



## **ANNEX: COUNTRY PROFILE ETHIOPIA**

**Gap Analysis on Disability Inclusive  
Humanitarian Action in Eastern Africa**

## **Ethiopia's Disability Rights Commitment and Disability Inclusive DRR Strategies**

In 2010, Ethiopia ratified the UN CRPD and submitted its initial report to the CRPD Committee in 2013. The CRPD Committee noted with appreciation that Ethiopia adopted the National Action Plan for Persons with Disabilities 2012-2021, which aims to promote and protect the rights of persons with disabilities and improve their access to services and opportunities. However, the Committee also recommended that Ethiopia adopt a risk and emergency strategy within a clear timeline and ensure that disability issues are integrated into the strategy, in compliance with the Sendai Framework for Disaster Risk Reduction 2015-2030. It is imperative to take action to ensure that the vulnerabilities of persons with disabilities are given due consideration in emergency situations, and that they are not left behind, including refugees who had not been included in the safety net.

## **Ethiopia's Climate Change-Induced Humanitarian Crisis**

According to the INFORM Risk Index latest report, Ethiopia ranks 12th in the world with a very high level of risk, with a rank of 17 regarding hazard and exposure, of which 4.4 is due to natural reasons on a scale of 1 to 10. In terms of vulnerability, it ranks 13th, with a score of 5.8 out of 10 for other vulnerable groups, and 26th in terms of lacking coping capacity<sup>1</sup>.

The country has experienced severe droughts in the past, including in 2015-2016 and 2017, affecting the south and southeast regions. These events, along with the ongoing drought in 2023, have exacerbated the humanitarian crisis, with many people losing their livelihoods and becoming displaced as a result of climate change-induced impacts. The situation is getting more critical with each failed rainy season and has severely impacted pastoralist and agro-pastoralist communities, who make up the majority of Ethiopia's population and depend on agriculture for their livelihoods.

In recent months, Oromia NGOs Humanitarian Alliance has called for urgent attention to the humanitarian crisis in Oromia, where more than 14 million people are in need of assistance due to drought and conflicts. Of these, 3.4 million are internally displaced. The situation is particularly dire in the southern part of the region, where five consecutive failed rainy seasons have led to a loss of at least 46% of livestock and significant malnutrition among vulnerable populations, including persons with disabilities. This local alliance, which is comprised of local organisations, has appealed for increased humanitarian funding to address the vulnerabilities of those impacted by the crisis, including shelter, sanitation services, food, education, and health services.

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<sup>1</sup> <https://drmkc.jrc.ec.europa.eu/inform-index/INFORM-Risk/Country-Risk-Profile>

According to the latest situation report, the ongoing drought in Oromia also has worsened the cholera outbreak, and heavy rainfall in some areas has accelerated the disease's rapid spread. In Borena, for instance, 20 people were affected and one died, according to the Ethiopian Public Health Institute. As of 23 March 2023, more than 3.3 million people remain at high risk of cholera in the 22 affected woredas, with limited Oral Cholera Vaccination doses and inadequate coverage of WASH services. Furthermore, in IDP camps, heavy rainfall and waterlogging have increased the risk of disease outbreaks due to limited access to safe water and sanitation facilities<sup>2</sup>.

### **Evidence and Data on persons with disabilities**

There is currently limited evidence that both qualitative and quantitative data about persons with disabilities are systematically collected using the WGQs. Instead, the national census, as a secondary data source, which identifies 17.6% of persons with disabilities is applied. The 2023 Ethiopia HRP aims to target 20.1 million people across the country, with 17.6% of those being persons with disabilities, requiring a total of US\$3.99 billion. Looking more into the NRP 2023, it can be observed that the protection, food security and WASH clusters have identified that 16% to 18% of persons in need have disabilities.

This percentage indicates that there is consistency in the identification of disability prevalence across different clusters with a global estimate of 16 percent of the world's population (WHO)<sup>3</sup>.

