Disability and Social Safety Nets in Developing Countries

The relationship between poverty and disability is two-way: disability increases the risk of poverty and the conditions of poverty increase the risk of disability yet little attention has been given as to whether social safety nets reach persons with disabilities. Social safety nets have a role to play with regard to disability in terms of poverty alleviation, poverty reduction and development, and prevention.

Disability Targeting

One way to reach persons with disabilities is to target safety nets based on disability. This approach would benefit persons with such severe disabilities that they cannot participate in the opportunities generated by growth, inclusive employment and/or education policies. These programs might take a number of forms such as: social insurance schemes, publicly funded transfers (sometimes provided as part of a family allowance), in-kind targeting (assistance devices for example) or livelihood programs. Disability based targeting has a number of advantages: the welfare of persons with disabilities is increased; the welfare of their caretakers, who are predominantly women, is increased; having their own source of income gives the disabled greater bargaining power in the household; and like age or gender, disability is an easily observed characteristic.

That said, persons with disabilities form a heterogeneous group. Assessing their ability to work, especially in the case of invisible or episodic impairments, is therefore difficult and costly and developing countries lack the administrative capacity required to run such programs. Community based targeting could be the answer, but not in communities where persons with disabilities are excluded or stigmatized. Moreover, disability targeting of cash and in-kind transfers is an outcome of a charitable view rather than that of a development perspective designed to empower and involve persons with disabilities. These transfers have the further disadvantage of being a disincentive to work and may displace private transfers. Self-targeting is a promising alternative: eligibility tests are not required and goods and services can be provided which are of no use to persons without disabilities thereby ensuring successful targeting. The assistance devices provided can remove barriers to participation in society and employment prospects thus presenting a rope out of poverty.

Disability Inclusion

A more feasible solution may be to ensure that mainstream social safety nets are “disability inclusive”. How can mainstream social safety nets be designed, implemented and evaluated so that persons with disabilities are not excluded? The table below describes this process. Identification of the physical, social and communication barriers that prevent the inclusion of persons with disabilities is critical. For instance, do the attitudes of social safety net staff prevent or discourage access to benefits for persons with disabilities?

In addition, it is necessary to identify any of the program’s eligibility and application requirements that may indirectly contribute to exclude persons with disabilities. For example, the cost to apply for benefits may be high for persons with mobility limitations if they must apply in person.

At the program evaluation stage, it is impossible to over-emphasize the importance of collecting adequate statistics on disability in order to evaluate a program’s processes and impact on persons with and without disabilities. Such statistics would also enable monitoring of the effectiveness of new disability inclusion measures.

A Framework for the Assessment of Disability Inclusion in Social Safety Nets

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<th>Several Dimensions</th>
<th>Relevant Analytical Tools</th>
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| 1. Program Implementaion  
1.a Physical Accessibility  
• accessibility of built environment, including SSN facilities and transport system.  
• can social workers visit persons with disabilities?  
• can a family representative apply, enroll and receive benefits on behalf of a person with disability?  
• are there any geographical asymmetries in program coverage (by region, urban vs. rural)?  
1.b Communication and Social Accessibility  
• is program information available in different formats (e.g., Braille)?  
• how does the program deal with illiteracy among potential and actual beneficiaries?  
• is program information delivered through different channels besides the government (media, community)?  
• do the attitudes of SSN staff prevent or discourage access to benefits for persons with disabilities?  
• do some of the SSN staff have disabilities?  
| Direct observation and review of program’s manual of operation. Administrative data on beneficiaries, if available. Analysis of legislative framework.  
Review of existing information materials; semi-structured interviews and focus group discussion with current and potential beneficiaries with disabilities and with program staff. |
| 2. Program Design  
• is the cost to apply or collect benefits high for persons with disabilities?  
• are some of the eligibility conditions difficult to meet for persons with disabilities?  
| Semi-structured interviews and focus group discussion with current and potential beneficiaries with disabilities. Desk review and analysis. |
| 3. Program Evaluation  
3.a Program Coverage  
• what is the proportion of eligible beneficiaries with disabilities that participate in the program?  
• what are the profiles of participants with disabilities compared to non-participant eligible beneficiaries with disabilities (e.g., demographic characteristics, type of impairment)?  
3.b Program’s Impact on Poverty  
• what poverty alleviation and reduction impact does the program have on persons with disabilities?  
3.c Program’s Impact on Inequality  
• how does this poverty alleviation and reduction impact compare to the one that is found for persons without disabilities?  
| Household data collection and analysis.  
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