



International  
Labour  
Office

# **STRATEGIES FOR SKILLS ACQUISITION AND WORK FOR PERSONS WITH DISABILITIES IN SOUTHERN AFRICA**

## **MALAWI**

**February 2007**

Prepared by the ILO Skills and Employability Department  
and the Government of Flanders

**International Labour Office  
Geneva**



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*Strategies for skills acquisition and work for people with disabilities : Malawi / ILO Skills and Employability Department and the Government of Flanders. Geneva : ILO, 2007 - - 1 v. ISBN: 9789221197652; 9789221197669 (web pdf)*

*CORPORATE AUTHOR(S): International Labour Office. Skills and Employability Dept.; Flanders (Belgium)*

*ILO DESCRIPTORS: vocational training, employment, training employment relationship, disabled person, disabled worker, Malawi*

*FACET: 06.01*

*ILO Cataloguing in Publication Data*

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## ABBREVIATIONS

CBR	Community-Based Rehabilitation
CBT	Community-Based Training
DDC	District Development Committee
DEMATT	Development of Malawi Traders Trust
DPOs	Organizations of and for persons with disabilities
FEDOMA	Federation of Disability Organizations in Malawi
HDI	Human Development Index
ILO	International Labour Organization
KVRTC	Kamuzu Vocational Rehabilitation and Training Centre
LDCs	Least-Developed Countries
LVTC	Lilongwe Vocational Training Centre
MACOHA	Malawi Council for the Handicapped
MAPD	Malawi Against Physical Disabilities
MOLVT	Ministry of Labour and Vocational Training
MSPDWD	Ministry of Social Development and Persons with Disabilities
MSMEs	Micro, medium- and small-sized enterprises
NAD	Norwegian Association of the Disabled
NGOs	Non-Governmental Organizations
NORAD	Norwegian Agency for Development Co-operation
NSO	National Statistical Office of Malawi
PHC	Primary Health Care
PHOS	Platform for Disability and Development Cooperation
PRSP	Poverty Reduction and Strategy Paper
SINTEF	The Foundation for Scientific and Industrial Research at the Norwegian Institute of Technology (NTH)
SRG	Stakeholders' Reference Group
TEVET	Technical Education, Vocational and Entrepreneurship Training
TEVETA	Technical Entrepreneurial and Vocational Education and Training Authority
UNCDF	United Nations Capital Development Fund
UNDP	United Nations Development Programme
VTC	Vocational Training Centre
WHO	World Health Organization

## Introduction

When people with disabilities have access to training in skills which are relevant to the labour market and suited to their abilities and interests, they can make a significant contribution in the workplace and to the living standards of their households, the community and wider society. This is increasingly recognized as opportunities have opened up, in recent decades, both in training centres and in the open labour market. Yet in many countries, the potential of many disabled people remains untapped, as they frequently do not have equal access to training in employable skills, relevant to the labour market in which they seek to work, either in formal employment or in self-employment, or small businesses in the informal economy.

What strategies have been successful in assisting some disabled people in finding decent jobs? What obstacles stand in the way of others? What policy measures are required to dismantle these barriers? These and related questions require attention in every country around the world. The ILO project, *Skills Acquisition and Work for Persons with Disabilities in Southern Africa*, funded by the Government of Flanders, has sought to contribute to this debate through an exploratory assessment of skills acquisition strategies which have been introduced in African countries through technical cooperation projects over the past two decades. Working in collaboration with disabled persons' organizations (DPOs) in Malawi, South Africa, Swaziland and Zambia, the project involved conducting pilot surveys of disabled people and compiling case studies of some of those who have attended training.

This document reports on the findings of the ILO/Flanders project in Malawi, in the broader context of the legislation and policies in place. Focusing on examples of success and of obstacles faced, the document sets the scene for a discussion of the policy and programme steps needed in order to turn the goal of full inclusion with equality into a reality for all Malawians with disabilities. An initial discussion of the survey findings took place at a tripartite plus workshop, "*People with Disabilities – Pathways to Decent Work*", in May 2006. The recommendations of the workshop participants are contained in the workshop report.<sup>1</sup>

This document, along with the workshop report, aims to contribute to the effective implementation of Malawian legislation and policy concerning persons with disabilities, and more broadly, to contribute to the achievement of the targets set in the Plan of Action of the African Decade of Persons with Disabilities. Both documents will hopefully contribute to setting the scene in Malawi for future implementation of the UN Convention on the Rights of Persons with Disabilities, formally adopted in December 2006, if the Government of Malawi decides to ratify this Convention.

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<sup>1</sup> ILO, *People with Disabilities – Pathways to Decent Work*, Report of a Tripartite Workshop, Lilongwe, Malawi, 16-17 May 2006.



## 1. Persons with disabilities in Malawi

It is recognized that in Malawi disabled people and households with disabled persons are among the poorest and most disadvantaged in society.<sup>2</sup> A recent representative study, *Living Conditions of Disabled Persons in Malawi*, highlighted the difficulty faced by the majority of disabled persons in obtaining an education - 35 per cent of those with disabilities had never attended school, compared to 18 per cent of non-disabled persons surveyed.<sup>3</sup> Difficulties in accessing vocational training and formal employment were also reported. The study also found that households with disabled members have lower standards of living than other households – attributed to lack of employment (fewer households with a disabled family member have someone working in a formal job), lower household income, poorer housing standards and less access to information.

### Population of disabled persons

In 1983, there were 190,000 people with disabilities in Malawi, comprising 2.9 per cent of the population, the majority living in rural areas.<sup>4</sup> There is some indication that the 1983 figure underestimated the actual incidence of disability, due to the overlooking of certain disability types such as heart and respiratory diseases, blood disorders, disabilities caused by drug or alcohol abuse and some forms of mental disorder. If the World Health Organization (WHO)'s estimate of 7 to 10 per cent of the population were applied, the number of disabled people in Malawi would be far higher, at between 695,000 and 1 million persons in 2004.

In terms of planning equitable policies and services, it is important to take account of the different types of disability and related support requirements of disabled persons, so as to ensure that the obstacles to their participation in society are effectively tackled. The *Living Conditions* study provides a profile of the different types of disability in the country, based on disabled persons' own descriptions. Physical disability was found to be most prevalent (43 per cent of the survey population), followed by visual impairment (23 per cent), hearing impairment (16 per cent), intellectual or emotional disability (11 per cent) and other types (7 per cent). The main reported causes of disability were illness (48 per cent), congenital reasons (17 per cent) and accidents (15 per cent). Over half of the survey population (59 per cent) had been disabled from birth or had acquired their disability by age 10; 11 per cent between 11 and 20 years of age, 23.5 per cent between the age of 20 and 60; with 7 per cent becoming disabled after age 60.

### *Women with disabilities*

In many countries of the world, women with disabilities are found to experience greater discrimination than disabled men and non-disabled women, arising from the dual effect of their gender and disability. This pattern is also found in Malawi, as was shown by the

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<sup>2</sup> *Malawi Poverty Reduction Strategy Paper (PRSP)*, Final Draft, 2002.

<sup>3</sup> Loeb, M.E., and Edie, A. H. *Living Conditions among People with Disabilities in Malawi. A National Representative Study*, SINTEF Health Research, 2004.

<sup>4</sup> Survey of National Statistical Office of Malawi (NSO), 1983, cited in *Malawi Country Strategy, 2003*, Danish Organization of Disabled People.

findings of the *Living Conditions*<sup>5</sup> study. Far fewer women with disabilities attended school (59 per cent) than both non-disabled women (79 per cent) and men with disabilities (71 per cent). Women were more often unemployed than men, and women with disabilities had the highest unemployment rate. Women's monthly salaries were lower than men's among the disabled and non-disabled survey participants, disabled women had the lowest average salary of all groups.<sup>6</sup>

The study concluded that, as women score lower on many of the important indicators of level of living conditions, there is a need for a gender perspective on disability policy in the country. This is particularly important when it comes to skills development which sets the scene for access to decent work, whether this be in the form of a job, or small enterprise.

## Social and economic context

To develop appropriate policy measures to improve the living standard and the quality of life of disabled Malawians, their situation needs to be seen in the context of the general situation in the country as a whole.

With a population of 9,933,868 (1998),<sup>7</sup> Malawi is one of the world's 50 Least Developed Countries (LDCs) and ranks 165 out of 174 countries on UNDP's Human Development Index (HDI), according to the UNDP Human Development Report of 2004.<sup>8</sup> Key indicators measured to calculate the HDI are the following:

- life expectancy at birth was 37.5 years for men and 38.2 for women;
- gross enrolment ratio (combined for primary, secondary and tertiary education), was estimated at 77 per cent among boys and 71 per cent among girls;
- adult literacy rate was 61.8 per cent, with a much higher rate recorded for men (75.5 per cent) than women (48.7 per cent); and
- annual per capita GDP was US\$580 in 2002.

The *Malawi Poverty Reduction Strategy Paper (PRSP)* states that nearly two-thirds of the population is living in poverty.<sup>9</sup> Nine in ten (91 per cent) of the poor live in rural areas, and the southern region is more affected by poverty than the other two regions of the country.<sup>10</sup> The situation is made worse by the fact that 25 per cent of the households in Malawi are headed by women, who have had less access to education and training in marketable skills and are thus more disadvantaged when it comes to earning a living.

Formal employment possibilities are limited in Malawi. Of 300,000 students leaving school every year, mainly during or after primary school, only 30,000 (10 per cent) find employment in the formal economy.<sup>11</sup> According to the *Living Conditions* study,<sup>12</sup> the

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<sup>5</sup> Loeb, M.E., and Edie, A. H. op. cit.

<sup>6</sup> *ibid.*, pp. 86, 92 and 94.

