



THE TECHNICAL, ENTREPRENEURIAL AND VOCATIONAL EDUCATION AND TRAINING AUTHORITY &  
THE MINISTRY OF GENDER, COMMUNITY DEVELOPMENT AND SOCIAL WELFARE

# A GAP ANALYSIS REPORT ON THE INCLUSION OF PERSONS WITH DISABILITIES IN TECHNICAL, ENTREPRENEURIAL AND VOCATIONAL EDUCATION AND TRAINING

**TEVET Authority**

**TEVETA House**

**Private Bag B406**

**Lilongwe**

**Email:** [info@tevetamw.com](mailto:info@tevetamw.com)

Tel: +265 888 890 938 or +265 888 207 560

**March, 2023**

## Table of Contents

<a href="#">Acknowledgements</a> .....	i
<a href="#">Acronyms/abbreviations</a> .....	ii
<a href="#">Executive Summary</a> .....	iii
<a href="#">CHAPTER 1: INTRODUCTION</a> .....	6
<a href="#">1.1 Background and Overview</a> .....	6
<a href="#">1.2 Background to Inclusion of Persons with Disabilities in TEVET</a> .....	6
<a href="#">1.3 Objectives of the Gap Analysis</a> .....	7
<a href="#">1.4 Gap Analysis Process</a> .....	8
<a href="#">1.5 Ethical Considerations</a> .....	8
<a href="#">CHAPTER 2: RESEARCH METHODOLOGY</a> .....	9
<a href="#">2.1. Study Design</a> .....	9
<a href="#">2.2 Literature Review</a> .....	9
<a href="#">2.3. Primary Data Collection and Methods</a> .....	9
<a href="#">2.4. Data Collection and Quality Control</a> .....	10
<a href="#">2.5. Data Analysis</a> .....	10
<a href="#">CHAPTER 3: PRESENTATION OF RESEARCH FINDINGS</a> .....	11
<a href="#">3.1 Response Rate</a> .....	11
<a href="#">3.2 Disability Inclusion/ Mainstreaming Policy</a> .....	11
<a href="#">3.3 Recruitment and Training of Persons with Disabilities</a> .....	12
<a href="#">3.3.1 Recruitment of Persons with Disabilities</a> .....	12
<a href="#">3.3.2 Individualized Training Plan</a> .....	13
<a href="#">3.3.3 Personal Assistance/Support</a> .....	14
<a href="#">3.3.4 Continuous and Summative Assessment</a> .....	14
<a href="#">3.3.5 Personal Protective Equipment</a> .....	15
<a href="#">3.3.6 Other Deliberate Measures</a> .....	16
<a href="#">3.4 Emergency Policy and Procedures for Persons with Disabilities</a> .....	17
<a href="#">3.5 Enrolment of Trainees with Disabilities in TEVET Provider Institutions</a> .....	18
<a href="#">3.5.1 Enrolment of Trainees with Disability in last Six Years</a> .....	18
<a href="#">3.5.2 Current Enrolment of Trainees with Disability by Type of Disability</a> .....	19
<a href="#">3.5.3 Enrolment of Trainees with Disability by Trade</a> .....	20
<a href="#">3.6 Accessibility and Inclusion of Trainees with Disabilities</a> .....	20
<a href="#">3.6.1 Direction Signage</a> .....	20
<a href="#">3.6.2 Car Park Space</a> .....	21
<a href="#">3.6.3 Accessibility /Pathway</a> .....	22
<a href="#">3.6.4 Staircases</a> .....	22
<a href="#">3.6.5 Ramp</a> .....	23
<a href="#">3.6.6 Handrails</a> .....	24
<a href="#">3.6.7 Doors</a> .....	24
<a href="#">3.6.8 Availability of Wheelchairs</a> .....	26
<a href="#">3.6.9 Availability of Signage Providing Relevant Information</a> .....	27

<a href="#">3.7 Accessibility of Water, Sanitation and Health Facilities</a>	28
<a href="#">3.7.1 Toilets</a>	29
<a href="#">3.7.2 Reserved toilets</a>	29
<a href="#">3.8 Access Pathways within the Institution</a>	30
<a href="#">3.9 Availability of Emergency Exits</a>	31
<a href="#">3.10 Access to Recreational Areas</a>	32
<a href="#">3.11 Transportation</a>	32
<a href="#">3.12 Availability of Training and Special Materials or Equipment</a>	33
<a href="#">3.12.1 Availability of Learning Materials</a>	33
<a href="#">3.13 Provision of Assistive Devices/Technologies for Personal Use</a>	37
<a href="#">3.13.1 Hearing Aid</a>	37
<a href="#">3.13.2 Wheelchair</a>	37
<a href="#">3.13.3 Crutches, walking stick or walking frame</a>	38
<a href="#">3.13.4 Recorder</a>	39
<a href="#">3.13.5 Postural support furniture</a>	39
<a href="#">3.13.6 Sunscreen Lotion</a>	40
<a href="#">3.13.7 Anti- Epileptic drugs</a>	41
<a href="#">3.13.8 Incontinence products</a>	41
<a href="#">3.13.9 Protective wear</a>	42
<a href="#">3.14 Disability Inclusion Activities</a>	43
<a href="#">3.14.1 Disability Awareness Activities</a>	43
<a href="#">3.14.2 Personal Support to Trainees with Disabilities</a>	45
<a href="#">CHAPTER 4: CONCLUSIONS AND RECOMMENDATIONS</a>	48
<a href="#">4.1 Overall Conclusions</a>	48
<a href="#">4.2 Recommendations</a>	48
<a href="#">ANNEXES</a>	51
<a href="#">Introduction</a>	51
<a href="#">Respondent Details</a>	52
<a href="#">Interview Details</a>	52
<a href="#">A. TEVET Provider Institution Disability Inclusion/Mainstreaming Policies</a>	52
<a href="#">B. TEVET Provider Institution Enrollment</a>	53
<a href="#">C. TEVET Provider Institution Accessibility and Inclusion of Trainees with Disabilities</a>	58
» <a href="#">Transportation</a>	62
» <a href="#">Training and Special Materials or Equipments Availability</a>	62
» <a href="#">Rating the Conditions of the Training and Special Materials or Equipments at the TEVET Provider Institution</a>	64
<a href="#">D. Disability inclusion activities</a>	65
<a href="#">F. Recommendations</a>	69
<a href="#">REFERENCES</a>	70

## Acknowledgements

The Gap Analysis Report on Disability Responsiveness in Technical, Entrepreneurial and Vocational Education and Training (TEVET) is a product of self-less contributions, dedication and commitment of TEVET Providers (TPs) and a team of technical officers from TEVETA and Ministry of Gender, Community Development and Social Welfare. In this regard, TEVETA would like to thank key stakeholders and all individuals who provided data and input which helped in the production of this report. Special thanks to the Ministry of Gender, Community Development and Social Welfare for all the technical support and guidance.

TEVETA is also heavily indebted to the sampled TPs, for accepting to take part in the study from which this report is the core output and also the research team. The Authority wishes to place on record the leadership of Mr. Patrick Mputeni and Mr. Joshua Mkwelwa for the successful implementation of this study as well as making necessary arrangements for further information gathering and review of the report.

Lastly, profound gratitude goes to the Management of TEVETA and Ministry of Gender, Community Development and Social Welfare for availing resources which enabled successful implementation of the study.

The contributions and guidance of the aforementioned stakeholders in this study are therefore duly acknowledged.

Elwin Chiwembu Sichiola

**EXECUTIVE DIRECTOR**

## Acronyms/abbreviations

AMM	Automobile Mechanics
AAS	Administrative Studies
BRL	Bricklaying
CBET	Competence Based Education and Training
CRJ	Carpentry and Joinery
CSDC	Community Skills Development Centres
CTC	Community Technical College
EHC	Edible Horticulture
EIE	Electrical Installation and Electronics
FBW	Fabrication and Welding
MACODA	Malawi Council for Disability Affairs
MDA	Ministries, Departments and Agencies
MoL	Ministry of Labour
NGOs	Non-Governmental Organizations
NTC	National Technical College
PLB	Plumbing
SPSS	Statistical Package for Social Sciences
TEVET	Technical, Entrepreneurial and Vocational Education and Training
TEVETA	Technical, Entrepreneurial Vocational Education and Training Authority
TFD	Tailoring and Fashion Design
TMIS	TEVET Management Information System
TP	TEVET Provider

## Executive Summary

This report presents the findings of a gap analysis on the responsiveness of TEVET Providers (TPs) to persons with disabilities. The study was conducted by the Technical, Entrepreneurial and Vocational Education and Training Authority (TEVETA) in collaboration with the Ministry of Gender, Community Development and Social Welfare and the Malawi Council for Disability Affairs (MACODA). It was implemented in National Technical Colleges (NTCs), Community Technical Colleges (CTCs) and Community Skills Development Centres (CSDCs). It aimed at assessing capacity gaps in TPs to provide training to persons with disabilities and recommend measures that the Authority and TPs can adopt to support trainees with disabilities in TEVET in pursuit of inclusiveness. Specifically, the study sought to;

- i. ascertain availability of teaching and learning materials for persons with disabilities in TPs;
- ii. assess suitability of infrastructure;
- iii. assess suitability of instructors to persons with disabilities;
- iv. assess if TPs provide relevant educational assistive devices to persons with disabilities; and
- v. make recommendations on how to improve access to TEVET among persons with disabilities.

The study adopted a mixed methods approach drawing on both quantitative and qualitative research designs to address the objectives. This approach helped in acquiring elaborative feedback and an in-depth understanding of the subject matter. Qualitative methods were applied to get normative views and perceptions as regards implementation of TEVET programmes, their responsiveness, to trainees with various disabilities, and the availability of requisite teaching and learning resources. Quantitative methods largely included use of statistics to ascertain inclusion of trainees with disabilities through enrolment and availability of instructors to deliver special training among other parameters.

Data collection was done using a structured online questionnaire, administered through kobo toolbox and analyzed using Statistical Package for Social Sciences (SPSS) and MS Excel. These are the key findings and proposed recommendations from the study:

### Key findings:

- i. Majority of TPS do not have disability inclusion policies or guidelines;
- ii. TEVET system does not have clear lay down procedures or criteria aimed at promoting recruitment of persons with disabilities;
- iii. TPs do not develop individualized training plans to cater for trainees with disabilities;
- iv. TPs do not have requisite infrastructure and designated structures for easy accessibility by trainees with disabilities;
- v. TPs do not have teaching and learning assistive devices for trainees with disability;
- vi. TPs do not have Water, Sanitation and Hygiene (WASH) facilities conducive for trainees with disabilities;
- vii. TPs do not have teaching and learning materials for persons with disability;
- viii. TPs do not provide postural support furniture to persons with disability.
- ix. Poor implementation of disability awareness activities by TPs, Regulators and Policy Bodies.
- x. Lack of trainings in special needs education in TEVET system.

## **Recommendations:**

In view of these findings, the study makes the following recommendations:

- i. Ministry of Labour in collaboration with key stakeholders should develop a disability inclusion/ mainstreaming policy in TEVET;
- ii. Ministry of Labour should develop a recruitment criterion aimed at promoting the recruitment of persons with disabilities at TPs and Policy level;
- iii. TPs should develop individualized training plans to cater for trainees with disabilities;
- iv. TPs should develop emergency policies and procedures that incorporate trainees and staff with disabilities;
- v. TPs should erect requisite infrastructure and designated structures suitable for persons with disabilities;
- vi. Government through Ministry of Gender, Community Development and Social Welfare should support institutions with assistive devices to cater for learners with disability;
- vii. TPs should rehabilitate WASH facilities to ensure accessibility by trainees with disabilities.
- viii. TEVET Authority and partners should support TPs with teaching and learning materials for persons with disabilities;
- ix. TPs should provide postural support furniture to persons with disabilities;
- x. Government through Ministry of Gender, Community Development and Social Welfare should intensify disability awareness campaigns to TPs and the general public;
- xi. TPs should partner with district social welfare offices to provide periodical counselling and other social welfare services to persons with disabilities;
- xii. TEVET Authority and partners should establish training bursaries for persons with disabilities.

