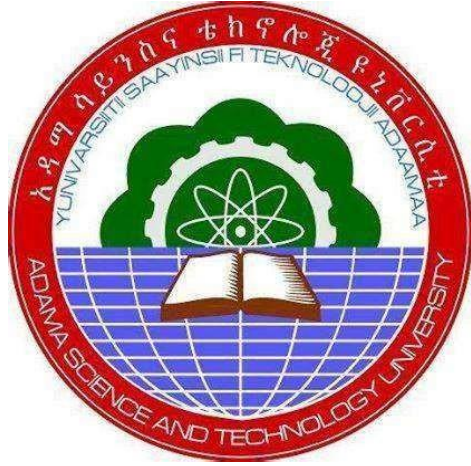


**ASSESSING THE ACCESSIBILITY OF STREET FOR INDIVIDUALS
WITH DISABILITIES: THE CASE OF MEXICO AND ITS
SURROUNDINGS, ADDIS ABABA, ETHIOPIA**



HELA KEDIR KERGA

**A Thesis Proposal Submitted to the Department of Architecture
College of Civil Engineering and Architecture,
Office of Graduate Studies
Adama Science and Technology University**

**June 2025
Adama, Ethiopia**

**ASSESSING THE ACCESSIBILITY OF STREET FOR INDIVIDUALS WITH
DISABILITIES: The case of MEXICO and its surroundings, ADDIS ABABA, ETHIOPIA**

HELA KEDIR KERGA

ADVISOR: SITOTAW HAILE (Ph.D.)

**A thesis Submitted to the Department of Architecture
College of Civil Engineering and Architecture,**

Office of Graduate Studies

Adama Science and Technology University

June 2025

Adama, Ethiopia

DECLARATION

I declare that this thesis entitled “**ASSESSING THE ACCESSIBILITY OF STREET FOR INDIVIDUALS WITH DISABILITIES: The case of MEXICO and its surroundings, ADDIS ABABA, ETHIOPIA**” is my own work and has not been submitted to any university for a similar purpose. The references used in this proposal are duly recognized by proper citations.

Hela Kedir

Name of student

Signature

Date

RECOMMENDATION OF ADVISORS/SUPERVISORS

I, the major advisor/supervisor of this research, hereby certify that I have closely advised/supervised the student while developing this thesis and read the draft thesis/dissertation entitled “**ASSESSING THE ACCESSIBILITY OF STREET FOR INDIVIDUALS WITH DISABILITIES: The case of MEXICO and its surroundings, ADDIS ABABA, ETHIOPIA.**” prepared under my guidance by **Hela Kedir**. Therefore, I recommend the submission of the revised version of the thesis to the department following the applicable procedures.

SITOTAW HAILE (Ph.D.)

Supervisor’s Name

Signature

Date

APPROVAL PAGE THESIS

I the advisor of the thesis entitled "**ASSESSING THE ACCESSIBILITY OF STREET FOR INDIVIDUALS WITH DISABILITIES: The case of MEXICO and its surroundings, ADDIS ABABA, ETHIOPIA**," and developed by **Hela Kedir**, hereby certify that the recommendation and suggestion made by the board of examiners are appropriately incorporated into the final version of the thesis.

Major Advisor/Supervisor

Signature

Date

Co-advisor/ Co-supervisor

Signature

Date

APPROVAL BOARD OF REVIEWERS

We, the undersigned, members of the Board of Examiners of the thesis by **Hela Kedir Kerga** have read and evaluated his thesis entitled “**ASSESSING THE ACCESSIBILITY OF STREET FOR INDIVIDUALS WITH DISABILITIES: The case of MEXICO and its surroundings, ADDIS ABABA, ETHIOPIA**” and examined the candidate during open defense. This is, therefore, to certify that the thesis is accepted for partial fulfillment of the requirement of the degree of Master of science in Urban Planning and Design.

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Finally, approval and acceptance of the thesis/dissertation is contingent upon submission of its final copy to the Office of Postgraduate Studies (OPGS) through the Department Graduate Council (DGC) and School Graduate Committee (SGC).

_____ Department Head	_____ Signature	_____ Date
_____ School Dean	_____ Signature	_____ Date
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ABSTRACT

This study investigates the convenience and accessibility of streets in Mexico, Addis Ababa, for persons with disabilities. Although national and international frameworks advocate for inclusive urban environments, individuals with disabilities (PwDs) in Addis Ababa continue to encounter significant physical and social barriers in public spaces. Streets in central locations like Mexico remain largely inaccessible due to poor infrastructure design, insufficient planning, and weak policy implementation. The primary objectives of this research were to evaluate the existing condition of the street infrastructure in Mexico for PwDs, identify policy-related and institutional factors that hinder accessibility, and suggest effective and feasible solutions to enhance convenience and inclusion. To address these goals, the study employed a mixed-methods research design combining both quantitative and qualitative approaches. A total of 190 individuals participated, of whom 172 were people with physical disabilities selected purposively to ensure their direct experience informed the findings. The remaining respondents were municipal officers and professionals working in disability-related infrastructure planning, also selected through purposive sampling. Data sources included structured questionnaires, key informant interviews, field observations, and document reviews. Quantitative data were analyzed using descriptive statistical tools such as means and standard deviations, while qualitative data were examined thematically. The findings reveal that a significant proportion of respondents perceive the streets in Mexico as highly inconvenient due to the lack of curb ramps, poorly maintained sidewalks, inadequate signage, and limited rest spaces. A major barrier to improvement is the lack of awareness and technical knowledge among city planners and infrastructure implementers regarding the needs of PwDs. Even where funding is available, the absence of inclusive design considerations leads to ineffective outcomes. The study recommends that the city administration conduct a detailed accessibility audit in Mexico, implement phased upgrades starting with the installation of ramps and sidewalk repairs, and prioritize meaningful participation of disability communities in planning. These measures are crucial for building a more inclusive, equitable, and user-friendly public environment in Addis Ababa.

Keywords: Disability, street, convenience, Accessibility, Impairment

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LIST OF ABBREVIATIONS/ACRONYMS

CRPD: Convention on the Rights of Persons with Disabilities

CSA: Central Statistics Agency

ICT: Information and Communications Technology

MDGs: Eight Millennium Development Goals

MoLSA: The Ethiopian Ministry of Labor and Social Affairs (MoLSA)

NPA: National Plan of Action for Persons with Disabilities (NPA)

PwPDs: People with Disability

SPSS: statistical package for Service Solutions

UNDP: United Nations Development Program

WHO: World Health Organizations

CHAPTER ONE

INTRODUCTION

1.1. Background of study

Disability inclusion has evolved over the last two decades, particularly since the adoption of the international CPRD or Convention on the Rights of Persons with Disabilities (CRPD). The CRPD has been ratified by 184 countries worldwide (Stein, 2023). The World Report on Disability estimates that individuals with disabilities make up at least 15% of the population in each country (WHO, World Bank, 2011).

At the global level, accessibility to infrastructure such as streets, public buildings, and transportation systems is considered a critical aspect of inclusion. Several countries have taken significant steps to implement inclusive urban planning measures like ramps, tactile paving, and accessible public transit. However, implementation is uneven, especially in low- and middle-income countries like Ethiopia, where systemic and resource-related barriers persist.

Despite global advancements in disability inclusion, people with disabilities in Ethiopia continue to encounter severe and persistent barriers to full participation in society. A key issue is a lack of trustworthy, disaggregated data on disability, which severely hinders evidence-based policy formation and service delivery (WHO and World Bank, 2011). According to the same data, Ethiopians with disabilities account for at least 17.6% of the overall population, which is estimated to have surpassed 110 million in recent years. However, the lack of adequate data from the Central Statistics Agency (CSA) makes it impossible to plan targeted interventions. This estimate is expected to rise due to traffic accidents and recent war actions in the country.

Infrastructural impediments such as inaccessible public buildings, transit networks, and pedestrian walkways further marginalize this group, limiting their access to education, employment, and healthcare (UNESCO, 2018). Compared to global benchmarks, Ethiopia lacks basic accessibility features in its public infrastructure, and newly constructed spaces rarely adhere to universal design principles. In urban settings, tactile paving, curb ramps, and barrier-free sidewalks are minimal, while in rural areas infrastructure is almost entirely absent.

Stigmatization and unfavorable societal attitudes persist, resulting in social exclusion and discrimination in both urban and rural communities. Furthermore, recent wars and an increase in traffic-related injuries are contributing to an increase in disability rates, putting further strain on

an already underfunded support system (Human Rights Watch, 2020). These problems highlight the critical need for better institutional frameworks, inclusive infrastructure development, and ongoing public awareness campaigns to protect the rights and dignity of Ethiopia's people with disabilities.

The Ethiopian Ministry of Labor and Social Affairs (MoLSA) released the National Plan of Action for Persons with Disabilities (NPA) in 2012, revealing that 95 percent of Ethiopian citizens with disabilities live in absolute poverty, with 84 percent living in rural areas with little or no access to basic services (Ethiopia Ministry of Labor and Social Affairs, 2012).

It is helpful to explore the evolution of disability's 'models' over time to understand how disability is currently seen and to state the concerns.; The first model is the “Traditional/Charity model (United Nations, 2016)”, which considers society as a donor for PWDs and considers PWDs as a disjoint set of society due to mythical, superstitious, and religious beliefs (still exists in a variety of scenarios) to the most recent model “The Human Rights-Based Model (Amponsah-Bediako. K., 2013)”, which goes beyond viewing disability as a social construct and establishes that disability can and should be treated as an inherent identity in and of itself; at its core, it is a model that creates a wide space for the term inclusion; The idea of inclusion holds that everyone has the same rights and obligations and is entitled to full participation in all facets of society. (CDC, 2020).

Many studies were conducted during these periods of model evolution that concern the livability of PWDs in the community internationally and nationally. Many awareness platforms and documents are found prepared regarding spatial and non-spatial accessibility and livability. However (to my knowledge) almost no research has been done, especially locally downsized to the convenience of street for people with disability regardless of its importance to create an opportunity to lead a better life for everyone.

1.2. Statement of the Problem

Despite the importance of accessibility in transportation infrastructure, many roads and pathways in Addis Abeba are inaccessible to people with disabilities. The Ethiopian Center for Disability and Development (ECDD) conducted an accessibility audit in 2016 and discovered that less than 10% of public buildings and street-level infrastructure in central Addis Abeba were wheelchair accessible. This frequently includes the absence of curb ramps, steep or broken sidewalks, and a lack of tactile signs for the visually impaired. Even when infrastructure exists, it is usually obstructed or badly maintained, making it ineffective for those who require it the most.

There is also a lack of enforcement of accessibility standards. Although Ethiopia ratified the CRPD and introduced the National Building Code (Proclamation No. 624/2009), municipal enforcement remains limited. According to the Ministry of Urban Development and Construction (2021), compliance checks are rarely conducted, and non-adherence often goes unpenalized. The implication of this weak enforcement is the continued marginalization of people with disabilities in urban life, restricting their autonomy and limiting their access to essential services.

As a result of these shortcomings, people with disabilities face substantial challenges in active transportation and full participation in society. A study by Light for the World (2019) found that 71% of people with disabilities in Addis Ababa could not independently reach basic services such as schools, clinics, or markets. This leads to reduced mobility, greater dependence on caregivers, and loss of income opportunities, which further deepens the cycle of poverty and social exclusion.

While there is increasing awareness about inclusive urban design, major research and implementation gaps persist. The problem goes beyond general observations; individuals face daily obstacles such as poorly designed curb ramps, uneven pavements, inadequate pedestrian signage, and the absence of auditory signals at crossings (World Health Organization, 2011). These limitations compromise their safety, independence, and right to access public spaces.

Moreover, there is limited empirical data on the quality and condition of street infrastructure in key areas like Mexico . Although several studies have been conducted in Addis Ababa related to urban accessibility, localized and disability-specific assessments remain scarce, particularly regarding how individuals with different impairments navigate and experience urban streets. Cultural perceptions and limited municipal funding also shape whether accessibility projects are prioritized (UN-Habitat, 2013).

In addition, implementation and enforcement of accessibility requirements are understudied, especially concerning how national policies are translated into on-the-ground changes. The implication here is that in the absence of data and oversight, many disability inclusion goals remain theoretical and not reflected in physical infrastructure or planning practices.

These concerns underscore the critical need for evidence-based research that combines technical assessments of street conditions with community-informed opinions. To improve accessibility, particularly in high-traffic areas like Mexico, urban development must consistently consider the requirements of people with disabilities during the design, construction, and maintenance stages. This includes adapting existing infrastructure and strictly enforcing accessibility standards. By addressing these issues, Addis Ababa may work toward developing more equal and accessible public places that allow people with disabilities to fully participate in economic, social, and cultural activities.

1.3. Objective of the study

1.3.1 General objective

The general objective of the study is to Assess the Accessibility of street in Mexico, Addis Ababa, Ethiopia for Individuals with Disabilities.

