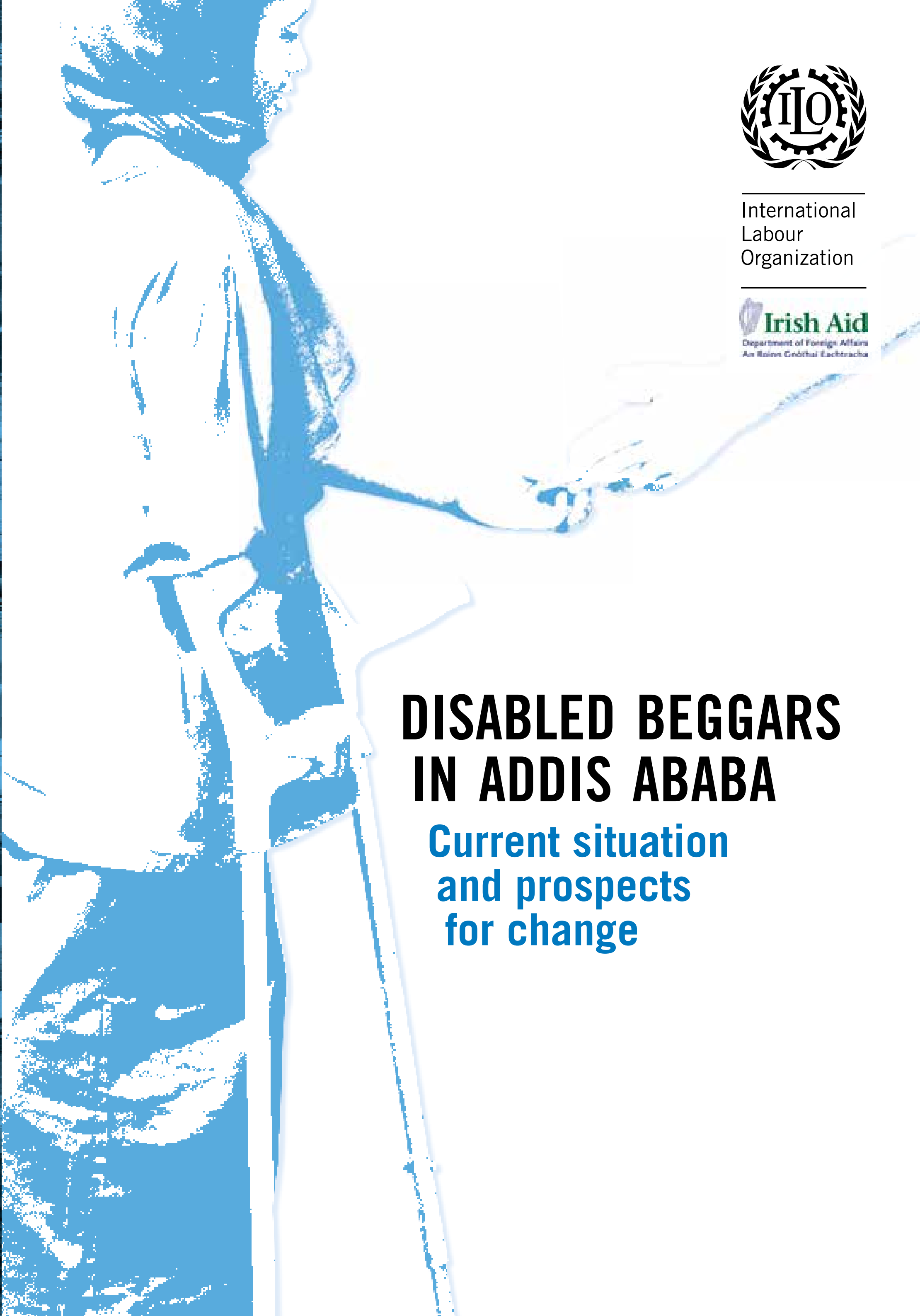

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# DISABLED BEGGARS IN ADDIS ABABA

## Current situation and prospects for change

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## Current situation and prospects for change

Nora Groce, Barbara Murray, Anna Kealy

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# Introduction

Worldwide, persons with disabilities who beg for part or all of their living are one of the most visible and least understood groups within the global disabled population. This exploratory study is intended to better understand what life is like for these individuals. It is a mixed methods study with an in-depth literature search followed by the presentation of data from a field study which collected and analyzed qualitative and quantitative data to provide an initial understanding of disabled beggars in one specific community – urban Addis Ababa. Persons with disabilities were asked how they came to beg, what their lives are on a daily basis and what they would like their futures to be.

Particular attention was paid to identifying points where interventions to break the cycle of living with a disability and begging might be implemented, and to develop and validate a survey tool and appropriate set of open-ended qualitative questions that could be used for a larger, multi-country comparative study of disabled street beggars in the future.

This Summary Paper presents key findings from the study. A more detailed discussion is contained in the ILO Working Paper Disabled Beggars in Addis Ababa, Employment Working Paper No. 141, ILO Geneva, 2013.

# Background

# Background

Begging is defined for the purposes of this study as a range of activities through which an individual asks fellow community members or strangers for money, food or other resources on the basis of being poor or needing charitable donation for basic survival, health or religious reasons.

When begging actually began is unknown. Historically, references to persons with disabilities who beg appear as early as the written word itself, and are fond throughout the Bible, in Greek, Roman and Chinese history, as well as in the historical accounts of all other major civilizations.

In traditional societies, the needs of vulnerable individuals who cannot provide for themselves are first met by family, extended family or through group action within the community. If these resources are exhausted, many traditional societies have as the next step organized sources of social and economic support through clan groups, religious organizations, guilds, associations or other more formal organizations. This is often done on an "as needed" basis, with everyone in the community aware of a particularly vulnerable individual or household. But if the individual or household has more requirements than can be met with local resources, or if the individual is not willing to conform to the expectations for receiving these resources, then begging may be an option. Begging is an activity which allows an individual to call upon people with whom he or she has no close ties for small donations to meet basic needs. It is a mechanism through which the community ensures that its very poorest members will not starve.

## The disability — poverty link

In many societies there is a strong association between poverty, disability and begging. If a person is born with a disability or becomes disabled, it is often assumed that most or all other options close and the only choice left to meet basic needs is to beg.

It is further assumed that people who beg do so because they are trapped in a "cycle of poverty" and that begging is an activity or adaptation of last resort. Moreover, there is a traditional link between poverty and disability. Poor people are at greater risk of becoming disabled through lack of adequate housing, food, clean water, basic sanitation and safe working environments. People with disabilities, in turn, are at increased risk of becoming poor through restricted access to education, health care, job training and employment opportunities. These factors, in combination with the effects of stigma and social isolation, limit the ability of people with disabilities to be full participants in their societies and to find employment that will support them and their families.

## The knowledge gap around disabled beggars

In the light of this long history, it is remarkable that so little is known about people with disabilities who work as beggars in the twenty-first century.

The global development community, not to mention the global disability advocacy community, has paid little attention to men, women and children with disabilities who make their living, in whole or in part, by begging. This gap in knowledge is particularly striking because, worldwide, begging is a common and highly visible form of making a living outside the home for people with disabilities.

The reason for this lack of attention is unclear. It has been suggested that beggars themselves are unwilling or unable to speak with researchers, development workers or human rights advocates. Some suggest that those who beg are ashamed of the lives they lead, fearful of the police or worried about criminals or other "handlers" who would punish them for speaking out. All of these reasons may account for some part of the knowledge gap, but it is also true that many who work on development and poverty issues have overlooked this group, assuming either that they cannot be reached or that new disability laws and programmes will eventually "trickle down" and include them as well.

This study of people with disabilities who work as beggars on the streets of the Ethiopian capital is one of the first studies to have questioned disabled beggars themselves about their daily lives.