<sup>7</sup> According to the 1998 Population and Housing Census. See NSO of Malawi, [www.nso.malawi.net](http://www.nso.malawi.net).

<sup>8</sup> UNDP, *Human Development Report 2004*, Washington, 2004.

<sup>9</sup> *ibid.*, the *Malawi PRSP* (2002) quotes a household survey conducted by the Government, p. 5. UNDP figures (GDP and income poverty) are calculated in purchasing-power parity (PPP).

<sup>10</sup> *Malawi PRSP*, p. 6.

<sup>11</sup> *Malawi PRSP*, p. 56.

unemployment rate among persons in the economically active age of 15-65 years is 54 per cent. The unemployment rate appears to be slightly higher among people with disabilities as compared to those without disabilities (57.7 per cent versus 53.2 per cent).

In 2002, Malawi had an estimated 747,363 micro, small and medium enterprises (MSMEs) generally (91 per cent) employing under five workers. Eighty-three per cent of the MSMEs were located in rural areas; 75 per cent were in the non-agricultural sector, mainly in manufacturing, trade and services; 34 per cent of MSMEs were owned by women.<sup>13</sup>

HIV/AIDS prevalence is estimated at 14 per cent of the population.<sup>14</sup> A recent study has shown that people with disabilities are probably more likely to contract HIV than non-disabled persons.<sup>15</sup> HIV/AIDS is devastating the labour force. It was projected in 1998 that over 40 per cent of educational personnel in urban areas would die as a result of AIDS by 2005.<sup>16</sup> Deaths among public servants have increased six-fold between 1990 and 2000 as a result of AIDS.<sup>17</sup> By causing the illness and death of workers, the HIV/AIDS epidemic reduces the stock of skills and experience of the labour force.

The *Living Conditions* study<sup>18</sup> highlighted the barriers to accessing services and participating in society which all disabled people face in Malawi and the greater barriers to participation experienced by individuals with mental or emotional difficulties. It also highlighted the importance of skills training to getting jobs, that more persons with skills; formally and informally acquired, were employed as compared to persons without skills: among persons with disabilities surveyed, 63 per cent of those with skills were employed, compared to 28 per cent of those without skills. While 41 per cent of respondents with disabilities had acquired some skills, often at school, there was still a significant shortfall in the availability of vocational training for persons with disabilities in Malawi. Forty-five per cent of disabled respondents in the *Living Conditions* study said they needed vocational training services, and only 5.6 per cent said that they had acquired this service. The study concluded that the large gap in the provision of vocational training services, as well as some other services – welfare, assistive devices and counselling – “express to a degree the frustration of people with disabilities in the community, as well as an opportunity for service providers to improve services and accessibility, and not in the least to policymakers to review priorities in the area of service provision.”<sup>19</sup>

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<sup>12</sup> Loeb, M.E., and Edie, op. cit., p. 151.

<sup>13</sup> *Malawi PRSP*, p. 32.

<sup>14</sup> UNAIDS-UNICEF-WHO, *Malawi: Epidemiological Fact Sheet on HIV/AIDS and Sexually-Transmitted Infection – 2004 Update*, 2004.

<sup>15</sup> Nora Groce, *HIV/AIDS and Disability: Capturing Hidden Voices*, World Bank-Yale University Global Survey on HIV/AIDS and Disability, 2004.

<sup>16</sup> ILO, *HIV/AIDS and Work: Global Estimates, impact and Response*, Geneva, 2004.

<sup>17</sup> UNAIDS, *2004 Global Report on the AIDS Epidemic*, Geneva, 2004, p. 55.

<sup>18</sup> Loeb, M.E., and Edie, *ibid*.

<sup>19</sup> Loeb, M.E., and Edie, A.H., *ibid*.

- ➔ Most people seeking work in Malawi will find it in the informal economy in the foreseeable future, rather than in formal employment. This is an important consideration for policymakers and for those planning and providing skills development and employment-support services for the population as a whole and for people with disabilities in particular.
- ➔ The widespread incidence of HIV/AIDS and its impact on vocational training personnel and on trainees is a further matter which needs to be taken into account in planning policy measures, programmes and services to address the skills development needs of people with disabilities.
- ➔ In planning for the implementation of disability-related policy and services, particular attention is required to the needs of women with disabilities in general, and to people with intellectual disabilities and mental health difficulties in particular.

## 2. Legal and policy provisions in Malawi

### International commitments

Malawi ratified ILO Convention (No. 159) concerning Vocational Rehabilitation and Employment of Persons with Disabilities in 1986, and was the first country in Africa to do so. Malawi has also ratified the ILO Convention concerning Discrimination in Employment and Occupation (No. 111) and the Equal Remuneration Convention (No. 100). The principles of equal opportunity, equal treatment of disabled persons, and non-discrimination which underlie these Conventions are increasingly reflected in the country's laws and policies. The Conventions also recognize the importance of special positive measures in equalizing opportunities for disadvantaged groups. In the case of persons with disabilities, such measures are often central to enabling them to access and successfully complete skills training, and to obtain and keep decent jobs.

### Legislation concerning vocational training for disabled persons

The **Handicapped Persons' Act of 1971** established the Malawi Council for the Handicapped (MACOHA) to promote the welfare of disabled persons, to advise the Minister on disability-related matters and to administer vocational and special training centres, as well as rehabilitation and welfare services for persons with disabilities. MACOHA remains the main Government Agency responsible for disability issues and services.

A **Disability Bill**, drafted in 2004, and set to replace the 1971 Handicapped Persons' Act, once adopted, focuses on combating discrimination based on disability.<sup>20</sup> The Bill states that *"the State shall ensure that persons with disabilities are provided with adequate access to quality education and ample opportunity to develop their skills."* The Bill commits the State to take appropriate steps to make such education accessible and makes it unlawful for any learning institution to deny persons with disabilities admission to any course it offers by reason of handicap or disability. Finally, the Bill provides for the creation of at least one integrated public vocational and technical school in every region of the country.

Provisions of the **Employment Act of 2000** are relevant to disabled persons' access to continuing training once they are in employment. Article 5 of this Act makes it illegal to discriminate against any employee or prospective employee on the grounds of disability, among other criteria, in access to training.

The **Technical Entrepreneurial and Vocational Education and Training Act of 1999** provides for representation of persons with disabilities on the Board of the Technical Entrepreneurial and Vocational Education and Training Authority (TEVETA), established under the Act. While there is no specific mention of disabled persons elsewhere in the Act, this provision indicates that the TEVETA is intended to take the needs of persons with disabilities into account.

### Policy

**The National Policy on the Equalization of Opportunities for Persons with Disabilities (2004)** aims at fully integrating people with disabilities in all aspects of life and at

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<sup>20</sup> This is still under consideration by the Ministry of Justice (Feb. 2007).

providing for equal opportunities, enhanced dignity and well being so that people with disabilities have the essentials of life. The policy recognizes the importance of equal access to education and training as well as employment and other aspects of life to disabled persons, if they are to be enabled to compete favourably in society. One of the objectives is to increase access to technical, vocational and entrepreneurial training opportunities for people with disabilities through provision of access to training in marketable skills, and through support to DPOs engaged in vocational training.

Strategies proposed to promote equal access and inclusion in education and training programmes include:

- a review of the national curriculum to ensure that it reflects the needs of persons with disabilities;
- provision of technology and equipment to assist disabled persons;
- encouragement of inclusive education;
- incorporation of special needs education in the teacher training curriculum;
- training of specialist educators; and
- establishment of accessible specialist education resource centres throughout the country.

This policy, developed in consultation with DPOs and non-governmental organizations (NGOs), as well as the private sector and development agencies, is supported by two other policies in Malawi:

- the Vision 2020 Policy Document concerning progress to be made to the year 2020; and
- the Malawi PRSP.

**Vision 2020** places an emphasis on reducing disparities in access to education and employment and business opportunities between people with disabilities and non-disabled people, among other targets set.

The **Malawi PRSP**, developed in 2002 through a consultative process, includes provisions targeting the most vulnerable in society, including people with disabilities. The PRSP calls for skills development initiatives in rural areas, training of trainers for entrepreneurship development in the informal economy and inclusion of entrepreneurship development in the curricula of vocational training centres (VTCs) and secondary schools. It also calls for the improvement of special needs education at primary level and provides for support to medium and small enterprises (MSMEs).

## Training programmes

Vocational training courses are available to persons with disabilities in MACOHA's two training centres: Kamuzu Vocational Rehabilitation and Training Centre (KVRTC) in Magomero (see p. 11) and the Lilongwe Vocational Training Centre (LVTC) (see p. 15). Training is also provided at the Vocational Training Centre for the Blind at Mulanje, at TEVET Vocational Training Centres (see p. 16), through the Community-Based Rehabilitation (CBR) Programme (see pp. 12-14), and in courses run by NGOs such as the Malawi against Physical Disabilities (MAPD), and the Red Cross. Primary schools also teach vocational skills to disabled children.

- ➔ The policy concerning people with disabilities in Malawi is increasingly in line with modern trends in terms of promoting the full participation with equality of persons with disabilities, promoting the principles of equal opportunity, and non-discrimination. The Disability Bill, if adopted, will reinforce this policy.
- ➔ It is important to consider how these policy commitments are being implemented in practice, and whether changes might be required to make a real difference to women and men with all types of disability who are seeking to develop their skills and obtain decent work, in view of the large size of the informal economy, the predominantly rural population and the impact of HIV/AIDS.



### **3. Promoting opportunities through technical cooperation**

#### **ILO projects and technical support**

Technical advice was acquired from the UNDP and the ILO on the development services for disabled people in Malawi from 1963 to the early 1990s. The following ILO/UNDP technical cooperation projects aimed to improve service provision for disabled persons in Malawi:

- Vocational Training of Disabled Persons, 1979-1982
- Vocational Rehabilitation of Disabled Persons, Phase 2, 1983-1986
- Comprehensive Community-Based Rehabilitation (CBR) Programme, 1989-1991

The Norwegian Association of the Disabled (NAD) has been involved more recently and continues to be involved in providing technical support.

