

ORIGINAL ARTICLE

## Multiple Discrimination of an Ethiopian Woman with Visual Impairment

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### Abstract

*This qualitative study employed a case study design to explore the experiences of Hewan (Pseudonym), a 28-years-old Ethiopian woman who is with a visual impairment. In order to investigate this woman's distinct experiences, this study included two key informant interviewees in addition to her qualitative interview. She was chosen with a purposive sampling technique since she lives in Ethiopia's capital city, Addis Ababa. The dynamic consequences of gender, poverty and disability on this young woman's life is analyzed by applying thematic analysis. This study revealed that Hewan has experienced a number of detrimental pressures such as, internalized oppression, poverty, social marginalization and neglect, sexual discrimination, lack of access to basic necessities and poor healthcare. The results of this study demonstrated the considerable negative effects that gender and disability stereotypes have imposed on Hewan's psycho-emotional health. The findings also highlighted the critical need for families to be sensitive to the needs of their members and for their society's members so as to establish inclusive social environments.*

**Keywords:** Disability; Visual Impairment; Discrimination; Woman; Ethiopia; Qualitative case study

### Introduction

Disability requires social actions that integrate people with disabilities to society, and to modify the socio-cultural environment to support their full participation in all areas of social life (Emmett & Alant, 2006; Friedman & Rizzolo, 2018; Hagiwara, Dean, & Shogren, 2019; Reynolds, Palmer, & Gotto, 2018). In order to design a policy and programs which integrates women with disabilities in particular and persons with disabilities in general to the whole society, there is an urgent need to understand more fully the link between women with disabilities and the social exclusion they experience .

Women are traditionally assigned a low social, economic and political status in many developing countries including Ethiopia. As a result, girls and women with disabilities are often the least likely to receive support and access to education, to employment and to appropriate health services (African Child Policy Report [ACPF], 2014; WHO, 2011). Gender-role stereotyping which has its roots in the traditional culture in Ethiopia is

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pervasive in the lives of girls and women with disabilities (Tirussew, 2005). Women with disabilities have experienced exclusion by their communities, and they live in poverty. Different research evidences showed that persons with disabilities particularly women with disabilities are trapped in a cycle of poverty and disability that placed them among the poorest of the poor in developing countries such as Ethiopia (Burchard, 2003; Elwan, 1999; Emmett, 2005; Palmer, 2011))

The disability stereotyping compounded with gender-role dynamics has made women with disabilities the subject of multiple discriminations in many different facets of life (Emmett & Alant, 2006). The situation is severe in Ethiopia where women and girls with disabilities generally live in poverty, and they frequently experienced marginalization (Tirussew, 2005). This has its own implication on the complex relationships among gender, poverty and disability within the context of the dynamics of poverty and disability. Since disability increases the risk of poverty, poverty creates the conditions for increased risk of disability (Dowling, 2019; Emmett & Alant, 2006). Many people considered people with disabilities as “asexual” or sexually inactive (Yohannis & Boersma, 2006). Hence, women with disabilities are often unable to fulfill the cultural expectations of “good” wife and “good” mother (Tirussew, 2005).

Disability is a form of social oppression that specifically affects people with impairments (Thomas, 1999; Yohannis & Boersma, 2006). In Ethiopia, in Amharic language a person with visual impairment is perceived as Denbara (one who is disorganized and not bright) while a person with hearing-impaired is considered as Donkoro (one who cannot understand and tongue-tied) (Tirussew, 2005). These derogatory terms have detrimental effects on individuals with disabilities since they may internalize the pessimistic feelings of others about them. The experiences and identities of women with visual impairment illustrated that they are being marginalized from mainstream society, and this lead them to internalized oppression (Aderie, 2002; Goodley & Lawthom, 2006).

