No One Left Behind: A review of social protection and disability at the World Bank

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The 2030 Agenda for Sustainable Development cites poverty eradication as both the ‘greatest global challenge’ and an ‘indispensable requirement’ for sustainable development (UN, 2015). Unfortunately, the path between discourse and practice is rarely clear. This is especially true for the estimated one billion people with disabilities around the globe who face barriers and challenges to inclusion in mainstream development efforts; and for whom disability-specific projects and interventions are far and few between. This paper responds to the lack of available data focused on tracking the inclusion of persons with disabilities in mainstream poverty reduction efforts. It reports on work by a multidisciplinary research team in developing and piloting a methodology measuring disability inclusive investments in the World Bank’s active portfolio. The paper focuses specifically on the World Bank’s social protection portfolio, aligned with SDG 1 (End Poverty), and outlines a methodology for analysing project-level documentation, using key word searches, and codes aligned with the Sustainable Development Goals to determine the inclusion of persons with disabilities. Findings indicate that only a small percentage, 5%, of the World Bank’s active social protection portfolio explicitly include persons with disabilities as target beneficiaries. It goes on to argue that this dearth in disability inclusive development efforts exposes a vital need to systematically include the needs of this population in the planning for, provision of, and assessment of development assistance efforts. The paper concludes with a set of recommendations for ensuring future projects are inclusive from program development and implementation through to assessment of outcomes.

Keywords: Disability; SDGs; World Bank; Social Protection; Development

Introduction

The United Nations 2030 agenda for sustainable development in seeking to ‘realize the human rights of all’ (UN, 2015) has coined the phrase ‘no one left behind’ as a mantra for the future of inclusive development. For an estimated three-quarters of the billion persons with disabilities, those living in the global South, the promise of inclusion goes beyond positive
sentiment, serving instead as a coveted invitation to the global human rights discourse.

This paper provides an overview of the emergence of disability inclusive development in response to the UN Convention on the Rights of Persons with Disabilities (CRPD) (UN, 2007) and the 2030 Agenda, and highlights many of the challenges associated with the development and implementation of policies and programs equipped to respond to the needs of the disability community. Using data and analysis from Karr et al.’s study (2017), that evaluated the disability inclusivity of the World Bank’s active portfolio, researchers focus this article on access to and impact of social protection programming for persons with disabilities. A critical review of the findings focuses on aligning the Bank’s public priorities and rhetoric with the global agenda and compares institutional intentions with actual investment, concluding with recommendations and strategies for improving social and economic inclusion of persons with disabilities.

Disability Inclusive Development

Disability inclusive development (DID) is a relatively new concept. In the ten years since the adoption of the CRPD, increased attention has been paid to ensuring that international development programs are inclusive of all people. The CRPD includes eight underlying principles focused on: respect and autonomy; non-discrimination; full and effective participation; respect for difference and diversity, equality of both opportunity and gender; accessibility and a focus on the evolving capacities and identity of children with disabilities. The CRPD institutionalised a global movement towards including persons with disabilities in all aspects of community living and governance, and has served as the foundation for the evolution of inclusive policies, programs and practices around the world.

As of January 2017, the Convention, which outlines global protections for persons with disabilities, had 160 Member State signatories (out of 193 eligible) and 172 ratifications/accessions (UN 2017). While the countries and regional integration organisations that have adopted the CRPD have shown a cursory commitment to enhancing the safety, well-being and inclusion of their citizens with disabilities that may have been historically absent, ensuring that rights are protected and programs are put into action remains a global challenge. Despite CRPD Article 32’s mandate that ‘international cooperation, including international development programs are inclusive and accessible to persons with disabilities’ (UNCRPD 2007), and regardless of the recognition that including diverse groups improves the likelihood that societies will meet their development goals and be more equitable, participatory and democratic (USAID 2016), persons with disabilities consistently exist among the most marginalized. Equitable representation in development efforts also remains elusive. A critical example of this exclusion can be seen in the 2000 Millennium Development Goals, which despite the self-proclaimed commitment to addressing issues such
as extreme poverty, exclusion, and accessing basic human rights, failed to include any mention of disability.

Through the sustained efforts of the disability community, the 2030 Agenda for Sustainable Development (UN, 2015) has proven far more inclusive of disability. In its preamble, the UN declares a commitment to ensuring that ‘all human beings can fulfill their potential in dignity and equality and in a healthy environment’. The explicit inclusion of disability among the Agenda’s goals and targets, positions individuals with disabilities not only as beneficiaries of development efforts, but also provides a foundation for active participation in the creation of programming aimed at improving access and opportunity. In addition, the mention of disability throughout the SDGs, lays the groundwork for disability to be more widely recognized as a cross-cutting development issue. This is a key shift in understanding for development actors who historically treated disability as a special health issue (Palmer, 2013). Yet, despite this progress, disability remains an emerging area of focus and research, and a need exists to develop methods for collating and evaluating development efforts for persons with disabilities (Banks et al. 2016, Karr 2017).

Poverty and Disability

In literature on the relationship between disability and poverty, Groce et al. (2011) states that 1 in 5 of the World’s poorest people are persons with disabilities. Grech (2014) makes reference to the links between poverty and disability often described as a ‘mutually reinforcing cycle’ and data show that persons with disabilities are on average, as a group, more likely to encounter barriers to education, health and employment, resulting in increased instances of extreme poverty (World Bank 2016). The correlation between disability and poverty is clearly articulated throughout the literature (Banks et. al 2016; Grech, 2014; Groce et al. 2011; Kuper, 2016; Palmer 2013; Schneider 2011) as well as in the World Bank’s description of their work in this sector:

Poverty may increase the risk of disability through malnutrition, inadequate access to education and health care, unsafe working conditions, polluted environment, and lack of access to safe water and sanitation. Disability may increase the risk of poverty, through lack of employment and education opportunities, lower wages, and increased cost of living with a disability (World Bank, n.d.).