The ILO/Government of Flanders project, *Skills Acquisition and Work for People with Disabilities in Southern Africa*, 2002-2006, aimed to inform policy and programmes on skills development by identifying good practice strategies in vocational training leading to decent work.

#### **Vocational Training of Disabled Persons Project, 1979–1982**

The ILO project, *Vocational Training of Disabled Person*, 1979-1982, funded by the UNDP, aimed to improve the self-sufficiency of working age disabled persons through vocational training. In the course of this project, the KVRTC was established at Magomero in 1983, in collaboration with MACOHA.

The KVRTC was set up as a rural rehabilitation assessment and training programme which was originally intended to have the capacity to train 500 disabled persons annually. The Centre did not reach this target and its actual training capacity ranged from 80 to 100 persons. When it first opened, the Centre provided training in woodwork, metal work, domestic skills, tailoring and handicrafts. An adjacent vegetable farm unit run by MACOHA served as an assessment and training area. The training curricula were based on modules of employable skills, a widely-used approach in vocational training, designed to ensure flexibility in training and aimed to meet the need of individual.

A Survey of Handicapped People in Malawi was carried out in 1983, in the framework of this project, in collaboration with the National Statistical Office of Malawi (NSO) to gather information on the size and situation of the disabled population in Malawi. The work was linked to a labour force survey, conducted at the same time. Both surveys covered 302 Enumerator Areas, the population of which totalled roughly 400,000 people, approximately 6 per cent of the Malawi population. The final data indicated that the disabled population in Malawi was 190,000 people, or 2.87 per cent of the whole population. This percentage was much lower than expected, and may have been an underestimate (see p. 3 above), but, in the absence of other national-level empirical data, these survey results were referred to in all of the subsequent phases of the ILO/UNDP programmes.

#### **Vocational Rehabilitation of Disabled Persons Project, Phase 2**

Following the successful completion of the *Vocational Training of Disabled Persons Project*, 1979-1982, a second phase was funded, with the aim of expanding the services available to graduates of the KVRTC, and of ensuring follow-up and resettlement of these

graduates. Activities under Phase 2 included the establishment of a revolving fund with support from the United Nations Capital Development Fund (UNCDF), the ILO/UNDP project and Friends of Malawi, USA. This fund was the source of low interest loans provided to the KVRTC graduates, with loans often taking the form of tools, materials and small six-month subsistence grants to enable them to become established as self-employed craftsmen or craftswomen. By 1991, loans ranging between MK70 and MK1,000 had been approved for 375 disabled persons who wished to set up a small business, including 135 women. Business activities included tailoring, hairdressing, woodwork, knitting, tinsmithing, bakery, poultry rearing, bicycle repair and vegetable growing.

Trainees attended for an average training period of six months. In 1985, the majority of graduates (70 per cent) were reported to have polio, while other graduates included persons who were blind, deaf, or had amputations.

### **Pilot Community-Based Rehabilitation (CBR) Project**

In July 1986, the activities of Phase 2 were extended, with the agreement of all parties concerned, to include CBR as a project component, reflecting the fact that most disabled people in Malawi lived in rural areas. It was felt that a comprehensive CBR programme would help cope with the problems and needs of the entire disabled population in Malawi, reaching a minimum of 80 per cent of this target group. The pilot programme, launched in 1988 in the Southern region of Malawi - Zomba Municipality, Blantyre City and rural areas - was intended to become a model for implementation throughout the country. Training was provided for 63 rehabilitation volunteers, elected through community meetings, in CBR approaches. A guide for the use of rehabilitation volunteers was produced in the local language.

The initial outcomes of the pilot CBR programme were encouraging. Over 1,000 disabled people were identified in the Blantyre district, 400 disabled people were referred to hospitals/Malawi Against Polio clinics for medical rehabilitation, about 200 disabled children were attending school, and 102 disabled youth acquired vocational skills training in trades such as metalwork, woodwork, shoe-repair, tailoring, and domestic skills.

The evaluation of the Blantyre pilot programme found that the CBR approach and methodology used in the pilot programme was a "*potentially effective method for addressing the employment needs of disabled persons in rural areas.*" In response to these successful findings, it was agreed in 1988 that a Phase 3 was needed to extend CBR programmes throughout the country. Work was begun under Phase 2 in preparation for the next phase, including collection of baseline data about disability in each of the different regions of the country and preparation of materials for training CBR volunteers. These materials included a *Handbook on Community-Based Rehabilitation for Disabled Persons in Malawi*, describing the techniques and methodology followed in the implementation of the CBR programme.

### **Baseline Survey in Karonga, Machinga and Salima Districts, 1989**

The Demographic Unit of the University of Malawi, with financial and technical assistance from UNDP/ILO, carried out a survey in 1989 in randomly-selected areas of Karonga, Machinga and Salima Districts, to collect baseline data on disabled persons. The study revealed that there were some marked variations in the geographical distribution of persons with different types of disabilities. This made it clear that the CBR programmes would need to be implemented in ways appropriate to the needs of people with disabilities at the district level, taking account of the regional variation.

The data showed that 25 per cent of the disabled population had disabilities that were either congenital or began at birth, and the remaining 75 per cent acquired their disability later in life. Thus, the survey concluded that with the appropriate medical assistance and advice, and information and education, a preventative approach could be developed that would reduce the incidence of pre-natal and post-natal factors as causes of disability.

Forty-six per cent of the respondents stated that they possessed no useful skills for employment. There was considerable unsatisfied demand for training, with only a third of the respondents stating that they had no wish to learn any skills. A general pattern was that disabled persons wanted to upgrade their existing abilities rather than to diversify into new kinds of activities. Tailoring stood out very strongly as a much sought-after skill. A significant number of disabled persons expressed a preference for independent business activity. Almost half of the respondents hoped to gain access to training. For those disabled persons who expressed a preference for small business, access to training and credit were identified as the most important kinds of assistance required.

### **Comprehensive Community-Based Rehabilitation of Disabled Persons, 1989-1991**

The third phase of the ILO/UNDP technical cooperation support took place over a two-year period beginning in 1989. Its primary objective was to assist the Government of Malawi, through MACOHA, in extending the pilot CBR programme begun during Phase 2 to cover seven districts (of the total of 24) in the country, and reach 5,000 disabled persons (50 per cent women). The Government chose the following seven districts for expansion of the CBR programme: Karonga and Mzimba (Northern Region), Lilongwe and Salima (Central Region), Blantyre, Machinga and Nasnaje (Southern Region). In addition to promoting skills development and employment for disabled persons, the new phase of the project also aimed to create greater public awareness of disability, of its causes and consequences of what might be done to prevent its causes, and of the needs, abilities and potential contribution to the community of its disabled members.

In 1991, an internal review of the CBR programmes was conducted to summarize outcomes for disabled people in Malawi. The review found that the existing CBR programmes were helping disabled people acquire skills as evidenced by the fact that the number of people with disabilities training as apprentices under local volunteer trainers had risen. There had been a steady increase in the number of disabled persons who had established their own business as a result of the CBR programmes. Finally, the report concluded that vocational training in the community helped to ease the pressure on the KVTRC.

At the conclusion of Phase 3, it was estimated that 1,520 disabled people, including 717 women, had attended vocational training in various crafts and trades, and that a total of 344 disabled persons, including 124 women, were running small businesses or income-generating projects. The final evaluation of the project concluded that its main objectives had been met, and made particular mention of the increasing numbers of women being integrated into the social and economic life of their communities as a result of the CBR programmes. The success of the CBR project was largely attributed to the programme structure, the implementation methodology, and the involvement of a wide range of stakeholders from the top ranks of government to village leaders.

#### *CBR methodology*

The methodology used to implement the CBR programmes in the seven chosen districts was based on a seven-step plan covering all the procedures and activities required for the success of the programme. These steps were as follows:

1. A meeting with the District Development Committee (DDC) and the local officials responsible for Primary Health Care (PHC), for discussion and approval of the CBR programme.
2. Meetings at village level to explain the principles of the programme and to select community rehabilitation volunteers, the number of volunteers required being dependent on the size of the population and the distances involved.
3. Training of community rehabilitation volunteers and community leaders in CBR techniques.
4. Orientation of members of the PHC committee, extension staff from government ministries, representatives of NGOs and church leaders in CBR approaches and techniques.
5. Identification of disabled persons in the district and implementation of the programme by the volunteers at the grass roots level, with the involvement of the disabled persons themselves and their families. Technical support is provided by the officials of government ministries and NGOs and by the community rehabilitation officer. Medical, educational and vocational assistance is provided by the family and by the community.
6. Monitoring and follow-up of activities.
7. Data collection and processing.

A series of recommendations was issued with the final report on Phase 3. These included the gradual expansion of the CBR programmes to reach the remaining districts of the country and further development of vocational training services under the programme. Following an internal review of the programme in 1991, it was recommended that programme evaluations continue to be carried out on a regular basis and that the findings be used in planning the future development of activities.

### **Community-based training (CBT)**

Following completion of the ILO/UNDP projects on vocational rehabilitation of disabled persons, a further community-based project was run by MACOHA with funding from the NAD. This project focuses on improving vocational skills among disabled persons in two districts of Blantyre and Machinga in Southern Malawi. Since 2003, approximately 3,000 persons with disabilities in each district have registered at local community centres, where trainees have access to vocational skills training in carpentry, tailoring, welding and plumbing. Many of the disabled persons have not attended school. An extension of training capacity from 90 trainees to 300 was planned between 2003 and 2005.