# CHAPTER 1: INTRODUCTION

## 1.1 Background and Overview

The TEVET Authority is a regulatory body established in 1999 by an Act of Parliament to regulate, promote and facilitate sustainable provision of quality TEVET in Malawi. The TEVET policy stipulates that reforming Malawi from an import to export economy, it requires skilled, competent and productive workforce capable of producing quality goods and services that can compete favorably at local and international markets. The TEVET Authority believes that the human resource development in the TEVET Providers is one of the resources that can contribute to producing highly skilled, competent and productive workforce through delivering high quality training.

In 2023 the TEVET Authority conducted a gap analysis on the responsiveness of Technical, Entrepreneurial and Vocational Education and Training (TEVET) to people with disabilities by TEVET Providers (TPs), which was conducted by the Ministry of Gender, Community Development and Social Welfare, Malawi Council for Disability Affairs (MACODA).

The study used a quantitative and qualitative approaches to help in acquiring elaborative feedback and an in- depth understanding of the subject matter from the instructors. The methodology incorporated face-to-face interviews with management, instructors and persons with disabilities in the sampled TPs.

The overall objective of the study was to assess capacity gaps in TPs in the provision of training to people with disabilities and recommend measures that the Authority and TPs can adopt to support trainees with disabilities.

## 1.2 Background to Inclusion of Persons with Disabilities in TEVET

Persons with disabilities face numerous challenges that result in their exclusion from the mainstream of society, making it difficult for them to access their fundamental social, political and economic rights (National Policy on Equalisation of Opportunities for Persons with Disabilities, 2006). Many make their way through life uneducated and without skills for survival hence vulnerable. They are largely excluded from essential services and are often at risk of exploitation and abuse.

The Government of Malawi has overtime increased its focus on accelerating the mainstreaming of disability issues in national development so as to improve the lives of persons with disabilities. This is being done through the development and implementation of various legislation, policies and programmes in line with the United Nations Convention of Rights for Persons with Disability (UNCRPD).

The TEVET policy (2013) recognizes that TEVET in Malawi is characterized by limited access particularly for females and vulnerable groups; who are less than 30% of the total population. Access is by a selected few as formal programmes accommodate mostly those who can meet costs associated with recruitment processes. It is also characterized by inadequate infrastructure, appropriate tools and equipment. However, it posits that many young men and women and people with disabilities could access vocational skills if more TEVET programmes were targeting the informal sector.

The policy seeks to promote greater equity in the provision of education and training through the adoption of positive and affirmative action in relation to marginalized groups. Nevertheless, the TEVET policy does not adequately address the noticeable imbalances in the provision of training for persons with disabilities. Persons with disabilities face many challenges in accessing training and employment due to barriers like discrimination both in policy and practice, communication, negative societal attitudes, environmental and physical inaccessibility, inaccessible transportation systems, lack of supportive policies and guidelines and lack of suitable curriculum and instructors.

Nevertheless, there are a number of interventions implemented by TPs to support persons with disabilities. For example, MACODA is an organization under the Ministry of Disabilities, which focuses on supporting persons with disabilities. It operates two TEVET institutions in Lilongwe and at Magomero in Chiradzulu. Furthermore, MACODA runs showrooms for products made by the trainees in their various institutions. However, funding has been a major barrier towards serving a greater number of persons with disabilities.

### **1.3 Objectives of the Gap Analysis**

The overall objective of the study was to assess capacity gaps in TPs in the provision of training to people with disabilities and recommend measures that the Authority and TPs can adopt to support trainees with disabilities. Specifically, the study sought to;

- i. ascertain availability of teaching and learning materials for persons with disabilities in TPs;
- ii. assess suitability of infrastructure;
- iii. assess suitability of instructors to persons with disabilities;
- iv. assess if TPs provide relevant educational assistive devices to persons with disabilities; and
- v. make recommendations on how to improve access to TEVET among persons with disabilities.

### **1.4 Gap Analysis Process**

A purposive, multistage, clustered random sampling technique was employed to identify participating institutions. In this regard, 16 TPs were sampled where apprentices with disabilities, managers and instructors were interviewed.

The study employed both qualitative and quantitative approaches. An electronic questionnaire to conduct key informant interviews was developed. Furthermore, a checklist was developed to assess the friendliness of infrastructure to persons with disabilities. Quantitatively, a matrix was developed to collect statistics on enrolment of learners with disabilities over the last five years.

### **1.5 Ethical Considerations**

The following ethical issues were considered when carrying out this study:

- i. An introductory letter from TEVET Authority that introduced the study and researchers to the respondents was sent to participating TPs and was used to seek approval on information sharing by the respondent;
- ii. To reduce risk of response bias, respondents were informed that the purpose of the interviews was not to assess their performance or contributions, but to describe the overall responsiveness of institutions to persons with disabilities;
- iii. During data analysis and report writing, areas captured verbatim were kept anonymous;
- iv. No material/financial benefits were promised to participants; and
- v. Consent was also sought from the respondents prior to the interviews.

## **CHAPTER 2: RESEARCH METHODOLOGY**

### **2.1. Study Design**

The study used quantitative and qualitative approaches. Quantitative data was collected through review of documents and statistics guided by the study objectives. Specifically; Malawi National Policy on Equalization of Opportunities for Persons with Disabilities (2006), MW2063, MIP1, National Education Policy, National Education Sector Investment Plan (NESIP 2020), Malawi TEVET Pre-Apprenticeship Selection Booklets (2017-2022), National Education Standards (2015), TEVET policy (2013) and Malawi TEVET Standards (2022), among others.

Qualitative data was collected through face-to-face interviews using semi-structured questionnaires that were deployed in Kobo toolbox. In addition, a checklist was used to assess infrastructure within the TPs.

### **2.2. Sampling**

A purposive, multistage, clustered random sampling technique was employed to identify participating institutions. Sixteen (16) TPs were sampled where apprentices with disabilities, principals and instructors were interviewed. These were sampled for this study namely, Lilongwe Technical College, Don Bosco Youth Technical Institute, Mzuzu Technical College, Soche Technical College, Comboni Technical College, Miracle Technical Institute, Malawi Children's Village, Mponela Community Technical College, Mangochi Community Technical College, Kapondo Community Technical College, Ntchisi Community Skills Development Centre, There is Hope Vocational Training Centre, Kawamba Community Skills Development Centre, Bowe Youth Vocational Training Institute, Maone Vocational Training Centre, and St John of God Institute of Vocational Training.

The study also sampled key respondents from TEVET Authority and Ministry of Labour.

### **2.3. Data Analysis**

Data was analysed using SPSS and MS Excel. Qualitative data was analysed using context analysis approach and was examined according to the themes developed from the study objectives. A narrative report was developed in Microsoft word.

### **2.4. Data Collection and Quality Control**

To ensure quality data, research assistants were trained on quality data collection techniques to minimize errors. The study team was also oriented on data collection using Kobo toolbox. Data collection was also supervised throughout the field work.

The use of electronic data collection tools eliminated the need for manual entry which removed the likelihood of data entry errors.

## CHAPTER 3: RESEARCH FINDINGS

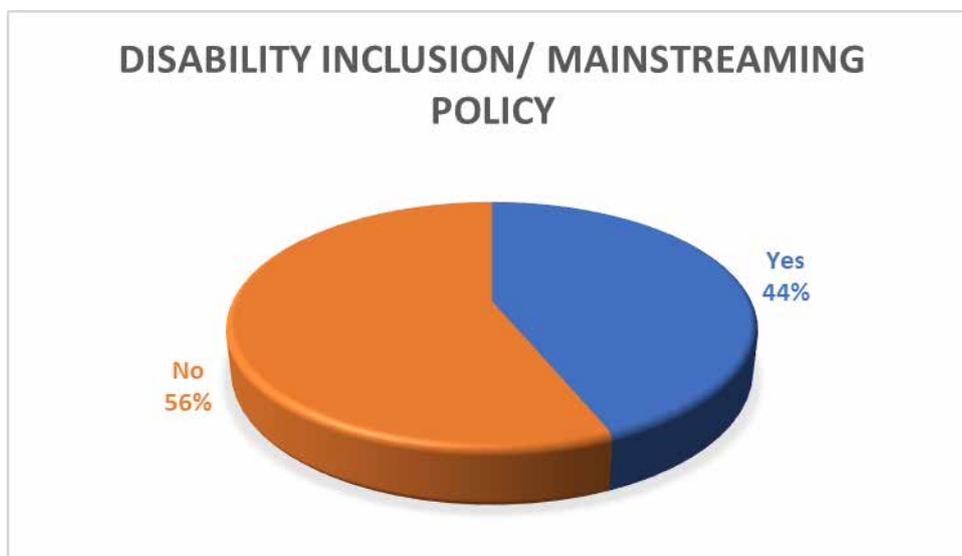
### 3.1 Response Rate

The study registered 100% response rate as all the targeted TPs participated in the study. In terms of gender, 83% of the respondents were males while the remaining 17% were females.

### 3.2 Disability Inclusion/ Mainstreaming Policy

The study assessed whether the TPs had disability inclusion or mainstreaming policies. It was established that 56% did not have a Disability Inclusion/ mainstreaming Policy that specifies action for including trainees with disabilities. On the other hand, 44% of the TPs reported to have had the Policy as presented in *Figure 2*.

**Figure 2: Disability Inclusion/ Mainstreaming Policy**



### 3.3 Recruitment and Training of Persons with Disabilities

The study assessed if TPs had measures to support recruitment of persons with disabilities. Specifically, the study sought to understand if there are strategies among TPs that promote recruitment of these persons and also support their training when recruited. It thus assessed whether institutions developed individualized training plans, provide personal assistance and personal protective equipment among other.

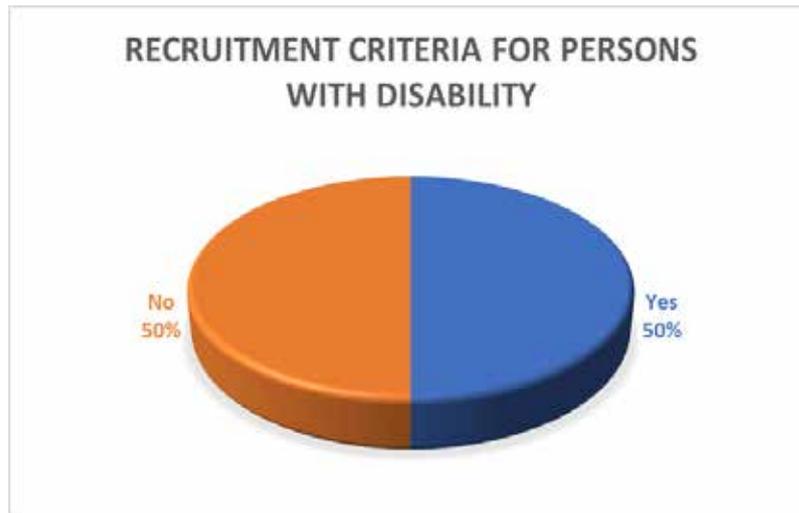
#### 3.3.1 Recruitment of Persons with Disabilities

The study inquired if the institutions had special recruitment criteria for applicants with disabilities. It was established that recruitment of apprentices into the colleges was two-fold. Firstly, some of the apprentices are recruited by Government through the Ministry of Labour in collaboration with the TPs. Secondly, another group of apprentices pursuing parallel programmes are recruited directly by TPs.