# The international context

# The international context

## Urban phenomenon

While begging is not unknown in rural areas, beggars in rural hamlets and villages are rare, and even market towns and smaller cities usually have no more than a few beggars.The population base in such communities is simply too small: few beggars can be sustained. Begging is more common in urban areas, with the population of beggars in urban areas drawn from the surrounding countryside, as well as reflecting rising populations within the cities themselves. The phenomenon appears to be closely tied to the growth of large cities, which provide both greater anonymity and a broader base for support. People in urban areas tend to be more isolated, know less about their immediate neighbours, and little or nothing about people who live in other parts of their city. Anonymity can be an advantage to a beggar, allowing them to ask for help without having people know much about them or pass judgment on the beggar or the beggar's family. Identifying the needs of poor and vulnerable individuals cannot, however, be done on the same basis as in smaller societies. Instead, a system whereby many members of the general community each share a small amount of their own wealth – coins, pieces of bread, used clothing – seems to have arisen as a mechanism through which people can identify themselves as being 'in need' and be provided for. A larger population allows each individual to give a small amount irregularly and still provide for those who beg.

Beggars in cities are also most probably able to make more money, as they are not continually requesting alms from the same limited population. While there are few statistics available comparing income of beggars in rural versus urban areas, in a recent newspaper article from India it was estimated that while rural beggars collect two to three rupees per day, city beggars can collect up to 400 rupees per day (USD $10).

This link between begging and the growth of urban centres is not only of historical interest. The unprecedented acceleration of rural to urban migration globally means that begging may well grow rapidly over the coming decades as millions continue to pour into cities from the surrounding countryside.

This is compounded in times of political, social and economic instability, or when humanitarian or environmental disaster leaves many with no other options for taking care of themselves and their families.

## Tolerance of begging

Support is not given to all beggars equally. In every society, there are priorities about which groups deserve support from the general public and charitable organizations and those who, for whatever reasons, do not: the “deserving” and the “undeserving” poor. Begging by individuals whom the public considers deserving because they are otherwise unable to meet the most basic of needs – such as food, housing, and clothing – is tolerated, while begging by those perceived as undeserving, is not.

Throughout history, popular culture has also been full of stories and folklore about beggars who take advantage of the system – begging when they do not need to, making far more money than people with “real” jobs, or non-disabled individuals pretending to be disabled. Examples of people begging when they are not impoverished have gained considerable press attention in several countries in recent years. In Pakistan, for example, it has been reported that some middle-class people have added to their income through begging after hours. Several years ago, Yemen was abuzz with reports of “seasonal begging”, with families who were otherwise well above the poverty line turning to begging at certain periods of the year to meet electrical bills and health expenses. In Morocco, a government survey found that 62.4 per cent of beggars had bank accounts and a number had procured real estate with their begging money.

Beggars who could earn their living from other sources – the “undeserving poor” – are almost universally seen as taking advantage of a system intended only for the very needy. Furthermore, begging by those who are “undeserving” is often associated with drug or alcohol abuse and antisocial or criminal behaviours, a threat to the social order. For example, in both developed and developing countries within the past decade, there are numerous reports of groups or gangs of people organized to beg, often by criminals or others who seek to profit from their efforts. Such organized begging is often further linked to

corrupt police officers or government officials, bribed in order to allow begging to continue undisturbed.

While begging is also practiced by the non-destitute at certain times, such as during religious pilgrimages, in thee literature review undertaken for this project, no society was identified where begging is considered a long-term, viable option for healthy adults of working age.

In general, begging is seen as the last resort for people who have found themselves in a downward spiral of poverty and adversity. IIn societies where begging is common, women with infants and children often head the list of those considered justified in begging. This is especially the case in places where there are limited options for women if abandoned or widowed. The frail and elderly also are usually considered worthy. But in all societies, begging has been routinely considered an acceptable way, and in some cases the only way, for people with disabilities to make a living outside the home.

Accurate statistics currently exist neither on the numbers of people with disabilities who live by begging nor on the percentage of individuals that this constitutes within the larger disabled population.

The following factors are often raised in the literature when begging is discussed:

☛ Lack of social support networks

Cross-culturally, the lack of social support networks upon which the very poorest can rely if a crisis or emergency wipes out their limited resources is suggested as a key factor in making some individuals resort to begging. A crisis at a critical juncture – a health issue, the loss of a crop, a home or a set of tools – all too often pushes those who are already poor into destitution. Such factors must also play a part in pushing some disabled people already living in poverty over the dividing line between income-generating work or reliance on family or other support mechanisms, however limited, and begging.

☛ Internalized social stigma

The decision to work as a beggar may not be wholly economic. Some argue that people with disabilities beg because of an internal acceptance of prevailing social stigma, noting that characteristics associated with disability, such as low productivity and helplessness, become cemented into the minds of people with disabilities who accept the role constructed for them. This outlook, however, “blames the victim” without considering larger social, cultural, economic and political pressures. Nor does it explain why some people with disabilities choose to beg and others with comparable disabilities from similar backgrounds, do not.

Conversely, it has been argued that in some cases, begging is a choice made by people with disabilities to preserve their autonomy, even when alternative sources of support or work are available to them.

☛ Education and skills levels

People who are born with a disability or who become disabled in childhood or adolescence are often excluded from mainstream education, face social exclusion from the general community, and experience a lack of family and community support. Those who acquire a disability later in life may find that their education, skills and work history count for little if they are unable to perform their previous job and if rehabilitation and retraining opportunities are unavailable.

This disadvantage, in combination with other factors detailed here, can make it difficult or impossible for people with disabilities to locate and maintain employment in either the formal or the informal economy.

☛ Limited employment prospects

Much of the data available on employment rates among people with disabilities are drawn from statistics from developed countries; in developing countries, however, much of the labour force, including people with disabilities, engage in the informal economy. In such economies, millions of people with disabilities lack the financial resources and the entrepreneurial skills needed to begin even the smallest of enterprises

Nor are problems limited to the presence or absence of a job or self-employment. People with disabilities are generally believed to be the “last hired” and “first fired”, and are significantly less likely than non-disabled co-workers to be promoted or get a wage raise, so in times of economic downturn, people with disabilities with formal jobs are often said to be the first to join the ranks of the unemployed, and those who are self-employed often find their ability to sell small items or provide unskilled services severely curtailed.

Modified forms of begging are common in a number of countries. Historically, singing or musicianship has long been associated with the blind. The right to sell lottery tickets or newspapers is often allocated to people with visual impairments or physical disabilities. Sign language alphabet cards are sold by some members of the Deaf community. While such activities are often defined as “work”, the selling of lottery tickets and other small items is viewed widely by the public as an organized form of charity for people with disabilities, and is often done in combination with begging, as the return is very limited.

### ☛ Social protection frameworks

In countries with established social welfare systems and dedicated disability benefits, begging by people with disabilities appears to be far less common. Ideally, such social welfare schemes should provide a safety net, allowing individuals with disabilities and their families to meet basic needs with dignity and choice. However, benefits are often not sufficient to meet all needs of people with disabilities and in some countries, eligibility restrictions and the complex application processes mean that many people with disabilities do not receive the benefits to which they are entitled. And certain people with disabilities continue to beg even when support systems work well, possibly because it allows them autonomy from the existing systems that place them in the position of dependents.

### ☛ Downward spiral of poverty

Over time, an unemployed and impoverished disabled person’s situation may be further exacerbated by lack of basic housing, or lack of access to food and clean water, health services and social support networks, creating a vicious cycle of poverty, ill-health and social marginalization. The result is that people with disabilities are significantly over-represented among the poor and under-represented within national workforces. This is true of both developing and developed countries and of the formal and informal economies.

> In light of these challenges, the decision to trust to one's own efforts to earn a living by begging may be a rational economic decision, no matter what the social and psychological toll the individual incurs.

## Organized begging, forced begging, and intentional maiming

Begging for people with disabilities may not be simply an individual decision made by people with disabilities themselves. Families may encourage members to beg, especially if they have some attribute, such as a visible disability, which would put them at an "advantage" over non-disabled beggars.