In Ethiopia, concerning people with disabilities, the emphasis is on explaining why a person has a disability rather than improving the lives of people with disabilities. Sadly to say, explanations regarding disability in Ethiopia are related to witchcraft or evil spirits, divine displeasure or a hereditary breach of social norms (Hiwot, 2015). In Ethiopia, Women who are with disabilities are also experienced with neglect, lowered self-esteem, depression and isolation (Tirussew, 2005), and as a result, they have many problems with activities of daily routines such as toileting, bathing and dressing (Yohannis & Boersma, 2006). So far, there are few qualitative studies that explore the experiences of Ethiopian women with a visual impairment despite the fact that many studies on Ethiopian women have used statistical methods (Biratu & Haile, 2015; Buehren, Goldstein, Molina, & Vaillant, 2019; Kibret, Chojenta, D’Arcy, & Loxton, 2019; Mulema & Nigussie, 2019; Setegn, Lakew, & Deribe, 2016). The author of the current study employed a qualitative case study design to create an interactive space for the study subject to share her thoughts and feelings about her visual impairment freely.

Given the relationship between societal perceptions of disability, and the experiences which are associated with disability, the following two questions were posed: (1) How does a woman with visual impairment perceive disability? (2) What psychosocial problems does a woman with visual impairment experience?

## **Methodology**

This qualitative study employed an in-depth case study design to explore the experiences of an Ethiopian woman who is living with visual impairment. Morrissey and Higgs (2006) indicated that a qualitative case study design allows researchers to illuminate the meaning of the lived experiences of people. In addition, a case study design enables researchers to obtain an in-depth, multifaceted understanding of a complex issue in its real-life context (Crowe et al., 2011; Yin, 2011, 2009). This is because a qualitative research is inherently subjective in which the author has engaged in continuous reflexive analysis to enhance the credibility of the research (Levitt, 2020).

## **Participant Selection and sampling method**

A gatekeeper (how can a gatekeeper select a research subject?) who lived in the neighborhood of Hewan's family identified her for participation in the study. A purposive sampling strategy facilitated Hewan's (pseudonym) recruitment, and it allowed the researcher to get rich data using in-depth interview to understand the real phenomenon from participant's perspectives (Lunenburg & Irby, 2008). The participant was a woman with a visual impairment and who was born and raised in the capital city of Addis Ababa, Ethiopia. Hewan spent kindergarten, the first, second, and third grades attending in one of the local schools. As a child, she performed well in school, and she had good interpersonal interactions with classmates and neighborhood children.

At the age of ten, Hewan's life took a turn for the worse. When she was in the third grade, she became ill with measles which led to her complete blindness. Her sight loss marked the turning point of her life. Her childhood dream was to be a medical doctor; however, following this traumatic event, she realized that this dream would never come true. Consequently, after she interrupted her education, she has to confine only in the home. She spends most of her life listening to religious songs, and to traditional music, and therefore, she completely isolated from the society.

## **Data Collection Procedures**

The author conducted two qualitative interviews with Hewan to understand her experiences of discrimination and exclusion. Essentially, interviews are appropriate venue to explore multiple realities (Stake, 1995), and they are efficient and valid methods to understand someone's perspective (Maxwel, 2005). Furthermore, interviews provide a rich description of individual's accounts (Yin, 2009). The two interviews were conducted on separate days, and they were conducted in the study subject's family's home with their consent. The first day interview lasted for approximately one hour and 20 minutes while the second day interview lasted for approximately one hour and 35 minutes. The main reason to conduct serial interviews (interviewing a participant more than once) is that it allows researchers to build deeper and more trusting relationship with participants, and it allows to understand their lives and experiences overtime. In addition, serial interviews provide rich opportunities to triangulate the participants' responses to previous interview.

Interview questions were open-ended questions, and an interview guide leads the line of inquiry to minimize the potential for free-floating (off-topic) discussion. Before the interview began, parents (mother and father) gave their verbal consent, and the author requested that the interview be conducted in their home in a separate room. Hewan was informed about the purpose of the study before beginning the interview in order to get her consent. The author informed her that she could terminate her participation at any time

if she, , felt discomfort during the research process. She was further got informed that she took part in this study as participant, and she was informed that the role of the author is to guide the interviews. After consent was secured from her and an informed consent letter ensured, she received the rights to confidentiality and anonymity.

