

From Promise to Practice:

Analyzing CRPD Compliance of Nepal's Federal Budgets

2025



**Disability
Rights Fund**

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KOSHISH

Acronyms

CRPD	Convention on the Rights of Persons with Disabilities
FY	Fiscal Year
MoE	Ministry of Education, Science and Technology
MoHP	Ministry of Health and Population
MoWCSC	Ministry of Women, Children and Senior Citizen
NPC	National Planning Commission
NPR	Nepalese Rupees
OPDs	Organizations of Persons with Disabilities
UNCRPD	United Nations Convention on the Rights of Persons with Disabilities

Acknowledgement

KOSHISH is an Organization of Persons with Disabilities (OPD) established in 2008 in Nepal. It works through advocacy and lobbying to promote psychosocial well-being by strengthening community support systems and enabling a rights-based legal framework for persons with psychosocial disabilities. Guided by the motto *“Nothing About Us Without Us,”* KOSHISH promotes self-advocacy and, since its establishment, has provided peer support and community-based assistance to ensure the meaningful inclusion and participation of persons with psychosocial disabilities in society, in line with the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD).

The full and effective implementation of the UNCRPD depends on the adequate allocation and effective utilization of disability-responsive budgets. While the primary obligation to ensure such implementation lies with the State, the constitutional and legal commitments of Nepal necessitate greater focus on disability-inclusive budgeting and accountability mechanisms.

In this context, KOSHISH conducted an analysis of CRPD compliance of Nepal’s federal budgets for Fiscal Years 2079/80 to 2082/83. This study maps existing financial allocations for persons with disabilities, assesses their compliance with the UNCRPD, identifies key gaps, and provides evidence-based policy and budgetary recommendations to strengthen disability-responsive public financing in Nepal.

KOSHISH believes that this report will serve as a valuable evidence base for Organizations of Persons with Disabilities, disability rights advocates, government institutions, researchers, academic bodies, civil society organizations, human rights institutions, and national and international development partners.

We sincerely acknowledge the invaluable contribution of Mr. Sanjaya Raj Neupane, whose expertise and analytical insight were instrumental in shaping this study. We are equally grateful to Mr. Daniel Mont, Co- Founder/ CEO and Ms. Meenakshi Balasubramanian, Senior Associate from the Center for Inclusive Policy, for their technical mentoring and guidance during the finalization of the report. Our sincere appreciation also goes to the Follow-up Working Committee on Budget Advocacy for their continuous engagement and support throughout the process.

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Finally, we extend our sincere appreciation to relevant government stakeholders for their cooperation and support, particularly in providing access to necessary documents and information. We are confident that this knowledge product will contribute meaningfully to Nepal’s disability rights movement and to the advancement of CRPD-compliant budgeting practices.

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Executive Summary

A Decade of Disconnect: Analyzing Nepal's Disability Budgets (2019-2024)

This report provides an analysis of Nepal's federal budgets through the lens of the UN Convention on the Rights of Persons with Disabilities (CRPD). The findings indicate a significant and systemic misalignment between policy commitments and financial allocations. This disconnect poses a challenge to the realization of rights for an estimated four million Nepalis with disabilities. The analysis identifies three core systemic challenges: a Participation Gap, an Accountability Gap, and a Policy-Budget Misalignment.

KEY FINDINGS: A Financial Structure at Odds with Rights-Based Goals

- **A Social Protection Focus Over Empowerment:** Over 90% of identified disability-specific spending is allocated to social protection transfers, while investments in empowerment initiatives—such as inclusive education, accessibility, and community participation—represent a minor share. Total disability-specific spending constitutes less than 0.35% of the national budget.
- **The Participation Gap:** The budget formulation process shows limited evidence of systematic and meaningful consultation with Organizations of Persons with Disabilities (OPDs), presenting a challenge to fulfilling CRPD Articles 4(3) and 33(3).
- **The Accountability Gap:** Allocations for monitoring and evaluation are minimal (consistently below 1.5% of relevant ministry budgets), creating difficulties in assessing the impact or effectiveness of programs and challenging compliance with CRPD Article 31.
- **The Policy-Budget Misalignment:** Financial allocations in several key areas are not aligned with policy goals. This includes funding for segregated institutions despite policy commitments to community inclusion, and high volatility in programmatic funding (e.g., a 97% year-on-year drop for accessible learning materials) that undermines strategic implementation.

KEY CONCLUSION

The current structure of Nepal's budget presents a significant obstacle to achieving its inclusive development objectives. The financial allocations predominantly support a model of segregation and direct transfers, rather than the inclusion and empowerment envisioned by national policies and the CRPD. Addressing this misalignment is a critical governance priority.

