical and material support to the national network of CBR programs and organizations.

2.7 Implement National physical rehabilitation Strategy of persons with disabilities in collaboration with the AAU Faculty of Medicine, MoLSA, and ICRC.

2.8 Produce and disseminate Guideline on Rehabilitative Care, addressing comprehensive and specialized support services including rehabilitation medicine, clinical psychology, physiotherapy, occupational therapy, audiology, speech therapy, and counseling.

2.9 Pilot the plan for comprehensive rehabilitative care in 5 regional hospitals.

2.10 Formulate and implement a strategy for the standardization, expansion and strengthening of orthopedic service delivery in consultation with the existing orthopedic centers, ICRC and concerned NGOs.

2.11 Formulate and implement a strategy and plan for the production and dissemination of appropriate wheelchairs, in consultation with Regional Bureau of Health and Labour and Social Affairs, WHO, ICRC, DPOs and with interested national and international NGOs.
2.12 Formulate and implement a strategy and plan for the provision and fitting of hearing aids for children, youth and adults with hearing impairments prepared.

2.13 Formulate and implement a strategy for the training and employment of physical therapists, in consultation with the relevant training institutions and interested NGOs.

2.14 Ensure that appropriate disability awareness and skills training becomes part of the curricula of relevant universities, training centers and courses, so that newly qualified persons have the appropriate skills and awareness to provide services and to include persons with disabilities in service delivery.

2.15 Provide appropriate training on disability issues, including disability prevention, early detection and interventions through medical and social rehabilitation, in the curriculum for all institutions providing training for medical and paramedical health personnel.

2.16 Train health care personnel in public and private health facilities at all levels in the delivery of inclusive family planning and reproductive health services to women and girls with disabilities.

2.17 Extend HIV/AIDS prevention, care and support services coordinated by MOH and HAPCO to persons with disabilities

**Indicators**

- Number of Community Health Extension Workers (M/F) trained
- Number of Community Development Workers (M/F) trained
- Number of CBR Workers (M/F) trained
- Number of institutional health care personnel (M/F) trained
- Number of general training courses that include disability information
- Strategies and Plans formulated
- Number of rehabilitative care pilot hospitals
- Number of ortho-Prosthetic centers strengthened
- Number of PWDS (M/F) having access to orthopedic/physiotherapy services
- Number of PWDS (M/F) having access to inclusive family planning/reproductive health services
- Number of PWDS (M/F) having access to HIV/AIDS prevention, care and support services
- Value (in Birr) of international technical and material support

2.3.3 Priority 3: HIV/AIDS and Persons with Disabilities

**Lead Agency:** MOH/HAPCO

**Collaborators:** Ministry of Communication and Information Technology, the respective regional bureaus, DPOS, NGOs, etc

Persons with disabilities, especially women and girls with disabilities, are vulnerable to HIV/AIDS. A World Bank global survey (2006) found that persons with disabilities were at twice the risk of becoming infected as non-disabled persons. Yet HIV/AIDS education, prevention, care and support programs and services do not target and are often not accessible to persons with disabilities. As a result, many persons with disabilities in Ethiopia are unaware of the risks of becoming HIV infected, and do not know their status.

Adolescents and adults with disabilities are sexually active just like their non-disabled peers. Yet society in general and health practitioners in particular, assume that persons with disabilities are not sexually active and therefore at little risk of becoming HIV positive. Moreover, HIV/AIDS information is not readily available to persons with certain types of disabilities. Blind and visually-impaired persons do not have access to printed information. Deaf and hearing-impaired persons do not have access to information via radio or TV. Intellectually disabled persons often cannot understand the information that is available and need information in simple language.

**Objective 3:** HIV/AIDS education, prevention, treatment, care and support information and services available to persons with disabilities throughout the country.

The ultimate responsibility for ensuring coordination and access to prevention, VCT, treatment, care and support services rests with the Federal and Regional HIV/AIDS Prevention and Control Offices (HAPCO), working in collaboration with government ministries, civil society and international partners. The Federal HAPCO prepare strategies and plans that serve as a common basis for all partners to attain the goal of universal access to HIV/AIDS prevention, treatment, care and support in Ethiopia.

**Outputs**

During the period of the NPA, the following outputs will be produced:

3.1 Capacity of personnel of all government and NGO HIV/AIDS personnel to provide HIV/AIDS education and prevention information to persons with disabilities will be increased.

3.2 Strategy and plan for reaching persons with different types of disabilities formulated by HAPCO in collaboration with MoH and Regional Health Bureaus, MOLSA, NGOs, and DPOs.

3.3 HIV/AIDS educational materials available in Braille disseminated via sign language and prepared in simplified language.

3.4 Capacity of VCT facility personnel in providing services to persons with disabilities increased.
3.5 Capacity of HIV/AIDS care and support personnel to assist persons with disabilities will be increased.

3.6 Capacity of DPOs to provide HIV/AIDS information to their members increased.

3.7 National network of HIV/AIDS organizations provide services to persons with disabilities strengthened.

3.8 Guidelines on inclusive HIV/AIDS service delivery to persons with disabilities, addressing accessible VCT, care and support services, among others, finalized and disseminated.

3.9 Comprehensive HIV/AIDS and persons with disabilities education, prevention, treatment, care, and support program piloted at Regional level.

3.10 Appropriate training on HIV/AIDS and disability issues, including HIV prevention, VCT and treatment, included in the curriculum for all institutions providing training for medical and health care personnel.

3.11 Capacity of HIV/AIDS service personnel in public and private health facilities to provide appropriate services to women and girls with disabilities will be increased.

3.12 All mainstream HIV/AIDS prevention, care and support services coordinated by MOH and HAPCO extended to persons with disabilities.

Activities

To produce the above Outputs, the following activities will be undertaken (by responsible national entity in brackets):

3.1 Train 1,000 HIV/AIDS service delivery personnel in disability awareness and how to provide services to persons with different types of disabilities.

3.2 Formulate and implement a national Strategy and Plan for inclusive HIV/AIDS services for persons with disabilities, in collaboration with Regional Health Bureaus, MOLSA, NGOs and DPOs.

3.3 Prepare, in collaboration with DPOs, HIV/AIDS information materials in Braille, simplified language, and arrange for information to be disseminated via sign language.

3.4 Train 500 VCT service personnel in service delivery to persons with seeing, hearing, mobility and intellectual impairments.

3.5 Train 500 HIV/AIDS care and support personnel in service delivery to persons with disabilities.

3.6 Train DPO members and personnel on HIV/AIDS prevention for onward dissemination to their members (DPOs).

3.7 Provide technical and material support to the national network of HIV/AIDS and disability organizations (HAPCO).

3.8 Prepare Guidelines on HIV/AIDS service delivery to persons with disabilities and disseminate them, in collaboration with MOH, MOLSA and DPOs (HAPCO).

3.9 Pilot a program for comprehensive HIV/AIDS and persons with disabilities education, prevention, treatment, care, and support services in 5 Regions (MOH).

3.10 Provide appropriate training on disability and persons with disabilities in the curriculum for all institutions providing training for medical and paramedical health personnel (AAU, MOH).

3.11 Train health care personnel in public and private health facilities at all levels in the delivery of appropriate HIV/AIDS services to women and girls with disabilities (MOH).

3.12 Extend all mainstream HIV/AIDS prevention, care and support services coordinated by MOH and HAPCO to persons with disabilities (MOH, HAPCO).

Indicators

- Number of HIV/AIDS service delivery personnel (M/F) trained
- Number of VCT service personnel trained
- Number of HIV/AIDS care and support service personnel trained
- Strategy and Plan formulated and implemented
- Guidelines prepared
- Number of PWDs (M/F) trained in HIV/AIDS prevention
- Number of pilot programs at Regional level
- Number of medical students and others trained in disability and service delivery to persons with disabilities
- Number of PWDs (M/F) having access to mainstream HIV/AIDS prevention, care and support services
- Value (in Birr) of international technical and material support
2.3.4 Priority 4: Education and Training

Lead Agency: Ministry of Education

**Collaborators:** Ministry of Urban Development and Construction, Ministry of Women, Children and Youth Affairs, Ministry of Agriculture, Ministry of Communication and Information Technology, the respective regional bureaus, DPOs, NGOs, etc.

It has been estimated that one third of the 77 million children still out of school in African countries are children with disabilities (UNESCO, 2006). The same report also estimated that fewer than 10% of children with disabilities in Africa attend school. Globally, ensuring the inclusion of children with disabilities is critical to achieve the goal of universal primary education by 2015. Given the relationship between disability and poverty, the participation of children with disabilities in education from early ages is essential to poverty alleviation.

In Ethiopia during the period 2007-2008, the enrollment of children with special educational needs in primary education (grades 1-8) was 35,177 (excluding Somali Region due to absence of data). The total number of school-aged children (7-14 years) in the country was 16,050,077. Without Somali region, this number is 15,045,047 (MOE Education Statistics Annual Abstract). If it is assumed that in general at least 10% of any school-aged population has special education needs, the number of children in Ethiopia requiring special needs education should be about 1.5 million. The number in school is thus only about 2.3% (35,177 of 1.5 million).

