



## SOMALI DISABILITY EMPOWERMENT NETWORK (SODEN)

# PEOPLE WITH DISABILITY LIVELIHOOD ASSESSMENT SURVEY REPORT IN SOMALIA 2019.

### **Contact Us:**

Via Tanzania, HamarJajab, Mogadishu-Somalia

Email: [info@somalidisability.org](mailto:info@somalidisability.org)

Twitter: @SodenOrg

Web: [www.somalidisability.org](http://www.somalidisability.org)

# TABLE OF CONTENTS

<b>1.0 Introduction</b>	
1.1 Study Rationale.....	1
1.2 Structure of the Report.....	1
1.3 Methodology.....	1
<b>2.0 Findings.....</b>	<b>2</b>
2.1 Respondent Characteristics.....	2
2.2 Access to basic social services.....	3
2.2.1 Education.....	3
2.2.2 Health.....	4
2.2.3 Water.....	4
2.2.4 Food.....	6
2.2.5 Access to shelter.....	6
2.3 Effects of disability on the development potential of PWDs.....	7
2.3.1 Occupation.....	7
2.3.2 Degree of independence.....	8
2.4.1 Prevalence of human rights violations against PWDs.....	9
2.4.2 Assistance needed by PWDs.....	10
<b>3.0 Conclusions and Recommendations.....</b>	<b>11</b>
3.1 Conclusions.....	11
3.2 Recommendations.....	11

## List of Tables and Figures

Table 2.1: Respondent Characteristics.....	2
Fig 2.2: Respondents with easy access to selected services.....	3
Fig 2.3: Education levels of PWDs.....	3
Fig 2.4: Access to water by PWDs.....	5
Fig 2.5: Access to food by PWDs.....	6
Fig 2.6: Access to shelter by .....	6
Fig 2.7: Respondents' occupation.....	7
Fig 2.9: Disability form and occupation.....	8
Fig 2.10: Degree of independence of PWDs.....	9
Fig Prevalence of injustice against PWDs.....	9
Fig 2.12: Expressed needs by PWDs.....	10
Fig 2.13: Assistance ever received by PWDs.....	10

## **1.0 Introduction**

Disability is NOT inability. However, in Somali society numerous attitudinal, environmental, and institutional barriers faced by People with Disabilities (PWDs) continue to make them highly vulnerable. As such, PWDs face great risks that negatively impact on their livelihoods and opportunities for progress. In Somali society, mainstreaming of disability in development planning is still evolving following spirited advocacy from civil society groups and humanitarian agencies. However, much is still desired. The role of research in both evidence-based advocacy and planning remains an integral component for the realization of inclusive development in which PWDs are accorded equitable development options.

### **1.1 Study Rationale**

Insufficiency of data on the socio-economic plight of PWDs constrains the mainstreaming of disability rights in development planning. Prior to this study, data on the livelihood conditions of PWDs was piecemeal. This study was conducted October November and December 2019 with the primary aim of exploring the socio-economic living conditions of PWDs in selected regions of Somalia. The study was guided by three objectives, namely:

- i) To analyse the level of access to basic services by PWDs in the selected regions of Somalia;
- ii) Explore the effects of various forms of disability on the development potential of PWDs.
- iii) To assess human rights violations faced by PWDs in the selected regions of Somalia

The findings are intended to guide the design of an evidence-based advocacy for

inclusive development with active involvement of PWDs.

### **1.2 Structure of the Report**

Structured in three sections, this report presents the socio-economic and demographic characteristics of the respondents, livelihood status and strategies of PWDs, access to social services as well as key emerging issues that also serve as the conclusions. The findings presented have the potential to inform development planning at various levels of socio-economic management of the Somali society.

### **1.3 Methodology**

This was largely a quantitative study apart from the few open-ended questions that were used to generate qualitative data. A total of sixty-six PWDs from Boorame Somaliland to Kismaayo Jubaland were interviewed using a semi-structured questionnaire (Annex 1). Data was collected using mobile data collection gadgets powered by google forms. Data was then downloaded in an excel spread sheet and later exported to SPSS v16 that was used for the analysis. Data was analysed at a descriptive level using frequency and cross tabulation analysis to establish key associations among the study variables.

The respondents were identified through a network of SODEN's partner organisations and through this arrangement, the research team was able to locate them at their homes for interviews. In some cases, snow ball method was used. All the identified respondents accepted to participate in the study making the response rate 100%.

## 2.0 Findings

The findings are organised along the study objectives stated in the introductory section. However, the first subsection highlights the socio-economic and demographic characteristics of the study.

### 2.1 Respondent Characteristics.

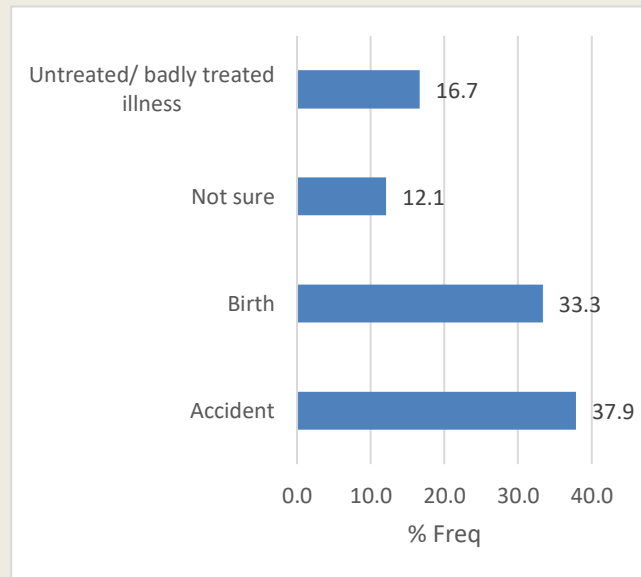
Gender, educational level, age, marital status and the settlement type were the key characteristics analysed. This is because of their assumed influence on the livelihood status and strategies of the respondents. The findings are summarised in table 2.1 below.