RECOMMENDATIONS FOR A CRPD-COMPLIANT BUDGETING FRAMEWORK

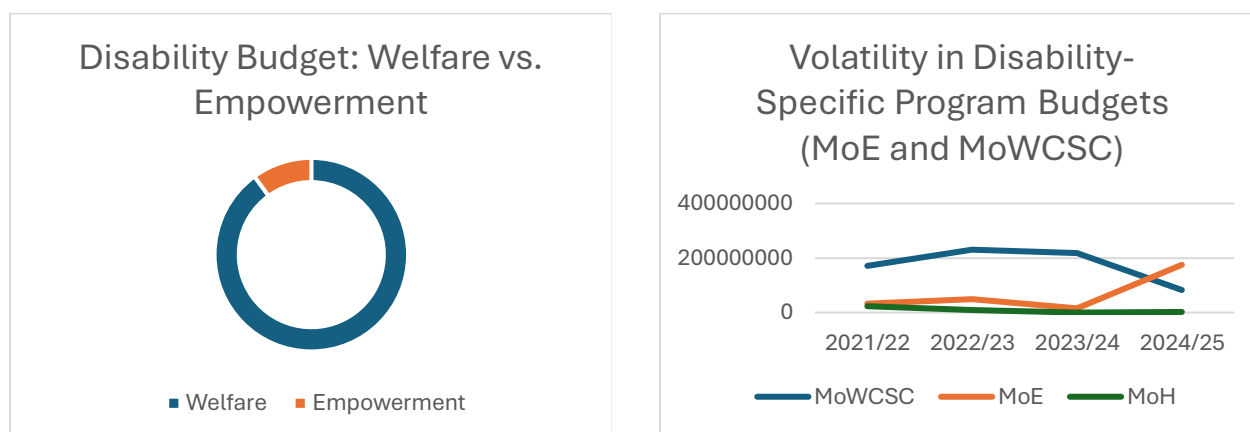
To better align public financial management with Nepal's rights-based commitments, the following actions are proposed:

- 1 **Close the Participation Gap: Institutionalize OPD Engagement**
 - **Formalize OPD Involvement:** Integrate mandatory, funded participation of OPDs into all stages of the budget cycle, from pre-budget consultations to performance monitoring.
 - **Decentralize Consultations:** Ensure accessible and inclusive budget consultation processes at the local level to capture the diverse needs of persons with disabilities.
- 2 **Solve the Accountability Gap: Build a Transparent, Data-Driven System**

- **Implement Disability Budget Codes:** The Ministry of Finance should enforce the use of standardized budget codes to track disability-related expenditures across all government entities.
 - **Publish a CRPD Budget Statement:** Introduce an annual statement that links disability allocations to specific CRPD articles and policy targets, providing a public rationale for funding levels.
 - **Fund Robust Monitoring:** Earmark a minimum of 3-5% of program budgets for monitoring and evaluation that is co-designed and implemented with OPDs.
- 3 **Bridge the Policy-Budget Misalignment: Align Funding with Rights**
- **Shift Resources from Segregation to Inclusion:** Develop a strategic plan to reallocate resources from segregated institutions to the development of national community-based support services and inclusive schools.
 - **Ensure Funding Stability:** Establish multi-year funding frameworks for core inclusion initiatives to end the volatility that disrupts long-term planning.
 - **Prioritize Targeted Interventions:** Direct investments toward the most excluded groups, including women, children, and persons with psychosocial or intellectual disabilities.

Transforming Nepal's budgetary approach is both a legal obligation under the CRPD and a strategic imperative for equitable development. The evidence presented in this report provides a clear basis for decisive action.

QUICK DATA SNAPSHOT



CHAPTER 1 INTRODUCTION

1.1 Setting the Scene: The Data Disparity and the Need for Inclusion

According to Nepal's 2021 National Census, 2.25% of the population, or approximately 662,000 people, live with a disability. However, this figure is widely contested by organizations of persons with disabilities (OPDs), who argue that methodological limitations lead to a significant undercount, effectively rendering a substantial portion of the population invisible in national planning. This data disparity underscores a fundamental challenge: if the state cannot accurately account for its citizens with disabilities, how can it effectively budget for their rights and inclusion? This report analyzes Nepal's federal budgets through the lens of the Convention on the Rights of Persons with Disabilities (CRPD) to assess whether financial commitments match the scale of need and the principles of participation and inclusion."

1.2 Nepal's CRPD Commitments: From Ratification to Implementation

Nepal demonstrated its commitment to the rights of persons with disabilities by signing the CRPD on December 27, 2009, and formally ratifying it on March 7, 2010, without any reservations. The CRPD, adopted in 2006, establishes a comprehensive framework to "promote, protect and ensure the full and equal enjoyment of all human rights and fundamental freedoms by all persons with disabilities." As a State Party, Nepal is obligated to translate these principles into reality through systematic policies and reliable financing, moving beyond ad-hoc initiatives.

1.3 The Policy-Budget Nexus: The Core of CRPD Compliance

True CRPD compliance requires more than just allocating funds to disability-specific programs. It necessitates that all public spending is both empowering and inclusive. This involves a dual approach:

Disability-Specific Spending: Targeted investments, such as provision of assistive devices or community-based psychosocial support, that address specific barriers faced by persons with disabilities.

Mainstream Inclusion: Ensuring that general expenditures in sectors like health, education, and transport are universally accessible, affordable, and non-discriminatory, fulfilling the CRPD's mandate for full social and community inclusion.

While all 50 articles of the CRPD are integral, this analysis focuses on Articles 4(3) and 33(3), which are the engine for effective implementation. These articles operationalize the core principle of "Nothing about us, without us" by mandating that States Parties must closely consult with and actively involve persons with disabilities through their representative organizations (OPDs) in the development, implementation, and monitoring of policies and budgets. Article 4(3) establishes this obligation in policymaking, while Article 33(3) ensures their full participation in monitoring progress. This study applies this participatory framework to assess Nepal's budgetary practices.