### **Living conditions of persons with disabilities**

As indicated previously, a representative study, “*Living Conditions of Persons with Disabilities in Malawi*”, funded by the Atlas Alliance on behalf of the Norwegian Agency for Development Co-operation (NORAD), was carried out by SINTEF Health and the Federation of Disability Organizations in Malawi (FEDOMA) 2002–2004.<sup>21</sup> Providing baseline data which is important to policy development and planning of services, this study also provides comparable information with three other countries in the region – Namibia, Zambia and Zimbabwe. Study findings relating to the situation of persons with disabilities and to vocational training are cited in Sections 1 and 4 of this report.

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<sup>21</sup> Loeb, M.E., and Edie, A.H., op. cit.

## **Vocational skills development for youth with disabilities**

A project, “*Vocational Skills Development for Youth with Disabilities*”, funded by NAD (2003-2006), aims to promote the inclusion of youth with disabilities in mainstream VTCs under the Ministry of Labour and Vocational Training (MOLVT), to upgrade existing MACOHA VTCs and to develop vocational training at the community level through apprenticeship with local artisans. Jointly prepared by FEDOMA, MACOHA, MOLVT, MRPWD and TEVETA, the project has been implemented on a pilot basis in LVTC and Soche Technical College.

### *Lilongwe Vocational Training Centre (LVTC)*

In recent years, LVTC, a MACOHA vocational training institution, has made efforts to introduce training courses that provide the students with skills that are marketable. Examples of the new courses offered are financial accounting, information technology, secretarial studies, refrigeration, and designs in tailoring.

Faced with a situation where trainees with disabilities continued to be segregated and discriminated against both in their own communities and at the workplace even after having graduated, the training centre took the decision to open its courses also to non-disabled students, as a measure which it hoped would support the inclusion of disabled persons in training, employment and the community. The “*reverse integration*” approach involved including both trainees with and without disabilities in the classroom environment, sport and social activities of the training centre.

As a result of the inclusive programme, social and academic interaction between the non-disabled and disabled trainees has increased and all trainees have been helped to learn and develop skills necessary to live and work in the real world. The training environment has encouraged equal competitiveness in all spheres regardless of disabilities. Also, it has increased the self-confidence of trainees with disabilities and non-disabled trainees have gained skills in basic sign language. Based on the experience to date, the training centre has taken steps to further develop and improve the programme.

### *Soche Technical College*

Soche Technical College, one of the seven colleges under MOLVT, was chosen as the pilot mainstream college in the NAD project. At Soche, the project aimed to attain the following outputs: well-rehabilitated premises capable of hosting persons with disabilities; a well-developed curriculum to suit the interests of youth with disabilities; a minimum of thirty trainees with disabilities enrolled at the college annually, and improved levels of livelihoods among the youth with disabilities after graduating from the College.

In order to achieve these outputs, action has been taken at several levels. Physical accessibility of the College has been improved by constructing pavements and ramps, and by reconstructing the hostels, workshops, classrooms, dining hall and toilet bloc. The Ministry's Training and Recruitment Policy has been reviewed and the college curriculum has also been reviewed. Course manuals and materials have been designed and developed to suit trainees with disabilities, for example in Braille. Specialized teaching and training aids have been purchased to meet the needs of trainees with disabilities at the College. Sensitization on disability has been carried out both for college staff and for trainees. The teachers at the College have also attended training in special needs education in general, in sign language interpretation and Braille.

Four out of five students with disabilities who attended the final exam in 2005 passed it and got their certificate. The College has now the capacity to enrol over thirty students with disabilities every year in most of its training programmes.

It is intended to extend the inclusive approach to the other six public technical colleges. If the other technical institutions can enrol the same number of trainees with disabilities as in Soche, a minimum of 210 places will be available for persons with disabilities in these institutions every year. However, college entrance examinations, conducted by TEVETA in 2006, revealed that the target number of trainees with disabilities may be hard to reach, as TEVETA managed to recruit only 15 students country wide, of whom 11 were sent to Soche Technical College. Arising from this, an investigation is required into the reasons for the relatively low enrolment rate of trainees with disabilities.

### **Strategies for Skills Acquisition and Work for Persons with Disabilities in Southern Africa, 2004-2006**

In a more recent project on skills development for persons with disabilities, funded by the Government of Flanders (2004–2006), the ILO has undertaken a review of the impact of both disability-specific and mainstream training strategies being used in Malawi, as well as three other countries in Southern Africa – South Africa, Swaziland and Zambia. The origins of these strategies lie in over twenty ILO technical cooperation projects, funded by UNDP and multilateral donor agencies, implemented with governments in African countries during the 1980s-1990s (see pp. 11-14). These projects introduced both institutional and community-based strategies for the training and employment of people with disabilities, some specifically targeting women with disabilities. While many of the approaches pioneered in these projects proved effective in enabling women and men with disabilities to acquire skills and to start work, no systematic assessment or documenting of the impact of the strategies has been undertaken.

Based on exploratory surveys of disabled men and women undertaken in cooperation with DPOs in each of the countries and on case studies compiled, the review undertaken in the ILO/Flanders project was intended to highlight issues and lead to the identification of good practice concerning skills acquisition leading to decent, productive work for persons with disabilities – both in terms of strategies and service delivery. Skills acquisition strategies are judged effective only to the extent that they result in actual work opportunities.

The aim of the project was to strengthen the capacity of governments to provide effective policy and legal frameworks, and the capacity of public and private training providers and other organizations in African countries to effectively assist persons with disabilities to acquire skills and work opportunities via mainstream training institutions, special programmes or through other methods. Collaborating organizations in each country were commissioned to gather information on effective skills acquisition strategies through an exploratory survey of disabled persons, in consultation with a Stakeholders' Reference Group, with case studies of individuals as illustrations.

The findings of the survey and from the case studies in Malawi are presented in Section 4 of this report and are the basis for the discussion in Section 5, of issues which need to be addressed to improve opportunities for disabled men and women of all ages in Malawi.

### **Promoting the Employability and Employment of People with Disabilities through Effective Legislation - Phase 2, 2005-2007**

The ILO Project, *Promoting the Employability and Employment of People with Disabilities through Effective Legislation*, sets out to strengthen the capacity of national governments in selected countries to improve the effectiveness in practice of legislation and policy concerning the vocational training and employment of people with disabilities. Funded by the Government of Ireland, the project involves governments, social partners and DPOs, in selected countries of East and Southern Africa and Asia and the Pacific, in activities and events linked to the review or development of disability-related legislation and policies.

Following a three-year first Phase, the project has been extended for a second Phase (2005-2007). Malawi is a participant country in Phase 2. Other countries which have participated in either Phase 1 or Phase 2 of the project to date are:

**East and Southern Africa:** Ethiopia, Kenya, Lesotho, Mauritius, Seychelles, South Africa, Sudan, Uganda, United Republic of Tanzania and Zambia.

**Asia and the Pacific:** Australia, Cambodia, China, Fiji, India, Japan, Malaysia, Mongolia, Sri Lanka, Thailand, Timor l'Este and Viet Nam.

The main elements of the project are:

- The development of a knowledge base on disability-related legislation and policy and its implementation in participant countries.
- Advocacy of equal opportunities and treatment and of a rights-based approach in laws, policies and programmes concerning the training and employment of disabled persons through sub-regional and national meetings and workshops.
- The provision of technical support to countries on request, relating to the review, revision or development of disability-related legislation, policies or implementation measures.
- Training of key stakeholders on disability-related employment and training laws and policies.
- Support to media campaigns aiming to promote positive images of disabled people at work and to overcome stereotypes and mistaken assumptions.

In Phase 2 of the project, currently underway, a pro-active approach is adopted to enhancing the capacity of national stakeholders to promote and adopt a rights-based approach through:

- Meetings with key stakeholders to discuss regional and national findings on legislation, policy and implementation measures.
- The establishment, by governments, of advisory groups to develop or revise national action plans on employment promotion for and the enhancement of employability of disabled persons through effective legislation and policy will be encouraged.
- The identification and commissioning of national or sub-regional training institutions to provide training to key stakeholders on topics relevant to the development and implementation of effective employment-related legislation for persons with disabilities, with a view to encouraging the development of sustained awareness of and an informed debate on legislative, policy and programme issues relating to the employment of disabled persons at the national level.
- Support to the development of partnerships with national and local media, aiming at achieving commitment to a media campaign to promote positive images of disability, and overcome negative stereotypes.
- Development of training materials, guidelines and briefing materials on issues relating to disability and employment, for customization, translation into national languages and widespread dissemination.

Through these activities, it is hoped that the project partners will have the capacity to sustain a focus on disability-related issues in training and employment, once project support has been phased out.

- ➔ Existing VTCs for persons with disabilities in Malawi arose from technical cooperation projects and have proven themselves to be sustainable, although a revision of the course curricula is required in some cases to ensure that the training provided matches labour market demand.
- ➔ The CBR approach is of central importance in Malawi, given the predominantly rural population – like the training centres, this approach, tested in the late 1980s, has continued to this day, with further technical cooperation support from Norway.
- ➔ The initiative to include people with disabilities in general vocational training programmes is in line with international trends, and will improve the opportunity for disabled people to obtain high quality, certified skills, and thereby their prospects of finding decent work.
- ➔ The involvement of FEDOMA and disabled persons in the coordination and conducting of technical cooperation activities in more recent technical cooperation projects is central to the longer term sustainability and to the impact of the policy, programme and service innovations being introduced.
- ➔ Particular attention is required to ensure that the policy of including people with disabilities in the general vocational training services is adequately prepared for and that the necessary support services are available.

