

# Understanding the Political and Institutional Conditions for Effective Poverty Reduction for Persons with Disabilities in Liberia'

Presentation and Summary of Research Findings  
Monrovia

28<sup>th</sup> July 2017

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## Presentation outline

- Introduction and background to the research Centre
- Research objectives
- Research design
- Why subjective and objective wellbeing?
- Key findings
- Recommendations and next steps

## Leonard Cheshire Disability

- Leonard Cheshire Disability is a UK non-governmental organisation employing over 7,000 people, and around 35 people in the International Department (UK and regional offices)
- The four regional offices are in India, Thailand, Kenya, and Zambia



## Leonard Cheshire Disability

- Leonard Cheshire Disability takes a unique approach to global development through:
  - **Innovative programmes** that transform the lives of people with disabilities through programmes supporting education and livelihoods
  - **Cutting edge campaigns** that empower people with disabilities to bring about lasting change
  - **World class research** at our world-renowned disability and inclusive development centre based at University College London that aims to improve policy, practice and programmes

# Understanding the Political and Institutional Conditions for Effective Poverty Reduction for Persons with Disabilities in Liberia

- Funded by UK Department for International Development (DFID) and the Economic and Social Research Council (ESRC) Poverty Alleviation funding scheme
- Three-year research project (2014-2017)

## Partners

- LCDIDC
- University of Liberia
- National Union of Organizations of the Disabled (NUOD)



## Research Objectives

- Provide evidence to support the improvement of the lives of persons with disabilities in Liberia
- Investigate how multidimensional poverty affects the well-being among individuals with disabilities and their families in Liberia in comparison to their non-disabled counterparts using subjective and objective measures
- Explore the dynamics of wellbeing using objective and subjective indicators, moving away from solely economic perspectives to a more nuanced understanding.
- Provide an evidence base to support the policy environment, including decision making processes such as the development of a National Disability Action Plan.
- Examine the effects that policies have on the lives of persons with disabilities, and identifying Liberian-specific contextual solutions

## Research Context

- HDI: 177/188 (2015)
- Signed UNCRPD 2007 (ratified 2012)
- Disability data:
  - Census (2008) – prevalence rate of 3.2%
  - Core Welfare Indicators Survey (2010) 4.4%
- National Disability Act:2005
- National Commission on Disability. Executive Director appointed, January 2011;
- National Human Rights Action Plan (2013-2018); due to report on progress of CRPD this year (2017)
- Ebola outbreak (2014/2015)



## Research Design

- The research used a mixed-methods approach, using quantitative and qualitative approaches, including:
- Analysis to examine disability inclusion in national policies and legislations
- Quantitative household survey (2,020 respondents) which used subjective and objective measures to compare responses of persons with disabilities to their non-disabled peers in the five counties to understand inter- and intra-household dynamics of poverty and disability.
- 22 focus group discussions with persons with disabilities as well as six with Ebola survivors in order to compare their experiences during the Ebola outbreak of 2014-2015.
- Over 30 key informant interviews of community leaders, government officials and other stakeholders in the five counties.

## Subjective and Objective Wellbeing

- Move away from solely economic indicators
- Objective
  - ‘Material’
  - Externally observable and measurable
- Subjective
  - ‘Perceived’
  - Values and standards of individuals



## Survey Domains

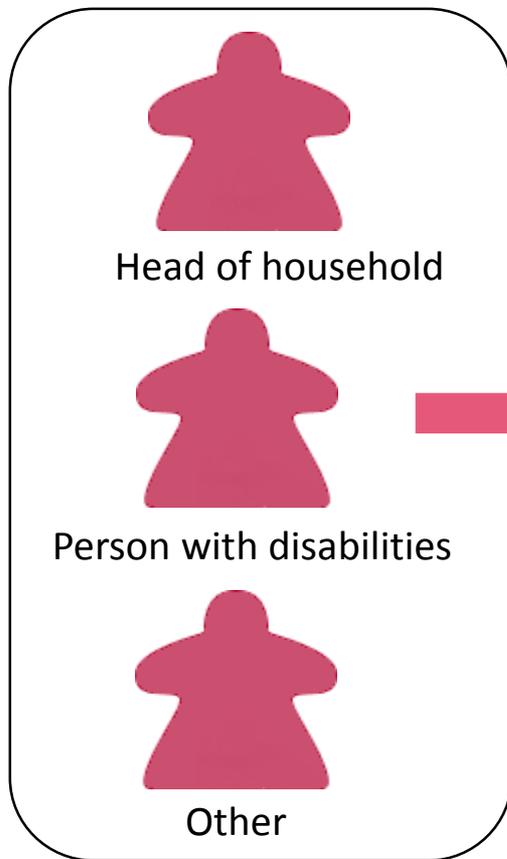
- Household details and asset index
- Health and health services
  - Ebola questions
- Education and literacy/numeracy
- Work and employment
- Transport
- Social and community interactions
  - Crime and safety
  - Political engagement



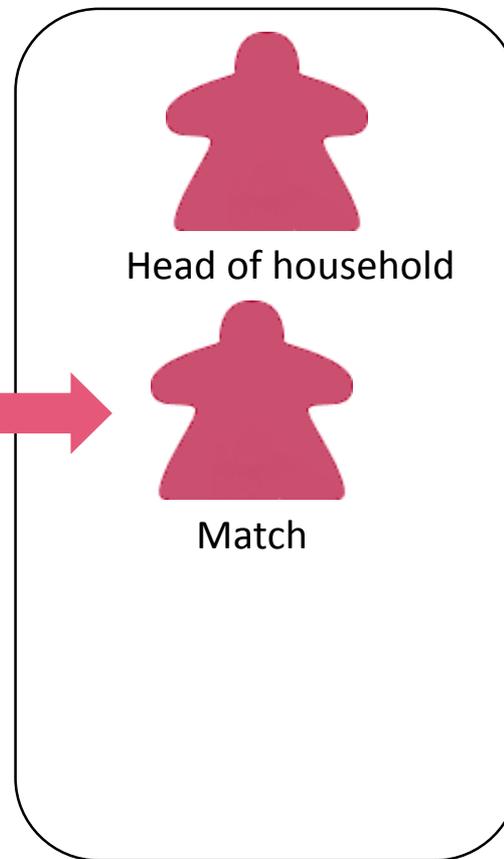
# Survey Respondent Characteristics

# Sampling

## Disabled household



## Non-disabled household



## Demographic information

County	Disabled households
Grand Bassa	151
Cape Mount	184
Lofa	255
Montserrado	164
Sinoe	238

Total sample = 2,020 (46.8% male; 53.2% female) total number of HH = 992

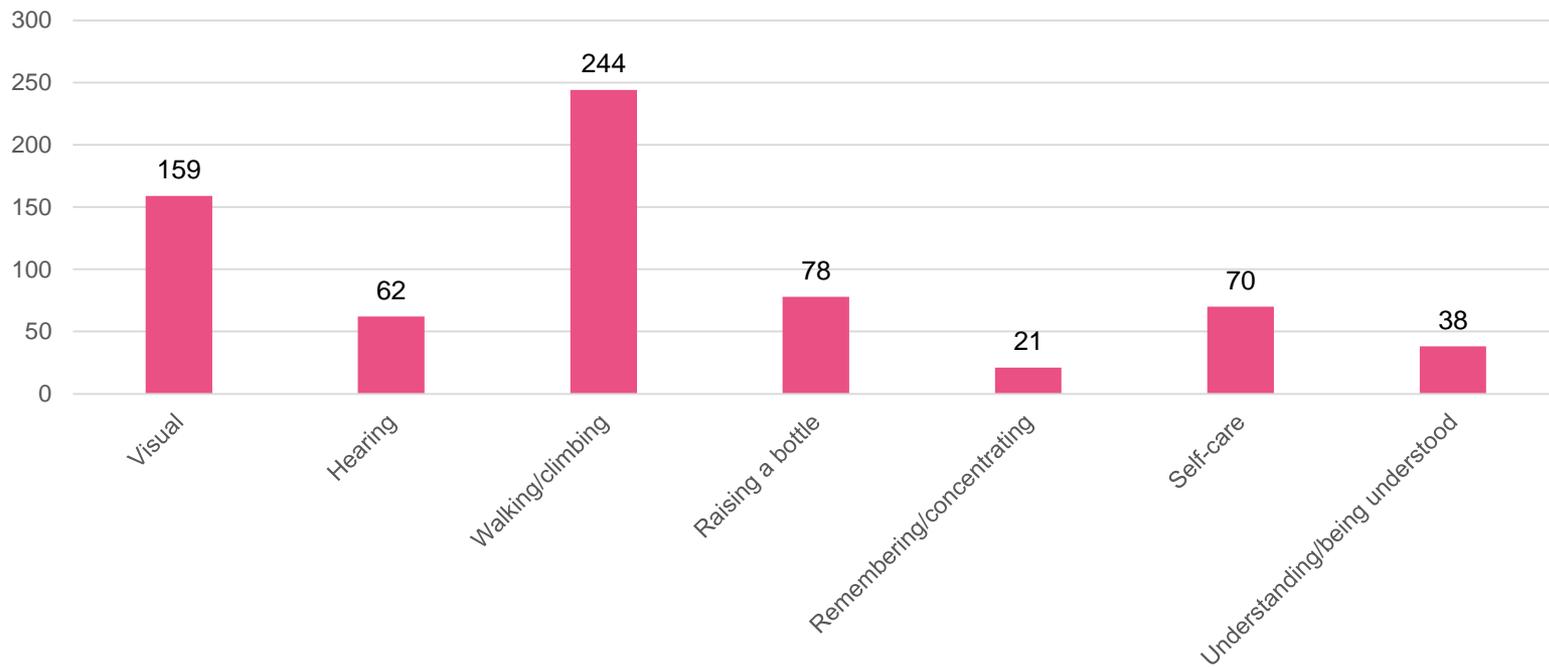
Mean age 44.1 years (s.d 16.5; range 17-97)

