

## **“Leaving no one Behind” is More than a Slogan**

By: Simon Woldemichael

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The empowerment of the disabled and other socially and physically disadvantaged segments of the society continues to be a priority of Eritrea's development agenda. The government and community organizations are actively working to ensure that Eritreans living with disabilities are not left behind.

Soon after Eritrea's independence, associations were established to represent and work for people with disabilities. The associations secured unfettered support from the government and the people living inside and outside of Eritrea. The associations that are functioning include the Eritrean National War-Disabled Veterans Association, Eritrean National Association of the Deaf, Eritrean National Association of the Blind and National Association of Autism and Down syndrome in Eritrea. These associations advocate for the rights of people with disability, conduct public awareness campaigns, and provide services.

In collaboration with various community organizations, programs are being launched to develop personal skills of the disabled to help them have better and dignified lives. The Eritrean Hearing and Visually Impaired (EHVI) is an association launched in 2014 by interested Eritreans living in the USA and Canada who are dedicated to improve the lives of those with hearing and visual problems. The organization makes a lot of contribution in terms of material, technology and ideas to help Eritrea deal with disability. The association has sent a delegation composed of Mr. Araya Efriem (vice chairman), Yordanos Abraham (a visually impaired woman), Dr. Mihreteab Gebrehiwet and Azieb Mihtsun to boost the cooperation and coordination with local stakeholders and to deliver important mobility and accessibility materials for the deaf and the visually impaired citizens.



I had an extensive discussion with Mr. Araya Efriem and Ms. Yordanos Abraham about the activities, objectives and future plans of EHVI. They believe that hearing and visual impairment are social challenges that need to be confronted adequately. They explained to me the necessity of learning about, adapting to, and coping with disability. Mr. Araya Efriem briefly stated that “the success of any investment can only be ensured if and only if the societal and attitudinal barriers and negative thoughts and feelings about disability are eliminated and replaced by positive attitudes.” Their contribution is of high importance for the empowerment of the visually impaired and deaf citizens and

for the elimination of social injustice and discrimination. They have reached an agreement with the Association of Eritrean Artists to conduct an intensive awareness-raising campaign in the near future.

EHVI has delivered computers with applicable software ready to go, talking watch, white canes, support canes, a reading device for the visually impaired college students, magnifier-glass for those with low vision, special sport facilities and spare parts. Visually impaired students of the College of Business and Social Sciences at Adi Keih has received the support needed to enhance their learning. The association expects individuals with disabilities to deal with their challenges and excel in what they do.



The Eritrean people fervently believe in cooperation. People need to cooperate to survive and prosper. It's been considered a foundation for the effective functioning of a society. In the dog-eat-dog world, Eritreans living inside and outside of the country cooperate and work together for the betterment of their life and their country. Mr. Araya Efriem argued that cooperation is necessary for Eritrea's prosperity and for its achievement in various fields such as education, health and sport. Cooperation is the foundation for participation, inclusion, social integration and cohesion.

Social inclusion is understood as a process by which efforts are made to ensure equal opportunities for all, regardless of people's background, so that

individuals can achieve their full potential in life. The contribution of EHVI is aimed at creating conditions to enable full and active participation of every member of the society in all aspects of life. The initiative taken by the Eritrean diaspora goes beyond material assistance. More importantly, it's one way of expression of the intimate connection they have with homeland.

The cooperation of the Eritrean diaspora is a reflection of the strong social cohesion that exists in the Eritrean society. Cooperation, which has become a tradition in Eritrea, enables Eritreans to help one another. The true meaning of the contributions of the diaspora community can only be understood from this perspective. The Eritrean society is unified and every citizen feels a sense of belonging.

Giving support to young citizens living with disability is a conscious decision to sustain an inclusive society, recognizing the human rights of every individual and giving them support to become active and productive citizens. An inclusive society must be based on respect for human rights, including respect for the special needs of the vulnerable and disadvantaged groups, and social justice. Supporting organizations such as EHVI are motivated by the policy of social justice which is the guiding principle of Eritrea. To be involved in organizations such as EHVI is performing moral, human and national duties all at once.



The Eritrean society is tolerant, inclusive and supportive that embraces all people. The government's policy of social justice that aims to ensure that no one is left behind has a strong social and cultural basis. Giving assistance to those in

need is a culture in Eritrea. EHVI believes that no one can be empowered by simply receiving handouts. Mr. Araya Efriem and Yordanos Abraham emphasized that the objective of their organization is to help the target group to become productive by establishing revenue generation centers.

The establishment of revenue generating centers would allow the physically disabled to participate in a process of changing their individual lives as well as the collective lives. The association has completed a design of the center they want to establish and they are contacting relevant authorities for the final phase of implementation.

Through the coordination of various governmental and non-governmental entities, “leaving no one behind” has become a practical guiding principle. The dignity of the citizens with disability are recognized, their needs and concerns reflected, and their rights are not only guaranteed in legislation but also respected. The contribution of the Eritrean diaspora in making the idea of “leaving no one behind” a reality is impressive. Their involvement holds an important place in making a fairer Eritrea in which everyone, including those with disability, can go as far as their talents and hard work will take them.