Two key informant interviewees were selected from local community members who have first-hand knowledge about Hewan's sight impairment. Daniel (Pseudonym) is Hewan's older brother, and he is a 34 years of age. He is married and has a daughter and a son. Daniel is aware of how and when Hewan lost her sight. Ahmed (Pseudonym) is a 41 years old, and is a member of Hewan's local community. After understanding the purpose of the study, both Daniel and Ahmed gave their consent. Face-to-face interviews with the key informants were conducted at their preferred location. The duration of the interview with Daniel was approximately 45 minutes while the duration of the interview with Ahmed was approximately 40 minutes. Interviewing key informants allows researchers to triangulate her perception with the key informants', and it strengthens the credibility of the findings.

## **Thematic coding and data analysis**

The data were subject to thematic grouping (Braun & Clark, 2006), and the analysis process went through six phases. First, all interviews were collected via audiotape, and they were transcribed in to the Amharic language (the mother tongue of Hewan). Similarly, the interviews were translated into English and typed into Microsoft Word. Second, after repeatedly reading the transcripts, the transcripts were subject to coding. All coding was completed by hand without the assistance of computer-assisted qualitative data analysis software. Next, coded items were subject to revision and sorted out into possible themes. Then, the themes were undergone refinement by rereading coded extracts and data set. Then, there was the generation of clear names and concise definitions for each theme. The last step involved establishing reliability of the themes. Most importantly, this time intensive method was thorough, greatly to minimized the likelihood of researcher bias which directly influences the findings presented, and it ensured that only the most salient themes are in this paper.

## **Ethical considerations**

Ethical principles of confidentiality and anonymity were ensured by informing the study participant that her identity would not be revealed and pseudonyms would be used. Written informed consent was obtained from her to ensure voluntary participation.

## **Results**

Qualitative findings were subjected to triangulations, and they involved Hewan's family members such as her brother, and her neighbor which lead to a more comprehensive perspective of her life as a person with a visual impairment. The following seven themes emerged from the data coding: (1) Understanding of disability; (2) School Dropout; (3) Social Exclusion and Neglect; (4) Sexuality and Marriage; (5) Deprivation of Basic Necessities; (6) Poor Health Care; (7) Internalized Oppression.

## **Theme 1. Understanding of disability**

In response to the question “what does being visually impaired mean to you?” Hewan reported that her visually impairment meant she has not the ability to see the world at all like everyone else. In her own words, Hewan said:

Having loss of vision means unable to see permanently; being not able to read normal print. In my view, my impairment has only affected my vision ability, not all my other abilities. Yet, just after the loss of my vision, you see me being sighted guided. I have needed help with my daily practices like dressing, getting to toilet, bathing and so on. My disability defines me. Yes, I felt disabled because I am not getting assistance and support according to my special need. That makes me a disabled one in my life.

Hewan’s perception of having visually impairment implies limitations in the function of her eyes only. What makes her disabled is that she is not given some assistance and home environment adjustments to run her daily routines. She felt that her visual impairment has a rather big impact on her life which in turn has become part of her identity.

## **Theme 2: School Dropout**

Vision is fundamental to the learning process, and it is the primary basis of most traditional education strategies. However, in modern education systems, visual impairment frequently brings difficulties in mobility and reading even though majority of Schools in Ethiopia do not provide the required support for children with disabilities in terms of providing specially designed teaching and learning materials.

Accordingly, Hewan’s visual impairment compelled her to drop out of school. She explained it like this:

Just following my vision loss... I could not move independently, and I can’t read printed materials as I did before. The school where I attended my learning after my loss of vision had no special arrangements for students with disabilities to learn. Even you could not find a school in our locality which has services to meet student with special needs just like me. Such difficulties prevented me from continuing my education. My parents never sent me to other schools where education is arranged for visually impaired persons.