Organized groups of disabled beggars are found in some countries and these groups may represent unified social support mechanisms or protection for beggars. In India, for example, "Beggar Brotherhoods" have been reported. Organized begging among non-disabled individuals has also been reported in developed countries such as Switzerland, the United Kingdom and the United States.

There are also frequent reports of people with disabilities and others being coerced into begging by "businessmen" or criminal gangs (often referred to as beggar mafias) who keep the profits. Many begging under such circumstances exist in virtual slavery with the continual threat of mistreatment, violence or death. In such systems, people with disabilities are often seen as more profitable than non-disabled beggars because they evoke greater sympathy. Indeed, it is widely reported in folklore and popular culture that disabled children are routinely sold or stolen – usually from rural areas – to be used by criminals or gangs of beggars. While accurate documentation is still limited, it is clear that in some countries disabled children are especially vulnerable to this, although adolescents and adults are also at risk. The frequent mistreatment of disabled child beggars is so common in India that members of the public now reportedly refuse to give them donations, fearing it will only end up with their "handlers".

Maiming children to use them as beggars has been referenced in folklore for centuries. There is almost no documentation on this, though, and what does exist is largely anecdotal. The practice exists without a doubt, but its extent may differ significantly from one country to the next, and the percentage of such individuals among all those people with disabilities who beg is as yet unknown. In one 1998 study on street children in Egypt, two of nine children whose case histories were given were identified as intentionally maimed by relatives to enhance their ability to beg (a girl, partially blinded by her father at age 5; a boy "forced to lose both his legs" by an uncle at age 6). In 2009 a case was reported of two doctors working in a government hospital in India who were said to have been paid US$200 for each amputation they performed on a healthy child. The practice of more severely injuring already-disabled children and adults to make them capable of bringing in more money as beggars has also been documented in recent years in Africa and Asia.

Whether intentionally disabled in order to beg, or disabled by other causes and then encouraged or forced to beg, disabled children and adults are often brought to the streets by people other than their families. A number of scattered reports have also documented the fact that children and adults with disabilities are often taught to beg. A training centre in Rohini's Lal Quarters in Delhi, India was discovered to be run by a "beggar gang" who trained non-disabled children in the use of crutches and then forced them to pay 10-20 rupees in commission at the end of the day. Reports from Africa and India describe both disabled children and adults being taught to play music in order to evoke more sympathy, or to do stunts or tricks to amuse the crowd. Training people with disabilities to be more effective beggars is unfortunately nothing new: blind boys were trained to beg in ancient Rome.

## International literature on intervention

There also is limited discussion of how people with disabilities can be kept from resorting to begging in the first place or what sustainable "routes out" of begging work for individuals or groups. Simply removing beggars from the streets does not provide them with other means of survival, nor prevent them from returning to the streets. Attempts at arresting beggars have not proved effective, simply encouraging them to change location or giving them criminal records that make it harder still to find work.

In several countries, small-scale programmes for people with disabilities who currently work as beggars have been initiated. In countries such as the Gambia, Nigeria, India and Morocco for example, governments and NGOs have set up a series of small income-generating projects, such as providing disabled beggars with phone cards to sell on the streets. But the long-term sustainability and success of these programmes remains unclear and these projects themselves are small scale, only serving a small relatively small number of people with disabilities.

There is strikingly little information available on examples in which employment schemes or income-generating programs intended for the wider disabled population either were specifically directed towards – or indirectly reached – disabled beggars. We were also unable to find any examples in which employment programmes or poverty reduction schemes intended for the general population were able to reach this population.

# The Ethiopian context

# The Ethiopian context

In Ethiopia, 15 million people are reported have a disability. Upcoming plans for more in-depth data collection on disability and development through government and NGOs such as the Ethiopian Centre on Disability and Development should allow a more precise understanding of the actual numbers involved.

In the interviews with government officials, members of civil society and disability advocates, people with disabilities and their families were reported to face considerable stigma and prejudice. With 80 distinct ethnic and tribal traditions, there are a range of different attitudes, beliefs and practices towards people with disabilities in Ethiopia. However, in general, people with disabilities are widely believed to be disabled because they or their parents have committed a sin or have angered God in some other manner. Additionally, some disabling conditions, for example epilepsy, are considered contagious.

People with disabilities are often viewed with pity and objects of charity rather than through an inclusive social or human rights lens. A few examples of inclusion exist. For example, traditionally blind people have worked as singers and musicians. In the Orthodox Church as well as in the Moslem tradition, where religious texts are memorized and recited by scholars, several blind men have become famous religious scholars. These roles are open for only a small number of talented individuals, however. More widely, those who are disabled are far less likely to be included in the social, economic or political life of their communities, or to receive an education, marry, find work or participate in decision-making at either the household or community level.

There is little in the current social or political structure that provides economic support for disabled individuals. In effect, they must either be able to support themselves, live with family or others who can help support them, or else must turn to begging to make ends meet. Although a limited social security system (providing 10-15 birr per month) was in place for a small number of individuals with disabilities two decades ago, this system has since crumbled as the country has gone through significant political changes as well as a series of natural and humanitarian disasters. A new system of social support is currently under discussion but has yet to be instituted.

In July 2010 the Ethiopian Government ratified the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD, 2006, reflecting the government's commitment to promoting equal opportunities for people with disabilities. Specific attention to disabled beggars or beggars in general, has been more limited. In recent years, the only widely noted attention was a campaign in Addis Ababa in 2010 to discourage people from walking or crawling into the streets to beg. While hailed widely as an effort that will keep beggars "off the streets", in fact the effort seems to have been intended largely to improve urban traffic problems and reduce the number of people injured in traffic. Within weeks of the campaign's introduction, beggars were returning to the streets and sidewalks.

## The aims of this study

This study aimed to explore the following questions, in order to identify areas for possible future policy or programme interventions.

- What factors seem to be involved in the decision to turn to begging? This includes demographic background, education and employment history;
- What is daily life like for those people with disabilities who beg; and
- What does the future look like to those disabled beggars interviewed and surveyed?

Components of this larger question include:

a. Do these people have knowledge of development efforts specifically targeted to or available for people with disabilities?

b. Are they aware of disability advocacy efforts?

c. What is their knowledge of the new laws that address disability – including the UN Convention on the Rights of Persons with Disabilities? And if so, do these laws have any effect on their daily lives?

When mentioned in the existing literature at all, disabled beggars are generally discussed as an undifferentiated, generally homogenous group. In fact the disabled beggars interviewed or surveyed seem to fall into one of four distinct categories which helps frame much of the rest of the findings:

- People with pre-existing disabilities, the vast majority came from rural areas, who decided they could not remain in the countryside;
- People with pre-existing disabilities from rural areas who came to Addis Ababa to seek medical care
- People with pre-existing disabilities from rural areas came to Addis Ababa for education; and
- Non-disabled people coming to seek work, who became disabled once in Addis Ababa.

The fact that there are distinct and predictable avenues through which most people with disabilities come into begging presents a series of clear points of potential intervention that could help to either keep some individuals from winding up on the streets or be used to provide options to help disabled people now begging to find their way off the streets.

## Methodology

In order to build as comprehensive an understanding as possible, a "mixed methods" approach was used in the study. Ann initial critical literature review was followed by three interactive modes of data collection – individual interviews, focus groups and a detailed survey.

In all, a total of 188 disabled beggars participated in this pilot project: 24 disabled beggars were interviewed directly by the principal investigator; 64 participated in six focus groups; and an additional 100 participated in the survey.

Qualitative field work began with 24 open-ended interviews of people with disabilities aged 18 to 60 working as beggars to identify and refine key questions that would form the basis of the subsequent focus groups and survey tool. Informants were chosen at random from the crowd of beggars at each of ten different locations and interviewed in Amharic using a semi-structured questionnaire. Because these interviews took time away from begging, each participant was paid 10 Ethiopian birr (ETB) for their time, roughly equivalent to the reported average half-day's income for disabled street beggars, even if they chose to withdraw from the survey once it started.