## Eritrea Health Care Success: Leave No One Behind

On Jan 25, 2017



In 1946, the right to health was first articulated in the World Health Organization (WHO) Constitution, stating that, “the enjoyment of the highest attainable standard of health is one of the fundamental rights of every human being.”

Shortly thereafter, the Universal Declaration of Human Rights (UDHR), adopted by UN General Assembly Resolution 217A (III) of 10th December 1948, outlined that everyone has the right to health, including health care.

Importantly, beyond its ethical and rights dimensions, health is fundamental to human happiness and overall well-being, while it also makes an important contribution to economic growth and progress, since healthier populations live longer, are more productive, and tend to save more.

A variety of factors influence health status and a country’s general ability to provide quality health services for its people. In addition to ministries of health, other government departments, donor organizations, civil society groups, and both communities and individuals themselves are important actors. For example, investments in roads help improve access to health services, inflation targets can constrain health spending, and civil service reform can aid in creating opportunities (or limits) to hiring more health workers.

Although a low-income, developing country and despite its being located in a challenging, politically unstable region, Eritrea has remained committed to expanding health and health care, and sought to ensure healthy lives and promote well-being for all at all ages.

Notably, the country has developed coherent, integrated approaches, emphasized equity and inclusion, and utilized cost-effective, pragmatic approaches, involving broad participation and multisectoral collaboration and action. In fact, according to a recent WHO report, upon a number of key health-related measures, Eritrea's figures are distinguished as amongst the best, both within the region and comparatively across the continent.

In regard to malaria, Eritrea has categorized the infectious disease as an issue of utmost national concern. Significantly, approximately 70% of the population live in endemic, high-risk areas, with the Gash Barka region bearing greater than 60% of the burden. Of note, the most common malaria parasites found in the country are *Plasmodium vivax* and *Plasmodium falciparum*. The former leads to severe disease and death, while the latter is the deadliest species of all malaria parasites infecting humans.

To control malaria, Eritrea has employed an assortment of strategies, including the promotion of national campaigns and community based-programs. Many programs have focused on providing extensive awareness and information, organizing focus groups, using preventative interventions, and encouraging the use of medical check-ups and medication. As well, control strategies have incorporated early treatment, indoor spraying, a focus on drainage and larviciding, mass distribution of insecticide-treated nets (ITNs), and a variety of source reduction efforts.

As a result of its multifaceted control measures, nearly 70% of children below age 5 now sleep under ITNs and over 60% of people own at least two ITNs. Consequently, national malaria incidence and deaths have declined dramatically, leading to Eritrea's malaria intervention being described as "the biggest breakthrough in malaria mortality prevention in history."

According to the WHO, in 2013, Eritrea's malaria incidence (per 1000 population at risk) was 17.4. By comparison, Djibouti's incidence was 25, Ethiopia's was 117.8, Kenya's 266.3, Somalia's 78.8, South Sudan's 153.8, Sudan's 37.7, Africa's was 268.6, and the global average incidence was 98.6.

Another area of improvement for Eritrea has been in combating tuberculosis (TB), an airborne infectious disease which, alongside HIV/AIDS, is the most important cause of adult mortality in the world. According to the WHO, approximately 9 million people per year are infected with TB, with the large majority of these cases located within the world's poorest, least developed countries.



TB is caused by bacteria called *Mycobacterium tuberculosis*. The bacteria usually attack the lungs, but they can also damage other parts of the body. TB spreads through the air when a person with TB of the lungs or throat coughs, sneezes, or talks.

In Eritrea, TB has long been a significant public health issue – representing a major cause of morbidity and mortality – and an influential factor in severe economic loss and the exacerbation of poverty. However, since 1996, Eritrea's Ministry of Health and the Tuberculosis Control Unit have focused on implementing a multisectoral approach that integrates holistic care, support, and treatment programs – all free of charge.



Importantly, prevention has also been a priority, particularly in order to reduce overall health and medical costs. For example, TB sensitization and education programs have regularly been conducted in schools, public venues, and rural communities, while television programs, newspapers, posters, and brochures have raised general awareness.

Consequently, Eritrea has made impressive progress in reducing the incidence of TB, with figures that stand out positively in comparison with its neighbours and global averages. Specifically, according to the WHO, Eritrea's TB incidence (per 100,000 population) for 2014 was 78. By comparison, Djibouti's incidence was 619, Ethiopia's 207, Kenya's 246, Somalia's 274, South Sudan's 146, Sudan's 94, Africa's 281, and the global average 133.

Finally, Eritrea has also made important progress in reducing both neonatal and under-5 mortality. Regarding the former, the first 28 days of life – the neonatal period – represent the most vulnerable time for a child's survival. Notably, the proportion of child deaths which occur in the neonatal period has increased globally over the last 25 years. In terms of child mortality, the majority of deaths are preventable.

