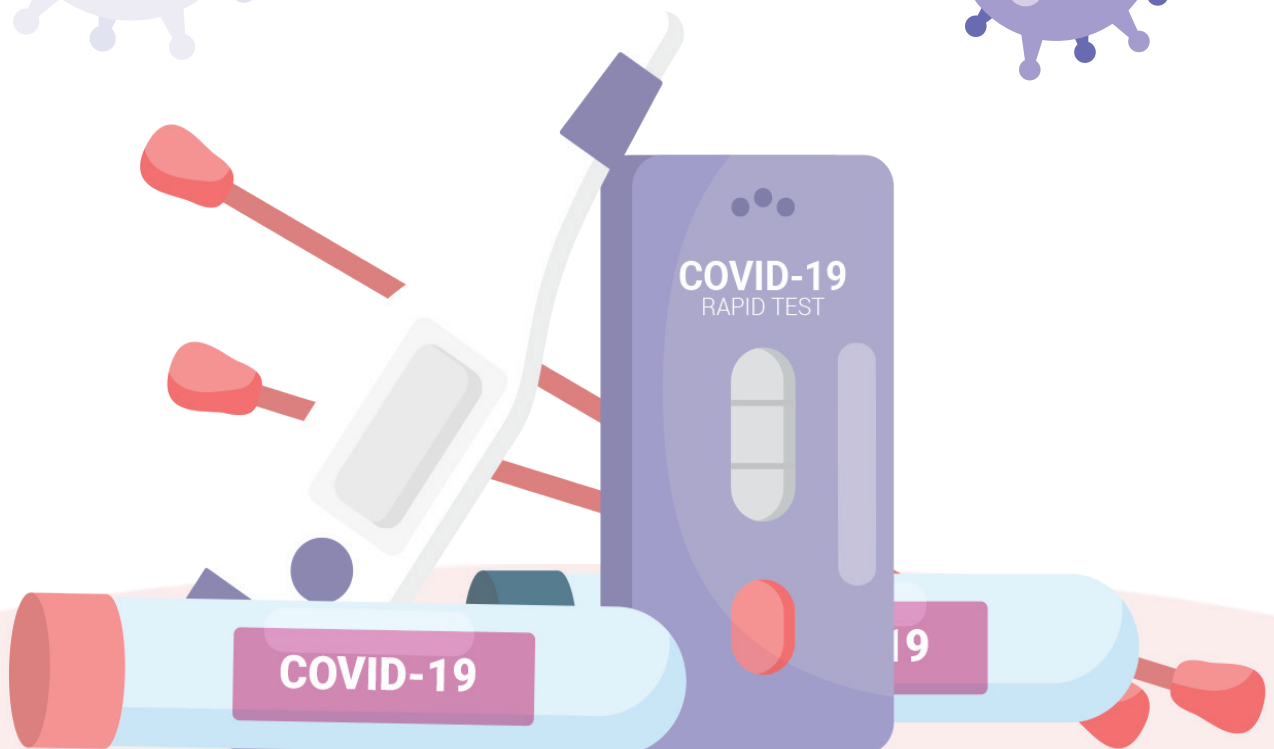
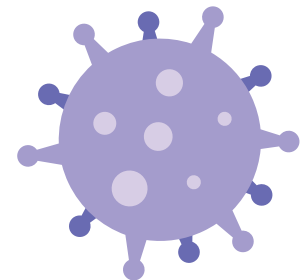
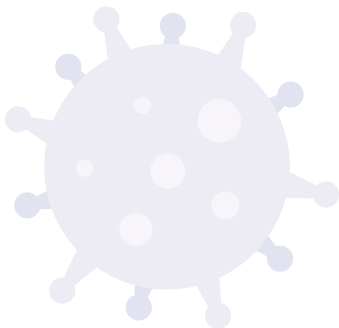
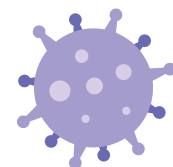


AN ASSESSMENT OF THE SOCIO-ECONOMIC IMPACT OF THE COVID-19 PANDEMIC

**On the lives of persons with
disabilities in Nigeria**





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ABBREVIATIONS	MEANING
CBN	Central Bank of Nigeria
CDGP	Child Development Grant Programme
CAMA	Companies and Allied Matters Act
CCT	Conditional Cash Transfer
FCT	Federal Capital Territory
FGN	Federal Government of Nigeria
FMoE	Federal Ministry of Education
FMoH	Federal Ministry of Health
GDP	Gross Domestic Product
IFA	Inclusive Friends Association
ILO	International Labour Organization
KII	Key Informant Interview
MSMEs	Micro, Small and Medium Enterprises
MDAs	Ministries, Departments and Agencies
NSIP	National Social Investment Programme
NSR	National Social Register
NHIS	National Health Insurance Scheme
NPC	National Population Commission
NCDC	Nigeria Centre for Disease Control
NCAA	Nigerian Civil Aviation Authority
OPDs	Organization of People with Disabilities
PWDs	Persons with Disabilities
UNCRPD	United Nations Convention on the Rights of Persons with Disabilities
WHO	World Health Organization

ACKNOWLEDGEMENT

IFA wish to acknowledge and appreciate all leaders of persons with disabilities, organizations of persons with disabilities (OPDs), the Joint National Association of Persons with Disabilities (JONAPWD) for participating at the key informant interviews (KIs) and focused group discussions (FGDs) to produce this report. Your efforts, contributions and feedback made this significant document possible. This socio economic assessment of the impact of Covid 19 on persons with disabilities took a deep dive into the harsh realities of persons with disabilities in Nigeria.

I also appreciate the IFA team that worked with the consultant to ensure that the right stakeholders were mapped and included in this process. To the researcher, Ismail Opeyemi and his assistants who went round and held sessions across the six geographical locations of the country to harvest this information, we appreciate your time and commitments. This would add to the post Covid 19 implementation strategies built by both private and public sector stakeholders.

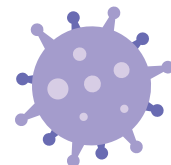
Finally, we extend our gratitude to Save the Children Nigeria and Action Against Hunger staff that participated in the review of the document. Your inputs were very instrumental to the outputs in this document. The technical and financial support of the project team, especially the CDGP program team is valued. This intervention has created the pathway to ensure that social protection conversations, interventions and practices include persons with disabilities henceforth.



Grace Jerry
Executive Director
Inclusive Friends Association

A photograph of a white surgical mask and a clear spray bottle on a wooden surface, overlaid with a semi-transparent orange-red filter. The mask is in the foreground, and the spray bottle is in the background.

REPORT SUMMARY



REPORT SUMMARY

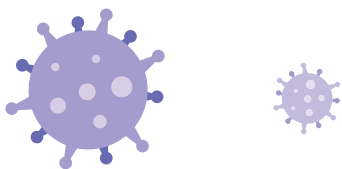
Prior to the emergence of COVID-19, studies have shown that Persons with Disabilities (PWDs) face various socio-economic challenges as a result of poor physical access to facilities, institutions, systems and opportunities among others, despite their huge demography reported by the Health Organization (WHO) that 15 percent of the population of any country are comprised of persons with one form of disability or another. PWDs continually face stern discrimination and exclusion from socio-political and economic activities and interventions. PWDs has not been mainstreamed into the health, education, employment opportunities and social protection initiatives, even though Nigeria's president, Muhammadu Buhari have signed the Discrimination Against Persons with Disabilities Prohibition Act (2019) to guarantee the full inclusion of PWDs in political and public life in the country.

The advent of COVID-19 has posed a huge threat to the health, economy and social relations of Nigerians, leading to the imposition of restriction measures such as total and or partial closure / lockdown of the economy, curfew, physical distancing, etc. Obviously, the measures have affected the lives and livelihood of Nigerians, which manifested in loss of income, disruption of market and supply chains, inadequate access to social services among other things. As a result, the Nigeria government provided material and financial support to Nigerians to ameliorate the effect of the COVID-19 pandemic on the lives and livelihoods of Nigerians as a form of social protection. Unfortunately, there was a popular perception that PWDs were greatly excluded from government interventions during the pandemic due to the existing challenges such as inadequate data, inaccessible health infrastructure, and systemic barriers, accessible information about COVID-19 among others.

This perception would either reveal the existential threat to PWDs that are unemployed and depend solely on daily earnings to survive or undermine the efforts of government to ameliorate the socio-economic hardship imposed by the measures put in place to curtail the spread of the virus. To validate the perception, the Inclusive Friends Association (IFA) embarked on a study to assess the socio-economic impact of the COVID-19 pandemic on the lives of PWDs in Nigeria vis a vis the various social protection thresholds / initiatives of the Nigerian government.

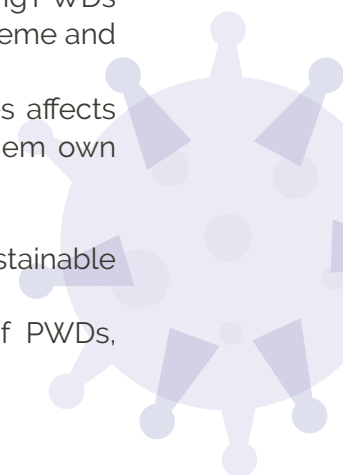
The study was conducted in collaboration with partners across the six (6) geopolitical zones with a total of 12 states representing one-third of the total states in the country. A non-probability sampling with a 3-tiers purposive approach was adopted for this study to get a subset of the population to make statistical inferences. A sample size of fifty-four (54) informants was selected. The study also drew upon two (2) data collection approaches: desk review and key informant interviews. Data were analyzed in line with the respective indicators identified for the study. Most of the data components were analyzed using descriptive statistics i.e. Knowledge and Awareness of COVID-19, Access to Social Service, Job and Food Security, Access to health facilities during COVID-19, Access to government interventions during COVID-19, Coping mechanism etc.