Selection criteria were:

- ☛ Age (18 years or above): because issues involving disabled children who beg were anticipated to be different from those of working-age adults, attention was confined to disabled adults in this specific study.
- ☛ Disability type: people with a range of disability types were to be interviewed (i.e. individuals with physical, mental health, sensory and intellectual disabilities); and
- ☛ Gender balance: we had hoped to interview an equal number of males and females; however, a higher ratio of males working as beggars than females was found, and the number of males to females interviewed and surveyed reflects this.

Based on the literature search and findings of the preliminary interviews and focus group discussions, a 92-item survey tool was developed, with questions grouped into the three key questions identified above.

In order to supplement the data gathered from the disabled beggars themselves and to develop an understanding of disability policies and programmes in Ethiopia, an additional 26 interviews were conducted by the principal investigator with senior government officials, community leaders, experts at international and national development, non-governmental organizations (NGOs) and disabled people's organizations (DPOs). Informal discussions with members of the NGO and DPO communities in Ethiopia were also carried out to provide additional understanding of the current situation in the country.

Qualitative data was transcribed and analyzed using theme content analysis, quantitative data was processed and analyzed using a statistical package. These data were then merged to create a final body of material for analysis, with on-going reference to other existing reports and studies. Particular reference was made to an unpublished study undertaken in 2009 by the Ethiopian Ministry of Labour and Social Affairs, focusing specifically on job preparation and experience among 250 disabled beggars in Addis Ababa (referenced in ILO Working Paper No 141) where comparable findings helped further support those from this study.

# Findings

# Theme 1:
# Life before begging

## Demographics

**SEX** There were relatively more men than women with disabilities on the streets begging (61 per cent male versus 39 per cent female). This gender imbalance may reflect the relatively small sample size, but these findings are similar to the findings reported in the Ethiopian Ministry of Labour and Social Affairs' survey. There may be an additional explanation. Although the recent WHO/World Bank World Report on Disability (2011) reports a higher rate of disability among adult women than men, women with comparable types of disabilities may be less likely to turn to begging because they can fulfil traditional household roles such as cooking, cleaning and childcare that would make them more likely to remain with their families. But this may be balanced by the lower status that women, particularly unmarried women, have within families.

**AGE** This study specifically focused on disabled adults, aged 18 and above. It should be noted, however, that no children with disabilities were observed begging in the course of this study. The majority (71 per cent) were between 18 and 45 years old. The relatively small number of younger people (18-24) may reflect the fact that their parents are still alive, since while parents live, their child may continue to live with and be supported by the immediate family.

While a number of frail elderly people were observed begging, only three people who identified themselves as disabled were above 60. It may be that disabled beggars tend not to survive to old age. The average life span in Ethiopia is currently 47 years. However, 29 per cent of the sample were aged 46 or above and all had begged for some years; none reported turning to begging later in life as a result of a late-onset disability. There may be another reason as well: 71 per cent of those studied had one or more child. As these children mature into adulthood, they may begin to support their disabled parent and encourage or insist that the parent stops begging.

**DISABILITY TYPE**

A full range of disabilities were not represented among beggars on the streets of Addis Ababa. Most of those surveyed (80 per cent) were either blind/visually impaired (28 per cent), physically disabled (40 per cent), or identified themselves as "multiply disabled" including physical disability 12 per cent). The other 20 per cent were made up of persons with epilepsy, ex-leprosy patients and individuals with multiple disabilities. Few or no individuals with intellectual disabilities, or deafness were observed begging in this study. Mental health disabilities tend to be invisible disabilities and are more difficult to identify visually. Few identified themselves as having a mental health concern. It is possible therefore that a larger number of beggars have mental health concerns than was identified in this study.

This pattern suggests that, to reach out to disabled beggars in Ethiopia, agencies can reach a significant proportion of all those who beg by implementing targeted programmes for people with visual and physical impairments.

## Rural/urban migration

A striking finding is that the vast majority (96 per cent) of all disabled beggars surveyed were born outside of Addis Ababa. Ten per cent come from a community or farmstead within 100 kilometers; 86 per cent come from farther than 100 kilometers away. The basic division found was between people from rural areas who are born with a disability or become disabled before coming to Addis Ababa, and people who became disabled after arriving in the city. While they often wind up begging side by side, these two groups are discussed separately here because there are significant differences between them and points of potential interventions differ as well:

### Individuals who are disabled before coming to Addis Ababa.

For those who were disabled before arriving at Addis Ababa, many reported that a similar set of 'push and 'pull' factors made them decide to leave home, with poverty only one of the considerations:

Many reported facing severe stigma, discrimination and social isolation, as strong motivations to "push" them to urban areas. In interviews and focus groups, the comments were the same: "*My family was ashamed of me*"; "*I was so lonely*"; "*Everyone thought I was cursed*"; "*My family thought I had sinned*".

*"My family was ashamed of me"*

Many said that in addition to the stigma faced, there was little or nothing they could do, or that people would permit them to do, to contribute economically to their households. The majority of those born with a disability or disabled early in childhood had little or no schooling. Informants recalled facing a continuing series of demeaning situations and were being constantly reminded that they were a drain on their household's resources. A number used the same expression: "*I felt like a parasite*".

Many reported similar factors in their decision to come to Addis Ababa. They had lived with parents in rural areas or in small villages or towns. A few left when their parents were still alive, and viewed their leaving home as a sacrifice on their part for the well-being of the household – their parents had not thrown them out, but they felt that everyone in their family appreciated it when they disappeared. A number stayed until their mother died and father remarried. At that point, it seems, no other relative was willing or able to support them and they chose to go to the city or were strongly encouraged to go by relatives. While most who reported being pressed by relatives to leave had acquired their disability in childhood, at least one woman interviewed had lost her vision as a young married woman, after which she was so badly abused by her husband and husband's family that she left, even though she had two young children she was forced to leave behind.

The "pull" factors of better futures in the city were not as strong for many of our informants as had been the "push" factors. Almost everyone left for the "possibility" of a better life, yet few said that they really thought coming to Addis Ababa would significantly improve their lives. Many said they hoped to find some sort of work, and be treated less poorly; few said "treated well". While 48 per cent reported that one factor was seeking care or a cure for their disability, few listed this as the primary reason for leaving home. Few thought they would end up begging, although several had anticipated that this well might be the case.

It is possible that the people with disabilities who wind up as beggars in Addis may be poorer or less able to make an economic contribution to their households, have weaker family support systems and/or be more socially isolated before they migrate than people with comparable disabilities from these same communities who do not move to an urban area.

How people from rural areas travelled to Addis Ababa itself reflects social isolation. Most reported that they had hitched a ride with a distant relative or neighbour coming to the city for some other reason. None came with parents or close family members. In several cases their parent or another relative bought them a one-way bus ticket. Several walked.

Most also reported they are no longer in touch, or only in distant touch, with rural relatives. Indeed, in the interviews and focus groups, a number mentioned that they did not know if their parents or siblings were still alive, or if their parents knew that they themselves were alive. A number believed their families assumed that they were long since dead. Many said they are too embarrassed to go home, given their current circumstances.

### Nuclear families, extended families and social support networks

The social isolation first evident in the transition of disabled beggars from rural to urban dwellers was also reflected in the family and social support networks.

Most of those surveyed were married or had a life partner and had one or more children, with men more likely to be married, or have been married, and women more likely to be unmarried but living with a partner. Both men and women had children in equal numbers. The presence of children in the household is of note because it increases the pressure on many to beg in order to cover child-related expenses: food, housing and health care, as well as school fees and uniforms. Indeed, for a quarter, the support of children was a major part of their household expenses. On the other hand, when these children grow up they may help provide their disabled parents with a more economically secure old age – a fact that may be reflected in the lower numbers of people with disabilities begging above their mid-forties – an age at which grown children would conceivably begin to be able to help economically.

