

Social Protection: Financing Disability-inclusive Social Protection Systems

September 2023

Inclusive social protection for all

Summary

Social protection plays a pivotal role in fostering the social and economic inclusion of persons with disabilities in their families, communities, and societies. Extending both the coverage and adequacy of inclusive and comprehensive social protection is essential for achieving the Sustainable Development Goals (SDGs) and the Leave No One Behind Agenda, particularly Goal 1 (ending poverty), Goal 3 (ensuring healthy lives), Goal 5 (gender equality), Goal 8 (promoting decent work) and Goal 10 (reducing inequality). While countries are increasingly focused on inclusivity, gaps persist between persons with disabilities and those without disabilities. These gaps are exacerbated by additional risks associated with age, gender, wealth quintile, and place of residence, among other dimensions.

Following the 2018 [Joint Statement: Towards Inclusive Social Protection Systems Supporting the Full and Effective Participation of Persons with Disabilities](#),

the International Labour Organization (ILO) and United Nations Children's Fund (UNICEF) developed a joint conceptual framework and guidance on disability-inclusive social protection funded by the UN Partnership on the Rights of Persons with Disabilities (UNPRPD) and later co-funded by the UNICEF-Norway Disability Partnership. Of critical importance to the framework is the need to design social protection systems which provide not only income security but also compensate for the additional costs associated with disability, including healthcare, and improve access to services across the lifecycle.

This Brief highlights the efforts of Cambodia, Kyrgyzstan, and Senegal to extend social protection for persons with disabilities and address their needs with the support of the Social Protection and Public Financial Management (SP&PFM) programme funded by the European Union.

Main lessons learned

- ▶ Social protection is a human right, and it is also critical for promoting the full and equal participation of persons with disabilities in all aspects of life. But a number of barriers – such as lack of political will to build strong and inclusive social protection systems; a lack of data on disability prevalence and the diverse needs of persons with disabilities, resulting in underinvestment; discriminatory policies and legal frameworks; inaccessible environments and infrastructure; and insufficient funding – continue to prevent persons with disabilities from accessing social protection benefits and services.
- ▶ Persons with disabilities are not a homogenous group. Their needs and the barriers they face in accessing social protection and other services will vary based on their stage of life, place of residence, gender, wealth quintile, among other personal characteristics. The involvement of persons with disabilities and their representative organizations in the design, implementation, and evaluation of social protection programmes and policies is vital to ensure their needs are met and should be non-negotiable.
- ▶ Social protection is an investment which delivers substantial returns both economically and socially. Sustainable financing for systems that are disability-inclusive and transformative should be considered as integral not additional to adequate and comprehensive social protection.
- ▶ Within contexts of limited fiscal space, governments and partners can take progressive steps towards the realisation of inclusive social protection for all, providing both inclusive mainstream social protection schemes as well as disability-specific benefits and services. Multi-stakeholder partnership and representation in the governance of social protection systems are needed to increase fiscal space and budget allocation for inclusive social protection.

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The Social Protection and Public Finance Management Programme

Guided by the Sustainable Development Goals and aligned to the Convention on the Rights of the Child, Convention on the Rights of Persons with Disabilities and Social Protection Floors Recommendation, 2012 (No. 202), the SP&PFM Programme supports governments in designing, implementing and monitoring effective disability-inclusive social protection systems and programmes while ensuring its financial sustainability. By guaranteeing that persons with disabilities have income security, that their disability-related needs and extra costs are met and that they have effective access to health care services, the social protection systems can significantly promote their participation in the labour market and in society at large.

The SP&PFM Programme promotes policy reforms that encourage an adequate and flexible combination of income security and disability-related support for the economic empowerment of persons with disabilities. It created synergies with the UN Partnership on the Rights of Persons with Disabilities (UN PRPD) financed project “Towards inclusive social protection systems for participation of persons with disabilities”, implemented by the ILO and UNICEF in collaboration with the International Disability Alliance.