Consultations at central level revealed that there is affirmative action taken to ensure recruitment of persons with disability. In this regard, applicants that have disabilities are not subjected to competitive processes when recruiting apprentices.

The study established that 50% of the institutions had recruitment criteria aimed at promoting the recruitment of persons with disabilities. The remaining 50% did not have as shown in *Figure 3*.

**Figure 3: Recruitment of Persons with Disability**



**3.3.2 Individualized Training Plan**

The study established that 56% of the TPs were able to provide individualized training plans to cater for trainees with disabilities in an effort to promote recruitment and training of persons with disabilities. On the other hand, 44% of the TPs reported that they did not have measures in place to develop individualized training plans to support training of persons with disabilities as shown in Figure 4.

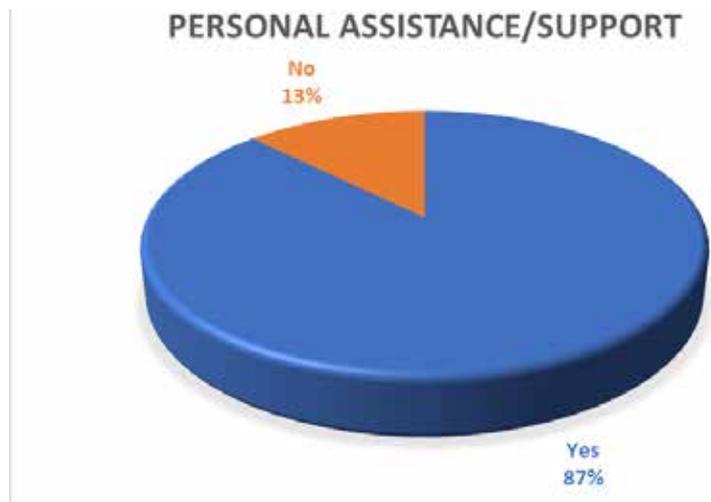
**Figure 4: Individualized Training Plan**



**3.3.3 Personal Assistance/Support**

The study explored on institutionalization of measures to promote recruitment of persons with disabilities by inquiring if the TPs provide personal assistance to trainees with disabilities. The majority of TPs, (87%), reported that they provided personal assistance or support to trainees with disabilities. On the other hand, 13% of the institutions did not provide such support as presented in Figure 5.

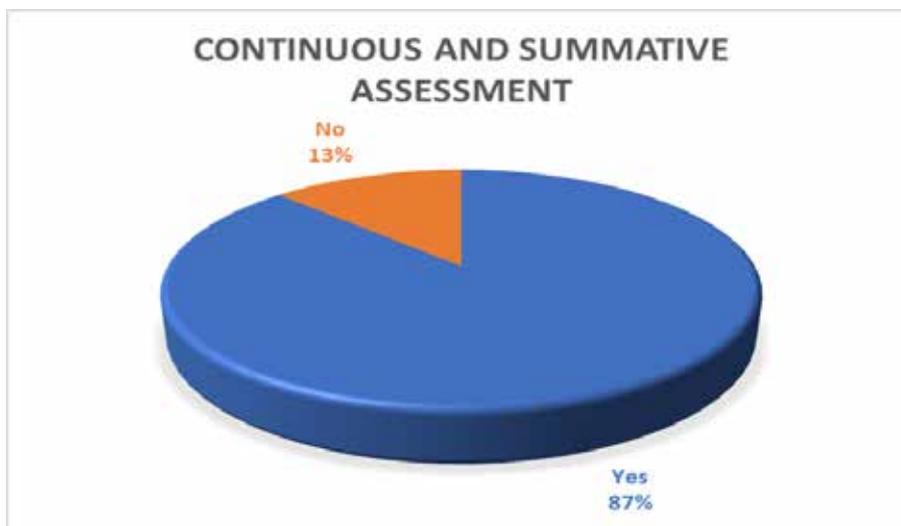
**Figure 5: Personal Assistance/Support**



**3.3.4 Continuous and Summative Assessment**

The study assessed whether special consideration were provided to the trainees with disabilities during continuous and summative assessment. It was established that 87% of the TPs had special considerations for continuous and summative assessments to those with disabilities while 13% did not as presented in figure 5.

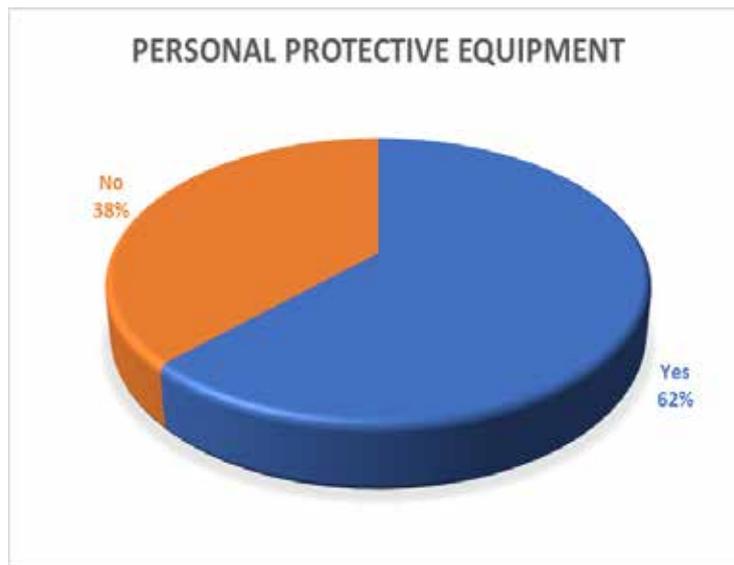
*Figure 5: Continuous and Summative Assessment*



**3.3.5 Personal Protective Equipment**

The study inquired if the TPs supported persons with disabilities with personal protective equipment during training. It was established that 62% of the TPs did not provide such support while 38% provides as presented in figure 6,.

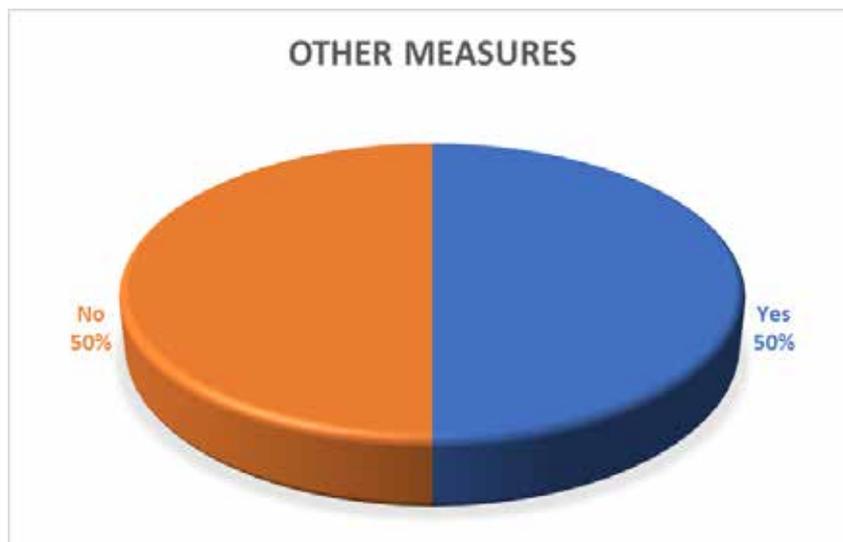
Figure 6: Provision of Personal Protective Equipment



### 3.3.6 Other Measures

The study sought if the TPs had other measures in place to promote the recruitment of persons with disabilities. It was confirmed that 50% of the TPs had some measures in place, for example, provision of disability friendly washrooms, pavements, Pedagogical training, favourable payment terms for tuition fees and considerations during assessments. On the other hand, the remaining 50% did not have.

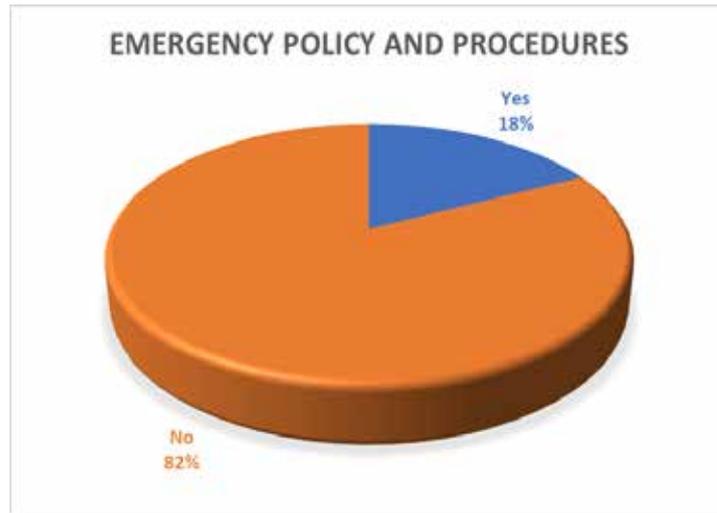
Figure 7: Other Measures



### 3.4 Emergency Policy and Procedures for Persons with Disabilities

The study sought if the TPs had emergency policies and procedures that incorporates persons with disabilities. it was established that 82% of TPS did not have while, 18% had. However, the TPs that indicated to have had were unable to produce copies of the policies and procedures hence the study could not validate this information.

Figure 8: Emergency Policy and Procedures



### 3.5 Enrolment of Trainees with Disabilities in TEVET Provider Institutions

#### 3.5.1 Enrolment of Trainees with Disability in last Six Years

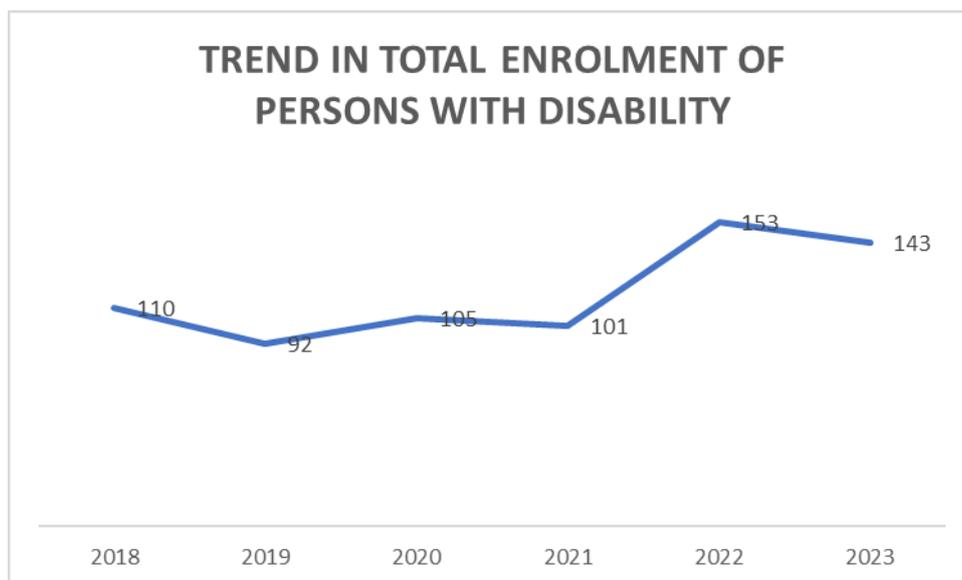
The study also assessed whether the institution had enrolled trainees with disabilities for the past six years (2018 to 2023). The study revealed that all of the sampled TEVET Providers registered trainees with disabilities over the last five years in different trades. The Table below presents the enrolment figures of trainees with disability over the last five years in all the sampled TPs.

