

**AN ASSESSMENT OF SELECTION CRITERIA FOR BENEFICIARIES OF THE
DISABILITY FUND**

BY

AWUKU ANITA ASARE

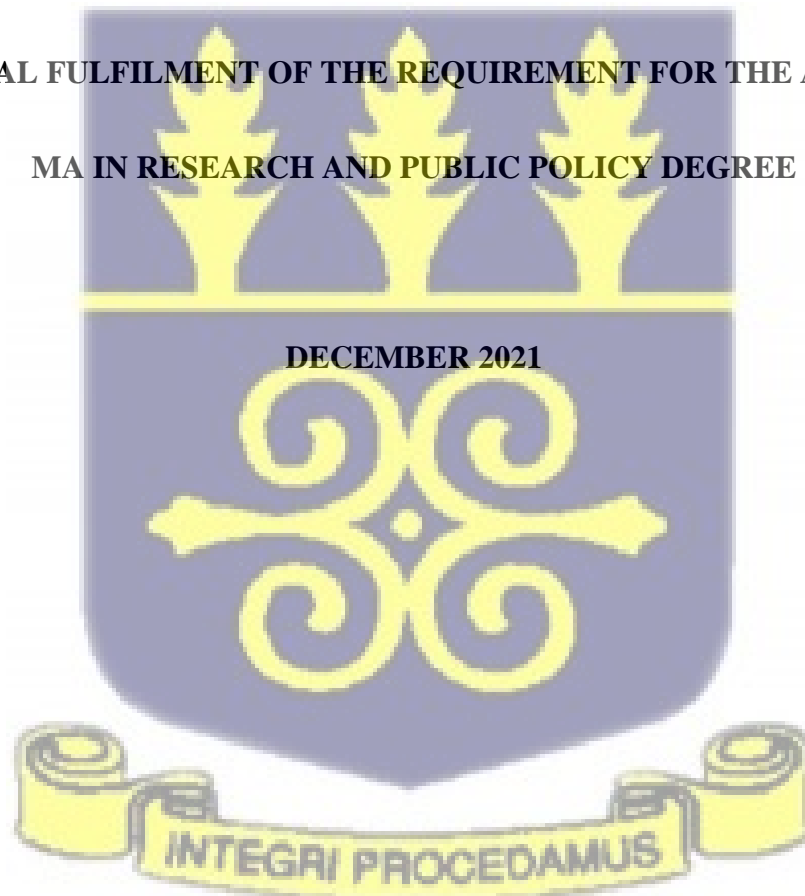
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THIS DISSERTATION IS SUBMITTED TO THE UNIVERSITY OF GHANA, LEGON

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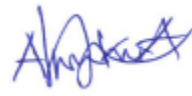
MA IN RESEARCH AND PUBLIC POLICY DEGREE

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Declaration

I, Anita Asare Awuku hereby declare that except for references to other scholarly works which have been duly acknowledged, this dissertation is the result of my own research carried out at the Centre for Social Policy Studies of the University of Ghana under the supervision of Dr. Kwadwo-Opoku. This work has not been presented in whole or part elsewhere for any other purpose.



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Date: 9th August, 2022



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INTEGRI PROCEDAMUS

Abstract

The 3% District Assemblies' Common Fund (DACF) for Persons with Disabilities (PWD), also referred as the Disability Fund was introduced to minimize poverty among all PWDs particularly, those outside the formal sector of employment, and enhance their social image through dignified labour. A Disability Fund Management Committee (DFMC) in every Metropolitan, Municipal and District Assembly (MMDA) is charged with the vetting and approval of received applications; monitoring and supervising utilization of the fund; sensitizing all relevant stakeholders at the district level and reporting on the fund. This study investigated needs presented by PWDs to DFMCs for funding and factors which guide the selection of beneficiaries, specifically in Shai Osudoku district, La Dade-kotopon municipality and Tema metropolis between 2018 and 2020. The study's objectives were achieved through the analysis of secondary data on applicants' forms and Key Informant Interviews (KII) of selected DFMCs. Based on years for which data was available, the study's findings indicate that the prominent need presented by PWDs was assistance for Income Generating Activities (IGA) followed by requests for medical assistance and educational/apprenticeship support. The study also showed that none of the participating MMDAs was able to meet the needs of all PWD applicants which necessitates the selection of fund beneficiaries using the following factors; most vulnerable applicant, first time beneficiaries and completeness of applications. The DFMCs indicated the allocation of meagre funds among numerous applicants and the delayed disbursement of the fund from central government as challenges with the selection of beneficiaries. Among others, recommendations are made for Central Government to ensure timely disbursement of the fund to MMDAs; the National Council on Persons with Disabilities (NCPD) to advocate increased percentage of the DACF allocation for the fund and adopt measures for appropriate data management especially on fund applicants.

Dedication

This work is dedicated to God Almighty for His infinite providence throughout my course and to the Asare Awuku family for the immense support.



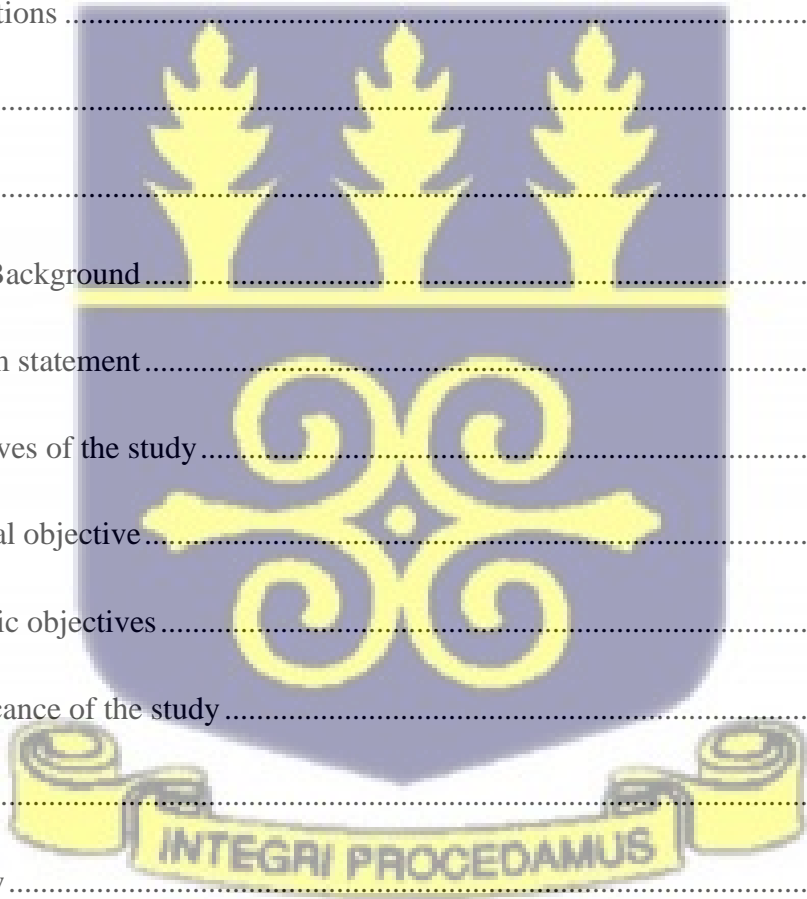
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My heartfelt gratitude goes to Dr. Kwadwo-Opoku for working tirelessly with me to complete this work. In addition, I wish to acknowledge my parents, siblings and husband for their encouragement and support throughout my studies.

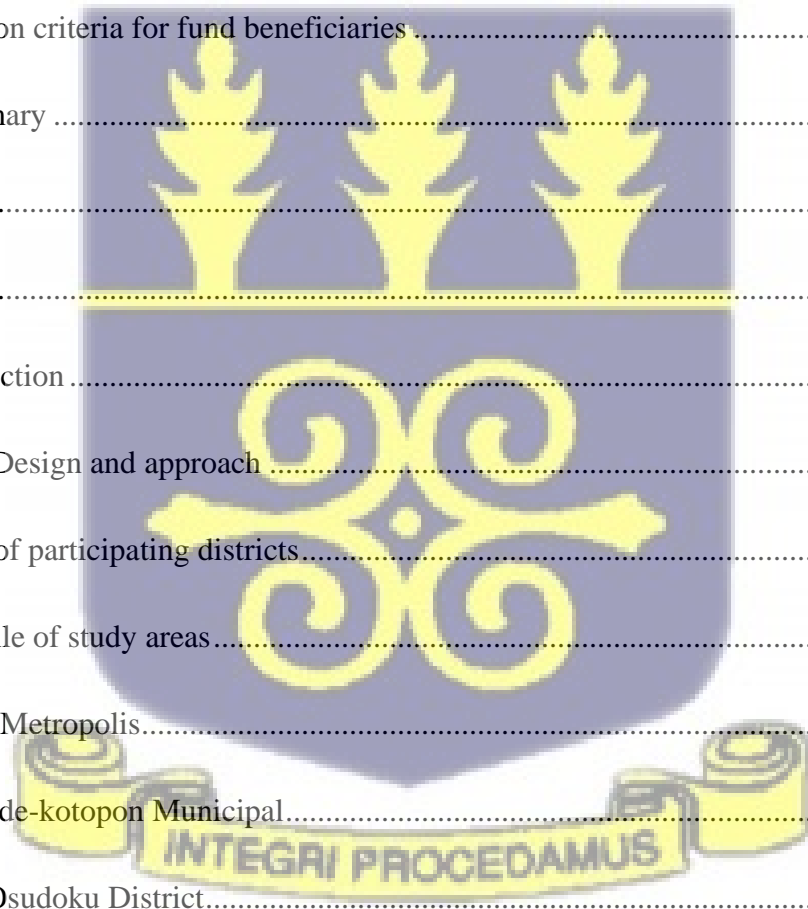
Finally, I am grateful to Directors of Social Welfare and Community Development in Shai Osudoku District, La Dade-kotopon Municipal and Tema Metropolis and the NCPD representative of these districts for readily providing information to support this research work.



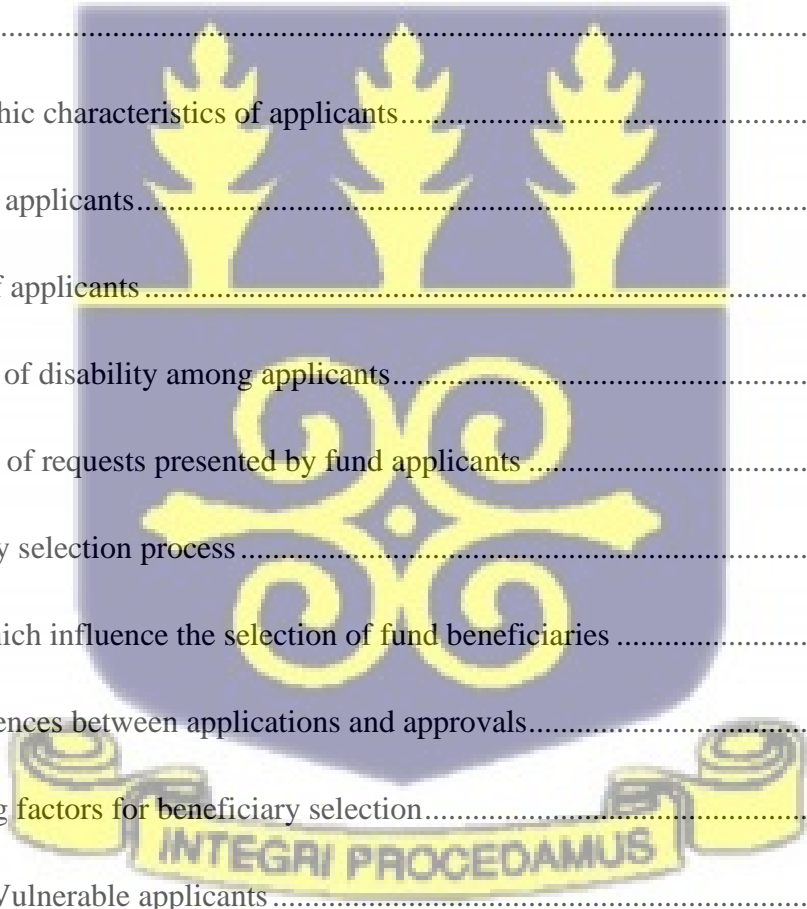
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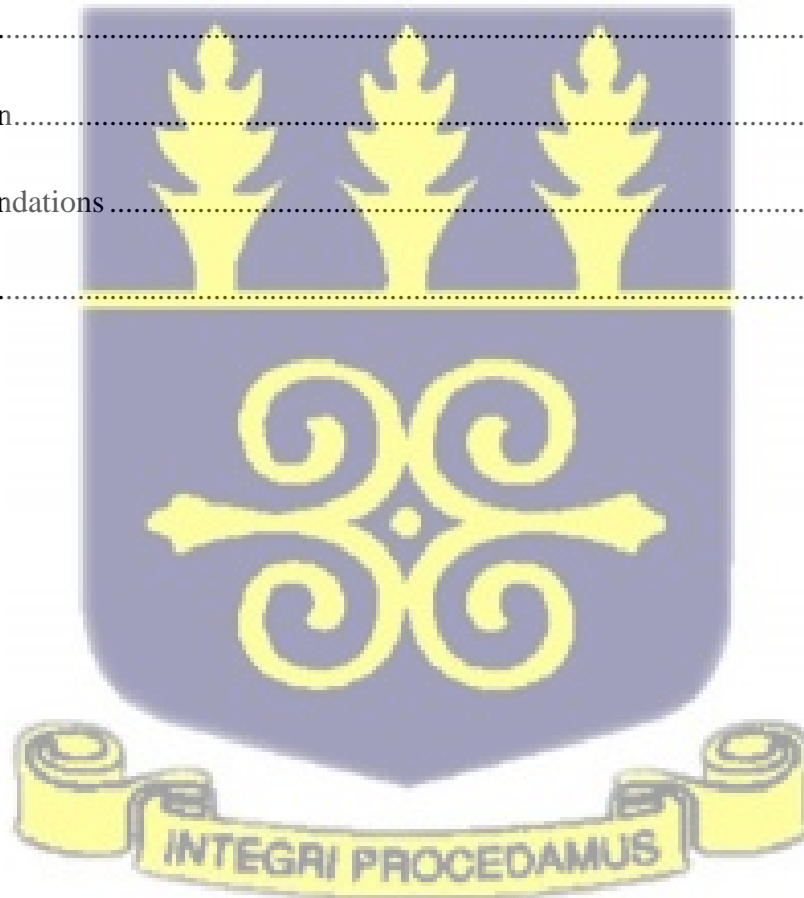
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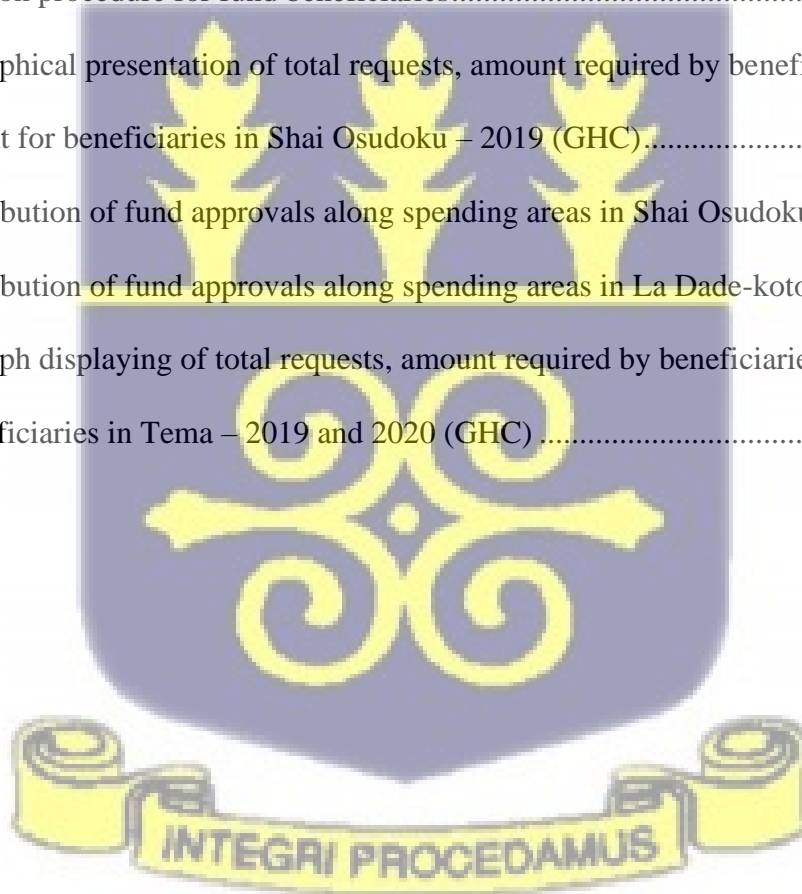
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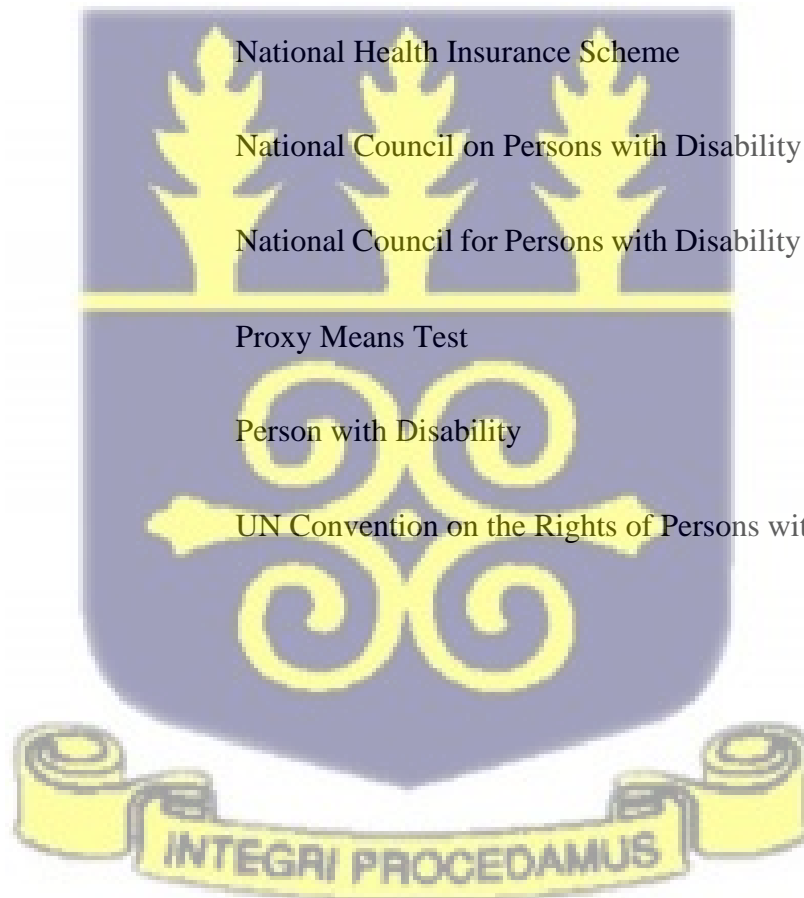
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List of Abbreviations