One of the Key informants reported that children with disabilities frequently do not start learning in the school, and even those who start an education before they lost their sight may drop out when they acquire a disability. In regards to this, Ahmed shared:

In Ethiopia, since there are barely services in schools which are available to children with special needs, young people with disabilities appear to be missing out of schools...those with visual impairment have limitations for mobility ...they are either confined to home or take [to the] street for begging.

This finding illustrates that schools in Ethiopia operate their educational delivery without considering impaired students because children can fully participate in the classroom on an independent basis. These statements highlighted the need for schools in Ethiopia to provide additional educational administrative rules, and social support to meet the range of needs of students with special needs in general, and students with visual impairments in particular.

### **Theme 3: Social Exclusion and Neglect**

Hewan expressed that she has limited access to her neighborhood, and to the community. Consequently, she has suffered from intense loneliness, and she faced great difficulties in making friends. Generally, members of her parents and the community do not view her as a vibrant person that is full of life. Rather, they view her as a submissive woman who can do nothing. She said:

Feelings of loneliness and exclusion have surfaced in my life. My parents do not take me to recreational places because they are shy of taking me into public places as they do for my siblings. They confined me to isolated life and do not let me out of [the] home. I am also denied the rights and identities ascribed for women. I am a forgotten being, and I am veiled behind the locked door. I have no voice on things that matter to me.

According to the above quote, Hewan's words suggest her degree of isolation is so extreme that she feels locked in. When commenting on his sister, Daniel made this comment, "I regret to say this... Hewan is the most forgotten individual in our family. Shameful to say...she is often isolated and alone...left behind family discussion and participation...she is very limited in where she goes. She is not seen as [an] equal member of our family." In a similar way, Ahmed reported, "In our community, Hewan, because of her vision loss, is seen as dependent and unable to make life choices and unable to participate as a citizen in local community activities. She has become being the subject of exclusion." It seems that negative perceptions of a person with a disability, namely stereotypes and prejudice, habitually marginalize Hewan. Consequently, this exclusion has caused her to be on the fringes of family and community participation, and thus, invisible and silent in life.

It appears that Hewan is experiencing the dual disadvantage of prejudice due to her visual impairment, and due to gender deep-rooted community. Being a disabled woman, she experienced a particular marginalization because she must remain behind a "locked door," which is a form of psychological demoralization and social oppression. She reported, "I carry with me the burden of gender-based discrimination in addition to my impairment. I feel a double disability." This comment suggests that Hewan is finding herself in difficult situation to balance the weight of gender and visual impairment discriminations.

### **Theme 4: Sexuality and Marriage**

Hewan expressed that she is subjected to aggravated forms of gender-based discrimination. Because of her visual impairment, she does not have the right to love and marry. She noted her parents see her as unmarriageable because she is not physically fit to be a wife and mother. She articulated:

My mother more often said to me “You are blind, so nobody can accept you for marriage.” She thought that nobody would accept me.... I feel that my families do not recognize my sexual needs and... the right to love. Since I cannot earn my living and not conform to being a wife because of barriers of access and attitude, my parents believe that I am unable to conform to the expectation of a wife. I have never had a romantic relationship, and I faced great difficulty in having a boyfriend. You know, I never had sexual things ...being stranded in [the] house because of no fault of your own, you have limited opportunities to hang out.

Hewan’s experience reveals that because of her visual impairment, her parents deny her the right to marry or have a sexual life because they believe that she cannot fulfill the expectation of sexual partners. Her narratives suggest that women with disabilities hide in the house, and they are thus, subjected to social and sexual isolation. The practices of social isolation diminish the opportunity of meeting persons who are with or without disabilities outside home. In regards to this, Daniel reported:

In a society where the values that predominant are physical prowess and beauty, and interdependence and connectedness, a woman with a disability like my sister is perceived as being incapable of fulfilling caretaking and nurturing responsibilities that define female roles in marriage. This incapability leads other people to devalue her role as a potential marriage partner... my sister still remains single as a result.