Context

Growing evidence shows that persons with disabilities have unequal access to services and employment, and face hardships of daily living, resulting in higher rates of poverty and exclusion. While disability is not always associated with poorer socioeconomic outcomes, discriminatory attitudes, laws, policies, and programmes, along with the inaccessible environments and information that people with disabilities encounter, create significant barriers for their participation, which can lower overall well-being. Recent disability data has shown that:

- Children with disabilities are 49 per cent more likely to have never attended school than those without disabilities and are significantly less likely to have foundational numeracy and literacy skills.ⁱ
- Only 54 per cent of persons with disabilities are literate, compared to 77 per cent of persons without disabilities.ⁱⁱ
- Persons with disabilities are more than three times more likely to be unable to get health care when they need it compared to persons without disabilities.ⁱⁱⁱ

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- Levels of employment for persons with disabilities are consistently lower than the average, and they are more likely to be working in the informal economy where earnings tend to be lower.^{iv}
- Women with disabilities are three times more likely to be unable to read, three times more likely to have unmet health care needs, and two times less likely to be employed compared to men without disabilities.^v
- Up to twice as many persons with disabilities live under the poverty line compared to persons without disabilities.^{vi} Poverty is disproportionately higher among women and girls with disabilities.^{vii}
- More than 2.5 billion people who need assistive technology do not have access to it. There are wide disparities in terms of access to assistive technology, with estimated access (i.e. the proportion of people with their need met among those with a need) varying from 3 per cent to 90 per cent^{viii}.

Persons with disabilities incur additional costs directly related to their impairment, such as spending on assistive devices, human assistance, and (re)habilitation services. These additional expenditures are often accompanied by greater spending on basic goods and services that all people use but are of greater importance for persons with disabilities, for

example healthcare and transportation. In many countries where support services are lacking, family members fill the gap, often at the expense of paid labour. Persons with disabilities and their families not only have to spend more to achieve the same living standards and participation as those without disabilities, but they also tend to earn less income due to barriers in employment and opportunity costs incurred by family members providing support¹. The additional costs associated with lost earnings trap persons with disabilities and their families in poverty. To counter this, inclusive and comprehensive social protection systems that provide a range of supports to meet the diverse needs of persons with disabilities and their families are crucial for them to live free from poverty, sustainably.

Only approximately one third of persons with severe disabilities receive disability benefit.^{ix} There are vast differences between countries in terms of the percentage of persons with disabilities reached: coverage in high-income countries is 86 per cent compared with 41 per cent in upper middle-income countries, 11 per cent in lower middle-income countries, and just 9 per cent in low-income countries.^x Even where disability benefits exist, the adequacy of these benefits is often insufficient to meet basic needs, let alone cover extra disability-related costs. The inadequacy of benefits undermines the well-being and ability of persons with disabilities to fully participate in society.

1 For greater discussion on the extra costs of disabilities, see Mont and Cote (2020) [Considering the Disability related Extra Costs in Social Protection](#).

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Disability-inclusive Social Protection

The objective of social protection is “preventing and protecting all people against poverty, vulnerability and social exclusion throughout their lifecycles, with a particular emphasis towards vulnerable groups.”² Given the link between disability and poverty, it is vital that social protection systems are designed in a disability-inclusive manner that accounts for the specific needs and vulnerabilities of persons with disabilities. Social protection for persons with disabilities should not only provide income security to prevent or mitigate poverty but also support their full and effective participation in society by covering disability-related extra costs. This requires comprehensive support to address the changing needs and barriers that persons with disabilities face across the lifecycle.

The Joint Statement on Inclusive Social Protection Systems for Persons with Disabilities outlines the following commitments to support the inclusion of persons with disabilities through social protection:

- Ensure income security that enables access to necessary goods and services.
- Ensure coverage of disability-related costs and facilitate access to required support, including services and assistive devices.
- Ensure effective access to healthcare including disability-related medical care and rehabilitation, as well as sexual and reproductive health and HIV services.
- Improve access to inclusive services across the lifecycle, such as childcare, education, vocational training, and support with employment and livelihood generation, including return to work programmes.^{xi}

Implementing disability-inclusive social protection systems requires a twin-track approach: providing support to persons with disabilities through mainstream schemes, such as pensions and child benefits, and providing disability-specific supports, such as disability benefits or personal assistance.

