

# Disability and social protection in the Pacific and Timor-Leste

Partnerships for Social Protection

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## Context and project background

Effective disability-inclusive social protection programming is essential for inclusive social protection, particularly noting that the prevalence of disabilities is rising due to high rates of non-communicable diseases (ADB, 2019). The Australian Government's Partnerships for Social Protection (P4SP) program and Sustineo have published an [Annotated Bibliography](#) and [Evidence Review](#) outlining the current evidence landscape from available literature on social protection in the Pacific and Timor-Leste, including an initial exploration of disability-related issues. This brief provides a more in-depth exploration of the evidence on disability and social protection, highlighting the main findings from the published literature, identifying key voices on this topic and drawing out recommendations for further research.

## What the evidence says

### Social protection for persons with disabilities is increasingly available

Across the Pacific and Timor-Leste, provision of social protection for persons with disabilities is increasing, though countries across the region are at different stages of implementation. According to Knox-Vydmanov et al. (2023), tax-financed disability benefits have been introduced in Fiji, Kiribati, Nauru, Timor-Leste, Tonga, Tuvalu and Samoa, between 2005 and 2023. These benefits are non-contributory (i.e. social assistance), and are sometimes included alongside old-age benefits, as in the case in Timor-Leste's 'Subsídio de Apoio a Idosos e Inválidos' (Subsidy for Support to the Elderly and Disabled) program.

The increase in number of countries that provide disability benefits looks to align with the adoption of the UN Convention on the Rights of Persons with Disabilities (CRPD) which has been either signed or ratified by 13 Pacific Island countries and Timor-Leste at the time of writing (UNOHCHR, n.d.).<sup>1</sup> The Convention lists a range of rights for persons with disabilities, including "the right to an adequate standard of living and social protection" (Emberson-Bain, 2021, p. 13). Causality between adoption of the CRPD and the increase in countries providing disability benefits should not be assumed, and it is important to note that implementation of the provisions of the CRPD and disability-inclusive

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<sup>1</sup> The CRPD has been ratified by: Cook Islands, Kiribati, Republic of Marshall Islands, Federated States of Micronesia, Nauru, Palau, Papua New Guinea, Samoa, Solomon Islands, Timor-Leste, Tuvalu, and Vanuatu. Tonga signed the CRPD but has not ratified.

social protection has been strongly supported by advocacy from organisations for persons with disabilities (Emberson-Bain, 2021). Nonetheless, the wide adoption of the CRPD does signify a growing recognition of the importance of providing inclusive social protection for people with disabilities across the Pacific and Timor-Leste.

Some social insurance schemes facilitated through Provident Funds also offer payments in cases of disability. Receipt of benefits under these programs requires that an individual has a history of formal employment and contributions, which can marginalise and exclude persons with disabilities who often have limited access to formal employment (Emberson-Bain, 2021).

## Coverage within disability-inclusive social protection programs

The expanding provision of social protection for persons with disability in the Pacific and Timor-Leste is promising, though there are still many opportunities to improve coverage. Notably, some of the most populous countries in Papua New Guinea, Solomon Islands and Vanuatu, do not have any programs to provide tax-financed benefits to persons with disabilities. Furthermore, there are a wide variety of barriers that can prevent persons with disabilities from accessing social protection, even when disability-specific programs are in place.

There are many structural and policy barriers for persons with disability in accessing social protection. Social and rights-based approaches to disability inclusive social protection are still nascent in many countries across the region. This is a shift that is ultimately required for governments to successfully implement their CRPD requirements. There is a need for knowledge and capacity support to improve inclusion and ensure participatory approaches, which includes working in close partnership with organizations of persons with disabilities.

The focus on medically driven models of disability assessment is another barrier. There are significant barriers to accessing disability assessments – which are typically conducted by medical professionals – including staffing and skills shortages in the medical field, affordability, and geographic isolation for those living in remote areas (Knox-Vydmanov and Cote, 2023). Even where persons with disabilities can access these assessments, they may provide an incomplete picture of the context and that person's experience of disability. According to Cote (2021), medical assessments are “valued for their apparent objectivity [but] can leave out significant parts of what constitutes disability and provide little information about the actual support required” (p. 358).