The great majority of children with disabilities can study in ordinary schools and classes, if there is sufficient support available. A minority of children require teaching in special classes. Blind children/students need short-term training in mobility, daily living skills, Braille reading and writing, and using technical aids. Deaf children/students need to learn Sign language and written languages. Children/students with intellectual disabilities need teaching in daily living skills, communication and vocational skills. Children with multiple disabilities need individual planning and teaching.

The UNCRPDs (Article 24) recognizes the right of persons with disabilities to education. With a view to realizing this right without discrimination and on the basis of equal opportunity, Governments are required to ensure an inclusive education system at all levels and lifelong learning, and to ensure:

a) Persons with disabilities are not excluded from the general education system on the basis of disability, and that children with disabilities are not excluded from free and compulsory primary education, or from secondary education, on the basis of disability;

b) Persons with disabilities can access an inclusive, quality and free primary education and secondary education on an equal basis with others in the communities in which they live;

c) Reasonable accommodation of the individual’s requirements is provided;

d) Persons with disabilities receive the required support, within the general education system, to facilitate their effective education;

e) Effective individualized and disability specific support measures are provided in environments that maximize academic and social development, consistent with the goal of full inclusion.

To enable persons with disabilities to learn life and social development skills to facilitate their full and equal participation in education and as members of the community, Governments will take appropriate measures, including:

a) Facilitating the learning of Braille, alternative script, augmentative and alternative modes, means and formats of communication and orientation and mobility skills, and facilitating peer support and mentoring;

b) Facilitating the learning of sign language and the promotion of the linguistic identity of the deaf community;

c) Ensuring that the education of persons, and in particular children, who are blind, deaf or deaf-blind, is delivered in the most appropriate languages and modes and means of communication for the individual, and in environments which maximize academic and social development.

In order to ensure the realization of this right, Governments will take appropriate measures to employ teachers, including teachers with disabilities, who are qualified in sign language and/or Braille, and to train professionals and staff who work at all levels of education. Such training shall incorporate disability awareness and the use of appropriate augmentative and alternative modes, means and formats of communication, educational techniques and materials to support persons with disabilities.

Governments "will ensure that persons with disabilities are able to access general tertiary education, vocational training, adult education and lifelong learning without discrimination and on an equal basis with others. To this end, ensure that reasonable accommodation is provided".

Objective 4: Best possible education and vocational skills training available to children and youth with disabilities

The ultimate responsibility for providing educational opportunities to persons with disabilities rests with the Ministry of Education (MOE), in collaboration with the Regional Education Bureaus (REBs) and special schools. The MOE has produced a Special Needs Education Program Strategy (2006) that provides an overview of the current situation of special needs education; defines national objectives, strategic priorities and division of responsibilities; identifies resources and possibilities for cooperation; and proposes key elements for inclusive education system development.
Existing special needs education services in the country are provided in ordinary schools either by MOER/RECs or in special schools operated by NGOs and charitable organizations. The government has established over 300 special needs education classes attached to ordinary schools. There are 15 special schools, mainly for blind and deaf students in the country, run mostly by NGOs and DPOs.

There are about 30 organizations promoting inclusive education or supporting students with disabilities who study in ordinary schools. In order to promote and support special needs and inclusive education development in the country, coordination of needs assessment, data collection and national-regional cooperation is required.

Special needs education (SNE) is a new course in all teacher education. However, very few of the teacher education colleges and universities have succeeded to recruit teacher educators trained in special needs education. Among the private and government universities only the Addis Ababa University provides a possibility to specialize in SNE. Some of the TEIs have produced teacher education material packages. However, most of the professional literature used in special needs education studies is out-dated in approach and concepts, and difficult to apply in the challenging contexts of the country.

**Outputs**

During the period of the NPA, the following outputs will be produced:

4.1 Regional SNE Strategic Plans formulated and implemented.

4.2 Guidelines for data collection, reporting, planning and budgeting prepared and disseminated.

4.3 Guidelines for Cluster Center and Regional support system development formulated and implemented.

4.4 SNE teacher education training strengthened and expanded among the major universities in the regions.

4.5 Guidelines for curriculum modification prepared.

4.6 Good examples of SNE and inclusive education practice identified, shared and publicly recognized.

4.7 Framework Document on SNE in TVET finalized and disseminated.

4.8 Manual on the practical implementation of SNE in TVET prepared for teachers in TVET institutions.

4.9 Study undertaken on the need and means, and plan prepared for expanding special schools for blind/visually impaired and deaf/hearing-impaired students in the country.

4.10 70% increase in number of children with disabilities enrolled in ordinary primary schools.

4.11 70% increase in number of children with disabilities enrolled in ordinary secondary schools.

4.12 70% increase in number of students with disabilities enrolled in higher education.

4.13 60% increase in number of female students with disabilities at all levels.

4.14 90% increase in number of trainees with disabilities enrolled in ordinary TVET institutions.

4.15 Expansion of SNE and inclusive education for children with disabilities included in all national and regional education sector development plans, budgets and reporting.

4.16 Official Ethiopian Sign Language Dictionary disseminated.

**Activities**

To produce the above Outputs, the following activities will be undertaken (by responsible national entity in brackets):

4.1 Formulate and implement Regional SNE Strategic Plans.

4.2 Prepare and disseminate guidelines for data collection, reporting, planning and budgeting.

4.3 Formulate and implement guidelines for Cluster Center and Regional support system development.

4.4 Increase and strengthen SNE teacher education training through in-service training of TEI personnel.

4.5 Prepare guidelines for curriculum modification to include SNE.

4.6 Identify, share and publicly recognize good examples of SNE and inclusive education practice.

4.7 Prepare and implement a Practical Manual on SNE in TVET, for use by teachers and instructors in TVET institutions.

4.8 Undertake a study on the need and means, and prepare a plan for expanding special schools for blind/visually impaired and deaf/hearing-impaired students in the country.

4.9 Increase by 70% the number of children with disabilities enrolled in ordinary primary schools.

4.10 Increase by 60% the number of children with disabilities enrolled in ordinary secondary schools.

4.11 Increase by 90% the number of students with disabilities enrolled in higher education by requiring and assisting all universities in the country to enroll students with disabilities.

4.12 Increase by 60% the number of female students with disabilities at all levels.
4.13 Increase by 90% the number of trainees with disabilities enrolled in ordinary TVET institutions (MOE, Regional TVET Agencies).

4.14 Ensure the inclusion of SNE in all national and regional education sector planning, budgeting and reporting.

4.15 Distribute the official Ethiopian Sign Language Dictionary.

**Indicators**

- Primary school enrolment rates (GER and NER) in correlation with repetition and dropout rates, with special attention to first grade and fourth grade enrolment and dropout, and including numbers of students with special needs
- Secondary school enrolment rates (GER and NER) in correlation with repetition and dropout rates, including numbers of students with special needs
- TVET enrolment rates (GER) and numbers of students with disabilities
- Higher education – numbers of students (M/F) with special needs receiving assistance
- Identification activities carried out in first grades and cooperation with CBR programs
- Numbers of kebele education boards, school managers, head teachers and teachers provided awareness raising and capacity building in special needs education
- Number of teachers trained in special needs education and working as itinerant resource teachers to support ordinary schools
- Number and type of special needs education classes, units and schools, students enrolled (M/F) and special needs education teachers working in them
- National and Regional Education Sector Development plans, budgets and reports
- Value (in Birr) of international technical and material support.

**2.3.5 Priority 5: Employment and Work**

**Lead Agency:** MOLSA

**Collaborators:** Ministry of Justice, Ministry of Civil Service, Ministry of Industry, Ministry of Agriculture, Ministry of Trade, Micro-Finance Institutions, the respective regional bureaus, DPOS, NGO's, etc

In Ethiopia, work opportunities for youth and adults with disabilities are limited. Although some PWDS are engaged in self-help, individual or group income-generating activities, and some educated PWDS have found salaried employment in government and the private sector the vast majority of working-age persons with disabilities in Ethiopia are unemployed.

Work is an important life activity. It contributes to maintaining the individual, the family and household. It provides services and/or goods to the family, to the community and to society at large. Most importantly it provides opportunities for social and economic participation, which enhances personal fulfillment and a sense of self-worth. It enables individuals with or without disabilities to be role models and resource persons for peer support and training.

**There are many different types of work:**
- work in the home;
- work in a family enterprise;
- individual production, service, or trade activities;
- individual or group small enterprise and income generating activities;
- paid work for someone else in the informal economy;
- wage employment in a public or private organization or firm in the formal economy;
- Paid work in adapted and sheltered settings.

Work may involve manual labour or be entirely a mental activity. It may require little technical skill or highly developed skills. Some type work is based on traditional family production and income-generating activities and some type work is based on new technologies. The advent of communications technology, such as mobile phones and computers, is creating many work opportunities for people with disabilities, especially for those with significant impairments.

Not all types of work are desirable. It is important to distinguish between decent work and work which exploits and perpetuates poverty and is lacking in dignity. Decent work is work which dignifies and does not demean.