## Children with IDD: “Leave no one behind”

On May 6, 2019



“Leave no one behind” was this year’s theme for World Down Syndrome Day, in addition to being the pledge made by the 2030 UN Agenda for Sustainable Development. Unprecedented changes in the health policy for children with special needs in Eritrea and the advent of extra activities in their classes show that the country is committed to “leaving no one behind” and “reach the furthest behind first” as requested by the UN Agenda for the year 2030.

The National Association for Intellectual and Developmental Disability of Eritrea (NAIDDE), together with the Ministry of Health and other stakeholders, is showing its zealous support toward putting marginalized people at the forefront of sustainable development, by creating opportunities of free health care services for individuals living with IDD (Intellectual and Developmental Disability). This is of paramount importance for these individuals, as the disorder usually affects the trajectory of their physical, intellectual and/or emotional development negatively, making life-long medical assistance almost indispensable.

According to a report by the World Health Organization in 2011, households with a disabled member have higher rates of poverty than those without disabled members. Disability usually leads to poverty, through lost earnings, as a result of unemployment, underemployment or additional costs of living with a

disability, such as extra medical, housing and transport costs (WHO, 2011). Thus, free medical aid for individuals with IDD is the stepping-stone for the alleviation of economic hardships these families face. The chairperson of NAIDDE said in an interview that the prescriptive provision of accurate training as well as parental love and affection are for parents to spend about 40 hours in a week with their child with special needs. However, this leaves parents baffled between two equally important choices – allocating time for income generation versus for your child’s care. Hence, the provision of free health care is essential to relieve parents of the predicament to make a choice.



Aside from helping the nation and the world at large fight back poverty, free health care also extends a hand to those persecuted by the society for the sole reason that they are living with IDD. Traditionally, the Eritrean society views parents of children with any disability, in particular those with mental health ailments, as cursed and denies them a fair deal out of life. Therefore, many parents have no choice but to keep such children hidden from society to avoid the inevitable stigma and embarrassment. According to examples of superstitious beliefs reported in a study by Martha Tesfai in 2017, the Kunama ethnic group blames mothers of disabled children for crossing a specific river because they are traditionally instructed against crossing rivers during pregnancy. Other ethnic groups in the highlands believe that pregnant women shouldn’t go out in public or attend funerals to avoid the “evil eye” that may harm the child (Gebremedhin, 2015).

Nonetheless, the concerted efforts of the Ministries of Health, Information, Labour and Human Welfare as well as the NAIDDE, have helped the awareness of the public to grow by leaps and bounds and foster a relatively more inclusive society. As a matter of fact, free health care aids the fight against the tyranny of ignorance by luring families who still couldn't break free from the barriers of superstitious beliefs out from their hiding places. Thus, it encourages disabled people and their families living at the intersection of poverty and discrimination to better themselves economically, socially and psychologically.

According to the United Nations Development Programme (UNDP), people who are “left behind” are those who lack the choices and opportunities to participate in and benefit from development or progress. The UN 2030 Agenda for sustainable development pledges that no one will be left behind because “every person counts and will be counted. Every person has a fair opportunity in life no matter who or where they are” (UK Government’s Leave No One Behind Promise). Eritrea has gone beyond rhetoric to integrate those individuals who are “left behind” in the community by organizing extracurricular activities to help them acquire art, pottery, photography, music and hairdressing skills. According to the NAIDDE, about 19 pottery students and 26 art students have graduated this year in the Central region. The Association further specified that this was just a pilot project to test the applicability of a bigger program that will include the remaining regions in the coming years. This will help the children living with IDD hone their skills in particular fields and hopefully prepare them for employment and independence, lessening the burden on families as well as increasing their earnings.

Underpinning this response is the pioneering of the special needs classes in different elementary schools. This joint initiative of the Ministry of Education, NAIDDE and other stakeholders helped establish a special-needs class in 16 elementary schools in the Central Region, as well as at least one school having special needs class in each of the remaining five regions, as attested by the association. This initiative was based on the government’s belief that education is a national basic human right for all.

The introduction of inclusive education acted as a catalyst in debunking the false beliefs associated with IDD and obliterating the derogatory outlook related with the disability. It proved that individuals with IDD are ordinary people who can improve if provided with care, daily living skills, sanitary training, etc. As a result, there are more and more people from the community volunteering to train these children for free. For instance, the course on pottery this year was given for free to interested individuals, as specified by the association's employees. Moreover, not only did inclusive education raise the parents' hopes for further improvement, it also freed their schedule for work or other activities, which in turn played a big part in ameliorating the economic, social and psychological aspects of their lives.

In conclusion, it is remarkable that Eritrea has made considerable progress in regard to individuals living with IDD. The progress rests upon raising awareness and taking action to ensure that these individuals march alongside everyone through the gates of sustainable development.

The NAIDDE is committed to supporting these children and help them improve. To do so, it totally relies on the generosity and donations from the public. There are many ways to help them in their projects, be it with your time or cash.

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