1.4 The Accountability Gap: Persistent Challenges and the Need for Evidence

The potential underestimation of the disability population compounds the accountability gaps already identified by international bodies. The UN CRPD Committee's 2018 Concluding Observations highlighted critical shortcomings, including inadequate funding for empowerment, awareness-raising, and accessibility. Addressing these gaps requires a responsive government backed by authentic

evidence. However, research in Nepal's disability sector remains limited, and the official disability prevalence rate of 2.25% (Census 2021) is contested by the disability sector due to methodological concerns, potentially leading to the underestimation of needs and the misclassification of persons with disabilities as a minority.

Nepal's national development plans, including the 15th and current 16th Periodic Plans, reflect commitments to disability inclusion. However, as this report will demonstrate, a significant disconnect persists between these policy promises and the financial allocations required to realize them. This analysis, "From Promise to Practice," aims to bridge this evidence gap by evaluating the CRPD compliance of Nepal's federal budgets from FY 2079/80 to 2082/83, providing a basis for accountable and inclusive budgeting.

1.5 Federal Context: Opportunities and Challenges

Nepal's transition to a federal system in 2015 presented a dual landscape of opportunities and challenges for realizing the rights of persons with disabilities. This new structure offers a potential pathway for more responsive and localized implementation of the CRPD.

1.5.1 Opportunities

- **Subsidiarity and Responsiveness:** Federalism allows provincial and local governments to develop budgets and programs that are more attuned to the specific needs and contexts of persons with disabilities in their jurisdictions.
- **Increased Points of Engagement:** OPDs now have multiple tiers of government (federal, provincial, local) to engage with, potentially increasing their influence over planning and budgeting processes as mandated by CRPD Articles 4(3) and 33(3).
- **Innovative Practices:** Local governments can act as laboratories for innovation, piloting inclusive programs that can be scaled up nationally.

1.5.2 Challenges

- **Coordination Gaps:** A lack of clear coordination mechanisms between federal, provincial, and local governments can lead to fragmented services, duplication of efforts, and critical gaps in service delivery.
- **Capacity Constraints:** Provincial and local governments often lack the technical capacity and awareness to design, budget for, and implement CRPD-compliant, inclusive programs.
- **Unclear Mandates:** The delineation of responsibilities for disability inclusion across the three tiers of government remains ambiguous, risking that crucial obligations may be overlooked or underfunded at each level.

1.6 Objectives, Methodology, Data Sources, and Limitations

1.6.1 Objectives

The analysis of the federal budgets (Fiscal Years 2079/80 to 2082/83) aims to:

- 1 Map the current financial allocations for persons with disabilities,
- 2 Evaluate their compliance with the CRPD
- 3 Identify gaps and provide evidence-based policy and budgetary recommendations

1.6.2 Methodology

This study employed a mixed-methods approach, combining quantitative budget analysis with qualitative insights to ensure a comprehensive assessment.

Analytical Framework

The analysis is guided by a framework derived from the CRPD, using a detailed checklist (see Annex) to evaluate budgets against criteria such as:

- Meaningful participation of OPDs in planning and monitoring.
- Non-discrimination and equality, addressing multiple and intersecting forms of discrimination, including those based on **gender, age, disability type, and other statuses** as recognized in the CRPD.
- Alignment with specific CRPD articles (e.g., Article 19: Living independently and being included in the community; Article 24: Inclusive education).
- Transparency and accessibility of budget information.

Data Collection and Analysis

Secondary Data Review: We conducted a desktop review of published federal budget documents from the Ministry of Finance, Ministry of Women, Children, and Senior Citizens (MoWCSC), and Ministry of Education (MoE). This included program-level allocations, budget speeches, annual reports, and relevant policy documents (e.g., Rights of Persons with Disabilities Act 2017, National Policy on Persons with Disabilities 2080).

Primary Data Collection: To triangulate findings and add depth, we conducted Key Informant Interviews (KIIs): Semi-structured interviews were held with officials from selected government departments responsible for disability-related budget implementation and monitoring. These interviews helped clarify findings from the document review where disability-disaggregated data was lacking.

1.6.3 Data Sources

The analysis relied on the following sources:

- 1 Official Budget Data: Program-level budget data from the MoWCSC and MoE for FY 2079/80 to 2082/83 (2022/23 – 2025/26).
- 2 Policy Documents: National laws, policies, and plans related to disability and inclusion.
- 3 Budget speeches and related government publications.
- 4 Primary Data: transcripts and notes from KIIs.

1.6.4 Scope and Limitations

This study focuses primarily on the federal-level budgets of the MoWCSC and MoE. It does not include a detailed analysis of provincial or local government budgets, which is a critical area for future research. Furthermore, the analysis of budget execution and outcomes was limited due to the lack of publicly available expenditure and performance data. This focus on financial inputs rather than results is a significant limitation, which itself underscores a key finding: the need for greater budget transparency and disability-disaggregated tracking of expenditures and outcomes.