DACF	District Assemblies' Common Fund
DFMC	Disability Fund Management Committee
DSWCD	Department of Social Welfare and Community Development
GFD	Ghana Federation for Disability Organizations
KII	Key Informant Interview
LEAP	Livelihood Empowerment Against Poverty
MMDA	Metropolitan, Municipal and District Assemblies
NHIS	National Health Insurance Scheme
NCPD	National Council on Persons with Disability
NCPWD	National Council for Persons with Disability (applicable to Kenya)
PMT	Proxy Means Test
PWD	Person with Disability
UNCRPD	UN Convention on the Rights of Persons with Disabilities





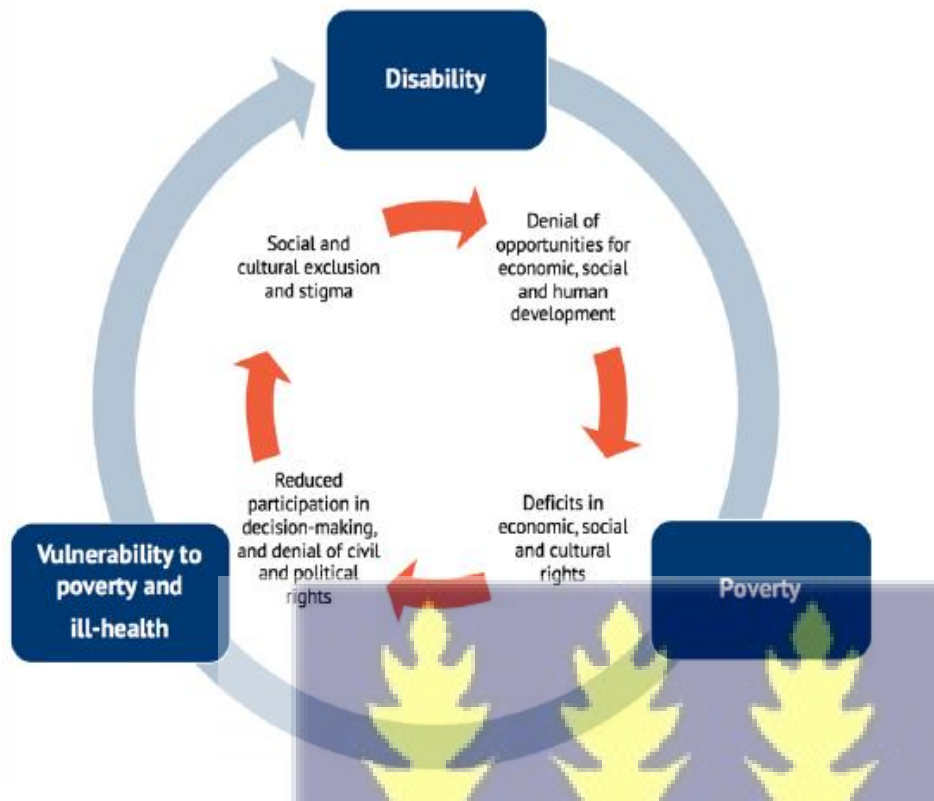
Chapter One

Introduction

1.1 Study Background

A disability is any condition of the body or mind (impairment) that makes it more difficult for the person with the condition to do certain activities (activity limitation) and interact with the world around them (participation restrictions) (Centres for Disease Control and Prevention, 2020). “In Ghana, persons who are unable to or are restricted in the performance of specific tasks/activities due to loss of function of some part of the body as a result of impairment or malformation are classified as PWD” (Ghana Statistical Service, 2014, p. 28). Stemming from the limitations/restrictions of disability on the individual – for instance, his/her inability to participate fully in economic activities and the extra cost (cost of assistive devices, medical care among others) of living, research has shown that there is a positive correlation between poverty and disability. A study by Mitra, Posarac & Vick (2013) revealed that disability is significantly associated with higher multidimensional poverty, lower educational attainment, lower employment rates and higher medical expenditures. Additionally, the World Health Organization (n.d) asserts that people with disability experience poorer health outcomes, have less access to education and work opportunities, and hence are more likely to live in poverty than those without a disability. The situation in Ghana is no different as a report by the Ghana Statistical Service (2014) on disability stresses that “disabled people are poorer as a group than the general population, and that people living in poverty are more likely than others to be disabled”. Asuman, Ackah & Agyire-Tettey (2020) also uncovered that 38.5% of households with PWDs are below the national poverty line compared to 22.6% of households without a person with disability. This link between disability and poverty justifies the adoption of interventions/policies to enhance the livelihoods of PWDs at the global, regional and national level.

Figure 1: A graphical presentation of the link between disability and poverty



Source: Adapted from the UK Department of International Development

(www.endthecycle.org.au)

Figure 1 above shows a cyclical relationship between poverty and disability. In one instance, circumstances linked with poverty such as inadequate access to health care, education and poor nutrition increase susceptibility to disability. On another hand, people with disabilities are more likely to incur additional health care costs, denied education and other economic opportunities which are likely to result in poverty.

Disability models have been instrumental to understanding causes of disability and in effect, society's response towards improving the functioning of persons with disabilities. Literature on disability models proves some sort of 'evolution' overtime due to the changing perceptions of disability. Nevertheless, this evolution does not entirely mean the non-existence of an older model

of disability, it specifically means the addition of new perspectives to the causes and ways of addressing disability. Thus, there could be individuals or societies within the 21st century who still subscribe to the moral model of disability—the oldest model of disability—and hence believe that disability is the result of punishment for an offence to a deity.

“The moral/religious model of disability is the oldest model of disability and is found in a number of religious traditions, including the Judeo-Christian tradition” (Pardeck & Murphy 2012: xvii).

This model explains that disability is the result of a punishment for an offense to a deity by the PWD or a close relation (Retief, M. & Letšosa, R., 2018; Disabled World, 2019). In the Christian religion, a good example of this model is exhibited in John 9:1-2 of the Holy Bible where disciples of Jesus Christ requested to know who had sinned after they encountered a man who has been blind from birth, thereby, attributing the blind man’s predicament to sin. In an assessment of the negative impact of this model on individuals with disability and their families, Rimmerman (2013) refers to exclusion from social participation as a possible consequence of this model.

From the mid-1800s onwards, the medical (or biomedical) model of disability began to gradually replace the moral model due to significant advances in the field of medical science (Retief, M. & Letšosa, R. 2018). Olkin (1999) provides defining elements of the medical model of disability as follows.

Disability is seen as a medical problem that resides in the individual. It is a defect in or failure of a bodily system and as such is inherently abnormal and pathological. The goals of intervention are cure, amelioration of the physical condition to the greatest extent possible, and rehabilitation (i.e., the adjustment of the person with the disability to the condition and to the environment). Persons with Disabilities are expected to avail themselves of the variety of services offered to them and to spend time in the role of patient or learner being helped by trained professionals. (Olkin, 1999, p. 26)

Accordingly, the medical model of disability expects that PWDs play the ‘sick role’ properly if they desire to receive continued help and support from society.

Berghs M, et al. (2016) emphasize that the social model arose from the experiences and activism of disabled people in the United Kingdom and the United States of America from the early 1970s.

D’Alessio (2011) also posits that this model emerged in response to limitations of the medical model of disability. This model is of the view that ‘it is society which disables people with impairments, and therefore any meaningful solution must be directed at societal change rather than individual adjustment and rehabilitation’ (Barnes, Mercer & Shakespeare 2010, p. 163). Barnes (2012) further explains that up until the late 1960s, severely disabled people did not have access to disability-related welfare and their only options were residential care or ‘poverty and social isolation in the community’. Welfare entitlements, for instance, existed only if a person had gained injuries through employment-related activities. Hence, early activism in the UK was linked to ensuring the economic welfare of PWDs. In effect, the social model is especially concerned with addressing the ‘barriers to participation’ experienced by PWDs because of various social and environmental factors in society (O’Connell, Finnerty & Egan, 2008).

Historically, the 1980s marked the emergence of disability as a global issue. By the 1990s, disability was firmly on the UN agenda and began to be mentioned explicitly by conventions such as the International Committee on Economic, Social and Cultural Rights in 1993 and more specifically, the UN Convention on the Rights of Persons with Disabilities (Berghs et al., 2016 p. 32-37). Degener (2017) also outlines the following characteristics of the human rights model to disability.

- It offers a theoretical framework for disability policy that highlights the human dignity of PWDs
- It encompasses civil, political, economic, social and cultural rights of PWDs

- It offers constructive proposals for improving the life situation of PWDs

Thus, the human rights model to a large extent provides a basis which addresses the holistic needs of PWDs. Mention can also be made of the Protocol to the African Charter on Human and Peoples' Rights on the Rights of Persons with Disabilities in Africa and target 10.2 of Agenda 2030 – stated as “by 2030, empower and promote the social, economic and political inclusion of all, irrespective of age, sex, disability, race, ethnicity, origin, religion or economic or other status” United Nations (n.d.) – as emanating from the human rights model of disability.

The District Assemblies Common Fund Act (Act 455) of Ghana mandates Parliament to annually allocate not less than five percent of the country's total revenues to District Assemblies for development, in tandem with clause (2) of article 252 of the 1992 constitution. The allocation to Metropolitan, Municipal and District Assemblies (MMDAs) commenced in 1994. Since 2008, the DACF has constituted 7.5% of national revenue (“District Assemblies' Common Fund Increased,” 2007).

The DACF is allocated between MMDAs using a formula which is approved by parliament on annual basis. The 2020 formular for sharing the DACF outlines **basic needs, service pressure and equality** as factors which determined the quantum of DACF for MMDAs. The ‘basic needs’ component comprise the availability of health and education services and water and tarred road coverage. Under this factor, MMDAs with more of these facilities receive less allocation to ensure equity. The ‘service pressure’ determinant is meant to cater for the pressure of rural/urban migration or population growth on facilities of existing MMDAs by aiding the maintenance of these facilities. The ‘equality’ factor is simply the equal distribution of the fund among MMDAs prior to application of the other two remaining factors. The above factors show that there are disparities in amounts received by MMDAs as their share of the DACF.

Since 2005, a percentage of MMDAs allocation has been earmarked for PWD, popularly known as the disability fund with the aim of minimizing poverty among all PWDs particularly, those outside the formal sector of employment, and enhancing their social image through dignified labour (NCPD/GFD, 2010 p. 2). Between 2005 and 2016, 2% of the MMDAs DACF made up the disability fund. This percentage quota for PWDs was reviewed upward to 3% from 2017 to date.

This fund is managed at the Metropolitan, Municipal and District Assembly (MMDA) level by the Department of Social Welfare and Community Development. Fund allocations are deducted at source and deposited into a separate account of MMDAs for its specified use. A Disability Fund Management Committee (DFMC), comprising district representative of the National Council on Persons with Disability (NCPD), Chairperson of the Social services sub-committee, Director of the Department of Social Welfare; District representative of the Ghana Federation of Disability Organizations (GFD) and a co-opted technical member(s) is charged with the vetting and approval of applications received from PWDs and OPWDs; monitoring and supervising utilization of the fund; sensitizing all relevant stakeholders at the district level; and the presentation of quarterly report on the management of the fund to District Assembly and district NCPD representative (NCPD/GFD, 2010). This implies that the DFMC plays a key role in determining who benefits from the fund and its associated impact on their livelihoods.

Guideline for disbursement and management of the disability fund (NCPD/GFD, 2010) outlines the following areas for spending.

1. Advocacy/awareness raising on the rights and responsibilities of PWDs
2. Strengthening of Organizations of Persons with Disabilities (OPWDs)/Organizational development).
3. Training in employable skills/apprenticeship.
4. Income generation activities (input/working capital).

5. Educational support for children, students and trainees with disability.
6. Provision of technical aids, assistive devices, equipment and registration of NHIS.

Regarding disbursements, a circular disseminated to districts by the NCPD requires that 75% of the fund is allocated for IGA purposes; 10% for medical/assistive devices; 10% for educational support and 5% as administrative cost which includes monitoring and sitting allowances of committees.

1.2 Problem statement

A thorough literature search on the disability fund DACF reveals a significant focus on its impacts and contributions to the well-being of beneficiaries, largely neglecting influencing factors for the selection of beneficiaries and the nature of requests presented by PWDs. In terms of impact and contributions to the well-being of PWDs, for instance, the fund has been proven to positively contribute to the livelihoods of PWDs. Studies by Opoku et al, (2018); Ofori, (2017); Adjei-Domfeh, (2015); Agboga, (2015) revealed that transfers to PWDs resulted in easy access to capital for business, payment of school fees and the acquisition of assistive devices. Again, an article by Ashiabi & Avey, (2020) on transparency and selection criteria fund beneficiaries in the Upper East region showed that the provision of assistive devices and purchase of equipment for income generating activities were influenced by district political heads for members of their political parties who have a disability. The authors further recommended that the study should be replicated in other MMDAs considering the poverty rate in the region which translates into numerous applications. Moreover, guideline for disbursement and management of the fund is silent on issues of qualification aside spending areas, frequency of access among others. This indicates the likelihood of DFMCs of different MMDAs to utilize different selection criteria in the selection of fund beneficiaries.

Again, to the best of my knowledge, I am yet to come across a study which investigates the extent to which applications presented by applicants of the fund fall within the prescribed areas of funding or otherwise.

This study is therefore essential to generating evidence on what informs the selection of fund beneficiaries and the nature of requests presented by PWDs in participating districts to improve knowledge around the fund.

1.3 Objectives of the study

1.3.1 General objective

The study seeks to determine the nature of applicants' requests between 2016 and 2020 and examine factors which influence the selection of fund beneficiaries.

1.3.2 Specific objectives

1. To assess the nature of requests presented by PWDs
2. To determine factors which influence the selection of beneficiaries

1.4 Significance of the study

This study is crucial to unearthing factors which influence the selection of fund beneficiaries and the nature of needs presented to DFMCs for support vis-a-vis listed areas in the disbursement and management guideline. Again, it will serve as a precedent for further research on selection criteria for fund beneficiaries as well as the needs of PWDs. Ultimately, findings of the study will supplement knowledge on the fund in relation to the aforementioned areas and inform policy decisions around the fund.

Literature review

Introduction

This chapter will highlight the number of Persons with disabilities in Ghana, policies to enhance their wellbeing and a suitable theoretical framework for the study.