**Table 2.1: Respondent Characteristics.**

Characteristic	Definition	Frequency	%age
<b>Gender</b>	Male	39	59.1
	Female	27	40.9
	<b>Total</b>	<b>66</b>	<b>100</b>
<b>Age</b>	Below 18	6	9.1
	18-35	24	36.4
	36-45	24	36.4
	46-65	9	13.6
	66+	3	4.5
	<b>Total</b>	<b>66</b>	<b>100</b>
<b>Education</b>	None	26	39.4
	Primary	26	39.4
	Secondary	8	12.1
	Post graduate	1	1.5
	Degree	5	7.6
<b>Total</b>	<b>66</b>	<b>100</b>	
<b>Marital status</b>	Currently Married	29	
	Never married	22	33.3
	Divorced	9	13.6
	Separated	2	3.0
	Widowed	4	6.1
<b>Total</b>	<b>66</b>	<b>100</b>	
<b>Settlement type</b>	Pastoral	34	51.5
	Non-pastoral	32	48.5
	<b>Total</b>	<b>66</b>	<b>100</b>

Source: Field data (2019)

The above respondent characteristics are cross tabulated with several other variables in order to better understand how they have been affected by or have affect disability. Descriptively, strong association is noticeable with education, gender and marital status of the respondents.



Regarding gender, it was noted that majority of PWDs in this study were males. This is not because the study was inclined to male respondents, but because it appears that males are more likely to become disabled than females. Statistics show that 37.9% of the disability cases were caused by accidents while 33.3% and 16.7% respectively were caused by nature and illnesses respectively. 12.1% of the respondents were not sure of the cause of their disability as shown in figure 2.1 above.

### Recommendations

#### To the United Nations:

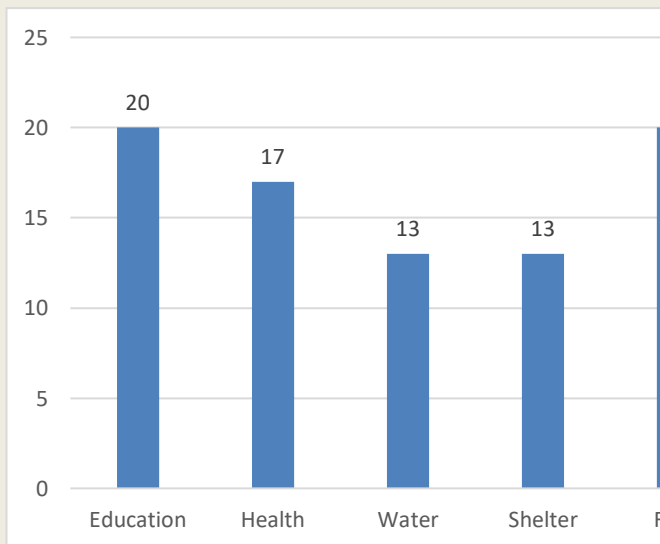
1. Conduct research into the demographic breakdown of PWDs in a disability so that interventions and response services may be better targeted to those they serve.

## 2.2 Access to basic social services

Adequate access to basic services such as education, health and others are key drivers of development. However, accessing these and other services is not easy for people with disabilities without deliberately designed enabling environment. This study is interested in understanding the levels of access to selected social services by PWDs in Somalia

A list of services that included: education, health, water, shelter, food and legal services was compiled and each respondent was asked to mention which of the listed services he/she was accessing with ease. Results indicated that less than 50% of the interviewed respondents were accessing these services easily as shown in figure 2.1 below.

**Fig 2.2: Respondents with easy access to selected services**



Source: Field data (2019)

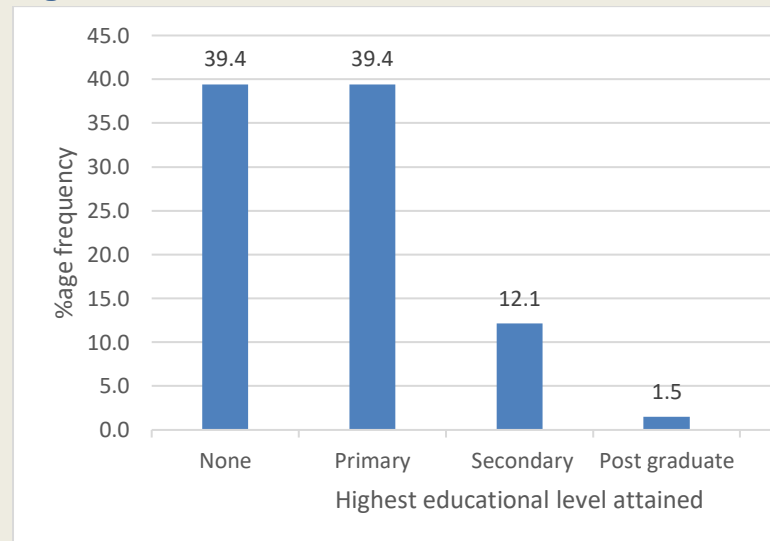
Although 20- 30.3% indicated easy access to education and food, it is apparent that access to most services by people with disability remains a significant challenge in Somalia. During in-depth interviews with the respondents, it was revealed that although some buildings where public offices are

located have started installing ramps, many others have not and this constrains people with disabilities to access such buildings.