2 This is the definition adopted by the Social Protection Interagency Cooperation Board (SPIAC-B) which is composed of 25 intergovernmental agencies and 10 governmental bodies, with 11 civil society organizations acting as observers.

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Who are the persons with disabilities and what levels of support do they need?

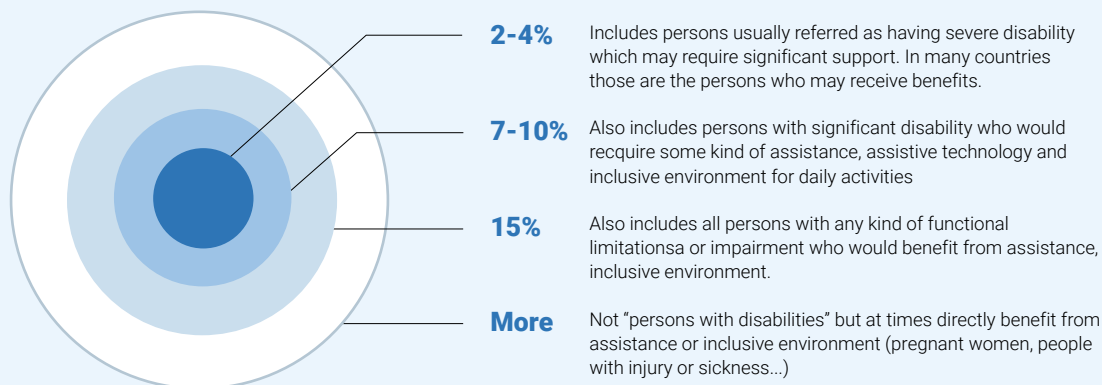
The Convention on the Rights of Persons with Disabilities describes disability as an evolving concept, resulting from the interaction between persons with impairments and attitudinal, institutional, and environmental barriers that may hinder their full and effective participation on an equal basis with others.

An estimated 16 per cent of the world's population (or 1.3 billion people) live with some form of disability, with higher prevalence among older persons and women, while 142 million people experience significant impairments, face greater barriers and have higher support needs.

Persons with disabilities are diverse. They include children, working age adults and older adults, people of all genders, and those with intellectual, psychosocial, sensorial, or physical impairment(s). They face a range of barriers related to prejudice and low expectations, discriminatory regulations, exclusion or segregation in access to services, such as education or in the labour market, beliefs that may lead to harmful practices, lack of accessibility to

the built environment, transport, information, and communication.

The heterogeneity of persons with disabilities means that not all persons with disabilities require the same level of social protection support. All persons with any kind of functional limitation will benefit from inclusive social services, including health care, (re)habilitation, assistive technology, and economic empowerment programmes and inclusive environments. Persons with more moderate to significant support needs may require, in addition to the previously mentioned interventions, access to community care and support services (e.g., personal assistance, respite care, guides or interpreters) and an adequate disability allowance, compatible with work, to compensate for disability-related costs. For persons with very high support needs, who may be unable to work, the provision of income security benefits, in addition to the previously mentioned areas, is required. The distinction between level of support required is of critical importance for planning and budgeting social protection programmes and systems.



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Financing Disability-Inclusive Social Protection

While recent global estimates consider that a basic universal disability benefit would require an average investment of 0.5 per cent of GDP in low- and middle-income countries,^{xii} most countries fall far below this investment. Increasing the level of financing for disability-inclusive social protection requires the following:

- **Getting the data right:** Collecting robust data on disability prevalence through census data, national surveys and administrative systems is critical. In addition, replacing disability assessments that are confined to medical diagnosis with more nuanced assessments that capture support needs and requirements is essential to ensure effective planning, costing, and targeting interventions.
- **Making the most of existing expenditures:** Most countries have existing social protection benefits and services. In many cases these will not be disability specific, but through adaptations (such as prioritizing persons with disabilities, or using public works schemes to provide community care and support) the existing social protection systems can start to be more inclusive.
- **Diversifying sources of financing:** Contributory schemes have limited coverage and therefore need to be complemented by donor or tax-financed schemes. Non-contributory cash transfers, subsidies and concessions can help achieve income security and defray the extra costs of disability, while universal health coverage and social protection can support access to assistive devices and medical services.
- **Progressively developing and implementing disability-specific support:** Even when mainstream schemes are designed to be more inclusive, disability-specific support will still be required. Such schemes can be progressively developed and introduced, for instance, child disability benefits or disability benefits for people with high support needs can be introduced first, with other schemes added later.
- **Meaningfully engaging with organizations of persons with disabilities (OPD):** Persons with disabilities and their representative organizations need to be continuously engaged in all stages of policy making, implementation and monitoring. People with lived experiences of disability are better able to identify the most pressing issues affecting their lives, and can offer suggestions on how systems and benefits should be designed to best meet these needs. Progressive implementation takes time and requires sustained advocacy which can only be achieved through ownership of OPD and persons with disabilities.

The SP&PFM programme supports countries to ensure disability inclusion throughout all phases of social protection policy making and implementation, including outreach and communication, targeting and registration, and benefits design and delivery, among other aspects. The programme's approach is to improve policy making and planning by gathering accurate data on disability prevalence and the specific needs of persons with disabilities. Through this evidence generation and technical advice, SP&PFM works to ensure that national social protection systems and programmes are better able to respond to the specific needs that different persons with disabilities may have through

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the formulation of social protection policies and legal frameworks, programme design (including linkages to information services) and development of inclusive services.

The SP&PFM programme also focuses on breaking the cycle of stigma and discrimination that keeps persons with disabilities on the periphery of society – in poverty, without education, livelihoods and decent work – ultimately blocking their full and equal participation in all spheres of life. This entails transforming how persons with disabilities are viewed in society – from being perceived as individuals who need charity to being seen as persons with rights, capabilities and autonomy. This requires removing the policy and programme barriers

that make benefits and services inaccessible and make social protection incompatible with decent work. Instead, social protection benefits and services should enable persons with disabilities, to varying degrees, to work and participate in meaningful ways.

This Brief spotlights the programme's approach in three countries which have attempted to address this gap. The Cambodia example demonstrates the importance of 'getting the data right', Kyrgyzstan's experience showcases efforts to progressively develop disability-specific support, and the work in Senegal highlights the importance of meaningful engagement with OPD as part of the reform process.

Towards a Comprehensive Social Protection System

Disability Identification in Cambodia

It is estimated that there are close to 750,000 people with disabilities living in Cambodia³. Yet coverage of the routine disability benefit remains relatively low, reaching only 16,800 persons with disabilities in 2022.

The COVID-19 pandemic affirmed the need to reduce fragmentation and implement a harmonized social protection system in Cambodia. In response, the Family Package⁴ – a comprehensive and integrated social assistance programme – was developed to support poor and vulnerable families across the lifecycle. The operational details of the Family Package are currently being finalized in preparation for the roll-out, while the

actual value of benefits under the Family Package is under consideration by the Government of Cambodia.

As articulated in the National Social Protection Policy Framework (2016-2025), the Family Package operationalizes Cambodia's vision for an inclusive social protection system that builds human capabilities and resilience and accelerates social equity.

Critical to the roll-out of the Family Package and its Cash Transfer for Persons with Disabilities is the harmonization of fragmented disability identification tools and mechanisms to be more inclusive. This harmonization

3 According to the 2019 Census, the disability prevalence for Cambodia is 4.9 per cent.

4 The Family Package is comprised of four lifecycle benefits: Cash Transfer for Pregnant Women and Young Children, Cash Transfer for Primary and Secondary Students, Cash Transfer for Persons with Disabilities, and Cash Transfer for Older Adults. Households can receive more than one benefit if they qualify.

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is expected to contribute to improved targeting of disability benefits and ensure that the benefit values are adjusted to the needs of persons with disabilities. Improved accuracy of the data gathered through the new procedure is also anticipated to support improved planning and budgeting.