2.1 Disability in Ghana and national-level response

2.1.1 Disability in Ghana

Disability report of the 2010 Population and Housing Census estimates that 3 percent (737,743) of Ghanaians are with a disability. Out of this percentage, females with disability comprise 52.5% (387,647), compared with males, who constitute 47.5% (350,096). Additionally, approximately 38% (282,892) of these persons have multiple disabilities. Regarding types or forms disability, sight or visual impairment constitutes 40.1%, persons with hearing impairment comprised 15%, whereas speech, physical, intellectual, emotional and other forms of disabilities constituted 14%, 18%, 15%, 17% and 10% respectively. The various forms of disability are displayed in figure 2 below.

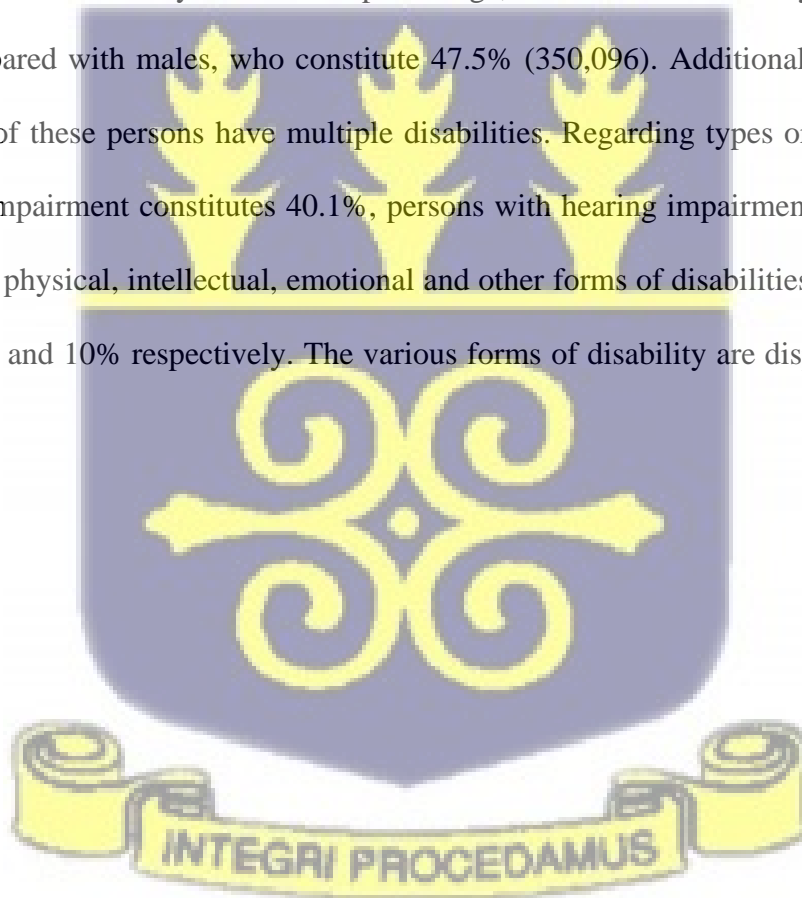
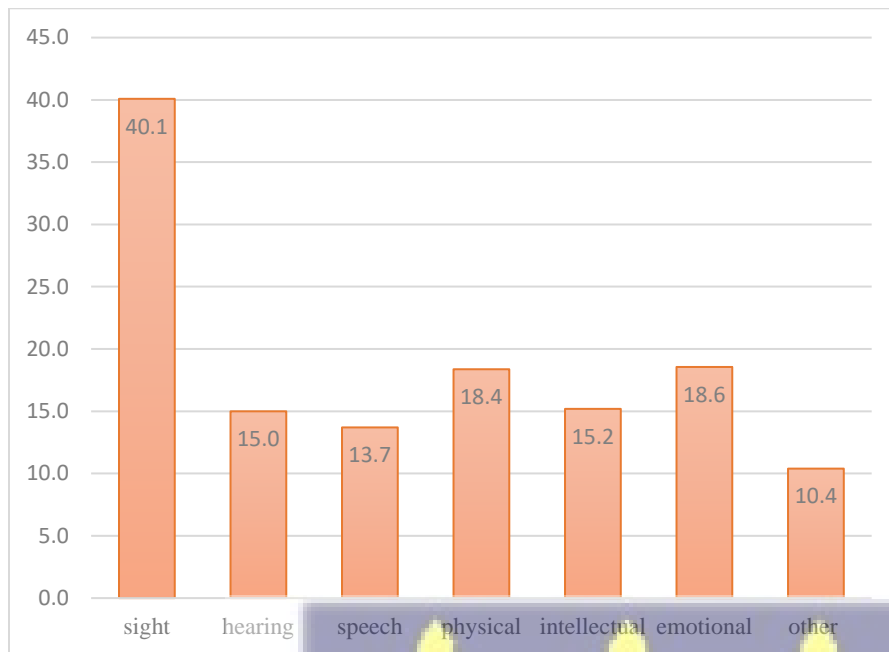


Figure 2: Forms of disability in Ghana (%)



Source: Ghana Statistical Service 2014

2.1.2 National-level response to disability in Ghana

Possibly stemming from the human rights perspective, several legal instruments have been put in place to safeguard the rights of PWDs. These include the 1992 Constitution, the Children's Act of 1998, the National Disability Policy of 2000, the Labour Act of 2003 and the Disability Act of 2006. Moreover, on 21st August 2012, the United Nations Office of Legal Affairs announced Ghana's ratification of the United Nations Convention on the Rights of Persons with Disabilities, over 5 years after signing the convention in March 2007 (Human Rights Watch [HRW], 2012).

Article 29 (subsections 1 to 8) of the country's 1992 constitution outlines the rights of persons with disabilities to include non-differential treatment, protection from exploitation, access to special incentives for PWDs engaged in business and the enactment of laws necessary to ensure the enforcement of this article's provisions. Additionally, sections 3 and 10 of the Children's Act (Act 560) highlights non-discrimination against a child on the ground of disability and the

treatment of children with disability respectively. Moreover, goal of the National Disability Policy, which was adopted in 2000 is to ensure that by 2020 PWDs actively participate in the national development process through equalization of opportunities that will improve their quality of life (Ghana Statistical Service, 2010). The National Disability Policy paved the way for passage of the Disability Act which in my opinion is a more direct act focused on the welfare of PWDs compared with the aforementioned legislations. The Disability Act has eight major sections aimed at promoting the course of PWDs. These sections focus on the general rights of PWD, employment, education, transportation, health., miscellaneous provisions and establishment of the National Council for Disability and its administrative and financial provisions.

Interventions introduced in Ghana to enhance the livelihood of PWDs include the Livelihood Empowerment Against Poverty (LEAP) programme, the Disability Fund and the employment of 50% PWDs as booth workers (Lartey, 2017). The LEAP is a cash transfer programme for vulnerable groups including persons with severe disabilities without productive capacity. All beneficiaries of the LEAP, including PWDs must have undergone a Proxy Means Test (PMT) to establish the existence of poverty/vulnerability. Thus, a PWD beneficiary of the LEAP must be severely disabled without productive capacity and pass the PMT as well. Under this programme, beneficiary households receive GHC 64 every two months.

2.2 Disability-related interventions in Africa: A look at support for PWDs in Kenya

The Kenyan and Ghanaian Governments have similar interventions aimed at enhancing the livelihoods of PWDs. Like the provision for persons with severe disabilities without productive capacity under the LEAP programme in Ghana, the National Safety Net Programme - Cash Transfer for Persons with Severe Disabilities (PWSD CT) - is available for PWDs in Kenya. In a bid to enhance the capacities of care givers, improve the livelihoods of persons with severe disabilities and reduce negative impact of disability on households, the programme targets adults

and children with severe disabilities who require full time support of a caregiver (Kenya Disability Resource, n.d.).

In addition, spending areas of the Kenyan government's disability services, benefits, and grants are provided through the National Council for Persons with Disabilities (NCPWD) are highly comparable with expenditure areas of the disability fund in Ghana. PWDs in Kenya who wish to benefit from the fund must first register with the NCPWD. The Kenyan NCPWD provides several services including **economic empowerment grants** to community and self-help groups of PWDs to enhance self-sufficiency in income generating activities among others; **educational assistance** which covers up to 75% of course fees whereas applicants are expected to cover 25%. Applicants in formal employment are required to cover 50% of fees while the fund covers up to 50%. In exceptional circumstances the fund provides 100% of fees when applicants demonstrate extreme poverty. **Infrastructure and equipment grants** are provided to enhance the maintenance and growth of organizations which provide social services for persons with disabilities. Specifically, these infrastructure and equipment are aimed at improving access to these institutions by PWDs. **The Albinism Support Program** aims to cushion persons with albinism from the effects of harmful sun rays, which leads to skin cancer through the provision of lotions, lip balms, and other services for all Persons with Albinism. The NCPWD also has legal advisory services which provides professional legal services to PWDs, Ministries and departments and the public as well as for connected purposes. Moreover, a **'Tools of Trade'** empowerment programme is available for youth with disabilities to provide them with employment and wealth creation opportunities in sectors such as catering, automotive engineering, agriculture and beauty among others. Beneficiaries of this intervention are provided start-up tool kits to start their own businesses. In the 2019/2020 financial year for instance, the NCPWD provided education support to 4032

applicants, economic empowerment for 290 PWD groups, assistive devices for 3544 persons, tools of trade for 254 persons and infrastructure and equipment for 21 institutions.

2.3 Theoretical framework

2.3.1 The concept of social justice

The United Nations Department of Economic and Social Affairs recognizes that social justice is an underlying principle for peaceful and prosperous coexistence within and among nations (United Nations, n.d). Again, the department emphasizes that the principles of social justice are advanced when barriers faced by people due to gender, age, race, ethnicity, religion, culture or disability are removed. Khechen (2013), recognizes four (4) principles of social justice from John Rawls and Nancy Fraser's perspectives on social justice as follows: equality, equity, rights and participation. The principle of equality implies that all individuals are entitled to benefit from public goods and resources. The equity principle recognizes that the concept of fairness as equal or uniform distribution is not always the case due to existing differences or situations (such as disability, age and geographical location among others) that prevent or reduce the ability of certain individuals or groups to gain equal access to public goods, resources and opportunities. Hence, equitable treatment ensures that people would get a 'well-deserved' treatment based on their actual circumstances, which takes into consideration their limitations. Rights usually comprise legal rights such as the right to receive payment for service rendered according to agreed terms; moral rights, which include people's basic human rights and liberties such as the right to education (Smith, 1994; Lee & Smith, 2004). Participation in the arena of social justice is centred on involving people in decisions that concern them. This surpasses engaging them in decisions on service delivery and ensuring their full participation in political and cultural life. Participation is geared towards achieving better distributive outcomes and strengthening democracy. Embedded in the concept of social justice is 'distributive justice' which is defined as 'the justice that is

concerned with the apportionment of privileges, duties, and goods in consonance with the merits of the individual and in the best interest of society' (Merriam-Webster Dictionary, n.d.).

2.3.2 John Rawls' theory of social justice and the 3% disability fund for PWDs

John Rawls' theory of social justice is adopted in this study. Rawls' theory of social justice originates from the concern to achieve a socially just distribution of "primary social goods". He describes social goods as "things that every rational man is presumed to want". Subsequently, he categorizes them broadly into rights, liberties, opportunities, income, wealth and self-respect. His book, *A Theory of Justice* associates justice with fairness ("justice as fairness") and explains that "the primary subject of justice is the basic structure of society, or more exactly, the way in which the major social institutions distribute fundamental rights and duties and determine the division of advantages from social cooperation" (Rawls, 1971, p. 4). Again, Rawls refers major institutions as "the political constitution and the principal economic and social arrangements".

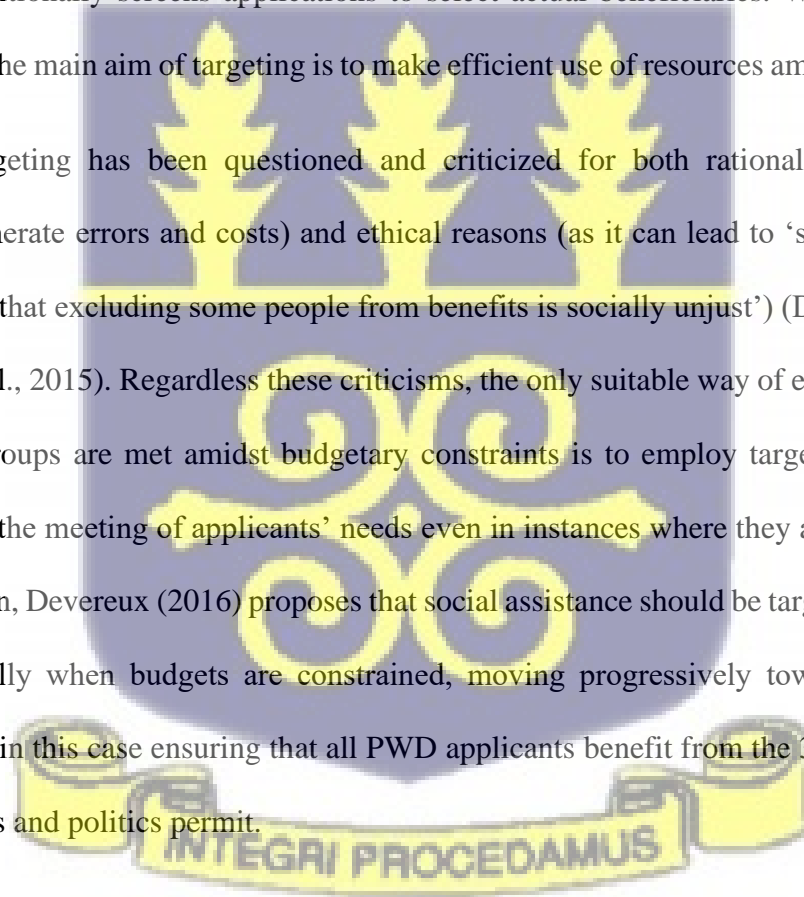
For Rawls', the concept of distributive justice is based on the concern to compensate individuals for their misfortunes and modify the distribution of goods and evils in society.

In tandem with the above exposition on social justice, the 3% DACF for PWDs can be classified as a form of social justice in that, it recognizes that PWDs are disadvantaged in a way and therefore provides some resources at the MMDA level to somewhat meet their needs along the prescribed spending areas. Nevertheless, due to scarce resources, not all deserving PWDs benefit from the fund in their year of application (Adjei-Domfeh, 2015; Ofosu, 2017). In these instances, DFMCs select actual beneficiaries out of applicants in line with available funds which is quite like targeting.

2.4 Targeting for social protection interventions

"Targeting refers to any mechanism to identify eligible individuals, households and groups, for the purposes of transferring resources or preferential access to social services" (Devereux et al.,

2015, p. 7). Popular targeting mechanisms include means testing, proxy means tests, categorical, geographic, community-based, and self-selection or self-targeting (Devereux et al., 2015, p. 3). The leading rationale for targeting “is to direct programmes to those who will most benefit” (White, 2017, p. 145). In addition, targeting may have other aims such as: to maximise poverty reduction; to ensure no one is ‘left behind’; to contain the costs of provision; and to make the most efficient use of resources when faced with budget limits; or for political gains (Devereux et al., 2015, p. 7–8; Kidd & Athias, 2019, p. ii). Targeting under the 3% DACF for PWDs can be said to be based on ‘self-selection’ as applicants present applications on their own behalf to be considered as beneficiaries. Nevertheless, self-selection is not the only determinant of eligibility for funding. The DFMC additionally screens applications to select actual beneficiaries. With respect to the disability fund, the main aim of targeting is to make efficient use of resources amidst budget limits. The use of targeting has been questioned and criticized for both rational (as all targeting mechanisms generate errors and costs) and ethical reasons (as it can lead to ‘social divisiveness and perceptions that excluding some people from benefits is socially unjust’) (Devereux, 2016, p. 1; Devereux et al., 2015). Regardless these criticisms, the only suitable way of ensuring that needs of vulnerable groups are met amidst budgetary constraints is to employ targeting which could imply deferring the meeting of applicants’ needs even in instances where they are well-deserving of support. Again, Devereux (2016) proposes that social assistance should be targeted at those who need it, especially when budgets are constrained, moving progressively towards “categorical universalism” – in this case ensuring that all PWD applicants benefit from the 3% disability fund - when resources and politics permit.