## 4. Strategies for skills acquisition and work for persons with disabilities in Malawi

Persons with disabilities have the potential to earn decent livelihoods, to support their families and to contribute to their communities and the wider society. Often, though, they are prevented from doing so by the fact that they do not have access to education and training in marketable skills. As a result, many seek to earn a living through activities which generate little income, confining them and their families to lives of poverty. Training in skills that are in demand in the labour market is an important means of breaking out of this situation, enabling individuals to improve their standards of living through decent and productive work and to escape poverty by raising their outputs as farmers and workers. Communities and society at large will benefit from the contribution of disabled persons in the population, which currently remains largely untapped.

Recognizing the central role played by skills in enabling persons with disabilities to access decent work, and the importance of identifying good practice in skills development for disabled persons, the ILO undertook a four-country study in Malawi, South Africa, Swaziland and Zambia in the framework of the ILO/Flanders Project, *Skills Acquisition and Work for Persons with Disabilities in Southern Africa, 2004-2006* (see also Section 3 above).

The aims of the study were to:

- identify effective strategies for vocational skills acquisition by persons with disabilities leading to productive work; and
- promote training policies and effective methods of training and employment services delivery for individuals with different types of disabilities, particularly in mainstream training institutions.

The study was designed to be exploratory in nature, so as to highlight good practice as well as key issues relating to skills development and employment of persons with disabilities, which require the attention of legislators, policymakers and service providers. While the findings cannot be generalized to the overall population, they provide an indication of the major challenges to be tackled and of strategies which might be developed.

The results of the study in Malawi are presented below. The survey findings are illustrated by case study excerpts to highlight particular points. The section starts with a brief review of the methodology used, followed by an overview of the study population, a description of the results concerning skills development and employment, and concludes with a summary of key points. A discussion of the policy implications and the recommendations arising from the survey follows in Section 5.

### Methodology

The approach taken in the implementation of this project reflects the ILO strategy to build the capacity of DPOs to advocate and lobby on their own behalf in the development and implementation of laws, policies and programmes. By involving them in conducting a systematic review of skills training and employment of disabled people in their countries, it was hoped that the DPOs would further develop their organizational skills and capacity to engage in survey activities, as well as gain insight into the current training and employment situation and identifying policy challenges to be tackled if opportunities are to be improved.

FEDOMA was commissioned to carry out the study in Malawi, involving an exploratory survey of people with disabilities and case studies of individuals who had received skills training and had found employment. A project implementation guide was prepared by the

ILO, which provided support throughout the project. Support was also provided at the initial planning and implementation stage by the Platform for Disability and Development Cooperation (PHOS), an NGO based in Flanders.

A Stakeholders' Reference Group (SRG) was formed to advise on the design and implementation of the survey activities, to help resolve problems encountered and recommend changes to the project implementation guide as necessary. The SRG comprised eight members, two of whom had a disability. The SRG members represented FEDOMA, MACOHA, Feed the Children Malawi, MAPD, the TEVETA, the ILO, the MOLVT and the Ministry of Social Development and Persons with Disabilities (MSDPWD).

A team of seven surveyors carried out the survey activities in July and August 2005. Before the commencement of the survey, the enumerators underwent training on the project and survey methodology. The team included people with visual and hearing impairments, physical disability and albinism. A questionnaire in Braille was developed to assist the visually-impaired interviewer. The team was supported by a sign language interpreter, a guide and an assistant.

The survey participants were purposively selected on the basis of their training and employment experience, in consultation with community rehabilitation officers, volunteers of MACOHA, village headmen and DPOs. The sample was to include respondents who were skilled and employed; some who were skilled and unemployed; others who were unskilled and unemployed; and yet others who were unskilled, but employed. An equal balance of men and women was sought. Representation was also sought of four different disability types: hearing impairment, visual impairment, physical disability and intellectual disability. It was intended that respondents in both rural and urban areas would be included.

## **Survey population**

The survey was conducted in five districts of Malawi: Blantyre, Machinga, Mzimba, Nkhotakhota and Salima. The districts were chosen to represent the areas in which a CBR programme is being implemented by MACOHA, as it was felt that the structures of the organization would be helpful in locating respondents.

Altogether, 248 persons with disabilities were interviewed, of whom 59 (24 per cent) were skilled and employed; 59 (24 per cent) were skilled and unemployed; 37 (15 per cent) were unskilled, but employed; 93 (37 per cent) were unskilled and unemployed. Some of the respondents had received formal training, while others had not. Some had formal jobs, others were self-employed or had small businesses, while the remainder were unemployed.

In addition to the survey, case studies were conducted of 18 individuals who had attended skills training and who were presently working. In the case studies, people with disabilities described their experience in attending training and in finding jobs. The survey and case studies were carried out between July and August 2005. Analysis of the data proved problematic and was delayed following the withdrawal of PHOS from the project while this process was underway. Other arrangements were put in place and the analysis was finally completed in September 2006.

It is recalled that the survey was an exploratory rather than a representative survey of the total population of people with disabilities in Malawi. While generalizations cannot be made from these results to the overall population, the survey provides useful insights into skills development provisions for Malawians with disabilities, which can inform decisions by policymakers and training providers, and gives indications of possible trends that could be investigated in further studies.

## **Socio-demographic characteristics**

### *Age and gender*

One in four of the respondents (25 per cent) was below 25 years of age, and one in five (21 per cent) was above 46 years of age. Over half of the respondents (55 per cent) were aged between 25 and 46.

The gender balance among the respondents was almost even, with women comprising 45 per cent of the interviewees and men 55 per cent.

### *Educational level*

Half of the respondents had attended primary education and had not studied further, while a quarter of the respondents had never attended school. About one in five (21 per cent) had received secondary education while only 4 per cent had received tertiary or university education.

### *Disability type*

Slightly over half of the respondents (52 per cent) had a physical disability; one in five (20 per cent) had a visual impairment, and 16 per cent of respondents had a hearing impairment. Eight per cent had an intellectual disability, while 4 per cent had an unspecified disability.

## **Vocational training**

Altogether, 118 respondents (48 per cent of the survey population) had attended some form of skills training. Half of these respondents (50 per cent), were employed and half unemployed, a pattern which is linked to the way in which the sample was stratified, rather than necessarily indicating a general trend.

Most frequently respondents had acquired their skills at training centres of the MACOHA, which up to recently, catered exclusively to people with disabilities; the TEVET Centres; or at primary school where training in handicrafts was provided. Nearly a third of the respondents had trained through apprenticeship with local craftsmen and 17 per cent had acquired their skills at private training centres. Some acquired skills through the CBR Programmes and others at NGOs like MAPD, or through an international NGO.

“Training in tailoring, knitting, making plastic baskets and car pillows while staying in a hospital undergoing treatment for spinal tuberculosis, was a first step on the road to setting up my own business. I am grateful to the Red Cross for the training I received and for the in-business management training which they sent me to. It has helped me in my life and led me to be a successful business man.”

*Self-employed grocer with physical disability*

Of respondents who had acquired skills, approximately a quarter (23 per cent) had trained in tailoring and a further quarter in weaving. Fifteen per cent were trained in agriculture in the form of farming cash crops, horticulture or fishing; 11 per cent in carpentry and a further 11 per cent in home economics. The remaining 17 per cent had trained in a variety of different skills.

Women were much more likely than men to have trained as weavers (42 per cent compared to 10 per cent of men), or in home economics (23 per cent compared to 2 per cent of men). Among male respondents, the most common skills were tailoring (24 per cent) or agriculture (24 per cent).

Some differences were also found between the skills acquired by respondents with different disability types. Over half of the respondents with a visual impairment had acquired skills within agriculture (55 per cent), while a third of respondents with a physical disability were trained in tailoring (33 per cent). Carpentry was the most commonly-acquired skill among the hearing-impaired respondents (38 per cent). Respondents with physical disabilities appeared to have had a greater range of skills training to choose from. These indicative findings would require further investigation to establish whether they can be generalized.

### **Problems encountered in trying to acquire vocational skills**

Respondents were asked to identify the problems they faced in attending vocational skills training courses, whether or not they had actually attended training. Approximately 220 (89 per cent of the survey respondents) answered this question. The vast majority of respondents (82 per cent), both men and women, said that they had encountered barriers in their efforts to attend training, which they managed to overcome in some cases, but which prevented them from attending training in others.

#### *Training fees*

Regardless of respondents' employment and training status, the lack of money to pay for the training fees was the most frequently-cited barrier to attending training. Nearly a third of respondents (31 per cent) said that they could not afford the training fees. The lack of funds for training was more frequently-cited among male (40 per cent) than among female (20 per cent) respondents, although it was the most frequently-cited barrier of both males and females and across all categories of disability.

“After I finished school, I attended a typing course. I was only able to earn an elementary typing certificate because I lost both my parents who had been covering the cost of my training. On my own, I was not able to afford the school fees and I had to drop out of the training.”

*Teacher with hearing impairment*

#### *Accessibility of training centres*

Almost one in five respondents (18 per cent) said that the training centre they wished to attend was not accessible. Challenges arising from the lack of accessibility were mentioned by people with each type of disability represented in the survey – physical disability, hearing impairment, visual impairment and intellectual disability.

#### *Family responsibilities*

Around one in ten respondents could not take time off from family responsibilities to attend training. Family responsibilities were more frequently mentioned by women than by men.

The underlying reasons were described by some women as pregnancy or the refusal of spouses to let them go for training.

#### *Transport*

Slightly less than one in ten respondents (7 per cent) had experienced problems in getting to and from the training centre, due to lack of transport. This problem was more often mentioned by urban than by rural residents.