Role of the SP&PFM programme

The SP&PFM programme supported the implementation of the COVID-19 cash transfer, the delivery of the current disability allowance and planning of the Family Package roll-out by developing the national disability identification mechanism and the related the Disability Management Information System (DMIS). The SP&PFM programme also supported building the capacity of 4,900 commune workers who are responsible for conducting disability interviews across all 1,652 communes in Cambodia which is essential for a successful roll-out of the disability identification mechanism.

The revised assessment mechanism considers the functional limitations of persons with disabilities as well as environmental barriers. The new disability assessment procedure is conducted at the commune level using a mobile application. The digital data from the assessment is then verified at the provincial level before going to the Ministry of Social Affairs, Veterans and Youth for approval. Once the result from the assessment is approved, the person is included in the DMIS and is issued a disability identification card.

Between January 2021 and February 2023, 254,000 persons with disabilities were registered in the DMIS. This is equivalent to 1.5 per cent of the population. The DMIS is linked to the Identification of Poor Households

targeting mechanism⁵ supporting the delivery of cash transfer programmes in Cambodia, including the future Family Package. This integration allows for seamless identification of those who qualify for the Cash Transfer for Persons with Disabilities. As of February 2023, have been included in national cash transfer programmes. Those who do not qualify for cash benefits are able to access social care and assistance and labour activation programmes through the disability card.

Increasing Persons with Disabilities' Labour Market Participation in Kyrgyzstan

The social protection system in Kyrgyzstan is characterised by several social protection programmes that aim to address risks across the lifecycle, including contributory and non-contributory disability benefits for children and adults, as well as a caregiver allowance for family members who provide full-time support to persons with disabilities. However, the ability of these programmes to promote the full social and economic participation of persons with disabilities is constrained by design and financing challenges.

Workers contributing to the Social Fund are eligible for disability pensions if they meet minimum requirements regarding contribution periods. The level of benefit corresponds to the assessed⁶ level of disability, of which there are three: Group I (significant functional limitation that requires full-time care), Group II (significant functional limitation with 80 per cent loss of mobility), and Group III (partial disability with some

5 The Identification of Poor Households (commonly referred to as IDPoor) serves as the social registry of poor and vulnerable households in Cambodia.

6 The current disability assessment system is based on the medical model, meaning that the assessment process does not identify the specific needs of each individual person with disabilities.

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loss in working capacity).^{xiii} Recipients of the disability pension may receive a constant-attendance supplement if they need full-time support to perform daily tasks.

Adults with disabilities not eligible for disability pensions and children with disabilities may receive support through the non-contributory Monthly Social Benefit. The average disability benefit is set at 80 per cent of the minimum subsistence level, which is insufficient to meet the cost of basic needs, let alone disability-related needs.

According to the Labour Code, persons with disabilities who are in Group I cannot be employed, while those in Groups II and III can be employed. However, the Labour Code does not contain provisions to assist employers in providing reasonable accommodation in the workplace, nor tax breaks or wage subsidies to encourage them to employ persons with disabilities. Although the Labour Code stipulates that 5 per cent of employment positions⁷ should be reserved for persons with disabilities, an enforcement mechanism to monitor compliance is lacking. This means that fines for non-compliance are not levied, undermining a potential funding stream for accommodation and inclusion measures. Additionally Public Employment Services, such as employment counselling, job search and other activation measures, are extremely limited, underfunded⁸ and are not inclusive. Taken together, the social protection and labour system does not encourage employment of persons with disabilities. As such, more than 80 per cent of persons with disabilities in Kyrgyzstan are jobless.

Role of the SP&PFM programme

With the support of SP&PFM, investments were made to build the capacity of the Ministry of Labour, Social Security and Migration to design employment and social protection programmes to better support persons with disabilities to participate in the labour market. This included piloting a new programme with Public Employment Services, where persons with disabilities are employed as employment counsellors to encourage and support persons with disabilities to seek formal employment. Technical advice was also provided to improve the quota system for persons with disabilities, including creating an enforcement mechanism to improve compliance monitoring and collection of fines.