In a 2011 World Bank publication entitled ‘Disability and Poverty in Developing Countries: A Snapshot from the World Health Survey’, the authors describe the relationship between disability and poverty as ‘dynamic and intricately linked phenomena’ (Mitra et al. 2011: i). The same 2011 study aimed to fill gaps in the research by evaluating the economic and social situations of working-age persons with disabilities and their households in 15 countries.
While the study was able to make country-specific conclusions as to the economic well-being of persons with disabilities in the target areas, the research ultimately found that a lack of empirical evidence makes it increasingly difficult to assess the success of current programs and to effectively plan for future interventions. Additionally, the inability to complete longitudinal studies as is commonly done in high-income countries, partnered with the complex differences in country-contexts, makes it nearly impossible to apply findings from the United States or the European Union for example to developing nations (Meekosha and Soldatic, 2011). This further supports the need for more focused research on disability and poverty as a causal relationship in economically disenfranchised parts of the world. Disability itself is heterogeneous and has a multi-dimensional impact on economic health at the household level. Disability-related expenses (healthcare, equipment, additional medical services, transportation, and so on) can be financially onerous (Banks et al. 2016), and caregiving responsibilities may result in lost income for the household (Palmer 2013). This can lead to long-term or chronic poverty (Palmer 2013; see also Figure 1 below) that may not be alleviated by average cash transfer allocations calculated by standard income-based poverty lines or other social protection programs lacking a transformative intervention (Elkins, 2013; Molyneux et al. 2016).

As is seen in the above mentioned study, disability and poverty have long been associated (Banks and Polack, 2015; Elwan, 1999; Hoogeveen, 2005; Kuper et al. 2016; Mitra et al. 2011; Palmer, 2013; Yeo and Moore, 2003). As such, States have increasingly recognized the vulnerability and social exclusion of persons with disabilities and sought to act through including disability in poverty reduction strategies.

This paper explores social protection as a key poverty reduction strategy. The term social protection varies widely in the existing literature and among development practitioners. For the purposes of this study, the authors align with Palmer (2013:41) who suggests that ‘almost all definitions of social protection address protection against vulnerability, risk and unacceptable levels of deprivation’ (p41). In this paper, we adopt Norton et al.’s (2002:543) working definition: ‘Social protection refers to the public actions taken in response to levels of vulnerability, risk and deprivation which are deemed socially unacceptable within a given polity or society’. (p. 543). Palmer goes on to state that social protection can be understood as a set of public actions that address income poverty, economic shocks, and social vulnerability. The addition of social vulnerability allows us to consider the relationship between exclusion and poverty (i.e. the exclusion of marginalized populations and its cyclical relationship to poverty). Social protection should thus protect against unacceptable levels of poverty and promote enabling environments for the pursuit of livelihoods.

In line with the “twin track approach” to disability inclusive development, social protection programmes can either be inclusive mainstream programmes or disability-specific ones. While the nature and effectiveness of inclusive social protection programmes have not been
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reviewed in-depth, mainstream programmes seem to be more prevalent in developing countries (Palmer, 2013). However, it is becoming increasingly clear that disability is ‘neither mainstreamed within existing programmes nor targeted in disability-specific ones’ (Grech, 2014: 130). Additionally, in the limited circumstances where persons with disabilities are accessing development programming, there is a lack of evidence to determine whether existing programmes are meeting their needs effectively (Banks et al. 2016; Kuper, 2016; Palmer 2013). Programme effectiveness must be conceptualized quite differently for persons with disabilities and requires the consideration of three specific factors that make persons with disabilities and their families vulnerable to poverty (Schneider 2011):

- Additional costs of buying assistive devices or paying for essential services and care
- Additional care needs require family members to forgo outside employment to provide the care
- Loss of social networks that would provide additional support and access to livelihood opportunities

Similar questions of efficacy were raised in a study on disability and poverty surveying World Bank poverty assessments and their implications (Braithwaite and Mont, 2008), which again asserts that there is limited quantitative research aimed at providing concrete data. The authors observed that while there have been steps taken to improve data collection, citing the development of standardized census questions by the Washington Group (2008), assessing prevalence is only part of the challenge. For example, while the WHO and World Bank’s (2011) World Report on Disability provides a comprehensive overview of the global approximations, including estimates that 15% of the global population has some sort of disability and 2-4% experience significant difficulties in functioning, the report notes that a lack of standardized data collection impedes the ability to make international comparisons and/or to track policy implementation and effectiveness. The methodology used in this review of World Bank programs was designed in response to a lack of evidence based tracking and monitoring specific to persons with disabilities, and is intended to provide a systematic approach to gathering foundational data. The specific focus on social protection programming in this study is an example of how the methodology can be applied to specific investments and/or populations.

The same 2008 study (Braithwaite and Mont) focused in on the World Bank’s standard of measurement for poverty. Citing many of the World Bank’s previous publications on the topic, including World Development Reports (1990, 2000-2001), the 1993 Poverty Reduction Handbook and the Voices of the Poor initiative (Narayan et al. 2000), the report reviewed the World Bank’s approach to poverty measurement through use of the welfare metric, the poverty line and equivalence. While the statistical data derived from this study contributes to the shallow pool of empirical evidence on the topic, the paper simply and thoroughly outlines
a number of practical challenges associated with disability and poverty measurement, including:

- Defining disability which is challenging due to the differing perspectives on disability.
- Acknowledging the type and range of disability (i.e. mental, physical, sensory, psycho-social and mild, moderate or severe)
- Data collection difficulties, including poor data resulting from questions like ‘do you have a disability’ which lead to underreporting of disability due to stigma or a lack of understanding of the term
- Stigma and cultural perceptions related to disability status. Persons with disabilities or their family members may not report disability due to stigma or negative perceptions of disability.
- Use of consumption as a standard for measuring poverty is problematic, including the level of consumption of goods considered adequate to have a ‘quality of life we consider to be free of poverty’ (221), which in practice is situational. Additionally, the notion that consumption is equal for household members with and without disabilities is misleading.
- The implicit assumption that household members benefit equally from household income or expenditures fails to take into consideration outside factors including familial size and structure.

All of these issues factor into social protection program development and implementation at the World Bank, and reaffirm both the need to include persons with disabilities as target beneficiaries and the importance of recognizing the unique challenges and circumstances that surround this population.

Public programs aimed at ensuring the social and economic inclusion of persons with disabilities generally follow two pathways: 1) social assistance measures that protect economic security (i.e. cash transfer programs, non-contributory health insurance programs, etc.) and/or 2) measures that create an enabling or barrier-free environment to secure livelihoods (i.e. community-based rehabilitation, vocational training and education programs, legislation to protect and promote rights, etc.) (Palmer, 2013; see Figure 1). Cash transfer along with the provision of services, such as healthcare, have been shown to be beneficial to persons with disabilities (see Schneider, 2011). As it is the most common form of social protection programming at the World Bank, for the purpose of this study, we reviewed the provision of social assistance.
World Bank social protection programs

According to the World Bank, meeting the needs of vulnerable populations including persons with disabilities ‘in a world filled with risk and potential’ is a top priority (World Bank, 2015). Among the plethora of assistance mechanisms, are social protection programs which provide individuals and families with fiscal resources in the form of cash transfers (direct cash) or in-kind transfers (such as free school lunches) and insurance benefits (healthcare, unemployment or disability insurance) and social supports (community based rehabilitation programming and employment assistance). The following highlights data, information and institution driven priorities as reported by the Bank with supplementary connections to the global agenda noted by this paper’s authors. As is the case in many sectors of development, public priority setting and measurable investment are often misaligned. Specific data and analysis is presented in the study overview.