**Table 1: Six Year Trend in Enrolment of Trainees with Disability**

Year	2018	2019	2020	2021	2022	2023
Total Enrolment	110	92	105	101	153	143

Source: Field Data

Figure 9: Trend in Enrolment of Persons with Disability



Source: Field Data

### 3.5.2 Current Enrolment of Trainees with Disability by Type of Disability

The study also inquired if the TPs registered any learners with disability in the 2023 academic year versus the total enrolment. It was found that a total of 143 trainees with disabilities were enrolled against a total enrolment of 2,797 trainees in the 16 sampled TPs. This represented an enrolment of 5% of trainees with disability.

**Table 1: Proportional Enrolment of Trainees with Disability**

Total Enrolment	2,797
Trainees with Disability	143

Source: Field Data

The study went further to disaggregate this data by type of disability. As shown in figure 10 below, physical disability was the most common type of disability among apprentices enrolled in TPs at 33% followed by deafness (21%), epilepsy and blindness at 12%. The study also found that there were other types of disability among apprentices in the visited schools and these were autism, albinism, down syndrome, cerebral palsy, intellectual disability as well as psychosocial (See Figure 10).

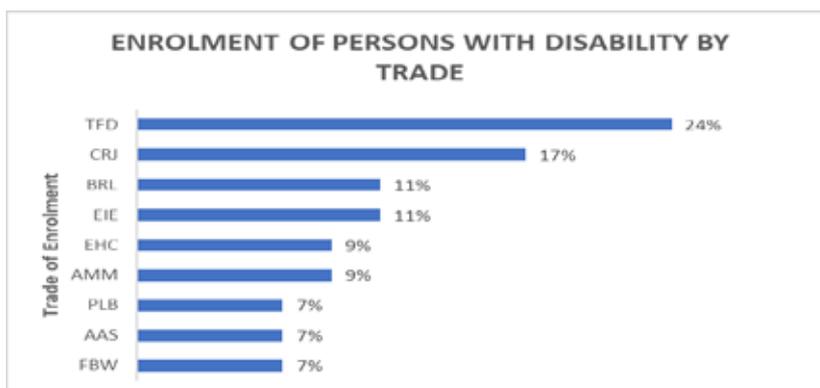
Figure 10: Trainees by Type of Disability



### 3.5.3 Enrolment of Trainees with Disability by Trade

The study also inquired on the trades that learners with disability were enrolled in the 2023 academic year. As shown in figure 11 below, the majority of trainees were enrolled in Tailoring and Fashion Design at 24% followed by Carpentry and Joinery at 17%, Bricklaying and Electrical Installation and Electronics at 11%. The least trades that enrolled trainees with disability were Fabrication and Welding, Administrative Studies and Plumbing at 7% (See Figure 11).

Figure 11: Enrolment of Trainees with Disability by Trade



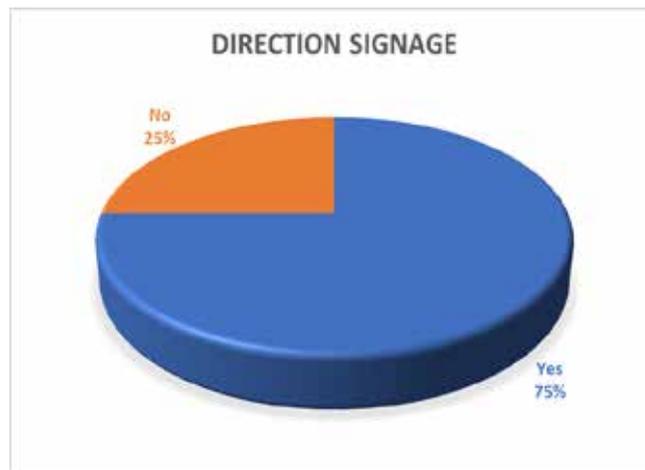
Source: Field Data

### 3.6 Accessibility and Inclusion of Trainees with Disabilities

#### 3.6.1 Direction Signage

The study assessed accessibility to the TPs including various infrastructure at the institution through observation and seeking the opinion of the respondents. The results revealed that 75% of the respondents reported that there were clear direction signage providing instruction to reach the TEVET provider institution and manoeuvre around the campus compared to 25% of the respondents who reported to not having a direction signage (See Figure 11 below).

Figure 12: Trainees by Type of Disability



Source: Field Data

#### 3.6.2 Car Park Space

The study also assessed whether the institutions had reserved parking space for persons with disability. The results revealed that only 12% of the institutions reported that there was a reserved parking space at the TEVET provider institution compared to 88% that did not have reserved parking space for persons with disabilities.

Figure 13: Parking Space for People with Disability



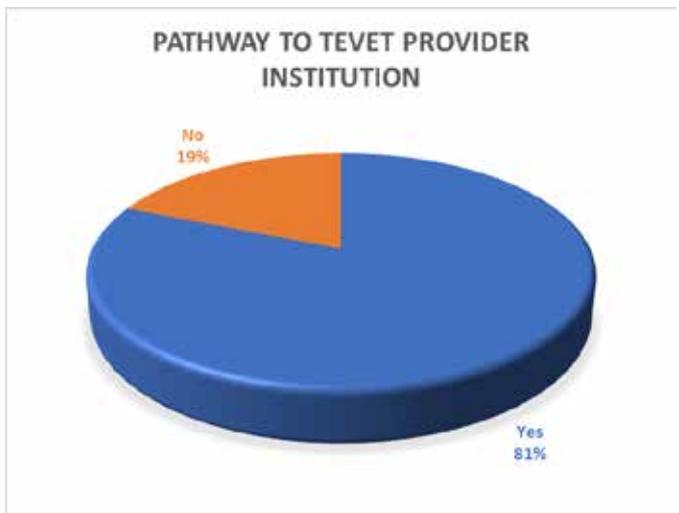
Source: Field Data

#### 3.6.3 Accessibility /Pathway

The trainees with disability accessibility to the route/ pavement/ pathway leading to the TEVET Provider institution was also assessed through observations and seeking the opinion of the management as well as the trainees with disability. The results revealed that 81% of the respondents reported that there was a pathway clear of obstacles leading to the TEVET Provider institution

compared to 19% of the respondents who reported to not having a clear pathway leading to the TEVET Provider institution.

Figure 14: Pathway to TEVET provider institution

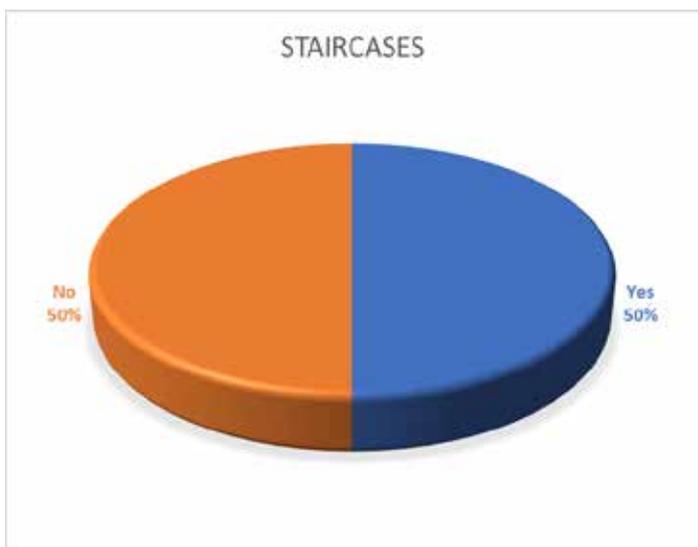


Source: Field Data

### 3.6.4 Staircases

The study results also assessed if the institution had staircases with recommended measurements. The study results revealed that 50% of TPs had staircases with recommended measurements while the other 50% did not have.

Figure 15: Accessible Staircases

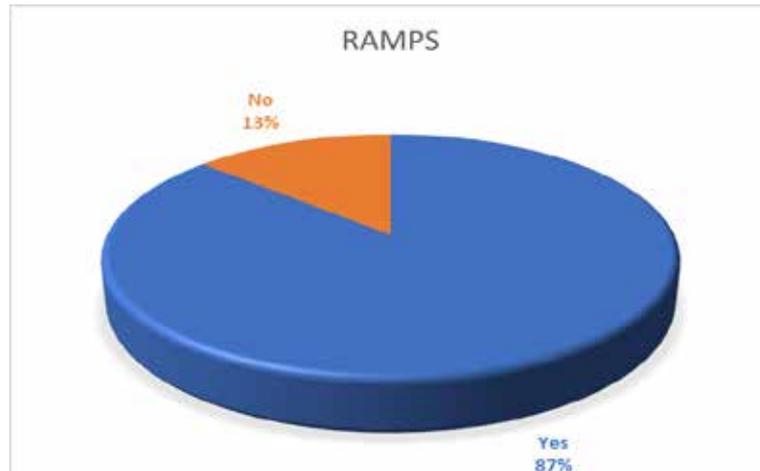


Source: Field Data

### 3.6.5 Ramp

The study results also assessed if the institution had ramps with recommended measurements at every entrance. The study results revealed that 87% of the respondents reported that there were ramps with recommended measurements at the TEVET Provider Institution compared to 13% of the respondents who reported to not having ramps with recommended measurements at the TEVET Provider Institution.

Figure 16: Availability of Ramps



Source: Field Data

### 3.6.6 Handrails

In addition, the study revealed that 38% of the respondents reported that there were handrails on staircases with recommended measurements at the TEVET Providers compared to 62% of the respondents who reported to not having handrails on staircases with recommended measurements at the TEVET Provider Institutions.

Figure 17: Availability of Handrails



Source: Field Data

### 3.6.7 Doors

#### 3.6.7.1 Entrance doors

Furthermore, the study assessed if the institutions had entrance doors that were easy to swing, had visual direction on maneuvering, and with recommended width, height of the handle,

maneuvering space and colour contrast. The study results revealed that 53% of the respondents reported that they had entrance doors that were easy to swing, had visual direction on maneuvering, and with recommended width, height of the handle, maneuvering space and colour contrast at the TEVET Provider institution compared to 47% of the respondents who reported to not having entrance doors that were easy to swing, had visual direction on maneuvering, and with recommended width, height of the handle, maneuvering space and colour contrast at the TEVET Provider institutions.

Figure 18: Entrance Doors



Source: Field Data

### 3.6.7.2 Inside doors

Similarly, results revealed that 53% of the institutions had inside doors that were easy to swing, had visual direction on manoeuvring, and with recommended width, height of the handle, manoeuvring space and colour contrast at the TEVET provider institution compared to 47% of institutions that did not have.

Figure 19: Inside Doors



Source: Field Data

### 3.6.8 Availability of Wheelchairs

The study also assessed the availability of a wheelchair near entrances at the TEVET Provider institutions. The study results revealed 21% of the institutions reported that the institution had a wheelchair near the entrance compared to 79% of the institutions who reported that the institution did not have a wheelchair near the entrance. Most of the TPs indicated that they did not have wheelchairs because trainees with physical disabilities mostly had their own.