In regards to this theme, Ahmed expressed, “I would say that most people are very closed minded about sexual needs of people with disabilities....you know, in Ethiopia, people often say that a woman with a disability is incapable of raising children and incapable of making proper choices regarding reproduction.... She is seen as not having sexual interests.”This suggests women with disabilities in Ethiopian society remain an invisible group for love and sexual relationships. These negative views may greatly diminish the self-esteem of a woman with a disability.

## **Theme 5: Deprivation of Basic Necessities**

Hewan expressed her disappointment in her parents for depriving her of basic needs such as proper care and clothing. Unfortunately, this young woman usually does not have three meals a day. In addition to that, her parents frequently deny her the opportunity to socialize with individuals that come to her home. Hewan used these words to describe her plight:

I never often obtain a meal three times a day. I eat usually twice a day. The problem becomes worse when guests come to our home because I am forced to be confined in my bedroom. Because I do not have my own income source, I entirely rely on my family to fulfill my needs.

It appears that in poor countries like Ethiopia, people with disabilities in general and women in particular find it more difficult to adapt to living with a disability. Ahmed shared, “Women with disabilities encounter difficulties with moving physically and obtaining enough money to support themselves. It appeared to be difficult for Hewan to have her own income since she lost her sight....she has become totally dependent on her family.”Likewise, Daniel reported that “Hewan receives little care and support in our family.... Spending her days unengaged and bored. I would probability say that we could

not encourage her to participate in her own life.”

Hewan frequently wears old, thin clothes and she has problems keeping her clothes clean.

She explained:

The few clothes that I have are threadbare. I am not well clothed. I hardly have a change of clothes. I think you can look at what I wear...it is not clean. It needs washing. I could not wash it well by myself...if she feels well, my younger sister seldom washes my clothes.

In addition, not only does Hewan have considerable difficulty getting a haircut, she does not own personal washing items such as, shampoo, conditioner and soap. As a woman, she expressed that she has never had the opportunity to visit a beauty salon for hairdressing. While not having these items has made it difficult for Hewan to remain physically clean, it has also made her disheartened. She noted the following:

I want my hair cut well and [to] make it short... the tragedy is that my parents have never taken me to the beauty salon. I struggle to wash by myself, but you can imagine how difficult it is for me to wash my hair by myself. You know, I felt personally degraded because of not having personal washing items and soaps. It makes me more depressed about that and I have become dependent on others.

In addition to her lack of personal hygiene items, Hewan also has problems with her mobility. In particular, she has problems using the toilet because it is not accessible for her. She needs mobility aids such as a cane to walk independently, but she shared that her parents do not provide her with a cane because they were not interested in doing so. Most notably, a system without appropriate mobility aids is a handicap to her life. Hewan articulated, “I do not have a proper cane which I can use for traveling. I frequently asked my parents to buy the right cane, but they said... you go nowhere, so it is not necessary to buy it..... I am always suffering from using the inconvenient toilet. I had frequently asked my dad to arrange the toilet though he never did.” Daniel remarked, “My parents face tough financial choices. They are not being able to afford to pay for her special needs. They have inadequate income to fulfill her needs.” These narratives suggest Hewan has specific needs her parents did not (or could not) fulfill and she needs something different to gain the same opportunities as others. Unfortunately, this young woman’s visual impairment, poverty, and gender discrimination has increased her marginalization in Ethiopian society.

## **Theme 6: Poor Health Care**

Hewan expressed she has limited access to basic health services. She experienced minimal care and support from her parents as well as inaccessible procedures and limited services from health-care providers. When Hewan recalled an occasion when she visited health centers, she expressed she experienced ill-treatment from professional health workers. In particular, Hewan felt and devalued and did not receive compassion. She used these words to describe her experiences with health care professionals:

Some time ago, I was sick and was bed-ridden for more than two weeks, I recalled. My father then brought me a drug and took it with no drug prescription. My health condition worsened. At times, my father immediately took me to a health center to have examination. There, I observed that nurses and other health professionals delayed to treat



me. What... I received more was... lip service than actual treatment. I experienced that curing a woman with disability is not seen as being as urgent as curing a woman without disability. Even the available services did not consider my particular needs. By the time they saw me, I felt helpless and desperate.