1.3.2 Specific objective

- To assess the convenience of the existing street in Mexico, Addis Ababa
- To analyze the factors affecting the inconvenience of Mexico street to people with disabilities
- To propose potential strategies for current challenges and facilitators to enhance the convenience of streets for people with disabilities

1.4. Research question

This research aims to answer the following questions:

- What are the standards of streets to be inclusive, disability-friendly and what are the inconveniences on the study area?
- What are the factors that affect the inconvenience of street for people with disabilities?
- What is the possible solution to enhance the convenience of the street for people with disabilities?

1.5. Significance of Study

This study provides critical insights into the accessibility challenges faced by people with disabilities in Mexico, Addis Ababa.

1.5.1 For policy makers - it highlights gaps between disability policies and their implementation, offering data-driven guidance to strengthen inclusive urban policy and resource allocation.

1.5.2 For city administration- it identifies specific barriers like lack of ramps, poor sidewalks, and signage helping prioritize upgrades and enforce accessibility standards.

1.5.3 For future researchers - the research contributes valuable local data to an underexplored topic, serving as a foundation for further studies on inclusive urban planning and disability mainstreaming in Ethiopian cities.

1.6. Scope

This study focuses on the evaluation of street inconvenience for people with disabilities in Addis Ababa City particularly Mexico. This research has three major scopes: subject, location, and time. The major issue (subject scope) of this study is to investigate the accessibility of Mexico, Addis Ababa Street for people with impairments. The population where the research take will be covering individual with non-ambulant disability, ambulant disability, vision impairment, and hearing impairment, The study aims to investigate the convenience of street for people with disability offsetting 100m along three sides of the commercial corridor Ras Mekonnen Ave from Mexico roundabout to WabiShebele Hotel, to Stadium, and to Lideta. Thematically, the study consists of determining the convenience of the street and its cause and impact on people with different disabilities. The study is a one-time study where necessary data required for the research will be collected at once. Therefore, this research is a cross-sectional or onetime study. Geographically, this study is limited to commercial corridor Ras Mekonnen Ave from Mexico roundabout to WabiShebele Hotel, to Stadium, and to Lideta in Addis Ababa.



Figure 1 Map of Mexico, Addis Ababa, Ethiopia:

1.7. Definition of Operational Terms

Disability: is fundamentally the result of an interaction between impairments (physical, sensory, intellectual, and mental) and external barriers in society (attitudinal, institutional, environmental).

Streets: are Link space and locations while also serving as spaces. Their physical proportions and character are defined by the size, scale, and character of the structures that line them. Streets range in size from wide boulevards to little, intimate pedestrian streets (Benabdallah, 2012).

1.8. Limitation of the study

No research process is without its challenges, and this study also encountered several limitations, particularly during the data collection phase. A key challenge was the lack of well-organized secondary data, which made it difficult to support the primary findings with existing literature and statistics. Additionally, some respondents were unwilling to participate or share information openly, which limited the richness and reliability of the data. Another major obstacle was the difficulty in communicating with deaf participants, who required the presence of mediators during interviews. While their inclusion was essential, some of these individuals, being part of a vulnerable group, showed signs of distress and occasionally exaggerated their responses, affecting data consistency. Moreover, financial constraints further limited the research process by restricting access to broader resources and reducing the overall scope of the study. These limitations collectively posed significant barriers to the smooth execution of the research.

1.9. Organization of the study

This research is structured into five chapters. The first chapter concentrated on the study's introduction, which covers the study's background, problem statement, aims, importance, scope, and limitations, as well as a description of the study region and an operational definition of important words. The study's literature review, which includes both theoretical and empirical literature pertaining to the problem, is included in the second chapter. The research methodology is covered in the third chapter, which also includes the sampling strategy, data sources, data gathering techniques, analysis, and presentation. The data analysis and interpretation are covered in detail in the fourth chapter, and the fifth chapter concludes with suggestions for potential solutions to enhance the transportation system, which is essential for the mobility of those with disabilities.

CHAPTER TWO

REVIEW OF LITREATURE

2.1. Understanding disability

Disability is a part of human variation. As a result of poor early health care and nutrition, aging populations, natural and man-made disasters, and bloody civil conflicts, the estimated 15% of the world's population that is disabled is expected to increase. Approximately 80% of people with disabilities live in low and middle-income nations, with a disproportionate number being underprivileged (World Bank and WHO, 2011).

According to estimates from the World Bank and WHO (2011), 17.6% of Ethiopians are thought to be disabled overall, and 95% of them live in poverty (National Plan of Action for Persons with Disabilities in Ethiopia, 2012–21). This number is expected to rise due to the ongoing conflict in the nation as well as the previously listed causes. According to estimates, more women than men live with disabilities worldwide. Estimates indicate that 13% of men and 19% of women, respectively, are disabled. (UN Women, 2017). The situation is even worse in low- and middle-income countries, where women make up as much as 75% of the disabled population, with 65–70% of them residing in rural areas.

2.1.1 Defining Disability

The way that people understand disability varies between cultures, according to new research, and it changes over time, it results in the emergence of several definitions of disability. Disability is defined as relationships between individuals with disabilities and environmental and behavioral constraints that prevent them from fully and equally participating in society (UN, 2007) in the United Nations Convention on the Rights of Persons with Disabilities (CRPD). Similarly, a disability is described as any mental or physical condition that makes it more difficult for the affected individual to engage in specific activities (activity limitation) and engage with their environment (participation limits) by the US Centers for Disease Control and Prevention (CDC, 2020). Those with long-term physical, mental, intellectual, or sensory disabilities that, in combination with other barriers, may prevent their full and effective involvement in society on an equal footing with others, is the further definition of disability provided by the CPRD.

Disability, according to the World Health Organization (2001), is the result of social constraint that limits people with physical impairments from fully participating in society. It can also be defined as the obstacles that prevent someone from participating in some aspects of life. In addition to the definition, the Department for International Development (DFID, 2004) views disability as a social as well as a health concern, when a person's physical, intellectual, or mental condition determines their inability to engage in specific social activities.

When Addo (2014) defined disability as the loss of a body part or a health issue, he provided support for this definition. According to the medical model, a person's physical or medical condition defines their impairment, which is viewed as an individual problem. It is considered a disability when a person is unable to see, walk, or hear due to a visual, mobility, or hearing impairment, for example. The medical model, commonly referred to as the "personal tragedy model," views the challenges faced by individuals with disabilities because of the way their bodies are formed and used.

When defining disability using the medical approach, planners and policymakers may identify them based on the tasks that they are unable to perform; as a result, they often focus their efforts on "compensating" those with impairments for physical defects. Because it is considered that persons with disabilities need medical assistance, it is easy for them to be perceived under this model as weak and flawed, needy, and dependent, and usually incapable of obtaining decent jobs, living independently, or engaging in society. Curing or rehabilitating the person to correct the "defect" and get him or her closer to "normal" is frequently the intended answer to these issues. Carson (2009) several academics have questioned the medical concept of disability, citing the following arguments (Lang et al., 2001; Groce et al., 2004; Gregorius, 2014). First, according to SOSA (2010), the medical model has contributed to their low self-esteem, underdeveloped life skills, inadequate education, and high unemployment rates. This is especially true when someone is quickly judged unable to perform tasks that those who are abled do.

Identification with the medical model is thought to be a contributing factor in the breakdown of individuals' natural relationships with their families, and society since it may unintentionally lead to the social denigration of disabled people, which may arouse sympathy for them. In addition to causing low self-esteem, the medical model fails to consider how society plays a part in creating environments that limit the mobility of people with disabilities.

Such an omission ignores society as a barrier to mobility and instead relates mobility issues exclusively to deficiencies in human components (Dubois & Trani, 2009).

Furthermore, there is disagreement about the meaning and context of the term "normal." According to Gregorius (2014), blindness to those who are visually impaired can also be seen as normal for those who have visual impairments; hence the term "normal" lacks a precise definition. According to the social model, disability is a social construct, and the methodical repression, exclusion, and discrimination against disabled people are the result of unfavorable social attitudes and subpar physical environments (Lang et al., 2001; Shakespeare & Watson, 2002).

The United Nations (2013) When developing the social concept of disability, they distinguished between impairment and disability. According to this perspective, impairment results from a loss in a person's emotional or physical makeup. The term, which aligns with the medical definition of disability, focuses mostly on the loss of a human bodily component. In this sense, the social model renames the medical model's definition of disability as impairment. According to the social model, disability is the result of an individual's interaction with their environment; in this scenario, the individual may or may not have impairment. According to this concept, rather than the lack of a body, the opposing factor is the features of the physical or architectural environment. Since the social model of disability reflects the experiences of the disabled population, it has gained more acceptance. As a result, removing structural, economic, social, psychological, and other barriers that are socially constructed would either encourage participation in or impede the activities or choices of people with disabilities.

According to Carson (2009), anti-discrimination laws such as the Disability Discrimination Act (1995) of the UK and the America Disability Act (1990) of the US should be implemented since they are designed specifically to safeguard the rights of individuals with disabilities, particularly when it comes to their interactions with society. Such laws and programs of positive action, according to Carson, have become more popular as a result of rising of awareness about the unfair restrictions that disabled people face when trying to participate in a wide range of social activities that are available to and enjoyed by people without disabilities. The CRPD is an international convention that strives to bridge the gap in the current global discourse on disability by providing a globally recognized definition of what defines a disability. It represents a significant milestone in the history of disability rights (Iriarte 2016, 11). This international agreement offers a foundation for the understanding of disability worldwide.

Individuals with long-term physical, mental, intellectual, or sensory impairments may face challenges that prevent fair participation in society, is how the CRPD defines people with disabilities (as cited in Iriarte 2016, 11). According to Lewis et al. (2015), 69, this description is accepted, implemented, and represents a paradigm shift in the way people perceive disability. According to Iriarte (2016, 12), the phrase references to the so-called "social model," which is becoming increasingly popular in discussions on disability and development. Several (international) development institutions, including the UNDP and WHO, have also accepted and channeled this worldview (Grech 2009, 773).

The social model incorporates environmental components by viewing disability because of a person's functional status in relation to their physical, cultural, and policy environments. (Loeb et al. 2008, 34). According to Braithwaite and Mont (2009), 220, a person's environment determines whether they are deemed to have a disability, which can vary in severity and be either continuous or episodic in nature. The social model holds that a person's disability results from an oppressive interaction with the rest of society rather than something that occurs in the individual (Iriarte 2016). The social model presupposes that Society hinders the person and creates the issues associated with disability according to Iriarte (2016, 17).

Disability is politicized because the exclusion of people with disabilities stems from larger socioeconomic, political, and cultural issues (Godley 2007, 5; Grech 2009, 773). Because the social model dissolves the straight link between impairment and disability. Although it acknowledges that impairments can have psycho-emotional repercussions on handicapped persons, the social model attempts to refocus attention on social barriers (Iriarte 2016, 18).

According to Kuyayama (2011, 167), a person's functional status interacts with their physical, cultural, and policy environments, creating a "symbiotic" relationship. To manage disability challenges, the environment should minimize psychological, geographical, economic, and cultural barriers.

According to him, if society does not show empathy and concern for the needs of children with disabilities, a situation will arise in which these kids will continue to be on the margins (Kuyayama 2011, 167). This demonstrates the need for society to manage the environment to promote PwD growth and, in turn, society's progress. Although the work of international agencies is informed by the global view of disability, which is founded in the Convention on the Rights of the Person, older

ways of thinking are not entirely disregarded and can still have an impact on local perceptions of disability.

According to Lewis et al. (2015, 69), these individuals lives differ significantly based on the nation in which they reside. Age, gender, socioeconomic level, and living in a city or a rural location are additional factors that affect the lives of approximately 1 billion people with disabilities globally, in addition to the setting of a country. Lewis et al. (2015, 69) also claims that cultural conceptions of ability and disability may have a major influence on how people experience impairment. Many of these cultural perspectives emphasize physical competence primarily, leading to the people with disabilities are perceived as having less value (Campbell 2009). This idea stems from the idea that the able body is the "normative" body, serving as the benchmark for comparison. This upholds PwDs prejudice globally and their continued perception as disadvantaged (Lewis et al. 2015, 69). Children with disabilities are viewed as "objects of pity" due to the stigmatized view of disability as incapacity, which affects their ability to develop positive self-concept and self-identity (Kuyayama 2011, 165). Accordingly, Saetermoe et al. (2001, 699) contend that PwDs lower their expectations of themselves to deal with stigmatizing reactions. This leads to a decline in their confidence and sense of self, which impacts how they function. According to Saetermoe et al. (2001, 699), this has an impact on outcomes including employment, income, involvement in college, and physical activity. This can result in a sense of helplessness and exclusion, which makes PwDs feel less valuable in society.

