

Research Article

The Absence of a Disability Measurement System in the Disbursement of the District Assembly Common Fund for Persons with Disabilities in Ghana: How the Most Vulnerable are Denied Access

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Abstract: This paper studied the access criteria to the DACF for PWDs Fund by interviewing two DFMC members each across 13 districts. The results show the selection criteria are subjective, deny the most vulnerable access and recommended the use of a social policy-oriented disability measurement system to determine equitable access.

Keywords: District Assembly Common Fund for Persons with Disability, access criteria, Ghana

Introduction

A study from 2011 has shown that Persons with Disabilities (PWDs) in developing countries have a worse standard of living as compared to their counterparts in developed countries (Ofuani, 2011). Ghana's Population and Housing Census Report, in the same vein observed that PWDs in Ghana are poorer than their counterparts living without disabilities and emphasized the need to eliminate the developmental gap between PWDs and other citizens in the country (Ghana Statistical Service, 2014). This disparity led to the passage of Ghana's Persons with Disability Act (715) in 2006 (Ghana Statistical Service, 2014) which established the National Council for Persons with Disabilities (NCPWD) to spearhead the protection of the rights of PWDs (Gyamfi, 2013). Subsequently, in March 2007, Ghana became a signatory to the United Nations Convention on the Rights of Persons with Disabilities (CRPD) and the 119th State to rectify the CRPD and the Optional Protocol in 2011 (Gyamfi, 2013).

In fulfilling these legislative initiatives, the government of Ghana instituted the District Assembly Common Fund for Persons with Disability (DACF for PWDs) as one of the cash transfer social insurance programs that targeted the social and economic development of Persons with Disabilities (Ghana Statistical Service, 2014). The NCPWDs reckoned that such cash transfer social insurance programs require institutional disbursement guidelines for effective implementation. Thus, the NCPWD with other stakeholders developed the "Guidelines for the Disbursement and Management of the District Assembly Common Fund for Persons with Disability". The Disability Common Fund is a 2% (now 3%) allocation of the District Assembly common Fund (DACF) transferred from the Central government to District Assemblies quarterly (Gyamfi, 2013). The NCPWDs guidelines direct disbursement of the funds to the areas of awareness raising on PWDs issues, PWDs organizational development, skills training, income

generating activities, education of PWDs and the provision of technical aids (Guidelines for the disbursement and management of the district assembly common fund allocation to persons with disability, 2010).

Though the NCPWDs Guidelines are operational, there are allegations that District Assemblies continue to channel DACF for PWDs into other purposes against the dictates of the guidelines (District Assemblies Common Fund Secretariat, 2014). Recently there is the gradual introduction of political interference such as Metropolitan, Municipal and District Chief Executives (MMDCEs) using the funds to organize press conferences during disbursement especially in election years or feasting during festivities (SEND-Ghana, 2017). Funds are unduly delayed such that transfers for the fourth quarter of 2016, and the four quarters of 2017 were received as late as January 2018 (Ghanaweb, 2018a). The Fund is susceptible to political influence to the extent that the DCF Administrator issued a new distribution guideline which excludes farmers, traders, babies, students, persons under 18 and above 60 with disabilities (myjoyonline.com, 2018). The NCPWD guidelines also leave much to be desired in areas of defining issues of qualification, quantum of benefit, frequency of accessibility and so on, which are being determined by political actors. Thus, the impact on the economic conditions of the beneficiaries is highly variable (Edusei et al., 2016).