Role of Organisations of Persons with Disabilities in Advancing the Equal Opportunity Card in Senegal

In 2010, the Government of Senegal adopted the national Disability Act to guide the country's efforts to reduce discrimination against persons with disabilities and barriers that prevent their full and equal participation in society. Article III obliges the government to provide an equal opportunity card to persons with disabilities to facilitate their access to services. The Carte d'Égalité des Chances (CEC) was launched in 2012 and covers 67,000 persons with disabilities^{xiv}; this is less than 10 per cent of persons with disabilities⁹ in Senegal. One of the objectives of the National Social

7 While the quotas are mandatory for state-run enterprises, they are optional for the private sector.

8 While the Government of Senegal invests 10.7 per cent of GDP in social protection, the vast majority goes to funding old age pensions. Only 0.2 per cent of social protection spending is allocated to active labour market programmes.

9 According to the 2013 Census, disability prevalence in Senegal was estimated to be 5.95 per cent, or roughly 800,000 people.

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Protection Strategy (2017-2035) is to scale up the CEC to reach 90 per cent of eligible individuals by 2025.

The CEC is the main conduit through which the Government of Senegal can provide effective support to persons with disabilities. The CEC facilitates persons with disabilities to access eight services: social assistance such as the Family Allowance Programme, healthcare including the Universal Health Coverage Plan, education, vocational training, employment, transportation, personal support and assistive devices. It is also the main mechanism for gathering data on persons with disabilities for planning and costing programme interventions.

Role of the SP&PFM programme

With the support of SP&PFM, a comprehensive review of Senegal's social protection systems was undertaken. The review identified several challenges related to the implementation of the CEC, including low coverage, insufficient and unstable funding sources, fragmented coordination between implementing ministries, and lack of effective service delivery. For example, less than half of those registered for the CEC are also enrolled in the Universal Health Coverage plan, and those who were enrolled experienced significant challenges

in accessing funds, as payments from the State to the insurer regularly failed to materialize.^{xv}

In line with the principle of “nothing for us, without us”, the programme partnered with the Senegalese Federation of Associations of People with Disabilities (FSAPH) to advocate for improving and extending the coverage of the CEC. The FSAPH is an umbrella organization that represents various OPD in Senegal, and has led advocacy around the implementation and improvement of the CEC over the past two decades. Through the programme, the FSAPH coalition undertook a series of advocacy activities to promote the improvement of the CEC in three core areas:

1. Scaling up the CEC programme nationally;
2. Involving local authorities in the promotion of social protection;
3. Encouraging the private sector, namely enterprises, to understand their role in social responsibility.

As part of its advocacy efforts, the coalition also worked with securing commitments from candidates in the 2022 local election to support the extension of the CEC.

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Conclusion

With only one third of persons with severe disabilities receiving disability benefits, the current level of financing is not sufficient to provide disability-inclusive social protection. While the ability to expand fiscal space to implement disability social protection may be limited, this brief highlights five actions for increasing disability-inclusive social protection financing. These include:

1. **Getting the data right:** Understanding how many people are living with functional impairments and their diverse needs is a requisite precondition for planning and budgeting for disability-inclusive social protection.
2. **Making the most of existing expenditures:** Adapting existing programmes through tweaks to programme design and implementation can be a cost-effective way to ensure social protection programmes are more inclusive.
3. **Diversifying sources of financing:** Disability-inclusive social protection requires both contributory and non-contributory sources of financing to ensure universal coverage of persons with disabilities. Given the extra costs associated with disability, it also requires multisectoral commitments across line ministries., Effective advocacy with line ministries to invest in disability services and budget coordination are key to ensuring disability-inclusive social protection which delivers an integrated package of services across sectors.
4. **Progressively developing and implementing disability-specific support:** Achieving comprehensive and universal support for persons with disabilities may not be feasible in the short-term. However, progressively expanding coverage can gradually build a foundation for an inclusive social protection system. This may include introducing cash transfers for persons with high support needs before gradually adding additional benefits in line with growing tax revenues.
5. **Meaningfully engaging with persons with disabilities and their representative organisations:** OPD are crucial partners when it comes to advocacy for progressive implementation of disability inclusive social protection. People with disabilities are experts in the lived experience of disability and therefore are best placed to identify the most pressing issues and offer suggestions on how systems and benefits should be designed to best meet these needs.

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