2.5 Contribution of the disability fund to the well-being of PWDs in Ghana

The 3% DACF for PWDs has proven to be instrumental to meeting the health, educational, business and apprenticeship needs of applicants. For instance, a study by Fosu (2017) in the East Akim Municipality revealed that an oven and accompanying accessories were provided for the Kibi School for the deaf to enhance teaching and learning. Again, another PWD in the same municipality indicated purchasing a sewing machine with allocation from the fund which yielded proceeds to fend for the needs of her children. Moreover, Agboga (2015) established that 38% of PWDs who were unemployed prior to intervention of the fund were all involved in trading and farming and some others enrolled in school. Regarding health, some PWDs had been provided technical aids with plans to enroll PWDs on to the National Health Insurance Scheme (NHIS) to improve their access to healthcare in the same district. Similarly, in Ada East, the fund supported the enrolment of PWDs into special schools, the payment of fees and levies and payment for stationery and other needs (Agboga, 2015). Additionally, in 2014, fifty-one Persons with Disabilities were supported with assistive devices comprising white canes, spectacles, braille, clutches, wheelchair and hearing aids among others in Kumasi metropolis (Adjei-Domfeh, 2015). Adjei-Domfeh (2015) further established that out of a total of sixty-eight requests (68) for assistive devices in 2014, a total of fifty-one (51), constituting 75% were provided. This situation is likely to have improved following increment of the fund to 3% in 2016, which translates into increased quantum of allocation. In the East Akim Municipality for instance, total amount of the fund in 2016 was GHC 114,612.48, compared to the highest allocation of GHC 46,119.54 in 2015 as total receipt for the fund between 2012 and 2015. The increase of approximately 148.5% is a result of increment of the fund from 2% since inception to 3% in 2016.

2.6 Selection criteria for fund beneficiaries

Aside outlining spending areas of the fund and establishing that beneficiaries of the fund must be PWDs, the NCPD guideline for disbursement and management of the disability fund does not provide clear-cut guides for the selection of fund beneficiaries. This suggests that DFMCs of various MMDAs can use their discretion to decide on some eligibility criteria for the selection of beneficiaries without contradicting the guideline. Considering the contributions of the fund to the wellbeing of beneficiaries and its inadequacy to meeting the requests of all applicants, it is essential for it to be disbursed among persons in dire need for their lives to be positively affected.

There is little evidence on what DFMCs consider during the selection of beneficiaries. Nevertheless, Ashiabi & Avey (2020) reveal that the selection of fund beneficiaries in the Upper East region regarding the provision of assistive devices and purchase of equipment for income generating activities were influenced by district political heads for members of their political parties with a disability. Ashiabi & Avey (2020) further recommend that the study is repeated in other MMDAs considering the high poverty rate in the Upper East region which translates into numerous applications and in effect, the involvement of political heads at the district level.

While there is appreciable literature on contribution of the fund to the well-being of beneficiaries, relatively little is known about the proportion of applicants who receive support from the fund as well as factors which influence their selection. These gaps will be addressed by this study

Chapter summary

This chapter provided an exposition on the number of PWDs in Ghana and policies rolled out to enhance their wellbeing. Reference was also made to the concept of social justice with specific



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focus on John Rawls theory and its link with the disability fund. The chapter ended with evidence from other studies on contribution of the fund to the wellbeing of beneficiaries.



Methodology

3.0 Introduction

This chapter explains the research design, sampling techniques, study area, data collection methods and analysis and limitations of the study.

3.1 Research Design and approach

A research design is a general plan or strategy for conducting a research study to examine specific testable research questions of interest (Lavrakas, 2008). Thus, it provides a framework for data collection and analysis.

A mixed methods research approach was adopted for this study. Thus, there was an integration of both qualitative and quantitative research to meeting its objectives. Creswell et al. (2003) outlines six (6) types of mixed methods research as follows; sequential explanatory; sequential exploratory; sequential transformative; concurrent triangulation; concurrent nested and concurrent transformative. Specifically, the sequential explanatory type of mixed methods research was employed by this study.

The explanatory-sequential approach is a sequential approach and is used when the researcher is interested in following up the quantitative results with qualitative data. Thus, the qualitative data is used in the subsequent interpretation and clarification of the results from the quantitative data analysis. In many instances, because the quantitative design is the emphasis, a generic qualitative design is used in explanatory approaches. This two-phase approach is particularly useful for a researcher interested in explaining the findings from the first phase of the study with the qualitative data collected during phase two. (Edmonds and Kennedy, 2017, pp. 197).

As highlighted in Chapter 1, the study seeks to uncover trends of requests presented by PWDs and establish the proportion of applicants who received funding between 2016 and 2020. Information for this objective was derived from application forms and letters of applicants and analyzed using descriptive statistics, representing phase 1 of the explanatory-sequential approach as emphasized by (Edmonds and Kennedy, 2017). Phase 2 of the explanatory-sequential approach comprised Key Informant Interviews (KII) of selected DFMC members in participating districts to explain what guides the selection of fund beneficiaries and some results from the analysis of secondary data.

3.2 Selection of participating districts

The Ghana Statistical Service (2014) report on disability reveals the top three regions with the highest number of PWDs as Ashanti region, Greater Accra and Eastern region with 16.9%, 14.1% and 12.8% of PWDs respectively. Using a simple random sampling, the Greater Accra region was selected among the top three regions with the highest population of PWDs as focus region of the study.

Again, a simple random sampling approach was used to select participating districts within the Greater Accra region. Considering the study period, that is between 2016 and 2020, only sixteen (16) Metropolitan, Municipal and District Assemblies (MMDAs)¹ were in existence within the Greater Accra region. These districts were grouped into Metropolis', Municipals and Districts to further enable the researcher to understand the study's objectives within these differing levels of local governance. After the groupings were made, unique identification numbers were assigned each district on a piece of cardboard with the identification numbers concealed through folding. One piece of cardboard was selected from each of the categories. Selected districts were **Tema**

¹ List of existing MMDAs in Greater Accra in 2016 have been attached as an Appendix

Metropolitan Assembly, La Dade-kotopon Municipal Assembly and Shai Osudoku District Assembly.

3.3 Brief profile of study areas

Selected districts were fairly spread across the region as at 2016. All three MMDAs have a higher population of women with disability compared to men (Ghana Statistical Service, 2010). All things being equal, this is likely to translate into a higher proportion of female beneficiaries in beneficiary districts. Figure 3 below displays existing districts within the Greater Accra region as at 2016.

Figure 3: Map of existing districts in the Greater Accra region as of 2016

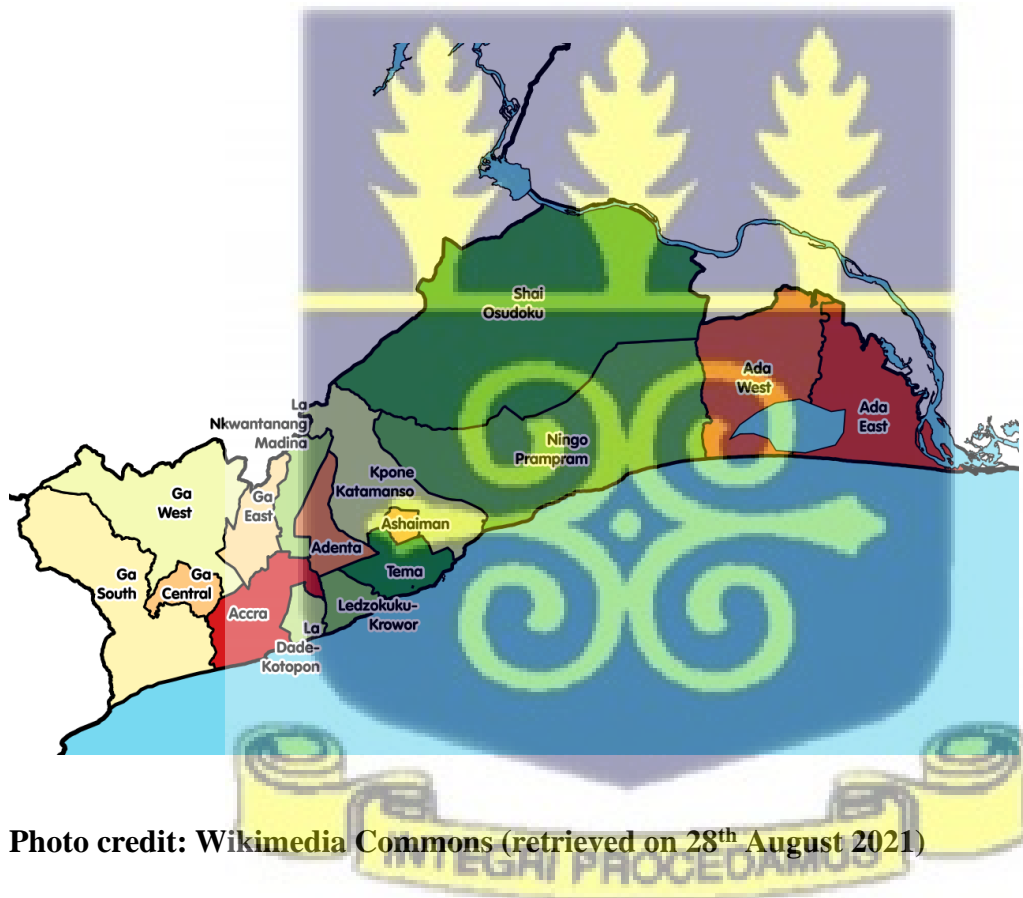


Photo credit: Wikimedia Commons (retrieved on 28th August 2021)

3.3.1 Tema Metropolis

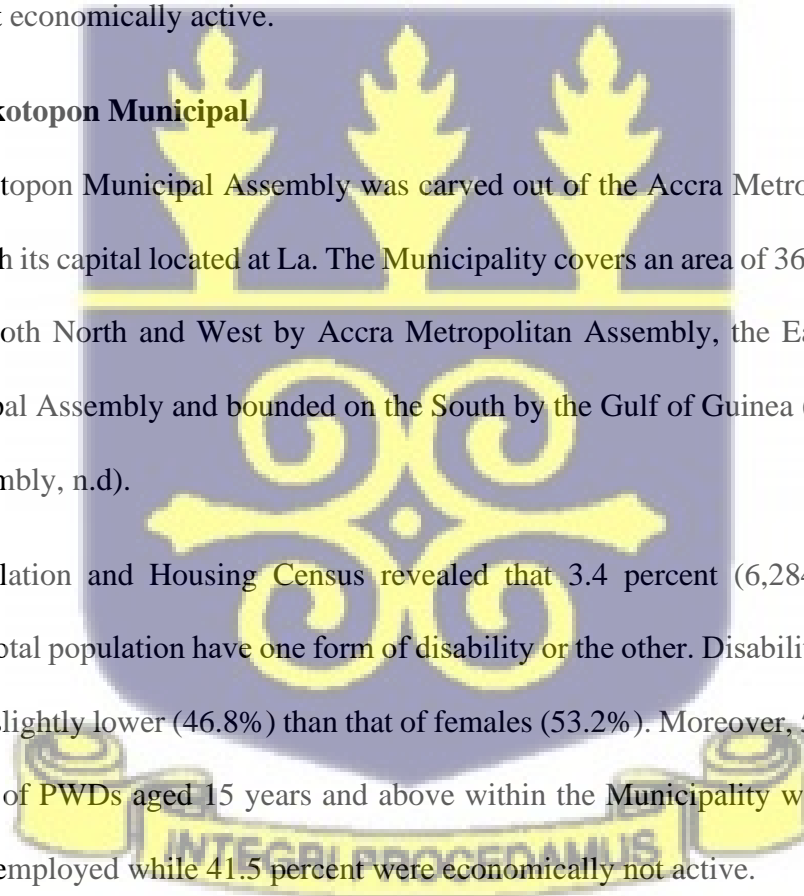
The Tema Metropolis shares boundaries on the North-East with the Kpone Katamanso and Ningo-Prampram Districts, South- West by Ledzokuku Krowor Municipal, North-West by Adentan Municipal and the Ga East Municipal, and the South by the Gulf of Guinea. The Metropolis covers an area of about 396km² (Tema Metropolitan Assembly, n.d).

The 2010 Population and Housing Census showed that 2.5 percent (7,269 persons) of the Metropolis' total population had one form of disability or the other. Disability among the female population with disability was slightly higher (52.9 %) than that of the male population (47.1 %). Among the Metropolis' persons with disabilities, 51.6 percent were employed whereas 43.1 percent were not economically active.

3.3.2 La Dade-kotopon Municipal

The La Dade-kotopon Municipal Assembly was carved out of the Accra Metropolitan Assembly in June 2012 with its capital located at La. The Municipality covers an area of 360sq km and shares boundaries on both North and West by Accra Metropolitan Assembly, the East by Ledzokuku Krowor Municipal Assembly and bounded on the South by the Gulf of Guinea (La Dade-kotopon Municipal Assembly, n.d).

The 2010 Population and Housing Census revealed that 3.4 percent (6,284 persons) of the Municipality's total population have one form of disability or the other. Disability among the male population was slightly lower (46.8%) than that of females (53.2%). Moreover, 53.3 percent of the total population of PWDs aged 15 years and above within the Municipality were employed, 5.2 percent were unemployed while 41.5 percent were economically not active.



3.3.3 Shai Osudoku District

The district was carved out of the former Dangme West District on 15th March 2012. It occupies 968.36sq km and shares boundaries with North Tongu District to the North-East, Yilo Krobo Municipality, and Upper Manya District to the North-West, Akwapim North Municipality to the West, Kpone Katamanso Municipality to the South-West, Ningo-Prampram District to the South, and Ada West District to the East (Shai Osudoku District Assembly, n.d).

According to the Ghana Statistical Service, 2.6 percent (1,335 persons) of the district's population in 2010 were with a disability. More females (55.8 %) than males (44.2 %) were with a disability. Again, 48.6 percent of Persons with Disabilities aged above 15 years in the district were employed as of 2010.

3.4 Study Population

The study population comprises DFMC members in participating districts. Key members of the DFMC participated in an interview to elicit responses on the selection criteria for beneficiaries. Data on PWD applicants and beneficiaries between 2018 and 2020 were also sourced from the various Departments of Social Welfare and Community Development to enable the researcher to assess the nature of requests presented by PWDs. This implies that direct contact was not made with applicants and beneficiaries. Different from the intended study period of 2016 to 2020, data on applicants and beneficiaries between 2018 and 2020 was utilized for the study because neither of the selected districts had information on applicants and beneficiaries prior to 2018.

3.5 Respondents' selection process

To address objective 1, data on all PWD applicants in participating districts between 2018 and 2020 was considered. Thus, total population sampling was employed. A total of 167; 130 and 184 forms of applicants in 2018, 2019 and 2020 respectively were assessed.

In line with the topic under investigation, Chairpersons of the DFMC, Directors of Social Welfare and Community Development and district representatives of the NCPD who are members of the committee were purposively selected to participate in Key Informant Interviews (KII) in response to research objective 2. The adoption of this purposive selection was based on my judgment on which respondents will be most appropriate and representative regarding their level of knowledge and expertise on the topic of interest (Babbie, 2007).

As with committees, Chairpersons are expected to lead discussions and provide overall leadership to the committee. Considering role of Directors of DSWCD in the receipt and compilation of all fund applicants, their participation is key. The district representative of the NCPD is expected to be abreast with guidelines set out by council regarding the fund and demonstrate these during committee meetings. A total of nine (9) DFMC members from the three participating districts were purposively selected to provide information in aid of the study.

To enhance the release of information by participating districts, introductory letters from the Centre for Social Policy Studies were presented to Coordinating Directors of participating districts. A directive was then sent to all Directors of Social Welfare and Community Development to provide information required for the study. In compliance with this, the Directors of Social Welfare and Community Development provided application forms for the study period and contact details of sampled DFMC members.

3.6 Data collection methods

Data was generated from an analysis of secondary data and in-depth interviews. In-depth interviews were conducted to gain comprehensive insight into what DFMCs consider during the selection of beneficiaries. For objective 1, data was derived from an analysis of secondary data on applicants' forms. Information on all applicants within the stipulated period were considered for the study. This information was assessed to generate information on the sex of applicants, type of

disability and the nature of applicants' requests vis-a-vis 'spending areas' as outlined by the NCPD (NCPD/GFD, 2010). The analysis of data on application forms happens to be the only available means of generating information on applicants between 2018 and 2020.

Persons who require assistance from the disability fund are expected to apply to their respective district department of Social Welfare and Community Development. During the submission of their application forms, they are also required to register with the NCPD – by completing a form with their biodata including type of disability -at the DSWCD. This registration is intended to enable the DSWCD and the NCPD to have an idea of the number of PWDs within MMDAs, their sex and corresponding forms of disability. In La Dade-kotopon and Tema metropolis, the DSWCD had designed forms for applicants. Participants are required to provide their names, sex, contact number, location, indicate form of disability and amount of support required on these forms. Applicants in Shai Osudoku are required to submit application letters for the grant at least by stating its purpose and expected amount.