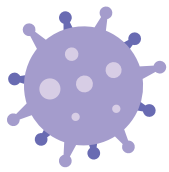




The study made numerous findings in critical areas like; COVID-19 and responses in Nigeria, Knowledge and Awareness of COVID-19, Access to Social Service, Access to health facilities during COVID-19, Access to government interventions during COVID-19, Coping mechanism, causes of inadequate inclusion of PWDs in social protection programmes etc. Some of the findings include:

- The public health responses do not consider the social impact of the different containment measures on the lives and livelihood of PWDs, as thus no special provision was made to mitigate the extra risks on PWDs.
- The economic responses are oblivious of the wide inequality and inaccessibility of PWD to economic opportunities, thus the impact of COVID-19 is exacerbating the already high rate of poverty, hunger and unemployment among PWDs in Nigeria
- PWDs in Nigeria are mostly low-income earners, struggling to meet up with the provision of their daily needs, and unable to cope with the economic shock that was imposed by the different measures to curtail the COVID-19 pandemic.
- The inadequate access to capital resources among the entrepreneurs, artisans and petty traders is a limitation to their capacity to access basic services like quality health, education, water supply, financial services among others.
- There is awareness of COVID-19 among PWDs in Nigeria, however, the quality of information is undermined because it does not consider and appeal to the different clusters of disabilities.
- Specifically, the restriction of movement has affected PWDs through decline in purchasing power, decline of income, loss of jobs, reduced access to some basic services, health complication and loss of travelling opportunity.
- The pandemic significantly impacted on the level of access of PWDs to healthcare facilities due to anxiety of contracting COVID-19, communication barrier, incompetent personnel, rejection by health facility, financial constraint among others.
- The pandemic also impacted significantly on PWDs access to basic services like basic education, financial services, water supply, access to market and power supply.
- PWDs across the country coped during the pandemic by complying with the COVID-19 guidelines as a preventive mechanism, seeking for assistance and reducing their standard of living to sustain their livelihood.
- PWDs across the country were assisted with palliatives and cash by the Nigeria government both National and state during the pandemic, however, the coverage of the assistance was mostly within the urban areas with little or no impact in the rural communities.
- The awareness of some of the key social protection programmes is limited among PWDs in the country, and access to the programmes (National Health Insurance Scheme and National Social Investment Programmes,) are significantly poor to PWDs.
- The increment in electricity tariff and fuel price and other inflationary curves affects PWDs differently due to their disability costs, and also because most of them own business and have to rely of patronage of citizens to earn.
- PWDs need a disability-specific social protection programme.
- Clear inclusivity plans should be built into government's intervention to drive sustainable and inclusive development.
- Discrimination, lack of political will, and the absence of accurate data of PWDs, contribute to the exclusion of PWDs in social protection programmes.





SUMMARY OF RECOMMENDATIONS

Based on the finding from the study, the following recommendations emerged to tackle the exclusion of PWDs in Social Protection Programmes. This can serve as a proactive measure to mitigate hardship of PWDs during emergencies;



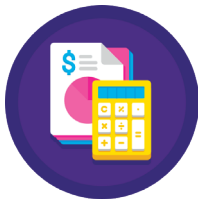
Data Collection: Data and information on PWDs and their needs is essential for planning and proper engagement with government, thus, Organization of People with Disabilities (OPDs) should work together to collect accurate data of their members and their specific needs to create a database for planning and future engagement on inclusion of PWDs in Nigeria.



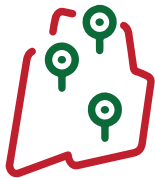
Advocacy for a Disability: Specific Social Protection Programme.: Having identified the need for a proactive approach to the challenges of PWDs in Nigeria, a Network of OPDs should be formed to champion the establishment of a Disability-Specific social protection programme for PWDs in Nigeria.



Awareness Creation: OPDs should collaborate with media organizations to create awareness on government targeted programmes aimed at protecting the lives and livelihood of the vulnerable in the society. This awareness should be disseminated in a way that all PWDs could access the information regardless of disability type.



Mainstreaming PWDs into Budgeting: The Nigeria government through relevant MDAs should mainstream PWDs into the budgeting and budgetary process of all MDAs. This would be helpful in the capturing of the inclusive concerns of PWDs in Nigeria, as a result the needs of PWDs would be adequately considered throughout the budget cycle.

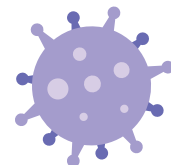


Unifying PWDs across the Country: The OPDs should partner with the different clusters of PWDs across the country to unify their members against infiltration and selfishness. This effort would better position PWDs as a formidable force to reckon with, meanwhile, this will give credence to the demands for inclusion in social protection programme.

COVID-19
Coronavirus
Vaccine

SARS-CoV-2
COVID-19
Coronavirus
Vaccine

BACKGROUND



In June 2011, the World Health Organization (WHO) had reported that 15 percent¹ of the population of any country comprised of Persons with Disabilities (PWDs). This is adopted by Organizations of Persons with Disabilities (OPDs) in Nigeria. The National Population Commission (NPC) also estimated the population of Nigerians to be about 200 million², 15 percent of which should be the population of PWDs in Nigeria based on WHO's report, hence the estimated population of PWDs is 30 million. Unfortunately, the report also estimated that in every 10 PWDs, 8 live below the poverty line. While the Nigeria 2006 national census reported that the total number of PWDs in the country is 3,253,169 and the Federal Ministry of Women Affairs and Social Development in a national base line survey in 2011 reported the population of PWDs in Nigeria to be 4.8 million. Whatever the figures, these are a huge population who suffer different levels of marginalization and discrimination in various spaces in Nigeria.

However, the aforementioned figures paints the dreary picture of the socio-economic challenges that the PWD community is facing across the country ranging from poor access to facilities, institutions and social protection system. This has also revealed a strong representative gap for PWDs in different programmes, projects and initiatives. Even with the quantitative and qualitative significance of PWDs in Nigeria, they have continually face severe discrimination and exclusion from socio-political and economic activities and interventions. The lack of understanding of disability, perpetuated through traditional beliefs and myths has repeatedly stigmatize PWDs in the country.

On January 23rd 2019, the Nigeria's president, Muhammadu Buhari signed the Discrimination Against Persons with Disabilities Prohibition Act (2018) to guarantee the full inclusion of PWDs in political and public life in Nigeria. Almost 2 years later, PWDs have not been mainstreamed into the health, education, employment opportunities and social protection programmes and initiatives. To compound the problem, the advent of the novel coronavirus disease (COVID-19) has posed a threat to health, economy, social relations globally³. As at mid-November 2020, the disease has spread across 220 countries with a total of 57,768,357 confirmed cases and 1,374,788 deaths.⁴ In Nigeria, there has been confirmed cases of COVID-19 across the 36 states and the Federal Capital Territory. The response to curtail the spread of the virus by the Nigerian government include the imposition of restriction measure, which led to total and or partial closure of the economy.

The repercussive effect of the lock down grinded the world economies to a halt, where jobs and livelihoods are lost on scale never seen before. In fact, it was posited that 4 in 10 workers in Nigeria were already reporting a loss of labour income, and disruptions to markets and supply chains impeding agricultural activity.⁵ Meanwhile, since the outbreak of the pandemic, it has been reported that the Nigerian government has been providing material and financial support to Nigerians to cushion the effect of COVID-19 outbreak on the lives and livelihoods of Nigerians. However, the existing challenges to societal growth and development such as health infrastructural challenges and lack of data among others have undermined the efforts of government, thus, this posed as existential challenge to PWDs that are unemployed and depends solely on daily earnings to survive.

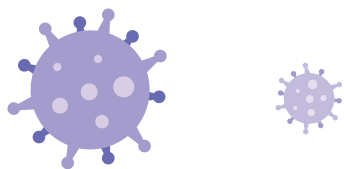
1 <https://www.who.int/publications/i/item/9789241564182>

2 <https://www.worldometers.info/world-population/nigeria-population/>

3 <http://www.indiaenvironmentportal.org.in/files/file/Socio-economic-impact-assessment-of-COVID-19-pandemic-among-persons-of-concern-in-Nigeria.pdf>

4 https://www.worldometers.info/coronavirus/?utm_campaign=homeAdvegas17

5 <http://documents1.worldbank.org/curated/en/695491593024516552/pdf/Nigeria-in-Times-of-COVID-19-Laying-Foundations-for-a-Strong-Recovery.pdf>



It is against this background that this research was commissioned to provide an assessment of the socio-economic impact of the COVID-19 on the lives of Persons with Disabilities in Nigeria vis a vis the various social protection programmes and initiative of the Nigerian government. The objective of this study is to assess the socio-economic impact of the COVID 19 on the lives of persons with disabilities in Nigeria.

AN OVERVIEW OF COVID-19 AND RESPONSES IN NIGERIA

The first case of COVID-19 was confirmed in Lagos State, Nigeria by the Federal Ministry of Health (FMOH) on the 27th of February, 2020.⁶ As a result, Nigeria, Africa's largest country by population and economy was visited by the uncertainty of progressive business. The government of Nigeria through the federal ministry of health intensified effort to ensure that the outbreak is controlled and contained. The multi-sectoral Coronavirus Preparedness Group led by the Nigeria Centre for Disease Control (NCDC) immediately activated its National Emergency Operations Centre and work closely with Lagos State Health authorities to respond to this case and implement firm control measures.⁷

The spread of the pandemic to all the states across Nigeria had caused the initial shut-down or lockdown of states like Lagos, Kaduna, Rivers, Enugu, FCT and Anambra, before it led to a nationwide lockdown. Federal civil servants were advised to stay at home. In Anambra, social gatherings (weddings and funerals) were banned and markets in the state were shut down.⁸ Although, the importance of the aforementioned measures cannot be overemphasized, but, in the absence of a comprehensive social protection programme, the measures; especially the complete lock down of Nigeria exacerbated people's needs, as income dropped significantly and prices of commodities skyrocketed which has aggravated Nigeria's risky and fragile security situation.

Nine (9) months since the first Coronavirus case in Nigeria, the government in compliance with the guidelines of WHO and the peculiarity of her country has responded to the pandemic in many other ways. Thus, a review of COVID-19 response in Nigeria became needful. The forms of response that are particularly important to this study are the public health response and economic sustainability response.

6 <https://ncdc.gov.ng/news/227/first-case-of-corona-virus-disease-confirmed-in-nigeria#:~:text=The%20Federal%20Ministry%20of%20Health,in%20China%20in%20January%202020>.

7 <https://ncdc.gov.ng/news/227/first-case-of-corona-virus-disease-confirmed-in-nigeria#:~:text=The%20Federal%20Ministry%20of%20Health,in%20China%20in%20January%202020>.

