

## Relationship Between Poverty and Disability in Developing Countries

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### Abstract

Disability arising out of disease, accident, or congenital is a crucial health issue affecting millions of people all over the world. Prevalence and management capacity of disability have wide cross-cultural and geographical variations. Despite the lack of specific data there are reasons to believe that third-world countries have more disabilities and fewer resources and capacity for rehabilitation. So, there is a strong relationship between poverty and disability. Marginalized populations, disadvantaged or at-risk populations such as women, older people, and people who are poor are inappropriately affected by disability. Children from poverty-stricken families, indigenous populations, and ethnic minority groups are significantly at higher risk of experiencing disability. There is a higher prevalence of disability in lower-income countries than in higher-income countries. Poor people from lower-income countries are usually involved in high-risk jobs which make them vulnerable to injury and disability. Because of exaggerated life stress, poor health status, and poor living conditions due to poverty, people at low resource outset are more vulnerable to disease and disability. Of inadequate support from affluent persons as well as from the government as universal health coverage or other social security measures, they compel to spend their last savings to meet the treatment costs and get poorer. They are also common victims of road traffic accidents when they travel on risky roads and vehicles. There are many other shreds of evidence for a link between disability and poverty in low and middle-income countries and there is an urgent need for further research and policy action to break the cycle. This review article intends to find out the relationship between poverty and disability and reveals how poverty influences suffering disability and vice versa.

**Keywords:** Relationship; Poverty; Disability; Developing country

### Introduction

According to the world health organization's estimation, 15% of the global population suffer from a disability, with 80% living in low- and middle-income countries (LMICs) [1]. People with disabilities in LIMCs face multiple barriers to reaching healthcare services. Poverty and disability are linked in a vicious cycle complementing each other. Poverty and poor health leading to disability are known to be linked through various mechanisms including lifestyle factors and access to health services [2].

Poverty and disability usually reinforce each other in a cyclic manner. The risk of disability increases in low- and middle-income countries (LMICs) as poverty prevails in the form of lack of access to healthcare, inadequate water and sanitation, malnutrition, and poor living conditions [3,4]. Extreme poverty and social inequalities usually lead to stress and social exclusion, which can worsen both mental and physical health and functioning [5]. Disability can lead to exclusion from work, education, and healthcare, and enhances expenditures on health and other life factors, which can cause or exacerbate poverty [1,6-8]. There is a link between disability and poverty, but the empirical evidence for this association is less clear. The person with disabilities in LIMCs usually lives in poverty and their

sufferings are double that of people without disabilities [4,9]. There are many citations supporting this but upon tracing to the original source, many such figures were found to be based on weak evidence [9].

The greatest global challenge is eradicating poverty in all its forms and dimensions, including extreme poverty, and an indispensable requirement for sustainable development goal [10]. The failure to include disability issues in the Millennium Development Goals (MDG) has led to the exclusion of people with disabilities from its benefits, potentially widening inequalities between people with and without disabilities. The millennium development goal is particularly concerned with reducing poverty as well as disability [11] Studies show that the links between disability and poverty are less clear and more complex than previously thought [12].

### Proving relationship

To maintain a sustainable goal in lower-income countries importance should be given to disability. Poverty invariably affects disability management and disability on the other hand enhances poverty. Poverty and disability are major limitations to development. To find out the relationship between poverty and disability more research is needed to establish the fact.

Studies on poverty, health, and disability in LMICs reveal that there are strong links among them but studies show limited relations. So, the relationship between poverty, health, and disability is not simple as previously thought. The authors of those studies admit that those were nonsystematic reviews with relatively small collections [9]. In another study socioeconomic evidence of the relationship between poverty and disability was inconclusive [13]. Both of these reviews used only general terms for disabilities like handicaps but did not include disability types like vision impairment, and intellectual impairments and have potentially excluded many relevant studies.

Later life disabilities have more safeguards than earlier life disabilities. Individuals who develop disabilities earlier in life will have to face exclusion throughout the life course. Poverty has provoked lower life expectancy and poorer health in these age groups. Poor individuals who survive into older age group may be healthier as they developed safeguards against many negative factors [14].

**Changing relationship:** To explore the relationship between economic poverty and disability, we need further research in this area to understand how the relationship changes over place, time, and between groups. To enable comparisons across contexts and over time there is a need for more standardized research to calculate the exact relationship between disability and economic poverty. The measurements of economic poverty have variations in different studies and there is a lack of reliability as well. Cooper et al reviewed the measurement of poverty and highlighted the need for more critical and systematic approaches for assessments of poverty in different contexts [15].