### 2.2.1 Education

There are some schools offering special needs education in Somalia. As such, the majority of PWDs are not able to access specialised education. PWDs who are unable to access these schools for whatever reason may miss out on education altogether. This perhaps explains the low levels of education attained by PWDs as indicated in table 2.1 above and figure 2.2 below.

**Fig 2.3: Education levels of PWDs**



Source: Field data (2019)

About 78% of the respondents had not received education beyond primary school level. This indicates that access to education is a great challenge for PWDs in Somalia. To further substantiate this, the respondents were asked to mention any of the listed services they had ever tried to access but failed and the reasons for their failure. Of the 36 respondents who indicated that they had ever wanted to access certain services but failed, 27.3% mentioned education. Lack of ramps on school buildings, discrimination at home

and school, lack of enabling equipment such as wheelchairs and crutches as well as lack of morale were the frequently mentioned factors that inhibited access to education services by PWDs.

## **Recommendations**

### To the government

- Select 2- 3 pilot primary and secondary schools in urban centres across Somalia and support these to be 'model' schools for PWDs, including by installing ramps and other accessibility aids, hiring specialised teachers and conducting awareness raising and sensitisation with non-PWD students.

### To civil society

- Conduct an assessment of PWD services at schools across Somalia;
- Provide services needed by PWDs including sensitisation sessions, specialised teachers and accessibility aids at schools in areas where large gaps and lack of services remain, on a rotational basis.

### To the UN and the international community

- Increase funding for making schools and places of education accessible to PWDs.

### To families of PWDs

- PWDs have the right to an education. Do not fail to enrol them in school due to their disability. If they have special needs, discuss these needs with the school and teachers.

## **2.2.2 Health**

Access to quality and timely health services is a fundamental human right and a driver of development. In accordance with the CPRDP, PWDs are equally entitled to quality healthcare for themselves and

members of their immediate families. However, as a result of their vulnerability most often their rights are violated with even fewer options for redress.

Like in many African Countries, the health sector in Somalia is still dominated by the private sector where access is largely influenced one's ability to pay. With the high rate of economic disempowerment among the PWDs, accessing quality health services remains a great nightmare in Somalia.

Descriptive statistics show that easy access to health services was reported by only 17 out of 66 PWDs who participated in the study. Four respondents still remembered particular instances when they wanted healthcare services but could not obtain them because of their inability to pay.

The majority of the PWDs who participated in this study indicated that they were at the time of the study staying with their caregivers. Many reported experiencing discriminatory practices which deprived them of equal opportunities in accessing healthcare services. Through key informant interviews, it was revealed that many PWDs are forced to come to urban centres because of the perceived better services.

## **Recommendations**

### To the government

- Subsidise healthcare costs for poor and indigent patients and make PWDs priority beneficiaries of this service.

### To healthcare providers

- NGO and civil society healthcare providers should expand health service programmes to include a focus on PWDs;
- Private healthcare providers should ensure they are not turning away



PWDs in urgent need of medical assistance, and should form partnerships with civil society organisations to increase patient coverage and prevent PWDs from falling through the cracks of the system.

Civil society

- Subsidise and increase access to healthcare for PWDs where possible;
- Conduct sensitisation and awareness raising on the needs of PWDs, with a focus on PWDs with mental disabilities, with healthcare workers.

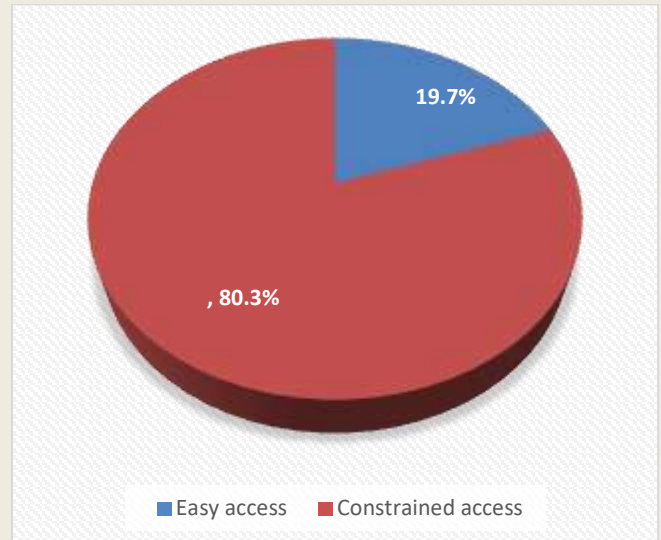
To the UN and the international community

- Increase funding for making healthcare services accessible to PWDs.

**2.2.3 Water**

Many parts of Somalia experience semi-arid conditions. As such access to water is quite a challenge to all but mostly to those who are already disadvantaged by other factors such as disability. Descriptive statistics shows that only 13 out of 66 had easy access to water while the remaining 53 or 80.3% were grappling with water accessibility challenges as shown in figure 2.4 below.