8 COVID-19 in Nigeria: Its effects and lessons for us - Vanguard News (vanguardngr.com)





Public Health Response

According to the Presidential Task Force on COVID-19 (PTF-COVID-19), the Federal Government of Nigeria (FGN) through the PTF-COVID-19 and the FMoH presented several measures to curtail the spread of the disease and protect the health of Nigerians. Prior to this time, PWDs find it difficult to access healthcare services due to factors ranging from physical and systemic barriers. The Covid 19 stringent measures further closed their chances of accessing healthcare services.

The initial lockdown of non-essential activities, closure of schools, a ban on international and domestic flights and acquisition of medical equipment and facilities, etc., brought various various scales of negative impact. ⁹The government of Nigeria also enforced an initial 2-week lockdown on March 30, 2020, for three states (Lagos, Ogun, and Abuja) and, on April 13, extended it for another 2 weeks.¹⁰ Another extension of the second phase of nationwide lockdown on the 2nd day of June, 2020 for four weeks to strengthen collaboration between the federal and state governments in harmonizing Nigeria's COVID-19 response.¹¹ The announcement generated some controversies due to a discouraging ranking by World Poverty Clock in 2018 which tagged Nigeria as the poverty capital of the world, with over 40% of its citizens living below the poverty line, including PWDs. Therefore, a large proportion of the population, lived on daily income with no savings to act as a financial buffer during the lockdown. There were fears that the effect of the lockdown will degenerate into some other problems like hunger and increase of abject poverty.

Furthermore, in a bid to contain the spread of COVID-19, the Federal Ministry of Education (FMoE) announced the temporary close-down of all schools in Nigeria, effective from March 23rd, 2020.¹² Unlike other countries, the FMoE's school-closure directive did not include any clear-cut policy measures to mitigate learning disruptions for children. According to UNESCO, School closures carry high social and economic costs for people across communities with higher level of severity on the most vulnerable and marginalized boys, girls, and their families.¹³

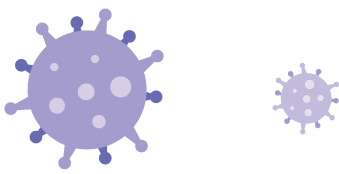
⁹ <https://covid19.ncdc.gov.ng/advisory/>

¹⁰ [https://www.thelancet.com/journals/lanres/article/PIIS2213-2600\(20\)30220-4/fulltext](https://www.thelancet.com/journals/lanres/article/PIIS2213-2600(20)30220-4/fulltext)

¹¹ <https://oglinks.news/opec/news/nigeria-extends-nationwide-lockdown-by-four-weeks>

¹² <https://worldliteracyfoundation.org/education-and-covid-19-in-nigeria/>

¹³ <https://en.unesco.org/covid19/educationresponse/consequences>



In addition to the public health response, the FGN had earlier placed travel restrictions on entry into the country from 13 high-risk countries.¹⁴ All persons arriving in Nigeria who might have visited these countries 15 days prior to such arrival were subjected to supervised self-isolation and testing for 14 days

This decision left many PWDs stranded, especially those with spinal cord injuries that live on drugs that are purchased abroad, thereby increasing their already deteriorating health condition. Also, there many Nigeria-bound passengers who were stranded in foreign countries until they were evacuated back home.

The Nigeria government also supported state governments with N500 billion COVID-19 crisis intervention fund, and enhanced support to states for critical healthcare expenses.¹⁵ The Nigeria Centre for Disease Control (NCDC) partnership with state governments and the private sector was a key response strategy to reduce the impact of COVID-19 through the expansion of diagnostic testing to ensure a large number of people can access testing during the public health emergency.¹⁶ Since February 2020, Nigeria has significantly increased its molecular laboratory network for COVID-19 testing, from two as at February 27 to 28 fully functional laboratories in states across the country. Yet, as at 23rd of November 2020, just 743,298 samples have been tested in a population of over 200 million people.

The role of the development of public health protocol can not also be overemphasized in the public health response to COVID-19 pandemic. Prior to the confirmation of the first case in Nigeria, the NCDC had established public health protocols with other agencies like the Ministry of Aviation, Nigeria Immigration Service, Nigeria Port Health Services, Nigerians in Diaspora Commission and Foreign Affairs.¹⁷ The protocols include; mandatory completion of forms by incoming travelers into the country to track their travel history and temperature checks at the different point of entry in Nigeria, the use of facemasks and handwashing protocols. This made it possible to trace passengers who had arrived on the same flight with the index case. For the purpose of this study, these are some of the response strategy of the government to public health concerns because of the pandemic.

Economic Response

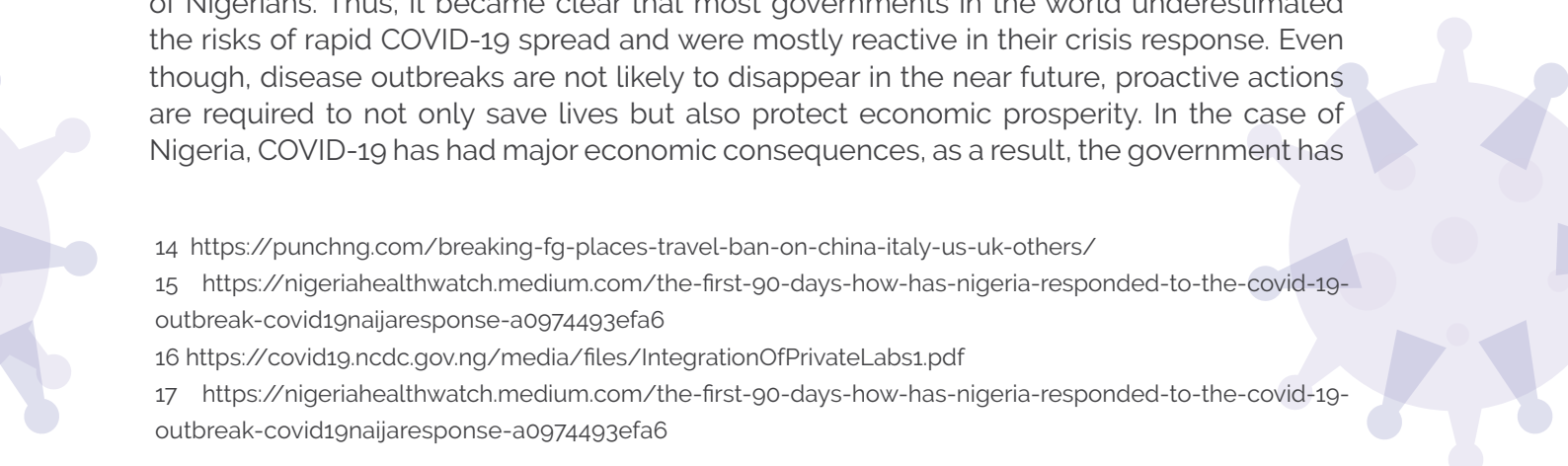
Studies have shown that COVID-19 is not just a global pandemic and public health crisis. The reflection of the repercussive effect of the pandemic is severe on the global economy and financial markets. At the same time, a cursory look at the economic indicators like income, employment and access to social services reveal a negative development on the lives of Nigerians. Thus, it became clear that most governments in the world underestimated the risks of rapid COVID-19 spread and were mostly reactive in their crisis response. Even though, disease outbreaks are not likely to disappear in the near future, proactive actions are required to not only save lives but also protect economic prosperity. In the case of Nigeria, COVID-19 has had major economic consequences, as a result, the government has

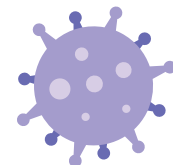
14 <https://punchng.com/breaking-fg-places-travel-ban-on-china-italy-us-uk-others/>

15 <https://nigeriahealthwatch.medium.com/the-first-90-days-how-has-nigeria-responded-to-the-covid-19-outbreak-covid19naijaresponse-a0974493efa6>

16 <https://covid19.ncdc.gov.ng/media/files/IntegrationOfPrivateLabs1.pdf>

17 <https://nigeriahealthwatch.medium.com/the-first-90-days-how-has-nigeria-responded-to-the-covid-19-outbreak-covid19naijaresponse-a0974493efa6>





responded to the COVID-19 economic impact in different ways, including but not limited to distribution of palliatives, cash transfers, Central Bank of Nigeria stimulus package, economic stimulus bill and the economic sustainability plan among others

Following the imposition of total lockdown in Lagos, Ogun and FCT and partial lockdown in some other states as measure to contain the COVID-19 pandemic, the federal and state governments rolled out palliative measures for targeted vulnerable groups to alleviate the economic effects of the lockdown on the lives and livelihood of Nigerians.¹⁸ However, nationwide lamentations trailed the distribution of government palliatives by Nigerians, alleging authorities of politicization, and hoarding of COVID-19 palliatives, which revealed the level of mismanagement of the distribution of palliatives.

On April 1, 2020, the FGN had announced the disbursement of 20,000 Naira to the poor and vulnerable households captured in the National Social Register (NSR) as an economic response to the ripple effects of different preventive measures against the spread of the pandemic within the country.¹⁹ Prior to the breakout of the pandemic, the cash transfer was an ongoing social protection programme of the FGN. It was designed to benefit poor and vulnerable households with a monthly stipend of 5,000 Nigerian Naira (US\$13.83). Beneficiaries also receive training as well as financial and technical support to start small businesses.²⁰

In addition to the aforementioned, the FGN through the Central Bank of Nigeria (CBN) in a series of intervention at the wake of the pandemic has injected a total of 670 billion Naira into various sectors of the economy as part of the economic response of 3.5 trillion stimulus package efforts to cushion the impact of COVID-19 on the citizenry.²¹

Considering the importance of legislation to the effectiveness and efficiency of unavoidable economic response in emergencies, the FGN through the House of Representatives passed the Emergency Economic Stimulus Bill 2020 on March 24, 2020 to provide support to businesses and individual citizens of Nigeria.²² However, the defect of the bill is the coverage limit. The larger percentage of businesses in Nigeria are unregistered, thus supporting only the lesser percentage of businesses that are registered could render the larger percentage and unregistered businesses helpless and eventually collapse at the detriment of a high scale looming unemployment.