According to the World Bank, universal access to social protection is ‘central to its goals of ending poverty and boosting shared prosperity’ (2016) and provides a cost-effective means to reduce inequality. Persons with disabilities and their families have a right to the same level of social protection as others, but also merit increased attention due to increased instances of social and economic vulnerability (Banks et al. 2016; Kuper, 2016; Palmer, 2013; Schneider,
The Bank’s stated commitment to universal social protection coverage is representative of Sustainable Development Goal 1.3, which calls for ‘nationally appropriate social protection systems and measures for all, including floors’, and seeks to achieve substantial coverage of the poor and vulnerable’ by 2030 (UN, 2015). Their policies align with Article 28 of the CRPD, which calls for an ‘adequate standard of living and social protection’ (UN, 2007).

Data obtained from the World Bank website shows that the organization invested $3.6 billion USD in fiscal year 2016 for social protection programs, with a claim that $2.5 billion of that annual lending going towards those that the Bank categorizes as the ‘world’s poorest’ (World Bank, 2016). Resources were translated to cash transfers, safety net programs, public works projects and school feeding, and contributed to efforts to guarantee basic income security.

**Methodology**

From September 2015 to May 2016, researchers and students from the University of Massachusetts Boston’s School for Global Inclusion and Social Development and AidData, a research lab at the College of William and Mary, developed a research methodology for tracking disability inclusive development projects of donor agencies (Karr et al. 2017). The research team was comprised of individuals with diverse academic and professional backgrounds and expertise in the fields of disability, open data, and sustainable development finance to assess the level and nature of inclusion of people with disabilities in active World Bank projects. The methodology was closely aligned with the 2030 development agenda to inform areas of progress or investment related to the implementation of the Sustainable Development Goals (SDGs). This dataset serves as a case study for a broader assessment of inclusivity and coherence with the global agenda among other, similar development partners.

For this study, the analytical approach involved the development of a high discretion coding schema to link World Bank project components with elements of the SDGs. This methodology was designed to assess: 1) if the sampled projects were explicitly inclusive of persons with disabilities? (i.e. do they specifically mention persons with disabilities as target beneficiaries?); and 2) what areas of development do disability-inclusive projects focus on? (i.e. with which SDGs do the projects align)? SDG targets served as the frame for this coding methodology in order to test whether the World Bank’s efforts to align their work with the 2030 Agenda were translating into measurable results.

To answer these questions, the research team developed a coding methodology that corresponded each SDG goal and target with disability inclusive projects (see Table 1 for an example). This methodology was arrived at via consultations with disability experts and
thoughtful discussion of each SDG and its relevance to persons with disabilities. The researchers then reviewed the relevant goal’s corresponding targets to agree upon examples of how each target could feasibly include persons with disabilities within a given project. After training coders and field-testing the methodology, relevant documentation (see below) for each project was coded twice by separate researchers. Finally, projects with coding discrepancies were re-coded by a third arbitrating researcher. A review of the full findings of the study are reviewed in Karr et al. (2017).

### Table 1: Example of coding activity related to SDG 1

<table>
<thead>
<tr>
<th>SDG Target</th>
<th>Examples of inclusion of disability</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.3 Implement nationally appropriate social protection systems and measures for all, including floors, and by 2030 achieve substantial coverage of the poor and the vulnerable</td>
<td>Conditional cash transfers for disability, pensions; social security; temporary disability related unemployment benefits; national or regional poverty reduction strategies for people with disabilities</td>
</tr>
</tbody>
</table>

Creating the sampling frame of projects also entailed several sequential steps. First, the cross-sectoral and heterogeneous nature of disability required the research team to conduct extensive desk research and consult with subject-matter experts and other key informants to identify the most appropriate disability-related keywords to ensure that all projects were captured. Next, these disability keywords were used to conduct a query of the World Bank’s online project database and identify projects with a high likelihood of demonstrated disability inclusivity. Finally, these projects were saved for the second stage of analysis which consisted of a review of all project documentation (project appraisal documents, implementation status and results reports, integrated safeguards data sheets, and/or project information documents) by coders seeking answer the above stated research questions.

For the purpose of this study, researchers selected projects from the initial study (from 2010-2015) that were aligned with SDG 1 (End Poverty) and coded 1.3 as they most accurately capture social protection. Researchers then reviewed the project documentation to summarize their approach to including disability in social assistance programs as compared with best practice delineated by existing literature reviewed above (see Table 2).

### Table 2: Best Practice for Inclusive Social Protection

<table>
<thead>
<tr>
<th>Government Infrastructure</th>
<th>Defining Disability to Qualify</th>
<th>Improved benefits</th>
<th>Services</th>
<th>Outcomes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Development of a central and coordinated system/registry for delivery of social assistance</td>
<td>Based on Washington Group on Disability Questions</td>
<td>Adequate amount of funding to impact poverty level and account for additional costs incurred by families and PWDs</td>
<td>Community-based programs</td>
<td>Data collection systems evaluate the participation of PWDs and program impact on PWDs</td>
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<tr>
<td>Accessible administrative offices, service procedures, and application materials</td>
<td>Use of a community-based approach to assessment</td>
<td>Accessible cash transfer facilities (ATM withdrawals)</td>
<td>Employment/Livelihood opportunities</td>
<td></td>
</tr>
<tr>
<td>Data management systems with beneficiary feedback loops</td>
<td>Training: With trained/sensitized community-based workers</td>
<td></td>
<td>Rehabilitation</td>
<td></td>
</tr>
<tr>
<td>Sensitization of officials to avoid discriminatory practices and barriers</td>
<td>Outreach: Who reach out in the community for participation</td>
<td></td>
<td>Family supports</td>
<td></td>
</tr>
</tbody>
</table>

**Findings**

Out of 2,576 total projects reviewed, only 52 World Bank projects (2%) coded as inclusive of persons with disabilities, indicating serious under-representation. These projects were examined in greater detail to identify which aspects of social protection were most prevalent when targeting those with disabilities as program beneficiaries. Under Palmer’s (2013) broad
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definition of social protection, which includes the provision of social assistance and the promotion of enabling environments, all 52 studies could be broadly characterized under social protection. A more detailed review of project documentation allows us to assess the World Bank’s approach to social assistance, cash transfers specifically, which is a more dominant model of social protection (Banks et al. 2016)

This study found that 56% (N = 29) of projects focused primarily on the provision of social assistance, which include targeted poverty alleviation measures such as cash transfers, non-contributory health insurance, social funds (i.e. cash for school attendance) and micro-finance programmes. It is important to note that for the purposes of this study, we are describing the projects by their primary focus. Some projects included aspects of both social protection and enabling environments in their program activities, but projects coded as social assistance were primarily geared towards cash transfer benefits with additional social protection activities such as the provision of rehabilitation services or livelihood opportunities.