**Fig 2.4: Access to water by PWDs**



Source: Field data (2019)

Long distances to the water points and lack of enabling equipment were the key leading factors that fuel constrained access to water by PWDs in Somalia. Analysis further indicate that half of the PWDs that participated in the study were involved in collecting water in their respective households. In the light of reported distances to the water points coupled with the lack of enabling equipment, the life of PWDs is constrained by domestic workload.

**Recommendations**

To the humanitarian agencies

- Make humanitarian programmes focused on the right to water responsive to the specific needs of PWDs.

To the government

- Include access to water including for PWDs in all development planning.

Civil society

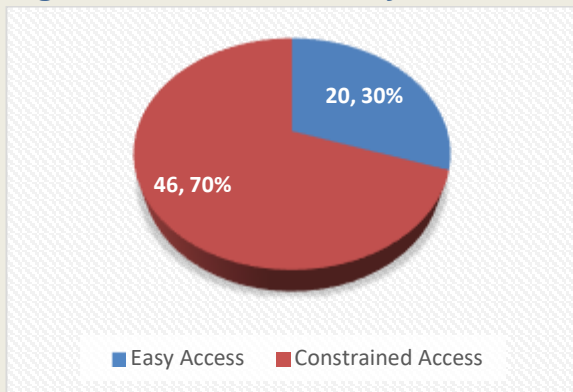
- Prioritise the right to water in rights-based advocacy and include a focus on PWDs.

### 2.2.4 Food

Agriculture which is the main source of food for the rural population is still heavily labour intensive. This is to the disadvantage of PWDs who are already impaired by their disability. This situation increases the degree of dependence of PWDs on other people consequently making access to food rather hard.

Descriptive statistics indicated that 46 out of 66 PWDs reported difficulty in accessing food as shown in figure 2.5 below.

**Fig 2.5: Access to food by PWDs**



The constrained access to food by PWDs is facilitated and further facilitate their economic disempowerment and compounded cycle of vulnerability.

#### Recommendations

##### To the humanitarian agencies

- Make humanitarian programmes focused on food security responsive to the specific needs of PWDs.

##### To the government

- Include access to food for PWDs in all development planning.

##### Civil society

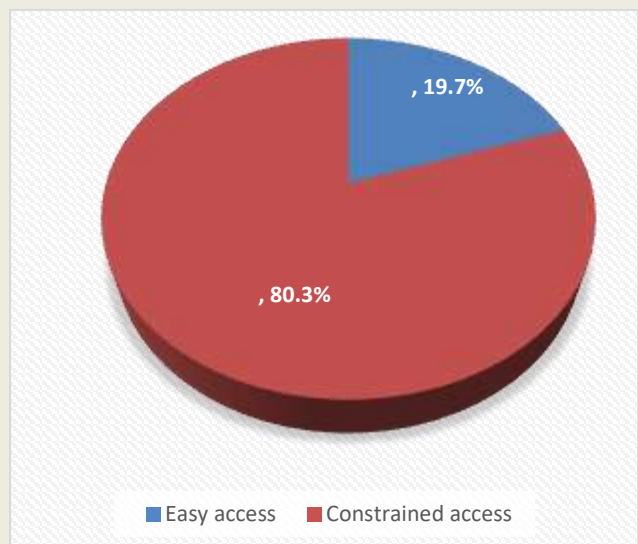
- Prioritise the right to food in rights-based advocacy and include a focus on PWDs.

### 2.2.5 Access to shelter

Access to a decent shelter is a fundamental human right. Shelter in this study was used to refer to a house and its accessories that accord one a dignified living. Like food, access to shelter was notably low among PWDs with only 13 or 19.7% of 66 respondents reporting easy access as shown in figure 2.6 below.

Through field observation, it was noted that in some homes, PWDs were allocated their own rooms whose conditions were appealing. Some did not have good ventilation while others were in dire need of renovation.

**Fig 2.6: Access to shelter by PWDs**





## Recommendations

### To the humanitarian agencies

- Prioritise PWDs in Shelter programming.

### Civil society

- Conduct awareness raising and sensitisation on the content of the right to shelter and how it must be applied in the case of PWDs, for communities and family members of PWDs.

### Families of PWDs

- Ensure that any PWD living with you is living in adequate conditions, including adequate ventilation, light, freedom of movement and the right to dignity.

## 2.3 Effects of disability on the development potential of PWDs

Lack of access to requisite equipment and facilities may turn disability into inability. It is noteworthy that PWDs also have great potential for personal development as well as significant contribution to community and national development if this potential is well harnessed.

Of the PWDs interviewed, 84.8% said that their disabilities have been detrimental to their personal development. Education and income generating opportunities have been the most affected areas. The analysis of the educational levels of the PWDs that participated in this study has been presented in 2.2.1 above. In this sub section emphasis is put on the occupations of PWDs and their degree of socio-economic independence.