Response to the Needs of Persons with Disabilities

In emergency situation like COVID-19, PWDs have the same rights and basic needs as others and face the same challenges. However, they face numerous additional barriers as a

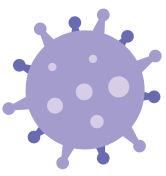
18 <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7359756/>

19 http://centerforpolicyimpact.org/wp-content/uploads/sites/18/2020/06/Nigeria-National-Response-to-COVID19_FINAL-2.pdf

20 <https://reliefweb.int/report/nigeria/nigeria-s-conditional-cash-transfer-programme-support-poor-women-and-girls-and-their#:~:text=The%20CCT%20programme%20is%20designed,support%20to%20start%20small%20businesses.>

21 <https://allafrica.com/stories/202009290867.html>

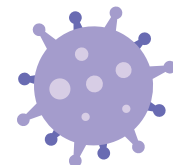
22 <https://www.brookings.edu/blog/future-development/2020/07/02/how-well-has-nigeria-responded-to-covid-19/>



result of their disabilities. These barriers have been exacerbated because of COVID-19. The pandemic has heightened inequality and increased marginalization of PWDs; therefore, it is important to interrogate some of their needs during this pandemic to measure the inclusiveness of the various responses of government. From all indication, the peculiar needs of PWDs during COVID-19 are basically those that will address the repeated challenges they face such as healthcare, social and economic challenges. Thus, there is a distinctive need for protection from risk of violence against PWDs, exploitation and abuse, high levels of stigmatization, contracting the virus and an increase for support to access healthcare services and other social services.

Meanwhile, an appraisal of the various government responses to COVID-19 has revealed a huge exclusion of PWDs in the design, planning and implementation of emergency and humanitarian responses. The public health responses do not consider the distinct impact of the different containment measures on the lives and livelihood of PWDs, as such, there was little or no provision made to mitigate the extra risks that the existing barriers that PWDs have been exposed to. In a similar vein, the different economic responses from a critical point of view is oblivious of the wide inequality and inaccessibility of economic opportunities to PWDs. Therefore, the impact of COVID-19 could exacerbate the already high rate of poverty, hunger and unemployment among PWDs in Nigeria.





REPORT METHODOLOGY

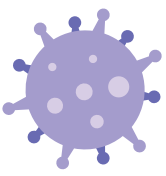
Sampling Technique and Size

Non-probability sampling with a 3-tiers purposive approach was the technique adopted for this study to get a subset of the population to make statistical inferences from them and estimate characteristics of the whole population. This is due to the fact that Socio-economic impact assessment of COVID-19 on the lives of PWDs in Nigeria is a specialized rather than a general topic. As a result, informants needed to be selected from the PWDs community. IFA worked closely with different partners at the sampled states to ensure smooth data collection process. For ease of engagement and data collection, PWDs cluster heads were identified across all locations. The scope of the assessment is the thirty-six (36) states of Nigeria and FCT, therefore the first tier of the sampling process considered a fair sample of 30% of the States with equal spread across the six (6) geopolitical zones. The second tier of the sampling process have the 12 sampled states further disaggregated into two (2) equal categories for physical and virtual engagement for data collection. While, the third tier of the sampling process was the selection of 7 respondents' each among PWDs for the physical category of the sampled states and 2 respondents' each among PWDs for the virtual category of the sampled states. Eventually, the final sample size was drawn using a random selection approach across the sampled states.

The general scope of this study cuts across the six (6) geopolitical zones of Nigeria (North-East, South-South, South-East, South-West, North-West and North-Central) with a total of 12 states representing one-third of the total states in the country.

S/No	Geo-Political Zones	Sample States	Category	No. of Samples
1.	South-West	Osun State	Physical	7
2.		Ondo State	Virtual	2
3.	North-Central	Federal Capital Territory	Physical	7
4.		Kogi State	Virtual	2
5.	South-East	Anambra State	Physical	7
6.		Ebonyi State	Virtual	2
7.	North-West	Kano State	Physical	7
8.		Zamfara State	Virtual	2
9.	South-South	Akwa-Ibom State	Physical	7
10.		Edo State	Virtual	2
11.	North-East	Taraba State	Physical	7
12.		Gombe State	Virtual	2
Total				54

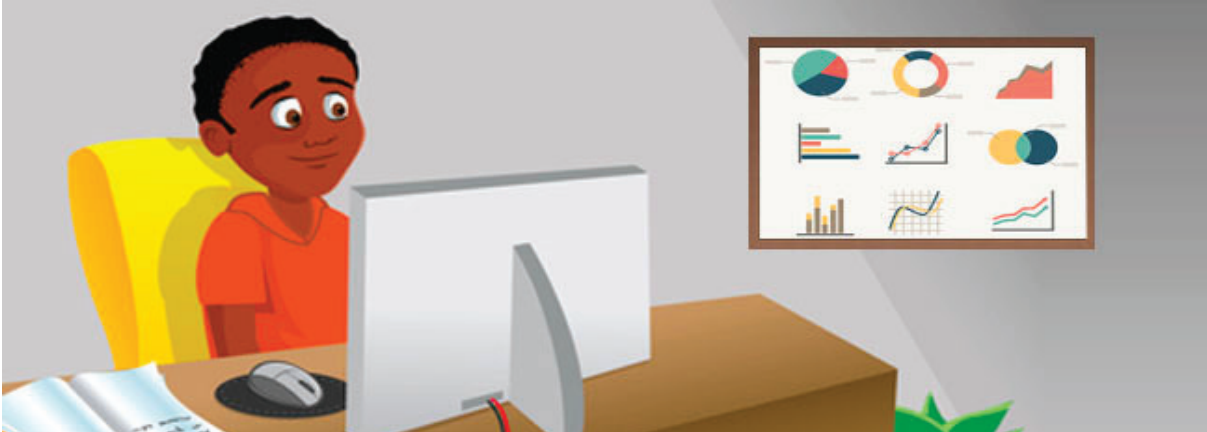
Table 1: Sample size



Data Collection Method

The study drew upon two (2) data collection methodologies, namely:

Desk-based Research:



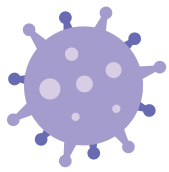
This method was used to gather secondary data. i.e researchers, institutions and the government for the same or related purposes as the current research. A desk review of Nigeria COVID-19 management framework and reports, Intervention programmes and initiatives was conducted to obtain data on the forms of responses to COVID-19, scope and shortcomings as well as the various social protection programmes, gaps and areas of necessary improvement.

Key Informant Interviews:



This method took place with informants that are expected to have ideas and experiences related to the research topic identified earlier. i.e Knowledge and Awareness of COVID-19, Access to Social Service, Job and Food Security, Access to health facilities during COVID-19, Access to government interventions during COVID-19, Coping mechanism etc. Partner organizations mobilized the identified informants. The harvested inputs from stakeholders served as a validation mechanism to some information that was gathered from the desk review.





Quality Control

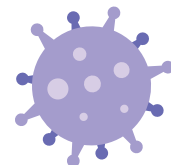


To ensure the quality and accuracy of data being collected using the methodologies chosen for the study, integrity test was carried out on the different sources of literature to ascertain the authentication of information gathered from secondary sources. Afterwards, triangulation was adopted to validate the qualitative data against the quantitative data. It was also to determine the relevancy of some old information to the current reality of the informants.





FINDINGS



FINDINGS THAT EMANATE FROM THE STUDY

This section presents the results of the findings that emanate from the study. For ease of conceptualization and reflection, each of the objective were discussed in line with the socio-economic indicators designed for the study, with a view to provide an understanding of the impact of the COVID-19 pandemic on the lives of PWDs. Hence, the charts presented in the discussion section represent the result of the pooled data.

Socio-economic Background of the PWDs

In order to assess the impact of COVID-19 pandemic on the PWDs in Nigeria, there is the need understand their socio-economic background. From the results of the analysis, the mean age of the informants was estimated at 36 years and each informant has at least one main source of income ranging from paid jobs to self-employed and or remittances

Fig. 2: Primary Occupation

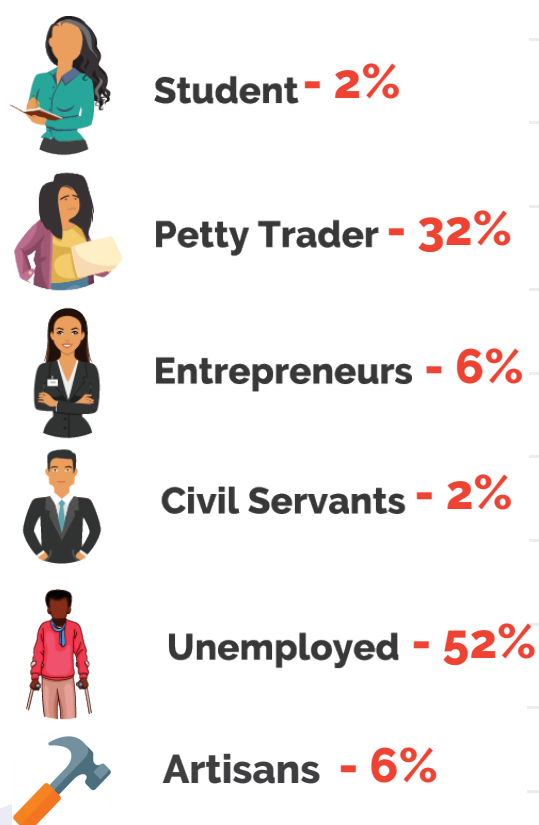
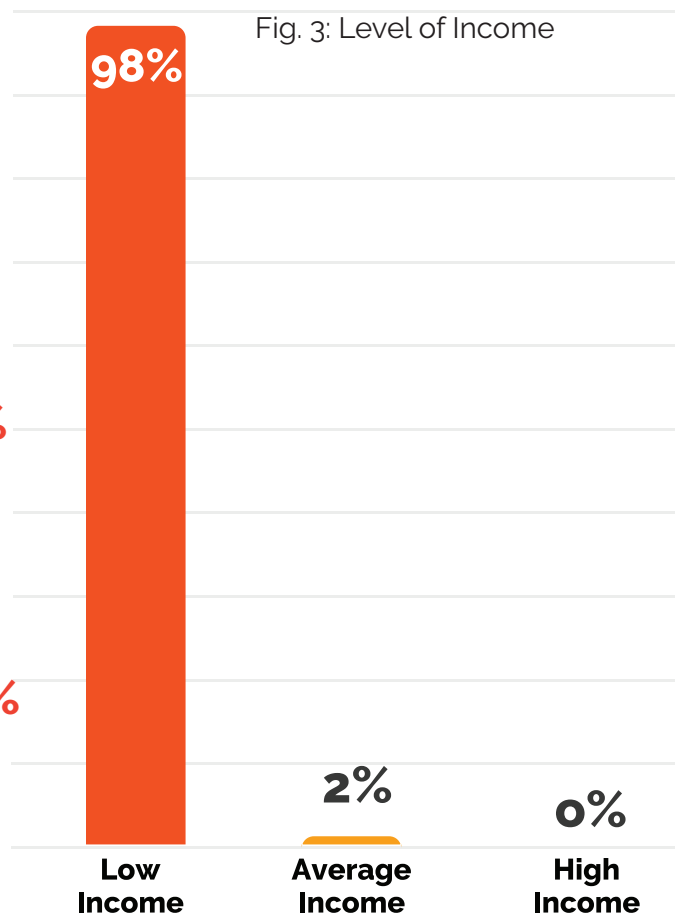
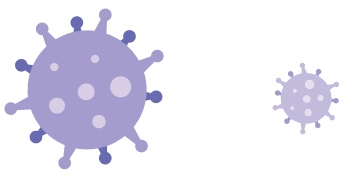


