

Community Perspectives on Social Cash Transfer for Children with Disabilities in Rural Zambia

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Abstract

This study explores the perceived benefits and challenges of the Social Cash Transfer (SCT) programme for learners with disabilities in Kalumbila District, Zambia. Using a qualitative case study approach, data were collected through in-depth interviews and focus group discussions involving learners, parents, teachers, and social service officers. The findings reveal that while SCT contributes to improved school attendance and basic educational support, significant barriers persist—including limited awareness, cultural stigma, inadequate outreach, and inconsistent disbursement. Schools played a crucial intermediary role, yet gaps in stakeholder coordination and inclusive communication practices hinder full access for eligible children. The study highlights systemic shortcomings in programme design, especially in addressing the complex needs of children with disabilities. It emphasizes the importance of embedding SCT within a broader inclusive social protection framework, supported by assistive services and multi-level collaboration. Despite offering critical insights, the study is limited by its geographic focus and qualitative scope, which constrain generalizability.

Keywords: Children with Disabilities, Educational Inclusion, Social Cash Transfer, Stakeholder Perspectives, Zambia

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INTRODUCTION

Social protection programs have gained increased global attention as mechanisms to combat poverty and enhance human development, especially among vulnerable populations. In Zambia, the Social Cash Transfer (SCT) programme was introduced in 2003 through an Act of Parliament to address poverty among marginalized households, particularly in rural areas (Mulenga, 2024). Initially piloted in Southern Province, the programme was later scaled up nationwide. The SCT aims to improve food security, increase school enrolment, and promote the overall wellbeing of children in vulnerable households (Mulenga, 2024). As such, it is viewed as a strategic tool for advancing equity in access to education and health.

The SCT programme also seeks to mitigate socio-economic shocks among households by providing regular cash transfers to meet basic needs (Mukupo & Lungu, 2019). Its role in fostering social development and inclusion is particularly vital in low-income countries like Zambia. For families with children with disabilities, the SCT has the potential to reduce the burden of caregiving and enhance opportunities for participation in education and community life. However, such families often remain among the most marginalized in both social and economic terms. In the absence of adequate support, many individuals with disabilities resort to street begging or become socially excluded.

The effectiveness of SCT initiatives is not unique to Zambia; similar programmes in Latin America and Asia have demonstrated positive outcomes. In countries such as Mexico and Brazil, cash transfer schemes contributed significantly to poverty reduction and improvements in health and education (Milimo, 2019). Today, SCTs are widely recognized as integral to achieving human development goals in developing regions. In Zambia, the Ministry of Community Development and Social Services (2022) administers the SCT programme, supported by a decentralized structure across all ten provinces and 116 districts. The programme's primary goal is to reduce extreme poverty and interrupt its intergenerational transmission.

The SCT programme was initially targeted at the poorest 10% of households, with a focus on labor-constrained families, including those with persons with disabilities (Mukupo & Lungu, 2019). This targeting approach was first piloted in Kalomo district in 2003 and expanded to other districts such as Kazungula and Monze. Despite this, early implementation lacked standardized poverty assessment tools, which raised concerns about equitable inclusion of all deserving households. Persons with disabilities were believed to be among the poorest, yet the targeting mechanism did not systematically identify or prioritize them. Consequently, the most vulnerable continued to face challenges in accessing support.

Financing for the SCT programme comes from the Zambian government with additional support from cooperating partners. Given the country's fiscal constraints, such partnerships are essential for the programme's sustainability. Implementation is carried out by the Department of Social Welfare under the Ministry of Community Development and Social Services, supported by local structures such as Community Welfare Assistance Committees (CWACs) and Pay Point Managers (PPMs) (Ministry of Community Development and Social Services, 2022). Over time, the value of the transfer has been adjusted, with households caring for people with severe disabilities receiving higher payments. The programme's broader objectives include improving food consumption, reducing child morbidity and mortality, and increasing household asset ownership (Chibanda, 2019; Mukupo & Lungu, 2019).

In its evolution, the SCT adopted more inclusive models such as the Multiple Category Transfer Grant (MCTG) and Child Grant (CG), each addressing specific vulnerabilities. Between 2010 and 2014, the programme further transitioned into a harmonized targeting system to include households with high dependency ratios (Arruda & Dubois, 2018; Milimo, 2019). Eligibility criteria under this model now include residency and household composition factors such as elderly members, persons with disabilities, and female-headed households with children (Ministry of Community Development and Mother and Child Health, 2014). This shift aimed to expand the

coverage and reach of the programme to more diverse vulnerable groups. Nonetheless, gaps remain in assessing how well these inclusive goals have been realized in practice.