To address these, research has shown, the lack of data on the rate of disability and population has led to the insufficiency of the DACF for PWDs (Ghana Federation of the Disabled, n.d; Naami & Mikey-Iddrisu, 2013). The reason being that it results in a mismatch between the quantum of money released to the Districts and the volume of applications to the fund. The bid to support all applicants makes the program inadequate to make any meaningful changes in the lives of beneficiaries (Adamtey, Oduro, & Braimah, 2018; Adjei-Domfeh, 2015; Agboga, 2015; Edusei et al., 2016). The Ghana Statistical Service (2014) agrees that a disability measurement is needed for effective and efficient policy making while other research focus on the timely release and the increase of the Fund from 2% to 5% of the DACF (Edusei et al., 2016; Naami, 2015). CSOs such as SEND Ghana advocate for the need to increase the monitoring of the use of the funds (SEND-Ghana, 2014) based on their observations that it is a challenge to acquire data that evaluates the impact of the Fund on beneficiaries (SEND-Ghana, 2014). Researchers have advised, the Government of Ghana should find better ways to disburse to ensure fairness and monitor the implementation of the DCF (Adamtey et al., 2018; Naami, 2015; SEND-Ghana, 2014).

Ghana, based on the social model implements policies aimed at PWDs (Ghana Statistical Service, 2014), however, these policies and more so, the DACF for PWDs, do not achieve the purpose of meeting the needs of the most vulnerable PWDs. This is because of the disregard of disability measurement mechanisms to inform the disbursement of the DACF for PWDs. This study is relevant because it would bring to light how disability classification methods used in the

distribution of cash transfer programs could advance the effective disbursement and management of the DACF for PWDs, make data available to improve monitoring and evaluation, and claims to increase the Fund would be backed with available data. The aim of this research is to deepen understanding of how the Disability Common Fund is distributed at the district level, vis a vis characterization of beneficiaries, criteria for selections, and the disbursement process. This would enable policy makers and development partners alike, to better understand existing disbursement challenges, and to re-strategize to ensure improved services. The specific objectives were to

- identify the basis of selection of beneficiaries for the Fund
- assess how transparent the selection process is devoid of local political intervention
- recommend how to improve the selection of beneficiaries to achieve any meaningful impact.

To achieve these objectives, we conducted a desk study to gather data on the status of the fund during 2019. We found that there is a lack of the perspectives of fund managers on the state of the fund in the existing body of literature, as previous studies focused solely on the perspective of beneficiaries. To fill this gap, we used questionnaires to collect data from members of DFMCs from 13 districts in the Upper East Region of Ghana.

The paper has four parts: One reviews literature relevant to Social Insurance Programs and Disability classification, two presents the research methodology and discusses data analysis techniques, three discusses findings, and four concludes with recommendations for the improvement of the Disability Common Fund.

Disability Classifications and its Implication for National Intervention Programs and Projects

The concept of disability is relatively new and not clearly defined. This notwithstanding, the World Health Organization (WHO) based on the medical and social models of disability though careful not to define “disability” arrived at a widely accepted view of who a Person with Disability is. The WHO in the Convention on the Rights of Persons with Disability (CRPD) stated “*persons with disabilities include those who have long-term physical, mental, intellectual, or sensory impairments which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others*” (World Health Organization, 2001). This reflects a “marriage” of the medical and social models. The medical model argues that the individual is disabled by their impairment, while the social model views disability as socially constructed barriers (Barnes & Mercer, 1997; Fougeyrollas & Beauregard, 2001; Thomas, 2004). The social model was developed to rectify the shortfalls of the medical model which ignored the role of society in its view of disability as impairments to be mitigated by

medical attention and social welfare policies (Employment and Social Affairs, 2002). In the view of Palmer and Harley (2012), the social model though popular, did not deal with the shortfalls of the medical model. It did not solve the issues of PWDs and has no defined framework which can be applied to solving practical problems of PWDs or research (Palmer & Harley, 2012). Acknowledging that disability models must be easily applicable to practical field work, the WHO developed the International Classification of Functioning, Disability and Health (ICF) model. Some Scholars opined the ICF is less a conceptual model than it is a classification system (Bury, 2000; Leonardi, Bickenbach, Ustun, Kostanjsek, & Chatterji, 2006; Mont, 2007; Palmer & Harley, 2012). The focus was on practicability and shaping disability research by offering common vocabulary for research, improvement in data collection, and assessment (Berg & Cassells, 1992). The application could dissolve the sensitivity of issues of selecting beneficiaries of social safety net programs for both political actors and professionals involved (Berg & Cassells, 1992). Thus, the WHO was positive the ICF having evolved from a typical health statistic tool to a more popular survey for social policies would aid development policy making at different level across and within countries (Hemmingsson & Jonsson, 2005; Pavli, 2017; World Health Organization, 2001).