The fact that impairment results from interactions between a person's environment and themselves may not yet be well understood (Lewis et al 2015, 71). Certain myths and traditional beliefs, particularly in Africa, link disability to poor luck, witchcraft, or bad spells. Discrimination against people with impairments often originates from the concept that a handicap is a punishment from God or ancestral spirits (Kuyayama 2011, 163). Stigma results from these spiritual views of incapacity (Barg et al. 2010, 371). Because no one wants to be linked with sinners or the victims of enraged spirits and ancestors, this leads to the PwDs being isolated

2.1.2 Models of Disability

Traditional/Charity Model: In an environment where disabilities were misunderstood and individuals with disabilities were often seen as the result of past wrongdoings, disability was also commonly perceived as a punishment and PwDs were portrayed as the community's needy members.

Individual/Medical Model: Throughout the 1800s and 1900s, a wide range of health issues were related to deficiencies in the structure and function of the body. This medical paradigm focuses mostly on treatments and expert medical care, viewing disability as a personal condition (Johnstone, D. 2002).

The Social Model is an approach that views people with disabilities as members of society and shifts the focus from the medical aspects of impairment to the social barriers and discriminatory behaviors that these individuals face (Darcy, S. A. 2003).

The Human Rights-Based Model: This approach to disability argues that it is appropriate to treat disability as a distinct identity, rather than just seeing it as a social construct. According to this approach, all human rights, civil, political, economic, social, and cultural—must include a disability component to be granted equally (Dagnachew, M. 2006).

2.2 Enabling environments

The Human Rights-Based Model: This perspective on disability contends that, as opposed to simply considering it as a social construct, it is legitimate to treat disability as a unique identity. Based on this strategy, all human rights (civil, political, economic, social, and cultural) must be granted evenly, including handicap rights.

An accessible environment benefits a wider range of people, even though it is especially crucial for those with disabilities. Pregnant women can more easily stroll around thanks to curb cuts (ramps, for example); announcements at each stop on public transit can help people who are visually impaired or are unfamiliar with the route. Moreover, the advantages for a large number of people might contribute to the development of widespread support for change implementation. It is frequently easier to enhance accessibility gradually, for as by enhancing urban design elements one little at a time. As resources and awareness of accessibility grow, it becomes easier to improve standards and achieve universal design. Even when physical barriers are removed, adverse mindsets can nevertheless hinder progress across fields.

Education and awareness-building are crucial in the fight against discrimination and ignorance about disabilities. Such training ought to be a regular part of professional training in marketing, informatics, building, architecture, and design. Advocates for people with disabilities and legislators alike need to be informed on the value of accessibility.

2.2.1 Addressing barriers on roads and streets

The United Nations Standard Rules on Equalization of Opportunities for Human Beings with Disabilities were the primary tool to satisfy the demand for improved access, but there were no enforcement mechanisms in place. Many countries have accessibility plans in place, but they had not made much headway, according to a 2005 United Nations evaluation of 114 countries (UN Special Report, 2006). Of those countries, 54% had no accessibility requirements for streets and outdoor areas, 43% had public buildings, and 44% had buildings used for public services like schools and hospitals. Moreover, 58% had not allocated any funds for accessibility, and 65% had not started any educational initiatives (World Health Organization, 2011).

The development of an institutional and policy framework for accessibility and its implementation varies for several reasons, as per the World Health Organization's World Report on Disability. These issues include insufficient funds, insufficient planning and design capabilities, insufficient research and data, a lack of institutional collaboration, a lack of enforcement mechanisms, a lack of user involvement, geographical and climatic limitations, and a lack of a disability-awareness element in planners' (World Health Organization, 2011).

2.2.2 Standards for accessibility

Accessibility standards can contribute to the establishment of a comfortable environment (Regional report of the Americas, 2004). Assessments of the current standards have shown that people are unaware that standards even exist. Those who were aware of the standards voiced concerns about their applicability, especially in situations where resources are scarce. (2011) World Health Organization When building new social infrastructure, including streets, the following fundamental elements of accessibility should be included the installation of curb cuts (ramps); safe crossings over the street; accessible entries; an accessible route to all locations; and access to public amenities, like restrooms.

2.2.3 Adopting universal design

Even in underdeveloped nations, universal design is viable and reasonably priced (Raheja G., 2008). The process of creating an environment that is as accessible, intelligible, and useful as possible for any person regardless of age, size, ability, or disability is known as universal design. All facilities, services, and products in an environment should cater to the demands of all users. This is an ongoing requirement for the benefit of a tiny portion of the populace. It is an essential

prerequisite for outstanding design. When a place is convenient, practical, pleasurable, and easy to go to, everyone wins. By considering people's diverse needs, universal design creates products, environments, and services that meet people's needs. When a place is convenient, practical, pleasurable, and easy to go to, everyone wins. By considering people's diverse needs and abilities at every stage of the design process, universal design produces products, services, and environments that meet people's needs (NDA, 2020).

2.3. The basics of the street

2.3.1 Streets

A Street is simply described as a route that is wider than an alley or lane and typically has sidewalks and traffic lights in the journal of Al Odat & Al Kurdi regarding busy streets. In a city, town, or township, a street is a public route that frequently has buildings on one or both sides (Al Odat & Al Kurdi, 2021). Meht, 2006 said that streets have become the most impacted public domain symbols and that they perform a vital purpose in open public space. The functional, social, and recreational needs of people living on the streets have been linked to communal sensitivities, physical health, and economic progress.

A Street is a crucial urban area that is a component of the city's spatial layout. Cities' roadways are an integral part of their structural makeup. A city's main thoroughfare typically contributes to its distinct identity and character. They are therefore forced to take on challenging duties. They must be unique and provide guidance inside the city; hence, their links to other major thoroughfares and areas of the city must be evident (Burton & Mitchell, 2006).

2.3.2 Aspects of streets concerning Elements for people with disability

All public spaces ought to be easily accessible. The design should be functional at the very least to allow for the accommodation of people with various abilities. Using universal designs could have a significant impact on improving street accessibility for people of all abilities.

Safety and convenience: - Streetscapes ought to be lively and operational. It must therefore satisfy the requirements and standards of each one of its users. To put it another way, it needs to be planned and equipped to guarantee the comfort and security of everyone who uses it not just those with disabilities. This includes strollers, cars, street cafés, street vendors, joggers, and walkers.

Livable roads: In contrast to conventional urban street designs, livable streets, often referred to as living streets, give priority to pedestrians and bicycles, enabling equal use of the route by all users.

The idea of a "livable street" was initially presented in the Netherlands (Bosselmann et al., 1999). A livable street is defined as a road with traffic-control devices installed to restrict or reduce traffic flow. The study will be restricted to safety and continuity of streets because the focus of Livable Street is on safety and comfort (Stavroulaki & Meta, 2020). This makes it difficult for us to include "comfort" in the study.

2.3.2 Street Design Standards and Pedestrian Infrastructure

Street design plays a fundamental role in ensuring accessible mobility for all, especially individuals with disabilities. Key features include:

- **Curb ramps:** These enable wheelchair users and others with mobility impairments to safely transition between sidewalks and roads. International standards such as those outlined in the ADA Accessibility Guidelines (United States) and ISO 21542 emphasize specific slope, width, and tactile features.
- **Tactile paving:** Used to alert visually impaired users to hazards (e.g., road crossings, stairways), tactile surfaces provide non-visual directional and warning information. Many countries including Japan and the UK mandate their use in urban settings.
- **Pedestrian crossings:** Accessible crossings include auditory signals, visual cues, and raised strips to support diverse user groups. The European Commission's standards for inclusive mobility outline comprehensive street crossing guidelines.
- **Sidewalk continuity and width:** Sidewalks must maintain a continuous, unobstructed path wide enough to accommodate wheelchairs and walkers. Narrow or fragmented sidewalks create major accessibility challenges.

2.3.3 Urban Mobility Planning and Transport Infrastructure Audits

Mobility planning must integrate accessibility as a key element from the outset. Sustainable Urban Mobility Plans (SUMP), as promoted by the European Commission and applied in African cities such as Kigali and Nairobi, provide models for incorporating PwD access.

International transport infrastructure audits, such as those conducted by ITDP (Institute for Transportation and Development Policy), assess accessibility gaps through tools like walkability

checklists and inclusive design indicators. Similarly, the World Bank and UN-Habitat have emphasized the importance of disability-inclusive mobility audits in developing countries.

In the African context, studies from Lagos, Accra, and Cape Town report that many formal plans mention accessibility, but implementation is hampered by lack of data, poor inter-agency coordination, and insufficient funding. In Ethiopia, Addis Ababa's Transport Policy (2011) calls for integration of accessibility into planning, but consistent street-level audits are rare.

2.16. Pedestrian Accessibility Audits in Developing Cities Pedestrian accessibility audits evaluate the extent to which street environments are usable by all people. In developing cities, audits have revealed that urban infrastructure often neglects users with disabilities.

In India, audit studies in Delhi found that over 75% of intersections lacked ramps and more than half of sidewalks were obstructed (Agarwal et al., 2015). In Ghana, Opoku et al. (2017) reported that tactile paving and accessible crossings were virtually nonexistent in Accra.

Such findings align with observations in Addis Ababa, where informal vendor encroachment, parked vehicles, and broken pavements frequently block pedestrian pathways. The lack of systematic accessibility audits and feedback mechanisms further marginalizes people with disabilities from urban life.

By incorporating global audit methodologies and enforcing minimum infrastructure standards, cities in developing nations can take critical steps toward ensuring inclusive mobility for all.

Together, these strategies promote a more inclusive city that supports the full participation of individuals with disabilities in public life.

2.4. Impairment, Disability and Handicap

The World Health Organization and other international organizations are developing broad definitions and models of disability to address differences in perceptions of impairment between countries. WHO published the International Classification of Impairments, Disabilities, and Handicaps (ICIDH) to promote a comprehensive understanding of these terms. WHO defines an impairment as any defect or loss of an anatomical, physiological, or psychological structure or

function. Any constraint or lack of capacity to do an activity in a way or within a range deemed normal for a human being is referred to as a disability (WHO, 2011).

A handicap is any obstacle that restricts or stops a person from achieving a function that is typical for them (based on their social, age, and sex and cultural variables) because of an impairment or disability. The ICIDH drew criticism for its suggestion that disability was the cause of "limited opportunities" and "restriction of activities" (Gray et al., 2000). This suggestion implied that "limited opportunities" for people with disabilities were unavoidable, absolving citizens and governments of the duty to guarantee equal opportunities for people with disabilities. Furthermore, the notion that disability is hard to quantify and characterize is supported by examples of the disparities in disability rates across developed and developing nations.

According to estimates from WHO, 10% of people globally are estimated to be disabled (WHO, 2006). The frequency of disabilities is roughly 18% in a few affluent nations, including the USA, Australia, Britain, and Canada (Krefting, 2002). The figures in developing countries differ significantly from those in developed countries. The way that society views disability and those with disabilities is reflected in the definitions of disability. Academics and activists have developed alternate definitions and models of disability to better understand their role in society. The social model of disability, developed by individuals with impairments in response to the medical model, has had the most significant impact (Krefting, 2002).

The social model aims to eradicate social obstacles, allowing those with disabilities to pursue their lives with equal opportunities. According to the social model, people with disabilities are an integral part of our society's environment, economy, and culture. The obstacles impeding an individual's complete participation in society are social issues rather than personal ones. However, a single issue of the social model from the perspective of rising nations is that government facilities play a minor role in the daily lives of the poor in these countries. People consider themselves as being very much a part of bigger groups, therefore families, kin, religious groups, and communities have a greater impact on quality of life. Additionally, governments are making some efforts to promote social welfare. The social model places more emphasis on barriers than on solidarity and mutual aid. Watson (2002) points out that the disability movement's ideals such as choices, autonomy, right, and independence might occasionally be particularly white, according to Community Approaches to Handicap in Development (CAHD).

2.5 Disability, Exclusion, and Poverty

It is widely acknowledged that both disability and poverty have no mutually exclusive relationship (WHO, 2004). While there has been much written on the link between lack of necessities and disability, most studies do not possess actual evidence that poverty causes impairment. (Kampen et al., 2008). Before asserting that poverty causes disability, one must examine the definitions of the relationship between poverty and disability provided by numerous researchers. In their book *Reflections on Poverty and Disability*, Kampen et al. (2008) argue that the idea of poverty is influenced by individual, societal, and organizational value preferences (p. 21).

Miles (2006) states that, according to the United Nations (Kampen et al., 2008, p. 21), poverty is defined as "depriving people of the options and chances that are essential to human growth in order to live healthy, long, creative lives and to enjoy freedom, dignity, self-worth, and respect from others. World Bank developed the more useful definition. The Bank established a poverty criterion of less than US \$1 per day as a monetary measure for identifying poverty. The various definitions of poverty demonstrate how multifaceted poverty is and how a variety of things can impact a nation's level of poverty. A general definition of poverty is difficult to produce.