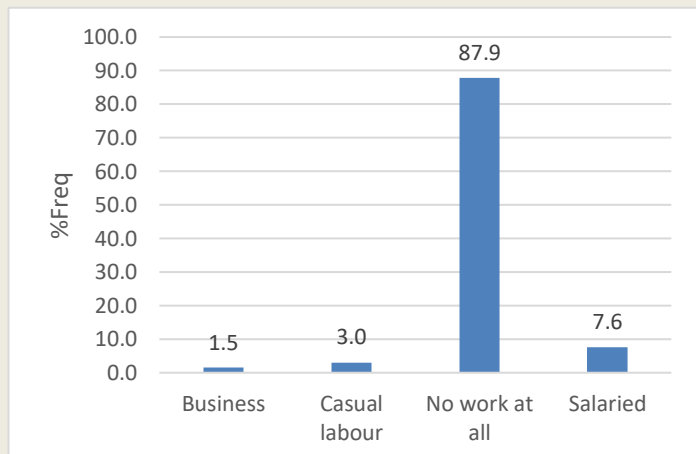
### 2.3.1 Occupation

Occupation is a major source of economic independence and is also a key driver of development. Despite the generally high unemployment rate (67%) in Somalia, the

PWDs face compounded challenges as a result of their disability.

The study established that whereas some PWDs were in position to engage in gainful occupations, the majority of 87.9% were at the time of this study having no occupation at all. With only 8 working, the plight of PWDs is evident as this situation implies that those not working have to depend on someone else for survival.

Analysis of those who were working shows 1.5% was in business while 2.0% and 7.6% were casual labourers and salaried respectively as shown in figure 2.7 below.



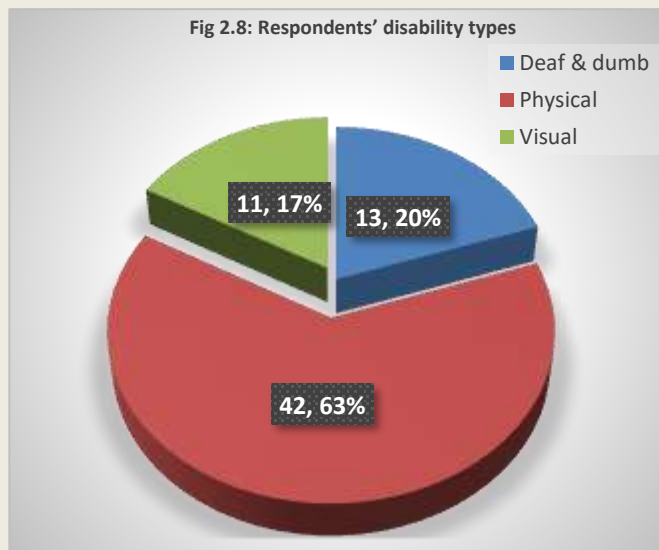
**Fig 2.7: Respondents' occupation.**

During key informant interviews with agencies that work with PWDs, it was revealed that the magnitude of effect is influenced by the type of disability. Descriptive statistics show that the majority had physical impairments.

At least all disability forms had someone who was working. This is proof enough that disabled persons can gainfully engage in productive labour. Therefore, their inability to get work is not because of their inability to perform but rather the negative mind-set against PWDs that still is pervasive across Somali society.

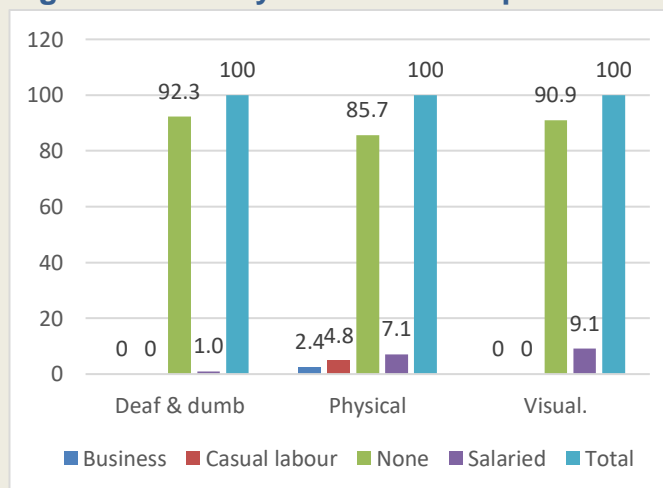
For example, of the 5 PWDs who were salaried, 3 were physically impaired while the other two had were deaf and dumb as well as having visual impairment.

**Fig 2.8: Respondents' disability types**



The one who were casual labouring being physically impaired. The majority in all disability categories were not working as shown in fig 2.9 below.

**Fig 2.9: Disability form and occupation.**



Because of the limited occupation opportunities for PWDs, the survey results indicate that the majority of them are

depending on other people either their relatives or guardians for livelihood as further analysed in sub section 2.3.2 below.

### Recommendations

#### To the humanitarian agencies

- Prioritise PWDs in Livelihoods programming.

#### Civil society

- Conduct awareness raising and sensitisation on the content of the right to work and how it must be applied in the case of PWDs, for communities and family members of PWDs.

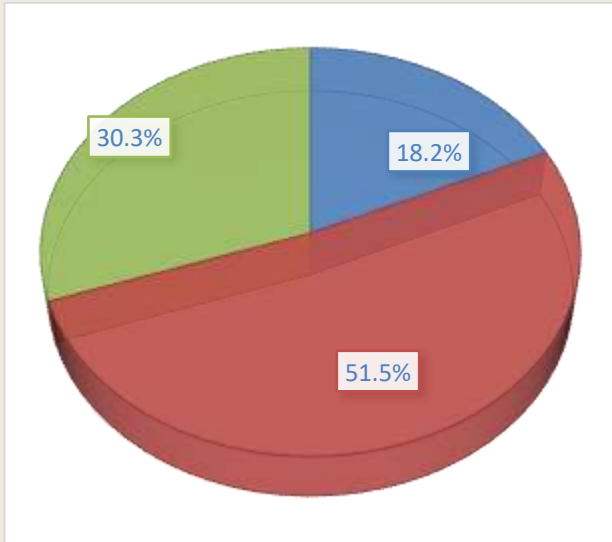
#### Families of PWDs

- Encourage, and do not prevent, PWDs in your home or care to seek work where possible.