The UN CRPD (Article 27) recognizes the right of persons with disabilities to work, on an equal basis with others. "This includes the right to an opportunity to gain a living by work freely chosen or accepted, in a labour market and work environment that is open, inclusive and accessible to persons with disabilities. Governments are required to safeguard and promote the right to work, including for those who acquire a disability during the course of employment, by taking appropriate steps, including through legislation to:

a) Prohibit discrimination on the basis of disability with regard to all matters concerning all forms of employment, including conditions of recruitment, hiring and employment, continuance
of employment, career advancement and safe and healthy working conditions;

b) Protect the rights of persons with disabilities, on an equal basis with others, to just and favourable conditions of work, including equal opportunities and equal remuneration for work of equal value, safe and healthy working conditions, including protection from harassment, and the redress of grievances;

c) Ensure that persons with disabilities are able to exercise their labour and trade union rights on an equal basis with others;

d) Enable persons with disabilities to have effective access to general technical and vocational guidance programmes, placement services and vocational and continuing training;

e) Promote employment opportunities and career advancement for persons with disabilities in the labour market, as well as assistance in finding, obtaining, maintaining and returning to employment;

f) Promote opportunities for self-employment, entrepreneurship, the development of cooperatives and starting one’s own business;

g) Employ persons with disabilities in the public sector;

h) Promote the employment of persons with disabilities in the private sector through appropriate policies and measures, which may include affirmative action programmes, incentives and other measures;

i) Ensure that reasonable accommodation is provided to persons with disabilities in the workplace;

j) Promote the acquisition by persons with disabilities of work experience in the open labour market;

k) Promote vocational and professional rehabilitation, job retention and return-to-work programmes for persons with disabilities.”

Objective 5: Opportunities for work and employment available to all youth and adults with disabilities who want to work

The ultimate responsibility for ensuring non-discrimination in work and employment rests with the Ministry of Labour and Social Affairs (MOLSA), particularly with the Department of Labour, in collaboration with the Regional Labour & Social Affairs and the Ministry of Justice must promote and enforce the provisions of the Proclamation No. 568/2008.

Efforts to promote the employment of persons with disabilities by raising the awareness of employers and the general public of the work capabilities of women and men with disabilities are being undertaken by NGOs, in collaboration with private employment agencies. The Ministry of Civil Service practices affirmative action by giving priority to hiring candidates with disabilities at the same rate as non-disabled candidates for a position. There are at present, no tax or other incentives for individual private sector employers to employ persons with disabilities.

Numerous Government, UN and NGO programs are being implemented to support the self-employment of individuals and groups of persons with disabilities through income generating activities, including training in basic business skills, business development services, access to micro credit and startup capital, and marketing assistance. These are often implemented in cooperation with the Ministry of Trade (MT).

Outputs
During the period of the NPA, the following outputs will be produced:

5.1 Public and private sector employers, including civil society organizations, and the general public better informed about the provisions of Proclamation No. 568/2008.

5.2 Public and private sector employers informed about the ILO Code of Practice on Managing Disability in the Workplace (2001).

5.3 Technical advisory services and tax incentives provided to private sector employers who employ registered persons with disabilities.

5.4 System for the registration of persons with disabilities introduced by MOLSA Department of Labour and Regional Labour & Social Affairs.

5.5 Annual Job Fair organized in collaboration with the Federal Civil Service Agency, private employment agencies, universities and NGOs.

5.6 Priority in Government procurement of selected goods and services given to organizations, cooperatives and companies employing a majority of workers with disabilities.

5.7 Establishment of “social enterprises” (profit-making as well as non-profit firms that have as a mission to employ persons with disabilities) facilitated and supported.

5.8 Discrimination in the provision of banking and micro-finance services to persons with disabilities made illegal.

5.9 Self-help groups of persons with disabilities engaged in income generating activities have increased access to business skills training and business development services.

5.10 Capacity of micro-finance institutions and business development service organizations to provide services to clients with disabilities increased.

5.11 Greater international donor support obtained for the development of businesses run by individuals or groups of persons with disabilities.
Activities
To produce the above Outputs, the following activities will be undertaken (by responsible national entity in brackets):

5.1 Prepare informational materials and organize events to increase the awareness of public and private sector employers, including civil society organizations, and the general public about the provisions of Proclamation No. 568/2008 (MOLSA, regional Labour & Social Affairs).

5.2 Prepare and disseminate the ILO Code of Practice on Managing Disability in the Workplace in national languages (MOLSA).

5.3 Formulate and introduce legislation to provide for tax incentives to private sector employers who employ registered persons with disabilities (MOLSA).

5.4 Develop and implement a system for the registration of persons with disabilities (MOLSA and regional Labour & Social Affairs).

5.5 Support the organization and participate in an annual Job Fair, organized in collaboration with the Ministry of Civil Service, private employment agencies, universities and NGOs (MOLSA).

5.6 Develop and implement a system for the preferential procurement of Government selected goods and services from organizations, cooperatives and companies employing a majority of workers with disabilities (MOLSA).

5.7 Support and facilitate the establishment of “social enterprises” employing persons with disabilities (MOLSA, MT).

5.8 Formulate and introduce legislation making discrimination in the provision of banking and micro-finance services to persons with disabilities illegal (MOLSA, NBE).

5.9 Provide increased access to business skills training and business development services (BDS) for self-help groups of persons with disabilities engaged in income generating activities (MT).

5.10 Provide training to personnel of micro-finance institutions (MFIs) and business development service organizations in service delivery to clients with disabilities (MT).

5.11 Require all MFIs to eliminate discriminatory provisions in their criteria for providing credit (NBE).

5.12 Solicit greater international donor technical and material support for the development of businesses run by individuals or groups of persons with disabilities (MOLSA, MT).

Indicators
• Information materials produced
• Legislation introduced
• System for registration of workers with disabilities
• Number of persons with disabilities (MF) participating in job fairs
• System for preferential procurement of Government goods and services
• Number of social enterprises established
• Increased number of groups of persons with disabilities accessing skills training and BDS
• Number of MFI and BDS program personnel trained
• Value (in Birr) of international technical and material support

2.3.6 Priority 6: Social Protection

Lead Agency: MOLSA
Collaborators: MOE, MOH, Ministry of Justice, Ministry of Civil Service, Ministry of Agriculture, Ministry of communication and Information Technology, the respective regional bureaus, DPOS, NGOs, etc

Many Ethiopians with disabilities are forced to beg for survival. This is not only demeaning for the individual but does not guarantee a steady and adequate means of existence.

The UN CRPDs (Article 28) recognizes the right of persons with disabilities to an adequate standard of living for themselves and their families, including adequate food, clothing and housing, and to the continuous improvement of living conditions, and shall take appropriate steps to safeguard and promote the realization of this right without discrimination on the basis of disability. It recognizes the right of persons with disabilities to social protection and to the enjoyment of that right without discrimination on the basis of disability. Governments are required to take appropriate steps to safeguard and promote the realization of this right, including measures:

a) To ensure equal access by persons with disabilities to clean water services, and to ensure access to appropriate and affordable services, devices and other assistance for disability-related needs;

b) To ensure access by persons with disabilities, in particular women and girls with disabilities and older persons with disabilities, to social protection programmes and poverty reduction programmes;

c) To ensure access by persons with disabilities and their families living in situations of poverty to assistance from the State with disability-related expenses, including adequate training, counseling, financial assistance and respite care;

d) To ensure access by persons with disabilities to public housing programmes;

e) To ensure equal access by persons with disabilities to retirement benefits and programmes.

Objective 6: provide social protection for the poor, marginalized and vulnerable sector of the society

The Ministry of Labour and Social Affairs (MOLSA) and the social security agency are the major responsible bodies to facilitate the social assistance to individuals, including persons with disabilities who cannot work or support themselves. Although at present the Government lacks sufficient resources to provide social protection to all those who are unable to work, various social protection and social security systems are under consideration.
Many persons with disabilities are forced to rely upon the charity of others through begging for their survival. Although the giving of “alms” to the poor is encouraged by the major religions of Ethiopia, it is a practice that is demeaning for the individual and does not provide a regular and adequate source of income. As Ethiopia develops, an institutionalized system of social protection will be required.

**Outputs**

During the period of the NPA, the following outputs will be produced:

6.1 Existing social security systems expanded to cover an increased number of beneficiaries, including persons with disabilities.

6.2 System of social protection through micro-insurance designed, implemented in a pilot Region.

6.3 Study completed on the viability of introducing a system of social allocations to needy persons with disabilities, their families and care-givers.

6.4 Plan formulated, in collaboration with religious authorities, to create alternate ways of supporting the poor, in order to limit the practice of begging.

6.5 Number of persons with disabilities and their families participating in the Productive Safety Net Program (PSNP) increased.

6.6 Policy guidance and technical support provided to Regional Labour & Social Affairs for the provision of social protection services to poor persons with disabilities.

6.7 Charitable organizations providing social welfare services and support to meet the needs of persons with disabilities living in poverty strengthened.

6.8 Programs and facilities providing day care, services by care-givers and other services to children and adults with intellectual, developmental and other disabilities strengthened.

6.9 Organizations and programs providing services to persons with disabilities, including housing, transport, wheelchairs and adaptive equipment, counseling, referral and other services strengthened.

6.10 MOLSA and the social security agency have capacity to plan and implement social security schemes covering persons with disabilities increased.

6.11 Developed strategies to enhance the productivity of persons with disabilities.

**Activities**

To produce the above Outputs, the following activities will be undertaken (by responsible national entity in brackets):

6.1 Expand existing social security systems to cover an increased number of beneficiaries, including persons with disabilities.