Although some development groups are trying to mitigate poverty in developing countries, plenty of people with disabilities have yet to benefit from such programs. Thus, according to Nagata (2007) on page 5, poverty remains one of the leading causes of impairment in most Asian and economically developing nations. The connection between poverty and disability is now well acknowledged. The empowerment of those with disabilities in developing nations and disability mainstreaming have drawn the attention of worldwide communities. They suggested that poverty both causes and results in impairment (Khan & Bari, 2002; DFID, 2000).

Because of this, development funders and program administrators in numerous developing nations have looked for innovative strategies to end poverty in order to lessen the causes and effects of disability (CNDD, 2006; DFID, 2000). According to Nagata (2007), Poverty is a major contributor to many impairments and disabilities, as well as a result of social processes and barriers. (p. 1). It is now often acknowledged that disability and poverty have strengthened one another, increasing the susceptibility and marginalization of disabled people (Khan & Bari, 2002).

International humanitarian organizations and support groups recognize the importance of addressing poverty's core causes before focusing on the needs and rights of those with disabilities.

In 2000, UN member states set eight Millennium Development Goals (MDGs) through the Millennium Declaration (FAO, 2014). The following three objectives directly affect individuals and families with disabilities: The WHO aims to achieve universal primary education, eliminate severe poverty and hunger, and promote equal opportunity and women's empowerment (2004, p. 5). Not only do people with disabilities face disproportionately high rates of poverty in developing nations, but poverty also raises the likelihood of impairment.

In this approach, poverty perpetuates adverse sentiments about people with disabilities by causing impairments, which in turn cause disabilities. The relationship between poverty and disability demonstrates how economic hardship sets off a vicious cycle of underdevelopment, which in turn results in malnutrition, which in turn causes disease, which in turn produces impairment and disability. In many cases, it is assumed that individuals with disabilities are less productive than their peers and cannot have as much of an impact on the labor market. They start to live in poverty as their income levels decline. They are continuously subjected to prejudice, segregation, and stigma the moment it is believed that they have a disability which exacerbates the effects of their impairments and results in permanent disability (World Bank, 2004). According to recent studies, many societies routinely exclude people with disabilities from all developmental activities. Thus, their rights are restricted, and it becomes more difficult for them to meet their socioeconomic responsibilities (Nagata, 2007).

2.6. Theoretical Framework

2.6.1 Disability Models

Although several organizations have provided varying definitions, conceptualizing models and ideas is vital to altering how society views those with disabilities and their place in society (Kaplan, 2000). According to Amaze, who referenced the work of Hamele, McLean, and Williamson, these paradigms are religious or moral, medical, or personal, and political or social (Amaze, 2013). The disability model was developed for this study in accordance with Kaplan's research to improve research questions in 2000. Furthermore, it is thought that being aware of the models will dispel people's misconceptions and set them on the correct path to understanding the general concept of disability and the significance of providing the facilities and support required, if only to help them get over the obstacles they encounter when enrolling in or studying at a university (Kaplan, 2000).

There are four historical and sociological models of disability. Various models, including medical, disability, moral, and rehabilitation, are used to define disabilities (Kaplan, 2000).

According to the disability model, the issue is characterized by a dominant mindset held by experts disparities in services compared to society, and hurdles to access to architecture, cognition, perception, and architecture, there is a tendency to generalize about people with impairments without taking into account their unique characteristics (Kaplan, 2000). According to Kaplan (2000), the disability model recognizes societal prejudice as the major issue confronting people with disabilities and the core cause of many problems that other models attribute to the impairment itself.

The disability paradigm that has developed over the past 20 years views disability as the result of a person's association with their environment rather than as a disease or personal tragedy (Almog, 2011). The disability models that Kaplan (2000) describes are most closely associated with the social models that Almong (2011) and other academics have brought up. The disability model also informs the research's theoretical foundation. PWDs in governmental institutions will achieve in the areas of education, material possessions, the economy, and psychology if the atmosphere is changed.

2.7. The Existing Situation of Disability in Ethiopia

Even though there are many disabled people in Ethiopia, yet some societies view disability as a spiritual wickedness and prevent them from stepping out in public (Country Profile on Ethiopia, 2002). Families hide a family member with a disability as a result, which produces false data and statistics on disabilities. The disabled confront a variety of issues in their lives as a result of this ignorance and other factors.

2.7.1 Major contemporary challenges involving disabilities

Ethiopia's main challenges with disabilities are a lack of general understanding, misinformation about the prevalence and state of the condition, and limited access to assistive technologies. The Ethiopian Federal Democratic Government's Ministry of Labor and Social Affairs (MoLSA) developed a Rehabilitation Department to handle disability issues. The department's primary goals are to raise awareness, develop capacity, and implement rehabilitation. Structures stretching from the zones to the "Woreda" districts reflect the decentralization of government management from

the central to regional levels. In terms of organizations, people with disabilities have established one federation and five associations to fight for their rights.

2.7.2 Disability-related measures related issues with the transportation system

The inaccessibility of the transportation infrastructure, societal attitudes, and a lack of aid have prevented people with disabilities from taking part in national developments. The following regulations have been developed to make circumstances easier for anyone with impairments.

to move around, which will boost their involvement and integration. People with disabilities have less opportunity to participate in and integrate into society due to public recreational places, buildings, transportation infrastructure, and other physical features. The following are methods to make these issues less severe.

- To ensure accessibility for people with disabilities, laws and rules should be developed, mass transportation should prioritize them, disability-related associations should be involved in construction design, Braille and legible alphabets should be used, and sign language should be encouraged.
- Mobility Options, Canada for instance offers projects to improve travel options for persons who face economic, social, or physical challenges.
Transportation services can be improved by altering ordinary cars and facilities to accommodate persons with disabilities, as well as offering customized mobility services like door-to-door transportation.
- Transport facilities and services should be designed with universal accessibility in mind, to make room for a diverse variety of users, including those who use wheelchairs or have other disabilities.
- Enhancements to travel information include easier-to-use bus and taxi schedules, as well as services that help visually impaired people find their way.
- Increasing the quantity of taxis in the neighborhood, raising the bar for taxi service, granting greater flexibility (like splitting rides to save costs), and designating vehicles that can carry wheelchairs and other individuals with special needs are some ways to improve taxi service. Tackle security issues, which entail stepping up efforts to lower the danger of assault for transportation, bikers, and pedestrians.

2.8. Factors Affecting Street Inaccessibility for People with Disabilities

Street inaccessibility for individuals with disabilities is influenced by a combination of physical, institutional, socio-economic, and attitudinal barriers. A key factor is poor street and sidewalk design. Many streets lack proper curb ramps, tactile paving, and continuous sidewalks.

Pavements are often uneven, narrow, or blocked by vendors and parked vehicles, creating serious mobility challenges for wheelchair users and the visually impaired.

Institutionally, there is often limited awareness or enforcement of existing building codes and accessibility standards among planners, engineers, and local authorities. WHO (2011) reported that over half of 114 countries reviewed had no comprehensive street-level accessibility regulations. In Ethiopia, similar gaps persist despite national commitments, with decentralized urban management systems struggling to implement inclusive infrastructure.

Funding constraints also hinder accessibility improvements. Local governments often prioritize large-scale urban development or traffic control over sidewalk and street enhancements.

Accessibility is thus treated as an afterthought rather than a foundational aspect of urban planning.

Societal attitudes present another obstacle. People with disabilities frequently face stigma, reducing their visibility in public spaces and their participation in planning processes. Without direct engagement, designs fail to reflect real accessibility needs, exacerbating exclusion.

In Addis Ababa, several peer-reviewed studies and international research have highlighted severe limitations in pedestrian infrastructure, particularly around busy intersections like Mexico. For instance, Tirussew et al. (2013) documented the lack of accessible sidewalks and crossings, emphasizing the exclusion of persons with disabilities from daily urban activities. Similarly, Dagnachew (2011) found that many public streets in Ethiopia are characterized by poor design, with missing curb ramps, blocked sidewalks, and unmarked pedestrian pathways. These findings are echoed globally—Ståhl et al. (2008) emphasized that environmental barriers such as inadequate pedestrian infrastructure significantly limit mobility and safety for persons with disabilities in both developed and developing urban contexts. Such conditions hinder safe and

independent movement, limit access to essential services like education and healthcare, and reinforce a cycle of poverty, exclusion, and dependence.

2.9. Effective Solutions and Facilitators for Improving Street Accessibility

Enhancing the accessibility of streets for people with disabilities requires multi-level interventions rooted in inclusive design, community involvement, and policy implementation. One core approach is the adoption of universal design principles. Universal design ensures that streetscapes are usable by all people, regardless of ability. This includes features such as lowered curbs, tactile warning strips, audible traffic signals, wide and continuous sidewalks, and rest points with seating.

Retrofitting existing infrastructure is equally important. Modifications to old buildings, sidewalks, and transport stations can be made cost-effectively when prioritized by local authorities. Case studies in cities like Bogotá, Colombia, and Durban, South Africa, show that small adjustments like painting visibility lines, improving signage, or ramp installation can have a big impact on accessibility.

Inclusive planning is another critical facilitator. Involving persons with disabilities in design consultations, urban assessments, and local council decisions ensures real needs are addressed. Tools such as accessibility audits and walk-through evaluations led by disabled persons' organizations (DPOs) can help identify practical gaps.

Education and professional training also play a pivotal role. Urban planners, architects, engineers, and traffic police should receive training on inclusive mobility standards and user-centered design. International development partners and civil society actors can support this capacity-building through workshops, pilot projects, and technical guidance.

Finally, political will and legal enforcement are essential. Local governments must integrate accessibility mandates into municipal planning and ensure compliance through regular monitoring. The inclusion of accessibility indicators in budget allocation and development performance metrics would also help mainstream disability considerations in urban development.

Together, these strategies promote a more inclusive city that supports the full participation of individuals with disabilities in public life.

2.10. Ethiopia's Disability Policy: A Historical Overview

Ethiopia's disability policy and definition have been improved on occasion to ensure that disabled people are included. In 1971, royal decree was issued to form an agency for disabilities, and this led to the first statutory definition of disability in Ethiopia. Order No. 70/1971 was issued by Emperor Haile-Selassie I to establish an agency for the rehabilitation of the crippled. An individual who is unable to sustain oneself because of physical or mental health constraints and does not have someone to care for them, such as those who are too young or too old to work. according to this Imperial Order, is considered to be disabled. Foreign Affairs Ministry of FDRE, 2012).

The second definition of disability was found in another 1994 law. This was a declaration of No. 101/1994 job rights for people with impairments. The primary idea behind this definition is that individuals who experience limitations in their physical, mental, intellectual, or sensory functions, are those who are impotent of supporting themselves and require assistance from others. According to the 1994 proclamation, a person is considered disabled if they are unable to see, hear, speak, or if they have limb injuries or mental retardation as a result of natural or man-made causes; however, people who are alcoholics, drug addicts, or who have psychological issues as a result of engaging in socially deviant behavior are not included in this definition (FDRE Ministry of Foreign Affairs, 2012).

As a third point, the conventional interpretation provided by the 1971 Imperial Order. However, even on this occasion, people with impairments were only discussed in regard to their mental, sensory, and physical limitations, with minimal reference to the outside boundaries. Fourthly, the definition is a little more practical because it just focuses on physical characteristics or impairments rather than the issue of not being able to sustain oneself. This definition was derived from the person approach of comprehending disability. Ethiopia's National Plan of Action for Persons with Disabilities (2012-2021) defines disability today.

Disabled individuals are those with long-term sensory, physical, mental, or intellectual impairments which, in interaction with various barriers, can hinder their full and equal inclusion in society (UN Convention on the Rights of Persons with Disabilities, 2006, Art. 2).

2.11. Ethiopian government support for people with disabilities

Recognition of People with Disabilities in Ethiopia (2013) states that the Ethiopian government currently has laws, regulations, and guidelines in place to safeguard people with disabilities, including their right to work and produce in a respectable manner. The primary document is Ethiopia's Federal Democratic Republic's 1995 Constitution. The Constitution's Article 41(5) specifies that the State oversees giving disabled persons the required support services and rehabilitation. Employers must also provide suitable working and training conditions, make all reasonable accommodations, and take proactive steps, especially when hiring women with disabilities. If necessary, they must also assign an assistant to help a person with a disability complete their work or complete training (FDRE, *Federal Civil Servants Proclamation No. 515/2007*).

- Federal Civil Servant Proclamation No. 515/2007 grants eligible individuals with impairments preferential preference in recruiting, advancement, and deployment, among other areas. This clause solely applies to offices of government. According to Labor Proclamation No. 377/2003, as amended by Proclamation No. 494/2006, employers are not allowed to discriminate against employees on the grounds of ethnic origin, gender, political, religious views, or any other basis.

FDRE's Proclamation on description of powers of responsibilities of the Executive Bodies, No. 691/2010, guarantees individuals with disabilities and people who are HIV/AIDS positive to have equal chances and full participation. To ensure that all buildings are appropriate for those with physical disabilities, the Building Proclamation, No. 624/2009, requires accessibility in the construction and planning of all buildings.