A further issue reducing coverage of disability benefits is that they are sometimes incompatible with work (Cook Islands, Timor-Leste and Palau) and with other social protection payments (Nauru, Tuvalu and Republic of Marshall Islands), meaning that persons with disabilities who are accessing income through work or other social protection payments are considered ineligible for disability benefits (Anderson et al., 2017; Emberson-Bain, 2021; Knox-Vydmanov and Cote, 2023). The use of this criteria for eligibility fails to recognise the additional expenses of living with a disability, which are layered on top of ordinary living expenses, and goes against the CRPD (Emberson-Bain, 2021). It also perpetuates the false idea that disability is equated with incapacity to work, rather than recognising that with the right support, most persons with disabilities would be able to engage in work (Knox-Vydmanov and Cote, 2023).

## Emerging evidence on best practice

Alongside documentation of these challenges in coverage, there is an emerging body of evidence on best practice in disability-inclusive social protection, including with a Pacific focus.<sup>2</sup> One of the most notable studies examined in the Evidence Review was a report published by SPACE (Social Protection Approaches to COVID-19 Expert Advice Service) intended to support organisations of persons with disabilities in Pacific Island Countries to advocate for disability inclusion in social protection. In this report, Sammon and colleagues (2021) detail five enablers for disability-inclusive social protection systems:

- Actively include persons with disabilities in the planning and design processes
- Enhance outreach, information dissemination, and awareness initiatives
- Determine eligibility for benefits through assessments which account for both functioning and social factors
- Ensure income security by accounting for the extra costs of living with a disability
- Build a strong evidence base on inclusive social protection and push for improved disaggregated data on persons with disabilities.

Analysis from Cote (2021) provides similar guidance, with the addition of ensuring that delivery mechanisms for social protection are accessible, by considering and addressing barriers such as distance, administrative complexity and inaccessibility of facilities.

## Good practice in disability-inclusive social protection: Fiji case study

In 2018, Fiji introduced a new social protection program which includes design features that reduce the barriers to coverage and includes many of the best practice elements set out above.

As described by the Pacific Disability Forum (PDF, 2018), the program provides payments to poor households through the Poverty Benefit Scheme (PBS), which is not specific to persons with disabilities, in addition to a Disability Allowance Scheme and a bus travel credit for persons with disabilities (PDF, 2018). Notably, the eligibility assessment for the Disability Allowance Scheme is not medically-driven; assessments can be done in people's homes by social workers and are focused on both functional limitations and support needs (Cote, 2021). In addition to determining eligibility for disability benefits, these home visits included complementary services: delivery of identity documentation, setting up bank accounts and reviewing eligibility for other benefits (Cote, 2021). The Disability Allowance Scheme is compatible with work and other social protection payments as it is non-means tested at the individual and household level (PDF, 2018). Singh (2020) found that it was common to be receiving both the disability allowance and bus fare concession.<sup>3</sup> In the 2024-2025 national budget, the transport component has been restructured to provide a cash top-up to recipients rather than a bus concession, in recognition that many persons with disability lack access to bus services or are unable to use them due to physical limitations (Prakash, 2024).

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<sup>2</sup> Notably from the Evidence Review, the following provide perspectives on best practice in disability-inclusive social protection programming: Cote, 2021; Delforce & Woyengu, 2023; Emberson-Bain, 2021; Sammon, 2021.

<sup>3</sup> This data is from a primary survey and the sample size is unclear from the publication. It should not be assumed to be representative.

The shift in program design in Fiji has resulted in a rapid expansion of coverage within Fiji’s disability benefit programs, with the number of people registered for disability-targeted social protection programs increasing more than fourfold, from 26,070 people in 2015 to 113,595 people in 2018 (ADB, 2022). By allowing layering a poverty benefit with disability-specific benefits, this social protection program takes what Sammon et al. (2021) call a ‘twin track’ approach, where persons with disabilities are supported to “afford both ordinary and disability-related goods and services necessary to escape poverty and participate equally in society”.