Mean household size 5.2 people (s.d. 2.1; range 1-16)



# Impairment Types

Impairment types



■ Washington Group Short Set Questions

## Access to Assistive Technology

- 379 respondents (70% of disabled) reported needing assistive devices – walking stick (24%); crutches (16%); glasses (15%)
- 129 respondents (24%) reported needing support from others to move around
- Half (49%) 'only occasionally' or never had access to the needed support or devices
- The main reason given was cost (70%)

## Poverty

### Non-disabled households

47.7% have a job (of which 41.1% self-employed)

83.5% use battery-powered lamps as the main source of light

31.0% practice open defecation

61% of have access to mosquito nets

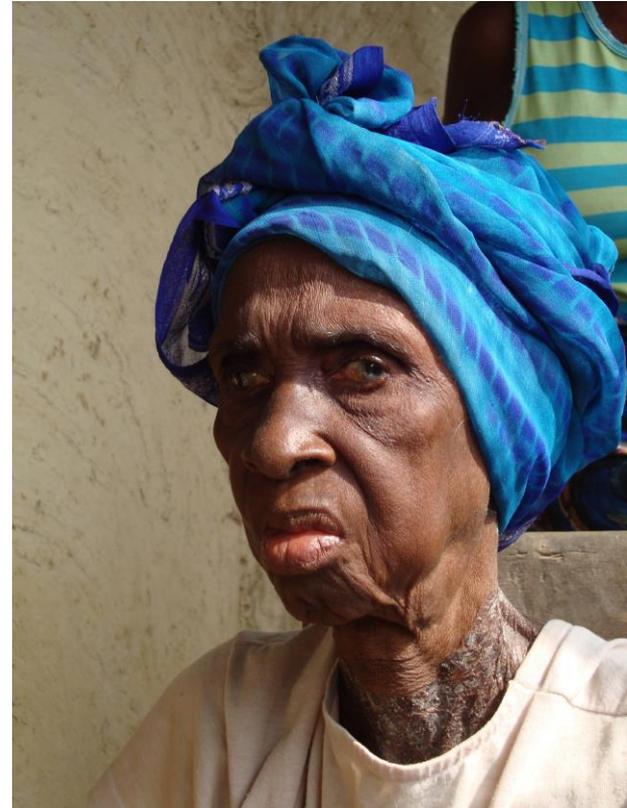
### Disabled households

37.2% have a job (of which 44.5% self-employed)

90.5% use battery-powered lamps as the main source of light

35.5% practice open defecation

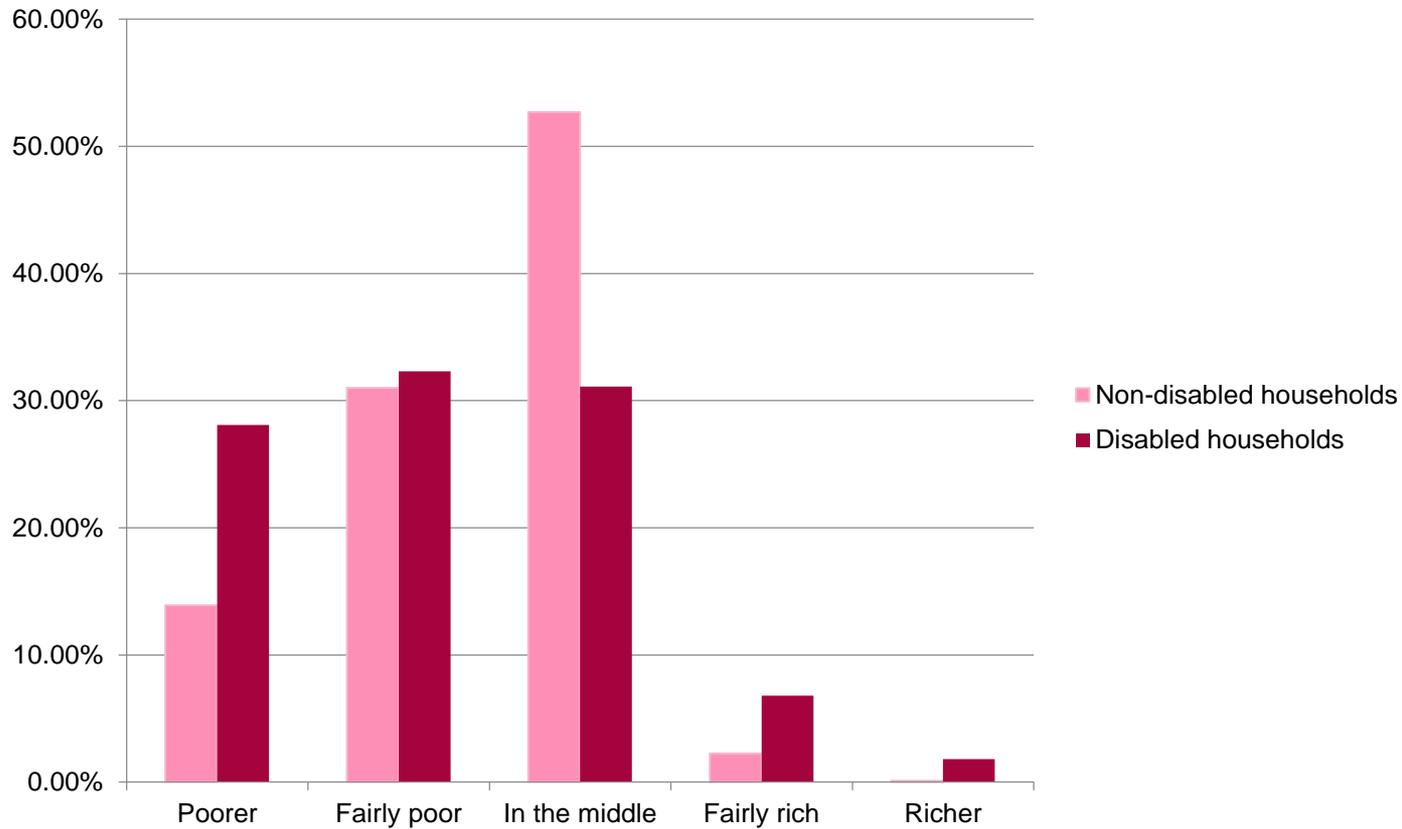
65.3% of have access to mosquito nets



## Respondents: Wealth Quintile

Quintiles	Disabled household	Non-disabled household
q1 (poorest)	13%	30%
q2	23%	20%
q3	24%	13%
q4	22%	15%
q5 (richest)	18%	22%