Figure 20: Availability of Institutional Wheelchairs



Source: Field Data

### 3.6.9 Availability of Signage Providing Relevant Information

Furthermore, the study also assessed the availability of signage providing relevant information in regards to directions, waiting area, rooms and reception at the TEVET Provider institution. The study results revealed that 60% of the respondents reported that the institution did not have a signage providing relevant information that would help in navigating through the institution compared to 40% of the respondents who reported that the institution had a signage providing relevant information that would help in navigating through the institution.

Figure 21: Institutional Navigation Signage

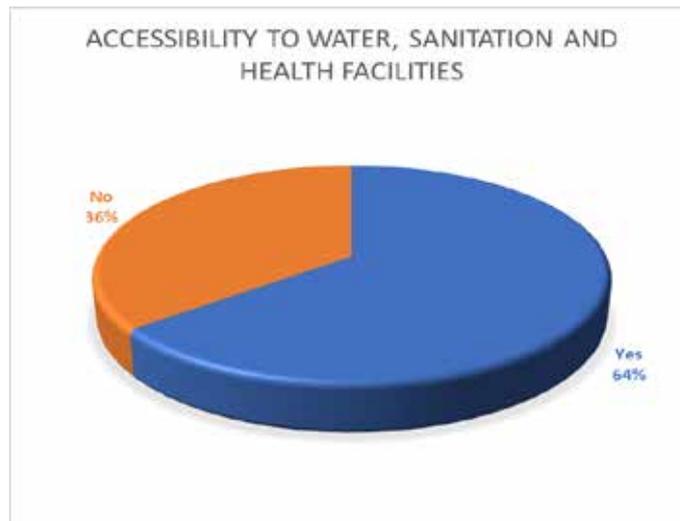


Source: Field Data

### 3.7 Accessibility of Water, Sanitation and Health Facilities

The accessibility to water, sanitation and health facilities at the institution by trainees with disability was also assessed through observations and seeking the opinion of the management as well as the trainees with disability. The results revealed that 64% of the respondents reported that the institution had tables, water taps, counters, hand-washing facilities and sinks at recommended height and provided with a lowered part for easy access by wheelchair users at the TEVET provider institution compared to 36% of the respondents who reported to not having water, sanitation and health facilities accessible to trainees with disability.

Figure 22: Accessibility of WASH Facilities

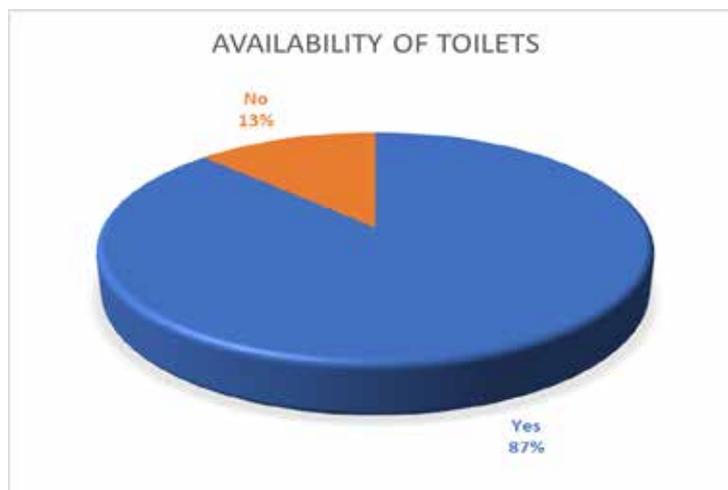


Source: Field Data

#### 3.7.1 Toilets

The study found that 87% of the institutions that were visited had toilets accessible to trainees with disabilities compared to 13% who did not have toilets that were accessible to trainees with disabilities.

Figure 23: Availability of Toilet Facilities

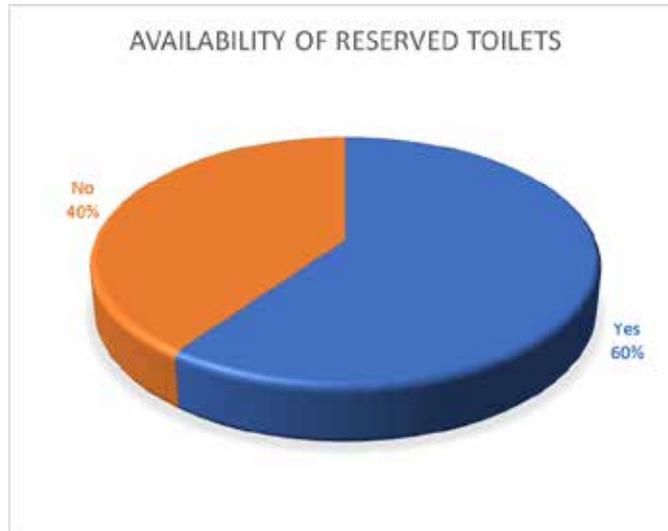


Source: Field Data

### 3.7.2 Reserved toilets

Furthermore, the study revealed that of the institutions that had accessible toilets, 40% had reserved toilets for trainees with disabilities while the remaining 60% did not have reserved toilets for trainees with disabilities.

Figure 24: Availability of Reserved Toilet Facilities

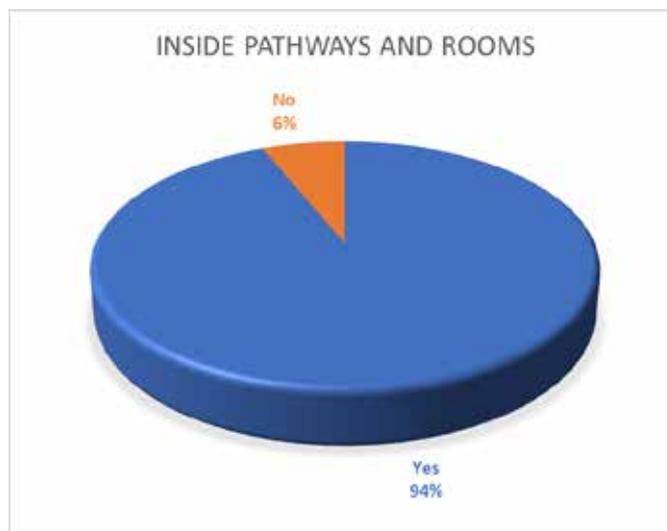


Source: Field Data

### 3.8 Access Pathways within the Institution

The study also assessed if the institutions had pathways around the school premises and rooms clear of obstacles, had good contrasting colours, enough circulation space as well as non-slippery and well-lit rooms. The study results revealed that 94% of the institutions reported that they had inside pathways and rooms that were clear of obstacles, had good contrasting colours, enough circulation space, non-slippery and well-lit. On the other hand, compared to 6% of the institutions reported to not having inside pathways and rooms that were clear of obstacles, had good contrasting colours, enough circulation space, non-slippery and well-lit at the TEVET Provider institution.

Figure 25: Inside Pathways and Rooms



Source: Field Data

### 3.9 Availability of Emergency Exits

The results also revealed that 40% of the respondents reported that the institution had emergency exit doors clearly marked and accessible by wheelchair users at the TEVET provider institution compared to 60% of the respondents who reported to not having emergency exit doors clearly marked and accessible by wheelchair users.

Figure 26: Availability of Emergency Exits

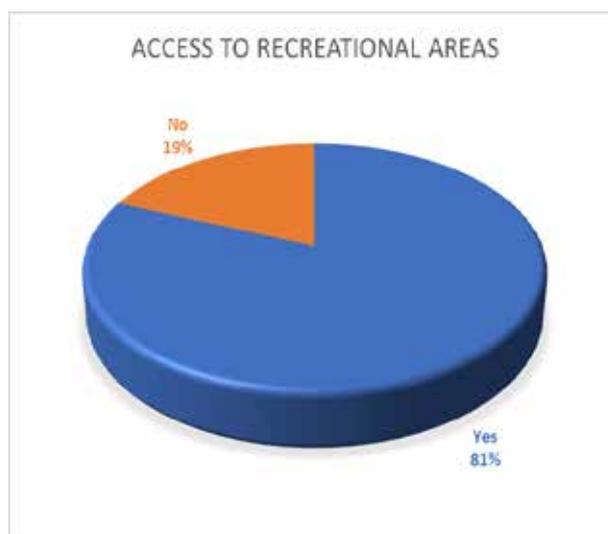


Source: Field Data

### 3.10 Access to Recreational Areas

The study results also indicated that 81% of the respondents reported that the institution had recreational areas accessible to trainees with disabilities at the TEVET provider institution compared to 19% of the respondents who reported to not having recreational areas that was accessible to trainees with disabilities.

Figure 27: Access to Recreation Areas

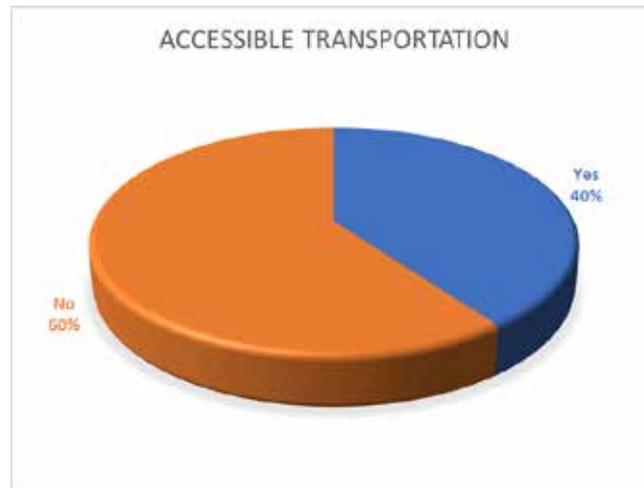


Source: Field Data

### 3.11 Transportation

The study also assessed whether the institutions had transportation accessible to trainees with physical disabilities. The study results indicated that 40% of the institutions reported that they had accessible transport for trainees with physical disabilities at the TEVET provider institution compared to 60% of the respondents who reported to not having accessible transport for trainees with disabilities.

Figure 28: Accessible Transportation



Source: Field Data

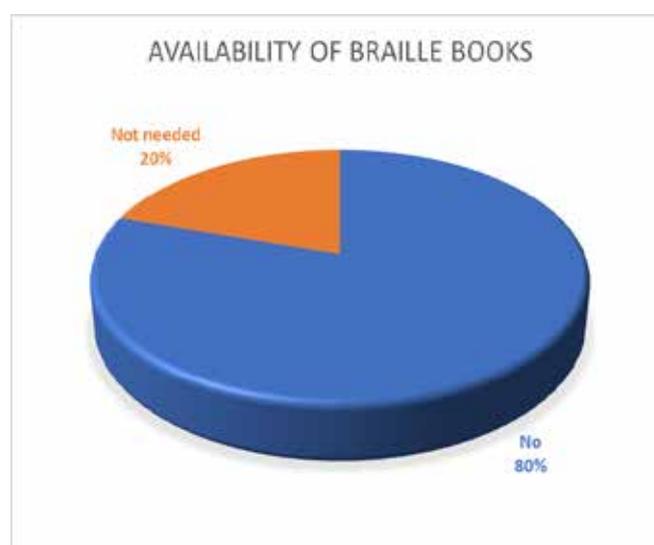
### 3.12 Availability of Training and Special Materials or Equipment

#### 3.12.1 Availability of Learning Materials

##### 3.12.1.1 Braille Books

The study assessed the availability of braille books at the institution to cater for trainees with visual impairment. The results revealed that a majority (80%) of the respondents reported to not having braille books at the institution while the remaining 20% respondents reported that there was no need of braille books at their institutions because they did not enrol any trainee with a disability requiring braille books.