Fig. 3: Level of Income





As shown in figure 2, most of the informants were found to be unemployed representing 52% while about 2% are civil servants, 6% are entrepreneurs, 32% are petty traders, 6% are artisans and 2% are students. Summarily, about 54% of the informants (Unemployed and Students) are unemployed. The distribution reflects the level of reliance on remittance and support among PWDs in Nigeria. Figure 3 shows that 98% of the informants who responded are low-income earner while the remaining 2% reported to be average-income earners, which shows the high level of vulnerability of PWDs in Nigeria. It implies that almost all PWDs are struggling to meet up with the provision of daily needs. Consequently, most of the PWDs would not be able to cope with the economic shock that was imposed by the different measure to curtail the COVID-19 pandemic.

The underlining factors is that most of the PWDs are r unemployed or living solely on assistance from friends and family. Even though the majority are still within the economic active age (36 years), they lack access to capital resources, especially among the self-employed group (entrepreneurs, artisans and petty traders). In an economic-oriented society like Nigeria, the level of income determines the standard of living including access to basic services like health, education, water supply, financial services among others. Thus, the possibility of inaccessibility to social services by PWDs is high.

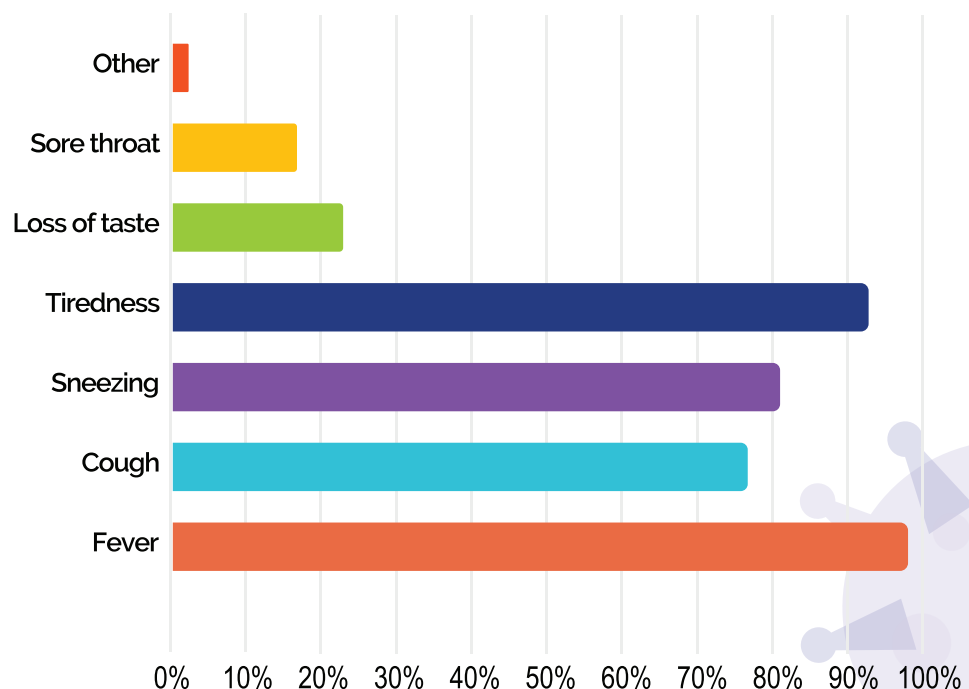
Knowledge and Awareness on COVID-19

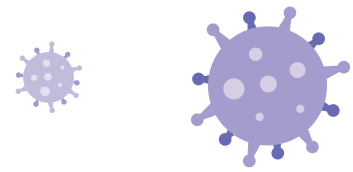
Measuring how accessible media messages are to PWDs is vital. From figure 4, all (100%) of the informants indicated that they are aware of the COVID-19 pandemic, given the level of awareness that have been created via different media, it is a reflection of the wide coverage of the information dissemination strategy on COVID-19 among PWDs in Nigeria.

Fig. 4: Awareness of COVID-19



Fig. 5: Knowledge of COVID-19 symptoms





On the knowledge of COVID-19 symptoms by PWDs, figure 5 has shown that none of the informants indicated that they know all the symptoms of COVID-19 raising a deep concern on the quality and the consistency of information disseminated in the awareness campaigns against the novel virus pandemic. However, this variation could be as a result of factors or a combination of factors stemming from the level of awareness on the pandemic in the survey locations, the level of access to the information on the pandemic, the quality of the information disseminated on the pandemic and the source of information on the pandemic.

Fig. 6: Sources of information on COVID-19

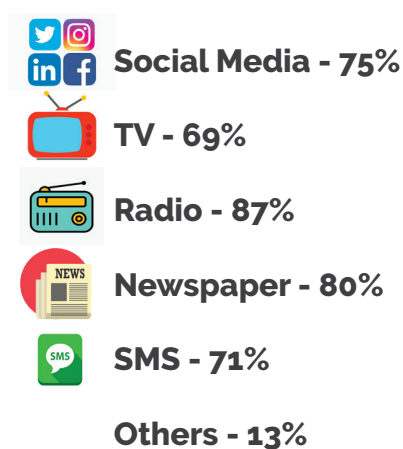
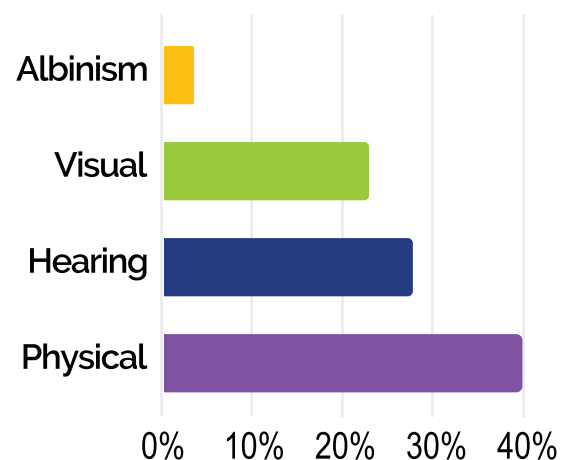
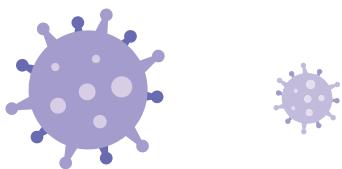


Fig. 7: Disability Types



As depicted in figure 6 above, the result has showed that informants are receiving information on the pandemic from different sources with a high number of informants (87%, 80% and 75% respectively) indicating the information they have on the pandemic were from Radio, Newspaper and Social Media respectively. Other high number (71% and 69%) of informants received their information from SMS and TV respectively. However, the clear difference between the various sources of information on COVID-19 has been justified by figure 7 that shows the disability type of informants, which required them to find their information from any medium that is friendly to their form of disability. In summary, going by the feedback received on the "knowledge and awareness on COVID-19", there is a need to intensify effort on sensitization and enlightenment of PWDs on the symptoms of COVID-19 in sign languages and accessible media platforms that are understandable to persons with disabilities.





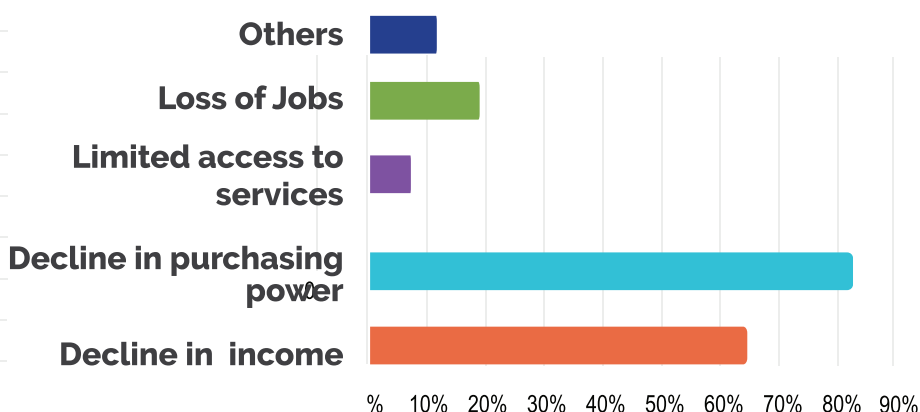
Restriction and Livelihood

As part of the prevention and mitigation measures in response to the pandemic, there were wide ranging restrictions to movement and closure of socio-economic institutions and infrastructure across the country. This is reflective in the lives and livelihood of Nigerians in general and PWDs in particular.

Fig. 8: Restriction of Movement



Fig. 9: Impact of COVID-19 on Livelihood



As shown in figure 8 above, all (100%) informants indicated that they experienced restriction of movement in their area due to COVID-19. Furthermore, the informants in their responses as depicted in figure 9 indicated that the restriction affected their lives and livelihood negatively. 83% indicated that the lockdown affected their lives through decline in purchasing power, 64% indicated a decline in income, 18% indicated the loss of their jobs, 7% indicated limited access to services like education and 11% of the informants reported loss of travelling opportunity.