The literature demonstrated that the ICF framework was developed from merging several existing measurement systems. In the same breath, several post ICF framework disability measuring mechanisms were developed based on the ICF framework. Thus, Disability Classification systems are not exclusive of each other but adopts aspects to improve (Wright & Boer, 2002). The Barema classification scheme one of the oldest, is an arbitrary ordinal scale which attaches progressive percentage values to grade disabilities for accessing any social insurance program (Admon-Rick, 2014; Council of Europe, 2002; Fratello & Scorretti, 2002; Wright & Boer, 2002). More recent schemes are those assessing care needs which evaluate and factor in the amount of time a care giver needs in assisting a beneficiary. Functional capacity method gives the assessor the room to describe the degree of disabilities using some predetermined variables, which is preferred in assessing ability for job placement (Employment and Social Affairs, 2002; Wright & Boer, 2002). More detailed functional capacity methods are Katz and Lowton indexes (the Activities of Daily Living (ADLs) and Instrumental Activities of Daily Livings (IADLs)) based on behavioral theories of human function (Berg & Cassells, 1992).

Clearly, the use of classification methods to translate disability into numeric figures makes determination of disability status a more efficient and standardized process to ensure equity in public funded social policy for PWDs (Admon-Rick, 2014; Mashaw, Reno, Burkhauser, & Berkowitz, 1996). However, Pavli (2017) argues the cultural context must be considered in labelling people using a classification system to avoid further degrading effect on the identity of the disabled (Pavli, 2017). Drabek concluded altogether, using classification to label based on activities a group or an individual can perform brings about marginalization (Drabek, 2014). Some question the theoretical rigor of the classification methods. To Imrie, the ICF for instance is

conceptually underdeveloped since it is not established on adequate theoretical underpinnings (Imrie, 2004). These criticisms notwithstanding, Berg and Cassells (1992) support WHO to argue, classification methods are gaining worldwide acceptance because their advantages outweigh the problems which are expected with every developed system (Berg & Cassells, 1992).

In applying this within a national context, disability policies, laws and institutions of a country are shaped by governments' conceptualization and understanding of disability (Drake, 1999). Therefore, in determining state welfare programs for PWDs, issues such as, is disability present; does it qualify for benefit; is it sufficiently severe to qualify for the benefit; is it from an appropriate cause for the benefit; will it persist long enough for benefit to be worth allocating must be considered (Wright & Boer, 2002).

There exists in developing countries a vicious cycle of disability and poverty. The chances of PWDs emerging from poverty are slim because of unavailable or insufficient safety net programs. There is also the lack of enabling legislation to promote PWDs empowerment. Even when available, weak implementation defeats the purpose of enactment (Naami & Mikey-Iddrisu, 2013; Ofuani, 2011; Tsengu, Brodtkorb, & Almnes, 2006). To change the situation of PWDs, academics emphasize the need for social support programs. In this context, it is prudent to identify those in need in the face of severely limited resources (Naami & Mikey-Iddrisu, 2013; Palmer & Harley, 2012; Pavli, 2017). To achieve this there ought to be data on PWDs; however, most developing countries including Ghana do not have adequate data on the assessment of PWDs (Edusei et al., 2016; Gyamfi, 2013).

Ghana's most researched cash transfer program targeted at PWDs is the DACF for PWDs. The literature demonstrates that the aim of such programs is to reduce poverty among all PWDs. To ensure the success of such programs, PWDs must play a central role in the empowerment process. Thus, creating the enabling environment for self-discovery, self-development and self-awareness to reverse the perception that PWDs have less potential in the quest for development (Ghana Statistical Service, 2014; Naami & Mikey-Iddrisu, 2013; Ofuani, 2011; Tsengu et al., 2006). In view of the relevance of the DACF for PWDs, there is the call for the need for increase and timely disbursement of the funds (Edusei et al., 2016).