CHAPTER 2 THE MACRO-FISCAL PICTURE: NEPAL'S INVESTMENT IN DISABILITY INCLUSION

2.1 Introduction: The Budget as a Tool for Rights Realization

Nepal's federal system centralizes resource mobilization, with the federal government allocating funds to provincial and local levels through grants and revenue transfers. The annual budget, shaped by the government's policy address and budget speech, is the primary instrument for translating national priorities into financial commitments. From a CRPD perspective, the budget is not merely an accounting document but a fundamental tool for fulfilling human rights obligations. This chapter establishes a baseline by analyzing the scale, trends, and composition of Nepal's budgetary allocations for persons with disabilities, assessing whether the financial commitments match the scale of need and the principles of the CRPD.

2.2 The National Budget Formulation Process: Entry Points for Inclusion

The annual budget cycle, spanning January to July, follows a structured process led by the Ministry of Finance (MoF) and the National Planning Commission (NPC). This process, summarized below, presents critical opportunities for embedding disability inclusion.

Budget Preparation Flow

- 1 Budget forecasting and preparation of medium-term expenditure framework
- 2 Budget guideline and ceiling preparation and forwarded to each line ministries
- 3 Ministry and defined institutions develop budget
- 4 Ministry wise budget finalization
- 5 Presenting principles and priority in parliament
- 6 Presenting appropriation bill in joint parliament

While snipping down the process –

- **Forecasting and Ceiling Setting (Jan-Feb):** The MoF and NPC forecast revenues and set expenditure ceilings for line ministries. This is the first and most crucial point where **OPDs should be aware of the process and can advocate** to influence the overall priority given to disability inclusion. Without a supportive ceiling, ministries are constrained from proposing ambitious programs.
- **Ministry Program Formulation (Mar-Apr):** Line ministries develop detailed programs and budgets within their ceilings. This is where consultation with OPDs, as mandated by CRPD Articles 4(3) and 33(3), is essential to ensure programs are designed to be inclusive and responsive to actual needs. For better incorporation of needs of persons with disabilities – from ward or community level, the needs and demand should collect, accumulate before taking decision.
- **Consolidation and Parliamentary Approval (May-July):** The MoF consolidates submissions, and the budget is presented to Parliament for debate and approval. Parliamentarians, including those with disabilities, can use this stage to scrutinize allocations and advocate for stronger compliance.

This process underscores that disability-responsive budgeting is not an add-on but must be integrated at every stage, from initial planning to final approval.

2.3 Overall Trends: Minimal Allocations in National Context

Nepal's ratification of the CRPD and subsequent enactment of the Rights of Persons with Disabilities Act (2017) established a robust policy framework for inclusion. However, the implementation of these policies is heavily dependent on budgetary allocation. The available data indicates a significant gap between the policy frameworks and the financial resources committed to their realization.

Table 1: Federal Disability-Specific Allocations in Context (2021/22 - 2025/26) (NRs. Billion)

Fiscal Year	GDP	Total Budget	Disability-Specific Budget	% of Total Budget	% of GDP
2021/22	3,940	1,656	1.73	0.10%	0.04%
2022/23	4,461	1,724	2.30	0.13%	0.05%
2023/24	5,377	1,793	3.61	0.20%	0.07%
2024/25	5,360	1,751	5.21	0.30%	0.10%
2025/26	5,838	1,860	6.49	0.35%	0.11%

Source: Ministry of Finance Red Books, Various Years.

Analysis of Table 1

- **Minimal Fiscal Priority:** Disability-specific allocations have seen a nominal increase over five years. However, they constitute a small fraction of public expenditure, remaining below 0.35% of the total national budget and 0.11% of GDP. This proportion suggests that disability inclusion is not yet an integrated priority within national fiscal planning.
- **Inadequate Per-Capita Funding:** Based on the official 2021 Census count of 654,782 persons with disabilities, the 2023/24 per-person allocation was approximately NPR 7,870. If analyzed against global prevalence estimates of 15% (over 4 million Nepalis), the effective per-person allocation would be approximately NPR 1,330 annually. This level of funding is unlikely to cover the additional costs of living with a disability or support meaningful empowerment and inclusion programs.

2.4 A Closer Look: Composition and Silos of Disability Spending

To understand the nature of Nepal's investment, it is essential to examine the composition of these limited allocations. Spending is heavily concentrated in a few areas, reflecting a traditional, protectionist approach rather than the transformative human rights model mandated by the CRPD.

Table 2: Composition of Disability-Specific Funding (2022/23 - 2025/26) (NPR)

Budget Head	2022_23	2023_24	2024_25	2025_26
A. Programmatic Budgets				
MoWCSC	170,424,000	230,543,000	218,750,000	82,636,000
MoE	31,973,000	49,440,000	15,415,000	175,166,000
MoH	23,300,000	8450,000	0	2940,000
Sub-total A	225,697,000	288,433,000	234,165,000	260,742,000
B. Social Protection				
Disability Allowance	~1,930,926,600	~3,137,272,200	~4,767,135,360	5,990,531,280
Insurance Premiums	~168,115,500	~189,318,150	~206,497,200	~238,556,500
Sub-total B	~2,099,042,100	~3,326,590,350	~4,973,632,560	~6,229,087,780

TOTAL (A+B)	~2,324,739,100	~3,895,006,350	~5,441,962,560	~6,747,631,780
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Source: Redbooks of different ministries of Nepal. Figures are approximations where indicated.