While only 2% (N = 52) of the World Bank’s active project portfolio (N = 2,576) was found to be explicitly inclusive, 5% (N = 29) of active social protection projects (N = 580) were inclusive of persons with disabilities. 90% of these projects were general projects that included persons with disabilities within the larger population (N = 26) and 10% were disability-specific projects (N = 3) (i.e. the target beneficiaries were specific to persons with disabilities only). No differences were found by geographic region or time of project development. Of the disability inclusive social protection projects in this study, 76% were also coded as SDG 17 (data and partnerships) indicating the importance of capacity-building, partnerships, and effective data collection methods (for targeting and prevalence) when implementing inclusive social assistance programs. Approximately half (48%) of the inclusive social protection projects included outcome indicators (evaluation metrics) related to disability. For a full description of the projects see Table 3 in Appendix below.

As the project descriptions were analyzed, the following themes emerged.

**Improved targeting and data collection mechanisms**

Of the inclusive social protection projects (N = 29), all included the provision of cash transfers to vulnerable groups and included persons with disabilities under this definition. Nine of the projects included measures to improve effective targeting of persons with disabilities through improved eligibility criteria with a tendency to move away from a medical definition of disability (i.e. certification of disability by a physician) towards a more functional approach to disability as recommended by the Washington Group on Disability Statisticsiiii. Four of these projects included additional training and a community-based approach to outreach and disability assessment to improve targeting. Approximately half of
the projects (48.3%) included data collection of outcomes related to targeting persons with disabilities specifically.

**Streamlining of government systems**

In addition, all of the inclusive social protection projects (N = 29) focused on improving government coordination of social assistance through improved registry systems, which included streamlining the registration system to one central point of interaction with the beneficiary. This enabled the host government to reduce costs and spending due to ‘double dipping’ (people who register for more than one social assistance benefit). Three projects also included beneficiary feedback loops to inform improvements to accessing government services (i.e. persons with disabilities could report barriers encountered in real time).

**Access to government benefits**

Four of the coded social protection projects included provisions for improving some aspects of accessibility of government offices, systems, and materials for persons with disabilities. While this does not ensure access in rural areas or to those with no access to banking facilities, two projects did include improvements to the cash transfer locations, such as accessible banks and ATM facilities. Three projects included sensitization or awareness activities for government employees aimed at reducing discrimination towards persons with disabilities.

**Improved benefits above and beyond cash transfers (enabling environments)**

Six projects made mention of the impact on the family and provided additional funding based on poverty-level to account for the additional costs of disability. Eleven projects included the delivery of services and supports for those with disabilities, including access to rehabilitation services and the provision of some assistive devices. Nine projects included activities related to income generation, livelihoods, and/or employment.

**Project-specific examples**

The following examples expand on the descriptive data above, and provide project specific illustrations of good practice, including how countries propose to modify, implement or enhance social protection programs, and also highlight the inclusion of, and impact on persons with disabilities, with positive and/or negative aspects highlighted from each. It is
important to note that the discussion and sample projects look only at the projects’ proposed
description, activities and approach and that actual implementation or outcomes were not
reviewed in depth (nor readily available) as part of this study.

Example 1: Cash transfers for economic stability

A 2013 World Bank funded project in Kenya (World Bank Project ID: P131305) illustrates
the above notion of a lack of self-reliance as a means to qualification for social assistance.
The project which aims to harmonize five cash transfer programs, explicitly states that the
Persons with Severe Disability Cash Transfer, ‘targets people with severe disabilities, who
are unable to look after themselves and thus require constant attention of caregivers’ (8).
While the inclusion of persons with disabilities as a targeted beneficiary is a step in the right
direction, the project description notes that the purpose of this program is to ‘provide
immediate relief to people with severe disabilities from extreme poverty, while enhancing
their basic rights’, the project lacks clarity and further explanation of how a cash transfer
every two months will adequately alleviate poverty or enhance human rights. The project also
does not provide enough detail regarding how the cash transfer will address the unique needs
of families caring for persons with disabilities, including the increased cost of living (Banks,
2016).

Example 2: Social assistance for inclusion

In Kyrgyz (World Bank Project ID: P126278), a subcomponent of the Second Health and
Social Protection Project (2013) is devoted to persons with disabilities. Subcomponent 2.2
(Support to strengthening the national policy towards vulnerable groups, including people
with special needs) includes a review of the Disability Certification Service to streamline
disability certification ‘in accordance with modern approaches focusing on abilities and
opportunities for rehabilitation rather than on certifying static disability status’ (a12), that is
made possible by coordinated, community-based infrastructure. This project differs from
many other social assistance efforts in that the project description explicitly outlines a
strategy for functional inclusion in society versus standard cash transfers that do little to
improve outcomes beyond economic stability. Additionally, while the project aims to
streamline and avoid duplication of services, it also considers the ‘multiple causes and
dimensions of their vulnerability’ (12) and pilots an integrated approach to bringing together
social assistance and social services programs that previously functioned independently. This
project serves as an example of an updated approach to disability insurance and social
assistance and includes a number of best practices and strategies that are in line with the 2030
aim to leave no one behind.
Discussion

In 2003, at the World Bank’s International Dialogue on Disability and Development in Helsinki, Judy Heumann, the Bank’s first advisor on disability and development stated that ‘the disability community is not schooled in the language and logic of development work, and the development community is unfamiliar with the tenets and priorities of the disability community’ (Heumann, 2003: 46) More than a decade later, despite evolving legislation (CRPD) and more inclusive international agendas (SDGs), findings from this study illustrate a similar disconnect. Individuals with disabilities and their families remain among the world’s poorest, and many social assistance programs meant to propel them out of poverty, fail to include measures that adequately account for their specific needs.