### 2.3.2 Degree of independence.

The degree of ownership of and control over means of production is a key determinant of a person's economic independence. This facilitates the enjoyment of fundamental human rights. This is because as .....stated, economic power determines all other forms of power. In the light of the occupation status of the PWDs, it is imperative to analyse their degree of independence. Descriptive statistics show that the majority (51.5%) revealed that they were totally dependent while 30.3% and 18.2% were totally or partially independent respectively as shown in figure 2.10 below.

**Fig 2.10: Degree of independence of PWDs**



Areas of dependence that were frequently mentioned were; finance (38 out of 40) and mobility (5 out of 40). These results indicate that the need for economic empowerment of PWDs in Somalia is apparent as the main source of livelihood for the majority PWDs is support from parents/guardian (37 out of 40 or 92.5%) and transfers from humanitarian agencies (2 out of 40 or 5%).

This analysis indicates that disability has been detrimental with regard to curtailing the development potential of PWDs. It is noteworthy that PWDs have great potential to contribute to their own development as well as that of their community and the nation at large if such potential is well harnessed.

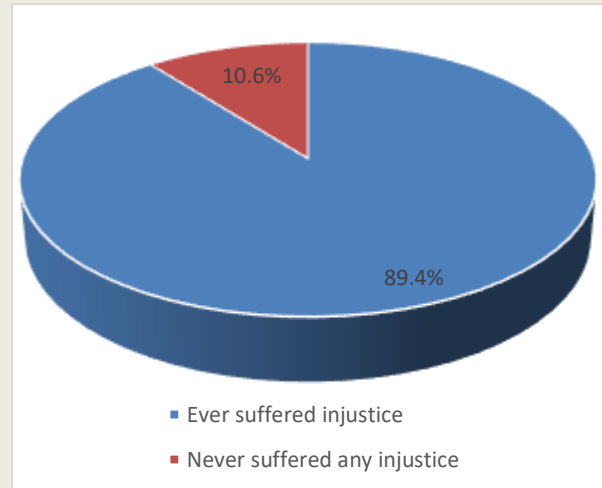
**2.4 Human rights violations faced by PWDs**

The socio-economic vulnerability faced by PWDs opens them to gross abuse and infringement on their fundamental human rights. Awareness about human rights in Somalia is still growing and majority of the population are not yet aware about the whole concept of human rights. Much as Somalia as a country ratified the UN Convention on the Rights of PWDs in 2019, PWDs continue to suffer gross violation of their rights with limited avenues for redress.

**2.4.1 Prevalence of human rights violations against PWDs**

Descriptive statistics show that the majority (59 out of 66 or 89.4%) of the PWDs that were interviewed had suffered some form of injustice. It was only seven (10.6%) that indicated to have never suffered any form of injustice as shown in figure 2.11 below

**Fig 2.11 Prevalence of injustice against PWDs**



Almost 90% of PWDs reported facing injustices in the course of their lifetime. Analysis indicates that these injustices are grounded in discrimination which is both structural and social. Structurally, the absence of ramps on most buildings in which public offices are located has greatly inhibited accessibility to these offices by PWDs. In effect, their access to particular social services offered in such places has equally be curtailed to the detriment of the rights of the PWDs.

Despite the great number having faced one or more forms of injustices, awareness about the available redress measures was reportedly low besides many being sceptical about their effectiveness. This explains why only 7 out of 59 (11.9%) of those that had ever suffered injustice had ever made attempts of seeking legal redress. Of the 7, only 2 (28.6%) had received legal aid services.

## Recommendations

### To the government

- Make sure any services available to PWDs are clearly advertised to them in ways appropriate to them, for example on radio or through PWDs groups;
- Design points of access to the justice system to ensure it is accessible for PWDs;
- Amend discriminatory legislation and reform discriminatory government policies and practices, in consultation with PWD groups.

### To civil society

- Ensure all communication and engagement plans for the provision of services includes a focus on engaging and responding to the needs of PWDs.

### To the UN and the international community

- Increase funding for disability-sensitive justice services;

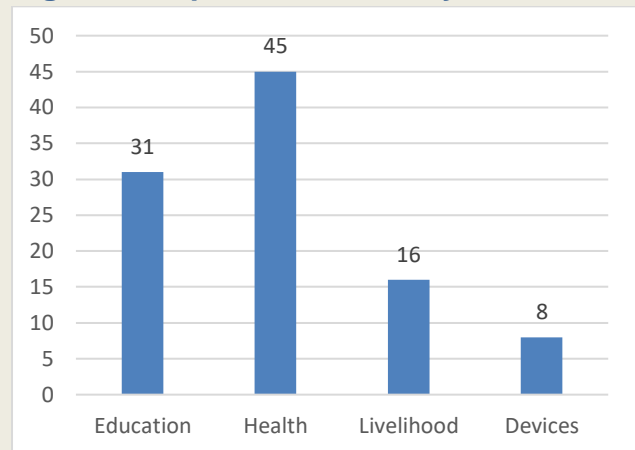
### To families of PWDs

- PWDs have the right to justice. Support PWDs in your care to access justice services if they have experienced violations or abuses.