Analysis of Table 2

- **Composition of Disability Spending:** The structure of disability-related expenditure is heavily weighted towards social protection. Disability-related expenditure is dominated by social protection. The disability allowance has consistently represented over 90% of the total allocation across the four-year period, a proportion that exceeds 96% in the 2025/26 budget. Consequently, programmatic budgets for empowerment, accessibility, and inclusion initiatives represent a minor component of overall financial commitments.
- **Volatility of Programmatic Budgets:** Programmatic funding displays significant year-on-year volatility across key ministries.
 - The Ministry of Women, Children and Senior Citizens (MoWCSC) saw an increase to NPR 230 million in 2023/24, followed by a decrease to NPR 218 million in 2024/25 and a projected sharp decline to NPR 82 million in 2025/26.
 - The Ministry of Education (MoE) experienced a sharp reduction to NPR 15 million in 2024/25, followed by a projected increase to NPR 175 million in 2025/26.
 - The Ministry of Health and Population (MoH) shows a consistent decline from NPR 23 million in 2022/23 to zero allocation in 2024/25, with only a minimal projected allocation for 2025/26.

This pattern of fluctuating allocations challenges the continuity and predictability of essential programs.

- **Concentration of Programmatic Funding:** Programmatic funding is highly concentrated within a narrow set of ministries. Over the four-year period, the MoWCSC and MoE collectively account for the vast majority of this funding. The marginal and declining allocations to the Ministry of Health and the absence of significant programmatic budgets in other sectors indicate that disability inclusion is not yet mainstreamed across government portfolios, as envisioned by the CRPD.
- **Fiscal Support for Participatory Processes:** A review of the programmatic budgets reveals no dedicated, stable line items for supporting Organizations of Persons with Disabilities (OPDs) in planning or monitoring activities. The absence of such allocations indicates a fiscal structure that does not systematically resource the participation mandates under CRPD Articles 4(3) and 33(3). This gap poses a challenge to ensuring that budget priorities reflect the expressed needs of persons with disabilities across the country.

This analysis has focused on explicitly tagged disability allocations within the budgets of three key federal ministries — Women, Children and Senior Citizens; Education; and Health. It does not examine mainstream development budgets — such as infrastructure, transportation, or information technology — where accessibility measures may be funded but not labeled as "disability spending." Such analysis remains beyond the scope of this study.

A CRPD-compliant budget system would ensure that all public spending — not only disability-tagged allocations — is planned, executed, and monitored with the principles of accessibility and inclusion in mind. Strengthening the capacity of Organizations of Persons with Disabilities to scrutinize mainstream budgets against national accessibility standards would advance the participatory principles enshrined in CRPD Articles 4(3) and 33(3), and offer a pathway toward more inclusive public finance in Nepal.

2.5 Disability within the Social Protection Framework: Allowances are not Empowerment

Social protection, primarily the disability allowance, constitutes the most significant direct financial transfer to persons with disabilities. The trends, however, reveal a system focused on subsistence rather than the empowerment envisioned by the CRPD.

Table 3: Trends in Disability Allowances (2019/20 - 2023/24 in NRs)

Fiscal Year	Number of Beneficiaries	Total Amount	Annual Allowance Rate by types	
			Profound	Severe
2019/20	132,142	1.59 billion	19,200	9,000
2020/21	160,110	1.93 billion	19,200	9,000
2021/22	180,303	3.14 billion	30,000	12,000
2022/23	196,664	4.77 billion	36,000	19,200
2023/24	213,910	5.99 billion	47,880	25,488

Source: Ministry of Home Affairs.

Analysis of Table 3

- **Coverage Gap:** The number of allowance recipients (213,910 in 2023/24) represents a fraction of the official census count of 654,782 persons with disabilities – a figure already suspected to be a significant undercount. This gap suggests that even a large portion of the registered population does not receive the benefit, pointing to potential barriers in the registration and eligibility verification processes.
- **Subsistence-Level Support:** Analysis shows that the allowance amount, despite increases, is lower than the national poverty line. When measured against the extra costs typically associated with disability, the transfer value falls short of the standard of adequate living and social protection outlined in CRPD Article 28. Moreover, while the national poverty line was revised upward to Rs 72,908 per person per year in January 2026, the disability allowance rates have not been correspondingly revised — widening the gap between the transfer value and the cost of an adequate standard of living.¹
- **Limited Scope:** The disability allowance functions as a direct cash transfer. Budget analysis shows correspondingly low investment in complementary programs—such as supported employment, independent living support, or community-based services—which are identified in the CRPD as essential for empowerment and inclusion.

¹ Research conducted in Chitwan in 2018 found that direct medical costs alone for persons with spinal cord injury and intellectual disabilities averaged Rs. 6,683 over a six-month period (Poudel & Baral, 2018). These costs do not include other disability-related expenses such as assistive devices, transportation, personal assistance, or lost income. While no comparable research exists for psychosocial disabilities, their support needs — and associated costs — are substantial and recurring. Persons with psychosocial disabilities typically require a combination of ongoing medication and regular psychotherapy - which remain unaffordable for the majority of Nepalese citizens. Meanwhile, the national poverty line was revised in January 2026 to Rs 72,908 per person per year (approximately Rs 6,076 per month). The disability allowance rates shown in Table 3 (2023/24) have not been revised to reflect this updated poverty threshold. Even the profound disability allowance (Rs 47,880/year) falls 34% below the poverty line, and the severe allowance (Rs 25,488/year) is around one-third — meaning the transfer value does not meet the standard of adequate living under CRPD Article 28, nor does it cover documented disability-related costs.