## Key voices in the evidence

The Evidence Review identified 49 publications that included discussion of disability as it related to social protection.<sup>4</sup> Most of these were not specifically focused on disability, with only 7 of the publications including “disability” in the title.<sup>5</sup> The remainder tended to include discussion of disability as part of broader social inclusion analyses. Over two-thirds of the documents were published by multilateral organisations, with less than 10 per cent (5 documents) published by Pacific-based organisations.<sup>6</sup>

With 14 publications, the Asian Development Bank (ADB) was by far the most common publisher in this category. All but 2 of the ADB publications were reporting on a measure of social protection expenditure – the Social Protection Indicator (SPI) – which includes description of existing disability-focused social protection programs and expenditure on those programs. These publications tend to be largely descriptive, offering limited analysis or recommendations for how to improve inclusion of persons with disabilities in social protection programming. After the ADB, the main publishers on this topic by volume were the United Nations Economic and Social Commission for Asia and the Pacific (UNESCAP, 7 publications), the World Bank (6 publications) and the Department of Foreign Affairs and Trade (DFAT, 4 publications).

The Pacific-based publications were also largely descriptive, but tended to place a greater emphasis on barriers and challenges faced by persons with disabilities, including:

- Ineffective sharing of public health information for persons with disabilities during the COVID-19 pandemic
- Lack of preparedness for shocks due to decreased access to basic needs (such as food) and support
- Heightened risks related to sexual violence and isolation (especially for women and girls with disabilities)
- Difficulties in accessing education and employment

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<sup>4</sup> Given that the methodology of the Evidence Review (described in Annex 1 of the [Annotated Bibliography](#)) only included publicly available resources that were published online, it is likely that some publications were missed, particularly those by local Pacific organisations.

<sup>5</sup> This includes one publication that includes “CRPD” as this acronym includes ‘disability’ when written in full.

<sup>6</sup> Given that the methodology of the Evidence Review (described in Annex 1 of the [Annotated Bibliography](#)) only included publicly available resources that were published online, it is likely that some publications by Pacific organisations were missed, especially those published by local organisations. The Pacific-based publishing organisations included in the Evidence Review were the Government of Fiji, Government of Palau, University of the South Pacific, and the Council of Regional Organisations in the Pacific.

- Higher incidence of poverty.

These publications also called for better inclusion in social protection and in policymaking more generally (see CROP, 2021; Devi, 2012; Handino, 2018; Pacific Community, 2019). Singh's (2020) thesis was an exception, offering an in-depth analysis of economic inclusiveness of persons with disability in Fiji, including discussion of social protection programming.

## Research gaps

While there is a growing body of evidence on the links between social protection and disability in the Pacific and Timor-Leste, more research is needed, particularly in relation to best practice and fit for purpose social protection for disability-inclusion. There is a need for rigorous monitoring and evaluation of existing social protection programs to understand the impacts – both short- and long-term – for persons with disabilities. These ongoing research, evidence and evaluation activities should involve persons with disability themselves, this will provide context-based learnings that can be used to support broader, theoretical guidance on best practice.

Other topics requiring additional research in this space include:

- How social protection can support persons with disabilities who experience other forms of disadvantage or vulnerability
- How social protection can support the care economy (particularly for women and girls) in a culturally appropriate way
- The impacts of cash transfers on persons with disabilities, particularly regarding their access to services and disability status, and impacts on abuse and violence against persons with disabilities
- The benefit of 'cash plus' arrangements for people with disabilities (i.e. combining disability benefits with social services and support from community organisations to support dignity and active participation)
- How persons with disabilities are supported by and/or excluded from informal systems of social protection
- How disability benefit schemes could be more strongly informed by voices from people with disabilities and how these schemes support the role of organisations for people with disabilities
- How climate change impacts persons with disabilities and the potential role of social protection in reducing these impacts.

Pacific and Timorese individuals and organisations should be supported to lead this research work. This will help to centre local voices in the discourse and ensure that contextual factors are appropriately recognised and reflected in the research.

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