Figure 29: Availability of Braille Books



Source: Field Data

### 3.12.1.2 Hearing Loop

The study also assessed the availability of hearing loops at institutions for learners with hearing impairment. The results revealed that a majority (80%) of the institutions did not have hearing loops because trainees that needed this device had their own. On the other hand, 20% respondents reported that there was no need for their institutions to have hearing loops as the institutions did not enrol any trainee with a disability requiring the equipment.

Figure 30: Availability of Hearing Loops

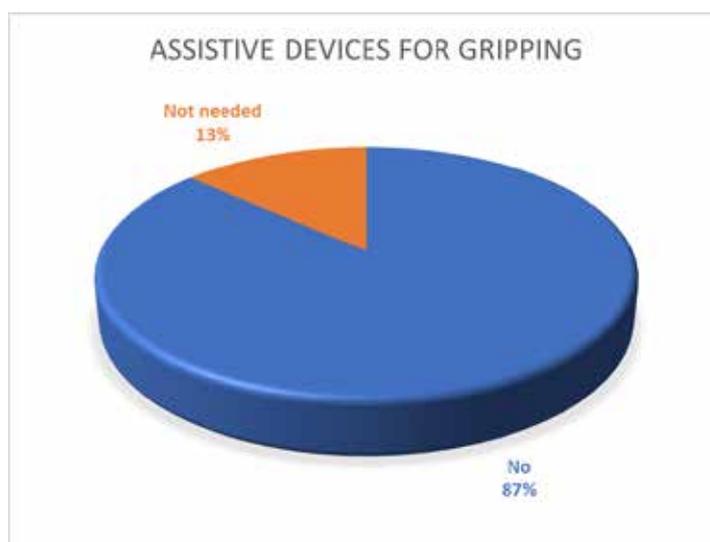


Source: Field Data

### 3.12.1.3 Assistive Devices for Gripping

Availability of assistive devices was also assessed at the institution. The study showed that 87% of the respondents reported to not having assistive devices for gripping at the institution compared to the 13% respondents who reported that the assistive device for gripping were not needed at the institution as they did not have any trainee with that requirement.

Figure 31: Availability of Assistive Devices for Gripping

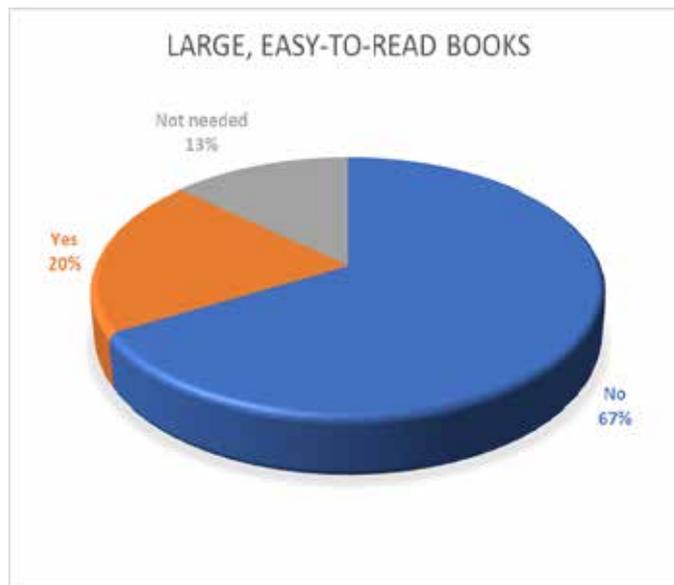


Source: Field Data

### 3.12.1.4 Large Easy-to-Read Books

In addition, the study also assessed large, easy-to-read books through seeking opinions from the institution management. The study revealed that 20% of the respondents reported to having large, easy-to-read books with screen readers and a majority (67%) of the respondents reported to not having large, easy-to-read books at the institution comparing to the 13% respondents who reported that there was no need of large, easy-to-read books as the institutions did not enrol any trainee with a disability requiring large, easy-to-read books.

Figure 32: Large Easy-to-read Books

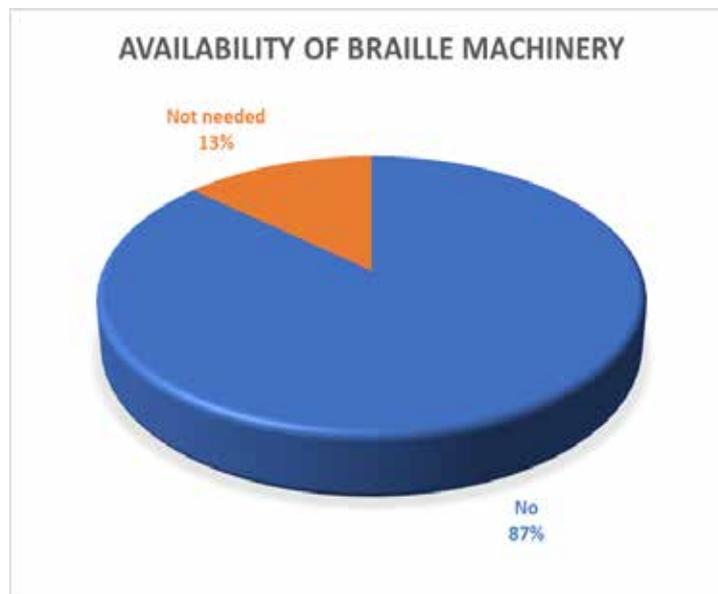


Source: Field Data

### 3.12.1.5 Braille Machinery

Furthermore, the study assessed the availability of braille machinery at the institutions visited. The results revealed that a majority (87%) of the institutions reported to not having braille machinery at the institution while 13% reported that there was no need of braille machinery as the institutions did not enrol any trainee with a disability requiring braille machinery.

Figure 33: Large Easy-to-read Books



Source: Field Data

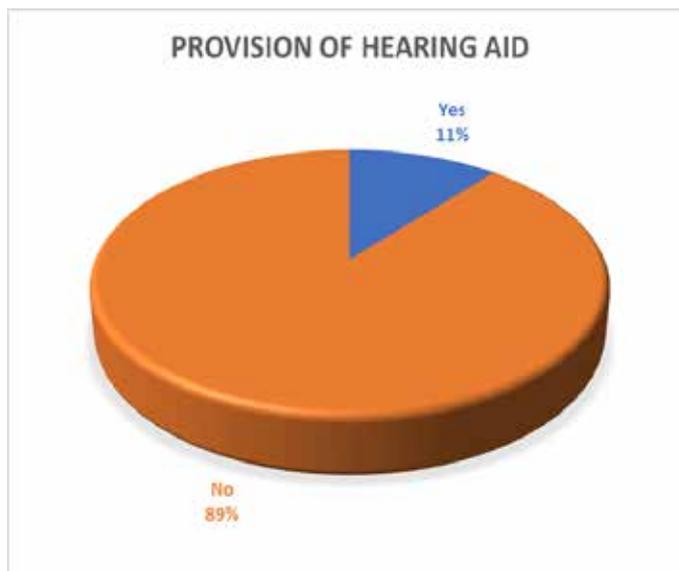
### 3.13 Provision of Assistive Devices/Technologies for Personal Use

The study also assessed if TPs had special initiatives to assist apprentices with disabilities. Specifically, the study sought to learn if TPs provided assistive devices for personal use to learners. These included technologies like hearing aids, wheelchairs, walking frames, recorders and orthotic devices among other.

#### 3.13.1 Hearing Aid

The study found that 89% of the institutions did not provide any hearing aids to its trainees while 11% reported that they provided hearing aids to its trainees.

Figure 34: Provision of Hearing Aids

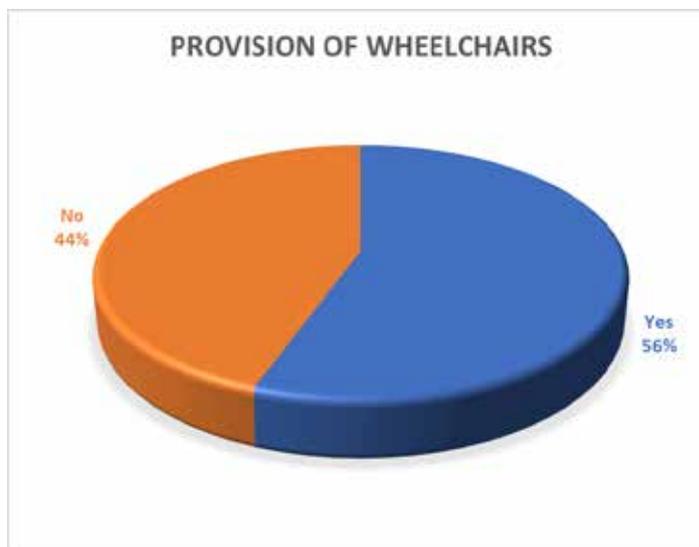


Source: Field Data

#### 3.13.2 Wheelchair

The study also assessed whether the institutions provided wheelchairs to their trainees with physical disability for personal use. The results revealed 44% of the respondents do not provide wheelchairs to its trainees compared to 56% who reported that the institution provided wheelchair to its trainees with disabilities.

Figure 35: Provision of Wheelchairs



Source: Field Data

### 3.13.3 Crutches, walking stick or walking frame

The study also sought information on provision of crutches, walking stick or walking frame to its trainees. Again, the results revealed that 44% of the institutions do not provide crutches, walking stick or walking frame to its trainees compared to 56% who reported to provide crutches, walking stick or walking frame to its trainees.

Figure 36: Provision of Crutches, Walking Stick or Walking Frame

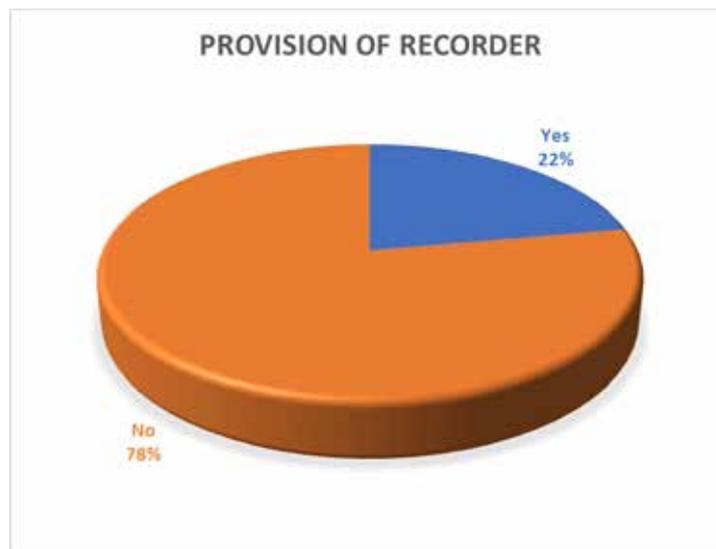


Source: Field Data

### 3.13.4 Recorder

The study also assessed whether the institutions provided recorders to their trainees with disability. The results revealed that 78% of the institutions do not provide recorders to trainees with disabilities. On the other hand, 22% of the TPs reported that they provide recorders to their trainees with disabilities.