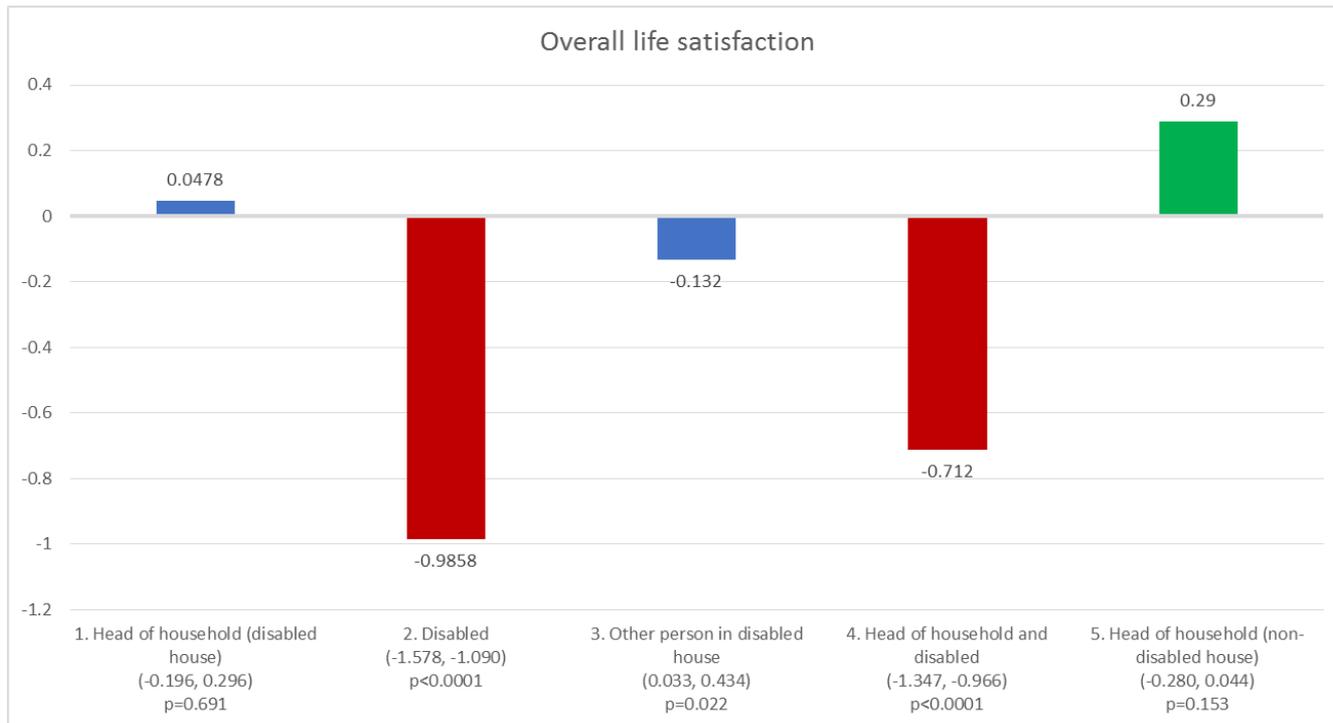
# How would you compare your standard of living to other households in your community?



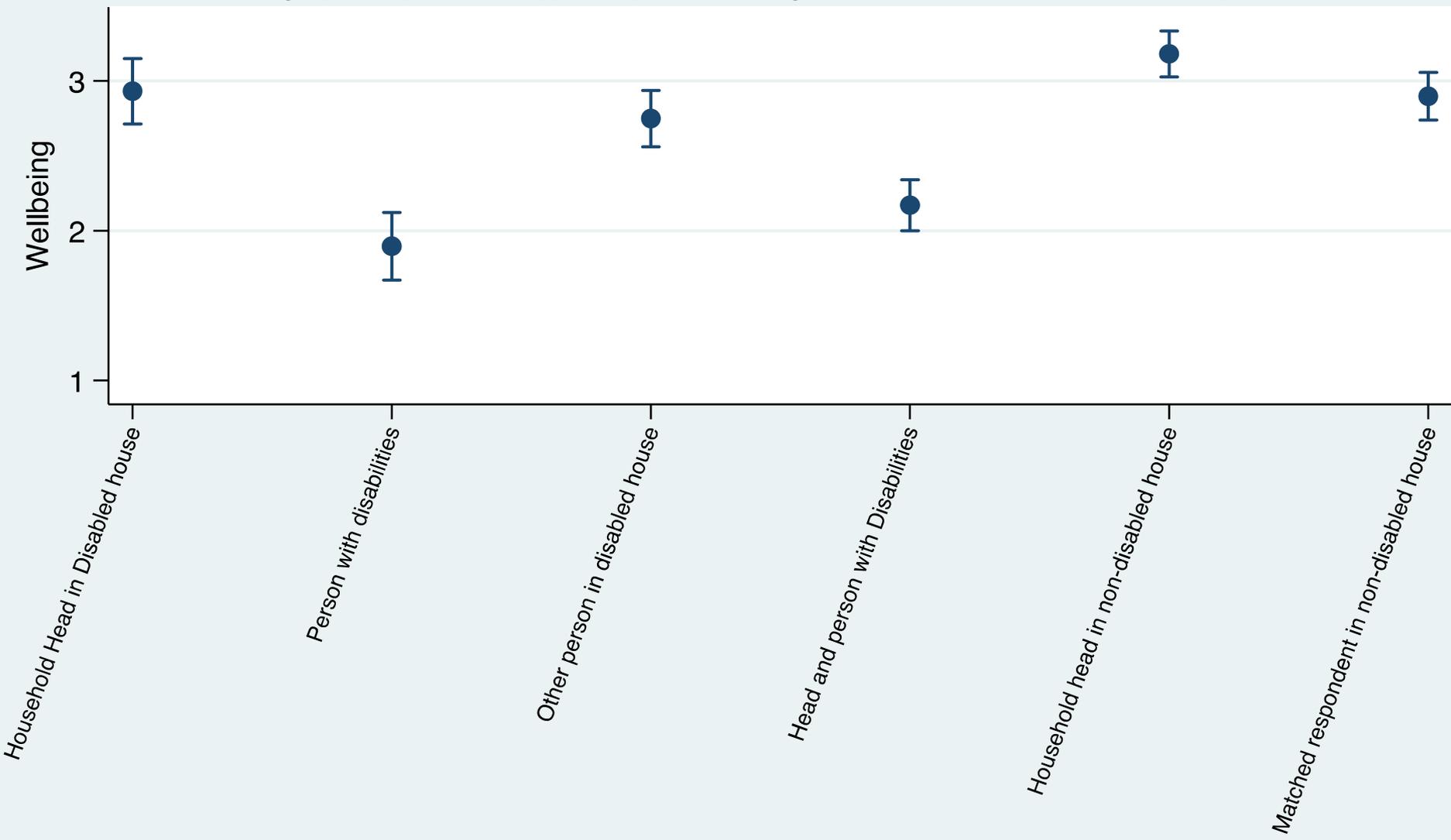
# Wellbeing

# Wellbeing (overall life satisfaction)

Thinking about your life and personal circumstances, how satisfied are you with your life as a whole?				
Not at all satisfied	a bit unsatisfied	not satisfied or unsatisfied	a bit satisfied	completely satisfied
1	2	3	4	5



# Wellbeing by Respondent Type, adjusted for age, sex, education, and wealth quintile



## Respondent Type

Wellbeing='Thinking about your own life and personal circumstances, how satisfied are you with your life as a whole?':  
1='Not at all satisfied' 2='a bit unsatisfied' 3='not satisfied or unsatisfied' 4='a bit satisfied' 5='completely satisfied'

# Education

## Education Data

### Non-disabled households

49.7% had no formal education

70.3% could not read at all or only with a lot of difficulty

73.3% could not do sums at all or only with a lot of difficulty

### Disabled households

44.5% had no formal education

70.2% could not read at all or only with a lot of difficulty

71.7% could not do sums at all or only with a lot of difficulty



## Access and Inclusion in Education System – the realities...

- The Liberia Education sector plan 2010-2020 - 'Getting to Best' - does include programmes aimed to 'address the crisis over over-age children'
- No inclusive education policy (draft in process). Current policies do not mention disability.
- No budgetary allocation for inclusive education. There is an overall under-funding of the sector.
- Lack of investment in adult education, though increasing focus on TVET.

## Discrimination and Exclusion

“...I have one daughter who is in the Government School and the boy is in private school. The boy is sponsored by my brothers and the girl by me because the government school is free of charge....The girl in the Government School is happy because I always tell her that you need to bear it and be in that school I do not have money to send you to private school. You know your brother in private school is sponsored by his uncles. Some government schools can teach the children well; while some do not care about teaching the proper lesson. ...I am not satisfied for my daughter to be in the Government School but no money to send two of them to private school. My daughter is satisfied because she understands my condition.”

