Disability & Deafness in North East Africa

Egypt, Sudan, Djibouti, Eritrea, Ethiopia, Somalia

Introduction and Bibliography, mainly non–medical, with historical material and some annotation

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For a list of abbreviations used in this document, consult the glossary.

Djibouti, Eritrea, Ethiopia, Somalia (post 1955)

Based in Ethiopia


Views from officers of the National Assoc. of the Deaf, Ethiopia.


ERITREA. (2004) Interim Poverty Reduction Strategy Paper. Asmara. 75 pp. Amidst detail of the weakened state of the post–war national economy, and the straitened circumstances in which much of the population lives, paragraph 4.50 on "Disabled." (p. 45), outlines some services for "vulnerable and disadvantaged persons, including disabled war veterans, and the very poor." Special education is being provided for some deaf or blind people, and "skill–training facilities for all disabled aimed at job creation."


Three further papers on similar topics by Grassivaro Gallo et al. are cited, two being in Italian.
Summaries of the main results of field investigations conducted from 1981 and published from 1985 onward, by Grassivaro Gallo and colleagues.

Eleven cases of hydrocephalus in young children were treated in hospital at Mogadishu by modern medical methods. Interviews were conducted with relatives, and also some traditional doctors. It was learnt that children showing signs of hydrocephalus (madaxwein = big head) were first taken to a religious practitioner for traditional therapy using Qur'anic verses worn as amulets, or where the ink has been dissolved in water; secondly, a traditional Somali doctor used red–hot wooden sticks to produce small burns on the scalp. The aim of both procedures was to drive away the evil spirit believed to be causing the head swelling. (For the modern medical approach, these cauterisations, with some subsequent local infections or complications, presented a serious hazard).


Hall made two visits to Ethiopia, from Dec. 1958 to April 1959, and also briefly in 1960, having arranged beforehand to travel around hospitals in Addis Ababa and the provinces, "to examine neurologic patients — in particular, those with all types of paralysis." While examining more than 300 patients, Hall and a Swiss colleague identified (with some caution) a large number of neurological conditions, discussed them with Ethiopian and European physicians treating the patients, and named them in this paper.

Gives some disability data, policy and implementation from the Govt Eritrea, Dept Social Welfare, Min. Labour and Human Welfare. National census in 2004 identified 150,000 persons with disability. Community Based Rehabilitation programs were active in half the country, reportedly providing local skills training for many disabled people. Some war disabled veterans were receiving a monthly benefit and free medical services.


Based on a local consultancy report, the document covers basic indicators on Ethiopia, some disability data, official policies, laws and regulations, available medical, educational and welfare services, activities of disability–related organisations, and bilateral aid projects.

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KELLY F.C. & SNEDDON W.W. (1960) Prevalence and geographical distribution of endemic goitre. *Endemic Goitre*, pp. 27–233. Geneva, World Health Organisation. In this global study, pp. 131–37 cover goitre reported in Egypt, Sudan, Ethiopia, Eritrea, French and British Somaliland, with references from 1905 to 1958 (p. 224). Dr. Mérab (q.v.) described an indigenous treatment in which a live porcupine was attached to a large goitre, drawing off much blood and colloid fluid. Some doubt was cast on the suggestion of goitre in British Somaliland.


KOKKALA, Heikki (Ed.) *Providing Special Education For Those Who Need It In Developing Countries*. Helsinki: Min. Foreign Affairs.
Includes material on Ethiopia and Eritrea.


SCHOLLER, Heinrich (1975) Rehabilitationarbeit in Aethiopien mit und fuer Blinde. (Rehabilitation work in Ethiopia with and for the blind.) *Horus* 2: 20–24, 46–48. Professor Scholler wrote further items in German concerned with blind people in Ethiopia, listed on his website.


Brief report on the post–conflict socio–economic conditions in the Independent Republic 
of Somaliland, and the services and apparent public attitudes toward disabled people. 
Some non–government organisations are making efforts to provide services and facilitate 
the expression of disabled people's own views, in conditions of considerable difficulty.

UHLMAN G. & MINAS M. (1975) Perception of mental illness by rural high school 

VEDANTHAM V & RATNAGIRI P.K. (2003) Causes of severe visual impairment and 
Letter responding to Kello & Gilbert, 2003

Bibliography with some North East African material.

der Haar & F. Kavishe (Ed.s) *Proceedings of the Workshop on Iodine Deficiency 


(10) 4–7.

London: Lancaster Trust. 
Boroma in Somalia/Somaliland

Disabilities and their average and high–achieving peers. *Intl J. Disability Development & 
Education* 51 (3) 253–69.

ZERIHUN N. & MABEY D. (1997) Blindness and low vision in Jimma Zone, Ethiopia: 

ZOTOVIC B. (1980) Proposal on the organization of training courses for rehabilitation 
aides (assistants) in Ethiopia. ILO Technical Cooperation Programme.