Figure 37: Provision of Recorders

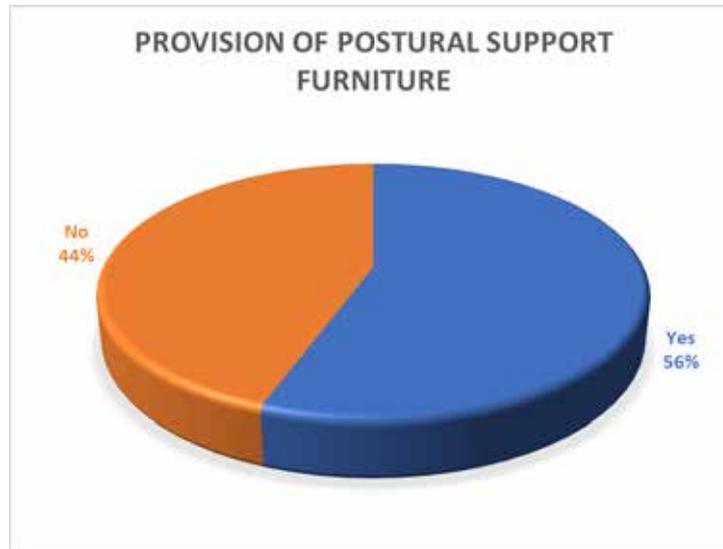


Source: Field Data

### 3.13.5 Postural support furniture

The study also assessed whether the institutions provided postural support furniture such as special chair and modified desk to their trainees with disability. The study found that the majority of TPs (56%) provided postural support furniture compared to 44% that reported that they did not provide postural support furniture to their trainees with disabilities.

Figure 38: Provision of Postural support Furniture

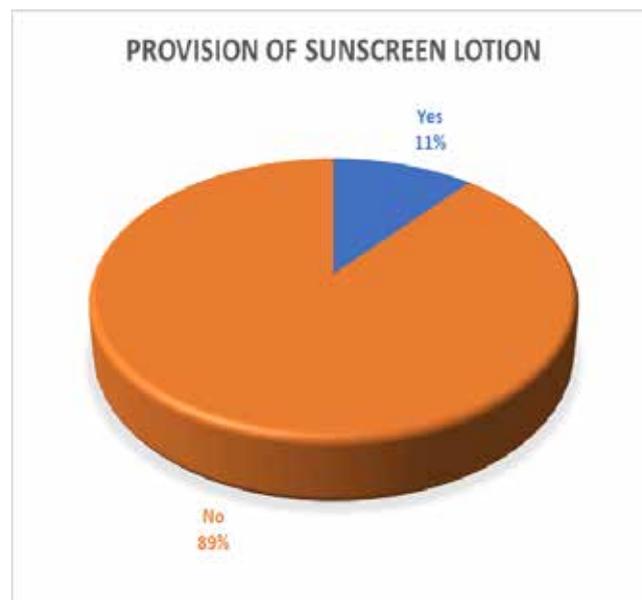


Source: Field Data

### 3.13.6 Sunscreen Lotion

The study also assessed whether TPs supported persons with albinism with sunscreen lotion. The results revealed that 89% of the institutions do not provide sunscreen lotion to their trainees with albinism while 11% of them reported that they provide sunscreen lotion to their trainees with albinism.

Figure 39: Provision of Sunscreen Lotion

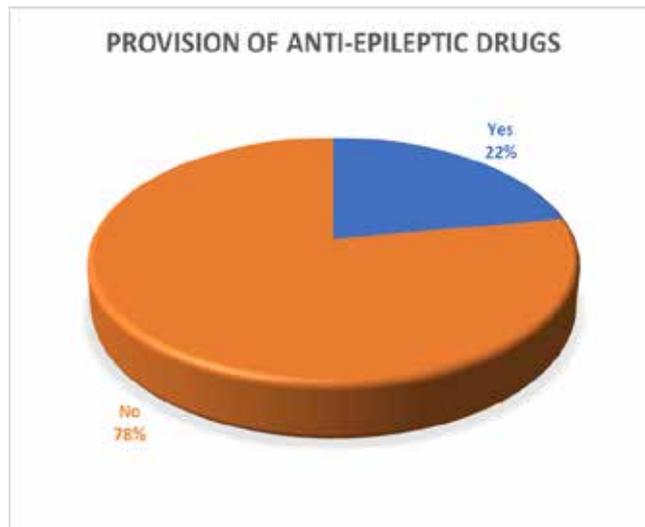


Source: Field Data

### 3.13.7 Anti- Epileptic drugs

The study also assessed whether the institutions provided Anti-Epileptic drugs to their trainees with epilepsy or at least support such learners to access the drugs from nearby health facilities. The results revealed that 78% of the institutions do not provide Anti-Epileptic drugs to their trainees with epilepsy or support them to access the same from nearby health facilities. On the other hand, 22% of the TPs reported that they provided Anti-Epileptic drugs to their trainees with epilepsy or supported them to access the same from nearby health facilities.

Figure 40: Provision of Anti-Epileptic Drugs

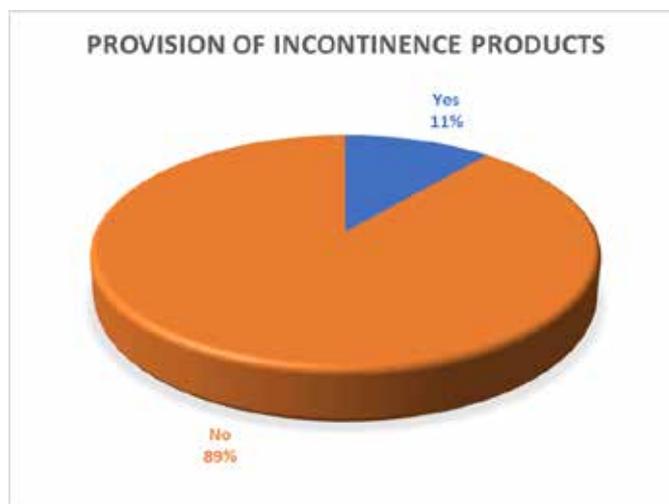


Source: Field Data

### 3.13.8 Incontinence products

The study also assessed whether the institutions provided Incontinence products which are designed to help manage urinary or bowel output like pads, pants, catheters and penile sheaths to their trainees with disability. The results revealed that 89% of the institutions do not provide incontinence products to its trainees compared to 11% that reported that they provide such products to their trainees.

Figure 41: Provision of Incontinence Products

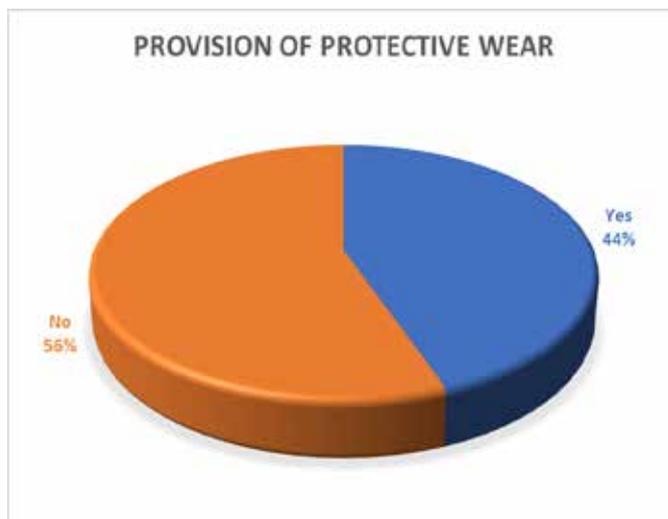


Source: Field Data

### 3.13.9 Protective wear

The study assessed whether the institutions provided protective wear such as hats, sunglasses, gloves, hand and knee pads to their trainees with disability. The results revealed that 56% of the TPs do not provide protective wear such as hats, sunglasses, gloves, hand and knee pads to trainees with disability compared to 44% that reported that the institution provide protective wear to its trainees.

Figure 42: Provision of Protective Wear



Source: Field Data

### 3.14 Disability Inclusion Activities

#### 3.14.1 Disability Awareness Activities

##### 3.14.1.1 Trainee awareness activities

The institutions were also assessed on whether they implemented any disability awareness activities among apprentices in their respective institutions. The study focused on activities implemented in the 12 months preceding the study. It was found that 36% of the TPs conducted trainee disability awareness activities compared to a majority of 64% that did not conduct any trainee disability awareness activities.

Figure 43: Implementation of Trainee Disability Awareness Activities

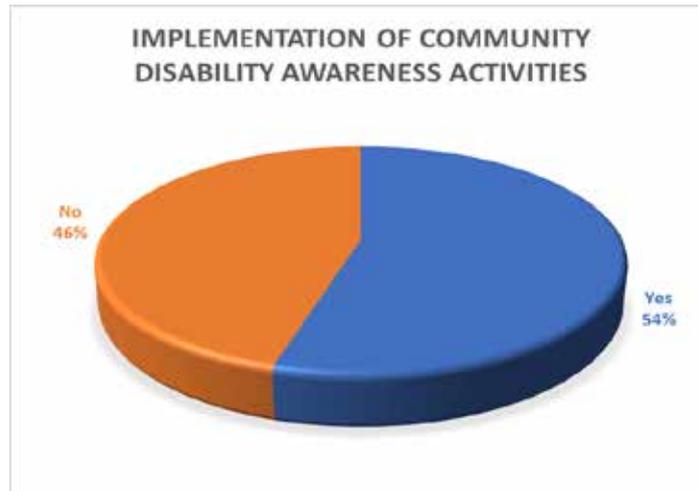


Source: Field Data

### 3.14.1.2 Community awareness activities

The institutions were also assessed on whether they implemented any disability awareness activities among communities surrounding their respective institutions. Similarly, the study focussed on activities implemented in the 12 months preceding the study. It was found that 54% of the TPs conducted trainee disability awareness activities among communities compared to 46% that did not conduct any community disability awareness activities.

Figure 44: Implementation of Community Disability Awareness Activities



Source: Field Data

### 3.14.1.3 Staff Awareness/Training Activities

Similarly, institutions were also assessed on whether they had implemented any Staff Awareness/Training activities. The study results indicated that 54.5% of the respondents reported to have conducted Staff Awareness/Training Activities compared to a minority (45.5%) respondents who reported that the institution had not conducted any Staff Awareness/Training Activities in the past 12 months.

Figure 45: Implementation of Staff Disability Awareness/Training Activities



Source: Field Data

### 3.14.1.4 Safety measures for people with Albinism

The institutions were also assessed on whether they had implemented any Safety measures for trainees with albinism. The study found that 9% of the TPs implemented safety measures for trainees with albinism. A majority of TPs (91%), however, reported that they did not implement any safety measures for trainees with albinism in the past 12 months.

Figure 46: Implementation of Safety Measures for Trainees with Albinism



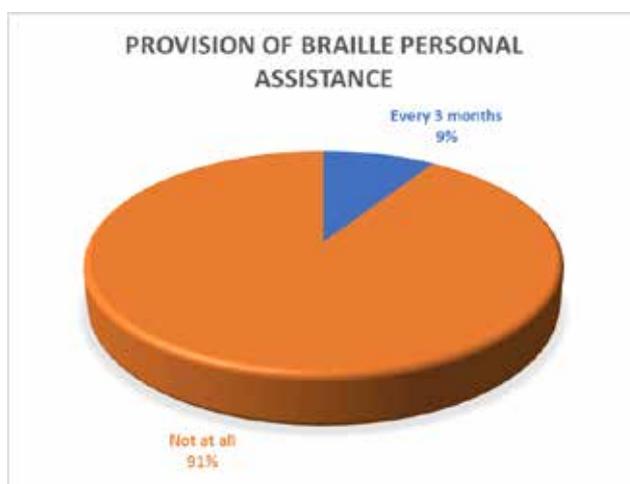
Source: Field Data

### 3.14.2 Personal Support to Trainees with Disabilities

#### 3.14.2.1 Braille Personal Assistant Support

The study assessed if TPs provided any personal assistance to trainees needing assistance on use of braille material and frequency of the assistance to these trainees. The study found that 9% of TPs provided personal assistance on use of braille materials to trainees every 3 months compared to the majority (91%) that reported that personal assistance on use of braille material was not offered.