6.2 Design and implement in a pilot Region a system of social protection through micro-insurance targeting among other, persons with disabilities.

6.3 Undertake a study on the viability of introducing a comprehensive social protection program, including a system of social allocations to needy persons with disabilities and their families (MOLSA 6.4 Formulate a Plan, in collaboration with religious authorities, to create alternate ways of supporting the poor, in order to limit the practice of begging).

6.5 Increase the number of persons with disabilities and their families participating in and benefiting from the Productive Safety Net Program (PSNP) (MOFED, BOFEDs).

6.6 Provide policy guidance and technical support to Regional Labour & Social Affairs for the provision of social welfare services to poor persons with disabilities.

6.7 Strengthen through material and other support charitable organizations providing social welfare services and support to meet the needs of persons with disabilities living in poverty.

6.8 Strengthen through material and other support programs and facilities providing day care and other services to children and adults with intellectual and other developmental disabilities.

6.9 Strengthen through material and other support organizations and programs providing services to persons with disabilities, including housing, transport, wheelchairs and adaptive equipment, counseling, referral and other services.

6.10 Liaise with UN and other international organizations to obtain information and technical and material support for social security and other social assistance schemes.

6.11 Implement comprehensive social protection policy of Ethiopia (MOLSA).

**Indicators**

- Number of persons with disabilities covered by social security systems
- Number of persons with disabilities receiving social assistance
- Number of persons with disabilities benefiting from the PSNP
- Plan for providing support to persons with disabilities who depend on begging
- Number of children with disabilities assisted by charitable organizations
- Number of persons with intellectual disabilities assisted
- Number of organizations providing services at national and regional levels
- Value (in Birr) of international technical and material support
- Endorsed social protection policy.
2.3.7 Priority 7: Living Environments

Lead Agency: Ministry of Transport
Collaborators: Ministry of Justice, Ministry Urban Development and Construction, Ministry of Communication and Information Technology, Ministry of Agriculture & the respective regional bureaus, DPOs, NGOs, etc

Persons with physical, visual, hearing or other impairments in Ethiopia are citizens, consumers, students and workers. They need, deserve and have a right to access services and opportunities provided to everyone else. Yet the built environment, especially of towns and cities, is inaccessible. By building and maintaining barriers, society excludes and discriminates against persons with disabilities. By doing so, society loses the contribution of persons with disabilities.

An accessible infrastructure and environment not only benefits people with disabilities but a wide range of people such as elders who have difficulties in walking, pregnant women and young mothers pushing baby strollers, people with cardiac problems, persons carrying heavy loads, and people with temporary impairments such as a broken leg. Anyone can or will join one of these categories sooner or later in life; creating accessibility and inclusive living environments thus concerns a much larger public than only persons with disabilities.

Buildings and homes, roads and sidewalks, parks and sports grounds, recreational areas and other structures and spaces should be designed or adapted in a way that meets the needs of as many people as possible, including persons with disabilities. It is much easier to consider accessible designs at the beginning of a project because if taken into account during the conception phase accessible design represents only 2%, often less, of the total cost of a building. It is never too late to make accessible modifications to an already existing building; often the cost of such “retro-fitting” is minor.

The UN CRPDs recognizes the right of persons with disabilities to live independently and participate fully in all aspects of life. In order to do so, Governments are required to “take appropriate measures to ensure to persons with disabilities access, on an equal basis with others, to the physical environment, to transportation, to information and communications, including information and communications technologies and systems, and to other facilities and services open or provided to the public, both in urban and in rural areas. These measures, which shall include the identification and elimination of obstacles and barriers to accessibility, shall apply to:

a) Buildings, roads, transportation and other indoor and outdoor facilities, including schools, housing, medical facilities and workplaces;

b) Information, communications and other services, including electronic services and emergency services.

c) Develop, promulgate and monitor the implementation of minimum standards and guidelines for the accessibility of facilities and services open or provided to the public;

d) Ensure that private entities that offer facilities and services which are open or provided to the public take into account all aspects of accessibility for persons with disabilities;

e) Provide training for stakeholders on accessibility issues facing persons with disabilities;

f) Provide in buildings and other facilities open to the public signage in Braille and in easy to read and understand forms;

g) Provide forms of live assistance and intermediaries, including guides, readers and professional sign language interpreters, to facilitate accessibility to buildings and other facilities open to the public;

h) Promote other appropriate forms of assistance and support to persons with disabilities to ensure their access to information;

i) Promote access for persons with disabilities to new information and communications technologies and systems, including the Internet;

j) Promote the design, development, production and distribution of accessible information and communications technologies and systems at an early stage, so that these technologies and systems become accessible at minimal cost.”

Objective 7: Accessible living and transport available to persons with disabilities in all communities
The Developmental Social Welfare Policy of MOLSA calls for the gradual removal of physical barriers in order to make a more accessible environment for persons with disabilities in the community. The Ethiopian Building Proclamation No. 624/2009 requires all new buildings to be accessible for persons with physical and mobility impairments. Regulations providing technical specifications for the construction of accessible buildings are being prepared by the Ministry of Works and Urban Development (MWUD). The Proclamation is an important first step towards ensuring that all future urban construction is accessible to persons with disabilities.

Outputs
During the period of the NPA, the following outputs will be produced:

7.1 Technical standards for accessible building design in Ethiopia published in English and Amharic.

7.2 Architects, building contractors, government officials and the general public having greater awareness of accessibility issues.

7.3 Guide to Accessible Addis Ababa published.

7.4 Good examples of accessible building design identified, shared and publicly recognized.

7.5 Study on accessible transportation alternatives for Addis Ababa completed.

7.6 Hearing-impaired persons allowed to operate motor vehicles.
7.6 Change the regulations to allow hearing-impaired persons to operate motor vehicles, as is the case in other countries (MTC).

7.7 Design and introduce a module on universal design for university courses for architects (MOE).

7.8 Identify key Federal and Regional Government services and make them accessible to persons with disabilities (MOLSA).

7.9 In the design and construction of public housing, including condominiums, ensure that at least 10% of all housing units are accessible and available for persons with disabilities (MUDC).

7.10 Introduce tax incentives for employers to partially meet the cost of reasonable accommodations, including building modifications and equipment adaptations required for the employment of individuals with disabilities (MOLSA).

7.11 Commission and implement studies on how to make Parliament, City Hall, the National Theatre, and other important public buildings accessible (MUDC).

7.12 Require that all newly constructed university classrooms, dining halls, dormitories and other facilities are made accessible for students with disabilities (MOE).

7.13 Commission and implement a study on how to make public parks, recreational and sports facilities accessible for persons with disabilities (MUDC).

Indicators

- Manuals, guides on accessibility technical standards
- Number of persons informed about accessibility issues
- Study report on accessible transport alternatives for Addis Ababa
- Number of university courses that include information on accessibility issues and universal design
- Number of university students exposed to accessible design concepts and standards
- Government services accessible to persons with disabilities
- Number of accessible public housing units available to persons with disabilities
- Number of employers obtaining tax relief for the employment of persons with disabilities
- Study reports on making important public building accessible
- Number of accessible buildings at AAU and universities in the Regions
- Study report on making public parks, recreational and sports facilities accessible
- Value (in Birr) of international technical and material support.
2.3.8 Priority 8: Culture, Sports and Recreation

Lead Agency: Ministry of Culture and Tourism,
Collaborators: Sport Commission, Ministry of Agriculture, Ministry of Communication and Information Technology & the respective regional bureaus, DPOS, NGOS, etc.

Participation in community cultural, sporting and recreational activities and events by persons with disabilities in Ethiopia is limited. This is due to a variety of reasons; lack of accessibility, lack of welcome, lack of adapted facilities and equipment lack of accessible communication and information, cost, etc.

The UNCRPD recognizes the right of persons with disabilities to take part on an equal basis with others in cultural life. Governments are required “to take all appropriate measures to ensure that persons with disabilities:

a) Enjoy access to cultural materials in accessible formats;

b) Enjoy access to television programmes, films, theatre and other cultural activities, in accessible formats;

c) Enjoy access to places for cultural performances or services, such as theatres, museums, cinemas, libraries and tourism services, and, as far as possible, enjoy access to monuments and sites of national cultural importance.”

Governments will also “take appropriate measures to enable persons with disabilities to have the opportunity to develop and utilize their creative, artistic and intellectual potential not only for their own benefit but also for the enrichment of society, and take all appropriate steps, in accordance with international law, to ensure that laws protecting intellectual property rights do not constitute an unreasonable or discriminatory barrier to access by persons with disabilities to cultural materials.

Persons with disabilities shall be entitled on an equal basis with others to recognition and support of their specific cultural and linguistic identity including sign languages and deaf culture.”

With a view to enabling persons with disabilities to participate on an equal basis with others in recreational, leisure and sporting activities, Governments will “take appropriate measures:

a) To encourage and promote the participation to the fullest extent possible, of persons with disabilities in mainstream sporting activities at all levels;

b) To ensure that persons with disabilities have an opportunity to organize, develop and participate in disability-specific sporting and recreational activities and, to this end, encourage the provision of accessible facilities on an equal basis with others, of appropriate instruction, training and resources;

c) To ensure that persons with disabilities have access to sporting, recreational and tourism venues;

d) To ensure that children with disabilities have equal access with other children to participation in play, recreation and leisure and sporting activities, including those activities in the school system;

e) To ensure that persons with disabilities have access to services from those involved in the organization of recreational, tourism, leisure and sporting activities.”