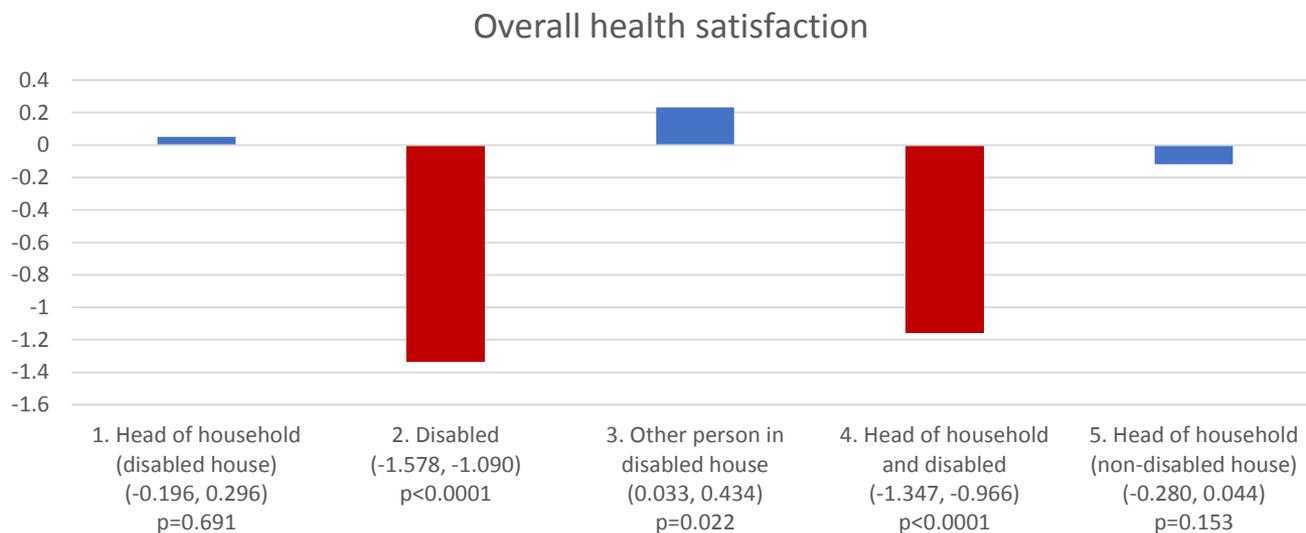
Male with physical impairments, age 30: “I am a student and a resident of this community... Despite my condition I am in school a 10th grade student and I want to complete high school. I believe with this condition if I do not have some level of education I will remain in poverty”

“my children were in public school but drop out because of registration fees, uniform and copy books. I do not have money to cater for five living children feeding and schooling at the same time. So I go for the most relevant one which is feeding to them alive.”

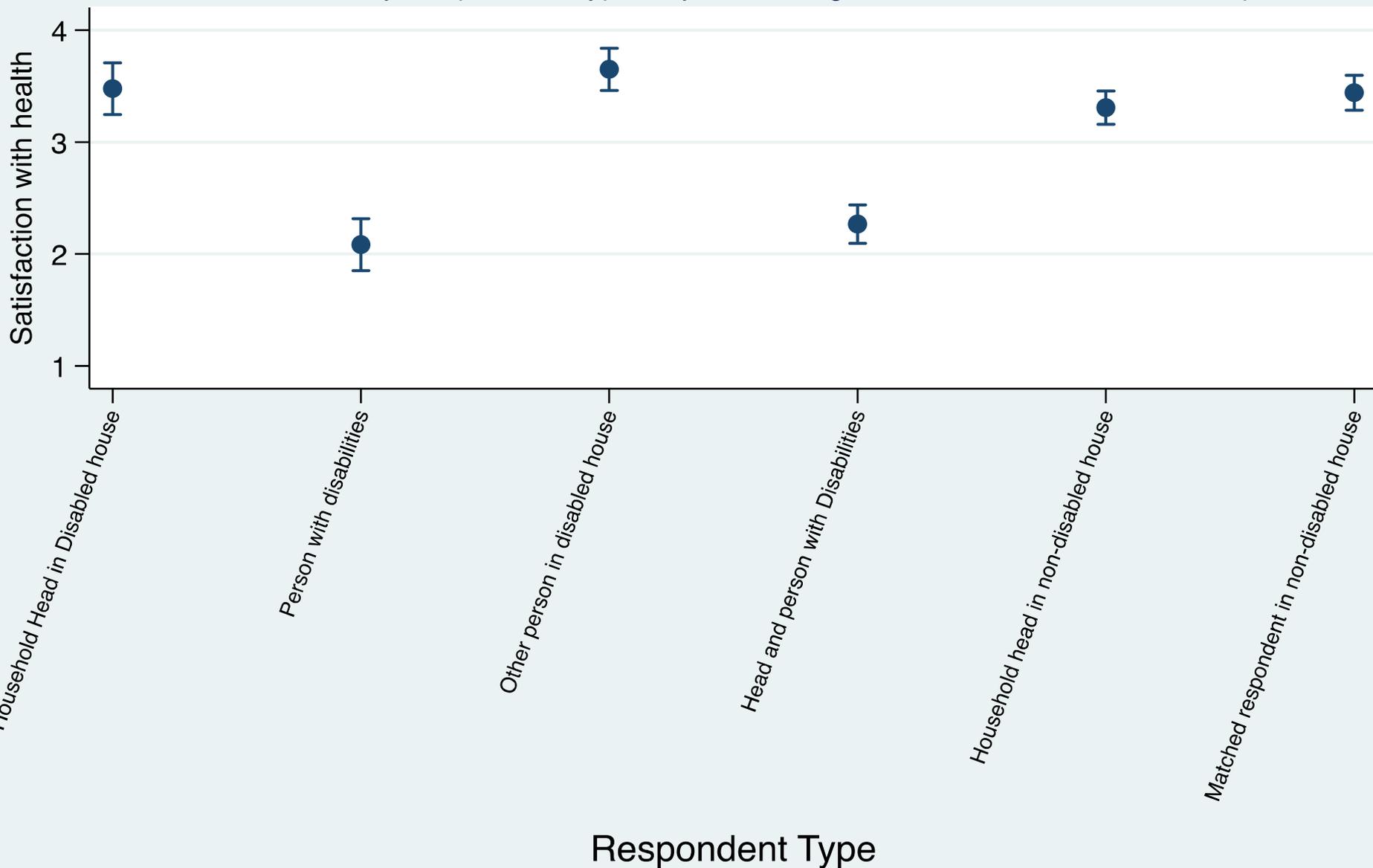
Health

## Health – overall satisfaction

How satisfied are you with your health overall?				
Not at all satisfied	a bit unsatisfied	not satisfied or unsatisfied	a bit satisfied	completely satisfied
1	2	3	4	5