**Multidimensional forms of poverty:** Financial deprivations are a major hindrance to the understanding of the crisis in basic needs. More research is also needed to explore the relationship between multidimensional forms of poverty and disability. Lack of education and engagement in a high-risk job, inadequate living standards, and poor health, are indicators of the multidimensional form of poverty which may reflect the complexity of poverty [16]. Planning reduction of poverty and disability can then be better implemented. Using the household as the unit of analysis, multidimensional measures of poverty often obscure the uneven distribution of resources or opportunities within the household [17]. To understand the impact of economic poverty on the lives of people with disabilities, more extensive research is needed. This is also important to see whether existing interventions are effective at reducing poverty among people with disabilities or not. Poverty alleviation and social protection programs should be sufficiently disability-inclusive. Policy and planning to reduce the poverty and disability should have the impact of participation in both reducing disablement and/or decreasing poverty among people with disabilities [18]. Multidimensional poverties as well as lower educational attainment, lower employment rates, and higher medical expenditures are significantly associated with disability in LIMCs.

**Poverty and disability, a vicious cycle:** Disability and poverty are intimately linked to a vicious cycle. In the global context the relationship between poverty and disability is well documented [19]. Resource constraints lead to malnutrition and disease, which are vital parts of impairment and disability and ultimately contributes to inferior levels of human devel-

opment. Inadequate fundings are major hindrance to develop rehabilitation services. So, poverty alleviation and sustainable economic development can be seen as essential elements in the poverty reduction strategy. Disabled people are also more likely to suffer miserable poverty than other people in the society. Per capita income of billions of people in the third world is not more than one US dollar per day and disabled in these countries lives at the bottom of the cauldron [20]. Most of the impairments linked to poverty experienced by people with disabilities are preventable [21]. Very few people with disabilities have access to medical rehabilitation and other basic needs. Persons with disabilities are often unable to go to school and unable to provide a financial contribution to the livelihood of the family or interact with their communities. If any member of a family becomes disabled the whole family needs to bear the burden of that disabled member. Disability affects not only the individual but also their families and communities, for instance, caregivers of disabled family members are often unable to attend a school or participate in the workforce.

**Policies and programs:** The World Program of Action of the United Nations should ask member states to adopt policies so that disabled persons can be trained and work on equal terms in the regular labor force. The community-based rehabilitation program should be encouraged to provide better job opportunities in developing countries [22]. More human and financial resources are required by persons with disabilities. For daily needs and activities, they need support from family and communities [23]. People with disabilities constitute among the poorest and most vulnerable of all groups, and thus must be a core issue in development policies and programs. The relationship between disability and poverty still remains an ill-defined and poor research issue [24]. When the government and society do not take responsibility for the poor and disabled, some of them become street beggars for livelihood. Persons with disabilities comprise about 20% of the poorest of the poor according to World Bank estimation [25].

People with disabilities experience barriers in many ways. Policies and regulations of the government should remove these barriers. Such barriers may be physical for example impaired accessibility to public places, transportation, and recreational facilities. They do not have a separate queue for public and private services. Widespread underestimation of the abilities and potentiality of people with disabilities and attitudes towards them create a vicious cycle of under-expectation and underachievement. They also have low priority in the allocation of resources. People with disabilities and their families continue to face discrimination and fail to enjoy their basic human rights. The inclusion of people with disabilities is a matter of social justice and an essential investment in the future of society. The realization of universal human rights should be based on need but not on charity [26].

To understand the impact of economic poverty on the lives of people with disabilities we should have to conduct more research. For reducing poverty among people with disabilities there should be more effective medical and financial rehabilitation interventions that are able to reduce both poverty and disability. We should see whether current poverty alleviation and social protection programs are sufficiently disability-inclusive or not. Policy making and planning should be strong enough to decrease poverty among people with disability [18]. Policies and programs of a nation should be based on bringing people

with disabilities into the main stream of life so that can contribute to society as well as to the nation.

## Conclusion

Disability and poverty have a mutual relationship, meaning that both are the cause and consequence of the other. Injury or impairment increases as a result of living in unsafe conditions. Ensuring safer conditions is a prerequisite to preventing disability. People with disabilities and their families face higher risks of poverty and impoverishment, because of their low access to education and employment and also the cost of care. Failure to address the relationship and the interaction between disability and poverty will undoubtedly hinder economic growth and development, including sustainable development goals. People with disabilities have to accommodate additional expenses related to their disability (e.g., assistive devices, extra transportation). So economic poverty among people with disabilities continues to prevail. Poverty alleviation and development programs will be hampered if we fail to manage the disabilities of poverty-stricken people. The impact of poor people with disability on economic growth and social security is high.

The poverty reduction policy of low-income countries should be critically structured to address poverty and disability simultaneously. Bangladesh a developing country in South Asia has fast growing economy despite the aftermath of a touching thrush of the global corona pandemic. Poverty reduction programs are progressing but addressing the problems of the disability is unsatisfactory. Poverty alleviation and reducing the discrimination of income between poor and rich is an unprecedented challenge to developing countries. If we can improve the quality of life of these groups of people and bring them to the mainstream of life, they can better contribute to society as well as to the nation. Policymaking and research agendas should explicitly cover disability and poverty concomitantly in developing countries. The socioeconomic statuses of persons with disabilities have cross-cultural and geographic variations. We need to approach the problem in different ways in different countries. We need further research to investigate the potential adverse relationship between economic development and the disability/poverty association.

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