	PEOPLE IN NEED	TARGETED PEOPLE	PERSONS WITH DISABILITIES
PROTECTION	10.4 M	4.9 M	17%
FOOD SECURITY	20.1 M	20.1 M	18%
WASH	20.5 M	11.9 M	18%

(Humanitarian Response Plan, Ethiopia, 2023)

The MIRA forms from 2021 collect observation notes related to humanitarian access and security, protection, and access and availability of services and goods for women, children, persons with disabilities, older persons, etc. However, it is important to consider that responses to the MIRA questions may vary immensely depending on the enumerators' knowledge and experience with disability issues, such as accessibility barriers.

<sup>2</sup><https://reliefweb.int/attachments/b843d232-29c8-4c4c-b3ff-6a9c7b9df41c/Situation%20Report%20-%20%20Ethiopia%20%20-%203%20Apr%202023.pdf>

<sup>3</sup> WHO (2023) [https://www.who.int/health-topics/disability#tab=tab\\_1](https://www.who.int/health-topics/disability#tab=tab_1)

The UNHCR in Ethiopia has implemented a community-based protection program that is responsive to urban refugees. According to the staff interviewed, where indicators specify data disaggregation by sex and age, data is collected annually through participatory assessments, focus group discussions, and other means, which in itself does not exclude persons with disabilities.

Having said that, data collection has been challenging for organizations working in the region, and different approaches have been used, leading to poor data quality. The interviews with some of the staff suggests that the practical application of the Washington Group set(s) of various Questions could be reinforced. It was mentioned that a barriers and enablers assessment has been rolled out in Tigray region, but not been addressed as a capacity development area for clusters staff, even though HRP 2023 identifies several indicators and need for disability disaggregation. Similarly, the analysis and use of disaggregated data still remains invisible. The organizations such as HI and LFTW mentioned that more awareness raising and technical guidelines would be useful in advancing the topic.

It is worth adding that IOM, co-leads of the Global Camp Coordination and Camp Management Cluster, developed a Disability Inclusion Field Companion with UNICEF & UNHCR. It includes a structured questionnaire and a barriers/enablers assessment. The toolset was launched last year for field testing in Ethiopia, but may not be applicable in all situations due to the need for a large sample size.

### **Planning & Coordination related to disability inclusion**

This study analysed several questions related to disability inclusion in humanitarian action. It focused on two main areas, such as (1) the extent to which disability inclusion is anchored in existing HRPs, and (2) existing working groups or coordination mechanisms that could provide support and knowledge to all staff members regarding disability inclusion in HRP 2023.

In the HRP for 2023, disability is recognized as a cross-cutting issue in the protection, food security, and WASH clusters. Other clusters also incorporate disability considerations in their response plans. However, currently, there is no "Age & Disability Working Group" or "Age & Disability Task Force" in place, despite their growing implementation in other humanitarian contexts.

During an interview with the Protection Cluster staff, it was noted that there is a need for better promotion and implementation of mainstreaming Disability Inclusion. However, in order to effectively address disability inclusion in this response, concrete measures are needed such as updating assessments, core activities, and monitoring forms by incorporating disability inclusion lenses. During discussions, it was suggested that ongoing hiring an expert in Age and Disability to work with the National Cluster will ensure the inclusion of persons with disabilities in humanitarian response. The current situation lacks a space for experts and champions within the national cluster, and there is a need to partner with disability-focused organizations to facilitate participatory and inclusive activities.

Moreover, the Protection from Sexual Exploitation and Abuse and AAP in humanitarian response<sup>4</sup> prioritizes disability inclusion as an important consideration. Women, children, and persons with disabilities are identified as those most at risk of sexual exploitation and abuse by humanitarian actors. Protection cluster objective '2' aims to mitigate and address protection risks for conflict and disaster-affected individuals, including persons with disabilities, through specialized life-sustaining protection services. The number of girls and boys who receive age- and gender-sensitive case management services, disaggregated by age, sex, disability, and population group, is the only identified set of indicators related to service activities.

Regarding the Food cluster, the inclusion of persons with disabilities has been identified as one of the vulnerable groups in the prioritization and distribution of cash/food to vulnerable households, based on evidence from food security assessments. The HRP 2023 indicates its intent to encourage the participation and consultation of this group through targeting and food distribution committees, as well as selecting distribution sites that are close to communities. This approach demonstrates a commitment to disability inclusion in food security humanitarian response.