Fig. 10: Access to Health facilities before COVID-19

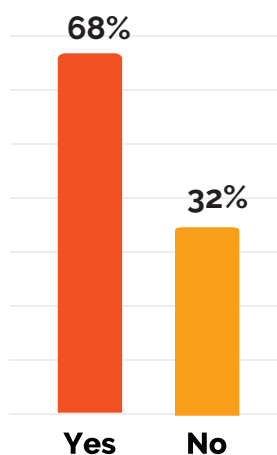
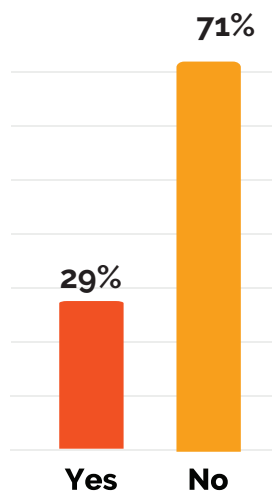


Fig. 11: Access to health facilities during COVID-19



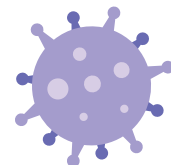


Fig. 12: Barriers to access to health facilities before COVID-19

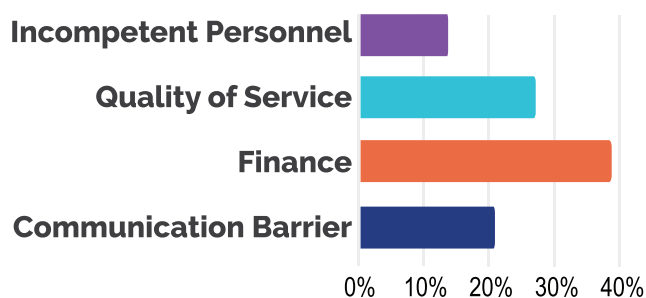
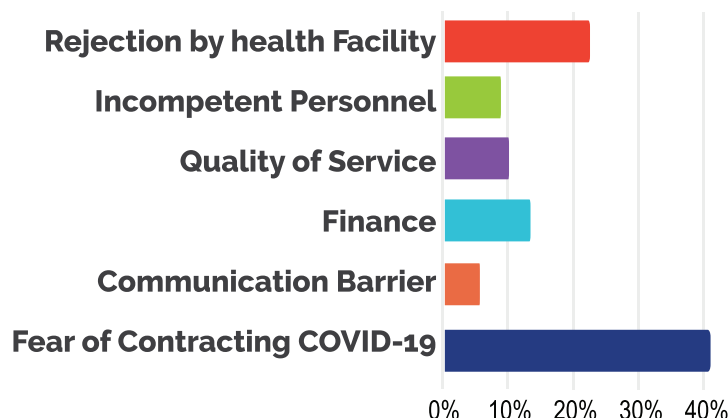


Fig.13: Barriers to access to health facilities during COVID-19

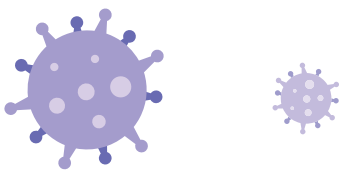


Access to Health Facilities before and during COVID-19

Highlighting the impact of COVID-19 on access to basic services, one of the key area of concern is access to healthcare. The extent of the impact was examined using before and after scenario.

Out of all the informants, 68% responded that they had access to health facilities before the pandemic, while 32% responded that they had never had access to health care facilities prior to the pandemic. The assessment also reveals that the pandemic significantly impacted on PWDs access to healthcare facilities, with 71% of the PWDs reporting that they were unable to access health facilities as a result of the nationwide lockdown imposed to curtail the spread of the virus. Even though hospitals, clinics, pharmacies and other agencies, public or private rendering essential services were exempted from the lockdown imposed in Nigeria, the barriers faced when accessing health facilities is depicted in the figures below; The assessment also approached this with the aim of highlighting barriers faced before the pandemic in order to understand the barriers faced during the COVID-19 resulting from the outbreak of the pandemic. Before the pandemic 39% of informants reported financial constraint as barriers faced when accessing healthcare facilities, with 26% reporting poor quality of service. Others reported communication barrier (21%) and incompetent personnel (14%) among others.

Meanwhile, out of the 29% informants who reported having access to health care facilities during COVID-19, almost half of them (41%) reported fear of contracting COVID-19 as a barrier to visiting the healthcare facilities. Other barriers faced by informants accessing health services during the lockdown include, rejection by the health facility (21%), financial constraint (13%), poor quality of service (10%), incompetent personnel and communication barrier (9% and 6%, respectively).

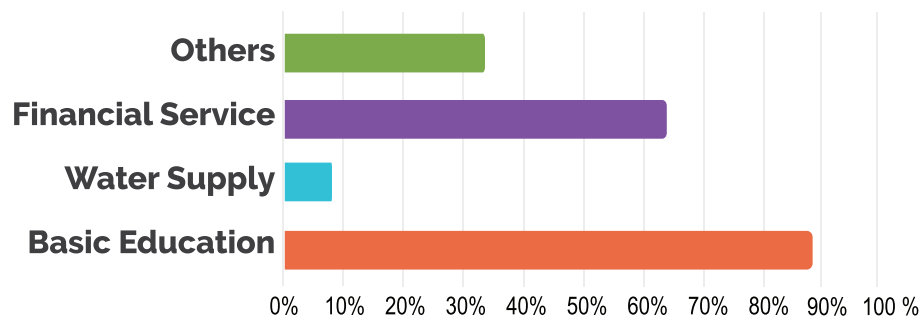


Access to Social Services in the pandemic

Fig. 14: Reduction in access to basic services



Fig. 15: Services that access were reduced during COVID-19



PWDs are more likely to experience challenges accessing basic services when compared to persons without disabilities because of the peculiar needs they require to live a life of dignity. Their needs are considered important to be assessed, hence the following results: As shown in figure 14 above, 94% responded that their access to basic services reduced during the pandemic, with only 6% responding that their access to basic services did not reduce during the pandemic. This is an indication that the pandemic significantly affected PWDs access to basic social services like transportation, healthcare, education, etc.

The availability of basic services to PWDs is mainly defined by services that can be accessed within the locality of the informants, therefore, there is variation in the services available to PWDs in different location, on this note 89% of the informants reported that basic education service was greatly reduced as a result of lockdown in their locality.

Fig. 16: Psychosocial Effect of COVID-19

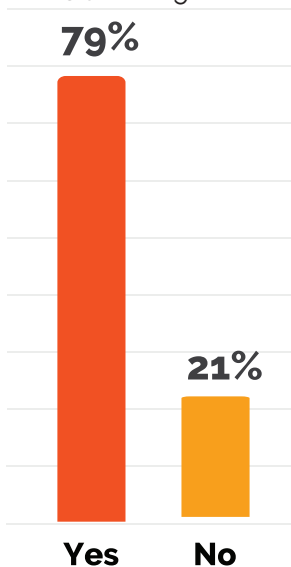
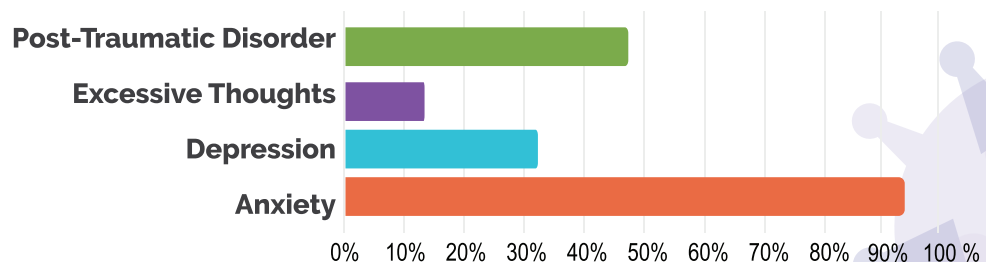
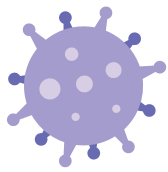


Fig. 17: Psychological experience due to COVID-19





62% indicated reduction in financial service, 8% reported reduction in water supply and 33% of informants reported the reduction of services like access to market and power.

Psychological Effect of COVID-19

Studies has shown that people with existing health challenges are vulnerable to COVID-19 infection.

The assessment of the psychological of PWDs during COVID-19 has shown 79% responses indicating that the pandemic has psychological effect on them while the remaining 21% reported that there was no psychological effect of COVID-19 in their lives. Meanwhile, out of the 79% that experience some forms of psychological illness, 84% indicated that COVID-19 made them anxious, 41% reported that they experienced excessive thoughts as a result of the pandemic, 29% indicated that they were depressed while 2% of the informant reported to have experienced post-traumatic stress disorder.

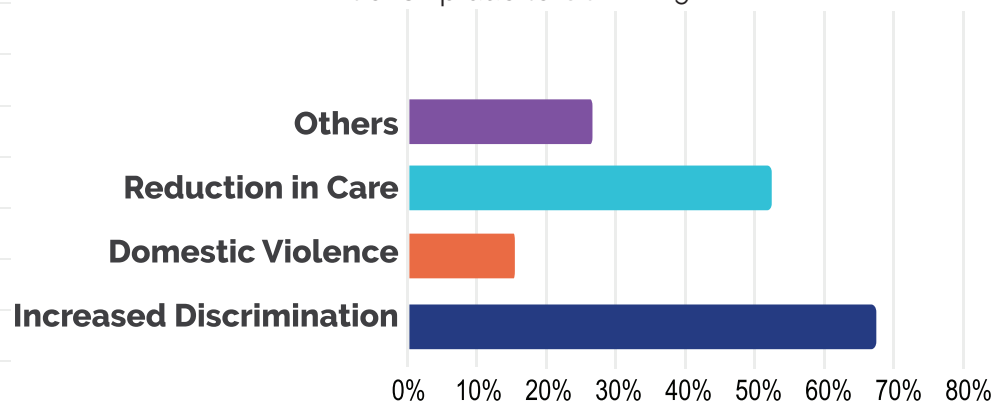
Effect of COVID-19 on social relationship

The reality of COVID-19 pandemic has reshaped human relationship in unprecedented ways, forcing some to live closer together with some people and further apart from others. The lockdown has necessitated close, constant contact with our families and partners, but social distancing measures may have isolated people from friends and wider communities.

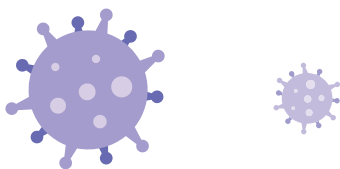
Fig. 18: Effect of COVID-19 on Social Relationship



Fig. 19: Difference in Social Relationship due to COVID-19



As indicated in figure 18, all (100%) of the informants affirmed that COVID-19 had effects on their social relationship as a result of the different measures and guideline ordered by the government such as physical distancing, total lockdown, ban of gatherings and community activities etc. In the same vein, figure 19 depicted the responses of informants on the difference in social relationship that could be attributed to COVID-19, 68% reported increased discrimination, 51% indicated reduction in care, 13% reported domestic violence while 26% of the informants indicated other social changes like divorce and total abandonment.