Objective 8: Culture, sports, and recreation opportunities available to persons with disabilities

The Ministry of Culture and Tourism (MCT) and Sport Commission (SC) have a responsibility to ensure that children, youth and adults with disabilities have opportunities to access and participate in cultural, sports and recreational activities in the community. In addition, the Ministry of Communication & Information Technology has a responsibility to ensure access to television by deaf and hearing impaired persons.

Outputs
During the period of the NPA, the following outputs will be produced:

8.1 Cultural information materials are available in alternative accessible formats.

8.2 Closed captioning introduced and sign language interpretation available for an increased number of television programs.

8.3 Films are made available with sub-titles.

8.4 All theatres, cinemas and museums in the country are accessible to persons with mobility impairments.

8.5 All major cultural activities and performances are organized in physically accessible venues and feature sign language interpretation.

8.6 All libraries in the country include books in Braille.

8.7 Tourist facilities, including the offices of tourist agencies, are accessible to persons with disabilities.

8.8 Major historical monuments and sites of national cultural importance are accessible to persons with disabilities.

8.9 The facilities and courses of music schools and schools of art and design are accessible to persons with disabilities.
8.10 Travel agents, tour operators, and personnel responsible for maintaining historical and cultural sites trained in disability awareness.

8.11 Capacity of the Ministry of Culture and Tourism increased to provide guidance to and collaborate with the relevant responsible Ministries (MUDC and others) to improve the accessibility of cultural and tourist facilities.

8.12 Sports facilities, including stadiums, swimming pools and fitness centers accessible to persons with disabilities.

8.13 Community recreation centers and programs accessible to persons with disabilities.

8.14 All national sporting events, including national competitions and university competitions, include events for athletes with disabilities.

8.15 Capacity of national, regional and local sports associations of persons with disabilities strengthened.

8.16 Capacity of the National Para Olympics Committee (NPC) strengthened.

8.17 Sports and recreation personnel trained in disability awareness and how to conduct sporting activities for persons with disabilities, including women with disabilities.

8.18 Capacity of Sport Commission increased to provide guidance to and collaborate with the relevant responsible Ministries (MUDC and others) to improve the accessibility of sports and recreation facilities.

Activities
To produce the above Outputs, the following activities will be undertaken (by responsible national entity in brackets):

8.1 Prepare, print and disseminate cultural information materials in accessible formats (MCIT).

8.2 Introduce closed captioning system for television, and make sign language interpretation available for an increased number of television programs (MCIT).

8.3 Require sub-titling of all films shown in Ethiopian cinemas (MCIT).

8.4 Mandate and facilitate modifications to all theatres, cinemas and museums in the country to make entrances and seating accessible to persons with mobility impairments (MCIT).

8.5 Encourage and facilitate the organization of all major cultural activities and performances in physically accessible venues and with sign language interpretation (MCIT).

8.6 Mandate and facilitate the acquisition of books in Braille and electronic format by all libraries in the country (MOE).
2.3.9 Priority 9: Full Participation of Women with Disabilities

Lead Agency: Ministry of Women, Children and Youth Affairs
Collaborators: MOLSA, Ministry of Culture and Tourism, Sport Commission, Ministry of Agriculture, Ministry of Communication and Information Technology & the respective regional bureaus, DPOS, NGOs, etc

Women with disabilities in Ethiopia, as in other countries, face the double discrimination of being a woman and having a disability.

The UNCRPDs (Article 6) recognizes that women and girls with disabilities are subject to multiple discrimination, and in this regard Governments are required to “take measures to ensure the full and equal enjoyment by them of all human rights and fundamental freedoms, and to ensure the full development, advancement and empowerment of women, for the purpose of guaranteeing them the exercise and enjoyment of the human rights and fundamental freedoms set out in the present Convention.”

Objective 9: Full participation and equality for women with disabilities

The ultimate responsibility for ensuring equality of opportunity and full participation of women with disabilities in society rests with the Ministry of Women, Children and Youth Affairs (MWCYA), in collaboration with Regional Bureaus of Women Children and Youth Affairs. Throughout the country activities are organized to strengthen the capacity of women and their organizations to undertake literacy, income generating and other empowerment activities. Few women with disabilities participate in these activities.

Outputs

During the period of the NPA, the following outputs will be produced:

9.1 Women leaders at national and regional levels and women with disabilities have information on how to include women and girls with disabilities in mainstream women empowerment programs.

9.2 The general public is better informed about the capabilities and contributions of women with disabilities.

9.3 90% increase in the number of women with disabilities participating in mainstream women’s organizations.

9.4 70% increase in number of women with disabilities participating in income generating activities.

9.5 70% increase in number of women with disabilities employed in public and private sector jobs.

9.6 Women leaders at national and regional levels trained in disability awareness.

9.7 Good examples of the inclusion of women with disabilities in mainstream women empowerment activities are identified shared and publicly recognized.

9.8 Capacity of national, regional and local associations of women with disabilities increased.

9.9 Capacity of the Ministry of Women, Children and Youth Affairs to promote and facilitate the inclusion of women with disabilities in its programs increased.

9.10 Capacity of other Ministries to ensure that women, including women with disabilities, have access to the programs and services that they provide.

Activities

To produce the above Outputs, the following activities will be undertaken (by responsible national entity in brackets):

9.1 Guide for women leaders at national and regional levels on how to include women and girls with disabilities in mainstreaming women empowerment programs produced and disseminated (MWCYA).

9.2 Informational materials prepared and disseminated for women with disabilities about mainstream women empowerment programs (MWCYA).

9.3 Radio and TV programs are planned and produced about the capabilities and contributions of women with disabilities (MWCYA).

9.4 Increase by 100% through active recruitment the number of women with disabilities participating in mainstream women’s organizations (MWCYA).

9.5 Increase by 100% through active recruitment the number of women with disabilities participating in income generating activities (MWCYA).

9.6 Provide training to women leaders at national and regional levels in disability awareness (MWCYA).

9.7 Identify, share and publicly recognize good examples of the inclusion of women with disabilities in mainstream women empowerment activities (MWCYA).

9.8 Provide technical and material support to national, regional and local associations of women with disabilities (MWCYA, MOLSA).

9.9 Liaise with UN, other international organizations and local DPOs and NGOs to obtain information and technical and material support to promote and facilitate the inclusion of women with disabilities and disability awareness-raising training (MWCYA).

9.10 Provide technical support to other ministries to increase their capacity to include women with disabilities in their programs and services (MWCYA).

Indicators

- Guides, other informational materials
- Number of radio, TV programs
- Number of women with disabilities participating in mainstream women’s organizations and programs
- Number of women with disabilities participating in income generating activities
- Number of women with disabilities employed in the public and private sectors
- Number of women leaders trained
- Number of examples of good practice identified and publicly recognized
- Number of associations with women disabilities
- Value (in Birr) of international technical and material support.
2.3.10 Priority 10: Self-representation through DPOs

Lead Agency: MOLSA
Collaborators: Sport Commission, Ministry of Communication and Information Technology, the respective regional bureaus, & DPOs, NGOs, etc

Persons with disabilities have established a variety of organizations for self-representation, self-help and to advocate for their rights. These organizations exist at national, regional and local levels, and can be composed of persons, women and men, with similar impairments, for example persons who are blind and visually impaired (uni-disability organizations), or of persons having a variety of impairments but living in the same community (cross-disability organizations). These organizations are often referred to as organizations of persons with disabilities (DPOs) and play an important role in giving persons with disabilities a voice to advocate for their rights and equal access to services and opportunities. United by the slogan “Nothing about us without us”, DPOs are extremely important partners in all government and NGO programs, projects and service delivery. The UNCRPD recognizes the right of persons with disabilities to self-representation and the exercise of this right needs to be encouraged and strengthened.

Objective 10: Persons with disabilities and their organizations playing leadership roles in local communities, regionally and nationally.

Persons with disabilities and their organizations are the first concerned and are the first to be consulted on all matters affecting and concerning them. The Ministry of Labour and Social Affairs consult systematically and regularly with the national associations of persons with disabilities and their umbrella organization, the Federation of Ethiopian National Associations of Persons with Disabilities (FENAPD). FENAPD is the leading organization for the organization of the annual national observance of the International Day of Persons with Disabilities. The Regional Implementation and Monitoring Coordinating Committee on Disability include DPOs representatives, as do various national steering committees, including the National Decade Steering Committee. Locally registered DPOs carry out important advocacy work on behalf of persons with disabilities.

Outputs
During the period of the NPA, the following outputs will be produced:

10.1 Capacity of national and regional associations of persons with disabilities strengthened.

10.2 Capacity of the Federation of Ethiopian National Associations of Persons with Disabilities (FENAPD) and its regional networks strengthened.

10.3 Capacity of persons with disabilities to understand their rights, recognize discrimination and be self-advocates increased.