As noted in the literature, (Banks and Polack, 2015; Elwan, 1999; Hoogeveen, 2005; Kuper et al. 2016; Mitra et al. 2011; Mitra et al. 2013; Palmer, 2013; Yeo and Moore, 2003), the relationship between poverty and disability is reciprocal; having a disability makes it more likely that one will experience poverty, and living in poverty increases instances of acquired disability (Maulik and Damstadt, 2007). This fact, combined with the knowledge that measuring poverty is far more complex than simple consumption metrics or being above a certain dollar amount per day (Deaton and Zaidi, 1999, Braithwaite and Mont, 2008), provides justification for a focus on social assistance programs and the need for specific metrics that measure inclusion of persons with disabilities.

Social Assistance

As noted in the findings, all 52 disability-inclusive coded projects, focused on some aspect of social protection. Further analysis identified 29 examples where the primary focus was on social assistance aimed at protecting economic security in the form of cash transfer programs, non-contributory health insurance programs etc. (see Appendix, World Bank Social Assistance Projects Inclusive of Disability).

Mitra (2005) observed that social safety net and/or assistance programs have historically paid little attention to persons with disabilities as beneficiaries in the design, implementation or evaluation phases. Mitra goes on to cite conventional thinking as noted by Deveraux (2002), that persons with disabilities are unlikely to participate in activities that lead to economic self-sufficiency, and are able to survive only through reliance on family or state funded assistance. While the evolution of more socially inclusive, capabilities approaches to disability may make this standard of thought seem antiquated, the data clearly shows that the majority of disability inclusive projects at the World Bank are social assistance programs, with the focus primarily on cash transfers as a primary form of poverty reduction. This reliance on cash transfers can be seen as captive to the conventional wisdom, especially given
the World’s Bank’s shift to promoting greater self-help and self-sufficiency.

Based on our findings, the World Bank’s investment in social assistance programs- the majority of which are cash-transfer based- contributes to the gap in functional inclusion. The Kyrgyz case study and others like it, demonstrate that functional inclusion, that is the removal of physical and social barriers to persons with disabilities, is not only desirable, but also possible, especially when it is factored into social assistance programs at the design phase. A focus on accessibility must be a primary consideration for policy makers to ensure that mainstream programs are inclusive of all people. Inclusion of persons with disabilities requires governments to not only specify disability in social protection programs, but to go above and beyond to consider the factors that lead to the exclusion of persons with disabilities, that effectively target and assess persons with disabilities as program beneficiaries, and that include the broader impact disability has on poverty-level within the family unit (Schneider, 2011).

Programs that focus exclusively on cash-assistance, when sufficient, may promote economic stability, but not necessarily other desired outcomes like social development and healthcare, education, and employment access (i.e. enabling environments). This study found only a few examples that combined approaches. This is especially true in circumstances where the costs associated with disability are not accounted for in the allocation of funding. Individuals with disabilities and their families are far more likely to have higher medical costs and often require care from a family member that limits their ability to earn supplementary income through work outside of the home.

Mitra (2005:23) defines accessibility as ‘the time, effort and cost, in brief the ease, with which a good, a service or a facility can be reached or used’. Ensuring accessibility creates positive changes that are, indeed, good for all. The heterogeneous and complex needs of persons with disabilities require a targeted approach to ensuring access that cannot be clearly observed from a review of project documentation for the majority of the Bank’s active projects. While the Bank’s 10-year social protection strategy outlines a commitment to improving livelihoods and reducing vulnerability, explicitly including persons with disabilities among those most in need, our study was unable to observe this rhetoric in action. This systematic approach to inclusion is an important step and requires practical guidance for, and accountability of recipient countries to effectively translate vision to practice.

Additionally, our findings showed a lack of attention and focus on providing employment opportunities and assistance as a strategy for poverty reduction. Even as a supplemental addition to social assistance programs that provide immediate economic relief, vocational programs have the potential to significantly enhance the lives of persons with disabilities (Banks, 2014). This is especially true for individuals with mild or moderate disability who are not entirely reliant on others for basic self-care (ibid, 2014). This segment of the population is
generally unaccounted for by programs like the example in Kenya that are focused on those with severe disabilities, but who, due to their disability, may not have the capacity for accessing mainstream assistance.

There are examples of projects with a focus on employment among the Bank’s active projects, including a 2012 project in Macedonia (P133837) in which a revised project appraisal document highlights the shifting of expenditures towards efforts that promote social inclusion and encourage safety net beneficiaries to actively seek employment. Unfortunately, persons with disabilities were not identified as targets within this project component, but were instead only mentioned in provisions aimed at streamlining cash transfers. This is an instance where the Bank has the potential to promote opportunities for persons with disabilities by recommending that they also be included in vocational-based efforts.

The practical considerations for improving outcomes from social assistance programs for persons with disabilities include limited fiscal and human capacity and lack of qualified, skilled personnel to design and support the implementation of accommodations that respond to the unique needs of this population, but this is not an excuse for inaction. Examples from the literature, including Grech’s (2014) study, which notes a link between access to education and predictions of poverty and a 2013 report, by Banks and Polack, citing potential economic gains in education, health and employment, combine with a review of completed projects, with published outcomes, supporting justification for this type of investment and suggesting that the reward will outweigh the cost.

The mantra of No One Left Behind, the inclusion of persons with disabilities and other marginalized groups, will not be achieved unless development agencies strategically plan for inclusion (DFID, 2015). The Bank must approach disability from an inclusive-strategic planning perspective and must take a systems change approach to integrating fully into their work. While policy development shows promise, as is seen in the evolution from the disability-free MDGs to the more inclusive SDGs and in the Bank’s own 2012-2022 Social Protection Policy (SPP), ‘Resilience, Equity and Opportunity’, action must come next. Additionally, in the foreword of the plan, Tamar Manuelyan Atinc, Vice President, Human Development Network at the World Bank, acknowledges that a ‘focus on systems is not an end in itself. It is a gateway to deliver outcomes’ (v).