#### *Other challenges*

Five per cent of respondents had experienced difficulties in communication during their skills training. These were respondents with hearing impairments. Nearly all of them were skilled, which implies that communication problems did not prevent them from attending training, but nonetheless affected the training they had acquired in some way. Another 5 per cent said that the training provider had not been willing to train them. Some said that they had been sent home from the training centres because of their disability. A further 5 per cent identified the lack of information about the training centre as a fact that had made it difficult for them to attend skills training. Four per cent of respondents – mainly people with visual or hearing impairments - mentioned other problems in accessing skills training, such as the lack of training materials in Braille and the lack of assistance in the form of special needs teachers.

“Learning to type has somewhat eased the problems I encounter in my profession, though it was difficult to receive the training as most of the learning materials were in print.”

*Teacher with visual impairment*

“Because the school didn’t have enough materials, I was not able to acquire all the tailoring skills I needed, for instance, free hand.”

*Self-employed tailor with physical disability*

#### *No obstacles*

One in ten (11 per cent) of both men and women said they had not experienced obstacles in attending training. People with physical disability or visual impairment were much more likely to have not met barriers than people with hearing impairment or people with an intellectual disability, who seemed to have faced the greatest obstacles. Some of the case study respondents had managed to attend training even though they did not have the money for training fees.

“I trained in financial accounting without having to pay fees, after my brother negotiated with the Centre manager.”

*Financial accountant with physical disability*

“I was not able to proceed with training because of lack of money to pay for the fees. However, I was trained on-the-job in painting, roofing and carpentry. I did not encounter any problems during the training.”

*Self-employed builder, albino*

## Relevance of training to job opportunities

### Training was relevant

Slightly over a quarter of those who replied said that the skills training they had acquired had assisted them in finding work. More male respondents (35 per cent) than females (21 per cent) had this view. The majority of respondents who were skilled and employed (66 per cent) had found the skills acquired useful in finding work.

Respondents who were skilled and employed were asked if they were using the skills they had acquired in their present work. Sixty-one per cent of the 44 respondents who replied said they were using their skills. More men than women reported that they were using the skills they had acquired in their present jobs.

“I attended a six-month carpentry course at the MACOHA Centre in Magomero, and then worked for two years in the centre. Leaving the Centre to start working independently as a carpenter did not work out. Later, I took a one-month training course in welding at the NGO Malawi Against Physical Disability (MAPD) and I am now employed there as a welder, making wheelchairs and wheelchair accessories, calipers and shoes for disabled people. I have no problems at work because I am using the skills that I was trained in. I am happy working for MAPD and I want to be working as a welder forever.”

*Welder with hearing impairment*

The proportion of skilled and employed respondents who are using vocational skills they acquired in their jobs or small businesses was higher in rural areas (84 per cent) than in urban areas (58 per cent). This may be because there is a better match between the training courses offered in rural areas and the local labour market opportunities (mainly weaving, tailoring and agriculture or fishing). Further investigation is required to determine whether this is a general trend and to establish the underlying reasons.

For some case study participants, the link between the skills training they attended and the world of work was clear – they found jobs or started small businesses using the skills they acquired.

“I attended one year of training in financial accounting at the Lilongwe Vocational Training Centre. The training was not imposed on me as it is most disabled people who are under educated.”

*Accountant with physical disability*

Kanyika Club for Disabled People was founded by a woman with a physical disability in March 2002. Starting with just a few members, the Club has grown into a 15-person group that knits and sells sweaters and shares the profits collectively. The founder describes why she started the Club:

“I saw that a lot of disabled people who receive vocational training are still not able to find employment. I thought about how I could mobilize other disabled people and form a group which is how we came together and ventured into what we are doing now. Everyone in the club attended different kinds of training in different institutions, so they each work according to the skills they have acquired and are paid according to their output.”

“MACOHA sent me to the training centre at Magomero where I learned tailoring for six months. My aim in seeking this kind of training was to find employment.”

*Self-employed tailor with physical disability*

### **Training was not relevant**

Respondents were asked whether the vocational skills they acquired had enabled them to find work. The answers were quite striking – almost three-quarters (71 per cent) of the 142 respondents who answered to this question said that the skills they had acquired had not been useful in finding work. An even higher proportion of the respondents who had not attended school (88 per cent) held this view. Of the skilled and employed respondents, roughly a third said that their skills had not been useful in finding work.

Some of the case study respondents commented that their skills were traditional and not marketable. Some said that they did not have the chance to choose skills in which they were interested, adding that there is a limited range of training courses available. The result for many was that they were working in activities for which they had not been trained, having learned the necessary skills largely through on-the-job training. Others managed to make use of their skills by becoming self-employed.

“Most of the training we receive is just imposed on us. Most training does not lead to job opportunities.”

*Members of Kanyika Club*

“It is not possible for someone to find employment if you have trained to become a tinsmith because there are no jobs of this kind available. After training for one year and nine months as a tinsmith at MACOHA, I was referred to DEMATT for a course in business management where I learned to manage my own business. Now I run my own business selling tins at the Molipa Trading Centre.”

*Self-employed tinsmith with physical disability*

“Two years of training in knitting and tailoring at the Vocational Rehabilitation Training Centre did not lead to a job. Instead, I worked using the typing skills I had obtained prior to the training course. Later on, the knitting skills came to use when I decided to become self-employed.”

*Self-employed knitter with physical disability*

The case studies reinforce the point arising from the survey findings: that there is an urgent need to review the labour market relevance of existing skills training courses open to people with disabilities in Malawi. They also point to the need to improve the vocational assessment and career guidance services provided.

### **Overall benefits of training**

While the experience of the survey respondents varied, skills training was generally viewed as beneficial. This is reflected in the comments of respondents on barriers to employment, with nearly a third (28 per cent) saying that the lack of skills training was a major problem (see p. 28). This view was also reflected in the individual case studies. There was no doubt in most of the case study participants’ minds that vocational training had been beneficial to them and had improved their opportunities in life, whether or not it led to employment.

“Thanks to my training I am now a happy man since I am able to fend for myself and assist my dependents.”

*Self-employed tinsmith with physical disability*

“I trained for six months at a vocational training centre to become a tailor. I found employment, but then I lost my job. After that, I was given a sewing machine by my brother and I am now self-employed. I am able to live on this and I have managed to build my house, to buy a bicycle and a radio.”

*Self-employed tailor with physical disability*

## Employment

Over a third of the survey respondents (39 per cent), whether or not they had attended training, were in employment. These respondents were asked about the type of work they were currently engaged in. As in the case of the findings on skills training, the results highlight issues and trends in an exploratory way, pointing to areas in need of attention on the part of policymakers and service providers, rather than being nationally representative.

### Type of work

Over a third (36 per cent) of the employed respondents who replied to this question (N=94) reported that they were self-employed. The most common types of jobs they held were bicycle or radio repairing, food selling business, tailoring, selling clothes, machine knitting and hand sewing.

Self-employment was widespread among all respondents, regardless of disability type, sex or urban/rural location. It was more common among those who had not attended training (49 per cent) than among those who had attended a training course (28 per cent).

“After I lost my job, I decided to become self-employed. I started knitting sweaters, hats, shawls, baby suits and embroidery. I knitted by hand since I had no knitting machine. But in 2002, I raised some money and bought a knitting machine. This boosted my business and now I have even employed a fellow disabled person as a sales lady.”

*Self-employed knitter with physical disability*

One in five respondents (18 per cent) was working in formal employment. They held a range of positions as teachers, ward attendants, bookkeepers, administrative personnel, telephone operators and screen printers. Formal jobs were more frequent among women than among men, and among respondents who lived in urban areas.

“I attended a sign language training course organized by a Finnish disabled persons’ organization in collaboration with ZAFOD. Afterwards, I became employed as a sign language teacher at private school, and have been teaching for four years.”

*Teacher with hearing impairment*

Thirteen per cent of respondents - mainly men in the rural areas - were employed in farming, fishing or horticulture. A further 13 per cent were engaged in factory work, where

the most common occupation mentioned was weaving or spinning. Other respondents were tailors, carpenters, leather workers or shopkeepers.

### **Why were some respondents unemployed?**

Thirty-two (13 per cent) respondents who had previously been employed, but were presently out of work, were asked about the reason for their current unemployment. More than half of the respondents who had lost their jobs thought that employers' economic problems were the cause of their current unemployment. Unskilled respondents were more likely than the skilled respondents to say that they had lost their job due to economic problems. Male respondents also reported seasonal work and reasons related to disability as reasons for their current unemployment. A few women respondents said they could not work for family reasons.

### **Finding jobs**

Almost all of the employed respondents (93) answered the question on how they had found their jobs. More than two-thirds of those respondents (68 per cent) said they had found the job on their own. Some had found their job through a training centre (14 per cent) and, others with the help of friend or relatives (13 per cent). The remaining respondents had found their job in some other way.

### **Barriers in finding work**

Respondents were asked to identify the most important barrier they had experienced when looking for work. The two problems most frequently reported by the 224 respondents (90 per cent of all survey respondents who replied to the question) were the lack of skills training and the lack of jobs.

#### *Skills training*

Irrespective of whether they were currently working or not, over a quarter of the respondents (28 per cent) were of the opinion that the lack of skills training was the major reason why they could not find employment. Both men and women cited the lack of skills training more frequently than any other barrier. This response was particularly frequent among unskilled and unemployed respondents, nearly half of whom (46 per cent) saw it as a major reason for not finding work. Respondents in the rural areas mentioned the lack of skills training more frequently (32 per cent) than respondents in the urban areas (24 per cent).

#### *Jobs*

The lack of jobs was the second most frequently-cited barrier mentioned by 21 per cent of the respondents, both men and women. This is not surprising, given that there are not many jobs available within formal employment and most Malawians have to earn their living through self-employment (see p. 6). This problem was mentioned by a third (33 per cent) of the respondents who were skilled and unemployed. It was reported more frequently by the rural residents (25 per cent) than by the urban residents (15 per cent). The visually-impaired and learning- or intellectually-disabled cited this barrier more frequently than respondents with other types of disabilities.