However, it is contestable whether the increment of the fund can have an impact on improving the economic conditions of the beneficiaries because the process of disbursement needs to be reconsidered. Funds are allocated to economic activities that are restricted to rural craft of localities and have no market value. Where new skills are introduced, there is the lack of tools and materials to practice. Clearly, the fund is not adequate to make any meaningful changes in their lives considering the mismatch between the huge volume of applicants and the funds (Edusei et al., 2016; Slikker, 2009).

In our view, there is the need to shift the focus from research that points to increasing of the DACF for PWDs to research that seek ways the use of the available resources can be maximized. Considering the economic situation in Ghana, the calls to increase the DCF will not be heeded. There is the urgent need to look critically into the disbursement of this cash transfer program. The rationale is how best to identify the target population in need, providing sufficient support and graduating them off the program to make room for others as well.

Study Design

The first point of call for the researchers was to review the literature on the District Assembly Common Fund for Persons with Disability. The findings are presented in the discussion section below. Based on the review we observed a gap in the literature which solely focused on the perspective of the beneficiaries of the Fund. We therefore made the conscious effort to interview only members of the Disability Fund Management Committees to give a different perspective to the debate. This paper used this approach because there exist enough publications based solely on the perspective of beneficiaries. Despite the existence of a large body of literature on the Fund, the researchers' knowledge gained through the implementation of development projects across the region indicate the persistence of the inefficiency of the Fund. Therefore, the researchers consider interviewing the Fund Management Committees innovative in understanding the fund's disbursement.

Study Population and Sample Size

Two committee members were interviewed across all 13 districts of the Upper East Region (the second poorest region in Ghana) excluding the two newly created districts. In total, 26 respondents were purposively sampled to participate in the survey. Of this number, 13 respondents were PWDs who were representing the GFD or the NCPD on the Fund Management Committees. Six of the total respondents were female. The Upper East branch of GFD, the Upper East Regional Coordinating Council and the Regional Department of Social Welfare endorsed this study by providing introductory letters for data collection.

Field Data Collection Techniques and Analysis

The study used a survey and gathered data through questionnaires with both closed-ended questions and opened-ended questions. This made it possible for the researchers to solicit information from committee members who are part of decision making concerning the disbursement of the DCF. The questionnaires were self-administered, however, the researchers assisted in the clarification of questions where it was necessary. Respondents who needed translation of questionnaires into the local language (Frafra) were assisted by a research assistant. The service of a translator was procured to translate the research questions to respondents with hearing disabilities. The personal aids of respondents with visual disabilities ensured the

appropriate recording of the responses of their employers. The completeness and confidentiality responses were prioritized by researchers. The collected data was analyzed with the Statistical Package for Social Science (SPSS) and Microsoft excel for the generation of frequencies and tables. Responses to open-ended questions were analyzed thematically using the software MaxQDA and some responses quoted in the data presentation and discussion sections. Secondly, a desk study to ascertain the status and efficiency of the Fund. It compared the amount allocated to the districts within the scope of the study and the number of PWDs to which funding was targeted.