As documented throughout this article, the Bank’s strategic plans appear forward-thinking from an audience facing perspective; however, further investigation and review of projects and programs in the implementation stage show continued room for improvement. In the case of the SPP, the plan includes comprehensive and detailed implementation and strategies for monitoring success that include knowledge of competing priorities, political economy considerations and capacity building needs. Evidenced by the findings that only 5% of projects were deemed inclusive of people with disabilities, the plan lacks a clear, internal
approach to implementation. By focusing on their partners’ strengths and weaknesses, rather than considering an internal audit of areas for improvement, the Bank is missing a critical component for successful change management. Gopal and Kania (2015) refer to this element as ‘adaptive capacity’, that is ‘the ability to seek new information, see connections, and make ongoing changes’. This occurs at three levels, the individual, the team and the organization. For an institution like the World Bank, their long history may be perceived as both a strength and a weakness, as truly effective systems change can only occur in environments where flexibility and self-awareness are both present and nurtured.

In the same realm of successful systems change, the Bank appears to show a very large gap in participatory inclusion of the populations they aim to support throughout policy development and implementation. While they do employ a disability advisor and have a published strategy that discusses partnerships with the disability community, there is a lack of clear vision on how those relationships extend to mainstream Bank programs, including social protection. As explained in Mobility International’s (2003) publication, ‘the international community can no longer afford to overlook the immense resources that people with disabilities have to offer, as administrators, agents and beneficiaries of the development process’. Agencies must commit their energy and resources to inclusion, operational activities must be refined, strengthened and accountable, employees and stakeholders (i.e. government partners) must agree to work towards common inclusive goals and set intended outcomes, and data must be collected to assess progress and adjust agency activities accordingly.

The World Bank’s own thinking on cash transfers is evolving as the Bank’s 2022 plan seeks a greater emphasis on self-sufficiency for all if its recipients. This is in line with the CRPD and SDGs focus on access to health, education and employment for all and could be viewed as a shift from a charitable model of development to a more inclusive social model in which all people, including persons with disabilities, are viewed as having value, worth and ability to become contributing members of society when given the right tools. It remains to be seen whether the Bank’s proposed approach will translate into investments in socially driven programs, and if so, will they be inclusive. The Bank and the development community as a whole must go beyond well-versed intentions; instead, prioritizing the unique needs of vulnerable populations and factoring in the non-economic cost-benefit of their investments.

**Limitations and future research**

Several limitations should be taken into account for this study. The data analyzed was limited to one development agency, the World Bank, and only captured active projects publicly available at worldbank.org. It has also been suggested that the key word search may have led to an underestimation of the number of projects presented for analysis; additional projects may exist, but are either not publically available or do not include disability related
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keywords. In addition, while the documentation analyzed for disability inclusive development provided the data for this study, the documentation itself may not have included all of the inclusive efforts that existed during the project implementation stage. While outside the scope of this study, key informant interviews would have been helpful, and the narrative of our target population, persons with disabilities, would have enhanced the data and allowed for additional insight into the implementation and outcomes of the projects that were identified as inclusive. Lastly, budgetary documentation and outcome measures were not reported with enough granularity to make any conclusions regarding disability-specific allocations or project outcomes/impact on persons with disabilities.

It should also be noted that persons with disabilities are not a homogenous population, they are a diverse population with unique needs, and meeting these needs can be complex. This project sought to assess and describe the World Bank’s social assistance efforts inclusive of persons with disabilities through the analysis of project-level documentation publically available. The goal of developing this standardised research methodology was to inform development agencies of their current commitments to marginalized populations. To assess additional layers of complexity (i.e. rural versus urban settings, disability type, gender, age, etc.) one would need to study these projects in action (implementation) and in significantly more depth, which was outside of the scope of this initial study.

Future studies should focus on improving the breadth and depth of our analysis including: analyzing data from additional development agencies (both multilateral and bilateral); introducing field-based research approaches, including key informant interviews, to assess project implementation and outcomes; garnering feedback from persons with disabilities themselves; and examining the inclusion of additional vulnerable groups to inform disability inclusive development policy and practice.

Conclusion

In the SDG era of inclusive, sustainable development, a focus on data tracking, transparency and clarity is an essential component of ‘leaving no one behind’ and ensuring greater accountability for development organizations and donor agencies. Without the inclusion of persons with disabilities, such a significant percentage of the population, the SDGs cannot be achieved, especially SDG 1 (end poverty). Findings from Karr et al.’s (2017) study provide an overview of the inclusion of persons with disabilities in the active World Bank portfolio to set a benchmark for understanding rates of inclusion of persons with disabilities. These findings illustrate the prominence of social protection programs as a strategy for reducing poverty and mitigating inequality for persons with disabilities. Considering the relationship between disability and poverty, including increased prevalence and the acknowledgement that 80 percent of people with disabilities live in the global South (WHO and World Bank,
(2011), the data also highlights a significant discrepancy in the presence of disability inclusive social protection programming (5%) and the needs of the population. This stark contrast indicates a serious gap between the inclusive ethos published in the World Bank’s policies and reality, and highlights the continued need for program monitoring and evaluation that produces measurable data.

Based on commitments outlined in their policies and reporting, the Bank appears to understand its’ obligations to include vulnerable groups in its work, however, what this study has found is a significant lack in the operationalization of these policies. From an organizational perspective, the World Bank must take a systematic approach to the implementation of inclusive development to ensure that needs of persons with disabilities are thoughtfully planned for, implemented, and evaluated. This goes beyond practical considerations for organizational efficiency, and also speaks to institutional values. Integrating disability into every facet of the Bank’s work promotes a culture of inclusion. Neither grand nor vague rhetoric assist the poorest of the poor in development. As the passage of the CRPD indicates, without strong and explicit legal frameworks demanding the rights of persons with disabilities be recognised, the needs of this population go unmet.

This study demonstrates the need for purposeful inclusion of persons with disabilities in development projects, specifically their targeted inclusion in social assistance programs. Persons with disabilities remain one of the poorest groups in society and if the SDGs, especially SDG 1 (end poverty) are to be achieved, their specific needs have to be taken into account from planning and implementation to evaluation of development projects. Stronger policies and technical assistance should be developed to ensure accountability for the inclusion of this vulnerable group and assure that no one is “left behind”.