Before 2014, learners with disabilities were largely excluded from the SCT scheme, due to limited consideration in targeting protocols (Arruda & Dubois, 2018). While Zambia has other mechanisms such as the Education Support Fund for Students with Disabilities, these are not universally accessible. Eligibility for this fund requires meeting strict criteria, including income thresholds and national registration (Chitiyo & Muwana, 2018). Therefore, despite the presence of support structures, systemic barriers continue to hinder access to education and social assistance for children with disabilities. Addressing these issues requires targeted policy interventions and more inclusive programme designs.

Stigma surrounding disability remains a major barrier to inclusion in Zambia. Deep-rooted cultural beliefs and stereotypes result in the marginalization and social exclusion of children with disabilities. The 2014 reforms to SCT targeting were influenced by advocacy efforts, particularly from disabled persons' organizations in Lusaka. These efforts highlighted the need to recognize disability as a legitimate category for priority support. Nonetheless, operationalizing this recognition in practice requires rigorous monitoring and data collection at community levels.

Following these reforms, beneficiaries with severe disabilities became entitled to higher SCT amounts, with payments made bi-monthly (Ministry of Community Development and Mother and Child Health, 2014). The expanded objective of the programme is to support livelihood improvement through better access to education, healthcare, and social services. Evaluations have shown positive outcomes for households receiving SCT (Devereux, 2002; Mukupo & Lungu, 2019). However, there is limited empirical evidence focusing specifically on the educational benefits for children with special education needs. This knowledge gap hinders the ability of policymakers to tailor SCT interventions to meet the unique needs of such children.

In Kalumbila District, which is among the disadvantaged areas of Northwestern Province, it remains unclear whether the SCT reaches parents of children with disabilities. The current eligibility framework may not sufficiently consider the intersecting challenges of rural poverty, disability, and educational access. Neglecting these factors risks perpetuating inequality and undermines the inclusive policy objectives of the SCT programme. A focused investigation into SCT access and benefits for children with special education needs in Kalumbila is therefore essential. Such research can inform improved targeting strategies and strengthen programme outcomes.

This study is guided by the need to understand whether children with disabilities and their caregivers in Kalumbila benefit from the SCT programme. In doing so, it seeks to uncover systemic gaps in implementation and offer recommendations for more equitable delivery. By focusing on a marginalized sub-group, this research contributes to the broader discourse on inclusive social protection. It also provides critical insights for community development practitioners and social workers involved in programme planning. Ultimately, it supports Zambia's commitment to inclusive education and sustainable development.

METHODS

Research Design

This study employed a qualitative case study design to explore the community perspectives on Social Cash Transfer for Children with Disabilities in Kalumbila District, a district in Rural Zambia. The qualitative approach was selected for its capacity to facilitate in-depth exploration of participants' experiences within their real-life context (Berg, 2001; Afza, Bashi, & Azeem, 2008). This design enabled the researchers to gain insights into social and institutional dynamics surrounding the implementation of SCT. The case study approach further supported the contextual understanding of how the programme functions within Kalumbila's socio-economic setting (Berg, 2001).

Study Area

The study was conducted in Kalumbila District, located in Zambia's Northwestern Province. This area was selected due to its designation as a vulnerable and underserved rural region where the SCT programme is actively implemented. The district is characterized by limited access to social services and high poverty levels, making it a relevant site for examining the SCT's role in promoting educational inclusion.

Target Population

The target population comprised four key groups: learners with special education needs, parents of these learners, teachers directly responsible for supporting such learners, and officials from the Ministry of Community Development and Social Services. These stakeholders were identified as possessing relevant knowledge and direct experiences with the SCT programme in the district.

Sampling Technique and Sample Size

Purposive sampling was employed to select participants with specific knowledge relevant to the study objectives. This non-probability sampling method is suitable for qualitative research where the aim is to gain deep, focused insights rather than statistical generalization (Berg, 2001). Participants were selected based on their roles and lived experiences with the SCT programme. The total sample size consisted of 22 individuals: four learners, eleven parents, four teachers, and two ministry officials.

Data Collection

Data were collected using two primary qualitative techniques: in-depth interviews and focus group discussions (FGDs). In-depth interviews were conducted with learners, teachers, and ministry officials to allow for personalized and detailed responses. FGDs were held with parents of children with special education needs to encourage collective reflection and shared perspectives. These methods enabled the use of open-ended questions and probing to capture participants' nuanced experiences (Afza, Bashi, & Azeem, 2008; Berg, 2001).