The key informants frequently reported that health care providers do not perceive individuals with disabilities as clients that should have dignity when obtaining medical treatment. In the context of Ethiopia, it is difficult to understand Hewan's account without referring to her impairment. As Daniel noted, "I witnessed that health care professionals are indifferent to Hewan when she visited them [when she had become] sick. They [doctors] became reluctant to see her beyond her visual impairment [at] by the time. I feel like the lay public, health care professional view Hewan as having life of lesser worth."

These narratives suggested that the pain experienced by a woman that is the victim of discriminatory attitudes held by parents as well as health care professionals. It was truly unfortunate that Hewan's parents did not take her to health centers immediately when she became sick, or for health professionals to deny her equal treatment when she visited health centers. These examples reveal family and other social institutions such as schools and health centers reinforce existing prejudice and discrimination against persons with disabilities in Ethiopia. In essence, these narratives expose the violation of Hewan's human rights every day of her life.

## **Theme 7: Internalized Oppression**

Society's negative attitude towards Hewan has adversely affected her psychosocial well-being. She used the following words to describe herself and her value in society, "I am just a spare person... I have no place in my family... I feel that I am someone of no value in the society. I have gone through my life with no confidence.....what I am feeling is that I am powerless." It appears that Hewan has internalized that she was not a valued person and thus, she feels worthless.

As evidenced by her comments, Hewan has a negative view of herself, and she regards her condition as bleak and unchangeable. Sadly, she lacks self-confidence and is further demoralized when she considers the social discrimination that she is experiencing now as well as what awaits her in the future. It is noteworthy that Hewan's perceptions of herself link to the cultural values and traditions of Ethiopian society. As a person within the Ethiopian environment, she has learned to be convinced the society's misconceptions about her are valid, yet these views are deeply rooted in a culture that generally devalues women and disability. This illustrates the necessity for evidence informed social work practice in the community. In particular, these evidence-informed areas must consider the perspectives of the individual, the family and the community. Such a holistic perspective validates the multiple ecological contexts that influence the thoughts, feelings and behaviors of persons with disabilities in Ethiopia.

## **Discussion**

The purpose of this case study was to offer a qualitative analysis of disability as seen by Hewan, a blind woman who is living in one of the Addis Abeba's sub-city. This study included the viewpoints of two people of the local community who have firsthand knowl-

edge of the young woman's sight impairment in addition to the perspectives of the woman herself.

This study validated the relationship between disability and poverty in Hewan's life supporting earlier research (ACPF, 2014; Dowling, 2019; Elwan, 1999; Emmett & Altan, 2006; DFID, 2000). Hewan's life is unstable because she lacks access to sufficient food, clothing, healthcare, lavatories and assistive technology which contributes to her emotions of hopelessness and despair.

Hewan's socioeconomic situation deteriorated as a result of her school dropout since education plays a major role in determining one's quality of life. Notably, Hewan ceased attending school because the institution she attended did not provide accommodations for kids with disabilities to learn; this was not the result of her scholastic struggles. Sadly, her parents never gave her access to any other educational options. Important interviewees attested to Ethiopia's dearth of educational possibilities for those with impairments. According to these accounts, a large number of people in Ethiopia may have turned to begging as a result of inadequate education. As a result, it is crucial that kids with disabilities have regular and independent opportunities to engage in the classroom.

People can interact with others and discover their life's purpose through robust, encouraging social networks (Mekonnen, Gerber, & Matz, 2018; Perkins, Subramanian, & Christakis, 2015). Hewan's visual disability hindered her from reaping the benefits of social interaction as her comments showed above. Her parents, regrettably, treated her differently from her brothers. Hewan was kept alone and unable to leave the house by her parents, who prevented her from making friends who could help her. Her chances of forming solid social bonds that would inspire her to become more involved in the community were severely curtailed by her confinement at home. Her remarks align with earlier studies showing that people with disabilities frequently experience isolation (Boersma, 2008; Tirussew, 2005).