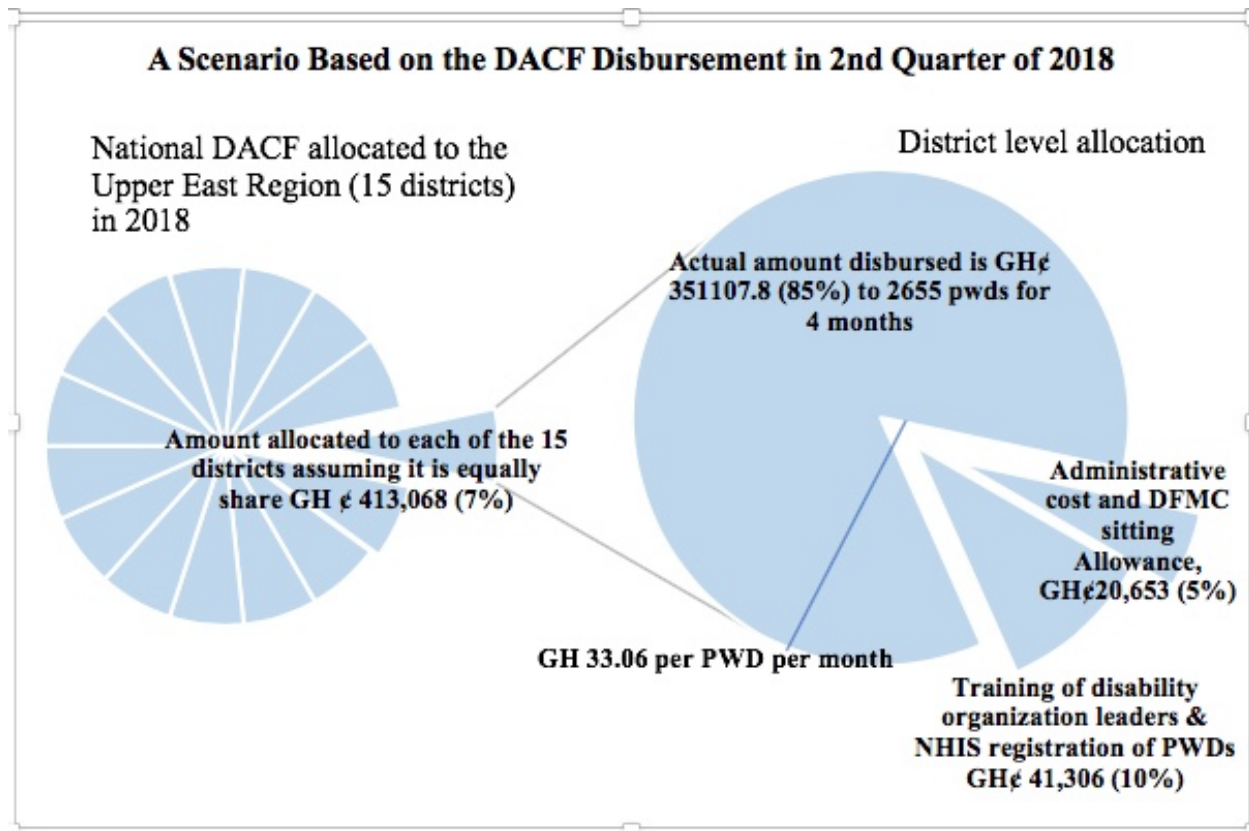
Presentation and Discussions of Findings

Findings from Desk Studies

The result of our desk study gave us insight into the current financial status of the DACF for PWDs. As shown in Figure 1, the DACF for PWDs has been increased from 2% to 3% of the DACF transferred quarterly to all districts. The most recent record of the DACF secretariat indicates the Upper East region received 6,196,023.23 Ghana Cedis (GH¢) (\$1,290,838.17 at Bank of Ghana exchange rate of GH¢ 4.8 to \$1 on 12/02/2019) for the second quarter of 2018. This sum to an average of GH¢ 413,068 (\$ 86,056) for each of the 15 districts in the region. Therefore, the DACF for PWDs average GH¢12,392 (\$2,582). Of this amount, 5% is to be set aside for administrative and sitting allowances of the DFMC, 10% each set aside for training of disability organization leaders and registration of PWDs onto the National Health Insurance Scheme as directed by the Administrator of the Disability Common Fund. In reality, an estimate of GH¢ 9,294 (\$1,936) is spent on six thematic areas as stipulated in the disbursement guidelines (District Assemblies Common Fund Secretariat, 2018). These are: advocacy/awareness raising on the rights and responsibilities of PWD; strengthening of OPWDs (Organizational development); training in employable skills/apprenticeship; income generation activities (input/working capital); some educational support for children, students and trainees with disability; and provision of technical aids, assistive devices, equipment. The Upper East Region has about 39,838 PWDs, thus, each district on the average has 2,655 PWDs. Our analysis of the findings would be based on the assumption that 2,655 PWDs are to benefit from GH¢ 9,294 (\$1,936) for a period of every four months. (District Assemblies Common Fund Secretariat, 2018; Ghana Statistical Service, 2014; Ghanaweb, 2018b, 2018c). Though the DACF for PWDs was recently increased, the actual amount disbursed hovers around 91.44% of the disbursed Fund from source.