Data Analysis

Data analysis followed a thematic approach. Transcribed interview and FGD data were coded, categorized, and organized into themes based on emerging patterns. This process facilitated the interpretation of participants' perspectives within the broader context of the SCT's implementation and its perceived benefits for children with disabilities. Thematic analysis also supported triangulation by comparing insights across different participant

groups.

Ethical Considerations

To ensure ethical integrity, all participants provided informed consent before participating in the study. Personal identities were protected through anonymization, with each participant assigned a code: Learner 1–4, Teacher 1–4, Officer 1–2, and Parent 1–11. The study adhered to the principles of voluntary participation, confidentiality, and respect for participants' rights to withdraw at any point without consequence.

RESULTS AND DISCUSSION

Accessibility of Social Cash Transfer (SCT)

Knowledge and Awareness of SCT

The study revealed a general lack of awareness among parents and learners with special education needs regarding the SCT programme. Many participants expressed unfamiliarity with the programme's name or its procedures. As cited from Parent 1 and Learner 1, both recognized that while they heard about government assistance, they were unaware it referred to SCT or how to access it. Teachers also highlighted that eligibility criteria were poorly disseminated among the community. These findings reflect the systemic communication gaps noted by Mulenga (2024), where eligible individuals may miss out due to unclear programme outreach.

Sources of Information

Participants indicated several key sources for accessing SCT information: school registers, community meetings, grassroots outreach, and community radio. Social Welfare Officers and Community Welfare Assistance Committees (CWACs) played central roles during field visits. As reported by SCT Officer 1 and CWAC Member 1, these local structures facilitated identification and registration of beneficiaries. Community radios also played a role in disseminating announcements, although access limitations in remote areas posed challenges, consistent with Mwange (2019) who emphasized the need for diversified outreach methods.

Role of Schools

Schools served as a critical intermediary in facilitating SCT access for learners with disabilities. Teachers and headmasters assisted parents during registration, and school records were used to identify vulnerable children. However, it was also noted that not all children with disabilities were enrolled in school, creating gaps in identification. This demonstrates the importance of strengthening school–community–social welfare linkages to ensure inclusive outreach, in line with the inclusive SCT vision post-2014 reform (Arruda & Dubois, 2018).

Educational Benefits of SCT

Meeting Basic Educational Needs

Parents and teachers reported that SCT enabled the purchase of essential items such as school uniforms, shoes, and books. These provisions helped learners attend school regularly and with dignity. This aligns with SCT's objective to increase school attendance and educational equity, as noted in Ministry of Community Development

Social Services (2022) and Chibanda (2019). Improved school preparedness and confidence were seen as important psychosocial benefits.

Attendance and Motivation

Learners and teachers reported that food security, made possible through SCT, contributed to reduced absenteeism and improved motivation to attend school. Parent 8 and Teacher 3 emphasized that consistent meals reduced hunger-related absenteeism. These outcomes support findings from Mukupo & Lungu (2019) and UNICEF (2018), which linked SCTs to enhanced educational engagement through nutritional stability.

Challenges in Accessing SCT

Inadequate Funding

Participants indicated that SCT amounts were insufficient to meet comprehensive educational and household needs. Teachers noted that while SCT helped with minor items, it could not support tuition or long-term learning investments. This reflects critiques in Opoku et al. (2019) about SCT's limited impact without supplementary interventions.

Failed Payments and Inconsistencies

Several participants reported having registered for SCT but did not receive payments or received inconsistent amounts. These concerns echo issues identified in Chibanda (2019) and Mulenga (2024) regarding data management and corruption risks in programme implementation.

Stigma and Social Perception

Findings also revealed stigma associated with receiving SCT, particularly for families with children with disabilities. Participants expressed hesitation to register due to fear of judgment. This aligns with Chiwele & Kaputo (2010), who noted that stigma and low literacy can impede programme participation among marginalized groups.

Recruitment and Communication Barriers

Limited outreach to remote areas and communication barriers, including lack of sign language interpreters, excluded many eligible learners. Teacher 4 highlighted that deaf learners struggled to access information due to lack of appropriate accommodations. These findings parallel Banks et al. (2019), who reported systemic exclusion due to inaccessible programme designs.

Stakeholder Collaboration

Insufficient stakeholder involvement was another challenge raised. Participants emphasized the need for collaboration between schools, communities, and social welfare officers to improve programme efficiency. This supports the argument by Mukupo & Lungu (2019) that systemic coordination is key for successful SCT implementation.

The results of this study confirm that while the SCT programme offers valuable support to children with special education needs, significant gaps remain in terms of accessibility, communication, and inclusion. The qualitative data demonstrate that many families are unaware of the SCT programme or lack understanding of how to register, reflecting systemic failures in information dissemination (Mulenga, 2024; Mukupo & Lungu, 2019).