- Eligible individuals with disabilities are granted preferential treatment in recruitment, advancement, and deployment, among other areas, under Federal Civil Servant Proclamation No. 515/2007. This section only pertains to public service offices. Labor Proclamation No. 377/2003, as revised by Labor Proclamation No. 494/2006, prohibits employers from discriminating against workers based on their race, sexual orientation, faith, political beliefs, or some other characteristic.
- Ethiopia's Decree on Declaration of the Authority and Responsibility of Management Organs (No. 691/2010) promotes equal opportunities and full involvement for those with disabilities and HIV/AIDS. Building Proclamation No. 624/2009 mandates that

accessibility be considered during the design and construction phases of all buildings to ensure that they are acceptable for those with physical disabilities.

- The NPA for Individuals suffering from disabilities (2012-2021) aims to promote an inclusive society in Ethiopia. Inclusion of These individuals with Disabilities in Ethiopia (2013) addresses the needs of Ethiopians with disabilities for full participation in the lives of their loved ones, neighborhood, and country, as well as encompassing rehabilitation services and open doors for training, work, and schooling (NPA, 2012).

2.12. Addis Ababa Transport Policy

Prior to the creation of the 2011 transport strategy, the city of Addis Ababa lacked a well-defined transportation policy. Harmonized and coordinated actions are hindered by the fact that it is primarily guided by disparate Declarations, guidelines, and guidance from the federal authorities and city administration. The following criteria make the adoption of the Addis Ababa policy paper particularly important:

- Support the city's transport services in contributing to national poverty reduction and development initiatives.
- Develop infrastructure and transport systems that are aligned with urban growth, focusing on accessibility and mobility, while encouraging collaboration among stakeholders and institutions.
- Align land-usage planning with transportation planning within the city.
- Deliver improved, well-coordinated, and efficient transportation services.
- Strengthen key stakeholders by improving their organizational capacity, developing human resources, adopting technology, fostering coordination, and encouraging private sector involvement to enhance safety and the overall effectiveness of transport services.

Before 2011, transport strategy was developed, Addis Ababa did not have a clear transportation policy. The fact that the federal government and the city administration publish conflicting proclamations, regulations, and directives makes it difficult to coordinate and harmonize actions.

2.13. Analysis of Empirical Research

2.13.1 Common misconceptions regarding disability and the Ethiopian disability rights

With disabilities are portrayed as inferior, devoid of rights, equality, and dignity, according to long-standing traditional beliefs and myths that attribute disability to witchcraft, curses, and bad omens (Dagnachew 2006, cited in Dagnachew, 2011).

The words "people with disabilities" are demeaning when used in the nation's main laws and codes, like the Commercial Code, Criminal Code, and Civil Code. These regulations, which were created in the 1960s, continue to refer to the disabled community using archaic terminology. As an illustration, the Ethiopian Civil Code uses terms such as 'insane person' and 'feeble-minded' to refer to individuals with intellectual disabilities, 'cripples' for those with physical disabilities, and 'infirm person' for individuals with sensory disabilities in both its English and Amharic versions. Despite the availability of more acceptable terminology that accommodate individuals with disabilities, some among these expressions are still in use (Dagnachew, 2011).

In 1971, under Emperor Haile Selassie's rule, Imperial Directive No. 70/71 established the Rehabilitation Agency for the Disabled, marking the country's first national policy on disability issues. The concepts of medical rehabilitation and charity guided the operations of this organization.

The Ethiopian National Association of the Blind (ENAB), established in 1960, is recognized as the country's first official organization focused on disability (Federation of Ethiopian National Associations for Persons with Disabilities, 2010) (Dagnachew, 2011). A significant disability rights movement began to emerge in the early 1990s, marked by the formation of numerous Disabled Persons' Organizations (DPOs) representing a range of disability groups. The 1980s and 1990s local and global disability movements had an impact on this movement. Additionally, around this period, impairments were first addressed specifically in the Ethiopian Constitution (Constitution of the Federal Democratic Republic of Ethiopia, 1995) (Dagnachew, 2011).

2.13.2 Integrating Disability in Development

Over the past two decades, there has been a significant shift in how disability and individuals with disabilities are perceived. It is now widely recognized that the barriers to their full participation in society stem not only from the impairments themselves, but also from environmental obstacles and societal attitudes. As a result of this shift, there is now better recognition of the potential, rights,

and capacity contributions that people with disabilities can make to the public (International Labor Organization, 2011).

Program objectives should explicitly include individuals with various disabilities, such as mental health illnesses, mobility problems, vision and hearing inability, and intellectual, cognitive, and other developmental disabilities, included in the target group. In addition, people with a range of disabilities and their supporters including caregivers, personal assistants, potential participants with disabilities and their families, as well as community members or other disability experts should be included in the planning, execution, and assessment of programs (Centre on Disability Public Health Institute, 2014).

Program design should incorporate the social, behavioral, programmatic, communication, and physical components with consideration for the accessibility needs of individuals with disabilities and the general user base. Programs should also provide accommodations that are crafted to respond to the specific demands of individuals who have impairments. Programs should also be affordable for caregivers, personal assistants, and people with disabilities as well as their families (Centre on Disability, Public Health Institute, 2014). Men and women with disabilities are willing and capable of making significant contributions to society. To promote more welcoming communities and job possibilities for individuals with impairment, it is imperative to enhance their availability to basic education, offer vocational training that corresponds with industry demands, and provide jobs that correspond with their abilities, interests, and capacities, while making accommodations as needed.

A lot of communities are also realizing how important it is to remove additional barriers, such as improving physical accessibility, offering information in different formats, and dispelling myths and preconceptions about individuals with disabilities (International Labor Organization & Irish Aid Fact Sheet, 2013). An estimated fifteen million individuals in Ethiopia adults, children, and the elderly have impairments, making about accounting for 17.6% of all residents. A sizable proportion of those with disabilities reside in underserved, remote locations lacking basic services. Ninety-five percent of Ethiopia's disabled people are thought to be impoverished, and many of them rely on their family and beg for food (World Bank and WHO, 2011) (MoLSA, 2010) (ILO and Irish Aid Fact Sheet, 2013).

Ethiopia ratified and accepted the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD) in 2010, which is an important international legal framework that protects the rights of this social group. Despite ongoing efforts by both government bodies and NGOs, people with disabilities remain excluded from many areas of society, highlighting the need for stronger cooperation among all stakeholders (Light for the World, n.d.). To underscore the importance of equal employment rights for those facing discrimination, the Ethiopian government promulgated Proclamation No. 568/2008, titled “Right to Work of People with Disability. Article 55 of the Constitution of the FDRE serves as the foundation for this statement. This document defines “individuals with impairment” as an individual who experiences social, economic, or cultural discrimination resulting in physical, mental, or sensory limitations that limit their access to fair employment. Article 55 of the Constitution of Ethiopia serves as the foundation for this statement.

2.13.3 Mobility and Safety Issues

The need for mobility and safety is essential for all individuals who travel for several reasons. Public transportation plays a crucial role in ensuring access to activities and services. Several factors, such as designated accessibility features, fare costs, infrastructural access, available information, and prevailing attitudes, shape public transport usage by affecting individuals’ capacity and willingness to utilize these systems (Rahel, 2017). Despite inadequate traffic management and control, the urban transportation system in Addis Ababa fails to address distinct requirements in both the private and mass public sectors. Many individuals with disabilities face exclusion from daily activities, lack equitable access to education, health care, and employment, and are not receiving the necessary disability support services. Rahel (2017) observes that urban transport management systems fall short of accommodating the specific needs of individuals with disabilities, children, women, and older adults.

2.13.4 Functions of Information and Communication Technologies and Assistive Devices

In light of the rise of ICT, there is a growing sense of optimism for Individuals with disabilities. Although substantial obstacles remain, genuine efforts are being made to leverage ICT in overcoming disability-related barriers. (Eid, ND) notes that the information society brings both substantial opportunities and potential challenges for the social inclusion of individuals with disabilities. While IT and assistive devices create new possibilities for everyone, they are especially valuable for people with disabilities, who depend on these tools more extensively in

their daily lives than those without impairments. By adapting today's assistive technologies to a wide range of needs, people with impairments can engage more fully and fairly in every area of social life. Equally, everyone must have equal access to fast-evolving ICT innovations so they can join a truly inclusive, barrier-free information society. As a result, thoughtful planning and effective deployment of ICT solutions are vital.

2.14. Research Gap

Despite the growing body of global literature on accessibility and inclusive street design, substantial gaps remain in localized studies that evaluate street-level infrastructure for persons with disabilities in Ethiopia. Much of the existing literature focuses on general disability rights, social inclusion, or health and education access, rather than the direct assessment of street-level pedestrian environments.

While international models such as universal design principles and pedestrian accessibility audits offer useful frameworks, few empirical studies have examined how these principles are (or are not) being implemented in Ethiopian urban centers, particularly at high-traffic areas like Mexico in Addis Ababa. There is also a lack of research on the perspectives of people with different disabilities regarding their day-to-day street navigation experiences, infrastructure preferences, and safety concerns.

Moreover, local government implementation of accessibility-related policies has not been adequately monitored or evaluated in academic literature. This gap between policy design and actual urban practice further highlights the need for focused, context-specific research.

This study aims to bridge these gaps by directly assessing the accessibility and usability of streets for people with disabilities in Mexico , providing empirical data that can inform inclusive planning and urban infrastructure improvements in Ethiopia.

CHAPTER THREE

MATERIALS AND METHODS

3.1. Study Area

Addis Ababa is Ethiopia's capital and largest city, situated on a fertile plateau encircled by hills and mountains near the country's geographic center. It became the nation's capital in the late 19th century, replacing Entoto, a colder, less hospitable highland settlement lacking sufficient firewood. Empress Taitu, the wife of Emperor Menilek II (who ruled from 1889 to 1913), influenced the decision to relocate by encouraging the emperor to construct a residence near local hot springs and distribute nearby land to the nobility. Founded in 1887, the city was named Addis Ababa, meaning "New Flower", by the empress (CitiesABC., n.d., 2025). The city has functioned as Ethiopia's primary hub for administration, politics, economy, and diplomacy. Founded in the late 19th century under Emperor Menelik II, Addis Ababa has expanded both in size and population since its inception. Addis Ababa's population in 2025 is estimated at 5,956,680, an increase of 253,050 people (4.44%) over the previous year, and the city spans approximately 527 km² with a population density of about 5,165 individuals per km² (*Addis Ababa Population 2025*).

Mexico is one of Addis Ababa's principal traffic circles, its name honoring Mexico's support for Ethiopia's struggle against Italian colonization. As a key junction, its roadways are vital to the daily lives of residents. Despite various upgrades, a substantial gap remains between the population's transport needs and the infrastructure provided, an issue that is especially acute for people with disabilities. Accordingly, this study will assess how well street-accessibility policies have been implemented at Mexico and will propose recommendations to improve conditions for disabled users (Dogbevi, 2015, October 29).

3.2. Research Design

Descriptive design was used in this research because it enables us to systematically describe the existing conditions related to the accessibility of streets for people with disabilities in Mexico, Addis Ababa. This design was preferred over exploratory or experimental approaches because the objective of the study is not to test hypotheses or manipulate variables, but rather to observe, document, and analyze real-world situations as they are. It provides a factual and accurate profile of the current street infrastructure, user experiences, and institutional practices concerning accessibility.

3.3. Research Approach

The research comprised of both quantitative and qualitative research methods in this study, which allowed for the collection of both types of data. The quantitative method enables the collection of numerical data through questionnaires, facilitating statistical analysis from broad-scale surveys, while the qualitative method captures respondents' attitudes and experiences concerning transportation facilities and related issues.

3.4. Study Population, Sample, and Sampling Strategy

3.4.1 Study Population

The study population consisted of adults with disabilities who regularly use the streets and pedestrian infrastructure around Mexico. These included individuals who commute through the area for work, access services, or engage in daily activities. The population also included key informants from municipal offices involved in urban planning, infrastructure development, and disability-related service provision.

This focus ensured that the research reflected the experiences and perspectives of both the users of the streets and the officials responsible for managing accessibility in the area.

3.4.2 Sample Size

A total of 172 individuals with disabilities who actively use the pedestrian infrastructure around Mexico were included in this study. Since the number of eligible participants in the area was limited, a census sampling method was employed to capture all available individuals meeting the criteria. These participants were sampled to assess the actual conditions of street accessibility, document the physical and institutional challenges they face, and collect suggestions for improvement.

Additionally, purposive sampling was used to select municipal officers and experts with direct responsibilities related to urban mobility, infrastructure design, or disability services. Their inclusion provided insights into administrative practices, policy implementation, and planning priorities concerning accessibility for people with disabilities.