Figure 1

A Scenario Based on the DACF Disbursement in 2nd Quarter of 2018



This paper like many others had a confirmation of 80% and 57.7% from respondents about the insufficiency and delayed disbursement of the funds respectively. Some often-cited publications on the insufficiency of the Fund such as Naami & Mikey-Iddrisu (2013) and Edusei et al. (2016) deduce from these findings, the need for an increment and timely disbursement.

Finding a Nexus between Data from Literature on the Fund and Field Data from the Perspective of the Fund Management Committees

From our survey, 57.7% of the respondents from the DFMCs confirmed funds from the national disability fund are not disbursed quarterly as stipulated in the guidelines. Therefore, 61.5% confirmed the funds are not disbursed from the district level to beneficiary PWDs regularly.

As a result of the above, DFMCs receive volumes of applications for funding hence the need to satisfy a large group of applicants. Therefore, a majority of 80% agreed there are complaints about the insufficiency of the disbursed funds.

Emanating from the above, 92.7% of respondents agreed that more than 50 PWDs benefit from each disbursement round. All respondents said this represents more than 50% of total applicants and the decision is based on needs of applicant, requested budget, type and feasibility of business.

In accordance to the DFMC guideline training in employable skills/apprenticeship and income generation activities are prioritized as 100% of the respondents agreed that the unemployed are prioritized in the disbursement of the fund. Nevertheless, 25% also indicated that funds are extended to PWDs employed in the public sector. In making such decisions, a majority of 80.7% of respondents indicated that they are influenced in deciding who benefits from the Fund by the capacity of the applicant to perform activities of daily living.

When researchers sought to know if available data was the basis for the selection of Fund beneficiaries, 65.4% of the respondents indicated in the affirmative. However, upon further interrogation, 70.6% indicated the data available is only a collection of names of PWDs in the various districts while 29.4% of respondents said the data includes type of disability.

To ascertain how transparent and equitable the process of disbursement was, the researchers sought to find out about the independence of the DFMC from district level political actors. Impressively, 96.2% of the respondents are aware of their sole responsibility in decision making about the beneficiaries of the fund. However, 25% of respondents also agreed that political figure heads such as District Chief Executives have influence in the decision making.

Answers to the Research Questions

How the DFMCs Select Beneficiaries of the DACF for PWDs at the District Level

In the implementation of public funded social policies and programs aimed at alleviating hardships of PWDs, scholars have recommended the use of databases derived from classification methods which ensures determining eligibility and equity (Admon-Rick, 2014; Mashaw et al., 1996). In our finding, though most districts (65.4%) have data on PWDs under their jurisdiction, these databases can be described as a “collection of names” at best. The other 34.6% have no data on PWDs in the district at all. The inadequacy of data which classifies PWDs according to their needs translates into issues of difficulty in determining the eligibility of beneficiaries and equity in the disbursement of the DACF for PWDs Fund.

Scholars have argued that the economic and social situation of PWDs can become better when the most vulnerable are identified and assisted in the face of resource limitation (Naami & Mikey-Iddrisu, 2013; Palmer & Harley, 2012; Pavli, 2017). However, this research finds the implementation of the DACF for PWDs goes against the above. A majority of 80.7% of the respondents indicated they considered the capacity of the applicant to perform activities of daily

living whiles only 3.8% considered the amount of time needed by a care giver in supporting the applicant. This meant the most vulnerable PWDs have no access to the Fund because they are deemed as not able to utilize the disbursed resource. We contend, this is discriminatory against those who need the fund the most. Furthermore, 92.7% of the respondents indicated more than 50 applicants benefit in each round, thus, from the available average funds per researchers' calculation (GH¢9294), a beneficiary will receive an average of GH¢ 186 (\$ 38.75). This is insufficient as stated by earlier research such as Edusei et al. (2016). The implication is that applications with budgets close to this figure stand a chance of being approved since it is based on requested budget, type and feasibility. Such meager amounts cannot be used in engaging in any sustainable income activity. Hence, beneficiaries recurrently apply each disbursement round which denies others access. A respondent said, "...they [PWDs] keep changing their identities to get the money [DACF for PWD] more than once..."