### *Access to credit*

About one in ten respondents (12 per cent) was of the opinion that the lack of access to credit to start a business was the most important barrier they faced in seeking to earn a living. This was mentioned both by rural and urban residents. Given the predominance of self-employment among disabled people in the survey, this barrier would merit further investigation to establish the extent of the problem, and identify possible solutions.

“I feel if I can find credit, I can run my own bakery. An NGO provided me with an oven and also gave me start up material. Using the experience, I am confident I that I can succeed.”

*Baker with intellectual disability*

### *Employer awareness*

One in ten respondents felt that the lack of awareness among employers about the rights of persons with disabilities was an important obstacle to be overcome in securing employment.

### *Transport*

Mobility problems were cited by one in ten respondents (9 per cent) as being a barrier to getting a job. Self-employed respondents also said that they were constrained by lack of transport in travelling to markets where higher prices are offered.

“After completing my training, I failed to find employment because I was unable to move up and down looking for jobs.”

*Self-employed knitter with physical disability*

### *Other challenges*

Family problems were mentioned by 6 per cent of the respondents, both male and female. Some women respondents stated that their partners did not want them to work or that they were unemployed due to pregnancy. Respondents with an intellectual disability mentioned family and other problems more often than respondents with other types of disabilities.

Communication problems were reported by some respondents with hearing impairments (3 per cent).

## **What would help to find work or improve at work?**

When asked about what would help them to find work or how they could improve their work performance, half of the survey participants mentioned skills training and almost as many mentioned support of some kind.

### *Skills training*

Half of all survey participants (49 per cent) were of the opinion that skills training would help them to find work or improve at work. A clear majority of the 130 unskilled

participants (61 per cent) and over a third of the skilled participants (36 per cent) had this opinion. Over half of the unemployed participants (57 per cent) would like to attend training as compared to a third of the employed participants (35 per cent).

“Since I was employed, I have not been promoted and not given a chance to do all my duties as per my job description. I aspire to upgrade up to Diploma level to improve my work so that I can proceed to become an accountant.”

*Accounts assistant with hearing impairment*

“After becoming disabled, I developed an interest in special needs so I managed to upgrade myself and got a diploma. I would still want to go for upgrading, but I lack sponsorship.”

*Lecturer with hearing impairment*

Women were more likely to aspire to attend training (54 per cent) than men (44 per cent), and younger respondents aged under 25 (64 per cent) were more likely to do so than respondents over 25 years of age (44 per cent). Participants with hearing impairments (58 per cent) and participants with intellectual disabilities (63 per cent) mentioned their wish for further training more frequently than participants with visual impairments (41 per cent) or physical disabilities (46 per cent). No significant differences were found by educational level or by place of residence.

The high frequency of respondents who would like to attend skills training is of interest in light of the fact that the majority of respondents reported that the skills training they attended in the past did not lead to decent work. It would appear from the answers to this question that respondents still feel that skills are crucial to improving their living standards. The problem seems to lie in the type of courses that are offered.

### *Support services*

Of all survey participants, more than a third (42 per cent) said support would help them to find work or improve at work. A clear majority (74 per cent) of the 105 respondents who cited the need for support services said that they would need a loan or some other kind of financial assistance to set up their own business. Others (18 per cent) wished for support in the form of equipment, like sewing machines, and a few mentioned the need for moral support.

Over half of those who had attended skills training (57 per cent), mentioned the need for support as a service that would help in finding work, compared to one-third of the unskilled participants (29 per cent). The wish for support services was more frequent among employed participants (56 per cent) as compared to unemployed participants (34 per cent).

“I would need training to improve my work and cope up with modern technology. I would also need mobility aids because my leg is getting weaker and weaker.”

*Bank clerk with physical disability*

“If I could get a talking computer, this would greatly improve my work. I think there is a need to sensitize employers regarding the capability of persons with disabilities and not the incapability.”

*Teacher with visual impairment*

The proportion of participants mentioning the need of support services increased with age. Sixty-seven per cent of participants aged over 45 mentioned this need, compared to 40 per cent of those aged 25-46 and 26 per cent of those under 25. Women were more likely to mention the need of support (47 per cent) than men (37 per cent). No significant differences were found regarding the need of support services between urban and rural residents or between participants with different disability types.

Some of the case study respondents mentioned both the need of skills training and the need of support services.

“I wish I could have a diploma in my work field to improve my work. I also wish my employers understood the mobility problem which would require a guide.”

*Health counsellor with visual impairment*

“I trained on the job, working in different construction projects. I would like to train in bricklaying so that I could get a certificate. My aspiration is to become one of the biggest contractors internationally. If I am given a chance to access a loan to buy enough equipment, this would greatly assist and ease my work.”

*Self-employed construction worker, albino*

## Summary

The main findings of the ILO/Flanders exploratory survey and case studies are summarized as follows:

- The findings indicated that training available to people with disabilities in special and mainstream training centres in Malawi does not correspond to the opportunities in the labour market or in enterprise.
- Mainstream training centres are frequently poorly prepared to accommodate trainees with different disabilities – in terms of preparedness of trainers; accessibility of buildings; accessibility of information; availability of sign language interpretation; accessible transport; vocational assessment and career guidance.
- The lack of funds to pay for the training fees was identified as a major barrier to attending training.
- There was some evidence that women with disabilities benefited less than men with disabilities in terms of the relevance of the skills training they attend – further investigation of this indicative trend is required.
- Although there was some variety of the work done by respondents, the results show that stereotypical “*disabled peoples’ jobs*”, such as telephone operators, were still frequent.
- While the skills training did not lead to employment for many of the respondents, the value of appropriate skills training was widely recognized and many respondents would welcome the opportunity for further training, if this would assist them in getting decent work or in setting up viable small businesses.
- The majority of the employed respondents had found their job through informal networks while some had found it through the training centres they attended.
- Respondents reported the lack of relevant skills training and the lack of jobs as being the major barriers they faced in finding employment.
- The lack of support in the form of access to credit or equipment to start a business was also identified as a constraint.

The findings point to the need to review existing training provisions and related career guidance and job placement services for people with disabilities, and for the introduction of policy and programme measures to improve opportunities for disabled women and men in Malawi to have access to training in marketable skills, so that they can obtain decent work. Recommendations arising from the exploratory survey and case studies are discussed in Section 5.

## **5. Which way forward?**

In recent years, Malawi has started the process of reforming its legal and policy framework to better promote equal opportunities for people with disabilities. The National Policy on the Equalization of Opportunities for Persons with Disabilities (2004), which aims to fully integrate people with disabilities in all aspects of life, recognizes the importance of equal access to education and training for disabled persons in meeting this goal and proposes strategies to promote their inclusion in education and training. The Handicapped Persons Act of 1971 is proposed to be replaced with new legislation, drafted in 2004 and currently under consideration. The Disability Bill, based on the principle of non-discrimination, will promote the full participation with equality of disabled persons in all aspects of social and economic life. An important means of achieving this will be through inclusive education and training and provision is made in the Bill for the creation of at least one integrated public vocational and technical school in every region of the country.

In line with the spirit of the National Policy, encouraging first steps have been taken to promote mainstream training for people with disabilities, both in the MACOHA training centres and in the general public colleges, through technical cooperation pilot projects. The experience of and lessons learnt through these pilot projects will provide a solid foundation on which Malawi can build, when the decision is taken to extend this approach countrywide.

### **Recommendations arising from the survey**

#### **Relevance of training provided**

Slightly more than one in four respondents said that the skills training they attended had assisted them in finding work, though the proportion of those who were skilled and employed reporting their training to be relevant was much higher, at 66 per cent. A striking majority of respondents stated that the training they had completed was not useful to them in finding jobs. Women were less likely than men to have found their training useful.

Those who attended training had acquired skills in a limited number of areas. They had trained as tailors or weavers, carpenters or in agricultural or fishing activities. This range of skills training does not reflect the changing opportunities available and some will be significantly affected by technological change and the opening up of markets globally.

Some respondents made the point that they had little or no choice in terms of the courses they attended.

Although a significant proportion of respondents considered the training completed as irrelevant when it came to seeking jobs, many hoped to have the opportunity to acquire new skills or upgrade their existing skills.

- ➔ A review of training provision for people with disabilities should be conducted, with a view to improving its labour market relevance and increasing the range of options available.
- ➔ People with disabilities should have the possibility of attending training suited to their interests, aptitudes and abilities.
- ➔ The review should pay specific attention to the training options offered to women with disabilities, and ensure that options should be offered to people with every type of disability, including people with intellectual disability whose training requirements are frequently overlooked.

### **Training fees**

Many survey respondents were unable to attend the training of their choice, because they could not afford to pay the training fees. For others, attendance at training was difficult because they needed to work, to earn an income to meet their basic needs.

- ➔ Consideration should be given to waiving training fees in the case of trainees with low income, and to providing training allowances or scholarships for such trainees.

### **Access to credit**

Some respondents mentioned the lack of access to credit to start or develop their own business as the most important barrier they faced. Many who had attended training said that they would need business support, either in the form of a loan or some other kind of financial assistance to set up their own business.

- ➔ Measures should be introduced to ensure that women and men with disabilities have access to credit to facilitate the development of small businesses.

### **Accessibility**

The lack of accessibility of training centres was mentioned as a problem by survey respondents with all disability types. Many respondents said that they had faced difficulties in getting into the training centre buildings and moving around inside. This did not always prevent them from attending training, but created an added difficulty they had to overcome.

- ➔ Steps should be taken to improve the physical accessibility of the general vocational education and training centres, building on the experience in the Soche pilot project.

Some respondents found it hard to following the training course they attended, due to the lack of training materials in accessible formats.