2.6 A Critical Data Limitation: The Lack of Expenditure Transparency

This analysis focuses specifically on federal-level budgeting for CRPD compliant budget practices, assessing the allocations and expenditures of three key line ministries: the MoWCSC, MoE, and MoH. It is important to note that a full assessment of Nepal's commitment would require parallel analysis at the provincial and municipal levels, which was beyond the scope of this study. A fundamental challenge encountered within this federal scope was the inability to access executed expenditure data.

Despite formal written requests submitted and couple of follow-ups to these ministries for their actual spending figures, only the Ministry of Health and Population provided complete information. The lack of transparency from the other ministries makes it impossible to determine whether the budgeted amounts detailed in the preceding sections were fully spent, how efficiently the resources were used, or what outcomes were achieved.

This data gap is, in itself, a significant finding and a symptom of a broader accountability failure. The inability to track public expenditure against policy goals contravenes the principles of transparent governance and presents a direct challenge to fulfilling the data collection and monitoring requirements of CRPD Article 31.

2.7 Conclusion: A Baseline of Insufficiency and a Path to the Ministry Analysis

The analysis of Nepal's disability-specific budgets reveals a consistent and distinct pattern of fiscal planning. The financial approach is characterized by a predominant reliance on a single social protection instrument—the disability allowance—which constitutes the overwhelming share of allocated resources. Corresponding investments in programmatic initiatives for empowerment, accessibility, and inclusion represent a minor component of total expenditure.

This budgetary structure is further defined by its volatility and concentration. Programmatic allocations to key ministries, such as the MoWCSC, MoE, and MoH, demonstrate significant year-on-year fluctuations, and are primarily housed within a narrow set of sectors. Furthermore, the review of budget line items finds an absence of dedicated funding to support the participation of Organizations of Persons with Disabilities in planning and monitoring processes.

Collectively, these patterns—the dominance of cash transfers, the instability of programmatic funding, and the lack of fiscal support for participatory mechanisms—point to a significant gap between the state's policy commitments under the CRPD and its corresponding financial investments. The following chapter will assess whether the design and implementation of these limited allocations align with the core principles of the CRPD, with a specific examination of the programs and budgets of the MoWCSC and the Ministry of Education.

CHAPTER 3 MINISTRY-LEVEL ANALYSIS: TRANSLATING POLICY INTO FISCAL REALITY

3.1 The MoWCSC Budget: A Case Study in Contradiction

3.1.1 The Core Tension: Institutionalization vs. Inclusion in Fiscal Planning

A ministry's budget is a concrete expression of its operational priorities and implementation capacity. The budget of the Ministry of Women, Children, and Senior Citizens (MoWCSC) provides a clear case study for examining the alignment between policy goals and financial commitments. While national policy frameworks champion deinstitutionalization and community inclusion, the MoWCSC's financial allocations reveal a continued reliance on funding segregated residential care models. This section analyzes the extent to which the ministry's budget is structured to transition from institutional care to the rights-based, inclusive approaches mandated by the CRPD and Nepal's domestic laws.

Overall Assessment

The analysis of the MoWCSC's budget reveals a clear structural disconnect with the strategic objectives of Nepal's Child, Disability, and Gender Equality Policies. The allocation of financial resources shows a predominant investment in institutional care models. Correspondingly, allocations for community-based inclusion initiatives and targeted support for the most vulnerable groups constitute a minimal share of the total budget. This pattern of expenditure indicates that the current fiscal framework is not yet aligned to support a systematic transition from institutionalization to the community-based inclusion envisioned by national policy.

The 2025-26 Puzzle: A Drastic Shift Raises Questions

The FY 2025-26 budget presents a complex and significant shift in the MoWCSC's approach. Direct funding for institutional care was reduced to NPR 850,000, down from NPR 169.1 million, while the ministry's overall disability budget was cut by 62%. This concurrent reduction creates an ambiguous fiscal picture: the decline in institutional spending aligns with CRPD Article 19, but the overall budget decrease, without evidence of corresponding investments at other levels of government, risks creating a support gap.

This scenario presents two competing interpretations. The first is that it signals a genuine, if challenging, transition towards a community-based inclusion model, potentially through a mandate shift to provincial and local governments. The second is that it indicates a withdrawal of federal leadership and funding. The critical uncertainty lies in whether this decentralization is being supported with the necessary fiscal transfers, capacity building, and guidelines to ensure that the rights of persons with disabilities are upheld, or if it represents a policy vacuum.

Table 4: The Core Policy Conflict: Inclusion vs. Segregation (NPR '000)²

Theme	2022_23	2023_24	2024_25	2025_26
Total Funding by MoWCSC	155313	230543	218750	82636
Segregation (Institutionalization)	88000	69330	169100	850
Inclusion (Community Empowerment)	0	1326	0	4675

² Note: Segregation includes funding for constructions of safe houses, "rehabilitation" centers, disability villages, Manav Sewa Aashram, and other long-term residential institutions.