3.5. Sampling Techniques

This study employed two sampling techniques to address the characteristics of different respondent groups. A census sampling technique was applied for individuals with disabilities who actively

use the pedestrian street around Mexico. Given the relatively small and manageable number of eligible participants, this method enabled the inclusion of all available and consenting individuals who met the criteria during the data collection period. This approach ensured comprehensive representation of various disability types and user experiences within the study area.

For the selection of municipal officers and relevant professionals, a purposive sampling technique was used. Participants were intentionally chosen based on their involvement in infrastructure planning, policy development, and service provision related to disability and mobility in Addis Ababa. These individuals were selected due to their professional roles and assumed knowledge of the practical and institutional challenges facing people with disabilities in urban mobility.

This combination of census and purposive sampling allowed the study to gather both user based evidence and administrative perspectives necessary for analyzing street accessibility in a holistic manner.

3.6. Data Types and Sources

Data for this study was collected using both primary and secondary sources. Primary data was gathered from various stakeholders such as individuals with disabilities, the Addis Ababa Labor and Social Affairs department, the Addis Ababa City Road Construction Authority, and the Addis Ababa City Youth and Women office, as well as from professionals and persons with disabilities. Secondary data is obtained from diverse standards, previous research, and case studies.

3.7. Tools for Data Collection

Although a variety of qualitative and quantitative data-collection methods are available, this study employed questionnaires, in-depth interviews, key informant interviews, document analysis, and observation/field visits.

3.7.1 Questionnaire

A survey was carried out to get data from individuals with disabilities, consisting of both open and close-ended questions. This survey gathered information about demographic details of individuals with disabilities, the challenges they face in accessing services, and the modifications made to services in their organizations. In the survey, 172 disabilities were participated.

3.7.2 In-Depth Interview

Individuals with physical disabilities who were selected for the study engaged in a rigorous, in-depth interview procedure. This selection was made because they are direct beneficiaries of

community services and support systems. It is believed that they have substantial insight into the available services, the challenges they encounter, and the opportunities they have accessed. Their perspectives are valuable in articulating potential solutions to these issues. To achieve this, a set of semi-structured questions was developed to explore the underlying causes, subjective experiences, and contextual factors influencing the lives of individuals with physical impairments. The interviews aimed to gain meaningful insights into how participants perceive the difficulties they encounter, the opportunities accessible to them, and the overall effectiveness of the services delivered by the relevant office. The interviews followed a structured guidance approach, with all questions originally formulated in English.

3.7.3 Key Informant Interview

Staff members from the Addis Ababa Transport Office, the Addis Ababa Municipality, and the Addis Ababa Workers and Labor Affairs Office were engaged as key informants to enrich the data gathered on selected disability-related issues. Their inclusion was based on their direct involvement in delivering services and support, giving them valuable insight into the obstacles and opportunities encountered by people with physical disabilities.

3.7.4 Observations

To support the core data collection tools, **personal observation** was conducted at key pedestrian areas around Mexico . The researcher observed street infrastructure used by people with disabilities, including ramps, sidewalks, pedestrian crossings, and public transit stops. Field notes captured details about physical barriers, sidewalk discontinuity, blocked pathways, and general accessibility issues. This method provided direct insight into the day-to-day mobility challenges person with disabilities face while navigating the area.

3.7.5 Document Analysis

To supplement primary findings and enrich the contextual understanding of the research topic, a limited document review was conducted. Relevant reports, government policy documents, urban planning strategies, and previous local and international studies were examined. The goal was to verify the alignment of field observations with existing frameworks, assess gaps in infrastructure planning, and determine if similar studies had been conducted in Ethiopia. This helped validate and contextualize the observed challenges and inform recommendations

3.8. Data Organization and Data Analysis

In this study, thematic analysis was employed to examine qualitative data gathered through interviews, observations, and document review. As information was collected, it was transcribed, coded, and categorized to identify recurring themes. These themes were further explored to understand the relationships between ideas and their relevance to street accessibility for people with disabilities.

The analyzed data were organized and summarized thematically. Key findings were presented in descriptive narratives, supported by tables that outlined frequently mentioned issues, experiences, and barriers. This method allowed for a structured interpretation of qualitative insights while maintaining the voices and perspectives of participants.

3.9. Ethical Considerations

Certain considerations are made in this study. Primarily, study subjects will be included upon their consent. Once this is done, the information they provide through the data collection instrument is kept confidential. Furthermore, their identity will also be kept confidential and only the aggregated results obtained from the data they provide were made public where required.

To uphold ethical standards during our interviews and discussions with individuals who have physical disabilities, we clearly explained the purpose and significance of the study and treated every participant with dignity and respect. Participants were informed that participation was entirely voluntary and that they could withdraw from the interview or group discussion at any time if they felt uncomfortable. Additionally, all participants were informed about the confidentiality of their responses, both during and after the study, as per our protocol. In other words, before stating the actual data collection for the study, the right of respondents to give or deny the required information was explained. In addition to this, we tried to avoid leading questions. Confidentiality of the information will also be guaranteed by informing respondents not to include their names or anything that makes them identify by others. Finally, we provided the research output to decision-makers ethically with relevant recommendations.

CHAPTER FOUR

RESULT AND DISCUTION

4.1. Introduction

In this chapter, the research analyzes and discusses the findings derived from the survey questionnaire. Questionnaire responses are condensed into tables and charts for clarity, and the sample's demographic characteristics are outlined using descriptive statistics. Additionally, various inferential statistical techniques are applied to further examine the survey data. The analysis, presentation and interpretation of data is focused on the findings on the extent to which awareness, accessibility, information dissemination and technology transfer determines the integration of disability among public infrastructure projects in Addis Ababa.

4.2. Response Rate

A Total of 190 questionnaires and interview were administered. Among these eighteen respondents were employees who are working in Addis Ababa municipality and interviewed. From the total of 172 questionnaires were distributed. Out of respondent's person with disability i.e., 172 respondents, the responses of sixteen (61) were incomplete, A total of 111 questionnaires, equating to a 64.53% response rate, were included in the analysis. Mugenda and Mugenda (2003) indicate that for results to be statistically significant, the response rate must reach at least 50%.

Table 1: Response Rate of Respondents

	Number of questionnaires	Percent
Completed	111	64.53%
Not completed	61	35.47%
Total	172	100%

Source: own survey result (2025)

4.3. Respondents Demographic

In this section, the research provides a summary of the sample's key demographic characteristics, including respondent age, gender, highest educational qualification, and years of professional experience. The purpose of conducting this analysis is to present details such as the proportion of male and female participants, the age range, and education levels, thereby offering readers a richer, more meaningful understanding of the study population.

4.3.1 Gender

Information on the valid respondents' gender distribution sheds light on the demographics of those who expressed opinions about Mexico 's accessibility for people with impairments. Seventy-Two (55.8%) and Fifty-Seven (44.2%) of the 129 participants identified as male and female, respectively. With somewhat more than half of the respondents being men, this suggests a slightly larger representation of men in the sample. Although there is a discernible bias towards male responders, the gender distribution indicates that there are roughly equal numbers of people with disabilities.

Table 2: **Gender**

		Frequency	Percent	Valid %	Cumulative %
Valid	Male	72	55.8	55.8	55.8
	Female	57	44.2	44.2	100.0
	Total	129	100.0	100.0	

Source: own survey result, 2025

4.3.2 Age

Respondents' age distribution suggests that the majority are between the ages of 31 and 40, accounting for 38.7% of the sample. This suggests that a sizable proportion of the participants are in their most economically active and socially involved stages of life, which may have an effect for their perspectives and experiences with the study. Respondents aged between 20 to 30 made up the second largest category, accounting for 27.9% of the sample, demonstrating the engagement of younger adults who may have diverse perspectives impacted by recent societal trends. Respondents over the age of fifty make up 18.9% of the sample. This proposes including more experienced individuals who can provide insights based on long-term exposure or historical context. Finally, individuals between the ages of 41 and 50 account for 14.2% of the total, providing a smaller but still meaningful perspective.

Table 3: Age

		Frequency	Percent	Valid %	Cumulative %
Valid	20-30 years	31	27.9	27.9	27.9
	31-40years	43	38.7	38.8	66.7
	41-50 years	16	14.2	14.4	80.9
	above 50 years	21	18.9	18.9	100.0
	Total	111	100.0	100.0	

Source: own survey result, 2025

4.3.3 Staff Respondents Education level

The educational background of the staff respondents is shown in Table 4. With 61.1% of the sample, the majority of responders have a bachelor's degree (BA/BSC). This implies that a sizable percentage of the employees have completed higher education, which could affect their knowledge and viewpoints within the company. Those with a diploma make up the next largest group, accounting for 22.2% of the respondents. This suggests that a lesser but still massive portion of the employees have a foundational education. The sample's lower level of advanced education is reflected in the fact that just 16.7% of respondents hold an MA. The cumulative numbers highlight a generally well-educated workforce, with the vast majority of staff responders (83.3%) holding at least a diploma or higher.

Table 4: Education level (for staff respondents)

		Frequency	Percent	Valid %	Cumulative %
Valid	Diploma	4	22.2	22.2	22.2
	BA/BSC Degree	11	61.1	61.1	83.3
	MA/MA	3	16.7	16.7	100.0
	Total	18	100.0	100.0	

Source: own survey result, 2025

4.3.4 Work Experience (for employees/staff respondents)

According to the data on respondents' years of experience, the majority (44.5%) had between 6 and 10 years. This shows that over half of the participants have a prominent level of familiarity

and experience in their respective domains, which enhances the depth and trustworthiness of the information they provide. The second largest group, accounting for 22.3%, has three to five years of experience, indicating mid-level workers with a balanced perspective on new and seasoned methods. Participants with fewer than three years of experience and those with more than ten years each account for 16.6% of the sample. The participation of both new and experienced people ensures a diverse variety of views, from novel perspectives to long-term professional observations. Overall, the data shows a well-rounded mix of respondents in terms of experience, which contributes to a more complete grasp of the subject under research.

Table 5: Work experience (staff respondents)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Less than 3 years	3	16.6	16.6	16.6
	3-5 years	4	22.3	22.3	38.9
	6-10 years	8	44.5	44.5	83.4
	above 10 years	3	16.6	16.6	100.0
	Total	18	100.0	100.0	

Source: own survey result, 2025

4.4. The Convenience of Mexico, Addis Ababa for persons with Disabilities

4.4.1 How often is the street used

The purpose of this component of the survey was to determine how frequently correspondents use Mexico for transit. Because Mexico is a sizable public area with a healthy population, people with disabilities also use it for a variety of purposes. Based on this, the following outcomes were obtained:

Table 6: How often do you use Mexico for transportation?

		Frequency	Percent	Valid %	Cumulative %
Valid	Daily	69	62.1	62.1	62.2
	Weekly	42	37.9	37.9	100.0
	Total	111	100.0	100.0	

Source: Own Survey result, 2025

According to Table 6's data on daily and weekly use of Mexico plaza, the vast majority of respondents use the plaza frequently. Sixty-nine people (62.1%) out of 111 participants said they used Mexico every day, suggesting that it is an essential component of their daily routines, whether for leisure or transit. Although they use the street less frequently than daily users, the remaining forty-two respondents (37.9%) said they use it once a week, indicating a noteworthy degree of engagement. The cumulative proportion hits 100%, indicating that every response is classified as either daily or weekly and that no user uses the street less frequently than once a week.

Given how frequently it is used, Mexico appears to be an essential place for a lot of people, possibly including people with disabilities. Therefore, it is important to assess the area's infrastructure, amenities, and ease of access to make sure they satisfy the demands of all users. It is critical to evaluate if the Mexico's amenities, including ramps, benches, and walkways, are suitably designed to accommodate people with disabilities, as almost two-thirds of respondents use it on a daily basis.

The frequent use suggests that a large number of people could greatly benefit from accessibility improvements. Furthermore, as people utilize the street for leisure as well as transit, it could be helpful to get qualitative input from people with disabilities regarding their experiences. Specific improvements to the study area's infrastructure may be influenced by this feedback. Given the circumstances, the data shows that Mexico is a major transportation hub, especially for regular users. This emphasizes how crucial it is to make the area convenient and accessible for people with disabilities, since doing so may improve their participation in community events and overall experience.

4.4.2 The overall convenience of Mexico street for persons with Disabilities

In this section the study aims to evaluate the convenience of the road of Mexico and its convenience to people with disabilities. The results were as follows:

Table 7: Rate the overall convenience of Mexico street for individuals with disabilities.

		Frequency	Percent	Valid %	Cumulative %
Valid	very inconvenient	63	56.8	56.8	56.8
	Inconvenient	48	43.2	43.2	100.0
	Total	111	100.0	100.0	

Source: Own survey result, 2025

The information about Mexico's general accessibility for people with disabilities shows alarming trends. A startling sixty-three people (56.8%) out of 111 respondents said the street is "very inconvenient," indicating that there are major obstacles that prevent accessibility. This resounding majority implies that Mexico's current state does not satisfy the requirements of people with disabilities, which results in a poor opinion of its practicality. Furthermore, 48 people.