The comments provided by key informants also speak about the social marginalization of Hewan. Unfortunately, Hewan considered herself as forgotten being behind the society. She had no the right to say no in matters that were important to her life. Thomas (1999) described these violations of human rights as forms of social oppression based on disability and no doubt Hewan has experienced this. Most importantly, Hewan is subjected to multiple human rights violations. Sadly, she has limited opportunities to develop meaningful social relationships with family, and with those in her community which has led her to believe she has no value in her society.

In Ethiopia, women traditionally become wives and mothers. However, women with a disability have poor marriage prospects largely because many people believe that they cannot live up to society's demanding standards for women (Loeser, Pini, & Crowley, 2018; Tirussew, 2005). Daniel confirmed that the relationship between a woman's physical appearance, her ability and her likelihood to marry. Hewan's parents and members of her community do not believe that she has an interest in sex or a long-term relationship, and as a result, at the age of 28, she has never married or experienced sexual intimacy. Unfortunately, Hewan's family uses her disability as a reason why she is not a good candidate for love and marriage. In fact, her mother "often" reminds her why she could never attract a mate, however, this is not necessarily true. A growing body of research has highlighted the ability of individuals with a disability to be vibrant sexual beings (Kattari & Turner, 2017; Loeser et al, 2018; Watson & Vehmas, 2019). These findings clearly suggest that Hewan like any other persons with disabilities can be a vivacious, sexual woman.

*Hewan so much wants romance in her life which is what makes her intimate interactions so devastating. Notably, despite her desire for a romantic relationship, she doesn't get many chances to hang together. People in Ethiopian society typically think that women with impairments are incapable of managing their lives or starting families (Tirussew, 2005). Hewan's psycho-emotional well-being was severely compromised by the widespread prejudice and misconceptions about disabilities in Ethiopia. This young woman's psycho-emotional health is thus being threatened since people in her social circle do not pay attention to or comprehend her needs and interests. It is impossible for them to know Hewan is interested in romance, sex and other things since they mistakenly believe she is not interested in sexual intimacy.*

Food, shelter and clothing are necessary to exist (Aye, 2019; Rahman, 2018), however, Hewan lacks these basic needs. She does not have personal care items, and not having these items has taken a huge toll on her mental state. Added to this, Hewan has few clothes, and her clothing is in poor condition ("thin") and is not clean. Besides, it appears that a family member who could assist with cleaning her clothes is unwilling to do so. Furthermore, this young woman said that it is difficult to wash her own hair, and she has never been to a beauty salon. Even worse, when guests come to her home, her family keeps her confined to her bedroom. If this young woman were able to financially provide, she could help minimize her dependence on others and elevate her self-esteem. This dependence on others keeps Hewan in a state of inactivity. The inability to move freely has had a great impact on Hewan's quality of life. This comment suggests that all families in Ethiopia, and especially those that are poor, should have toilets that are easily accessible to persons with disabilities.

Hewan's comments provided profound insights into her physical, mental, and emotional wellbeings. One thing she shared is that although she has limited access to basic health services, minimal support from her parents and health-care providers has worsened her mental and emotional condition. After a two week illness for which her father brought her to the health center, she noticed that she received more lip service than actual treatment. By the time the health care staff saw her, she felt "helpless and desperate." No person seeking medical care should feel that his or her life has no worth. Therefore, it is imperative that medical staff become more educated about the importance of dignifying individuals and root their service to others from a position of sensitivity.

Hewan's inability to establish lasting connections has led her to develop negative feelings about her self-perceptions. According to earlier researches (Aderie, 2002; Goodley & Lawthom, 2006; Tirussew, 2005), Hewan's personhood and dignity have been eroded as a result of her having "internalized" the pessimism, prejudice and discrimination that others have against her. According to earlier research, people with disabilities are more likely to experience psycho-emotional dysfunction if they don't receive the support and acceptance they need from their family, and they aren't allowed to interact with their peers (Kattari & Turner, 2017; Tirussew, 2005). The fact that Hewan felt she lacked intelligence, had no control over her life and questioned her existence is especially depressing. What's worse is that she didn't think things would get better for her in the upcoming years. Hewan really stated that she believes her current health issue is permanent and will only become worse with age.