The transparency of the selection of beneficiaries of the DACF for PWDs

In the decision-making process concerning the disbursement of the funds to beneficiaries, 96.2% of the respondents indicated that it is solely done by the DFMC and by the involvement of PWD association leaders. However, the implementation of other thematic areas such as the provision of assistive devices and the procurement of equipment for income generating activities involve district political heads. The involvement of political figures leads to misappropriation of the fund. One respondent mentioned "... sometimes the big men [MMDCE] order for the funds to be taken for other purposes. Sometimes too they also bring their list [PWDs belonging to same political parties as political heads] to be given the money before anybody..."

Based on our findings, we argue that the recommendations of the major academic works on the topic such as Naami & Mikey-Iddrisu (2013) and Edusei et al. (2016) are valid to a large extent. However, due to the recent increment such recommendations would not likely to be considered amidst the cry of politicians about the scarcity of resources for social spending. Therefore, we argue for urgency in tackling systemic challenges with the disbursement of the DACF for PWDs Fund to ensure effectiveness, efficiency and impact of the Fund even in the face of limited resources.

Study Implications and Recommendations

1. Our findings strongly suggest that the disbursement of DACF for PWDs has no empirical basis for the selection of who benefits from the fund or not. The criteria of the DFMC based on individual's ability to perform some daily duties, type, budget and sustainability of the income generating activity further creates barriers for most vulnerable PWDs who cannot perform these tasks.

This paper recommends the need to roll out a project that would measure the disability status of all PWDs, categorize them and decide on which bases disbursement of the fund should be made. Here, this data would allow PWDs with capacities to engage in economic activities to be given substantial one time off budgetary allocation and other supports to establish their income source. This would pave the way for weaning them off the fund. This would free up substantially subsequent funds for the regular allocation to PWDs categorized as unable to perform such activities.

2. The disbursement process is also impeded by district political heads such as the MMDCE. The DCE has no role per the NCPD guidelines hence must abstain from interfering in determining the beneficiaries of the Fund.

It is recommended that the Regional Coordinating Council of the region and by extension the government of Ghana indicate to all MMDCEs to desist from discriminating on the basis of political affiliation in the disbursement of the Fund. The NCPD should also review the current guidelines to mandate all DFMCs to have a database at the district level that is fed into a national database to inform social policies targeted at PWDs.

Limitations of the Study

The research focused only on the Upper East Region of Ghana out of all sixteen regions. Responses were also sampled from 26 members across all districts. This region is also the second poorest region, hence more PWDs expect to rely on the DACF for PWDs. There are poor regions with higher number of PWDs hence the situation may be more critical. There are also major metropolitan areas with high number of PWDs but less reliance on the Fund. It would be difficult, therefore, to generalize the findings to represent the situation of the whole country. This notwithstanding, there is the lack of any measurement to inform social policy intervention towards PWDs or any other social group.

Conclusion

Moving away from the usual studies of the impact of the DACF for PWDs, this study focused on the criteria for and transparency of the disbursement process across 13 districts in the Upper East Region. The study found that there are no empirical criteria informing the disbursement of the fund. Reliance on the ability of individuals to perform some tasks further creates barriers to most vulnerable PWDs. The study also finds the gradual introduction of using the funds to satisfy patron-client networks of local political heads of districts amongst PWDs. The study recommends the need to use a social policy-oriented disability measurement system to identify PWDs in need of one-time support and PWDs who require regular support. The Regional Coordinating Councils that have oversight responsibility over MMDCEs and the Common Fund Administrator must ensure that these political heads desist from manipulating the Fund for political gains.

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