A semi-structured interview guide was used to elicit information from members of the DFMC (Director of Social Welfare and Community Development, NCPD representative and chairperson of committee) for objective 2. The interview guide comprised questions centered on the selection criteria of fund beneficiaries to streamline discussions and responses accordingly. Probes were introduced depending on responses provided by interviewees. With the permission of interviewees, all interviews were recorded for transcription purposes to correct the limitation of the researcher with respect to recalling what exactly was said by interviewees, allow a thorough examination of statements from interviewees and serve as proof to counter accusations that data analysis may have been influenced by the researcher's biases (Heritage, 1984).

3.7 Data analysis

The secondary data analysis focused on variables such as sex, purpose of request, whether application was considered, amount requested and actual amount provided from application forms. These variables were then interpreted using descriptive statistics such as graphs and frequencies. The Statistical Package for Social Sciences (SPSS) and Microsoft Excel were used to analyze the variables and in effect, generate graphs, determine percentages and frequencies. A district-specific analysis was adopted to determine differences or similarities that exist among the different districts.

Thematic analysis was adopted for the analysis of data derived through semi-structured interviews on the selection criteria for fund beneficiaries. Precisely, Braun and Clarke's approach to reflexive thematic analysis was utilized. Transcripts of the different interviews were thoroughly assessed to identify common or repetitive themes. In specific terms, the thematic analysis paid particular attention to repetitions, similarities and differences as well as linguistic connectors – the use of words like since, therefore and because among others - (Ryan & Bernard, 2003).

3.8 Ethical considerations

An ethical issue which is likely to arise from this study is confidentiality with respect to the identity of interviewees and fund applicants. To mitigate this, unique identification codes were used during the analysis of applicants' data on applicants and interviewees. Moreover, the identity of interviewees was not attributed to their quotes.

3.9 Limitations of the study

The study sought to assess application forms from 2016 to 2020 in each of the participating districts for an elaborate trend analysis of the rate to which applicants' requests are met. Owing to the non-availability of data for 2016 and 2017, data between 2018 and 2020 was utilized, thereby limiting an elaborate trend analysis. The NCPD representative for participating districts happened to be the

same individual. Owing to this, it is possible that the opportunity to have diverse positions from the NCPD perspective on the selection of beneficiaries was lost.

Further studies on the fund should consider a trend analysis of the number of applicants, total amounts requested by applicants and allocations to the disability fund across different MMDAs to assess equity considerations.

Chapter summary

Chapter three pointed out use of the sequential explanatory form of mixed methods research for the study. Information on the selection of participating region, districts and respondents was thoroughly explained in addition to means of data collection and analysis. The chapter concluded with ethical considerations and limitations of the study.



Data Presentation, Analyses and Discussion

4.0 Introduction

This chapter comprises an analysis and discussion of data which was collected for the study. It has been mainly organized around the two study objectives which sought to assess the nature of requests presented by PWDs and determine factors which influence the selection of beneficiaries.

4.1 Data

Although for the study period was revised to begin from 2018, comprehensive data for Shai Osudoku and La Dade-kotopon could not be sourced for 2018. In Shai Osudoku for instance, while application letters were available in 2018, detailed data on approved beneficiaries for the same year was lost due to virus corruption. Data for 2018 and 2019 in La Dade-kotopon had no application dates on the application forms, making it difficult to tell which forms belong to either of these years.

Key Informant Interviews were conducted with six (6) members of the DFMCs in the three participating districts. This comprised three (3) Directors of DWCD who served as secretaries to the committees, two (2) committee chairpersons and one (1) representative of the NCPD, who serves on the DFMC of all three participating districts.

Total number of application forms from which data analysis was conducted are highlighted in table 1 below.



Table 1: Number of application forms assessed

Districts	2018	2019	2020
Shai Osudoku	167	82	N/A
La Dade-kotopon	N/A	N/A	128
Tema	N/A	48	56

Source: DSWCD of Shai Osudoku, La Dade-kotopon and Tema

4.2 Demographic characteristics of applicants

4.2.1 Sex of applicants

The percentage of male and female applicants differed across the various years. Utilizing information provided by participating MMDAs in Table 1 above, 41% of applicants in 2018 were males compared with 56% female applicants and 3% of applicants whose sex were not specified. Applicants whose sex could not be specified were from Shai Osudoku. Their sex was not specified on their application letters and could not be determined because they possessed unisex names. In 2019, 50% and 45% of applicants were males and females respectively with 5% whose sex were not specified. The year 2020 had 55% of applicants as males and 45% as females. Male PWDs presented the highest number of applications compared with females in 2020 and 2019. Nevertheless, existing statistics from the 2010 census showed that female PWDs were relatively higher than males in all participating districts. The dominance of male applicants in the aforementioned years could be attributed to migration or poor knowledge of the fund among females.

Table 2: Sex disaggregation of applicants (%)

Sex	2018	2019	2020
Male	41%	50%	55%

Females	56%	45%	45%
Not specified	3%	5%	0%

Source: DSWCD of Shai Osudoku, La Dade-kotopon and Tema

In Tema for instance, female applications exceeded that of males in 2019 while males outnumbered females in 2020. In 2020, males emerged as the highest number of applicants in La Dade-kotopon. In Shai Osudoku, female applicants exceeded males in 2018 whereas males dominated in applications in 2019. Table 3 below presents a district-specific sex disaggregation of applicants between 2018 and 2020.

Table 3: District-specific sex disaggregation of applicants in participating districts between 2018 and 2020

Years	2018			2019			2020	
	Male (%)	Females (%)	Not Specified (%)	Male (%)	Female (%)	Not specified (%)	Male (%)	Female (%)
Tema	N/A	N/A	N/A	42	58	0	57	43
La Dade-kotopon	N/A	N/A	N/A	N/A	N/A	N/A	54	46
Shai Osudoku	41	56	3	55	37.5	7.5	N/A	N/A

Source: DSWCD of Tema, La Dade-kotopon and Shai Osudoku

4.2.2 Age of applicants

The ages of applicants in 2019 and 2020 are displayed in Table 4 below. Per the analyzed data, the ages of 36% applicants were not specified on application forms in 2019. However, 27%, 20%, 13% and 3% of applicants were within the age categories of 0 to 17; 36 to 59; 18 to 35 and 60 and above respectively. Thus, aside applicants who did not specify their ages, applicants within the ages of 0 to 17 years constituted the second highest number of applicants. Their applications were presented to their respective MMDAs by their parents, guardians or caregivers.

In 2020, applicants within ages 36 to 59 years presented the highest number of applications, constituting 34% of applicants. PWDs within ages 18 to 35 years constituted 33% of applicants, 23% of applicants were within ages 1 to 17 years whereas applicants aged 60 and above made up 10% of applications.

Table 4: Age categorization of applicants (%)

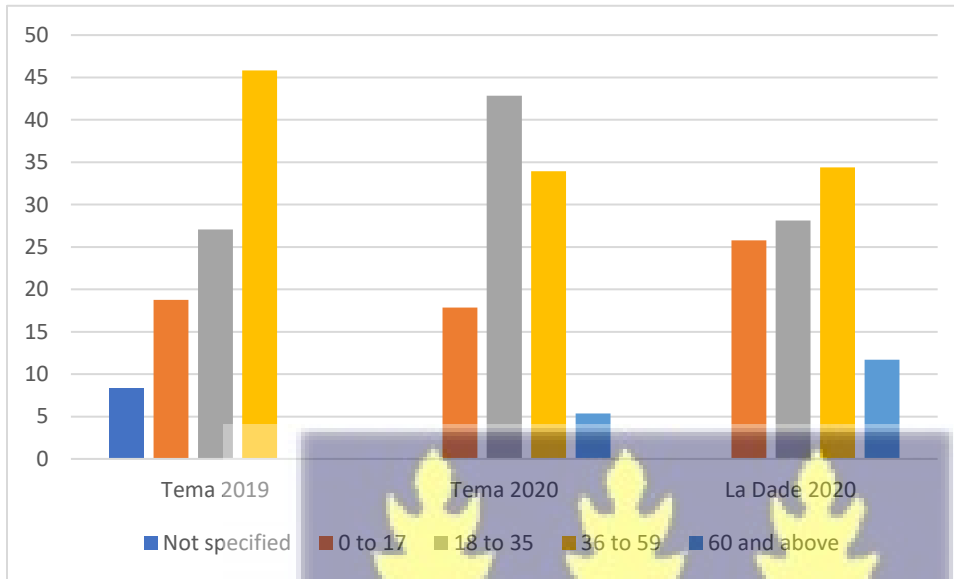
Age categories of applicants	2019	2020
Not specified	36%	0%
0 to 17	27%	23%
18 to 35	13%	33%
36 to 59	20%	34%
60 and above	3%	10%

Source: DSWCD of Shai Osudoku, La Dade-kotopon and Tema

Applicants within the categories of 18 to 35 and 36 to 59 years dominated applications for Tema in 2019 and 2020 and La Dade-kotopon in 2020. In 2019, 45.5% of applicants in Tema were between the ages of 36 to 53; 27.1% were aged 18 to 35; 18.8% were between 0 to 17 years while 8.3% did not indicate their ages on the application forms despite the availability of space for them

on the application forms. Figure 4 below displays the various age categories of applicants in Tema and La Dade-kotopon in 2019 and 2020.

Figure 4: Age categorization of applicants in Tema and La Dade-kotopon (%)



Source: DSWCD of Tema and La Dade-kotopon

4.2.3 Forms of disability among applicants

In 2019 and 2020, physical disability emerged the highest form of disability among applicants. Unspecified forms of disability were recorded among 15% and 7% of applicants in 2019 and 2020 respectively. Visual impairment among applicants was 7% and 11% in 2019 and 2020 respectively. Table 5 below depicts the forms of disability. The ‘others’ category constitutes albinism, autism, down syndrome and cerebral palsy.

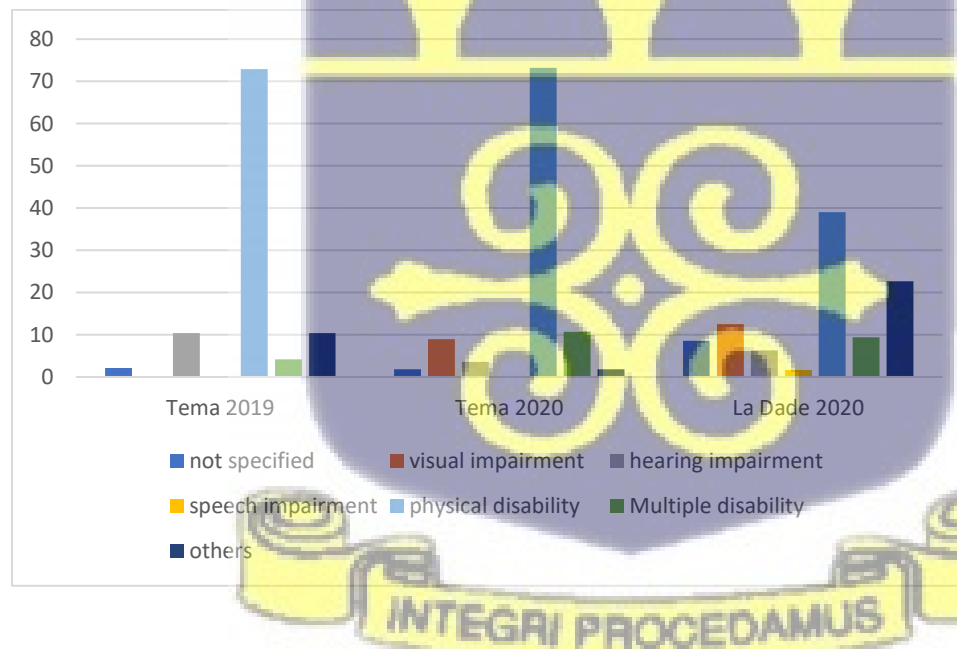
Within Tema metropolis and La Dade-kotopon municipality in the specified years, physical disability was the most prominent form of disability among applicants, constituting 72.9% and 73.2% of applicants within Tema in 2019 and 2020 respectively as displayed in figure 5. Physical disability was 39.1% among 2020 applicants of La Dade-kotopon.

Table 5: Forms of disability among applicants (%)

Forms of disability	2019	2020
Not specified	15%	7%
Visual	7%	11%
Multiple	5%	10%
Hearing	13%	5%
Speech	1%	1%
Physical	42%	49%
Others	17%	16%

Source: DSWCD of Shai Osudoku, La Dade-kotopon and Tema

Figure 5: Forms of disability among applicants (%)



Source: DSWCD of Tema and La Dade-kotopon

4.3 The nature of requests presented by fund applicants

This section discusses issues relating to the first objective of this study which assessed the nature of requests presented by applicants. All three (3) MMDAs largely grouped fund applicants into three (3) categories; namely income generating activities; medical assistance and educational support which are largely in line with the proposed spending areas of the NCPD. The Income Generating Activities (IGA) category comprises requests for equipment, items or gadgets intended to be used for business purposes. Medical assistance encompassed the payment of medical bills and assistive devices for applicants. Educational support was concerned with the payment of school fees, money for subsistence in schools, support for apprenticeship and educational equipment/materials. In each of the years for which data was available, all three MMDAs supported the development of OPWDs mostly through the payment of congress participation fees and sensitizations on the fund.

With respect to data gathered for this study, requests presented by applicants in all three districts were dominated by applicants who intended to use funds for IGA. Interviewees of participating MMDAs also indicated that requests presented by applicants to a large extent fall within spending areas of the fund as indicated by the NCPD. This could imply that the prescribed NCDP spending areas are in line with the needs of PWDs or attributable to sensitizations undertaken on the fund among the various OPWD on its areas of funding. In addition, one MMDA indicated that requests outside funding areas of the fund are not accepted by the DSWCD as follows;

“Applications from PWDs are largely within spending areas of the fund. There was however one instance where one applicant requested support for accommodation. We did not accept her request. We just told her that we don’t attend to accommodation issues”.

(Interviewee, Tema).

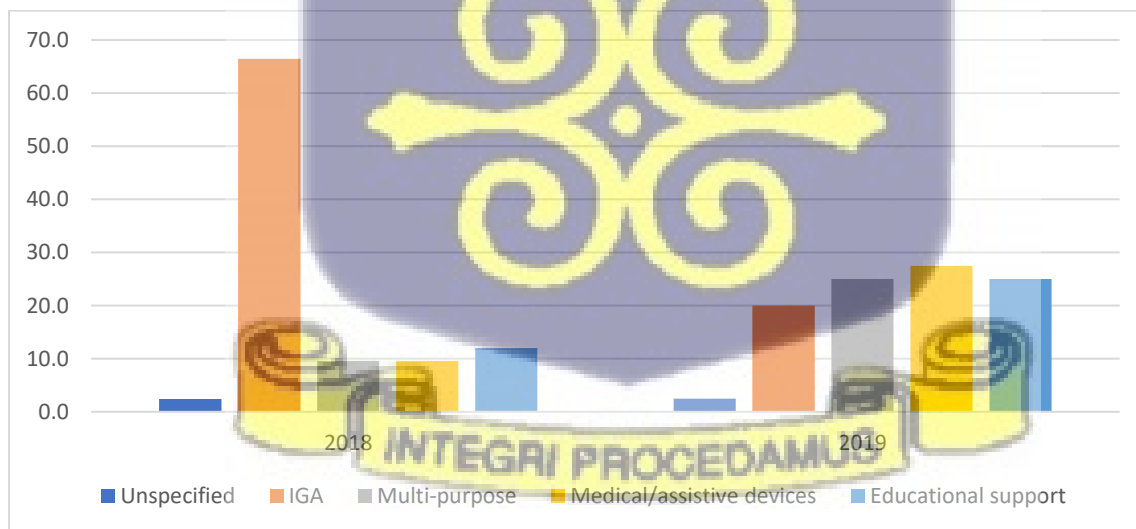
Table 6: Purpose of applicants' requests

Purpose of applicants' requests	2018	2019	2020
Not specified	2%	2%	12%
IGA	66%	38%	60%
Multi-purpose	10%	16%	8%
Medical/assistive	10%	22%	11%
Educational/apprenticeship support	12%	23%	9%

Source: DSWCD of Shai Osudoku, La Dade-kotopon and Tema

As portrayed by table 6 above, IGA related requests were the highest in 2018, 2019 and 2020, constituting 66%, 38% and 60% of requests in these years respectively. In 2018 and 2019, requests for educational and apprenticeship purposes were 12% and 23% among presented requests respectively.