COVID-19 and Means of Livelihood

The effects of COVID-19 on socio-economic activities of PWDs were assessed through several relevant indicators like change in monthly income, food expenditure.

COVID-19 affected several PWDs with most of them experiencing reduced income (94%) as shown in figure 20, which stems from the restriction measures imposed by government both at state and federal level to curtail the spread of the disease. Moreover, a significant percentage of the population equally experienced loss of income due to poor business activities or loss of job. Out of the 94% that reportedly experienced reduced income, 80% of them indicated a reduction of 40% to 80% of less than they would normally earn. 15% of the informants indicated a reduction of less than 40% while 5% reportedly experience a reduction of 80% to 100% in their income. The experience of PWDs calls for the need for support and government assistance or intervention, although the degree of the impact on socioeconomic activity may differ, the paramount need would therefore be to ensure food security. Such need could be further assessed by examining the difference in food price during the pandemic as experience by PWDs.

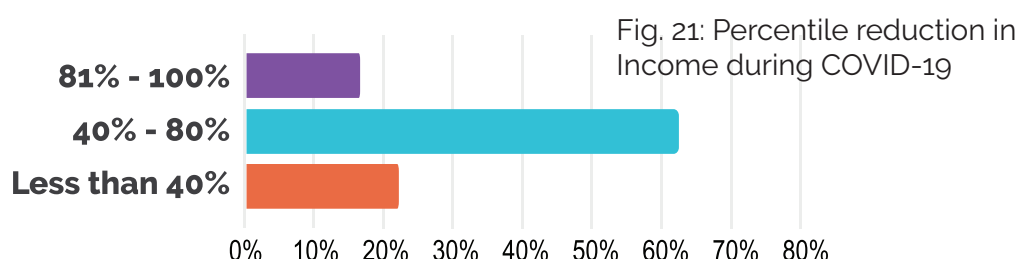
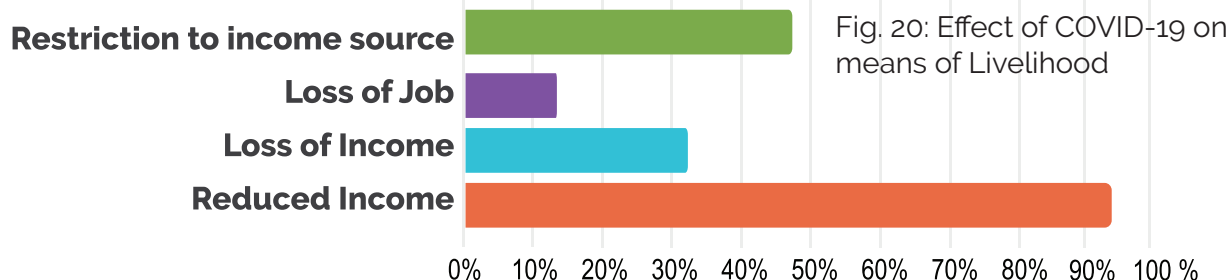
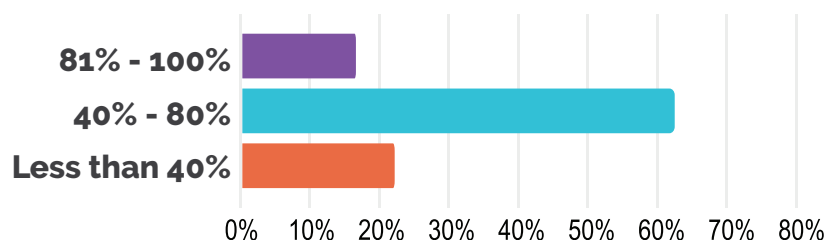


Figure 22 has shown the difference in food price before and during the pandemic, which indicates the severity of the hardship experienced by PWDs as result of COVID-19 crises. 62% of the informants reported that there was between 40% to 80% inflation in food price in their location, 23% indicated a less than 40% increment in prices of food commodity while the remaining 15% affirmed that they experienced between 81% to 100% increase in the price of food items in their location. It is obvious from the statistics shown that PWDs experienced shock in food prices following the rise in monthly food expenditure.

Fig. 22: COVID-19 and Food Price Inflation



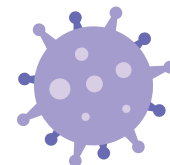
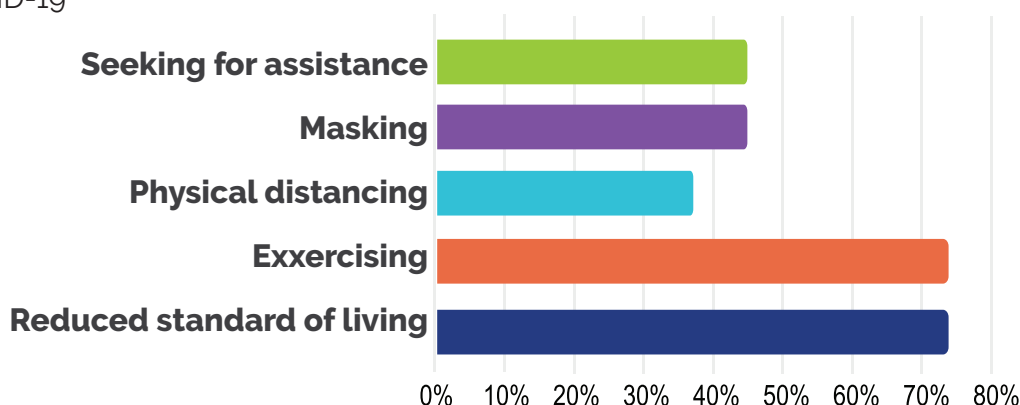


Fig. 23: Coping Mechanism during COVID-19



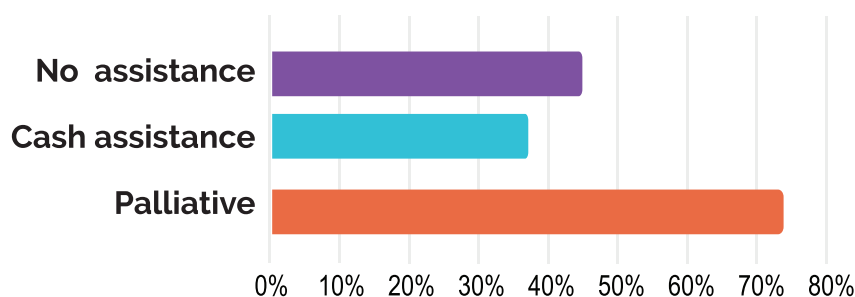
Coping Mechanism during COVID-19

Economists have projected that Africa would be hard hit by the medium to long-term social and economic impacts of the pandemic which could force families to rethink their coping mechanisms. At the same time, many formal businesses, especially petty business managed by PWDs are running out of reserves to sustain the businesses. Consequently, unemployment, job losses have started to happen very early on, the figure below illustrates the different coping mechanisms that PWDs adopted to survive during the pandemic.

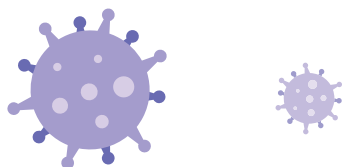
Forms of Assistance during COVID-19

In Nigeria, the media has reported different forms of assistance from the government to the citizens during COVID-19, which are intended at relieving Nigerians of the repercussive effect of the total lockdown. The information below represents the experiences of PWDs to the inclusiveness of the interventions.

Fig. 24: Forms of Assistance during COVID-19

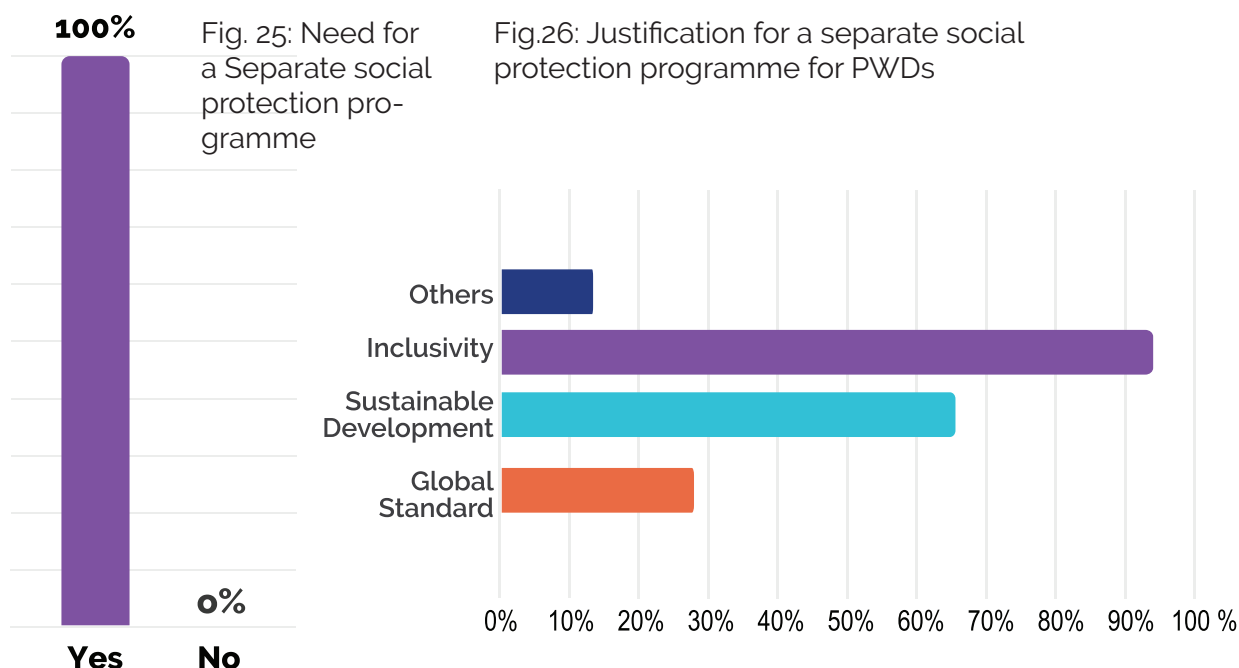


As shown in figure 24, 73% of the informants indicated that the government assisted them with palliatives that consist of food items, such as rice, garri, spaghetti, vegetable oil etc. 37% reported that the government assisted them with cash during the COVID-19, while 45% of the informant indicated that they received no assistance from the government during COVID-19. The inference from this statistic shows an inadequate coverage of PWDs in terms of assistance during the COVID-19, which could be detrimental to their survival, considering the fact that they are people with disabilities.