Notes

1 The United Nations promotes the ‘twin-track approach’ for equalizing opportunities for persons with disabilities, which consists of: (a) integrating disability-sensitive measures into the design, implementation, monitoring and evaluation of all policies and programmes and (b) providing disability-specific initiatives to support the empowerment of persons with disabilities. See: Report of the Secretary General Mainstreaming disability in the development agenda E/CN.5/2012/6.
2 Social protection floors are nationally defined sets of basic social security guarantees that should ensure, as a minimum that, over the life cycle, all in need have access to essential health care and to basic income security which together secure effective access to goods and services defined as necessary at the national level. See ILO: http://www.ilo.org/seccsecareas-of-work/policy-development-and-applied-research/social-protection-floor/lang--ja/index.htm
3 See http://www.washingtongroup-disability.com
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References


UN (2015) Transforming our world: the 2030 Agenda for Sustainable Development. Available at: http://www.refworld.org/docid/57b6e3e44.html


**Appendix 1**

*Table 3: World Bank Social Assistance Projects Inclusive of Disability*

<table>
<thead>
<tr>
<th>Project ID</th>
<th>Project Title</th>
<th>Year</th>
<th>Country</th>
<th>SDG 17 (Data)</th>
<th>Outcome Indicators</th>
<th>Approach to Social Protection for PWDs</th>
</tr>
</thead>
<tbody>
<tr>
<td>P126278</td>
<td>Kyrgyz Second Health and Social Protection Project</td>
<td>2013</td>
<td>Kyrgyz Republic</td>
<td>Yes</td>
<td>Yes</td>
<td>Improvement of social assistance benefits, pensions, and social</td>
</tr>
</tbody>
</table>
services (additional financial support, streamlining system and improved targeting). Revision of Disability Certification Service that is focused on best practice and focus on community-based infrastructure. Includes capacity-building of government.

<table>
<thead>
<tr>
<th>Code</th>
<th>Title</th>
<th>Year</th>
<th>Country</th>
<th>Allocation</th>
<th>Disbursement</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>P129119</td>
<td>Tamil Nadu Empowerment &amp; Poverty Reduction Project : TA PWD</td>
<td>2012</td>
<td>India</td>
<td>No</td>
<td>Yes</td>
<td>Community-based program aimed at mental health issues, includes enhancing access to social protection services like disability certification, insurance, pension, and community activities including access to livelihoods.</td>
</tr>
<tr>
<td>P123128</td>
<td>Improved Policy Making &amp; Institutional Framework for PWD</td>
<td>2011</td>
<td>Grenada</td>
<td>Yes</td>
<td>No</td>
<td>Improve allocation and disbursement of cash transfers to eligible beneficiaries including PWDs.</td>
</tr>
<tr>
<td>P131305</td>
<td>National Safety Net Program for Results</td>
<td>2013</td>
<td>Kenya</td>
<td>No</td>
<td>No</td>
<td>Cash transfers to persons with &quot;severe&quot; disabilities, defined as those &quot;who are unable to look after themselves and thus require constant attention of caregivers&quot;.</td>
</tr>
<tr>
<td>Project Code</td>
<td>Project Name</td>
<td>Implementation Year</td>
<td>Country</td>
<td>Internationally Funded</td>
<td>Disability-Specific</td>
<td>Key Objectives</td>
</tr>
<tr>
<td>--------------</td>
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</tr>
<tr>
<td>P132634</td>
<td>Bangladesh Safety Net Systems for the Poorest Project</td>
<td>2013</td>
<td>Bangladesh</td>
<td>Yes</td>
<td>No</td>
<td>3 main areas of SP (1) financing SP program costs (2) strengthening program administration and transparency (3) establishing a poverty database via census. PWDs are explicitly identified and preference is given to them as a vulnerable group.</td>
</tr>
<tr>
<td>P133791</td>
<td>FYR Macedonia Public Expenditure PBG</td>
<td>2013</td>
<td>Macedonia</td>
<td>Yes</td>
<td>Yes</td>
<td>Improve the efficiency of social safety net administration that links systems including the Pension and Disability Insurance Fund. Includes mention of supporting policies that &quot;promote social inclusion&quot; and encourage beneficiaries to seek employment. Additional information about procuring orthopedics and vision supports (glasses).</td>
</tr>
<tr>
<td>P122233</td>
<td>Social Assistance Modernization Project</td>
<td>2012</td>
<td>Albania</td>
<td>Yes</td>
<td>Yes</td>
<td>Project is not disability-specific, but includes specific measures aimed at improving disability reforms. Effective use of resources by removing beneficiaries who report no functional disability from the disability assistance payrolls.</td>
</tr>
<tr>
<td>P125791</td>
<td>JSDF Strengthening</td>
<td>2013</td>
<td>Armenia</td>
<td>Yes</td>
<td>Yes</td>
<td>Piloting of self-reliant</td>
</tr>
</tbody>
</table>
Livelihoods and Voice of Vulnerable and Disabled

<table>
<thead>
<tr>
<th>Project ID</th>
<th>Project Description</th>
<th>Year</th>
<th>Country</th>
<th>Targeted Groups</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>P155097</td>
<td>Strengthening Social Protection and Inclusion Project</td>
<td>2015</td>
<td>Panama</td>
<td>Yes No</td>
<td>Designation of a single registry social information system, contains a social feedback component for beneficiaries to report effectiveness of the program</td>
</tr>
<tr>
<td>P145699</td>
<td>Strengthening Social Safety Net Project</td>
<td>2015</td>
<td>Egypt</td>
<td>Yes No</td>
<td>Cash transfers to vulnerable populations, including those with severe and permanent disabilities. Payments occur through a virtual account at post office or an ATM. No accessibility assessment noted. Additionally, this project will improve the targeting and operational system to better reach and monitor the social protection procedure.</td>
</tr>
<tr>
<td>P146567</td>
<td>Sustainability and Competitiveness DPL3</td>
<td>2014</td>
<td>Seychelles</td>
<td>Yes No</td>
<td>Improve targeting of social assistance by creating an automated information</td>
</tr>
</tbody>
</table>
management system. Reform to disability system includes new eligibility criteria, a return to work approach, and an assessment for rehabilitation.