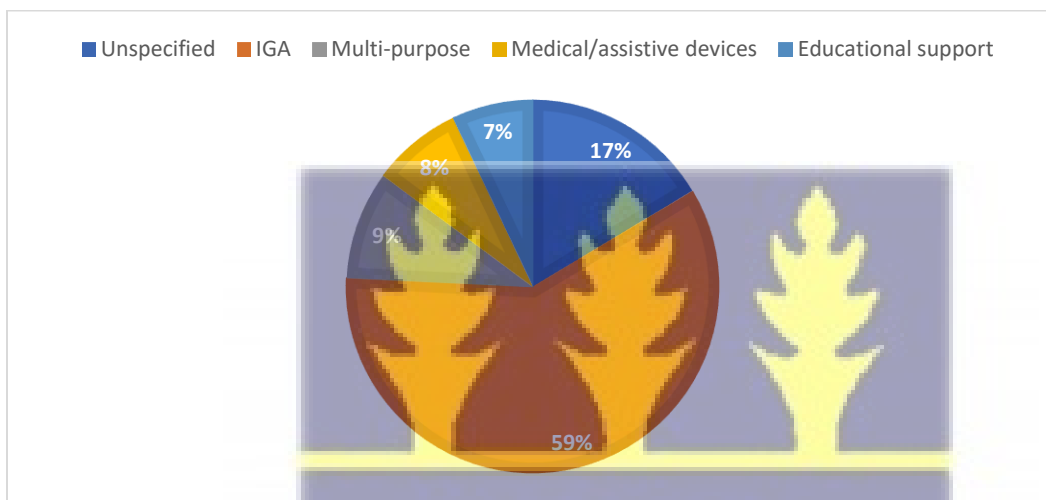
Figure 6: Nature of requests presented by applicants in Shai Osudoku (%)



Source: DSWCD of Shai Osudoku

Reference to figure 6 shows that in 2018, 66.5% of applications in Shai Osudoku were intended for IGA whereas 12% were meant for educational purposes. 9.6% were meant for medical and assistive devices; 9.6% for multi-purposes which implies a combination of two of the three spending areas (IGA, educational support and medical/assistive devices). In 2019, 20% of applications were geared towards IGA; 27.5% for medical/assistive devices; 25% for multi-purposes; and another 25% for educational support.

Figure 7: Nature of requests presented by applicants in La Dade-kotopon

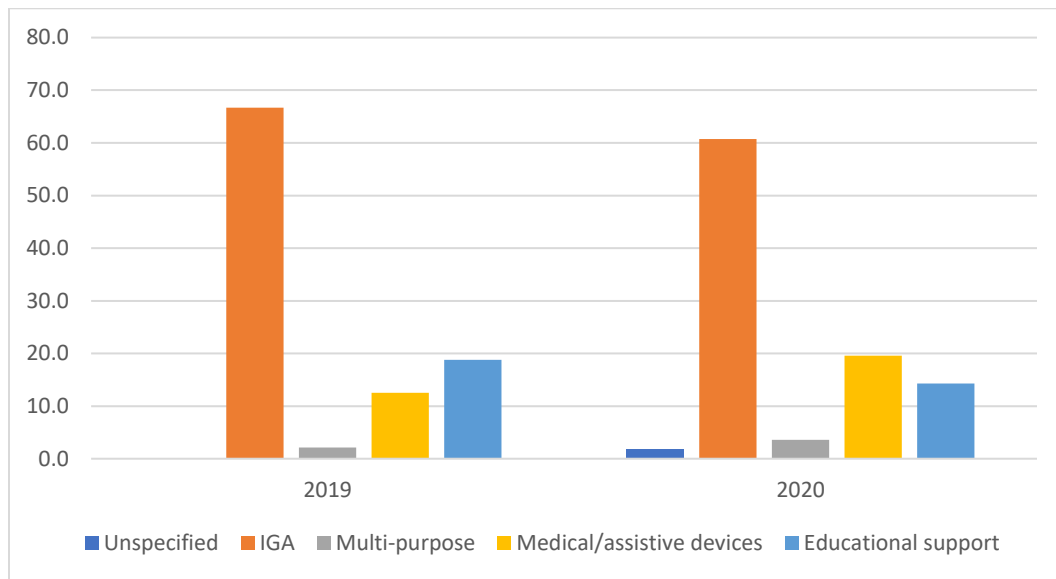


Source: DSWCD of La Dade-kotopon

Figure 7 shows that in 2020, 59% of requests in La Dade-kotopon were meant for IGA; 17% of requests were unspecified; 9% were for multi-purposes; 7% were for educational support and 8% for educational support.



Figure 8: Nature of requests in Tema (%)



Source: DSWCD of Tema

Within the Tema metropolis in 2019, 66.7% of requests were intended for IGA; 18.8% for educational purposes; 12.5% for medical/assistive devices; and 2.1% for multi-purposes. Requests for 2020 comprised 60.7% IGA; 19.6% for medical/assistive devices; 14.3% for educational purposes and 3.6% for multi-purposes as displayed in figure 8 above.

4.4 Beneficiary selection process

In all three (3) districts, the selection of beneficiaries mimics the underlisted process in figure 9 with some noted differences in each of the stages. At each of the stages, factors which guide selection as listed in section 4.5 are applied.

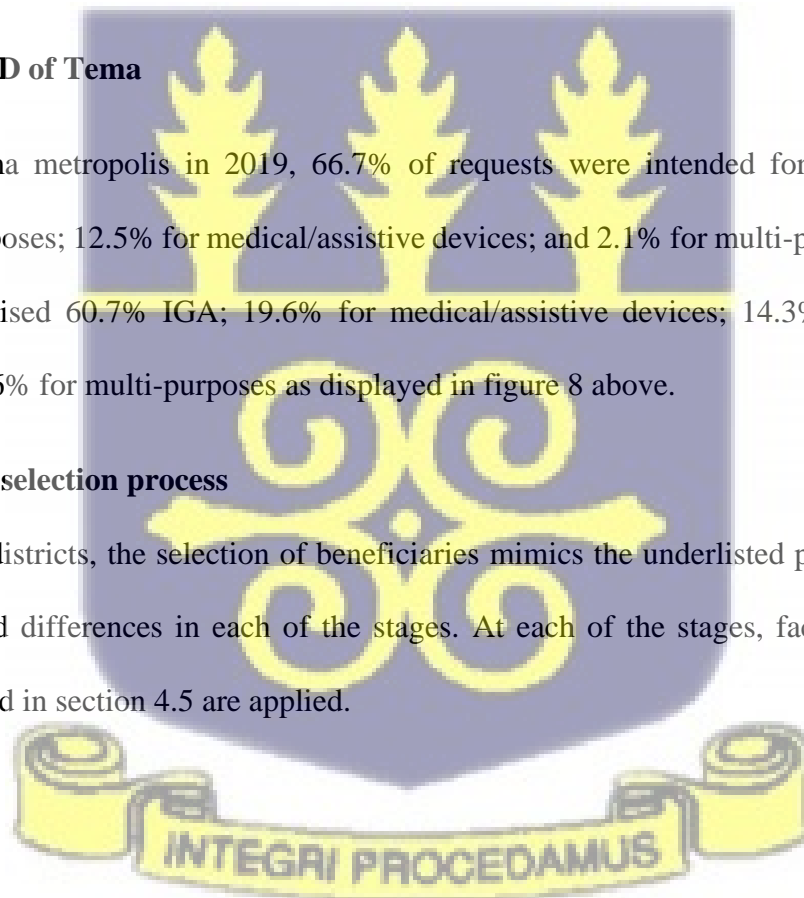
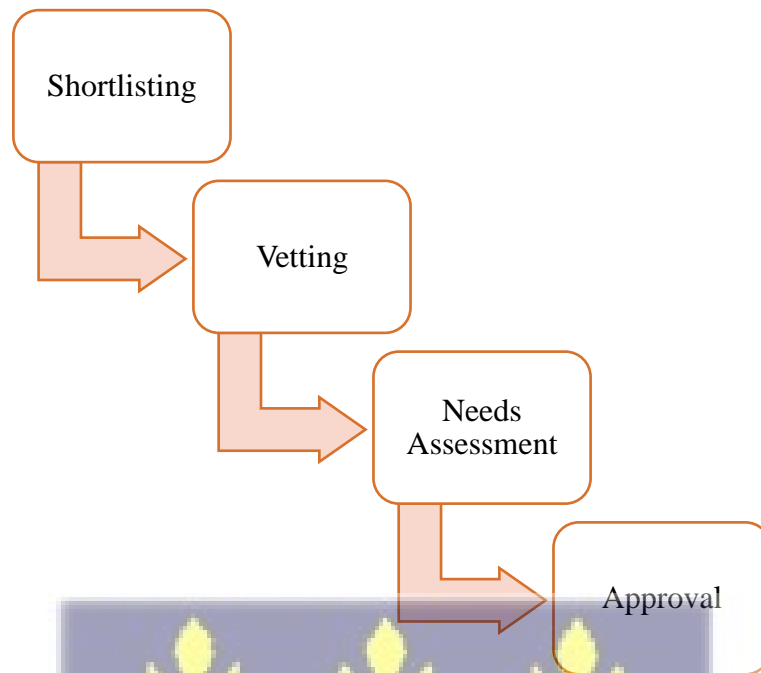


Figure 9: Selection procedure for fund beneficiaries



Source: Field survey, 2021

At the **shortlisting** stage, application letters and NCPD forms are scrutinized with priority for youth, children and unemployed PWDs and persons deemed more vulnerable. At this stage also, attention is paid to persons who have never benefitted from the fund. An interviewee made the statement below to define the shortlisting stage.

“During shortlisting, we look at applications and the NCPD registration forms to select potential beneficiaries. Factors such as age and employment status are considered”

(Interviewee, La Dade-kotopon)

The **Vetting** stage comprises an in-person or virtual interaction with shortlisted applicants to confirm information on application letters and forms and a thorough discussion of presented needs.

For IGA for instance, the committee finds out what informed the decision for an applicant to request support for a particular IGA. In instances where the committee deems the preferred IGA

as unviable, the applicant is advised to consider another IGA with his or her consent. In addition, it also seeks to confirm the residence of applicants in a bid to ensure that PWDs who reside within a particular district benefit from the fund. Different modes of vetting applicants are highlighted in the underlisted quote

“Depending on the mobility and or proximity of applicants, some interactions at the vetting stage are not done in-person. This is also to enhance the convenience of applicants”

(Interviewee, Shai Osudoku)

Needs Assessment largely applies to IGA applicants. It is the stage where field visits are undertaken to assess the viability of a proposed IGA. In this regard, the committee looks out for existing sites for the proposed business and whether they can yield positive results for the applicant. Again, should there be some noted challenges, applicants are advised on appropriate actions to take with their consent. An interviewee highlighted importance of the needs assessment stage as follows.

“The needs assessment stage is very crucial during the selection of beneficiaries. A key deciding factor is the availability of space for the applicant’s desired IGA” (Interviewee, La Dade-kotopon)

At the **approval** stage, the committee considers amount available for disbursement and prioritizes based on interactions with applicants at the listed stages. Applicants whose requests are not granted are put on the waiting list for subsequent fund disbursements. In describing the approval stage, an interviewee made the underlisted statement.

“...depending on amount available for disbursement, we prioritize the various requests and disburse accordingly. Applications of persons who do not benefit at a particular point

in time are put on the waiting list for their needs to be addressed later depending on the availability of funds” (Interviewee, La Dade-kotopon).

4.5 Factors which influence the selection of fund beneficiaries

This study found out that not all applicants benefit from the fund within their years of application within participating MMDAs, making the selection process worth investigating. Again, this study went a step further to provide information on differences between applications and approvals along years for which data was available and in addition, the proportion of applicants who get funded for a particular year.

4.5.1 Differences between applications and approvals

The findings below show the gap between applications and approvals and the amount of funds required by beneficiaries within selected districts by applicants in 2019 and 2020. It is worthy to note that total approvals in specified years does not represent total amount of disability funds received by the MMDAs in question. This is because the analysis excludes amount to OPWDs, requests granted to applicants on the waiting list for previous years and amounts spent on administrative purposes. As emphasized in the selection process above, the DFMC advises applicants at the vetting and needs assessment stages as to profitable or viable ventures to delve into. This is also likely to be a contributory factor to the decrease in amounts provided beneficiaries in comparison to their actual requests.

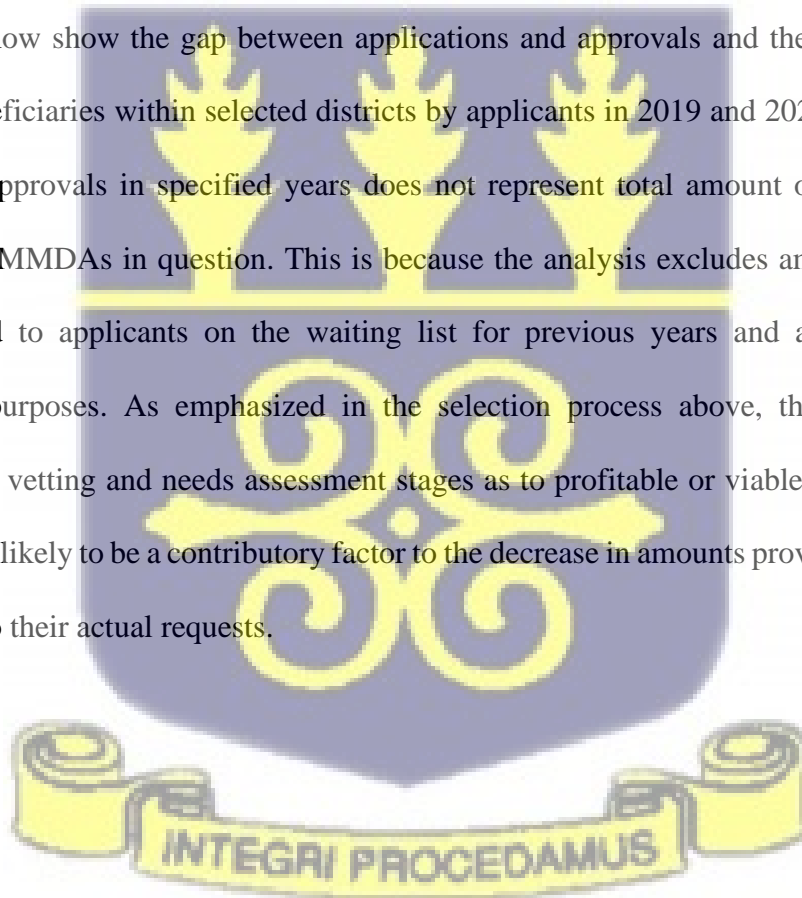


Table 7: Proportion of applicants' requests and actual approvals for beneficiaries in 2019 and 2020

Years	% Of beneficiaries out of applicants	Total request of applicants (GHC)	Total request of beneficiaries (GHC)	Approved amount for beneficiaries (GHC)
2019	65%	283,548	203,088	110,180
2020	42%	N/A	146,913	87,745

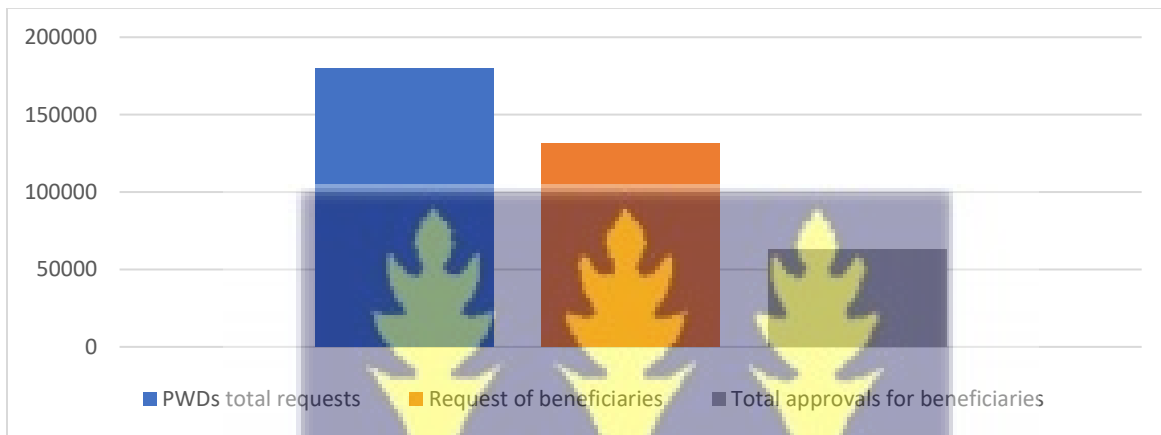
Source: DSWCD of Tema, La Dade-kotopon and Shai Osudoku

As of November 2021, 65% of total applicants in 2019 had benefitted from the disability fund within districts provided data. This indicates that approximately two years after requesting support from the fund, 35% of applicants within Tema and Shai Osudoku are yet to receive support from the fund. Amount provided for beneficiaries totaled GHC 110,180 which represented 54% of support desired by beneficiaries. Beneficiaries comprised 46% females and 49% males which is considerably proportional to the percentage of male and female applicants displayed in table 2 above. Sex of the remaining 5% was not specified.