(43.2%) said the street was "inconvenient." Together, these results show that no responder rated the street as handy or very convenient, indicating that all participants believe it to be inaccessible. This highlights even more how urgently Mexico's facilities and infrastructure must be upgraded to better serve people with disabilities.

A universal attitude of displeasure is highlighted by the cumulative percentage of 100%, which demonstrates that all respondents gave comments regarding the ease of the area. Considering the considerable number of people who find the street extremely inconvenient, a detailed assessment of the obstacles they encounter is necessary. Significant adjustments, like bettering paths, upgrading signage, and guaranteeing accessible amenities, can be guided by this input.

4.5. Factors that affect the inconvenience of Mexico streets for people with disabilities

4.5.1 Specific Inconveniences Faced

Within this segment, we analyzed the convenience of the road of Mexico and its convenience to people with disabilities. The results were as follows:

Table 8: **What specific inconveniences do you face when using Mexico?**

		Frequency	Percent	Valid %	Cumulative %
Valid	Lack of ramps	42	37.8	37.8	37.8
	Poorly maintained sidewalks	33	29.6	29.6	67.4
	Inadequate signage	23	20.9	20.9	88.3
	Insufficient seating areas	13	11.7	11.7	100.0
	Total	111	100.0	100.0	

Source: Own survey result, 2025

Reports of the specific discomfort encountered by users of Mexico highlight a range of serious accessibility issues. The most commonly mentioned problem among the 111 respondents is the "lack of ramps," which forty-two people (37.8%) said is a major obstacle. This suggests that a significant barrier that keeps people with disabilities from successfully crossing the area is the lack of appropriate ramps.

Thirty-Three respondents (29.6%) cited "poorly maintained sidewalks," the second most often stated annoyance. This implies that users may encounter safety risks and difficulties due to the state of the walking surfaces, making it more difficult for them to move around the plaza. These two problems together highlight the urgent need to improve Mexico's physical infrastructure in order to improve accessibility. Additionally, "inadequate signage" was mentioned as a worry by twenty-three respondents (20.9%). This suggests that there is a lack of accessible and clear signage, which can cause confusion and create barriers that prevent those with disabilities navigating. Good signage is necessary for directing people around the area and giving them vital details about the amenities that are available. Lastly, "insufficient seating areas" was cited as an annoyance by thirteen respondents (11.7%).

This suggests the need for additional designated rest areas, which are essential for people who might need to take breaks while visiting or who might find it difficult to stand for extended periods of time.

In conclusion, the information paints a clear picture of the main annoyances that people with disabilities encounter at Mexico. There is an urgent need for renovations given the frequency of problems including the absence of ramps, badly kept sidewalks, insufficient signs, and a lack of rest spots. By addressing these particular issues, accessibility and usability could be greatly improved, creating a more welcoming atmosphere for all users and guaranteeing that people with disabilities can utilize the area to the fullest.

4.5.2 Contributing factors to the inconvenience

Individuals taking part were requested to rank the main factor contributing to the inconvenience of streets for individuals with disabilities and the results are shown in Table 9.

Table 9: What do you believe about the main factors contributing to the inconvenience of streets for individuals with disabilities?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Lack of awareness among city planners	72	64.9	64.9	64.9
	Insufficient funding improvements for infrastructure	39	35.1	35.1	100.0
	Total	111	100.0	100.0	

Source: Own survey result, 2025

The data regarding the perceived main factors contributing to the inconvenience of streets for individuals with disabilities reveals significant insights into systemic issues. Out of 111 respondents, the majority, seventy-two individuals (64.9%), identified "lack of awareness among city planners" as a primary factor. This suggests that there is a substantial gap in understanding the specific requirements and obstacles encountered by individuals with disabilities when it comes to urban planning and street design. The high percentage indicates that addressing this lack of awareness is critical for creating more inclusive and accessible environments.

In contrast, thirty-nine respondents (35.1%) attributed the inconvenience to "insufficient funding for infrastructure improvements." This highlights the financial constraints that can hinder the implementation of necessary changes to enhance accessibility. While funding is clearly a concern, it appears secondary to the awareness issue, suggesting that even with adequate resources, the effectiveness of improvements would depend heavily on the planners' grasp of the accommodation needed by those with disabilities. The cumulative percentage of 100% confirms that all respondents provided feedback on the contributing factors, reinforcing the significance of both awareness and funding in addressing the obstacles faced by individuals with impairment. In summary, the data underscores the need for increased awareness among city planners about the specific needs of those with impairment as a crucial step toward improving street accessibility. Additionally, while funding remains a principal factor, it is clear that enhancing understanding and knowledge within urban planning can lead to more effective and meaningful infrastructure improvements, ultimately fostering a more inclusive urban environment.

4.5.3 The current status of infrastructure in Mexico streets

While conducting the study participants were asked to comment on the current infrastructure of roads in Addis Ababa and the results are displayed below.

Table 10: How well do you think the current infrastructure meets the needs of individuals with disabilities?

		Frequency	Percent	Valid %	Cumulative %
Valid	Very poorly	52	46.8	46.8	46.8
	Poorly	37	33.4	33.4	80.2
	Adequately	9	8.1	8.1	88.3
	Well	13	11.7	11.7	100.0
	Total	111	100.0	100.0	

Source: Own survey result, 2025

The data regarding their view on how the current infrastructure serves the needs of individuals with disabilities reveals a predominantly negative assessment. Out of 111 respondents, a significant fifty-two individuals (46.8%) rated the infrastructure as "very poorly" in addressing their needs. This indicates a strong consensus that the existing infrastructure fails to provide adequate support for accessibility. Additionally, thirty-seven respondents (33.4%) rated it as "poorly," further reinforcing the sentiment of dissatisfaction. Together, these two categories account for over 80.2% of the responses, highlighting a critical deficiency in the infrastructure that affects a vast majority of users. In contrast, only nine respondents (8.1%) felt that the infrastructure meets needs "adequately," and a mere 13 individuals (11.7%) rated it as "well." The low percentages in these categories indicate that few believe the current facilities effectively support individuals with disabilities, suggesting a major gap in accessibility and usability. The cumulative percentage of 100% confirms that all respondents provided feedback on their perceptions, underscoring the overall negative sentiment regarding the infrastructure. In summary, the data strongly suggests that the current infrastructure at Mexico is inadequate for meeting the needs. The high rates of "very poor" and "poor" responses highlight the urgent need for improvements to create a more accessible and inclusive and suitable environment. Addressing these deficiencies is essential to enhance the overall experience of the individuals and ensure their full participation in public activities.

4.6. Strategies to improve convenience of streets for people with Disabilities

The survey results indicate a significant demand for improvements to street accessibility for individuals with disabilities, with the installation of more ramps being the most favored solution. This response, from nearly half of the participants, highlights the pressing need for infrastructure that supports mobility. Ramps are vital in providing seamless transitions between diverse levels of sidewalks and streets, enabling wheelchair users and individuals with mobility challenges to navigate urban environments more effectively. Additionally, the second most popular suggestion, regular maintenance of sidewalks underscores the importance of not only creating accessible features but also ensuring they remain functional. Cracked or uneven sidewalks can pose serious hazards, making maintenance a critical aspect of accessibility. Ensuring that sidewalks are well kept can prevent accidents and enhance the overall experience for all pedestrians, particularly those with disabilities.

Table 11: What solutions do you think could improve the convenience of Mexico streets for people with disabilities?

		Frequency	Percent	Valid %	Cumulative %
Valid	Installation of more ramps	45	40.5	40.5	40.5
	Regular maintenance of sidewalks	32	28.8	28.8	69.3
	Improved signage and information	20	18.1	18.1	87.4
	Community awareness programs	14	12.6	12.6	100.0
	Total	111	100.0	100.0	

Source: Own survey result, 2025

The information about possible ways to make streets more accessible to those with disabilities identifies a number of key areas that need improvement. The "installation of more ramps," which was recommended by 45 people (40.5%) out of 111 respondents, is the most often mentioned solution. In order to facilitate movement for people with disabilities, this response emphasizes the vital necessity for accessible entry and exit points across the metropolitan environment.

"Regular maintenance of sidewalks," which is the second most popular solution, was emphasized by 32 respondents (28.8%) as the significance of maintaining walking surfaces. This suggests that the sidewalks' current condition may present accessibility issues and safety risks, making routine

maintenance essential to maintaining a functional infrastructure. Twenty respondents (18.1%) chose "Improved signage and information," indicating that people need easily comprehensible information to help them navigate the streets more successfully. Users may experience less confusion as a result of this enhancement, which could also increase accessibility generally. Finally, fourteen respondents, or 12.6%, supported "community awareness programs".

Even though this is the least popular choice, it nevertheless emphasizes how important it is to promote community awareness and support of the obstacles faced by individuals with disabilities. Planners and the public at large may adopt more inclusive attitudes and behaviors as a result of increased awareness. The cumulative percentage of 100% shows that every respondent offered suggestions for possible fixes, demonstrating a thorough understanding of the problem. In conclusion, the evidence shows that solutions targeted at improving accessibility for people with impairments are clearly prioritized. The focus on preserving walkways and adding more ramps implies that quick physical upgrades are essential.

Furthermore, even though better signage and community awareness are crucial, it seems that the urgent need for structural adjustments takes precedence over them. By putting these ideas into practice, streets might become far more accessible and useful for people with disabilities, creating a more welcoming urban atmosphere.

4.7. Interviews results and Discussions

We conducted interviews to assess the level of awareness and integration of disability considerations in public infrastructure project designs, and to suggest effective solutions for current challenges and facilitators to enhance the convenience of streets for people with disabilities. They highlight institutional, policy implementation, and awareness gaps that affect street accessibility. The key insights from these discussions are summarized below.

4.7.1 Awareness of Disability Mainstreaming Policies

It was discovered that the respondents had very little knowledge of the policy's requirements for integrating mainstream disability into extension services. Because of the limited and insufficient information provided by the municipal program and project coordinators, this meant that they also failed to adequately raise awareness of the issue among their colleagues at lower levels of administration. This was further demonstrated by the civil engineers' obvious recognition that

during the period of this research, the Addis Ababa City Administration had not established the policies needed to integrate disability inclusion into its building and construction projects.

According to the report, Addis Ababa's existing civil engineering workforce is sufficiently educated to understand policy declarations and ensure their timely execution. However, it appears that some technical staff members in city administrations only participate in the implementation phase after their supervisors take the initiative. Despite active policy awareness efforts at the national level, only minimal and inadequate information filters down to the ministry's lower tiers, slowing the rapid integration of disability considerations into public infrastructure and development projects. This is demonstrated by the fact that 15 respondents, or 68% of the sample, acknowledge that they are unsure of what "disability mainstreaming" means. This implies that implementing disability mainstreaming policies would be difficult for the staff because most of them are unaware of its foundation and rationale. These findings corroborate those of Lang and Murangira (2009), who determined that most civil servants within development line ministries exhibit insufficient awareness of, and limited understanding regarding, the principles and practices of disability mainstreaming. Insufficient awareness constitutes a primary impediment to integrating disability mainstreaming into infrastructure design and development initiatives intended to empower all citizens, regardless of ability.

The research further indicated that certain civil engineers, although regularly engaged in relevant projects and programs, remained unfamiliar with the national disability mainstreaming policy, are frequently relied upon by the Ethiopian government to carry out policy, and have daily first-hand interactions with project beneficiaries. Their apparent ignorance of the current disability mainstreaming policy supports Katsui's (2008) findings in Japan that individual characteristics influence the advancement or stagnation of disability mainstreaming. It was discovered that the senior civil workers in charge of the municipality were more proactive in learning about the disability mainstreaming policy, even if it was not possible to establish at the city administration. The study also noted that civil engineers in the field were only aware of disability mainstreaming once they were confronted with inquiries about it from people outside of their workplaces. Seventy percent of the construction workers were found to lack the personal motivation to learn more, particularly on new policy issues. Survey results indicated that individuals with lower educational attainment (specifically those holding certificates or diplomas) demonstrated the least awareness of the requirement for disability mainstreaming in both national and ministerial policies governing the execution of infrastructure development programs and projects nationwide. It supports

Nyagudi's (2012) findings that low awareness and education about disabilities, which lead to low attitudes, is one of the obstacles to disability mainstreaming.

Jones and Webster (2006) argue that to enhance the well-being of persons with disabilities and to support the integration of disability-focused measures into development initiatives—thereby fostering staff engagement and ownership—an organization must undertake a thorough sensitization campaign, followed by the implementation of concrete, well-funded, and practicable action steps. Rapid capacity-building and strategic HR management interventions are required to reverse the current situation among construction personnel in the Addis Ababa City Administration, where disability awareness and expertise tend to be limited to higher-level offices, leaving sub-city divisions and site-level units with little understanding of these issues.