The WASH cluster has included persons with disabilities to some extent in their response plan. The WASH cluster's current approach of gathering accessibility information from the DTM is a good start, but there is insufficient data to fully demonstrate that the response is accessible and inclusive to all persons with disabilities in all aspects of the provision of WASH services.

OCHA has expressed their interest in strengthen their inclusive approaches practically and become more prominent in this area by partnering with specialized organizations. Some UN agencies, like WFP, appointed Disability Inclusion Focal Points via UN-system wide Disability Inclusion Strategy-driven initiatives, presenting a long-term opportunity for systematic changes towards greater disability inclusion. Knowledge sharing is crucial to ensure Disability Inclusion is not the sole responsibility of the person or organization in charge.

The Ethiopia HINGO Forum, with its 58 international humanitarian agencies overseen by the HINGO Steering Committee, presents a significant opportunity for strengthening disability inclusion in humanitarian action. The committee's role in facilitating principled humanitarian response, including coordination, information sharing, advocacy, and policy/position paper production, can be leveraged to promote disability inclusion. However, to ensure that disability inclusion is effectively mainstreamed within the HINGO Forum, concentrated efforts must be made to establish a disability inclusion task force that can raise awareness and promote inclusive approaches among all member NGOs.

During the interview process with the INGO staff, they pointed out that while there are cluster-wide initiatives in place, there is a gap in terms of clear understanding of the disability inclusion agenda and how to prioritize it. However, the lack of a task force or working group to exchange experiences and elaborate on disability inclusion may lead to missed opportunities for inclusive humanitarian action and limited progress across all clusters.

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<sup>4</sup> <https://reliefweb.int/report/ethiopia/ethiopia-2020-protection-sexual-exploitation-and-abuse-psea-strategy>

## **Participation of Persons with Disabilities and their representative organisations**

Through interviews with representatives from the FEAPD, it was found they have established partnerships with various international organizations to promote disability inclusion in ongoing humanitarian programs. For example, the WFP works with them to mobilize persons with disabilities in rural areas and raise disability inclusion issues in their own way. Additionally, ZOA focuses on advocacy for disability inclusion, and CBM supports the internal capacity development of OPDs. Moreover, they are members of the WASH Cluster and human rights advocacy groups led by the Ministry of Irrigation of Governments, advocating for better access to facilities such as toilets and infrastructure for children in schools.

During interviews with some cluster staff, there is an understanding of the importance of including OPDs in humanitarian action. OPDs are seen as crucial in passing messages and breaking-down negative attitudes and stereotypes. They have identified priority gap areas such as access to registration, information, and communication. A list of OPDs is available, but it was noted that local OPDs often lack the technical capacities to work with and provide specific services that are not necessarily provided by OPDs themselves. In some cases, specialized centers such as those providing professional Sign Language Interpretation are needed to provide these services. This highlights the need for greater technical support and capacity building for both OPDs and their partners to ensure that disability inclusion is effectively mainstreamed in humanitarian response efforts.

## **Disability Inclusive Humanitarian Programming**

Through discussions with international and national humanitarian actors, several findings emerged regarding the inclusion of persons with disabilities in ongoing programming of humanitarian responses in Ethiopia. Numerous organizations are providing assistance, including Plan International, Zoa International, Catholic Relief Services, and World Vision with a more oriented disability inclusive approach to interventions. It suggests that while some progress has been made, there are still larger issues that need to be addressed in terms of addressing disability inclusion across various organizations involved in the response efforts in a systematic manner.

For instance, LFTW conducted two assessments at IDP centers and found that no organizations are specifically working on disability inclusion. While many mainstream organizations include disability issues in their work, there is rarely a CBR approach included. For example, UN agencies continuously make efforts to promote disability inclusion through their leadership in policy development, capacity building, advocacy, and the implementation of inclusive programs. However, support to persons with long term sensory and psychosocial impairments are the least focused areas of disability-targeted activities in ongoing humanitarian programs, with Leprosy International Ethiopia reporting significant barriers to adjusting accessing the environment, communication strategies, and information to this particular group of persons with disabilities.

Gayo Pastoral Development Initiative (GPDI) has identified significant gaps in relief assistance, particularly for persons with disabilities who require assistive devices, but registration points and services often lack knowledge about disability inclusion. It is also reported that local health and rehabilitation centers are linked with persons with disabilities; however, they are often far from the Borena zone, making it difficult for people to access these services.