Analysis: Policy Gaps and Budgetary Shifts

- **A Legacy of Segregated Funding:** The historical budget data for the MoWCSC reveals a consistent pattern of allocating the majority of its resources to institutional care. This expenditure model is not aligned with the community inclusion mandate of CRPD Article 19. In contrast, funding for community-based empowerment programs has been limited and subject to significant year-on-year variation.
- **The Ambiguity of the FY 2025-26 Budget:** The recent budgetary shift presents a complex picture. The near-elimination of direct institutional funding (to NPR 850,000) coincides with a 62% reduction in the ministry's total disability budget. The concurrent minimal increase in the community inclusion budget (to NPR 4.675 million) suggests that the reduction in institutional spending does not correspond to a strategic federal investment in its community-based alternative. This pattern makes it difficult to interpret the change as a managed devolution of services (Scenario 1) and raises questions about the state's strategy for fulfilling its rights-based obligations.
- **A Governance Gap in Participation:** The process for this significant budgetary change was not documented in public records, and there is no evidence of consultation with Organizations of Persons with Disabilities (OPDs). This operational shortfall is underpinned by a policy gap: neither the 16th Periodic Plan nor the FY 2025/26 Government Plan and Policy include a mandatory framework for OPD engagement in planning and monitoring. This absence creates a disconnect from the requirements of CRPD Articles 4(3) and 33(3).
- **The Accountability Vacuum:** The difficulty in assessing the intent behind the budget cut points to a broader structural issue: the lack of a clear inter-governmental fiscal framework with measurable targets for disability inclusion. While the 16th Plan articulates a vision for inclusion, it does not establish specific, time-bound goals or a transparent mechanism for allocating resources across government tiers. In the absence of a published framework demonstrating how responsibilities and funds have been transferred to provincial governments, it is challenging to assess whether the federal budget cut represents a strategic devolution or a reduction in commitment. This lack of clarity complicates accountability and raises concerns about the consistent application of the principle of progressive realization.

3.1.2 Limited Targeted Investment for Women and Children with Disabilities

The MoWCSC's budget shows a limited allocation of resources specifically targeted toward women and children with disabilities. This pattern of funding presents a challenge to operationalizing the ministry's mandate and Nepal's policy commitments to intersectional equality, as the specific needs of these groups are not clearly reflected in dedicated budgetary lines.

Table 5: Targeted Investment for Women and Children (NPR '000)

Theme	2022_23	2023_24	2024_25	2025_26	4-Years Total
Women with Disabilities	1000	705	0	800	2,505
Children with Disabilities	0	4	0	600	604
Total	1000	709	0	1400	3,109

Source: Redbooks of MoWCSC

Analysis: Structural Gaps in Data and Targeted Investment

The data presented in Table 5 is revealing, though it likely represents only a partial picture of the need. Over a four-year period, identified budgetary allocations specifically targeted for women and children with disabilities total approximately NPR 3.1 million. This funding is characterized by its small scale and year-to-year volatility. The challenge of assessing impact is compounded by broader systemic issues in data collection and reporting.

A central finding of this analysis is the absence of disability mainstreaming within the ministry's core programmatic budgets. A more significant challenge for accountability is the lack of robust, publicly available data that is disaggregated by disability, age, and gender. This situation is exacerbated by the decentralization of data management across 753 local governments, where the absence of a standardized, centralized reporting system makes comprehensive compilation and detailed disaggregation a significant operational challenge. This gap in data availability creates difficulties in monitoring compliance with CRPD Article 31.

The zero allocation for women with disabilities in 2024-25 stands out as a significant anomaly. Without accompanying documentation or ministerial explanation, it is not possible to determine whether this reflects a genuine gap in funding, a reporting omission, or a reallocation of resources. This gap underscores the need for greater transparency in budget reporting.

While external evidence from sources like UNICEF and the 2021 Census indicates that registration gaps limit children with disabilities from accessing support, the MoWCSC's own reporting does not clarify the reach or outcomes of its interventions. This lack of transparent reporting limits public accountability. Consequently, the specific needs of these groups, such as accessible shelters for women with disabilities facing violence or inclusive early childhood development programs, are not visibly addressed through dedicated, scaled budgetary initiatives. The current fiscal and data structure does not systematically support the inclusion of these constituents, creating a risk that their specific needs will remain unaddressed.

Policy Link: Alignment with Mandates and Intersectional Outcomes

The documented patterns of budgeting and data management present a significant challenge to the implementation of Nepal's Gender Equality Policy and Child Policy. The current approach demonstrates a difficulty in operationalizing the specific measures required by CRPD Article 6 (Women with disabilities) and Article 7 (Children with disabilities) to ensure their full and equal enjoyment of rights.

The consequence of these fiscal and data patterns is the continued marginalization of women and children with disabilities. Without targeted budgetary allocations and robust, disaggregated data, these groups remain underrepresented in programmatic outreach and their specific needs are not visibly addressed. This situation creates a risk of intersectional discrimination and raises questions about the application of the principle of progressive realization (CRPD Article 4), as the current trajectory does not demonstrate measurable progress toward dismantling existing inequalities for these specific groups.