Although the staff acknowledged that they knew where some disabled people lived in their region, it was also noted that there was no office inventory on people with disabilities. It demonstrates that the majority of respondents believed that information on the disabled was only crucial during emergencies and when food was provided for them. From an administrative perspective, the Addis Ababa City Administration does not actively register all individuals with impairment in order to gather information for the designs of infrastructure projects. Although the majority of offices had service delivery charters, these did not clearly outline how individuals with disabilities would be specifically accommodated in the plans for infrastructure construction.

In infrastructure development projects or programs, increasing awareness of disability mainstreaming issues can help extension practitioners obtain and provide the public with the necessary training and technical assistance. It can also encourage greater accountability for the efficient use of resources. Regarding the Addis Ababa City Administration's construction workforce. Since most of the people carrying out policies in the field have little understanding of mainstreaming, it would be difficult to immediately apply the disability mainstreaming component in any infrastructure development project or program.

When looking at how awareness shapes the inclusion of disability considerations in infrastructure project designs, the study discovered that, despite what most respondents believed, individuals' exposure to disability awareness issues actually varies widely according to their own firsthand experiences interacting with people with disabilities. The ministry of works also provided an example of various levels of comfort when it came to talking about disability-related issues with

clients. This issue is bolstered by Kline's (2012) results and is further demonstrated by the absence of sufficient training and awareness of disability mainstreaming.

4.7.2 Challenges in Implementation of policies to benefit Person with Disabilities

As further confirmed by the staff members at various institutions, an interview conducted by us revealed that no service provider charter in any office at any level had any explicitly stated entitlement provisions for people with disabilities. As evidenced by this, some high-ranking government officials were afraid to discuss the extent of disability mainstreaming in their workplaces and instead chose to convey a broad sense of conformity. Out of all the public offices surveyed and interviewed, only one provided an accessible ramp for people with disabilities, and just one of the newly constructed offices included restrooms specifically designed for their use.

The condition of the office buildings reveals an unpreparedness to meet the requirements of individuals with disabilities. Moreover, it suggests that those responsible for implementing the infrastructure projects did not anticipate the need to accommodate clients with physical impairments within these office environments. Additionally, some older buildings' structural integrity precludes the construction of ramps and other modifications to accommodate the demands of those with disabilities, which is made worse by a limited space for growth.

We also learned that the Addis Ababa workers' and labor office and the city administration have drafted a number of laws that are currently being approved to provide PWDs with access, such as buildings designed to accommodate them, easy access to buildings, parking facilities, ramps, etc. Although these laws should directly improve PWDs' accessibility to buildings and housing, state departments are doing very little to address the current state of affairs.

Therefore, it appears that the government, developers, consultants, and contractors the major players listed to ensure conformity to such standards are not collaborating effectively to realize complete impairment integration into physical infrastructure. The most difficult aspect is that, as seen by the clear design issues with the most recent office being constructed in Kisumu municipality, the engineers who are typically hired to construct government buildings seem to be the main offenders of non-compliance. The lack of support systems in the present day, when national policy implementation is being audited, indicates that full disability mainstreaming is being achieved at a very slow pace. As a government agency, the ministry of housing offices is

unable to sufficiently satisfy the essential needs of people with impairments in their current configurations.

Whether information is packaged and distributed in Braille for those with disabilities, the study's participants scored their thoughts. Every respondent attested to the lack of a system for providing their clients with Braille information. It turned out that none of them possessed the skills or knowledge necessary to create reports in Braille that those with visual impairments could use. The city administration did not provide an example of any attempts to do so. The traditional method of conveying knowledge through textual sources, as it is currently implemented within the services offered, limits learning; therefore, alternatives for individuals with disabilities must be provided. According to every answer, sign language interpreting was not necessary when infrastructure projects were being carried out. Their claim that sign language is a specialized ability that they lacked at the time is rationally sound. Systems must be established to address these particular information demands, as acknowledged by Oodally (2006), who noted that the talents and distinctive characteristics of individuals with disabilities dictate the type of response to their disability.

4.8. Key Findings

This section presents a concise overview of the key insights derived from both the survey and interviews conducted throughout the study. The findings highlight the existing gaps in accessibility along Mexico street in Addis Ababa for persons with disabilities, emphasizing the frequency of use, perceived inconvenience, infrastructural shortcomings, and institutional barriers.

4.8.1 Summary of Findings

- Mexico is a vital transit and recreational area, as evidenced by the data showing that a sizable majority of respondents (62.1%) use it every day. To accommodate all users, including those with disabilities, the street's accessible elements must be evaluated in light of its frequent use. Mexico was considered "very inconvenient" for people with disabilities by the majority of respondents (56.8%). This reflects a general belief that immediate upgrades are required because the street's current infrastructure does not satisfy accessibility requirements.
- Lack of ramps (37.8%) badly maintained sidewalks (29.6%), poor signage (20.9%), and insufficient seating areas (11.7%) were the most commonly mentioned annoyances. These obstacles show critical areas for improvement and severely limit the movement of

individuals. The major cause of accessibility problems, according to a sizable portion of respondents (64.9%), is city planners' ignorance. 35.1% of respondents reported that insufficient funds for infrastructure improvements, indicating that raising awareness is crucial even though financial limitations are a worry.

- A majority of respondents assessed the current infrastructure's ability to satisfy the demands of people with disabilities as "very poorly" (46.8%) or "poorly" (33.4%). This highlights the critical need for infrastructure improvements and represents a substantial accessibility gap. More ramps would increase accessibility, according to nearly half of respondents (40.5%), followed by routine sidewalk repair (28.8%). This highlights the necessity of making physical improvements for the betterment mobility for those with disabilities.
- The study found that civil engineers and municipal employees working on public infrastructure projects in Addis Ababa had a lack of knowledge and comprehension about disability mainstreaming. There was insufficient training on pertinent policies and ineffective communication, as seen by the significant percentage of respondents (68%) who were unsure of what disability mainstreaming meant. Even though there were national policies in place, they were rarely implemented locally, and many civil engineers only became involved with handicap issues in response to outside queries. Additionally, there was insufficient physical accessibility in the infrastructure that was already in place, with only one office having a ramp and few accommodations for people with disabilities (PWDs).

CHAPTER FIVE

CONCLUSION AND RECOMMENDATION

5.1. Introduction

This chapter presents an overview of the conclusions and offers recommendations. The study's primary aim to assess the accessibility of Mexico in Addis Ababa for people with disabilities. To accomplish this, we reviewed relevant literature and gathered both quantitative and qualitative data via questionnaires and interviews administered to residents of the target area and employees of various businesses. Questionnaire data were organized, analyzed, interpreted, and discussed using SPSS version 25. Based on this analysis, the subsequent findings were documented, conclusions formulated, and recommendations offered to banking industry practitioners.

5.2. Conclusion

The findings of this study reveal that Mexico is a frequently used public space, underscoring its significance in the daily lives of residents, including individuals with disabilities. However, the study also demonstrates that the existing street infrastructure in and around Mexico lacks adequate accessibility measures. The overwhelming perception of inconvenience among people with disabilities highlights a critical gap in inclusive urban planning, indicating that the street is currently not serving all members of the community equitably.

Key barriers identified such as the lack of ramps, poorly maintained sidewalks, and inadequate signage point to deep-rooted systemic issues in urban infrastructure that compromise the mobility, safety, and dignity of people with disabilities. While financial limitations were acknowledged, the lack of awareness among city planners emerged as a more significant obstacle, revealing that even with adequate funding, improvements are unlikely unless planners understand the specific needs of person with impairments.

These findings call for urgent reforms. Respondents emphasized the importance of practical solutions, such as the installation of ramps and regular maintenance of sidewalks, as immediate and impactful ways to improve accessibility. Furthermore, the study uncovered gaps in institutional knowledge and policy implementation, especially regarding disability mainstreaming. Most municipal staff lacked awareness or training related to inclusive design principles, and this lack of preparedness hinders the full participation of people with disabilities in urban life.

Overall, the study concludes that while policy frameworks may exist, their execution remains ineffective. Strengthening institutional capacity, improving community awareness, and prioritizing user-informed infrastructure planning are essential for ensuring that public spaces like Mexico are truly inclusive. Addressing these issues is not only a matter of compliance but a critical step toward upholding the inclusive rights of people with disabilities.

5.3 Recommendation

To make Mexico welcoming for everyone, especially people with disabilities, the city should do frequent accessibility audit considering the issue cannot be resolved by just one time instalment. Key actions include adding ramps, creating rest areas, and maintaining sidewalks. Throughout, engaging community members with disabilities will ensure improvements truly meet their needs.

- The city administration should perform an extensive evaluation of Mexico street to pinpoint specific accessibility enhancements that can be implemented to serve people with impairments.
- The municipality should execute a well-thought-out strategy to improve Mexico's amenities, emphasizing the addition of accessible elements including rest places, proper signage, and ramps.
- To solve the most reported discomfort, the city administration should give priority to installing ramps and maintaining walkways.
- Develop and implement a phased plan for infrastructure improvements, starting with the installation of ramps and regular sidewalk maintenance. Engage with community members, particularly individuals with disabilities, to gather feedback and ensure that their needs are met effectively.

5.4. Recommendation for future research

The following are areas to be accounted for future research.

- Expand the geographic scope to include multiple high-density intersections across Addis Ababa and other cities in Ethiopia to compare accessibility conditions in different urban contexts.

- Future research Perform longitudinal studies to monitor accessibility changes over time and evaluate how implemented enhancements affect the lives of people with impairments in urban settings.
- Future scholars ought to look at how technology might improve accessibility, such as through the use of digital platforms or mobile applications that offer up-to-date information about accessible roads and amenities.
- To find gaps and suggest changes based on factual data, future scholars should thoroughly examine current policies pertaining to disability rights and urban accessibility.

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Appendix
ADAMA SCIENCE AND TECHNOLOGY UNIVERSITY
SCHOOL OF CIVIL ENGINEERING AND ARCHITECTURE

DEPARTMENT OF URBAN PLANNING AND DESIGN
GRADUATE STUDIES

Dear respondents

I am kindly request you to participate on this survey questionnaire to **evaluate the Convenience of Mexico , Addis Ababa for Individuals with Disabilities**. The information you will provide will be used as primary data for partial fulfilment of the requirements for the second degree in Urban Planning and Design. Your participation in this study is completely voluntary. Your genuine response and cooperation are vital for this study and will take approximately 10 minutes. All your responses are strictly confidential and data from this research will be reported only in the aggregate. Please don't write your name anywhere on this questionnaire. Please Tick (✓) where appropriate in the box. I would like to express my heartfelt gratitude in advance for your kind participation.

Part One: Questionnaire

Section A: Demographic Information

1. Age:

Under 18		18-24	
25-34		35-44	
45-54		55 and above	

2. Gender:

Male		Female	
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3. Type of Disability:

Visual impairment Hearing impairment
Mobility impairment Cognitive impairment
Other (please specify): _____

Section B: Assessment of Convenience

4. How often do you use Mexico for transportation or leisure?

Daily Weekly
Monthly Rarely
Never

5. Rate the overall convenience of Mexico for individuals with disabilities (1-5 scale):

1 - Very inconvenient 2 – Inconvenient 3 - Neutral
4 – Convenient 5 - Very convenient

6. What specific inconveniences do you face when using Mexico? (Select all that apply)

Lack of ramp poorly maintained sidewalks
Inadequate signage insufficient seating areas
Other (please specify): _____

Section C: Factors Affecting Inconvenience

7. What do you believe are the main factors contributing to the inconvenience of streets for individuals with disabilities? (Select all that apply)

Lack of awareness among city planners ☐

Insufficient funding for infrastructure improvements ☐

Lack of community engagement in planning ☐

Poor enforcement of accessibility standards ☐

Other (please specify): _____

8. How well do you think the current infrastructure meets the needs of individuals with disabilities?

Very poorly ☐ Poorly Adequately ☐

Well, ☐ Very well ☐

Section D: Possible Solutions

9. What solutions do you think could improve the convenience of Mexico streets for people with disabilities? (Select all that apply)

Installation of more ramps ☐ Regular maintenance of sidewalks ☐

Improved signage and information ☐ Community awareness programs ☐

Other (please specify): _____

10. Please provide any additional comments or suggestions regarding the accessibility of Mexico :

Part Two: Interview Question for the staff of the Addis Ababa City Administration

1. Can you describe your understanding of the current policies regarding disability mainstreaming in public infrastructure projects? How do you think these policies are communicated within your organization?

2. What challenges have you encountered in implementing disability mainstreaming in infrastructure design? Can you provide specific examples of obstacles you face in your role?

3. How do you perceive the role of technology in enhancing accessibility for people with disabilities in public infrastructure? Are there any specific technologies or practices you believe could improve this situation?

4. In your experience, how often are individuals with disabilities involved in the planning and evaluation of infrastructure projects? What measures do you think need to be taken to improve their participation?