Not all children of disabled beggars lived with their parents. This may be due to marital or household instability, poverty, the reticence of the parent to allow the child to be connected to their begging, or the possibility of better opportunities for the child in the household of a relative. Also, several disabled women reported being sought out by representatives of local orphanages who offered to place their children in homes.

Several government officials and DPO advocates expressed the view that disabled beggars will use their own children to beg, as having infant or young child increased the amount of alms people give. However, few disabled beggars were seen with a child in arms at the time of the fieldwork, and those who did have an infant or toddler with them stated that the child was there because they have no alternative childcare arrangements. Only a small proportion of disabled beggars reported having their children help them beg and that they bring children with them to beg only when their children are home from school. As parents, they were unanimous in their hopes that their own children do not grow up to beg.

While half of informants (51 per cent) lived with a significant other (spouse/partner) and may have children, only 5% reported strong family ties or lived in a household with additional family members beyond the nuclear family.Yet more striking is the fact that 49 per cent of all disabled beggars surveyed currently live not with relatives but instead lodge with friends or with roommates. In a society which, even in urban centres, is still strongly based on extended family ties and a typical household is still composed of an extended family – grandparents, aunts and uncles, cousins and various in-laws, informants' links with extended family, especially families of origin, are notable by their absence.

Although it might be argued that people with disabilities interviewed were largely from distant rural areas, a very common rural-urban migration pattern is that rural migrants stay with extended family who have already made their way to the city. None of the disabled beggars interviewed adhered to this pattern. Those who had relatives in Addis Ababa, found these relatives wanted little to do with them and few were in contact with their urban relatives even when they first came to the city.

### Brittle social networks beyond the family

Relationships with others - friends, neighbours, or other people who worked as beggars, also appeared to be tenuous. People reported recognizing other beggars but maintain a polite distance, even with those beside whom they have begged for years. "We chat", some reported, "but don't discuss anything in depth". Others said that the disabled and non-disabled beggars did small favours for each other – holding a begging spot while someone goes for food or to use the bathroom, but that they otherwise did not interact.

In summary, those who chose to come to the city may be from families that are extremely poor, less supportive or families that may have some difficulty in functioning. Thus, while some argue that people working as beggars isolate themselves or are isolated by others because of the shame or embarrassment of begging, the picture may be more complicated. Some of the individuals who turn to begging may be less adept than others in forming and maintaining close ties with family and friends, or in building and keeping social networks. Thus, disabled people who turn to begging may have have a smaller and shallower social network to call on from the outset – and one that is more easily expended should times become hard.

These factors may increase the likelihood of these individuals and not others with comparable disabilities from similar background, turning to begging. This is an issue that requires much more investigation. The implications are important however, as interventions for more marginalised individuals might call upon more extensive or longer-term support and counselling efforts.

### People with disabilities who come to Addis Ababa seeking medical care

Almost half of the respondents reported that one reason they decided to come to Addis Ababa was to find medical treatment for their disability. A distinct subgroup of informants had come to seek medical care with the intention of returning home. Their families had already spent what little money they had on medical treatment available locally and gathered together enough money to send their relative to a hospital or clinic in Addis Ababa as a last resort. Some came not for Western medical treatment, but rather a cure through holy water at one of the shrines, others sought a combination of Western medical treatment, prayers and holy water. They reach the city impoverished, and because of transportation costs, often arrive alone. Many do receive treatment in hospitals, clinics or NGO-run medical facilities, and the treatment itself is often free. However, food and housing is usually far more expensive than anticipated and once treatment is fin-

ished, clinics and hospitals routinely discharge disabled patients without ensuring that they have enough money to return home. A number of those interviewed reported being sent to Addis Ababa was a “last ditch” effort for a cure and since they had not been “cured” they felt they could not return home to, as one man put it, “be a burden”. A number of people in this situation told the interviewer that beginning to beg was their only choice.

### Coming to acquire an education

Another subgroup identified was that of people with disabilities who had originally come to Addis Ababa as children to attend boarding schools for the deaf or the blind. Some had been sent to boarding school after being told by their families that there was nothing for them to return home to. Some children who drop out before completing school cannot or will not return home, feeling they have let their families down, and rarely have marketable skills. They are vulnerable and alone in a big city, and begging is the only option for many of these young people

### Individuals who become disabled after arriving in Addis Ababa

The final group identified were people who came to the city as non-disabled youth or young adults to find work. While 4 per cent of those surveyed reported arriving in the city as a young non-disabled people, this number may be higher, as in interviews and focus groups, a significant number of men (eight of the 24 interviewed) attributed their disabilities to accidents at the worksite.

These individuals reported similar histories. Part of a global migration into urban areas, members of this group arrived in Addis as young adults with some education, skills and work experience. Many had lived in the city for up to several years and had already distanced themselves from their rural families, but had not yet married or established strong social networks in the city when they became disabled. Most became disabled while working as day labourers on construction sites or while doing manual labour. For example, one man had scaffolding collapse underneath him, another suffered a spinal cord injury while hauling sacks of potatoes, and yet another touched a live wire while working as a bricklayer and fell, suffering both severe burns and a spinal cord injury. Two women reported spinal cord injuries through traffic accidents.

Once injured, these individuals were taken to hospital, where they received good and often extensive clinical care although little rehabilitative treatment. Because most had disabling spinal cord injuries, they remained in the hospital for a year or more. When the hospital felt nothing more could be done, these individuals were either discharged directly to the streets or sent to a long-term institutional setting for an additional one to three years. These long-term care institutions offer some physical rehabilitation, but once it becomes clear that the patient is permanently disabled, rehabilitation efforts are limited.

What is particularly striking among this subgroup is that, having had little or no exposure to disability prior to becoming disabled themselves, they held (and continue to hold) the same prejudices and misinformation about what it means to be disabled as does the general population. In interviews and focus groups, these young adults seemed at a particular loss about what to do, where to go, or how to re-imagine their future as a person with a disability. All interviewed felt strongly that they could not return to their rural families because "*they would only be a burden*". Most were no longer in touch with their families. With no social networks and a pre-existing assumption that the only thing a person with a disability could do is to beg, it is perhaps not surprising that so many felt they had little alternative.

Those interviewed, of course, may represent a biased sample. It is possible that many who become disabled in Addis Ababa either return home to the countryside or find a way to make a living other than begging. Nonetheless, a significant number of those found begging on the streets were former labourers, and their histories were consistent enough to raise significant concerns about the lost opportunity for intervention this raises.

## Education, skills and work histories

Although it is widely assumed that those who beg lack the education, skills and work history needed to find alternative means of employment, in fact, in this study, a significant minority did have some education, skills training and work experience. As was true in many other areas, the issues were more complex and offered more possible points of intervention, than anticipated.

Of those surveyed, 55 per cent had at least some education, and within this group, some had fairly extensive educations. 13 per cent had completed primary school, six individuals had some secondary schooling and three had completed secondary school.

Another third had some prior job training or apprenticeships, and 29 per cent had experience in some craft or trade that might be transferable to an urban area. Some 12 per cent of respondents reported having worked in agriculture, and while some of their skills (cattle herding, for example) may not immediately be transferable to urban areas, if the prospect of working in urban agriculture (raising small animals, tending vegetable plots) is included, even this group has transferable skills. More broadly, these individuals have a history of holding a job and contributing to the economic life of their households, whether or not their specific skills are immediately transferable.

However, 59 per cent reported no previous employment. An additional 32 per cent had lived on family support before starting to beg. The difference between women and men in employment history was particularly striking – 74 per cent of women had no previous employment history and had lived on family support, compared to 48.5 per cent of men. However, it is important to emphasize that even if many individuals had not had previous paid employment, many or most of these disabled men and women had contributed to their households by doing chores and working on farmsteads. Few poor rural families could afford to have any member not contributing. Indeed, a number of these people reported that they "*had worked hard for their families*".