10.4 Rights advocacy work of local DPOs strengthened.

10.5 Formal Government recognition that persons with disabilities are experts on their own experience.

10.6 Representatives of DPOs included on all Government consultative bodies, committees and task forces.

10.7 Representatives of DPOs consulted on all matters that affect persons with disabilities.

10.8 Public recognition of the achievements and leadership of persons with disabilities.

10.9 Leadership development and mentoring programs for persons with disabilities established.

10.10 National DPOs and FENAPD participating in and benefiting from membership in international disability organizations.

Activities
To produce the above Outputs, the following activities will be undertaken (by responsible national entity or entities in brackets):

10.1 Provide technical and material support to national and regional associations of persons with disabilities (MOLSA).

10.2 Provide technical and material support to the Federation of Ethiopian National Associations of Persons with Disabilities (FENAPD) and its regional networks (MOLSA).

10.3 Arrange for training to ensure that persons with disabilities understand their rights, recognize discrimination and are better able to be self-advocates (MOLSA, FENAPD, EIO).

10.4 Provide technical and material support for the rights advocacy work of local DPOs (MOLSA).

10.5 Prepare and disseminate formal Government statement that recognizes that persons with disabilities are experts on their own experience (MOLSA).

10.6 Invite a representative of DPOs to be a member of all Government consultative bodies, committees and task forces (OPM).

10.7 Ensure representation of DPOs in all Government decisions that affect persons with disabilities (OPM, MOLSA).

10.8 Organize annual event to publicly recognize the achievements and leadership of persons with disabilities (MOLSA).

10.9 Establish a leadership development and mentoring program for persons with disabilities (MOLSA, FENAPD).

10.10 Encourage and support national DPO and FENAPD membership and participation in international disability organizations (MOLSA, FENAPD).
2.3.11 Priority 11: Research and Information

Lead Agency: Central Statistical Agency (CSA)
Collaborators: MOLSA, MOE, MOH, Ministry of Communication and Information Technology, Universities & the concerned regional offices DPOs, NGOs, etc.

A major constraint in the preparation of the present NPA was the lack of reliable data and statistics about disability and persons with disabilities in the country. Little valid research has been carried out, and the accuracy of data that exist is often questionable. In addition, there has been a rapid growth in organizations working on disability in the country, but little comprehensive information about their activities and impact, despite the creation of a network for this purpose, the Ethiopian National Disability Action Network (ENDAN).

Comprehensive and accurate data on disability is a basic element for the planning, implementation and monitoring of services for persons with disabilities. The lack of reliable information impacts negatively on the planning and development of services and strategies for creating an enabling environment for the equalization of opportunities. Government, specifically the Central Statistical Agency (CSA), is responsible for compiling and disseminating information on disability and persons with disabilities to federal and regional authorities, and other interested organizations.

According to the UN CRPDs Article 31, Governments are required to collect appropriate information, including statistical and research data, to enable them to formulate and implement policies to give effect to the Convention.

Many persons with disabilities don’t have access to information due to difficulties in communication. This is particularly the case of blind and visually impaired persons who don’t have access to printed materials, and of deaf and hearing impaired persons who don’t have access to radio, TV and other audio means of communication.

The UN CRPDs (Article 21) recognizes the right of persons with disabilities to freedom of expression and opinion. Governments are required to ensure this freedom, “including the freedom to seek, receive and impart information and ideas on an equal basis with others and through all forms of communication of their choice, as defined in Article 2 of the present Convention, including by:

a) Providing information intended for the general public to persons with disabilities in accessible formats and technologies appropriate to different kinds of disabilities in a timely manner and without additional cost;

b) Accepting and facilitating the use of sign languages, Braille, augmentative and alternative communication, and all other accessible means, modes and formats of communication of their choice by persons with disabilities in official interactions;

c) Urging private entities that provide services to the general public, including through the Internet, to provide information and services in accessible and usable formats for persons with disabilities;
d) Encouraging the mass media, including providers of information through the Internet, to make their services accessible to persons with disabilities;

e) Recognizing and promoting the use of sign languages."

Objective 11: Increased information on disability and persons with disabilities available and accessible information disseminated.

The Central Statistical Agency (CSA) has the responsibility to produce statistical data and information on disability and persons with disabilities in the country. The periodic CSA national housing and population census includes questions related to disability. Sample surveys conducted by NGOs also produce disability information. However, the full extent of disability and the number of persons with disabilities in the country remains unknown. In addition, information intended for the general public is seldom provided to persons with disabilities in accessible formats and technologies appropriate to different kinds of disabilities.

Outputs

During the period of the NPA, the following outputs will be produced:

11.1 The use of sign language, Braille, augmentative and alternative accessible forms of communication, used for official communications, information and interactions.
11.2 Internet service providers and website designers using software and formats accessible for persons with disabilities.
11.3 Additional information through research on the incidence and prevalence of disability in the country collected and available.
11.4 Information on the situation of children with disabilities in the country collected and available.
11.5 Capacity of MOLSA and CSA to conduct research on disability issues increased.
11.6 Committee of stakeholders established to identify priority areas and topics for research.
11.7 Committee at AAU established to identify priority areas and topics, and encourage research by students and faculty.

Activities

To produce the above Outputs, the following activities will be undertaken (by responsible national entity in brackets):

11.1 Promote the use of sign language, Braille, augmentative and alternative accessible forms of communication for official communications, information and interactions (MOLSA).
11.2 Encourage and train Internet service providers and website designers to use software and formats accessible for persons with disabilities (MOLSA).

11.3 Conduct supplementary sample surveys on the incidence and prevalence of disability in the country (CSA).
11.4 Conduct research on the situation of children with disabilities in the country (MOLSA).
11.5 Liaise with UN and other international organizations to obtain technical and material support (MOLSA).
11.6 Establish a committee of stakeholders, to include representatives of MOLSA, MOE, MOH, AAU, DPOs, and NGOs, to identify priorities for disability-related research (MOLSA).
11.7 Establish a committee, under the AAU Disability and Career Development Center (DCDC), to coordinate university research on disability-related topics (AAU).

Indicators

• Number of official Government communications available in alternative accessible formats
• Number of accessible Government and organization websites
• Information on incidence and prevalence of disability
• Information on situation of children with disabilities
• Value (in Birr) of international technical and material support
2.3.12 Priority 12: Human Resource Development

Lead Agency: MOLSA
Collaborators: MOE, MOH, Ministry of Women, Children and Youth Affairs, Ministry of Civil Service, Ministry of Science and Technology, Ministry of Agriculture the respective regional bureaus, DPOS, NGOs, etc.

The lack of trained personnel to provide services and to work with persons with disabilities is a major constraint to the expansion of services and opportunities for persons with disabilities in Ethiopia. Such personnel include community health workers, community development workers, community-based rehabilitation personnel, specialized medical rehabilitation personnel, physical therapists, occupational therapists, orthopedic technicians, vocational counselors, teachers and TVET instructors trained in special needs and inclusive education, among others.

The UNCRPDs (Article 4.i) “promotes the training of professionals and staff working with persons with disabilities in the rights recognized in the Convention so as to better provide the assistance and services guaranteed by those rights.”

Objective 12: A public service that is aware and responsive to the rights and needs of persons with disabilities.

Disability is a cross-cutting issue, requiring the engagement of all ministries, government officials and civil servants in promoting and facilitating access to public services and the inclusion of persons with disabilities in all government programs. The Ministry of Labour and Social Affairs, being the lead Federal Ministry on disability issues, has a responsibility to provide guidance on inclusion and to increase the disability awareness of all government entities and personnel, at both Federal and Regional level, in collaboration with the Ministry of Civil Service.

Outputs
During the period of the NPA, the following outputs will be produced:

12.1 Federal and Regional civil servants informed about disability issues and the provision of inclusive services to persons with disabilities.

12.2 Zonal and Woreda level government officials informed about disability issues and the provision of inclusive services to persons with disabilities.

12.3 Disability audits of government service delivery conducted at Federal and Regional level.

12.4 Information and communications on all Government services made available in alternative accessible formats and methods, including Braille and electronic formats.

12.5 Increased numbers of sign language interpreters trained and employed in the civil service to facilitate service provision and the employment of deaf and hearing-impaired persons.

12.6 Rights advocacy activities of national and local organizations of persons with disabilities (DPOs) strengthened.

12.7 Capacity of the Federal and Regional Civil Services to promote and facilitate the provision of inclusive public services increased.

12.8 Capacity of the Ethiopian Institution of the Ombudsman (EIO) and the Ethiopian Human Rights Commission to promote and protect the rights of persons with disabilities increased.

12.9 Capacity of the Ministry of Labour and Social Affairs to provide leadership as an advocate for a disability aware and responsive civil service increased.

Activities
To produce the above Outputs, the following activities will be undertaken (by responsible national entity in brackets):

12.1 Prepare and disseminate a Guide for Federal and Regional civil servants on disability issues and the provision of inclusive services to persons with disabilities (MOLSA, MCS).

12.2 Prepare in national languages and disseminate a Guide for Zonal and Woreda level government officials on disability issues and the provision of inclusive services to persons with disabilities (MOLSA, MCS).

12.3 Organize and conduct disability audits of government service delivery at Federal and Regional level (MOLSA, MCS).

12.4 Provide information and communications on Government services to the public in alternative accessible formats and methods (MOLSA).