On a positive note, HI Ethiopia is working towards disability inclusion through its Education Cannot Wait program, which targets 10-15% of persons with disabilities. HI works closely with OPDs, providing home-to-home visits, referrals, psychotherapy, and for WASH initiatives, HI employs an accessibility engineer and follows international standards to ensure that water collection points and toilets are accessible, when required.

Barriers identified in interviews with international and national actors include the lack of budgetary allocations and funding for disability inclusion at the national level, including the Emergency Pool Fund, and little support provided in terms of accessibility. On the other hand, several enablers were also identified, including increased training and capacity building for humanitarian actors, increased coordination among humanitarian actors and disability organizations, and increased accountability measures to ensure that persons with disabilities are not left behind in humanitarian responses.

## Overview of Findings

Area	Findings/Good examples	Identified Gaps	Potential Actions
Protection	<ul style="list-style-type: none"> <li>- The Protection Cluster aims to mitigate and address protection risks, including for persons with disabilities, through specialized life-sustaining protection services.</li> <li>- Protection from Sexual Exploitation and Abuse and AAP prioritizes disability inclusion as an important consideration, with specific indicators related to service activities.</li> </ul>	<ul style="list-style-type: none"> <li>- Limited data collection on persons with disabilities, resulting in a lack of evidence and understanding of their protection risks and vulnerabilities.</li> <li>- Inconsistent implementation of disability inclusion measures, potentially leading to variations in addressing stigma, denial of services, and gender-based violence.</li> </ul>	<ul style="list-style-type: none"> <li>- Strengthen data collection and analysis mechanisms to gather information on persons with disabilities, their protection risks, and vulnerabilities.</li> <li>- Strengthen coordination and collaboration among protection actors to ensure a comprehensive and inclusive response for persons with disabilities.</li> <li>- Develop specific protocols and guidelines for addressing stigma, denial of services, and gender-based violence targeting persons with disabilities.</li> <li>- Improve the implementation and monitoring of disability inclusion measures across protection activities.</li> <li>- Provide training and capacity-building initiatives for protection actors to enhance their understanding of disability inclusion and effectively address the vulnerabilities and risks faced by persons with disabilities.</li> <li>- Ensure the meaningful participation of persons with disabilities in decision-making processes related to protection and incorporate their perspectives into protection strategies.</li> </ul>
Food Security	<ul style="list-style-type: none"> <li>- Food cluster identifies persons with disabilities as one of the</li> </ul>	<ul style="list-style-type: none"> <li>- No evidence about implementation measures.</li> </ul>	



Area	Findings/Good examples	Identified Gaps	Potential Actions
	<p>vulnerable groups in the prioritization and distribution of cash/food to vulnerable households.</p> <ul style="list-style-type: none"> <li>- The inclusion of persons with disabilities has been identified as a priority in the distribution of cash/food to vulnerable households based on food security assessments.</li> <li>- Food cluster identifies persons with disabilities as one of the vulnerable groups in the prioritization and distribution of cash/food to households.</li> </ul>	<ul style="list-style-type: none"> <li>- Limited consideration of barriers faced by persons with disabilities in accessing food assistance programs, such as physical accessibility and awareness about dietary preferences.</li> </ul>	<ul style="list-style-type: none"> <li>- Develop inclusive mechanisms for the active participation of persons with disabilities in targeting and food distribution committees.</li> <li>- Provide accessible and user-friendly information on food security programs and initiatives to persons with disabilities.</li> <li>- Strengthen the capacity of food security actors in disability mainstreaming and engagement of persons with disabilities.</li> </ul>
WASH	<ul style="list-style-type: none"> <li>- WASH cluster recognized as a cross-cutting issue, but no working group or task force focusing on disability inclusion are in place.</li> <li>- WASH cluster's current approach of gathering accessibility information from the DTM is a good starting point.</li> </ul>	<ul style="list-style-type: none"> <li>- Inadequate mechanisms to ensure meaningful participation of persons with disabilities in the design and implementation of food security interventions.</li> </ul>	<ul style="list-style-type: none"> <li>- Explore additional mechanisms to collect comprehensive data on barriers faced by persons with disabilities, including addressing accessibility issues</li> </ul>