A clear interest was expressed by informants in finding work other than begging. The vast majority, 94 per cent, reported they could not find other work despite trying regularly, but would like to find something else as long as it pays roughly the same as begging, as they needed to earn enough to live on. Importantly most respondents clearly stated that they did not prefer begging, but rather, that the current alternatives to begging, such as selling lottery tickets, offered only small and irregular sources of funding. Also significantly, one fifth said they have themselves paid for skills training or education out of money collected from begging in the hope of finding a better job.

However, 80 per cent of those interviewed had begged for five years or more, so finding another type of job and keeping such a position over time may be difficult.

There was also a great deal of resourcefulness shown by those interviewed. Almost 20 per cent held down other jobs such as selling lottery tickets, phone cards, or other small items on the side. Some who lived near a church which attracted pilgrims even resorted to renting out their own beds to pilgrims and sleeping on the floor when it was possible to do so.

## Poverty

*"I wrap myself in plastic bags. I live like a gorilla"*

While policy-makers, members of the international aid community and members of the general public interviewed report that those who beg bring in a good income, this study found that people with disabilities themselves experienced significant levels of poverty.

Respondents were asked what their average daily earnings were and what a 'good day' and a 'bad day' looked like. On an "average day" one in five collected less than 10 birr and only a quarter collected 20 birr or more. Even on an "exceptionally good day", 85 per cent collected less than 30 birr; on a bad day 91 per cent collected 10 birr or less. One in three were not able to meet their daily expenses "most days." Many regularly limit food, and 11 per cent said that on a bad day, they walk rather than pay for a a bus or a ride. As 80 per cent of all those interviewed were either blind or had a significant physical disability, walking long distances through crowded and deeply potholed streets is both difficult and dangerous.

Poor housing and limited material assets also reflected significant levels of poverty. Most have a house or at least a room to go home to – although 7 per cent did not. One man who had been injured while in the military reported having slept on the streets for 12 years in his wheelchair (and before he was lucky enough to get a chair, on the ground). "*When it rains*," he said, "*I wrap myself in plastic bags. I live like a gorilla*".

Most lived in extremely crowded conditions, despite the fact that housing routinely took over half of their incomes. Their houses have limited amenities.Half had no access to clean water within five minutes' walk of their home, and 54 per cent, no toilet facilities, which is of concern in a group where 80 per cent of respondents have mobility or vision problems.

An assessment of material assets further reflects this poverty. Many reported lacking such basics as blankets, beds and cooking utensils, and a cross-tabulation of a list of material assets found that only 1 per cent of those surveyed had all six assets specified (cook pot, water jar, blanket, bed, change of clothes, radio, television), 81 per cent lacked two or more of these assets, and within this group, a quarter owned only three assets (generally a blanket, water jug and cooking pot). Most reported that they were “poor” or “very poor” in comparison to their non-disabled neighbours in the slums in which they live.

Moreover, having a disability means that there are additional costs. Five per cent reported regularly spending part of their income on medical care (Western and/ or traditional) related to their disability or assistive devices.However, what they went without is also notable. Many who needed assistive devices either did not have them or had devices in very poor condition. For example, several middle-aged blind men had white canes that they had been given years ago while students at the school for the blind. Of those who used wheelchairs, a number had chairs held together by duct tape or string.

Although poverty and lack of agency limited the economic decisions they could make, roughly half of all informants did try to manage what resources they had and protect themselves against unexpected economic ‘shocks’. A number did this through making weekly or monthly contributions to one or both of two common investment schemes: the “Equib account” and/or the “burial society”.

An Equib account (used by 42 per cent) is a pot of money that becomes available to each of the participants on a rotating basis. When it is their ‘turn’ thee participant uses the pot of money to pay for larger purchases that he or she would otherwise be able to afford. Generally this sum is between 800 to 1,000 birr and it is used to pay for items such as school fees, school uniforms and clothing for their children, or for a household item such as a radio or second-hand television. Men and women reported investing in Equib accounts at comparable rates.

In addition to funding funerals, burial societies (used by 53 per cent) allow participants to borrow against their accounts in emergencies.

Almost one third of all respondents had an Equib account and belonged to a burial society, although most were able to put aside only a small amount (5-10 birr) on a weekly basis. It is of note that, despite their poverty, a significant number were attempting to manage their money in some way that allowed a cushion for larger expenses and emergency situations.

## Theme 2: Working as a beggar, daily routines and begging strategies

Almost all informants described a strategy for begging which took considerable thought and planning, as well as significant time and energy. Beggars put in a long day. Most report showing up early, as people give more generously early in the mornings and many stayed until sundown.

Most did not beg near where they lived, as they did not want to be identified by their neighbours as beggars. In fact, several took pains not to let the neighbours know what they did for a living, although most said their neighbours knew anyhow. Others, particularly those with limited mobility, had less choice and begged in their own neighbourhoods. This means that considerable time is spent getting to and from the begging sites.

More time is spent strategizing where to beg on a daily basis. Most begged in several places during the day, showing up at religious centres when morning services are held, and then moving to where events or public gatherings are taking place. The Ethiopian tradition of inviting beggars who congregate outside a church or mosque to funerals and weddings is a steady source of food and money for many. Many who routinely stay in one or only a few locations also have regular “clients”, usually people who live or work nearby, who recognize the individual beggar and every so often give them money or bring food or clothing for them. While hotels and tourist spots were also identified, most beggars reported that tourists were not generous, with foreigners often erroneously assuming that there was some support system or social protection programme that takes care of their needs.

Beggars also weave in and out of traffic, with those able to walk or hobble venturing into the street and blind beggars asking others to lead them to vehicles. Because of the risk of injury or death, as well as traffic congestion, several months before the start of this study in 2010 a campaign went into effect banning begging in traffic. While this was widely hailed as a new policy that had "stopped street begging", in fact within several months, beggars were again routinely moving into the traffic.

In the eyes of the general public, a hierarchy of giving exists, with women accompanied by children (whether non-disabled or disabled) given priority, followed by individuals with visible disabilities. Despite this disabled beggars often find themselves at a disadvantage in crowds of beggars, as non-disabled beggars push past or stand in front of them to receive alms. Many are simply not as quick or as strong as non-disabled beggars.

Many also complained that non-disabled beggars pretend to have a disability to get money.( A number were surprisingly sympathetic about non-disabled beggars, telling the researcher that all those who beg have hard lives. However, the majority of disabled beggars interviewed were adamantly against beggars faking a disability, feeling that this took money away that was, by right, theirs.

Interestingly, a number of disabled beggars mentioned that people disabled by leprosy (Hansen's Disease) were misrepresenting themselves as disabled beggars. As a group, people acquire leprosy from later childhood to young adulthood and thus often have education, job training and some employment history before the effects of the disease become obvious. With the increased availability of drugs, few in Ethiopia today have active leprosy, although many adults have been disabled by leprosy prior to the availability of leprosy medication.

In an interview, the President of the Ex-Lepers Association was adamant that people who have had leprosy in Addis Ababa now all have access to medication, that there is a strong support system in place, and that no ex-lepers needed to beg. However, according to a number of disabled beggars, ex-lepers – largely a middle class group who own their own houses and businesses - do indeed beg at weekends or during religious festivals. Some show up to beg driving their own cars. That 13 per cent of all those selected at random on the streets of Addis Ababa for this study's survey reported having had leprosy came as a surprise, given the strong statements by both leaders in the ex-leprosy and development communities. The disabled beggars included in interviews and focus groups (none of them ex-lepers) did not consider ex-lepers to be disabled or in need.

## Violence and abuse

In general, the level of violence towards people with disabilities who begged was reported to be low, although most disabled beggars and all disabled women beggars interviewed said they begged during daylight hours and returned home when it got dark for safety reasons. However, 35 per cent reported that they at least once, had been harmed or threatened by strangers, drunks, police, security people or others.

Almost three-quarters (74 per cent) had been robbed and a fifth of this larger group reported that they are robbed regularly. Robbery usually entailed someone grabbing their money, which is often collected in a bowl or cup, and running away, confident that the disabled beggar will not be able to run after them.