- Training materials should be made available in alternative formats, such as large print and Braille.

### **Transportation**

Lack of accessible transport made the process of getting to and from training centres problematic for many of the people interviewed. While this had not proved insurmountable for the survey respondents who had attended training courses, it may be a factor preventing many others from attending training at all. The lack of transport was also identified as a barrier when it came to getting to and from work.

- Arrangements should be made to facilitate travel to and from training centres, in particular for people with mobility and visual impairments.

### **Family responsibilities**

Many respondents said they could not take time off from family responsibilities to attend training.

- Consideration should be given to developing training opportunities for those, often women, who cannot attend courses due to family responsibilities. What measures are required? Would it make a difference, for example, if courses were offered at different times of the day? Would an outreach approach, bringing training to villages and rural areas, be more effective in catering to those who cannot attend training for the duration of a course as traditionally structured? What childcare arrangements could be made to enable parents to attend training? These and other options should be explored in order to improve opportunities not only for disabled parents, but for workers with disabilities who could benefit from skills training.

### **Disability awareness of training providers**

The respondents said that lack of awareness among training providers of the accommodation requirements of individual trainees often posed a problem. If the current trend towards inclusion of people with disabilities in mainstream training programmes is to be successful, action needs to be taken to address this issue.

- Induction training should be provided for training centre managers, training instructors and other training centre staff, to adequately prepare; combined with a system for assessing accommodation needs of individuals in the classroom and training centre.

## Discrimination

Discrimination on the ground of disability is prohibited by the Employment Act, 2000. Yet, some survey respondents said that they had not found work because of discrimination on the part of employers. This is a finding which would merit further investigation to determine whether this is widespread.

- Information should be provided for employers on their legal obligations and on how to go about adapting the workplace and workstations, and making other forms of reasonable accommodation.

## Communication

For many trainees with hearing impairments, difficulties arose during training because they could not follow what was going on in the classroom or in the training centre. Trainers were not trained in sign language and no sign language interpreters were available.

- Steps should be taken to familiarize all instructors and training centre staff, as well as hearing trainees with basic sign language.
- Provision should be made for sign language interpretation in training courses when required.

## General considerations

### Basic and continuing education

Systematic obstacles faced by disabled persons in obtaining recognized educational qualifications prevent them from accessing training in marketable skills and work in the open labour market, and stop them from reaching their potential, often trapping them in a vicious circle of poverty and work with low value-added, offering little future prospects. These obstacles also prevent Malawi from benefiting from the potential contribution of these citizens.

One in four respondents in the exploratory survey had received no formal education. This finding is in line with the results of the nationally representative *Living Conditions* study which identified lack of access to education as a particular problem for people with disabilities in Malawi, and in particular for disabled women. Lack of education is a great disadvantage in applying to attend training courses, particularly those in general technical VTCs, and in seeking jobs.

- Steps should be taken to ensure that all children with disabilities in Malawi go to school.
- Adults with disabilities who have not attended school or have low levels of education should be enabled to improve their functional literacy and numeracy, so that they can benefit from skills training, and improve their work options.

### **Ensuring comprehensive coverage**

A fundamental question for policymakers and service providers is whether every disabled person is being reached. Are people with intellectual disability and those with mental health difficulties receiving services to the same extent as people with physical, visual or hearing disabilities? Are disabled people from very poor backgrounds being supported financially to attend skills training courses? What provisions are made to ensure that disabled women have equal access to skills training opportunities? These and other questions need attention, and practical measures need to be developed, if the national policy goal of integrating people with disabilities into mainstream society is to be achieved.

### **Career guidance**

Information about occupations and the skills and aptitudes involved assists persons with disabilities in making decisions about their future working lives, and the type of skills training they will take. This information is often provided through schools and VTCs, and in some cases through employment services. Vocational assessment services also assist persons with disabilities in identifying the types of occupations to which they are suited, and, in combination with information about assistive devices, can enable them to make a choice which is suited to their interests, aspirations and capacities. The survey conducted in Malawi did not indicate that disabled people undergoing training had the benefit of access to such services in making decisions about their futures. This is a gap which policymakers and service providers might consider filling.

### **Mainstream VTCs**

The National Policy on the Equalization of Opportunities for Persons with Disabilities states the commitment to open general VTCs to disabled persons (see Section 2). Steps have been taken to give effect to this commitment in the form of a pilot project in one VTC, to test the inclusive approach. The effective implementation of this commitment in all mainstream VTCs requires that several questions be addressed. What needs to be done to encourage people with disabilities to apply for mainstream training? Do the entry requirements need to be reviewed? What is required to adequately prepare mainstream instructors to accommodate trainees with disabilities in their classrooms? What steps must be taken to make VTCs physically accessible to disabled trainees? How can the training materials be made accessible to blind trainees? What needs to be done to ensure that deaf trainees can benefit from the training? What support services, technical aids and adaptations should be available to facilitate the inclusion of persons with disabilities? What financial resources are required? Consideration of such questions will ensure that access to general VTCs is effectively organized and prepared. This will set the scene for great improvement in the status of people with disabilities in Malawi in the future, not only by ensuring that they have access to mainstream skills development opportunities alongside their non-disabled peers, but that they can successfully complete the courses of their choice.

- Building on the pilot project in Soche Technical College, preparations should be made for the effective opening of mainstream VTCs to students with disabilities.
- A study should be undertaken to explore the reasons why few disabled people have been deemed eligible for training in mainstream training VTCs, and to recommend practical measures to tackle the problems identified.

### **Distance learning**

With developments in information and communications technologies, the opportunities for distance learning have opened up, and these are particularly relevant to people with mobility impairments. Is the potential of information and communications technology being tapped in skills training provision for people with disabilities in Malawi? Could better use be made of media such as the radio in outreach efforts by training agencies to disabled people in rural and remote communities?

### **On-the-job training**

On-the-job training is becoming more common in many countries, sometimes provided by the employer, and more frequently as part of a supported employment placement, where a job coach from a specialist agency provides the training in the workplace. This form of training has been particularly useful for people with intellectual disabilities. What is the scope for extending this form of training in Malawi?

### **Entrepreneurship development**

Many of the survey respondents were self-employed or had their own micro enterprises. Others expressed their wish to set up their own business. Given that most of the Malawian labour force is working in micro and small enterprises in the informal economy, and that the prospects for those entering the labour market lie predominantly in such enterprises, it is of central importance that persons with disabilities have access to entrepreneurship training. This important area should receive attention in any review of vocational training for persons with disabilities, and the role of specialist and mainstream VTCs in providing such training should be considered.

In addition to entrepreneurship training, access to business development services and to microcredit or other financial services should be promoted, so as to facilitate them in establishing a viable business or in expanding an existing one.

### **Employment services**

Most respondents said that they found out about available jobs through their own networks, and some found it through the training centre they attended. This is effective for those with access to such networks, but a more systematic approach is required if all jobseekers with disabilities are to have access to labour market information which, along with employment services, plays a key role in influencing a young person's employability. There is scope for developing the access of jobseekers with disabilities to employment services in Malawi, to ensure that they are adequately informed about available jobs and potential employers. This information can also assist them in making career choices when it comes to applying for

skills training courses. Employment services can also play an important role in providing relevant information to people with disabilities entering self employment or starting micro or small businesses.

### **Upgrading skills of workers with disabilities in the informal economy**

When it comes to reaching out to workers with disabilities in the informal economy, in order to improve their skills, several characteristics of the formal technical and vocational education and training system need to be reviewed.<sup>22</sup>

- entry requirements for public TVET are often too high and too rigid for those with no official records or experience of attending school;
- the level of courses is often too high for their needs and learning materials are not suitable, in particular, for those who have low educational levels;
- courses are often too long (2-3 years) and the hours are not flexible, which makes it almost impossible for informal workers to attend; and
- the formal TVET system does not recognize skills that were acquired informally, which forces workers to take courses for skills they already possess to gain official certification.

How can the public TVET be extended and modified to meet the needs of disabled workers in the informal economy? How can non-formal training opportunities that already exist be strengthened and used to complement public TVET? How can the non-formal training provided by NGOs, communities and enterprises be fully recognized as part of the overall TVET system, alongside public TVET institutions? Key policy issues include:

- improved access to public TVET institutions through flexible entry requirements and demand-led training delivery;
- recognition of prior learning (non-formally acquired skills and knowledge);
- strengthening of informal apprenticeship;
- improved linkages between non-formal training and public formal training;
- improving productivity and enterprises competitiveness;
- skills development for equity (for example, women, people with disabilities, minority groups); and
- skills development as an integral part of the broader strategy for upgrading the informal economy, so that the better skilled informal economy workers have the opportunity to use their skills.

### **HIV/AIDS**

The widespread incidence of HIV/AIDS and its impact on vocational training personnel and on trainees is a further matter which needs to be taken into account in planning policy measures, programmes and services to address the skills development needs of people with disabilities. More attention needs to be paid to the inclusion of disabled people in HIV/AIDS-related educational and support programmes.

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<sup>22</sup> ILO. Sakamoto, Akiko. 2006. *Informal Economy and Skills Training. Key Policy Issues*. ILO Skills and Employability Department, Internal Document.

## **Concluding comment**

Malawi is in the process of transforming its legal and policy framework in line with modern trends. Once the Disability Bill has been enacted in law, to give force to the National Policy on the Equalization of Opportunities for Persons with Disabilities, the main challenge faced by policymakers and service providers will be to translate the legal and policy commitments into practice through equal access to education and to high-quality training, as well as to other related services. The findings of this exploratory survey show that the existing training opportunities have led to good employment for some disabled people, but that for many others, much more needs to be done, if the goal of full participation with equality is to be achieved and a real improvement is to be made in the lives of all men and women with disabilities throughout the country.