<table>
<thead>
<tr>
<th>Project Code</th>
<th>Project Name</th>
<th>Year</th>
<th>Country</th>
<th>Needs Addressed</th>
<th>Activities</th>
</tr>
</thead>
<tbody>
<tr>
<td>P145171</td>
<td>Social Protection System Modernization Project</td>
<td>2014</td>
<td>Croatia</td>
<td>Yes</td>
<td>To improve the efficiency and effectiveness of the social protection system. Includes employment assistance opportunities for work-abled adults including PWDs. Includes a Central Disability Certification Institute to streamline disability certification. Project intends to de-institutionalize approximately 715 adults and children including those with behavior disorders, disabilities, a those who are mentally ill.</td>
</tr>
<tr>
<td>P148706</td>
<td>Second Demobilization and Reintegration Project</td>
<td>2014</td>
<td>Rwanda</td>
<td>No</td>
<td>Project support includes economic and social support to ex-combats with disabilities through Integrated Rehabilitation and Production Workshops.</td>
</tr>
<tr>
<td>P133597</td>
<td>Senegal Safety Net</td>
<td>2014</td>
<td>Senegal</td>
<td>Yes</td>
<td>Supports national targeted cash transfers.</td>
</tr>
<tr>
<td>Operation</td>
<td>Year</td>
<td>Country</td>
<td>Target</td>
<td>Achieved</td>
<td>Description</td>
</tr>
<tr>
<td>--------------------------------------------------------------------------</td>
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<td>---------------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td><strong>P133620</strong> Strengthening Safety Nets Systems - MASAF IV</td>
<td>2013</td>
<td>Malawi</td>
<td>No</td>
<td>Yes</td>
<td>Increase effectiveness of the social safety net delivery systems and coordination across programs. Establishes a unified registry, a management information system, and timely cash transfer payments.</td>
</tr>
<tr>
<td><strong>P125719</strong> Health Services and Social Assistance Additional Financing</td>
<td>2011</td>
<td>Moldova</td>
<td>Yes</td>
<td>No</td>
<td>Healthcare services to PWDS and improved targeting to social assistance (which includes PWDs)</td>
</tr>
<tr>
<td><strong>P116774</strong> Social Safety Nets &amp; Employment Support Project</td>
<td>2010</td>
<td>Bosnia &amp; Herzegovina</td>
<td>Yes</td>
<td>Yes</td>
<td>Improve cash transfers in reaching PWDs to improve the efficiency and transparency of benefit administration; and (iii) to support job brokerage services for PWDs, Improved targeting mechanisms for civilian disability benefits (over reliance on war veteran benefits). Disability certification. Reformed disability determination and verification processes in line with procedures for the classification of disability per World Health Organization</td>
</tr>
</tbody>
</table>
(WHO) rulebooks and EU standards. Developed in consultation with disability groups. Some refurbishment of benefit office to be accessible for PWDs.

<table>
<thead>
<tr>
<th>Project Code</th>
<th>Project Title and Details</th>
<th>Start Year</th>
<th>Country</th>
<th>Implemented</th>
<th>Achieved</th>
</tr>
</thead>
<tbody>
<tr>
<td>P122039</td>
<td>Social Safety Net Strengthening Project</td>
<td>2011</td>
<td>Tajikistan</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>P120913</td>
<td>Strengthening the Effectiveness of the Social Safety Net</td>
<td>2011</td>
<td>Moldova</td>
<td>No</td>
<td>No</td>
</tr>
</tbody>
</table>
individual recognizing that the poor pool their resources and scales the rate of payment based on individual household and guaranteed minimum income and includes community outreach with a network of community-based social assistants for client intake. This will remove disability benefits and consolidate them into a new program. Outcome measures defined for disability (decrease of disability benefits due to move into new program).

<p>| P125700 | Maldives - Pension and Social Protection | 2011 | Maldives | Yes | No | Develop disability coding, standard operating procedures, design of registry of disability, administration of cash benefits and support for a new disability bill. It would also assist in the development of a system to deliver health insurance benefits. Activities include public awareness, staff training, and technical assistance. Outcomes are related to disability. |</p>
<table>
<thead>
<tr>
<th>Project Number</th>
<th>Program Title</th>
<th>Year</th>
<th>Country</th>
<th>Beneficiaries</th>
<th>Outcomes</th>
</tr>
</thead>
<tbody>
<tr>
<td>P121673</td>
<td>Social Assistance System Modernization Project</td>
<td>2011</td>
<td>Romania</td>
<td>Yes</td>
<td>Beneficiaries of disability pensions and disability benefits are subject to two separate eligibility determination systems and receive two different bundles of cash and services from two separate institutions, although about half of the disability benefits’ beneficiaries also receive disability pensions. A reorganization of the service delivery chain around the principle of one-beneficiary, one-application, one-point-of-service.</td>
</tr>
<tr>
<td>P117667</td>
<td>Second Development Policy Loan</td>
<td>2011</td>
<td>Romania</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>P117444</td>
<td>GZ-Palestinian P. NGO IV</td>
<td>2010</td>
<td>West Bank &amp; Gaza</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>P118157</td>
<td>AM-Social</td>
<td>2010</td>
<td>Armenia</td>
<td>Yes</td>
<td>Yes</td>
</tr>
</tbody>
</table>

Support for the job
<table>
<thead>
<tr>
<th>ID</th>
<th>Project Title</th>
<th>Year</th>
<th>Country</th>
<th>Targeting</th>
<th>Implementation Focus</th>
</tr>
</thead>
<tbody>
<tr>
<td>P128344</td>
<td>Social Safety Nets Modernization Project</td>
<td>2014</td>
<td>Ukraine</td>
<td>Yes</td>
<td>Targeting for GMI (cash transfer) and support for de-institutionalization of CWDs through a family care benefit</td>
</tr>
<tr>
<td>P145263</td>
<td>CG Rep. Lisungi Safety Nets Project</td>
<td>2014</td>
<td>Republic of Congo</td>
<td>Yes</td>
<td>Establish a national safety net program to address needs of PWDs.</td>
</tr>
<tr>
<td>P124761</td>
<td>Social Promotion and Protection Project</td>
<td>2013</td>
<td>Lebanon</td>
<td>Yes</td>
<td>Support to community-based NGOs to provide social services to PWDs, grants to support income generating activities benefitting PWDs, national poverty targeting program.</td>
</tr>
<tr>
<td>P118826</td>
<td>India: Bihar Integrated Social Protection Strengthening Project</td>
<td>2013</td>
<td>India</td>
<td>Yes</td>
<td>Strengthen delivery of social pensions and social care services for PWDs focusing on: (i) promoting an enabling policy environment by developing policies, programs and operational guidelines for institutional and rehabilitation center for the disabled. Outcome indicator: Improved job placement, especially among the disabled and young workers. Improvement of the quality of client services in State Social Security Services (SSSS) and disability pension certification system.</td>
</tr>
</tbody>
</table>
| P128150 | Improved Policy Making and Institutional Framework for PWDs | 2011 | Romania | Yes | Yes | Disability-specific
Improve targeting and assessment of PWDs for qualifying for disability pension, includes national database for PWDs. Includes service delivery models | non-institutional care targeted (rehabilitation)/ |