None reported any form of sexual abuse. While this may be the case, it may also reflect social norms that influence the reporting of such abuse. Certainly a growing international literature shows that people with disabilities are at increased risk of sexual abuse. At this point, all that can be said is that this issue warrants further research.

There was little indication of organized begging nor of maiming individuals so they can beg. Only one example was given, of a child purposely blinded and made to beg. This story appears to have been a news item in recent years, as when inquiry was made, every person who said they 'had heard about maiming' gave this one example. If it happened, it is clear that maiming children to induce greater sympathy is not a routine practice in Ethiopia. The same is true of stories regarding stealing or renting children to help beggars – including disabled beggars – collect more money. The practice may exist, but many of the accounts may be "urban myth".

# Theme 3:
# Life beyond begging

Perhaps the most interesting finding of this study is that 87 per cent of respondents see a future beyond begging although they may be unsure how to get there., When asked to describe what they could do besides begging, most had already given thought to this and had realistic ideas – small-scale trading, or crafts such as shoe repair and tailoring. When pressed about why they could not do this now, 63 per cent reported they lacked the funds, education or training or "didn't know where to start". Notably, a fifth reported spending money regularly on skills training– such courses seem to be of short duration and feature basic skills such as improving reading or how to work a sewing machine. Improving sewing skills is an excellent example of how the lack of basic equipment (a sewing machine) blocks the ability to apply these skills, once acquired.

Significantly, a number reported that they had heard of jobs training courses offered by mainstream NGOs, but doubted that these courses accepted people with disabilities. Had these courses noted in their advertisements and flyers that people with disabilities were welcomed, several people specifically stated that they would have signed up. However, as most of these courses did not provide fees for people to attend, respondents also felt they could not afford to take time off to attend these courses. As one man said, "Such courses are for people who can afford to go without money for food".

Opportunities may also occur by chance. In one focus group a blind man well into his 50s was receiving congratulations ; he had recently been hired by a local music school to provide singing lessons. The job was a full-time one and would allow him an income of roughly 1,500 birr per month, well above what he had regularly collected as a "singing blind beggar" over the past 20 years. The position had occurred "by chance – the music school needed someone right away" and he added, "I will certainly try to keep the job. I am too old to keep begging".

*"I will certainly try to keep the job. I am too old to keep begging"*

Significantly, none of those interviewed or surveyed wanted their own children – whether non-disabled or disabled – to beg. Despite some members of the public talking about "genera-

tions of disabled beggars", this was not the case. Programmes and policies that offer disabled beggars other income options must take into account the fact that most of these people are parents, and efforts to reach them must consider their plans and options for supporting their own children.

## Attitudes of people in the community (including other people with disabilities)

Members of the general public as well as professionals felt unease towards those who begged, and this included disabled beggars. In discussion, many members of the general public and professionals interviewed volunteered stories of beggars – including disabled beggars – who do very well for themselves. When asked how much disabled beggars made on a daily basis, informants in government and development agencies estimated from 100 to 150 birr; In fact, disabled beggars themselves reported 20-30 birr on a good day. Government officials and members of the general public also related a story about a disabled beggar, recently killed in a car crash, who was reputed to have had 60,000 birr found on him. The fact that the same story was told by a number of people may mean that this is either local folklore or had been broadcast on radio or TV. While it could be true, this is not representative of the group interviewed for this study.

Several members of the general public and a number of development workers also reported that some disabled men use their collections to buy drink or khat (a mild, chewable narcotic) and that as evening falls, these men become increasingly belligerent towards other beggars and members of the public. Several disabled beggars also volunteered this information, consistently adding that those who drank or took drugs were a small minority of all disabled beggars and that this behaviour reflected badly on all disabled beggars.

## Links to DPOs and other disability advocacy efforts

A point of interest – and of concern – is that programmes for people with disabilities through government agencies, NGOs and DPOs rarely seem to reach disabled beggars. There are DPOs throughout Ethiopia, the majority based in Addis Ababa. These organizations, working on shoestring budgets, along with several NGOs offer a number of intervention programmes to teach skills, identify potential employment and/or provide micro-finance opportunities for people with disabilities. But the recipients of these programmes, are not beggars. Some 43 per cent of disabled beggars surveyed had heard about government or NGO efforts to provide services, resources or skills training for people with disabilities, but few had benefitted from any programmes run by these organisations. For example, a number of blind beggars knew that a local organization for the blind offers a training course to help blind individuals learn how to better navigate the urban environment – a particularly helpful skill given the lack of safe sidewalks, huge potholes and general confusion on the streets. But all who volunteered this information stated that they themselves could not afford to take the time away from begging to take the course.

Many NGO and DPO representatives stated that the mission of their organizations were to "keep people off the streets". In light of this, those people who were already on the streets might be seen by some organisations as failures.

Several disability advocates also admitted that they themselves felt a good deal of unease towards disabled beggars. As one local disability leader confided:

I know they are there. I see them, especially on holy days; there is a line of people with disabilities begging at the traffic interchange near my door. There, but for the grace of God, go I – and I resent them. Having spent years advocating for dignity, equality and self-sufficiency, it sets the movement back. It's embarrassing.

*"We should be doing more"*

Others were more sympathetic. "They need to get enough money to live some way," one said. Another said, "They should be returned home to their villages". The majority of disability leaders and advocates interviewed for this study closed the interviews by saying, "We should be doing more".

Among beggars interviewed, little was known about local disability advocacy efforts or the disability rights movement at either the local or national level. Only 7 per cent had heard about organizations run by and for people with disabilities

(DPOs), and several were visibly surprised to learn that such organizations existed. There was little knowledge about new laws in Ethiopia intended to improve the lives of, or provide rights for, people with disabilities. Only 18 per cent had heard about the UN Convention on the Rights of Persons with Disabilities, (ratified by Ethiopia in 2010) and all reporting the same source – a recent programme on local radio. While a number expressed interest in knowing more about DPOs and the new laws, none thought that the government laws, DPOs or the new Convention would do much for them. As one disabled female beggar said, “What rights do I have in a place like this?”

# Conclusions and recommendations

# Conclusions and recommendations

Perhaps the single most striking finding from this study is the diversity of the experiences and needs of disabled beggars who, from the outside, look so similar. This diversity offers a number of points for interventions which could both keep many from becoming beggars in the first place and also offer others viable options to leave the streets and earn a living, allowing them a more secure life with dignity and self-determination. Among the key findings are:

## Disability type

All types of disabilities are not equally represented. The majority of people with disabilities found begging had either visual or physical impairments (80 per cent). While people with all types of disabilities will need intervention and support to work their way out of poverty, targeted programmes to help individuals who are visually impaired or physically impaired would serve a significant proportion of all those now working as beggars.

## Rural/urban migration

The issue of rural/urban migration is a key concern in identifying who within the larger disability community, may end up begging. The majority of people with disabilities who now beg come from outside Addis Ababa and fall into one of four groups:

☛ Impoverished rural/urban disabled migrants

For those who come to Addis Ababa as disabled people fleeing stigma and poverty or seeking a better life in the capital, a critical point of intervention would be working with families, schools and community leaders in their home communities to address prejudice, ensure educational opportunities and build skills that would enable young people with disabilities to support themselves and their families. International agencies, government, NGOs and DPOs could all play a role. Such efforts would keep these disabled people from feeling they had little choice but to leave for the city or should they decide to go to the city, being able to arrive with marketable skills.

☛ Medical migrants

People with disabilities who come from rural areas to seek medical care often have families who have expended their last funds to send them to the hospitals in Addis Ababa. Medical care and rehabilitative services could be delivered in regional clinical facilities closer to home, meaning that many would not need to travel to the capital. For others, there will continue to be the need to come to Addis Ababa to receive more advanced medical or surgical care. With better coordination with local rural clinics and health centres, people who need such care would arrive with realistic expectations of what clinical care could and could not do. While treatment for people with complicated disability-related problems is free or provided at reduced cost in many hospitals in Addis Ababa, funding might be allocated to ensure that transportation is available to get these ‘medical migrants’ home after treatment.