# Satisfaction with Health by Respondent Type, adjusted for age, sex, education, and wealth quintile

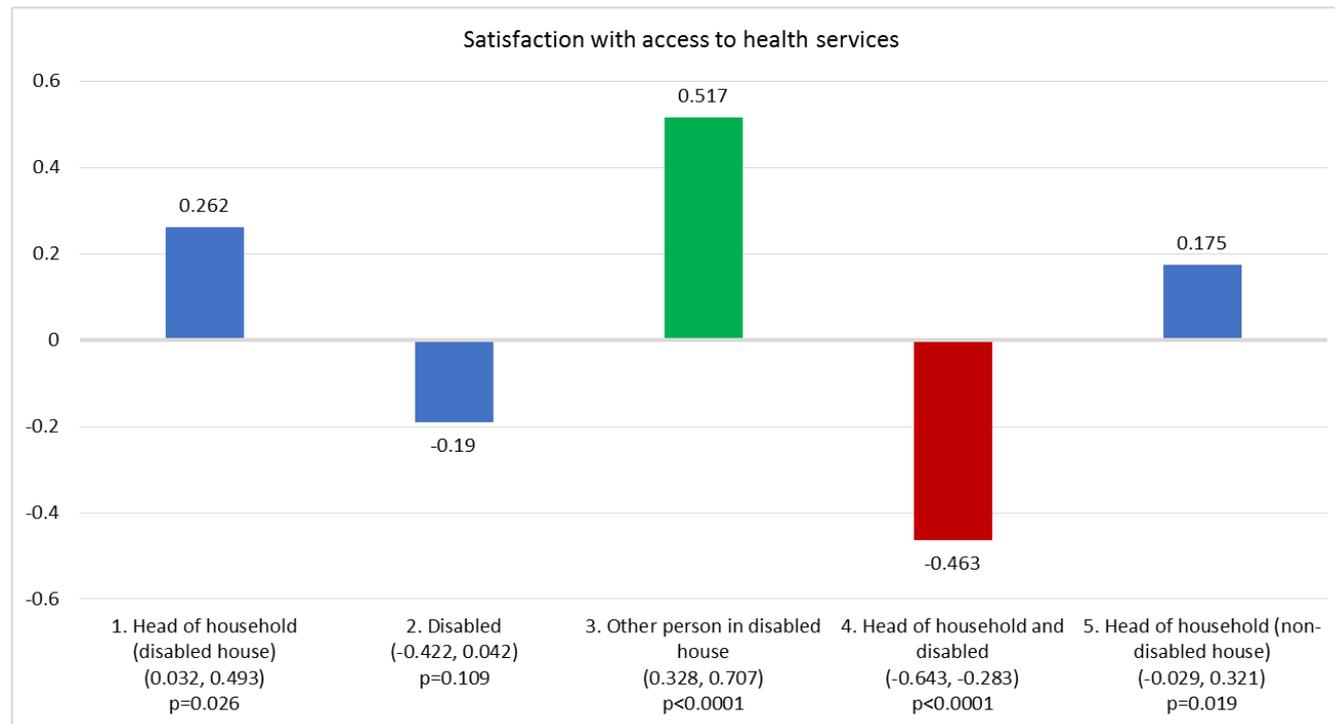


Satisfaction with Health='How satisfied are you with your health overall?':

1='Not at all satisfied' 2='a bit unsatisfied' 3='not satisfied or unsatisfied' 4='a bit satisfied' 5='completely satisfied'

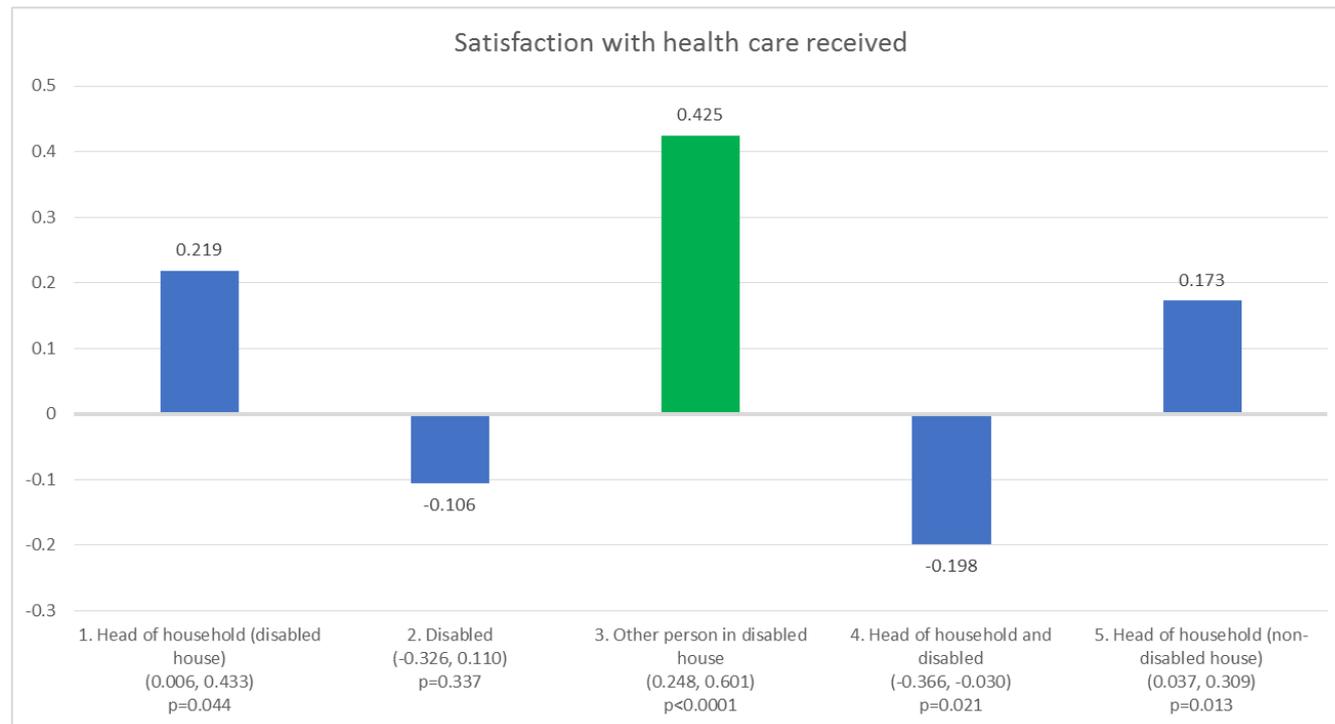
## Health – access to services

How satisfied are you with your access to health services?				
Not at all satisfied	a bit unsatisfied	not satisfied or unsatisfied	a bit satisfied	completely satisfied
1	2	3	4	5



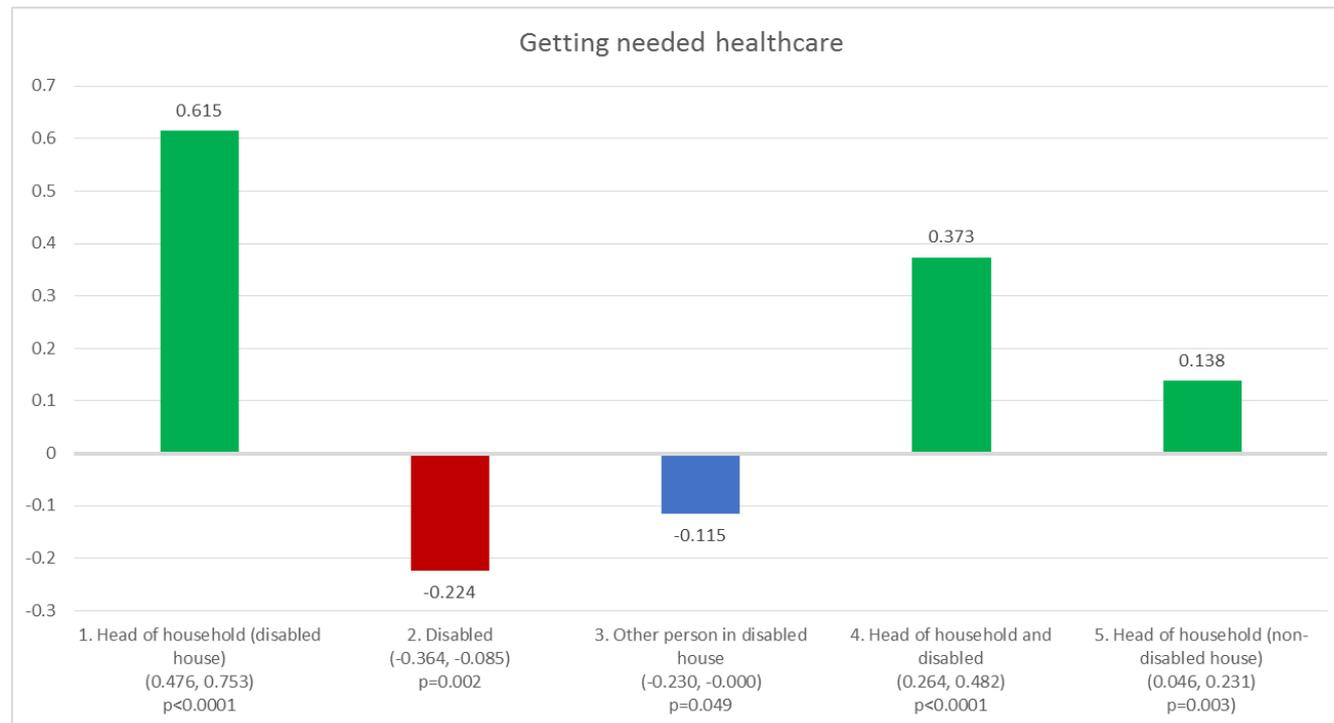
## Health – satisfaction with health care received

How satisfied are you with the health care you receive?				
Not at all satisfied	a bit unsatisfied	not satisfied or unsatisfied	a bit satisfied	completely satisfied
1	2	3	4	5



## Health – getting needed healthcare

How often can you get the healthcare you need?			
Never	Occasionally/ Sometimes	Most of the time	All of the time
1	2	3	4



## Challenges with the health sector

- Limited inclusion of disability in current health policies means limited access to healthcare services for a range of reasons, including cost, inaccessibility and discriminatory behaviour
- “For me my experienced using the government hospital is very bad; when [I] go there the nurses do not care for you, they don’t even look at my condition and pay attention to me; the nurses can leave me sitting and take people without disabilities to treat them first.”
- “When I go to the hospital. nurses give me ticket and keep me waiting while they treat others. They do not take my condition into consideration and pay attention to me. I think this behavior is bad if people with disabilities come for treatment they should be treated first base on their condition. But the nurses will always treat their own people before they can treat us”
- “Yes, there are difficulties using the services. First of all, many parts of the hospital are not accessible to people with disabilities. It is difficult for persons with disabilities to access the bathroom and walkways”.