Figure 47: Provision of Support on Use of Braille Materials

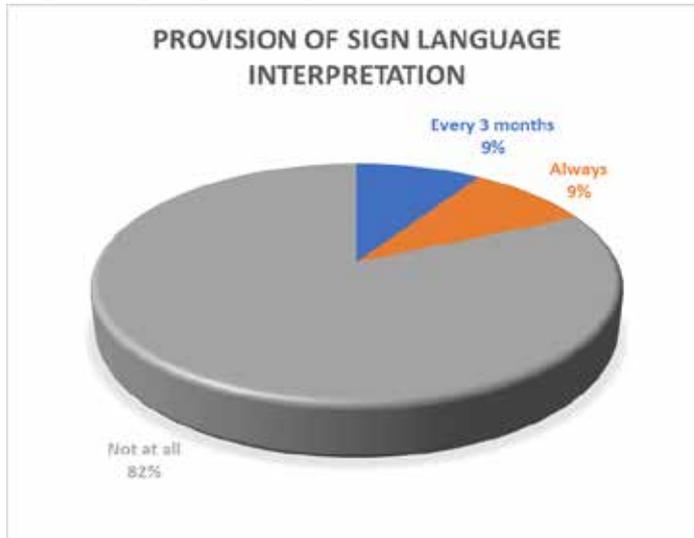


Source: Field Data

### 3.14.2.2 Sign Language Interpretation

The study assessed if TPs provided sign language interpretation services to trainees and its frequency. The study found that 9% of the TPs provided sign language interpretation services to trainees with disability at all times and an additional 9% provided these services once every 3 months. On the other hand, 82% of the TPs did not provide sign language interpretation services at all.

Figure 48: Provision of Sign Language Interpretation



Source: Field Data

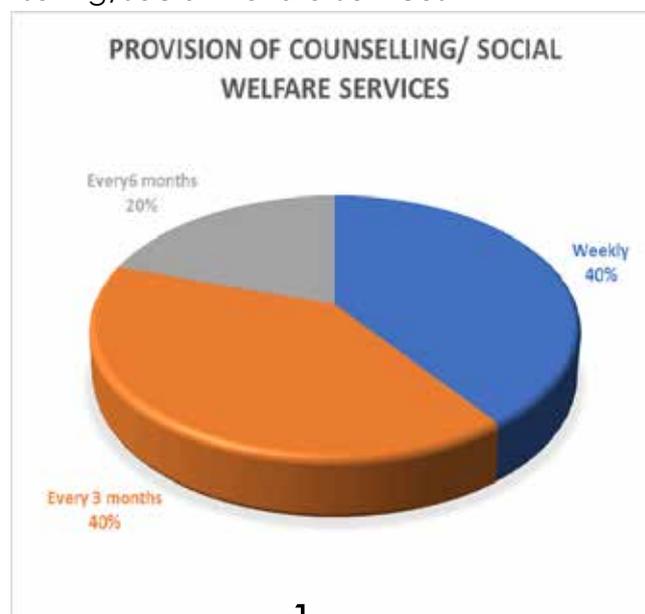
### 3.14.2.3 Note takers

The study assessed if TPs supported trainees with disability with note takers and the frequency of such support. The study found that none of the TPs provided note takers to support trainees with disability that needed such support.

### 3.14.2.4 Counsellors/ Social Welfare

The study also assessed provision of counselling services to trainees with disability and the frequency of the same. It was found that 15% of the TPs offered counselling services weekly and an additional 15% offered counselling services to trainees with disability every 3 months. Furthermore, 8% of TPs reported that counselling services were offered to trainees with disability every 6 months while the majority (62%) reported that they did not offer any counselling services.

Figure 49: Provision of Counselling/Social Welfare Services



Source: Field Data

### **3.14.2.5 Carers**

Lastly, the study looked at whether TPs provided carers to trainees with disability and the frequency of such services. It was found that, none of the TPs provided special carers for trainees with disability.

## CHAPTER 4: CONCLUSIONS AND RECOMMENDATIONS

### 4.1 Overall Conclusions

The report presented results of an assessment of capacity gaps in TEVET providers in the provision of training to trainees with disabilities. The study aimed at profiling existing gaps so as to recommend mechanisms that the TEVET Authority and TEVET Providers can adopt to attract potential trainees with disabilities in TEVET thereby fight social and economic inequalities among this population group. The assessment was conducted at national technical colleges, community technical colleges and community skills development centres. It involved literature review, observation of the learning environment as well as key informant interviews. The assessment thus aimed at identifying gaps in the provision of training to apprentices with disabilities with the view to determine remedial measures where necessary. Findings from the assessment will support the TEVET Authority and other key stakeholders such as Ministry of Labour, TPs, Ministry of Gender, Malawi Council of the Handicapped and Development Partners working in the TEVET sector to engage with evidence on provision of TEVET for attainment of inclusive TEVET at all levels. This will ultimately ensure that TEVET is sustainably provided and in a socially responsible manner as Malawi strives to satisfy the demands of the labour market and improve productivity, ensure maximum efficiency and inclusivity.

From the assessment, it has been noted that although efforts are noticeable in enrolment of persons with disabilities in TEVET, quite a number of areas are falling short to ensure that obstacles that lead to lower access to TEVET by this population group are addressed. As such, these efforts fail to reduce barriers to TEVET and narrow inequality nationally because there are fewer TPs with requisite infrastructure and human resources to effectively provide training to persons with disability. Similarly, there is absence of policy measures that would promote affirmative action that seeks to promote access to TEVET by persons with disability. Notably, substantial efforts and resources are being channelled towards promote access to TEVET among girls which is something that can be replicated towards persons with disability. Furthermore, the study observed that the absence of policy direction has led to disjointed efforts among stakeholders in the sector. As such, the fragmented approach and weak coordination compromise potential achievements that have been registered over the years on ensuring increased access to TEVET by persons with disabilities.

### 4.2 Recommendations

In view of these findings, the study has made the following recommendations:

- xiii. TEVETA and Ministry of Labour should develop a disability inclusion/ mainstreaming policy in TEVET including guidelines on minimum provisions to accommodate trainees with disability.
- xiv. TEVETA should develop a recruitment criterion aimed at promoting the recruitment of persons with disabilities at TP and Policy level. For example, exempting application fees for persons with disability.
- xv. TPs should develop individualized training plans to cater for trainees with disabilities.
- xvi. TPs should develop emergency policy and procedures that incorporates trainees and staff with disabilities.
- xvii. TPs should erect requisite infrastructure and designated structures like parking space, stairs with recommended measurements, handrails and swing doors with signage to improve accessibility by trainees with disabilities.
- xviii. TEVETA and other partners should support institutions with assistive devices to cater for

- learners with disability.
- xix. TPs should rehabilitate WASH facilities to ensure accessibility by trainees with disabilities.
  - xx. Improve infrastructure to include emergency exits that are accessible to trainees with disability.
  - xxi. TEVETA and partners should support TPs with teaching and learning materials for persons with disability like Braille Books, Audio books, Hearing Loops, Assistive Devices for Gripping, Computers with Screen Readers, large, easy-to-read books, braille machinery and protective wear for trainees with disability
  - xxii. TPs should provide postural support furniture to persons with disability and also devise measures to support trainees with albinism with sunscreen lotion.
  - xxiii. TEVETA should conduct disability awareness campaigns among TEVET providers to cover staff, apprentices and the general public.
  - xxiv. TPs should be encouraged to partner district social welfare offices to provide periodical counselling and other social welfare services to apprentices with disability.
  - xxv. TEVETA and partners should support TPs with trainings in special needs education like sign language.
  - xxvi. TEVETA and partners should establish training bursaries for trainees with disabilities.

## ANNEXES

### Annex 1: Study Questionnaire



Technical, Entrepreneurial and Vocational  
Education and Training Authority (TEVETA)  
P/Bag B406, Lilongwe,  
Malawi.

Tel: (+265) 01 775 211/ 01 775 245.

Fax: (+265) 01 774 797.

E-mail: [tevet@tevetamw.com](mailto:tevet@tevetamw.com)

Website: [www.teveta.mw](http://www.teveta.mw)

## GAP ANALYSIS ON INCLUSION OF PERSONS WITH DISABILITIES IN TEVET

### Introduction

Dear Respondent, The Technical, Entrepreneurial, Vocational and Education Training (TEVET) Authority is a regulatory body established in 1999 by an Act of Parliament to regulate, promote and facilitate sustainable provision of quality technical, entrepreneurial and vocational education and training in Malawi. To achieve its mandate, the Authority conducts research which is guided by a comprehensive National TEVET Research Agenda (NTRA) which seeks to aid evidence-based skills development programming. Currently, the Authority is conducting a study that will assess capacity gaps in TEVET providers in the provision of training to trainees with disabilities and recommend mechanisms that the Authority can adopt to attract potential trainees with disabilities in TEVET. In this regard the Authority would like to invite you to participate in this research.

Note: The information provided in this research will be treated as confidential, and the data will be analyzed in aggregate. Should you have any questions please contact Emmanuel Banda on 0995 563 173 [ebanda@tevetamw.com](mailto:ebanda@tevetamw.com).

### Respondent Details

Z1. NAME OF TEVET PROVIDER:

Z2. NAME OF RESPONDENT:

Z3. NAME OF DEPARTMENT:

Z4. POSITION:

Z5. CONTACT NUMBER :

Z6. EMAIL ADRESS:

**Interview Details**

Z7. NAME OF INTERVIEWER:

Z8. DATE OF INTERVIEW: yyyy-mm-dd

**A. TEVET Provider Institution Disability Inclusion/Mainstreaming Policies**

A1. Does the TEVET Provider have a Disability Inclusion/ Mainstreaming Policy, or a Policy/ Strategy that specifies actions for including trainees with disability?

Yes

No

If they have policy/ strategy or any other written documentation, please collect copies that provides actions for including trainees with disability..

What is the date of the most recent update/revision of the Policy?

A2. Does the TEVET Provider have the following deliberate measures in place to promote recruitment and training of persons with disabilities?

Please check all that apply

Individualized Training Plans for trainees with disabilities

Provide Personal Assistant Support/ Service to trainees with disabilities

Recruitment criteria

Continuous and summative assessment

Personal Protective Equipments

Other

Please specify

A3. Does the TEVET Provider emergency policy and procedures specifically consider trainees and staff with disabilities? Yes

No

If they have policy/ strategy or any other written documentation please collect copies and check alignment with provision of the 2006 policy.

## **B. TEVET Provider Institution Enrollment**

B1. Has the TEVET Provider ever registered trainees with disabilities in the previous 5 years? Yes

No

B1.1. Please provide the total number trained in the 2018 Academic Year

B1.2. Please provide the total number trained in the 2019 Academic Year.

B1.3. Please provide the total number trained in the 2020 Academic Year.

B1.4. Please provide the total number trained in the 2021 Academic Year.

B1.5. Please provide the total number trained in the 2022 Academic Year.

B2. How many trainees are enrolled at the institution in the current academic year?

Disaggregate by gender

B3. How many trainees with disabilities are enrolled at the institution?

Disaggregate by gender

B3.1. How many trainees have the following disabilities?

Blindness

Deafness

Physical disability

Epilepsy

Albinism

Intellectual disability

Cerebral Palsy

Deafblindness

Down Syndrome

Psychosocial