These measures would help ensure that families have not impoverished themselves in the unrealistic hope of eliminating a disability, and that the people with disabilities involved would neither find themselves stranded in the capital nor fearful of facing relatives who expect them to come home ‘cured’.

☛ Educational migrants

It is argued here that schools have an ongoing obligation to children and young people with disabilities who come for special education even if they choose to leave before completing their certificates: there is a marked need for support, guidance, mentoring and training in marketable skills.. Schools would also do well to build stronger partnerships with DPOs and NGOs serving disabled populations in order to provide mentorship programmes and support for older children and adolescents, so that they do not wind up on the streets. This is currently a missed opportunity that could reach some of the most vulnerable young people with disabilities.

### ☛ Newly disabled adults

Finally, those who come to Addis Ababa as young men and women to find work and become disabled after arriving, may be reached and helped at several junctures:

Improved safety regulations on the job may keep many from becoming disabled in the first place, and this is an important point for intervention.

For those who do become disabled, support and advice on living with a disability, as well as employment training and links to disability advocacy groups at critical points during their treatment, would allow them to make informed decisions, help them build better lives and keep many off the streets. Currently there are few efforts made in hospitals or long-term care facilities to prepare these newly disabled young adults to live with a disability or to live independently outside of a care facility. And there are few links between these institutions and any DPO or disability focused NGOs. Administrators and staff at these facilities interviewed for this study were unfamiliar with such organisations and had no knowledge of the UNCRPD, national legislation or other efforts to help people with disabilities establish self-sufficiency, although they did express great interest in learning more.

The potential for creating links between hospitals, long-term care facilities and local DPOs and NGOs is particularly promising, because many who currently receive care in these institutions stay for two to three years or longer in hospitals and long-term care centres and most of those injured have had at least some education, skills training and a history of employment prior to the time of their injury.

The lack of intervention here represents a significant missed opportunity. DPOs and NGOs could provide critical input and guidance. Time spent in care homes could be productively used to teach newly disabled adults about living with a disability, as well as enabling them to acquire skills they could use to support themselves. With timely intervention, this group might never have to end up on the streets in the first place.

## Education and skills

Lack of education and skills is part of the problem – but a wide variety of education and skills was represented. While it was assumed at the outset of this study that disabled beggars would be largely without education or skills, in fact the study relieved a more complex pattern. 55 per cent had some literacy skills and 32 per cent had some prior job training. A significant number had a considerable amount of work experience.

Many had thought very pragmatically about what they could do besides begging, suggesting, for example, that if only they could get a bit of capital together, and could manage the logistics, they could sell small items (lottery tickets, fruit and vegetables, etc.) or work at trades such as needlework or shoe repair.

Existing disability-specific or mainstream development and micro-credit efforts are not reaching disabled beggars. Only a few individuals reported knowing that such opportunities even existed. Targeted outreach efforts are needed, with additional supports to take into account the social marginalization, psychological needs and other concerns that might be specific to those who have worked as beggars. Notably, four in five of all those surveyed had worked as beggars for five years or more, so bringing them back into the workforce may require extra effort and targeted support systems.

## Social networks

A consistent finding was that of the relatively limited or brittle social network reported by those interviewed and surveyed. Whatever the nature of the initial driving factors, once on the streets, the people interviewed in this study report becoming further isolated from family and friends, with whom they are ashamed to keep in touch. Social networks, vitally important for social integration and economic support, continue to diminish or disappear altogether.

Here, DPOs and the wider disability advocacy networks may play a leading role in supporting and including disabled beggars, helping them to build, strengthen and expand social networks that could help bring them out of poverty and connect them in the job market.

## Poverty

Most disabled beggars in this study live in dire poverty and need for employment. Almost all report living in very poor housing and the majority lack access to clean water and basic sanitation, food and medical care. The inclusion of disabled beggars in both disability-specific and disability-inclusive development programmes to improve housing, water and sanitation, food security and access to medical care would be a significant step forward.

Equitable social protection programmes for those disabled and in need, in both rural and urban areas, would help keep many from turning to begging in the first place. These need to be piloted and implemented.

But most important is the need for employment. The most consistent issue and concern among all respondents is the need for realistic opportunities that would allow them an alternative source of income.

Programmes and policies that seek to offer disabled beggars other income options will benefit by taking into account the fact that most of this group are keenly interested in improving their options. It is also important to take into account the fact that the majority of this group are parents, and alternative job options must provide enough income not only to support the individual while they are retraining, but also allow such individuals to provide for their families.

While all those who beg may need both disability-specific and disability-inclusive programmes to enter or re-enter the workforce, special attention should be given to women. Almost three-quarters (74 per cent) of women had either no previous employment history or had been supported by their families prior to coming to the streets (vs.48.5 per cent of men), so specific gender-based training and support should be considered for women new to the workforce.

## DPO and NGO involvement

The background review undertaken as part of this project could identify only a handful of development projects or programmes that included disabled beggars. Of particular note is the almost complete absence of any attention to disabled beggars by government ministries, DPOs, NGOs, and UN agencies charged with addressing disability and poverty issues. Many organizations see their missions as being to “keep people from begging”. They do not work with those who have already chosen to beg.

Outreach efforts by government ministries, DPOs, NGOs, and UN agencies are needed. DPOs should take a lead in ensuring that policies, programmes and campaigns for people with disabilities include disabled beggars. Additionally, DPOs should be funded and encouraged to work with government ministries, development agencies and civil society to inform disabled beggars about their legal rights and choices and to advocate on their behalf.

A good starting point might be for DPOs to reach out to disabled beggars. Time, transportation and physical limitations mean that many are not willing or able to come to DPO offices. Holding information sessions at places where disabled beggars gather, such as churches and mosques, as well as busy markets and stadiums, would be a good place to start. Information on DPOs, disability rights and inclusive development could also be disseminated via the mass media: 46 per cent of all beggars reported living in households that had either a radio or television set.

## Future research

Programmes that address education, job training and employment for people with disabilities rarely include disabled beggars. Little data is available on their numbers, the nature of their work, what their daily lives are like or what their long-term prospects or hopes for the future are.

There is a host of questions not answerable at this point on which further research is needed.

- ☛ Both longitudinal data – what happens to those who beg over the course of their lifetimes – and cross cultural data are needed.
- ☛ Information on the circumstances contributing to why some people with disabilities begin to work as beggars while others do not is needed
- ☛ Also needed is data on and why some successfully leave begging behind, while other do not.

- ☛ We need to better understand what the causal relationship is between limited or brittle social networks and resorting to begging.
- ☛ What impact does disability type, gender, difference in ethnic/minority background and other cross-cutting issues have on disabled beggars' ability to make a living?
- ☛ What interventions are most effective for subgroups of the disabled population who beg – (i.e.: children, the elderly, individuals with mental health impairments).
- ☛ How and when is begging considered a viable form of employment or even as entrepreneurship?
- ☛ What about countries where traditional begging has been linked with state-sponsored enterprises, such as selling lottery tickets?
- ☛ Even in circumstances where social protection schemes are available for those who are unemployed and disabled, some will chose to beg. What are the reasons or rational for why some disabled individuals beg when alternative means of support are available?
- ☛ How do disabled beggars interpret their own lives?

This pilot research project has raised more questions than it answers. It is hoped, however, that this study will encourage others to begin to see people with disabilities who beg as part of the larger disability community, instead of the most marginalized group within an already marginalized population. Much more data is needed from countries around the world to better understand the nature of begging by disabled men, women and children.

For millions of people with disabilities around the world, begging is a reality and for many, their only reality. The global disability rights and international development communities must begin to address the needs of this large, and largely overlooked group.

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30. Equivalent to US $45.40 to US $56.77 at time of survey
31. Equivalent to US $85.15 at the time of the survey
32. This would be equivalent to US$1.18-1.77 per day. The global poverty line is $1.25 per day.
33. US $6,000

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