Although schools and community structures play important roles in identifying and supporting eligible families, outreach remains uneven and incomplete, particularly in rural areas.

The findings further highlight that while SCT provides essential support for basic educational needs, it does not address broader barriers such as tuition, assistive technologies, or long-term academic inclusion. This limitation is consistent with critiques in Opoku et al. (2019) and reflects the need for more comprehensive support systems, as seen in successful models in Namibia and South Africa (Devereux, 2002). Learners continue to face structural exclusion in school environments due to unaddressed needs beyond school supplies and basic meals.

Stigma and social perception continue to hinder access, particularly among families with disabled children. These attitudes are rooted in deep-seated cultural norms, which the SCT programme has not adequately addressed. This reflects systemic neglect, as noted by Chiwele & Kaputo (2010), and underscores the need for parallel social awareness campaigns. Without efforts to challenge discriminatory beliefs, families may continue to opt out of available programmes due to fear of judgment and social isolation.

Moreover, disparities in payment amounts, inconsistent delivery, and exclusion of remote communities expose weaknesses in programme management and equity. These inefficiencies, as documented in Banks et al. (2019) and Soko (2022), diminish trust in the programme and reduce its intended impact. Uniform delivery standards and transparent beneficiary communication are essential to maintain the integrity and effectiveness of SCT schemes, particularly when targeting highly vulnerable populations.

The study's results also reinforce the importance of disability-inclusive practices in programme implementation. The lack of sign language interpreters, inconsistent communication of eligibility, and failure to engage directly with learners reflect a broader issue of inaccessible public services (Banks et al., 2019). For learners with disabilities to benefit equitably, SCT design and delivery must integrate inclusive communication strategies and provide training for frontline officers.

This discussion further aligns with Bronfenbrenner's ecological systems theory, which emphasizes the interconnectedness of micro-, meso-, exo and macro-systems in a child's development. The SCT's inability to respond adequately to both immediate and structural needs illustrates a disconnect between social policy and the lived experiences of children with disabilities (Muzata, 2019). For SCT to contribute meaningfully to educational equity, all levels of the ecological system—from household to government—must engage collaboratively and responsively.

In addition, the findings highlight the need for a multi-stakeholder approach in addressing systemic barriers. Teachers, community leaders, schools, and social welfare officers must work in coordination to streamline recruitment, provide accurate information, and follow up with families of children with special education needs. As demonstrated in the data, the absence of coordinated stakeholder involvement leads to fragmentation in service delivery and reinforces inequality in access.

Finally, the study underscores the urgency of rethinking SCT not only as a cash disbursement programme but as part of a broader social protection system. Complementary services such as disability assessment, educational support, assistive devices, and psychosocial counselling are necessary to address the multidimensional needs of children with disabilities. Integrating SCT into a larger ecosystem of inclusive education

and social welfare will ensure that no child is left behind—a principle echoed in both national and global development frameworks.

Despite the valuable insights generated by this study, several limitations must be acknowledged. First, the study was geographically limited to Kalumbila District, which may not fully represent the experiences of SCT beneficiaries in other regions of Zambia, particularly in urban or peri-urban settings. Second, the qualitative design, while rich in detail, does not allow for generalization of findings to the national population. Additionally, the perspectives of policymakers at the national level were not included, which may have provided a broader understanding of systemic challenges.

Future research should consider employing mixed methods to capture both qualitative and quantitative dimensions of SCT impact across multiple districts. Longitudinal studies are also needed to assess the long-term educational outcomes for children with disabilities who benefit from SCT. Further investigation is recommended into how complementary services—such as assistive technologies, inclusive school infrastructure, and disability-sensitive training for social workers—can be integrated into the SCT framework to enhance its effectiveness and inclusivity.

CONCLUSION

This study concludes that while the Social Cash Transfer (SCT) programme provides meaningful support to learners with disabilities in rural Zambia, significant gaps remain in outreach, inclusivity, and program delivery, particularly in marginalized communities like Kalumbila District. The findings highlight the need for improved communication, stakeholder coordination, and integration of complementary services to address the multidimensional challenges faced by children with special education needs. Although the study offers valuable insights, its geographic and methodological limitations restrict generalizability, and the absence of national-level policy perspectives is noted. Future research should adopt mixed-methods and longitudinal approaches across diverse regions to evaluate the long-term impact of SCT and explore strategies for embedding disability-inclusive practices within broader social protection systems.

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KKM: Writing - Review & Editing, Formal analysis, and Methodology;
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