## 2.4.2 Assistance needed by PWDs

In the light of their socio-economic plight, PWDs expressed the need for an array of services and support that can be summed up under three categories namely; education, health and livelihood-food, capital, jobs etc. Analysis of the frequencies shows that assistance to access health services was the frequently mentioned (45) followed by education (31) and livelihood (16) as well as enabling equipment such as wheelchairs and other devices (8) as shown in figure 2.12 below.

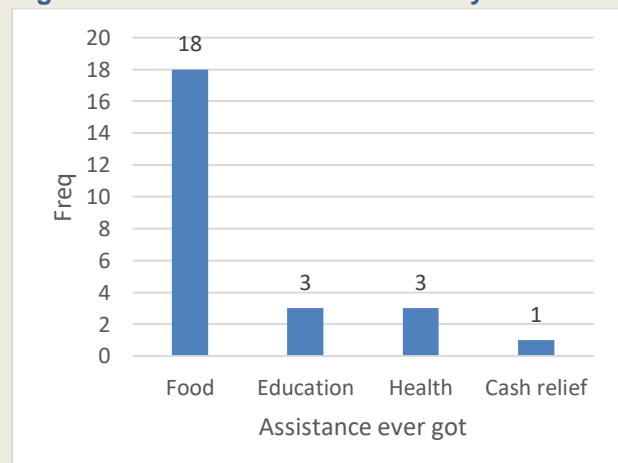
Fig 2.12: Expressed needs by PWDs



In the light of the sample size (66), it is apparent that 45 out of 66 or 68.2% expressed the need for health assistance followed by 47.0% who prioritized education. It is apparent that health and education services constitute the major needs for the PWDs in the study area.

Findings further indicate that 25 out 66 PWDs that participated in the study had ever received some sort of humanitarian assistance that mostly ranged from food, education, health and cash relief as shown in figure 2.13 below

Fig 2.13: Assistance ever received by PWDs



Further interactions with the respondents revealed that most assistance was a one-off and therefore with little potential to cause transformative changes in the living conditions of the beneficiaries. By this, it is

apparent that the assistance has been more of hand-outs rather than hand-ups hence causing little impact.

### **3.0 Conclusions and Recommendations**

#### **3.1 Conclusions**

- ✓ The plight of PWDs is evident with reinforcing effects that perpetuate vicious cycle of impoverishment. This has inculcated a dependency syndrome among PWDs hence their economic disempowerment.
- ✓ Human rights of the PWDs are grossly violated and avenues for redress are nearly non-existent in Somalia
- ✓ Curtailed access to critical social services constitutes one of the key ways in which the rights of PWDs are infringed on.

#### **3.2 Recommendations**

##### **To the government**

- ✓ The government needs to popularize the UN convention on the rights of PWDs through widespread dissemination of the convention document.
- ✓ Select 2- 3 pilot primary and secondary schools in urban centres across Somalia and support these to be 'model' schools for PWDs, including by installing ramps and other accessibility aids, hiring specialised teachers and conducting awareness raising and sensitisation with non-PWD students.
- ✓ Subsidise healthcare costs for poor and indigent patients and make PWDs priority beneficiaries of this service.
- ✓ Include access to water and food for PWDs in all development planning.

- ✓ Make sure any services available to PWDs are clearly advertised to them in ways appropriate to them, for example on radio or through PWDs groups;
- ✓ Design points of access to the justice system to ensure it is accessible for PWDs;
- Amend discriminatory legislation and reform discriminatory government policies and practices, in consultation with PWD groups.

##### **To the UN and the international community**

- ✓ There is need for a comprehensive livelihood strengthening programme for PWDs. This needs to be designed with the full participation of PWDs in order to rightly address the most pressing needs in the most viable manner;
- ✓ Increase funding for making healthcare services accessible to PWDs;
- ✓ Increase funding for making schools and places of education accessible to PWDs;
- ✓ Increase funding for disability-sensitive justice services;

##### **To humanitarian agencies**

- ✓ Make humanitarian programmes focused on the rights to water and food responsive to the specific needs of PWDs.
- ✓ Prioritise PWDs in Shelter programming;
- ✓ Prioritise PWDs in Livelihoods programming.

##### **To civil society**



- ✓ There is need for spirited collaboration and coordination among CSOs working with PWDs.
- ✓ Conduct sensitisation and awareness raising on the needs of PWDs, with a focus on PWDs with mental disabilities, with healthcare workers.
- ✓ Subsidise and increase access to healthcare for PWDs where possible;
- ✓ Conduct an assessment of PWD services at schools across Somalia;
- ✓ Provide services needed by PWDs including sensitisation sessions, specialised teachers and accessibility aids at schools in areas where large gaps and lack of services remain, on a rotational basis.
- ✓ Prioritise the rights to water and food in rights-based advocacy and include a focus on PWDs;
- ✓ Conduct awareness raising and sensitisation on the content of the right to shelter and how it must be applied in the case of PWDs, for communities and family members of PWDs.
- ✓ Conduct awareness raising and sensitisation on the content of the right to work and how it must be applied in the case of PWDs, for communities and family members of PWDs;
- ✓ Ensure all communication and engagement plans for the provision of services includes a focus on engaging and responding to the needs of PWDs.