## 'Ebola does not discriminate' – but do health systems?

- Town Chief, Lofa: during the Ebola outbreak it was “...just the same difficulty for all”.
- Assistant Nursing Services, Lofa. ““Yes in the ETU we encounter few of them actually but I can't give exact figure of them. some people with disability family members was killed during the Ebola crisis, like that they suffered, for those disable in Kolahun who was effected by their family getting the Ebola, were actually many, when the time come for someone to help them no body was there, that why I am saying they were suffering. They had no one to look after them some because their families were quarantine, so how do you expect that person to survive with of their conditions, it just by the grace of God.”



## 'Ebola does not discriminate' – but do health systems?

- 69% of women with disabilities felt that their access to health services got worse during the Ebola outbreak, compared with 60% of non-disabled women.
- “...it was difficult for us with disabilities, because we have to go around to ask people for help, and when someone see you in a distance they will say don't come here this is Ebola time. So it makes things difficult for us as disable people; on the line of food and medical treatment we really experienced difficulties. If you want to go and visit family for help during the Ebola they will say no stay at your place I will see you later. Everywhere we went before for assistance we could not go there again.”

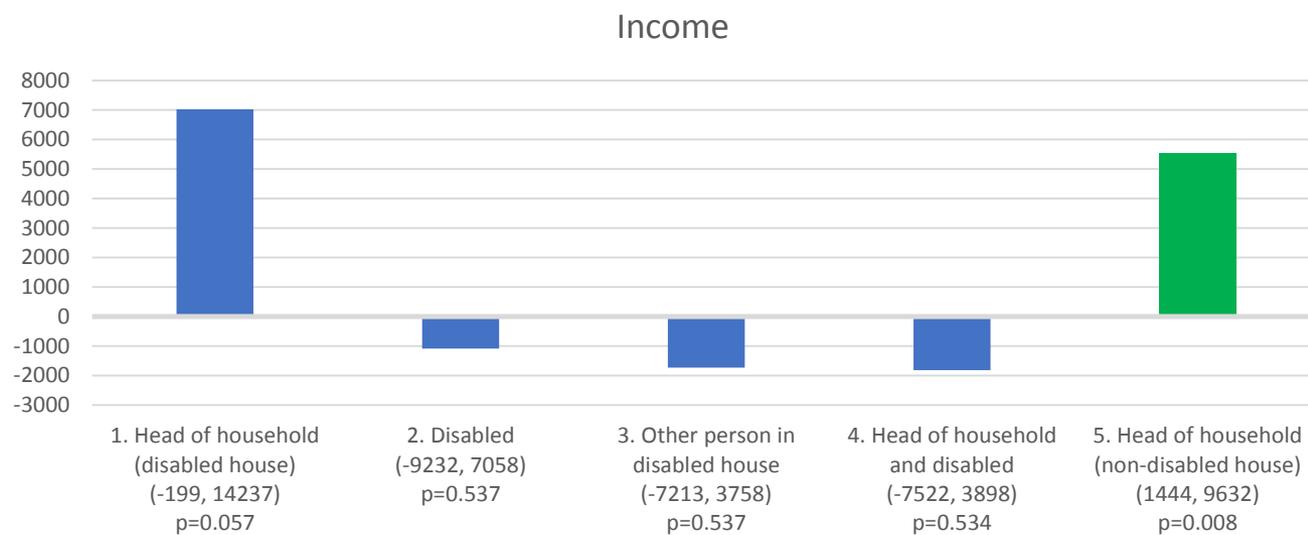


## Health Workers Need Training on Disability

- It is clear from the research that healthcare workers at all levels need to be trained on disability issues, including rights and responsibilities:
- Qu: Have you ever [treated] any persons with disabilities during your work? “Yes, I have treated people with disabilities before. Really, we can’t really estimate because we generally we record everybody in one book and we don’t attach their condition to it, because we don’t want to bring about discrimination among them so just take everybody equally. Presently as we speak now some are already admitted here.... no, I have not had any specific training on disability issues but we have had couple of training on the general basis on patience care.”
- Assistant Nursing Services Director Lofa: “No, I have not had any specific training on disability issues”
- Hospital Medical Director, Sinoe.: “No, I have not received any training on people with disabilities”
- GCHV, Grand Bassa: “I did not receive any training on people with disabilities in this community”

# Employment and Income

## Work – income and satisfaction



- Respondents tended to have low levels of satisfaction with work, but there were no significant difference between respondent types

## Lack of Expectations about State Support

- Currently there is very limited state support for persons with disabilities across the age-range.
- Most persons with disabilities have not paid into the state pension scheme.
- Only 0.35% of those surveyed identified their main source of income as 'government aid' and all were aged 60-87
- Visually impaired man age 67: "I do not have any source of income [...] There is no help from family, friends, government or NGOs. I try to get my children in school to learn for a better future but it is not easy"
- Visually impaired man age 63: "I am a poor man and disabled [that] depend on other people for survival. Before I got blind I was a working man; I worked to support my wife and children but now things have change due to my condition. I depend on family and friends for help before me and my children can eat."

## Limited Capacity to withstand 'Shocks'

- Partly as a result of the lack of social protection mechanisms, individuals have limited or no capacity to withstand any kind of external 'shocks'.
- These shocks can be
  - financial
  - marital
  - health-related
- “Since the death of my husband the family abandoned me with the children and there is nobody to help me in this condition [...my] children are not going to school, no farming and selling how do you hope for a better tomorrow?”
- “When I was making business my family life was better but now thing has change because of my condition... I depend on friends, family, and other people to send my children to school and hospital... I am a beggar every Saturday I go on the street to beg before we can get food to eat.”