Forty-two percent (42%) of applicants in 2020 had benefitted from the fund as of November 2021, indicating a gap of 58%. Thus, 54% of 2020 applicants within La Dade-kotopon and Tema were yet to receive funding support. As shown in table 7 above, 60% of amounts required by beneficiaries were provided. This could be attributed to delayed disbursement of the last tranche of DACF for 2020. As of November 2021, DFMC were yet to receive the disability fund for October to December 2020. A sex disaggregation of beneficiaries showed that males comprised 51% whereas females made up 49%. This is relatively proportional to the percentage of male and

female applicants in 2020 as shown in table 2 above. In terms of disability, many applicants with physical disability were mostly considered, making up 47% of beneficiaries. Again, this is proportional with the disability type of applicants in table 5.

Figure 10: A graphical presentation of total requests, amount required by beneficiaries and approved amount for beneficiaries in Shai Osudoku – 2019 (GHC)



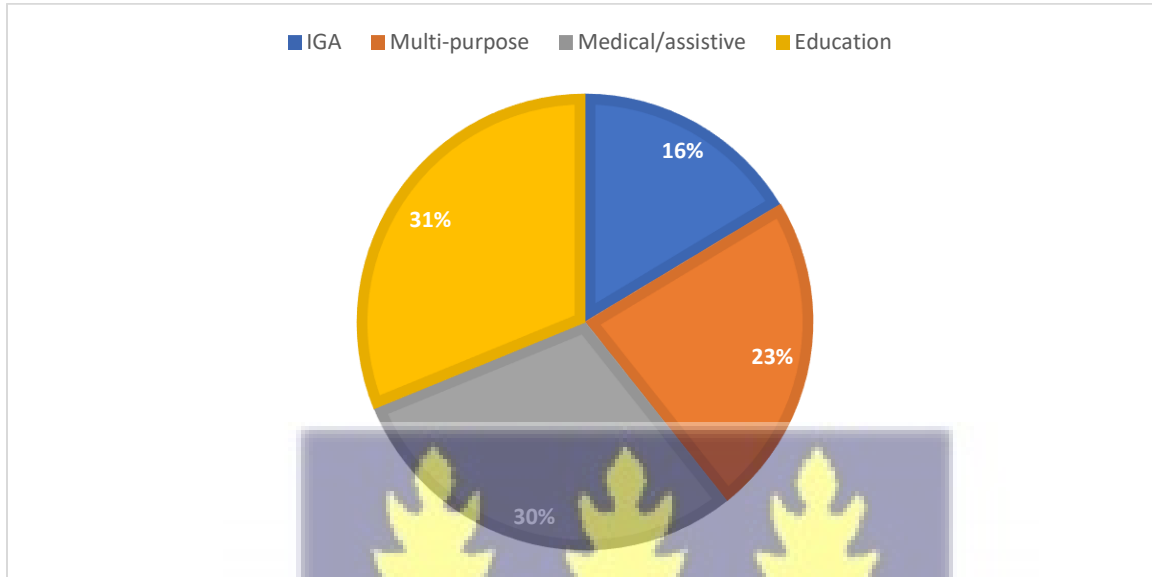
Source: DSWCD of Shai Osudoku district

Within the Shai Osudoku district in 2019, a total of 82 PWDs presented applications for support amounting to GHC 179,501. This excludes applications presented by OPWDs. Out of this number, 61 applicants, representing 74% received support from the fund. Beneficiaries comprised 41% females and 52% males whereas the sex of 7% was not specified. Although requests of beneficiaries amounted to GHC 131,451, approved amounts for beneficiaries totaled GHC 63,000, representing 48% of beneficiaries' requests. A graphical presentation of total PWD requests, amount requested by beneficiary PWDs and approved amounts are displayed in figure 10 above.

Regarding the approvals for 2019 applicants, 31% were meant for educational purposes; 30% for medical assistance and the provision of assistive devices; 23% for multi-purposes and 16% for

IGA as shown in figure 11. This suggests a likelihood that approved applications were not in tandem with the NCDP percentages for approval.

Figure 11: Distribution of fund approvals along spending areas in Shai Osudoku - 2019

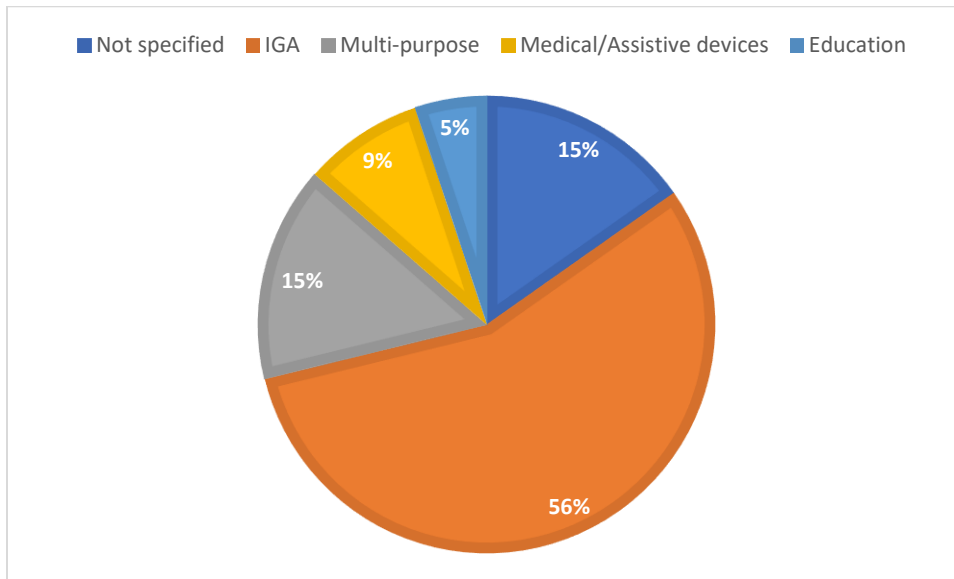


Source: DSWCD, Shai Osudoku

Of a total of 128 applicants within La Dade-kotopon in 2020, 59 applicants, representing 46% had received support from the fund. This was made up of 52% females and 48% males. Regarding disability type, Persons with Physical Disabilities mostly received support. This category of disability had 36% beneficiaries. From the approvals, 37% of corresponding requests were for equipment and devices in line with spending areas of the fund. These include laptops, refrigerators, tricycles, industrial sewing machines and spectacles. Thus, these requests were not quantified in cash by applicants. Upon the approval, these items were purchased for applicants.

The remaining approvals, which constitute 63% were quantified in cash. Of this percentage, beneficiaries' requests amounted to GHC 97,000 out of which GHC 47,000 (48%) was provided.

Figure 12: Distribution of fund approvals along spending areas in La Dade-kotopon - 2020



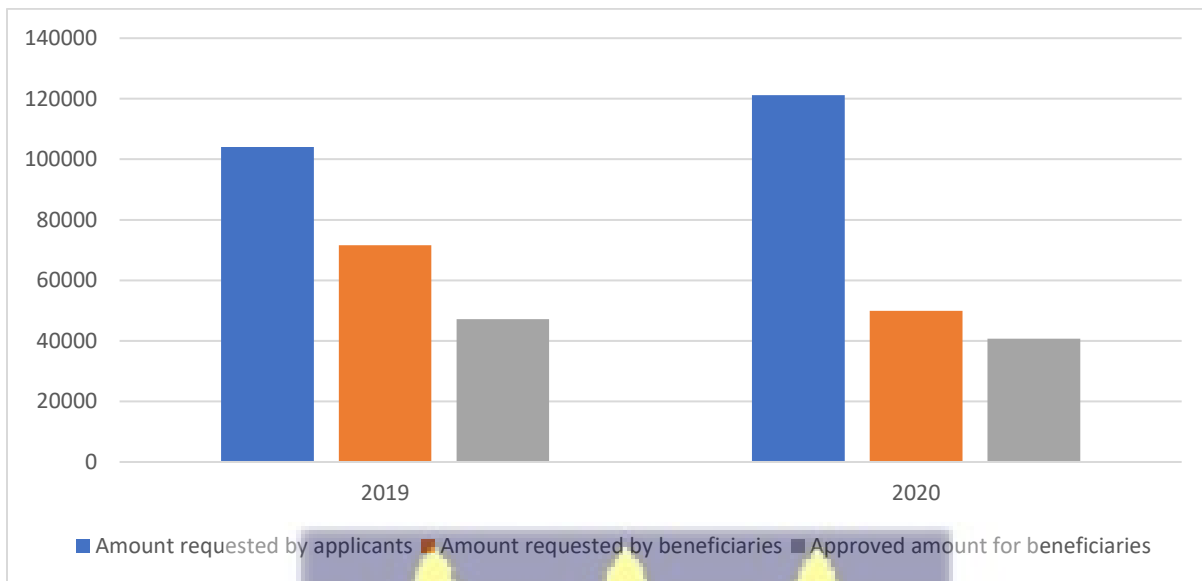
Source: DSWCD of La Dade-kotopon

With respect to spending areas of approved applications, IGA comprised 56%; 15% were unspecified; 15% were for multi-purposes; 9% were for medical assistance and the provision of assistive devices; and 5% for educational support. Again, this supports the statement by one interviewee in La Dade-kotopon on how adherence to the NCPD percentages on spending areas is achieved without difficulty.

Tema metropolis

Out of 48 applicants in 2019, 24 (50%) were actual beneficiaries with 79% of them having a physical disability. Beneficiaries encompassed 58% females and 42% males. The total amount requested by all applicants (thus, 48 persons) amounted to GHC 104,047. Approved amounts for beneficiaries stood at GHC 47,180 which is 66% out of their request of GHC 71,637. Figure 13 shows the differences between total requests presented by applicants, total amount requested by applicants and total approved amount for beneficiaries.

Figure 13: A graph displaying of total requests, amount required by beneficiaries and approved amount for beneficiaries in Tema – 2019 and 2020 (GHC)



Source: DSWCD of Tema

Out of the approvals, 88% were for IGA; 8% for medical and assistive devices and 4% for educational purposes.

In 2020, a total of 56 PWDs presented applications for support from the fund which amounted to GHC 121,138. Eighteen of these applicants, representing 32% actually benefitted from the fund. Of these beneficiaries, 83% had physical disabilities. In addition, 39% were females whereas 61% were males. Beneficiaries requested a total amount of GHC 49,913 out of which GHC 40,745 (82%) was provided. 56% of beneficiaries' requests were for IGA; 33% for medical assistance and assistive devices; and 11% for educational support.

It can be deduced that the Tema metropolis had the highest percentage in terms of meeting beneficiaries' requests. In 2019 and 2020, 66% and 82% of beneficiaries' requests were met compared with 48% of beneficiaries' requests in 2019 in Shai Osudoku and La Dade-kotopon in 2020. An interviewee at the Tema metropolis explained that for IGA requests, a maximum amount

approved by the committee is available for beneficiaries. In 2019, a maximum amount of GHC 2000 was available for IGA beneficiaries whose requests were GHC 2000 and above. This amount was reviewed to GHC 3000 in 2020 to match market trends.

Compared with the Tema metropolis, Shai Osudoku had the highest percentage of beneficiaries compared with the total number of applicants in 2019. Thus, for applicants in 2019, the Shai Osudoku district provided support for 74% of applicants while Tema metropolis provided for 50% of applicants in 2019. The large percentage in Shai Osudoku can be attributed to the thin spread of the fund among many applicants with respect to IGA. Two (2) interviewees within Shai Osudoku indicated this by explaining that there were two different views regarding the quantum of funds disbursed for IGA activities. One view opines that considerable amount of funds is disbursed for few IGA beneficiaries to ensure that their businesses are established and do not re-apply for support within a short period of time while remaining applicants are put on the waiting list. The second view supports the disbursement of funds among an appreciable number of beneficiaries, regardless amount given to ensure that numerous beneficiaries access the fund as this will ensure that a large number of applicants benefit from the fund.

4.6 Influencing factors for beneficiary selection

The finding that not all applicants benefit from the disability fund within their years of application and even a year or two after their applications makes the selection process one worth inquiring into. As already indicated above, as of November, 2021, the Shai Osudoku district had approved requests of 74% of applicants; Tema approved 50% and 32% of applications in 2019 and 2020 respectively; while La Dade-kotopon had approved 46% of applications.

Key informant interviews with DFMCs in the three districts pointed out to three outstanding factors which influence selection as follows; most vulnerable applicants, first-time beneficiaries and fully completed applications.

4.6.1 Most Vulnerable applicants

Vulnerability has been defined by the United Nations Office for Disaster Risk Reduction (UNDRR) as the conditions determined by physical, social, economic and environmental factors or processes which increase the susceptibility of an individual, a community, assets or systems to the impacts of hazards (n.d). Vulnerability emerged as one of the selection criteria for beneficiaries of the fund. In this regard, attention is paid to PWD applicants who are children and unemployed ones within the working ages. Applicants' vulnerability is determined during the vetting stage where interactions, both face to face and through virtual means are held with participants to determine the urgency of their requests and what inaction could result in. Although, generally, PWDs are considered a vulnerable group, inadequacy of the fund to meeting the needs of applicants makes it necessary for this criterion to be utilized. Vulnerability considerations include age and employment status as highlighted by interviewees in the quotes below.

"We look at those who are more vulnerable per their needs... Actually, they come over and we interact with them then we really know those who are more vulnerable. Because per their application, you can't see anything that tells you that they are vulnerable. It is only through interaction that you get to know who more vulnerable. And also, children especially for their education and medicals, we take a critical look at that". (Interviewee, Tema Metropolis)

"...we also look at the fact that you are working or not...so if you are working and then you get something every month, someone who is not working will stand a chance of benefitting compared to you". (Interviewee, La Dade-kotopon)

"We screen the application forms to determine the urgent ones. This is done to ensure that the limited resources are put to good use" (Interviewee, Shai Osudoku)

4.6.2 First-time beneficiaries

Another criterion for selection which emerged from the study is the prioritization of first-time beneficiaries. While the NCPD guidelines does not prevent PWDs from applying for the fund on more than one occasion, interviewees admitted to utilizing this criterion for the selection of beneficiaries in a bid to ensure that an appreciable number of PWDs have access to the fund. This criterion applies to IGA applicants as educational and medical support may be required by applicants over a period of time.

“So, let’s say, ... there are a lot of backlogs and then the person who has already benefitted applies again while we have not finished serving everyone, we do not consider these applications. Unless, it is a medical or educational issue” (Interviewee, La Dade-kotopon)

Nevertheless, the use of this criterion is not absolute. Interviewees indicated that there are instances where an IGA beneficiary for an immediate past year benefit in the ensuing year due to the need to expand their business to increase return or instances where additional support is required to ensure that the beneficiary’s business is well established.

“If an applicant has already benefitted from the fund, it is unlikely that they will benefit the fund in the ensuing year or two because it is the committee’s objective to ensure that other PWDs also benefit from the fund. Until a good case is made for the second application such as expansion of business or for urgent medical or educational support, it will not be granted” (Interviewee, La Dade-kotopon)

A concern was raised by an interviewee within the Shai Osudoku district regarding the disbursement of meagre funds for IGA beneficiaries which is woefully inadequate to support their businesses and makes it difficult for them not to request for support in the ensuing year.

“If someone requests GHC 2000 and is given GHC 1000 or GHC 200, the person will spend it and within the shortest possible time you go back, you won’t be able to trace the money. So, we are now considering giving them something huge to set themselves up, so the person doesn’t apply within a year or two” (Interviewee, Shai Osudoku)

4.6.3 Completed application forms

Within all three participating MMDAs, applicants are expected to attach documents which justify requested amounts in order to complete their applications. For IGA requests, invoices of requested forms of support should be attached to the application form or letter to show what requested amounts will be expended on. For instance, if an applicant requests a refrigerator with beverages, the invoice should show cost of the refrigerator and beverages which should match amount requested. Requests for medical support are expected to be accompanied with medical bills to prove presented need as well as requested amount. Educational assistance is usually accompanied with school bills or invoices of gadgets needed to enhance education. While a number of PWDs fail to attach required documents to their applications, this appears not to be a crucial determining factor for selection compared with the ‘most vulnerable’ criterion. The role of attaching requisite documents to provide evidence for the fund is highlighted in interviewees quotes below;

“With your application, there should be attachments. You tell them to bring their attachments and they end up saying I will come, I will come. Sometimes after the vetting, then they bring their attachments after which the time for selection would have elapsed” (Interviewee, Tema).