12.5 Increase the training and employment of sign language interpreters (MOE).

12.6 Provide technical and material support to the rights advocacy activities of national and local organizations of persons with disabilities (MOLSA).

12.7 Provide training to personnel of the Federal and Regional Civil Services on disability awareness and inclusive service delivery (MOLSA).

12.8 Provide disability awareness training to personnel of the Ethiopian Institution of the Ombudsman (EIO) and the Ethiopian Human Rights Commission on how to promote and protect the rights of persons with disabilities (MOLSA).

12.9 Liaise with UN, other international organizations and local DPOs and NGOs to obtain information and technical and material support to promote and facilitate inclusive service delivery and disability awareness-raising training (MOLSA).

Indicators
- IEC Informational guides on disability issues
- Information on building, service accessibility from disability audits
- Personnel trained
- Value (in Birr) of international technical and material support
2.3.13 Priority 13: International Cooperation

Lead Agency: MOLSA,
Collaborators: MOE, MOH, Ministry of Agriculture, Ministry of Communication and Information Technology & the respective regional bureaus, DPOs, NGOs, etc.

Persons with disabilities are benefiting from a variety of donor-funded initiatives to address the needs of persons with disabilities. However, they are inadequate in face of the challenges facing the Government in providing needed services and equal opportunities to the large number of children, youth and adults with disabilities in the country.

The UNCRPDs (Article 32) recognizes the importance of international cooperation and its promotion, in support of national efforts for the realization of the purpose and objectives of the Convention. Governments “will undertake appropriate and effective measures in this regard, between and among States and, as appropriate, in partnership with relevant international and regional organizations and civil society, in particular organizations of persons with disabilities. Such measures could include:

a) Ensuring that international cooperation, including international development programmes, is inclusive of and accessible to persons with disabilities;

b) Facilitating and supporting capacity-building, including through the exchange and sharing of information, experiences, training programmes and best practices;

c) Facilitating cooperation in research and access to scientific and technical knowledge;

d) Providing, as appropriate, technical and economic assistance, including by facilitating access to and sharing of accessible and assistive technologies, and through the transfer of technologies.

Objective 13: Increased international technical cooperation in support of inclusive programs and services for persons with disabilities

The UN Convention calls upon international organizations, national governments and development cooperation agencies to support efforts by developing countries to implementation of the provisions of the Convention. In order to do so, they need to receive requests for technical and material assistance from Governments and responsible ministries. The requests can be in the form of support for the inclusion of persons with disabilities in ongoing mainstream sector development and poverty reduction programs or support for disability-specific programs.

13.2 Capacity of networks of Ethiopian DPOs and NGOs working on disability to support implementation of the NPA strengthened.

13.3 International partnerships created for the exchange of information with Government Ministries, Ethiopian DPOs and NGOs.

13.4 Government officials, DPOs and NGOs participate in and get information from international conferences related to disability, and to support implementation of the NPA.

13.5 Accessible and assistive technologies and technologies with adaptive equipment obtained.

Activities

To produce the above Outputs, the following activities will be undertaken (by responsible national entity in brackets):

13.1 Prepare and submit project proposals for international technical and financial support for the implementation of specific components of the NPA (MOLSA).

13.2 Provide technical and material support to networks of Ethiopian DPOs and NGOs working on disability to support implementation of the NPA (MOLSA).

13.3 Promote the creation of international partnerships for the exchange of information with Government Ministries, Ethiopian DPOs and NGOs (MOLSA).

13.4 Encourage and support Government officials, DPOs and NGOs to participate in and get information from international conferences related to disability, to support implementation of the NPA (MOLSA).

13.5 Request international organizations to share accessible and assistive technologies, and technologies and adaptive equipment obtained (MOLSA).

Indicators

- Number of proposals to donors
- Number of local partner networks assisted
- Number of international partnerships
- Number of officials participating in international conferences
- Value (in Birr) of international technical and material support
Chapter Three

3. Implementation Modalities

3.1 Institutional Arrangements

As disability is a cross-cutting issue requiring a multi-sectoral response, implementation of the NPA requires action by a number of Federal Ministries and Regional Bureaus, working in close collaboration with local authorities, organizations of persons with disabilities (DPOs), disability service providing NGOs, development NGOs, and the private sector. Although the Ministry of Labour and Social Affairs is the lead Federal Ministry in most of the disability matters, all Ministries have a responsibility to mainstream disability issues in their respective areas of technical competence, are indicated in the following figure.

Structure for the Implementation of the NPA

Office of the Prime Minister
Social Affairs

Ministry of Labour and Social Affairs

National Implementation and monitoring coordinating committee

Developmental Social Welfare Promotion Directorate

NPA National Technical Committee

Regional Implementation and Monitoring coordinating committee

Regional BOLSA

Regional NPA Technical Committees

Institutional arrangements for implementation and monitoring of the NPA respective major roles, responsibilities of Federal, Regional and local authorities, other partners

3.1.1 Committee

3.1.1.1 National Implementation and Monitoring Coordinating Committee

Planning and implementation of the NPA will be coordinated by the National Implementing and Monitoring Committees, composed of representatives of key Federal Ministries and Regional Bureaus, relevant NGOs working on disability, DPOs, religious institutions etc. chaired by the Ministry of Labour and Social Affairs. Members of the NIMCC will be responsible for ensuring that their respective organizations’ plans NPA outputs and activities are included in their annual work plans and budgets. MOLSA will provide the Secretariat for the NIMCC. The National Coordinating Committee will meet periodically to review and coordinate the plans and budgets of the implementing Committee required for the implementation of the NPA. The National coordinating committee will receive reports from the Regional Coordinating Committees and prepare periodic reports on the implementation of the NPA, and on new and emerging disability policy issues affecting individuals with disabilities at Federal, Regional, local levels, and in the private sector.

3.1.1.2 Technical Committee

The National and Regional Implementation and Monitoring Coordinating Committees will establish NPA Technical Committees composed of representatives of key Government Ministries or Bureaus, NGOs and DPOs active in the Region and of appointed individual technical specialists to undertake planning and coordination work related to the NPA. The NPA Technical Committees report to their respective Coordinating Committees.

The Ministry of Labour and Social Affairs will represent the NIMCC to make recommendations to the Prime Minister, to the Council of Ministers, to appropriate Standing Committees of the House of Peoples’ Representatives, and to specific Ministries, on policy and legislative issues, and on ways to improve the delivery of services and ensure the inclusion of persons with disabilities, and to address emerging policy and coordination issue.

The following is a summary of the respective roles and responsibilities of each Federal Ministry (and their corresponding Regional Bureaus), and of key implementing partners.

3.1.2 Federal Ministries

Ministry of Labour and Social Affairs (MOLSA)
implementation of the NPA, mobilize the allocation of resources, and provide information, guidance and technical and material support to other Federal Ministries, Regional Labour & Social Affairs, partner organizations (DPOs, NGOs) in the implementation of NPA activities. Provide a secretariat, chair and guide the work of the National Coordinating Committee. Ensure funding and support the monitoring of NPA implementation by the National and Regional coordinating committees. Provide policy guidance and training of the personnel of the Regional Labour & Social Affairs. Identify and recognize examples of good practice by Regions.

The Ministry of Labour and Social Affairs will receive reports from the National and Regional coordinating committees and report to Parliament annually on progress in the planning and implementation of the Plan. MOLSA will undertake a full review of progress of implementation and impact of the NPA at the end of the first five years of implementation, and make any necessary amendments.

Ministry of Health (MOH)

Roles and responsibilities: Develop and implement NPA activities to improve health care delivery to persons with disabilities, focusing on early detection, intervention, community-based rehabilitation and specialized medical rehabilitation, physiotherapy, and other hospital-based services. Ensure the inclusion of services for persons with disabilities in the Health Sector Development Programs. Provide guidance and support to Regional Health Bureaus for the implementation of NPA activities. Collaborate with MOLSA to develop and implement a strategy for the national coordination of provision of orthopedic services and devices, Support Regional Bureaus of Health to ensure the inclusion of modules on disability in training programs and curriculums of medical students at public and private universities, colleges, and other schools, in cooperation with the AAU Faculty of Medicine and MOE. Annual progress report on NPA implementation to be submitted to the NIMCC.

Ministry of Education (MOE)

Roles and responsibilities: Develop and implement the special needs and inclusive education activities of the NPA, as per the Special Needs Education Program Strategy and in collaboration with teacher education institutions (TEIs), the Regional Bureaus of Education and TVET institutions and agencies. Provide guidance on curriculum development to TEIs. Ensure the inclusion of educational opportunities for children with disabilities in Education Sector Development Programs. Annual progress report on NPA implementation to be submitted to the NIMCC.

Ministry of Culture and Tourism (MCT)

Roles and responsibilities: Organize awareness raising programs in cooperation with the Ministry of Transport on disability issues and persons with disabilities in order to promote the participation of persons with disabilities in cultural, sports, recreation and other activities. Annual progress report on NPA implementation to be submitted to the NIMCC.