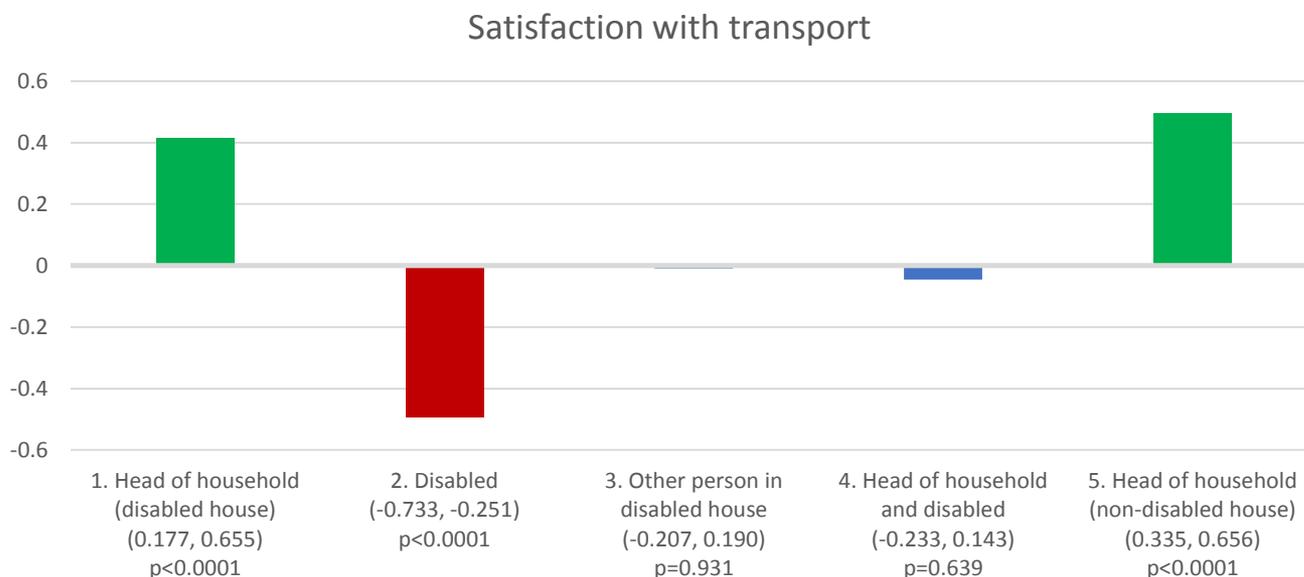
## Men too have Limited Resilience

- “I am a resident of this community and a father of six living children. Before I became person with disability I lived in Monrovia as a business man. I got sick when I was under taking a house construction project for my little brother in the United State of America. The family took me to several hospitals my condition did not improve and finally I became disabling. My wife abandoned me with the children. Life got unbearable for me in Monrovia that I have to come back to my home town and settle.”
- “I am a high school graduate... Since I got blind my wife abandoned me with seven living children. I do not have any source of income to support the children; we depend on begging for survival. There is no help from family, friends, government or NGOs. I try to get my children in school to learn for a better future but it is not easy”
- “things are really hard for people with disabilities in Sinoe... only one of my four children is going to school; the other three are not going to school....Because there is no money to send all of them to school; it is really frustrating to see my children sitting down and not going to school. If nothing is done about the situation in time to come I will be held responsible as a father for not sending the other children to school...”

# Transport

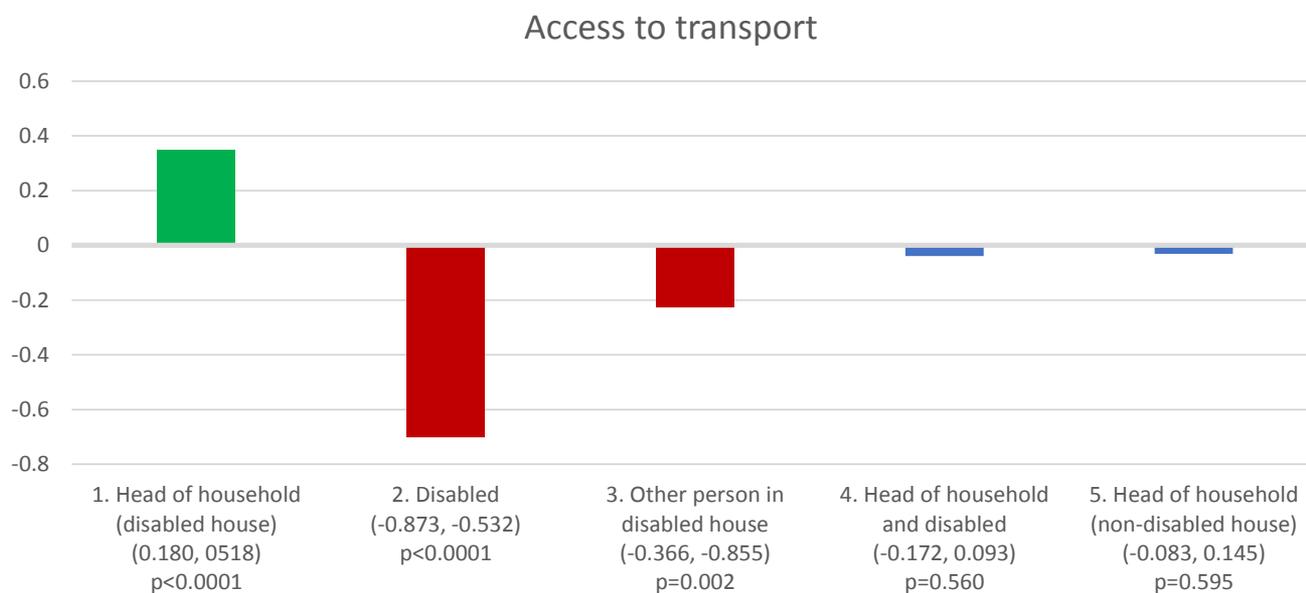
## Transport - satisfaction

How satisfied are you with the access to transport in your community?				
Not at all satisfied	a bit unsatisfied	not satisfied or unsatisfied	a bit satisfied	completely satisfied
1	2	3	4	5



## Transport – getting access when needed

How often do you have access to the transport you need?			
Never	Occasionally/Somet imes	Most of the time	All of the time
1	2	3	4



## Transport Infrastructure

County Inspector, Sinoe

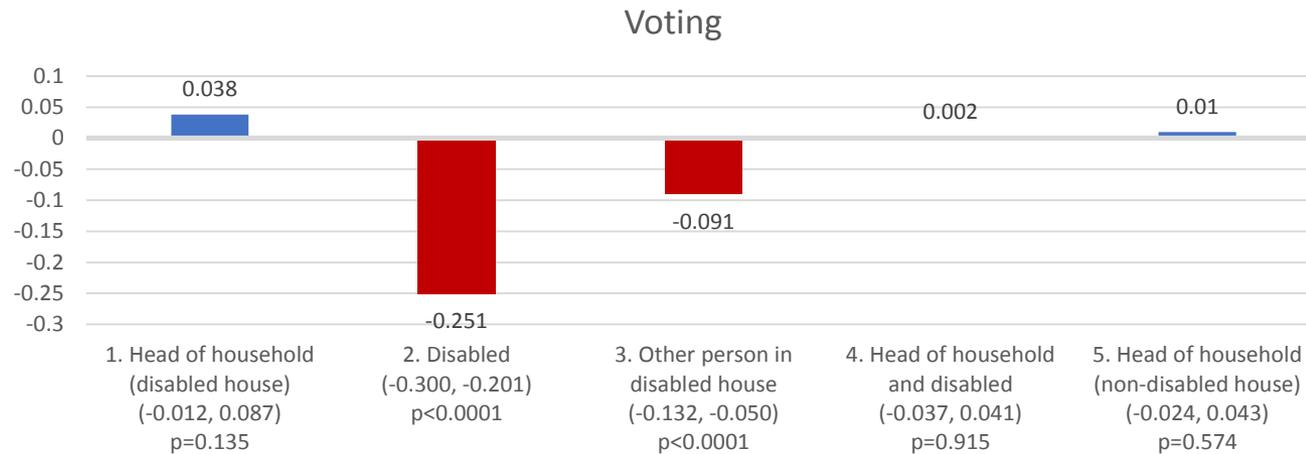
“Sometimes Central Government can fall short and does not have the ability to implement some of these projects. Not everybody is satisfy with the development program in the County and in fact our major problem here is the road network, some of our communities are not accessible to our development program because of bad road conditions”



# Participation

# Voting

Do you vote?		
Yes, always	Yes, sometimes	Never
1	2	3



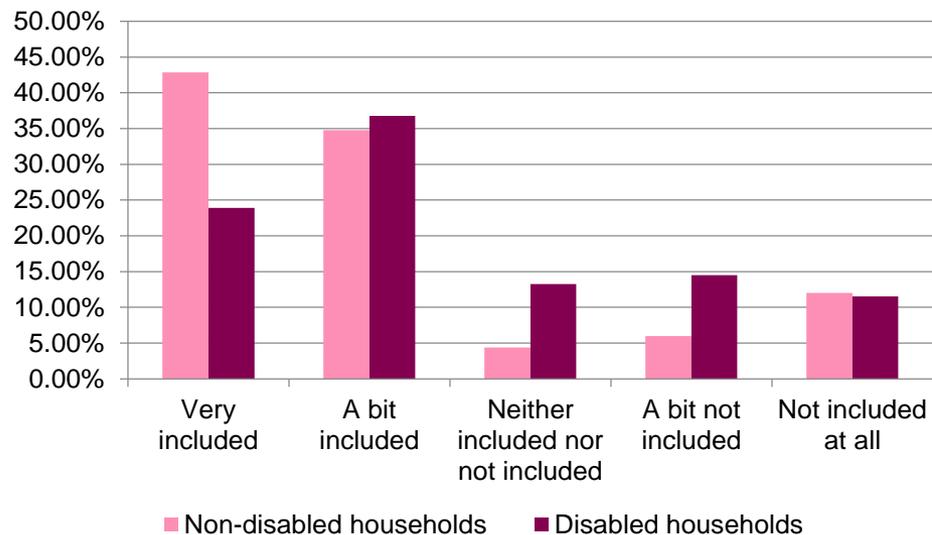
## Political disengagement – which perpetuates marginalisation and exclusion

‘They can come after us day and night because they want our votes. After the elections we see them no more’

“when election time comes we can vote for the person of our choice. You know election is the only time people who want to be leaders know our importance. They can come after us day and night because they want our votes. After the elections we see them no more; notwithstanding we are still planning in the upcoming elections.”