“The attachment of supporting documents cannot be overlooked. This is to ensure that purpose for which the request is being made is genuine. The fund is already inadequate to meeting all of applicants’ needs. Hence, this is necessary to ensure that they are given to persons who need them most” (Interviewee, La Dade-kotopon)

4.7 Challenges with the selection of beneficiaries

For interviewees, the most outstanding challenge with beneficiary selection and fund disbursement is the allocation of meagre funds among numerous applicants. As indicated earlier, La Dadekoton and Tema was able to provide support for at approximately 50% of applicants in 2019 and 2020, translating into 63% and 66% of beneficiaries' requests respectively. Whiles the Shai Osudoku district was able to support the highest percentage of applicants in 2019 (74%), the district was able to meet 48% of amounts desired by beneficiaries. This also results in the increasing number of backlogs or applicants awaiting to benefit from the fund as highlighted by an interviewee below.

“We have backlogs as far back as 2018. We have applications which we have not honoured. You know, Tema is a Metropolitan area so we get a whole lot of applications and it is not as if you should just touch it. You have to really make sure that what you are giving the PWD will make an impact. So that’s the challenge you have” (Interviewee, Tema).

The late disbursement of funds which implies the delayed provision of assistance to beneficiaries in dire need was also listed as a contributory factor to the challenge with selection. As at the time of data collection in November 2021, DFMC were yet to receive funds for the last quarter of 2020 and the first 3 quarters of 2021, indicating the likelihood that PWDs who presented their applications between October and December 2020 and applicants on the waiting list from 2019 are yet to be considered for support, thereby prolonging their plight.

It also emerged that there was some difficulty adhering to the disbursement percentages proposed by the NCDP. This was corroborated in an interviewee’s statement below.

“The least percentages of 10% for educational and medical support is often hard to meet as there are instances where an appreciable number of applications are received from these categories and appear urgent, making it impossible to overlook them” (Interviewee, Shai Osudoku district)

4.8 Discussion of findings

This section will discuss the study’s findings and make comparison with related literature and best practices on social protection, particularly social assistance.

4.8.1 The nature of requests presented by PWDs

Individual requests of PWDs in all MMDAs were broadly categorized into three as follows; IGA, educational and medical and assistive devices which are largely in line with spending areas of the fund as proposed by the NCPD. An interviewee indicated that these spending areas were carefully considered by the NCPD to reflect the needs of PWDs. Related with elements of the human rights model of disability outlined by of Degener (2017), spending areas of the fund could be said to aligned as the spending areas of the fund seeks to enhance the social and economic rights of PWDs. In comparison with assistance provided for PWDs in Kenya through the NCPWD, the prescribed spending areas of the fund is largely in line. In my opinion, the economic empowerment support in Kenya matches IGA in Ghana; educational support is similarly named in both countries; tools of trade in Kenya can be compared to apprenticeship support in Ghana. The obvious difference among both countries is the mode of fund disbursement as the Kenyan system mimics a centralized system because all applications are sent to the NCPWD while applications in Ghana are processed at the district level.

The allocation of fund disbursement percentages (75% for IGA purposes; 10% for medical/assistive devices; 10% for educational support and 5% as administrative cost which includes monitoring and sitting allowances of committees) could be said to ensure that a huge

proportion of the fund is disbursed for IGA purposes which have a high tendency to make PWDs self-reliant.

On a general basis, requests for IGA emerged as the topmost area of requests, suggesting that a number of PWDs require support largely in this area. With the exception of Shai Osudoku in 2019, remaining districts had IGA as their topmost need. This differing percentages of requests across the three major areas indicate the likelihood for some districts to encounter some difficulty in a bid to strictly meet the NCPD percentages for the three (3) main areas of spending. Moreover, this could be complicated by the urgency to meet the educational and medical needs of applicants. Neglecting educational support for instance could imply applicants staying out of school.

In effect, there are differences in the frequency of needs presented by PWDs along the prescribed spending areas which necessitates differences in fund disbursement along prescribed spending areas.

4.8.2 Beneficiary selection

As with non-universal social protection programmes, some form of ‘targeting’ is required to enhance the identification of eligible individuals, households and groups, for the purposes of transferring resources or preferential access to social services (Devereux et al., 2015).

Although, PWDs are expected to be beneficiaries of the fund, it is not given that every PWD will receive support from the fund, thereby requiring that targeting is applied to identify fund beneficiaries. Most importantly, PWDs who deem themselves eligible must apply for support under the fund through their respective MMDAs, specifically the DSWCD. Social protection literature describes this process as self-selection or self-targeting. Nevertheless, not every PWD applicant gets to receive support from the fund within their years of application having established due to limited funds and delayed release of the fund from central government. As at November,

2021, 26% of 2019 applicants in Shai Osudoku; 50% of 2019 applicants within Tema; 68% of 2020 applicants in Tema; and 54% of 2020 applicants in La Dade-kotopon were yet to receive support from the fund indicating that they may have sought required support elsewhere or their needs have still not been met.

Owing to this, DFMCs have adopted measures to ensure that the fund is disbursed among persons who require them most. Regarding selection, the NCPD guide highlights preference for PWDs outside the formal sector of employment and fund disbursement along stipulated areas of spending. Additional selection criteria for fund beneficiaries uncovered by the study comprise the most vulnerable applicant, first-time beneficiaries and applicants whose forms are complete (with necessary forms of evidence). In determining the most vulnerable applicant, attention is paid to age, employment status and the urgency of requests.

In the writings of Devereux and Kidd and Athias on social protection, one of the reasons behind targeting for social protection is to make the most efficient use of resources when faced with budget limits (Devereux et al., 2015, p. 7–8; Kidd & Athias, 2019, p. ii). Hence, rationale behind using the most vulnerable as a criterion for selecting fund beneficiaries is in line with social protection literature. Thus, selection of most vulnerable applicant is consistent with the major objective of social protection which seeks to reduce vulnerability (Devereux & Sabates-Wheeler, 2004; Carter et al, 2019). DFMCs determine vulnerability through an interaction with applicants in the absence of standard questions guiding this interaction and a documentation of what transpired during their interaction. Literature on vulnerability provides standard measures and numerous ways by which vulnerability can be determined with respect to ‘targeting’ for social protection programmes. These include the Participatory Wealth/Well-being Ranking (PWR) and Modified Population Level Measures (Moret, 2014). Undoubtedly, vulnerability is an appropriate way to determine eligibility of the disability fund for beneficiaries. Hence, for uniformity and objectivity purposes, it is

essential for a vulnerability assessment tool to be developed to determine which PWD applicant is more vulnerable and hence is eligible for support.

Priority for first-time beneficiaries appears to be a rational means of selecting fund beneficiaries.

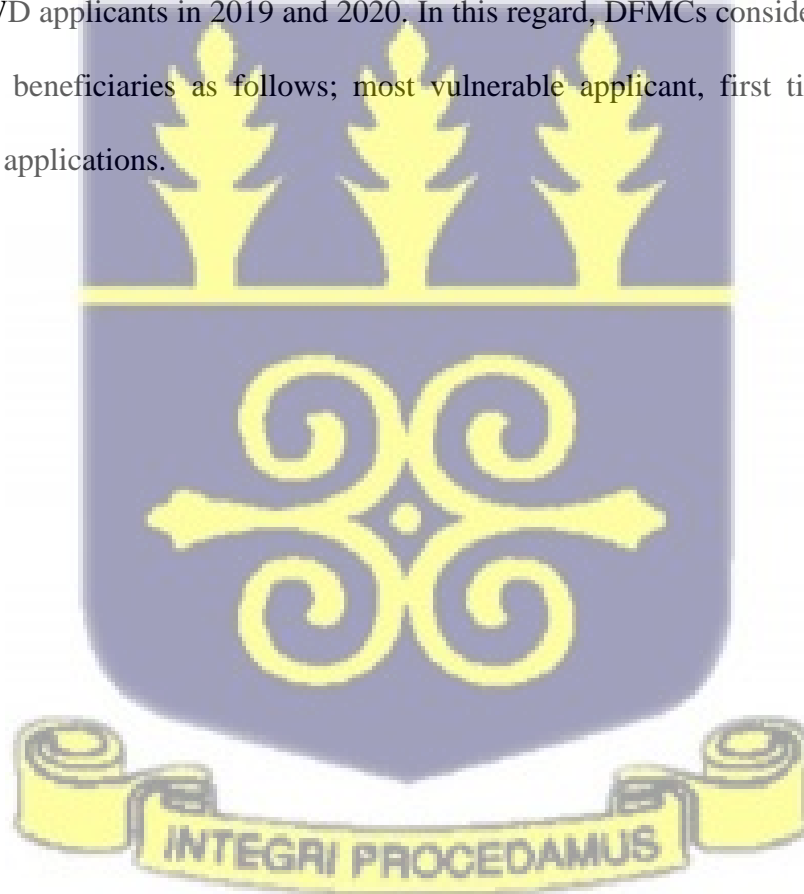
This measure is to ensure that different applicants get a fair share of the fund. There are however exceptional instances where an applicant can benefit the second time in an ensuing year such as urgent medical and educational support over a period. Regarding this criterion for selection is the question on whether support provided for PWDs especially in the area of IGA is adequate in comparison to their request and hence the sustenance of their preferred IGA. Thus, should meagre amounts be disbursed for IGA, they may not be invested in the preferred IGA because of the gap between amount disbursed and the actual amount required. Such PWDs will then be left with no other option than requesting support from the fund in the ensuing year should other avenues of support prove futile. Key to addressing this limiting factor is the need to increase percentage of the DACF allocated for PWDs. The 2020 NDC manifesto recognized this need and communicated an intention to increase the amount beyond 3% (NDC manifesto, 2020; pp 79). An increase in the current allocation is likely to increase the number of PWDs who become beneficiaries of the fund as well as disbursed amounts. In effect, it is likely to positively impact their lives as revealed by studies conducted by Agboga (2015) and Ofori (2017) and ultimately reducing the likelihood for them to be poor.

Complete applications are a means of ensuring that the intended use of funds is supported by the requisite evidence. This selection criterion is applicable to requests for educational and medical support and are often in the form of 'school or medical bills' to establish existence of the need in question and provide a basis for amounts required by applicants. In Tema for instance, a respondent highlighted regular instances where applications are presented without required attachments which renders the application incomplete and less likely to receive support from the fund. The Tema

DSWCD indicated having embarked on some sensitizations to highlight procedures and requirements for fund requests among OPWDs, yet this challenge persists indicating the possibility that applicants who do not attach the necessary requirements are not members of OPWDs. Hence, the need for use of mass media and social gatherings to highlight requirements for the successful application for support.

Chapter summary

Chapter four comprised an analysis of data collected from the field and related discussions. Available data showed that the requests for IGA purposes dominated other approved areas of spending for the fund. In addition, neither of the participating districts could meet requests presented by PWD applicants in 2019 and 2020. In this regard, DFMCs consider three factors for the selection of beneficiaries as follows; most vulnerable applicant, first time applicant and completeness of applications.



Summary of Findings, Conclusion and Recommendations

5.1 Introduction

This chapter presents a summary of the study's findings, conclusion and recommendations to address noted gaps.

5.2 Summary

The study successfully investigated the kinds of requests presented by PWDs to DFMCs and factors which influence the selection of fund beneficiaries within three MMDAs namely, Shai Osudoku district, La Dade-kotopon municipality and Tema metropolis. Application forms were assessed to derive data pertaining to the nature of applications presented to DFMCs. Key Informant Interviews were also conducted with DFMCs of participating districts to elicit information on influencing factors for beneficiary selection.

The utmost reason behind fund requests were for IGA purposes compared with educational and medical reasons. Likened to John Rawls' theory of social justice, the 3% disability fund is in tandem with his assumption that the concept of distributive justice is based on the concern to compensate individuals for their misfortunes and modify the distribution of goods and evils in society. Thus, persons with disabilities are supported with some resources to enhance their functioning – educational, medical and economic - in society. Again, three factors – most vulnerable applicant, first-time beneficiaries and completed application forms - were found to guide the selection of beneficiaries by DFMCs. Compared with social protection literature on rationale behind targeting, which are “to direct programmes to those who will most benefit” (White, 2017, p. 145), to maximise poverty reduction; to ensure no one is ‘left behind’; to contain the costs of provision; and to make the most efficient use of resources when faced with budget

limits; or for political gains (Devereux et al., 2015, p. 7–8; Kidd & Athias, 2019, p. ii), factors guiding the selection of fund beneficiaries could be said to be satisfying a number of these.

5.3 Conclusion

The study uncovered that request by PWDs were in tandem with the spending areas outlined by PWDs with the IGA related requests as topmost ones in all participating MMDAs. This implies that should an appreciable number of these requests be granted with substantial amounts, a high number of PWDs are likely to be involved in economic activities which can lift them out of poverty.

The study also revealed that no MMDA was able to meet needs of the entire number of applicants within its jurisdiction between 2018 and 2020. In this regard, three (3) selection criteria namely ‘most vulnerable applicants’, first-time beneficiaries and completed application forms are applied at the different stages to aid beneficiary selection. In addition to the delayed release of funds from Central Government, DFMCs were also faced with the challenge of how to disburse limited funds among numerous applicants. For instance, while the Shai Osudoku district spread the fund thinly among many applicants, the La Dade-kotopon municipal and Tema metropolis disbursed substantial amounts among few applicants.

Maximizing effect of the fund on beneficiaries requires a number of actions including its timely release from central government and an increase in its percentage from the current 3% of MMDAs share of the DACF.

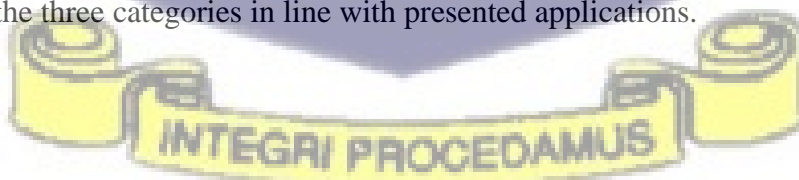
5.4 Recommendations

The underlisted recommendations are provided in a bid to addressing noted gaps around applicants’ requests and the selection of beneficiaries. A number of recommendations require

actions of the NCPD because it is mandated by the Disability Act of 2006 to propose and evolve policies and strategies to enable Persons with Disabilities enter and participate in the mainstream of the national development processes (Disability Act, 2006).

First, the NCPD should advocate increased percentage of the disability fund. Evidence from this study shows that the 3% DACF is inadequate to meeting the needs of all applicants within all three (3) participating districts. Due to this, some DFMCs tend to mitigate the situation by disbursing small amounts to many beneficiaries. This appears unsustainable because some applicants are unable to use funds for their intended purposes due to the meagre amounts disbursed and are compelled to re-apply for support in subsequent years for which they are unlikely to benefit. Since poor persons are more likely to be PWDs, I recommend that the NCPD champions an advocacy to increase quantum of the DACF for PWDs above the current 3%.

Second, the NCPD should review allotted percentages of the fund disbursement. The NCPD directive of allocating 75% of the fund for IGA requests; 10% for educational requests and 10% for medical requests was difficult to be complied with in one district due to the number of presented requests for educational and medical purposes and their urgent nature. This directive should be revised with DFMCs given the leniency to decide based on the number of requests presented by applicants. The NCPD could also provide a formula to aid the determination of amounts to be disbursed along the three categories in line with presented applications.



Third, the Government should ensure the timely disbursement of the disability fund. This recommendation is meant to ensure that the plight of PWDs is not exacerbated by delayed disbursement of the fund by Government. As of November 2021, DFMCs were yet to receive

funds for the last quarter of 2020 and all four quarters of 2021. Possibly, DFMCs are likely to not have disbursed funds to PWDs on their waiting lists for previous years and applicants between September 2020 to September 2021.

Fourth, the NCPD should consider the development of vulnerability assessment to aid the selection of beneficiaries. It is well-known that the disability fund is inadequate to meeting the needs of PWDs and the NCPD guidelines does not provide adequate direction on the selection of beneficiaries in this instance. Vulnerability cannot be disputed as an appropriate qualifying criterion for the selection of beneficiaries amidst limited funds. While some defining elements of vulnerability have been adopted for the selection of beneficiaries, this is not documented to ensure consistency and objectivity. With its intense knowledge on PWD issues, the NCPD should spearhead the development of appropriate indicators to aid the objective and evidence-based determination of vulnerable PWDs to benefit from the fund.

Finally, the National Council on Persons with Disabilities should stipulate measures to ensure quality data management on applicants. It emerged that while information on fund beneficiaries was well managed, perhaps to satisfy audit purposes, that of all applicants was poorly managed. Some districts could not tell the application dates of applicants while others claimed to have lost information on applicants from 2016 due to corrupted files or the change of Directors of DWCDs. Considering the essential link between research and public policies, it is essential that this information is readily available to support necessary revisions of the fund. Possibly, this database should capture, names and contact of applicants, dates of application, amounts requested, purpose for which funds are requested and other information deemed necessary. Information from this

University of Ghana <http://ugspace.ug.edu.gh>

database should be added to quarterly reports of DFMCs to ensure their availability following the transfer of staff.



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