Significance of a disability specific Social Protection Programme for PWDs

A cursory look at the programmes reveals that the comparative advantages of Nigerians without disabilities to access those programmes placed PWDs on the disadvantage, thus the need to assess the relevancy of a separate social protection programme for PWDs in Nigeria;



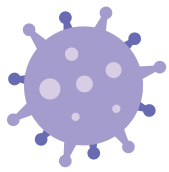
As shown in figure 25, all (100%) the informant affirmed that a social protection programme should be introduced for PWDs in Nigeria; it was a unanimous response across all informants within the six geo-political zones. The assessment went further to inquire on the justification for a disability specific social protection programme for PWDs, the figure below presents the opinion of informants;

In Figure 26, 93% reported that a social protection programme is necessary for PWDs in Nigeria for the purpose of inclusivity. 65% justified their affirmation of the need to introduce a social protection programme for PWDs because of its capability to drive sustainable development. 28% of the informant enjoined the Nigeria government to introduce a social protection programme in compliance with global standard. 13% of the informants justified their affirmation responses with a couple of other reasons like, fairness, equity and commitment.

Discrimination

The current infrastructure in Nigeria does not support PWDs to participate in socio economic activities on an equal basis with other citizens. The building codes must abide by to ensure the physical accessibility of these built environments to ensure that PWDs also go





about their activities without difficulties.

Excerpt from the Key Informants Interview:

"During the heat of COVID-19, I contacted one of our public office holders to consider giving palliative to PWDs in the state, but she responded that there was no special provision for PWDs whoever need palliative would join the other Nigerians to access it"

(KII, Male, Physical disability, Akwa-Ibom)

"In planning most of these government intervention, Youth and Women groups are always considered as critical stakeholders to measure inclusivity, the decision makers do not perceive PWDs as a group of people that is entitled to all the opportunities that every able-bodied person is entitled to"

(KII, Female, Physical disability Zamfara)

Inadequate Awareness

PWDs are not adequately informed about existing social protection programmes and processes on and how to access them. This has posed a major challenge to the inclusion of PWDs in most of the social protection programmes. For instance, not many PWDs are aware of the existence of the National Social Investment Programme and National Health Insurance Scheme, therefore they are unable to access these programmes. Moreover, the information on some of the social protection programmes are not disseminated in accessible formats to PWDs

Excerpt from the Key Informants Interview:

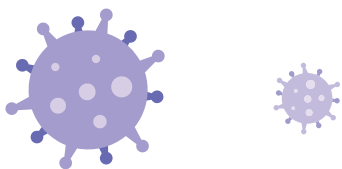
"Some of us are not aware of those programme and initiative of government on social protection, in fact I am hearing the NSIP for the first time when you mentioned it, I am visually impaired and the only way I get information is through audio"

(KII, Female, Visually-Impaired, Anambra)

"The role of information to accessing different government programmes cannot be overemphasized, the fact is that communication strategy of most government interventions is not comprehensive enough, as such PWDs are tactically denied access to many opportunities"

(KII, Male, Physical disability, Kogi)





Inaccessibility and barriers to participation

The capacity required to compete for some of these social protection programmes are unequal. For instance, a social protection programme with an online application like N-Power, a blind person may be unable to complete forms due to the inaccessibility of the site.

Excerpt from the Key Informants Interview:

"It is unfair to allow a PWD to apply and be considered with the same criteria for a social protection programme with other persons without disabilities. The competition will be unequal"

(KII, Male, Visually-Impaired, Ondo)

"The design of some of the social protection programmes has certain standards that does not consider the specialty of PWDs, therefore the competition for such programmes with other persons without disabilities will skew the chances for PWDs"

(KII, Male, Person with Albinism, Osun)

Lack of Political Will

From the interview, informants reported that the poor inclusion of PWDs in social protection programmes is because of lack of will to include PWDs by those in the helms of affairs. Since every success in governance is attributed to the political decision, the shortcoming should be attributed to it. For instance, if a directive for inclusion of PWDs is issued by the government, it is mandatory that relevant authority implement same, knowing fully well that failure to comply with the directive could cost his/her appointment/employment.

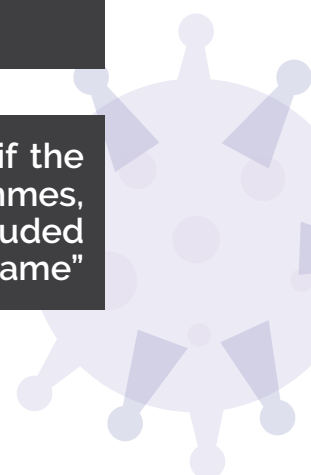
Excerpt from the Key Informants Interview:

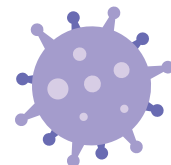
"It was the political will of those in authority that gave us the Discrimination Against Persons with Disabilities Prohibition Act (2018). Advocacy for the act has been around for a long time, thus, it is the political will that will also address the problem of poor inclusion of PWDs in social protection programmes, until then, there is no political will"

(KII, Female, Physical disability, Zamfara)

"Every actions and inactions start and end with politics in Nigeria, if the political class want the inclusion of PWDs in social protection programmes, it is just a matter of decision making and PWDs will be properly included in government interventions, until then the problem will remain the same"

(KII, Female, Physical disability, Ebonyi)





Lack of Accurate Data of PWDs

It is a fact that the lack of data has crippled efforts to include persons with disabilities in mainstream social protection programmes. Responses of the informants have shown that the dearth of comprehensive and accurate data of PWDs is a clear limitation to the inclusion of PWDs in social protection programmes.

Excerpt from the Key Informants Interview:

"We don't have accurate data of PWDs in Nigeria, that is where our problem lies. Because if we have accurate data, disaggregated into forms of disability, it will enable us to appropriately engage with the government beyond guessing, we will be able to evaluate the level of inclusion of PWDs by number"

(KII, Male, Physical disability, Anambra)

"Another major problem we face as leaders of PWD is that some PWD refuse to register with the organization, therefore we are unable to collect enough data to advocate for opportunities for all"

(KII, Male, Visually Impaired, Gombe)

Non-Adherence to the United Nation Convention on the Right of Persons with Disability (UNCRPD)

The UNCRPD has provided for the inclusion of PWDs in government programmes and intervention. Nigeria is a signatory to the convention but the compliance or adherence to the provisions of the convention is lacking. This accounts for the exclusion of PWDs in social Protection programmes in Nigeria. ,

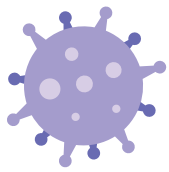
Excerpt from the Key Informants Interview:

"Nigeria is a signatory to the United Nation Convention on the Right of Persons with Disability, but they are not practicing it, that is the bane of exclusion of the PWD community in Nigeria"

(KII, Male, Physical disability, Akwa-Ibom)



CONCLUSION AND RECOMENDATION



CONCLUSION AND RECOMMENDATION

From the results, it is evident that COVID-19 has negatively impacted the socio-economic life of PWDs in Nigeria irrespective of their disability type (Deaf, Blind, Physical disability, Albinism, etc.) and locations. The restrictions imposed by government at all level in order to curtail the spread of the virus has affected the income and livelihood of the PWDs, and consequently their wellbeing. Although, the depth and severity differ, the larger percentage of informants across locations has experienced significant economic shock with limited access to basic needs (like food). Apart from the hardship imposed by the restrictions, the rise in prices of food items also contributed to the difficulty in the socioeconomic wellbeing. The situation is expected to be largely felt among those living on remittances (aged or students) or those with no current occupation or loss of job, which PWDs majorly form this demography.

In addition, access to social services like education, health care, financial services, and so on, became increasingly inaccessible to PWDs due to the existing barriers in our systems, which the COVID 19 amplified. A limited number of PWDs received some support from government and are captured in some social protection programmes based on the findings of this study and poverty is still commonplace. The situation therefore calls for the following pathways towards a more inclusive Nigeria that accommodates the needs and peculiarities of PWDs:

1. Data Collection

Data and information on PWDs and their needs is essential for planning and proper engagement with government. Thus, government through the National Commission for Persons with Disabilities (NCPWD) must immediately work with leading and competent OPDs to collect the data of PWDs and create a database that shows the number and unique needs of PWDs to assist the various arms of government plan better for the PWD community in Nigeria.

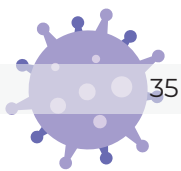
2. Advocacy for a disability specific Social Protection Programme.

Having identified the need for a unique approach to the challenges of PWDs in Nigeria, the federal and state governments should consider designing and implementing a social protection program that works to reduce the shocks of PWDs in Nigeria especially reflecting on emergencies and pandemics. OPDs should also form a network to monitor the successful on-boarding of PWDs into such programs and the effectiveness of such programs.

3. Awareness Creation

No single organization is capable of creating awareness on disability, needs of PWDs, etc. All stakeholders must work across board and create lines of awareness creation components to facilitate the creation of better awareness around PWD inclusion in Nigeria. The National Commission of PWDs is expected to lead in this process as an





agency of government at the national level. Other state agencies (Commissions) should also lead the process in their respective states. OPDs should also extend partnerships to these agencies and provide technical support in developing inclusive and accessible messages.

4. Mainstreaming PWDs into Budgeting

The national assembly must create a separate budget line in the appropriation Act that targets disability inclusion across various MDAs. The Nigeria government through relevant MDAs should mainstream PWDs into their budgeting and budgetary process. This would be helpful in ensuring disability inclusion across board.

5. Strengthen Country wide PWD / OPD Network

The Joint National Association of Persons with Disabilities (JONAPWD) has presence across the 36 states and Abuja, however, leaders have expressed the need for stronger coordination across the various states. Additionally, coordination among other OPDs outside the JONAPWD is also desirable to ensure that PWDs engage government and it's policy as a formidable front.





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