“what I feel so strong about party supporters who carry poster of their candidate and put it on my house.... Because I am a neutral person as a blind man I do not have any candidate. I need help from every candidate who come to the disable community for their votes but if I am carrying one candidate poster on my house because I am a beggar if that happen other candidates will not like to help me. So I do not want anybody to put their candidate poster on my house.”

## Inclusion in the community



- 89.9% of disabled households were members of community groups. Predominantly religious groups (84.6% disabled households)
  - Participation in community activities was lower in disabled households (61.1% compared with 72.7% in non-disabled households)
  - Main reasons were lack of desire (30.2%), but also and the negative attitudes of community members (20.9%)
- Disabled households felt less included in community decision-making

## Participation

“I am farmer and a resident of this community. The condition I am in today has caused so much disgrace to come on me...I was the voice in my family when it comes to decision making. Whenever family meeting is called or something happen the entire family looks to me for solution. But today the story has changed. I have become the least in the family; whenever there is family meeting nobody invite me, I have been abandoned. Currently I am living a life of neglect, discrimination and distress... I want government or NGOs to empower me with any of the following skills: tailoring, mechanic, soap making etc, to help improve my living standard.”

## Decision-making

”No, I have not asked why but what is hurting me as disable person is decisions are made before consulting us. You cannot do anything about the decision ready reached. We all just accept whatever decision they make and move on; even if the decision is against you or not.

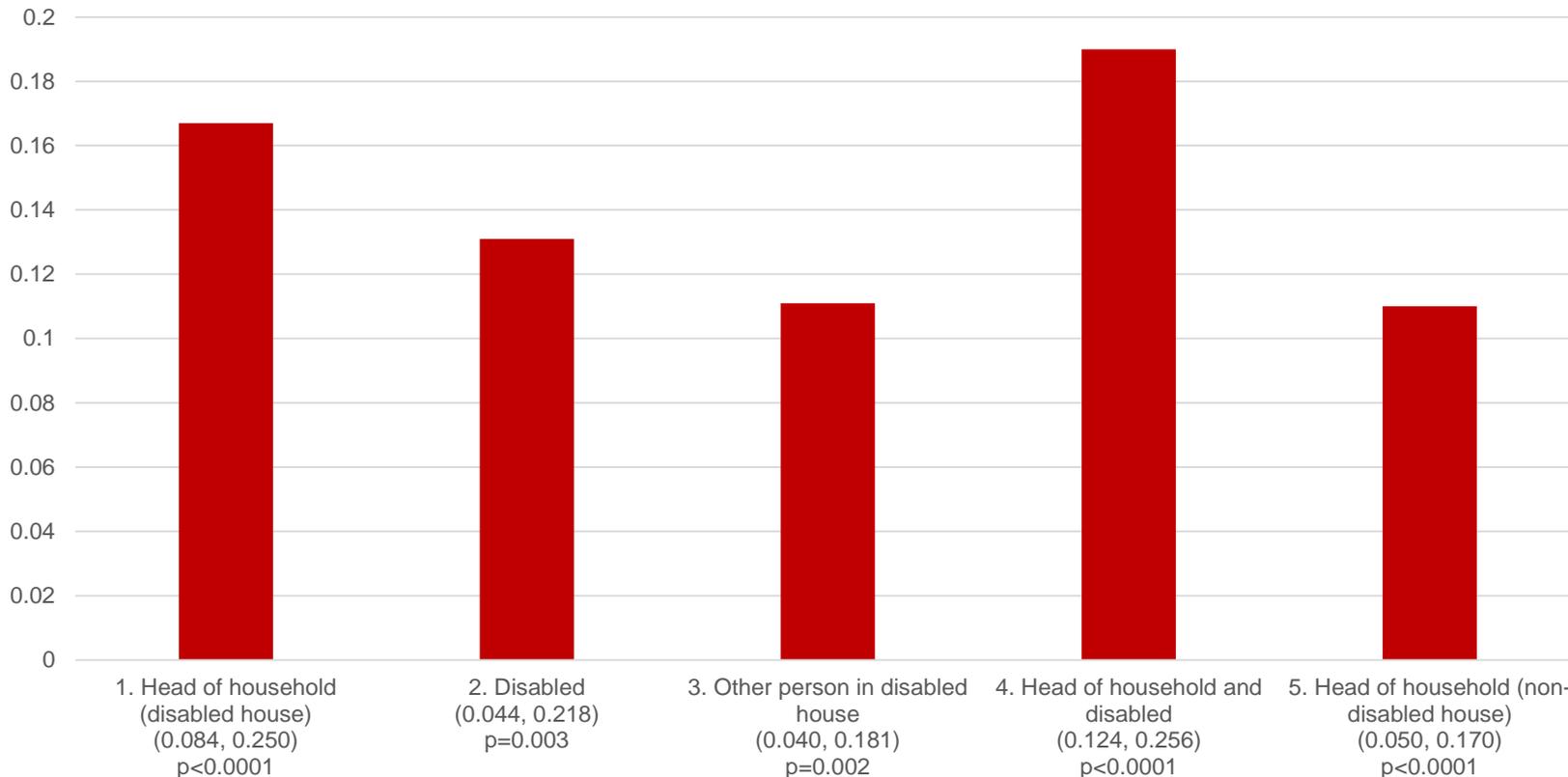
No, the County Leaders do not work with us; when they carry out development project, they do not ask people with disabilities to know what want for development. Maybe because we are disable that why they do not want to work with us. When other people who are not part of the County Leadership go on radio they can call on the County Leadership and other organizations to include people with disabilities in all development projects. But the Leadership in this County does not listen to that called.

Yes, when the County Leaders received the development money for the County they can call meeting and invite people with disabilities can be represented by our big people. But after the meeting it can be hard to get our part of the money.

# Crime and Safety

# Witnessing and experiencing crime

Likelihood of witnessing or experiencing crime



## Persons with disabilities experience higher levels of crime and insecurity

“I was sleeping arm robber went on me took away most of my things in the house [...] Even if I call the police before polices come the criminals have left with all my belongings

“when it comes to safety and security we are all vulnerable in this city whether you are person with disability or not. The police that supposed to protect people most time complain about not being equipped to fight criminals in the community at night so we are living by the grace of God. If people without disabilities can be complaining daily from criminal activities in the community what much more of people with disabilities; what can we do to protect ourselves?”

“sometimes polices listen to us. In fact the police even feel sorry for us because of our condition and handle the matter quickly.

“For me we all are protected by the police, the only problem I have is the vulnerability of disable women. Some heartless men will take advantage of them impregnate and abandoned them with impunity.”

## Women and Crime

- Disabled women were more likely to have experienced crime or violence in the previous year (26% compared to 18% of non-disabled women)
- Significantly more disabled women reported never feeling safe outside the home compared to non-disabled women (17% compared to 7% non-disabled women).



## Key Findings

1. There is a **lack of expectations** around state support –in particular the rights and responsibilities of the state towards older adults and women.
2. Persons with disabilities – in particular women with disabilities – and their families are at **increased risk of multidimensional poverty** and have **limited or no capacity to withstand any kind of ‘shocks’**.
3. Adults and children with disabilities are **not well supported by the current system of education**, and experience **higher levels of exclusion**.
4. Healthcare workers at all levels need **training on disability**.
5. Person with disabilities are often **politically disengaged**, perpetuating marginalisation and exclusion
6. Persons with disabilities experience **higher risk of crime and insecurity**

## Recommendations

1. Existing policies need to be properly **enforced, resourced, and monitored**. There needs to be a robust system for complaints and redress;
2. The development of a **national action plan** or 'road map', including persons with disabilities in all levels of consultation and decision-making;
3. Collect **robust comparable data** using the UN-endorsed Washington Group Short Set Questions;
4. Shift perspective to view **social safety nets** not as charity, but as **a right**. Social protection mechanisms should also be **flexible** enough to enable people to deal with 'shocks', and increase **resilience** to future shocks.

# Thank you!

Questions?

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