### **To families of PWDS**

- ✓ PWDs have the right to an education. Do not fail to enrol them in school due to their disability. If they have special needs, discuss these needs with the school and teachers;

they have special needs, discuss these needs with the school and teachers;

- ✓ Ensure that any PWD living with you is living in adequate conditions, including adequate ventilation, light, freedom of movement and the right to dignity.
- ✓ Encourage, and do not prevent, PWDs in your home or care to seek work where possible.
- ✓ PWDs have the right to justice. Support PWDs in your care to access justice services if they have experienced violations or abuses.

### **To healthcare providers**

- ✓ NGO and civil society healthcare providers should expand health service programmes to include a focus on PWDs;
- ✓ Private healthcare providers should ensure they are not turning away PWDs in urgent need of medical assistance, and should form partnerships with civil society organisations to increase patient coverage and prevent PWDs from falling through the cracks of the system.

### **TO PWDs**

- ✓ The need for awareness creation about the development potential of PWDs is still critical among the PWDs themselves and the general public.
- ✓ There is need to encourage PWDs to form and join associations in order to have one and strong voice.
- ✓ There is need for spirited collaboration and coordination among CSOs working with PWDs.



## Annex 1: Questionnaire

Dear Respondent;

You have been randomly selected to participate in this study whose objective is to assess the living conditions of people with disability. You are therefore requested to provide objective answers to the questions in this questionnaire. Participation in the study is voluntary and you are free to withdraw at any stage of the interview. Your answers are going to be treated with utmost confidentiality and as such, your name shall not be mentioned anywhere.

Do you agree to participate?      Yes       No

State..... Region.....Town.....

District.....Village.....

<i>Qn</i>	<i>Questions</i>	<i>Possible responses</i>	<i>codes</i>
<i>No</i>			
<b>Theme 1: Background characteristics</b>			
1.1	Gender	Male	1
		Female	2
1.2	Age	Below 18	1
		18-35	2
		36-45	3
		46-65	4
		66+	5
1.3	Marital status	Currently Married	1
		Never married	2
		Divorced	3
		Separated	4
		Widowed	5
1.4	Highest educational level completed	None	1
		Primary	2
		Secondary	3
		Diploma	4
		Degree	5
		Post graduate	6
1.5	Employment status	Formal employment	1
		Non-formal employment	2
		Not employed at all	3
1.6	Occupation	Salaried	1
		Business	2
		Casual labour	3
		None	4
1.7	Main source of income	Occupation	1
		Parents/caregivers	2
		Inherited property	3
		Transfers from humanitarian agencies	4
		Other(s) specify.....	5
1.8	Degree of dependency	Totally Independent	1

		Partially independent	2
		Totally dependent	3
1.9	In which areas do you totally depend on others	Mobility	1
		Finance	2
		All livelihood needs	3
		Other(s) specify.....	
1.10	Relationship with main caregiver	Parent/guardian	1
		Spouse	2
		Sibling	3
		Other relative	4
		Well-wisher with no blood relations	5
		Other(s) specify.....	
1.11	Key assets possessed	Land	1
		Building	2
		Cattle	3
		Other(s) specify.....	
1.12	For each of the assets mentioned above probe for:		
		Asset	Size
		Land	
		Cows	
		Goats	
		Carmel	
1.13	What household work do you participate in?	Collecting water	1
		Grazing animals	2
		Farming	3
1.14	Multiple responses possible Settlement type	Pastoral	1
		Non-pastoral	2

**Theme 2: Access to basic services & assistance**

2.1	What basic services do you have easy access to (Multiple responses possible)	Health	1
		Water	2
		Education	3
		Livelihood support	4
		Shelter	5
		Food	6
		Legal services	7
2.2	Is there any service you have ever needed by failed to get it?	Yes	1
		No	2
2.3	If yes above, tell us about the service and the reason you failed to get it	.....	1
		.....	2
		.....	3
		.....	4
2.4	Have you ever received any humanitarian assistance?	Yes	1
		No	2
2.5	If yes, what assistance did you get and from where?	.....	
		.....	
		.....	

2.6	What other assistance do you desperately need and why?	..... ..... .....	
2.7	In your opinion, how can assistance be provided to people with disabilities in your area?	..... ..... .....	

### Theme 3: Disability & its impact on development

3.1	Disability type?	Visual. Deaf & dumb Physical	1 2 3
3.2	Possible cause of disability above	Birth Accident Untreated/ badly treated illness Not sure Other(s) specify.....	1 2 3 4
3.3	How has your disability affected your chances of development?	..... ..... .....	
3.4	What major challenges do people with disability face in your community?	..... ..... .....	
	<b>Probe for: discrimination, human rights violations against PWDs, access to critical services.</b>	.....	
3.5	What injustices have you suffered as a result of your disability?	..... ..... .....	
3.6	What assistance can be prioritized for people with disability?	.....	
3.7	Do you belong to any associate of PWDs?	Yes No	1 2
3.8	Have you ever got any sensitization on the development potential of PWDs?	Yes No	1 2
3.9	If yes above, prole for: the organiser, time, venue etc	..... ..... .....	
3.10	Do you believe that you can develop despite your disability?	Yes No	1 2

### Theme 4: Access to legal aid services

4.1	Have you even encountered circumstances that required you to access legal servies?	Yes No	
4.2	If yes above, provide some details	..... ..... .....	
4.3	What challenges did you face in your efforts to access legal services?	..... ..... .....	
4.4	Have you ever received any legal aid services?	Yes No	
4.5	<i>If yes, from where and what did it contain?</i>	..... ..... .....	