## **Limitation of the study**

The findings and conclusions of this study are based on the narratives of a single woman Hewan who is with visual impairment in Addis Ababa, Ethiopia. The experiences of

Hewan may not be a good representative of the experiences of women who are with visual impairments, and who are living in Addis Ababa. Larger representative samples of women with visual impairment and quantitative surveys are needed to confirm the findings of this study.

## **Implications for practice**

This study shows that Hewan's visual impairment does not limit her; rather, it disarms her family's and her community's unfavorable opinions and social obstacles. Social workers must therefore be cognizant of the diverse circumstances in which people live, especially those pertaining to gender, disability, socioeconomic position and literacy (Clifford, 2019; Dowling, 2019; Horner, 2018). Four significant ramifications of this study exist for social work practice:

First, this study speaks to the need for social work practitioners to develop and maintain relationship with Hewan's family to improve the daily oppressive life of Hewan at the family level. Further work in this area can help the family to understand the thoughts and feelings of Hewan within her family. Second, this study highlights the need for social workers to create public awareness to protect women with disabilities from various forms of human rights exclusions at the community level. One part of this community awareness is inclusion, or the validation of each person in the community. Another part of this community awareness is to help individuals recognize the unique strengths of each person in the community.

Thirdly, this study emphasizes how important it is for social workers to break down the various social obstacles that surround people with disabilities. Social workers, in particular, can assist in organizing families, communities and other interested parties to uphold laws and declarations guaranteeing women with disabilities equal access to information, employment opportunities, education and health care. Social workers ought to put up endless efforts to guarantee that women with disabilities are valuable and contributing members of society. This study concludes by discussing the need for social workers to inform families and the larger community about the significance of ensuring that people with disabilities are able to support themselves financially in the future. Hewan's purpose in life was gone when she became blind because she had to rely on other people to survive. Even in the absence of the establishment of separate schools, the unique needs of the disabled can be satisfied by the educational institutions that already exist. While one component of this activity may focus on developing the skills required for success in the job, another may center on the ways in which individuals with disabilities can exercise agency over their means of sustenance.

## **Conclusion**

This qualitative case study has provided great insight into the distressing experience of Hewan, an Ethiopian woman with visual impairment. This study reveals Hewan's social exclusion in every realm of social life and denial of basic human rights people with no disability take for granted. Like everyone, Hewan is a human being with feelings, hopes, goals and dreams. Yet, she felt frustrated with life because of ignorance and prejudice about her from the society. Hewan explained that society (her family and the local community) place more social barriers in her life than her visual impairment. This study revealed that it is the disabling nature of the social environment both at home and at the neighborhood that has prevented Hewan from enjoying an active social life.

This study revealed the simultaneous effects of gender, poverty and disability on the life of Hewan. This poor woman experienced low psycho-emotional well-being such as neglect, lowered self-esteem, limited life choices and exclusion because of her disability. This in turn, caused her to “internalize” the combined roles of gender and disability stereotypes. This work reveals the importance of making families and communities aware of the thoughts, emotions and behaviors of people with disabilities. At this point, I turn the reader’s attention to Hewan’s words: “I am just a spare person... I have no place in my family...” Furthermore, I know Hewan was not born perceiving herself in this way. This young Ethiopian woman believes she has “no place” in her family or “no value in society” because her family and members of her community do not fully integrate her into society. The full acceptance and inclusion of individuals like Hewan will bolster her confidence and help her move from a state of powerlessness to one of power. In closing, I urge everyone to open their minds and hearts and get the strength to accept people where they are, help them get to where they want to be and be more understanding as they take their place in the world alongside us.

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