Ministry of Industry (MOI)

Roles and responsibilities: Promote the inclusion of persons with disabilities in vocational skills training and income generating activities organized by the Federal Micro and Small Enterprise Development Agency (FeMSEDA), and in the activities of the Regional Micro and Small Enterprise Development Agencies (ReMSEDA). Promote and facilitate the development and provision of business development services to persons with disabilities engaged in micro and small business activities. Annual progress report on NPA implementation to be submitted to the NIMCC.

Ministry of Transport (MOT)

Roles and responsibilities: Undertake studies, develop and implement a plan for the provision of accessible transport to persons with disabilities in Addis Ababa, in Dire Dawa and in secondary cities and towns (roads, means of transport such as city bus & taxis). Annual progress report on NPA implementation to be submitted to the NIMCC.

Ministry of Science and Technology (MST)

Roles and responsibilities: Review needs and develop technologies required to enhance the mobility, communications and participation of persons with disabilities in society. Annual progress report on NPA implementation to be submitted to the NIMCC.

Sport Commission (SC)

Roles and responsibilities: Implement programs to facilitate the participation of persons with disabilities in organized youth activities, including recreation and community sports activities. Support the Ethiopian Sports Federation and the National Paralympics Committee to develop national and regional sports competitions for athletes with disabilities. Provide technical and material support to associations of athletes with disabilities. Facilitate the participation of athletes with disabilities in international sports tournaments. Annual progress report on NPA implementation to be submitted to the NIMCC.

Ministry of Agriculture (MOA)

Roles and responsibilities: Provide agricultural extension services to farmers with disabilities, and facilitate the inclusion of farmers with visual, hearing and physical impairments in agricultural extension training and support programs. Ensure disability inclusive productivity. Annual progress report on NPA implementation to be submitted to the NIMCC.

Ministry of Urban Development and Construction (MUDC)

Roles and responsibilities: Provide technical guidance on accessible design and collaborate with relevant ministries and agencies on the construction of new public works and the upgrading of existing public buildings to ensure their accessibility for persons with disabilities, in accordance with the Ethiopian Building Proclamation and international standards. Provide technical guidance on accessible design and building standards to architects and contractors. Annual progress report on NPA implementation to be submitted to the NIMCC.
Ministry of Finance and Economic Development (MOFED)
Roles and responsibilities: Ensure adequate financing to Federal Ministries and Agencies for the implementation of the NPA. Collaborate with MoLSA in issuing guidance on the use of allocated NPA budget resources. Include NPA activities and financing in development plan of Ethiopia.

Ministry of Women, Children and Youth Affairs (MWCYA)
Roles and responsibilities: Promote the inclusion of women, Children and Youth with disabilities in all the programs and services of all ministries. Ensure non-discrimination towards women and disabilities in women literacy, empowerment, and livelihood initiatives. Encourage women with disabilities to participate as members in mainstream women's organizations. Promote the prevention of disability at early childhood and the involvement of the youth with disability in development programs. Annual progress report on NPA implementation to be submitted to the NIMCC.

Ministry of Justice (MOJ)
Roles and responsibilities: Undertake a review of all laws and legislation to identify discriminatory provisions, and act to remove all such discrimination towards persons with disabilities. Propose new laws and required legislation to ensure equality of opportunity and respect for the rights of persons with disabilities. Annual progress report on NPA implementation to be submitted to the NIMCC.

Ministry of Civil Service (MCS)
Roles and responsibilities: Promote and facilitate the recruitment, hiring and advancement of persons with disabilities in the federal civil service. Undertake assessment to ensure the affirmative measures are in place as per the proclamation. Provide guidance to central civil service and agencies on the employment of persons with disabilities. Undertake a review of the capacity-building needs of all Federal Ministries concerning their ability to implement the required actions of the NPA, and develop capacity-building programs to address the capacity deficits and needs identified. Annual progress report on NPA implementation to be submitted to the NIMCC.

Office of Government Communication Affairs
Roles and responsibilities: Raise public awareness and advocate the issues of PWDs in collaboration with MoLSA and other relevant bodies. Ensure accessibility of telecommunications systems to persons with different types of disabilities, and the dissemination of information through alternative, accessible formats. Facilitate the use of radio and TV by DPOs and NGOs for disability awareness-raising purposes. Braille and other innovations related to new technologies. Annual progress report on NPA implementation to be submitted to the NIMCC.

3.1.3 Commissions and Institutions

Federal and Regional Police
Roles and responsibilities: Ensure non-discrimination in protecting the security and rights of children, youth and adults with disabilities. Ensure police officers have training in disability.

Ethiopian Institution of the Ombudsman
Roles and responsibilities: Promote and protect the rights of citizens with disabilities by investigating complaints of discrimination and government maladministration reported by individuals and groups of persons with disabilities.

3.1.4 Regional Committee
3.1.4.1 Regional Implementation and Monitoring Coordinating Committees
Regional coordinating committee, composed of representatives of the Regional Executive and concerned Regional Bureaus, relevant NGOs working on disability, DPOs, religious institutions will have the same responsibility as the national one in ensuring adequate planning and coordination of actions required for implementation of the NPA at Regional level. The respective Regional Bureaus of Labour and Social Affairs will provide the Secretariat for the Regional Coordinating committee.

3.1.4.2 Technical Committee
The Regional Coordinating Committees will establish NPA Technical Committees composed of representatives of key Regional Bureaus, NGOs and DPOs active in the Region and of appointed individual technical specialists to undertake planning and coordination work related to the NPA. The NPA Technical Committees report to their respective Coordinating Committee.

3.1.5 Regional Bureaus
Roles and responsibilities: coordinate the implementation of relevant NPA activities, support regional organizations of persons with disabilities, provide policy guidance, mobilize and allocate local resources in support of NPA activities at Regional and Woreda levels, gather disability data and information, identify and recognize examples of good practices, attend regular and extra ordinary meetings of the NIMCC. Ensure adequate annual financial support for the Regional coordinating committee.

3.1.6 Local authorities (zonal, woreda levels)
Roles and responsibilities: Realize that the implementing the NPA is part of the development agenda. Identify people with disabilities, mobilize local resources, develop and implement policies and promote the delivery of social services, implement NPA activities at local level. Ensure the participation of persons with disabilities and their families in the Productive Safety Net and other Program. Promote and facilitate income generation activities by individuals and groups of persons with disabilities. Provide material support to local associations of persons with disabilities and involve them in the implementation of NPA activities.

3.1.7 Other Stakeholders
3.1.7.1 DPOs, Networks of DPOs
Roles and responsibilities: being the first interested party on all disability matters, provide guidance to Federal Ministries and Regional Governments and Bureaus on disability policy and
4. Budgeting for the National Plan of Action of Persons with Disability 2012-2021

Implementation of the NPA involves coordinated, concurrent actions by multiple Ministries and all Regional Governments. Thus it is not possible to prepare one comprehensive federal implementation budget for the ten year implementation period. Each responsible federal ministry and each regional government of the country will include funds for their required NPA actions in their respective annual budgets. These governmental bodies will reflect in their budgets the specific roles and activities they will play and implement for mainstreaming and implementing the NPA. The Federal Ministry of Labor and Social Affairs will request an annual budget for the NIMCC and its NPA Technical Committee. Each Regional Government will take the responsibility of providing the required budget for its Regional coordinating committee and its respective NPA Technical Committee.

National DPOs need to be reinforced and their capacity increased to advice on support the implementation of the NPA at both federal and regional levels. The budget for DPOs capacity building will be planned and provided by the Ministry of Labor and Social Affairs. Government will be responsible for providing social security support for persons with disabilities who are not able to earn their own means of living per social protection policy directions.

NGOs will be encouraged to mainstream disability and persons with disabilities in their ongoing program activities, and will include such costs in their annual budgets. Disability services-providing organizations will plan and seek funds in their annual budgets to increase the coverage of their services to include increased numbers of rural towns and communities during the period of the NPA.

The NPA therefore does not include a total annual, or 10-year, cost figure or implementation budget. It is for each responsible Federal Ministry and Regional Government to determine a budget and provide funds for the implementation of their respective annual NPA-related implementation activities.
REFERENCE DOCUMENTS

2. UN Standard Rules for the Equalization of Opportunities for Persons with Disabilities (1993)
3. UN World Programme of Action concerning Persons with Disabilities
4. UN Millennium Development Goals (MDGs) (2000)
5. UN General Assembly Resolution No. 59-54731 on “Inclusion of persons with disabilities in realizing the MDGs” Oct, 2009
8. ILO Convention No. 159 on the Vocational Rehabilitation and Employment of Persons with Disabilities (1983)
11. World Bank Global Survey on HIV/AIDS and Disability 2004
15. MOLSA National Programme of Action for Rehabilitation of Persons with Disabilities 1999
27. Constitution of the Federal Democratic Republic of Ethiopia
28. Right to Employment of Persons with Disability Proclamation (No. 568/2008)
29. Ethiopian Building Proclamation (No. 624/2009)

National Plans of Action of other countries referred:
4. New Zealand Disability Strategy (2001)
6. Trinidad and Tobago Policy on Persons with Disabilities (1994)
At the top of page 67 please include a note Human Rights

Promote and protect the rights of children with disabilities

Commission roles and responsibilities

When dealing with individuals with hearing impairments

Institute this clause involving persons with different types of
disabilities (such as the availability of sign language interpreters)

Institute please include

At the bottom of page 69 title 313 Commission and

ERATUM