The Policy-Budget Disconnect for Women and Children

The analysis indicates a significant misalignment between policy commitments and their corresponding budgetary allocations. The provisions for women with disabilities within the National Gender Equality Policy are not supported by a clear funding strategy or measurable targets. Similarly, while the Child Policy (2023) outlines commitments to accessibility and inclusion, it lacks dedicated

budgetary lines and specific accountability mechanisms for their implementation. The development of both policies involved limited consultation with Organizations of Persons with Disabilities (OPDs), which presents a challenge to fulfilling the participation mandates of CRPD Articles 4(3) and 33(3).

Consequently, the limited budget allocations observed in the MoWCSC are a reflection of these broader policy frameworks. The ambitious goals stated in policy documents are undermined by the absence of dedicated funding and robust monitoring systems, resulting in a high risk that the specific needs of the most marginalized groups will remain unaddressed.

3.1.3 Budget Priorities for Disability by Type

An analysis of the MoWCSC's resource allocation across different disability types reveals a disproportionate distribution of funding. A significant portion of resources is directed toward a single, disease-specific program, while other disability groups — particularly those requiring community-based psychosocial support services — receive a comparatively small share of the budget. This distribution pattern does not appear to be guided by a transparent, rights-based needs assessment, representing a departure from the CRPD's framework which calls for the equitable realization of rights for all persons with disabilities.

Table 6: Budget Allocation by Disability Type (NPR '000)

Disability Type	2022_23	2023_24	2024_25	2025_26
Leprosy	8000	8000	8000	1000
Autism	2800	1300	0	2000
Physical	2000	1800	0	0
Blind	1500	1400	0	0
DeafBlind	1500	700	0	0
Hemophilia	1000	0	0	0
Dwarf	1000	0	0	0
Psychosocial	500	0	0	50
Deaf	0	1700	0	0
Speech	0	7	0	500

Source: Redbooks of MoWCSC (Programmatic Allocations).

Analysis: Disparities in Funding Allocation by Disability Type

Table 6 shows how programmatic budget allocations are distributed across different disability type over four fiscal years (2022/23 to 2025/26). The pattern reveals two clear characteristics: concentration and volatility.

One condition — Leprosy received NPR 25 million over four years. In contrast, most other categories received minimal or sporadic funding. Psychosocial disabilities, despite being widely recognized as involving high support needs, received just NPR 550,000 over the same four-year period – less than one year of leprosy funding. Several categories, including hemophilia, dwarfism, and deafblind, received funding in some years and nothing in others.

Interpreting these numbers requires care. Disability types do not always align with support needs – for example, autistic persons exist along a wide spectrum, and a person who is hard of hearing may require

less support than a person who is deaf. Ideally, budget analysis would examine spending relative to support needs and population size, but ministries could not provide such disaggregated data.

What the data does show is this: there is no visible, transparent rationale guiding these allocations. No published criteria explain why one condition receives sustained funding while others receive almost nothing. No evidence suggests that persons with disabilities were consulted in setting these priorities — a requirement under CRPD Article 4(3).

From a CRPD perspective, this raises fundamental questions across multiple articles:

- Article 5 (Equality and non-discrimination): The concentration of resources in one area, without justification, creates differential treatment that may not be compatible with the guarantee of equal rights for all persons with disabilities.
- Article 19 (Living independently and being included in the community): The minimal and volatile funding for psychosocial disabilities and other groups directly undermines the possibility of community-based support and inclusion.
- Article 9 (Accessibility): Without sustained programmatic funding, the infrastructure, services, and information necessary for accessibility cannot be developed or maintained.

The data alone cannot prove non-compliance. But it does establish a clear basis for further inquiry — and for demanding greater transparency, participation, and equity in how public resources are allocated to persons with disabilities.

3.1.4 Compliant Spending: Scale, Stability, and Strategic Coherence

A minor portion of the MoWCSC's budget is allocated to activities consistent with a rights-based approach under the CRPD. However, an analysis of these allocations reveals three defining characteristics: their small scale relative to total spending, significant year-on-year volatility, and a distribution across programs that lacks a clear, unifying strategy. The limited scale and instability of these compliant allocations challenge their potential to produce sustained outcomes and raise questions about their strategic priority within the ministry's overall approach.

Table 7: Compliant Investment in Rights & Empowerment (NPR '000)

Theme	2022_23	2023_24	2024_25	2025_26
Community Empowerment	0	24618	800	5175
Accessibility	20611	23830	9600	20190
Awareness	4700	5617	900	3300
Human Capital	3000	3210	3400	4300
Policy/System Development	2500	3000	1900	950

Source: Redbooks of MoWCSC (Programmatic Allocations).

Analysis: The Impact of Budgetary Volatility on Program Sustainability

The budget data indicates a pattern of significant year-to-year fluctuations in funding for compliant programs. This volatility challenges the ability of implementing partners, including Organizations of Persons with Disabilities (OPDs) and service providers, to engage in sustainable planning. For instance, the allocation for Community Empowerment dropped from NPR 24.6 million in 2022-23 to NPR 0.8 million in 2023-24, before increasing to NPR 5.2 million in 2024-25.

While the total compliant budget for 2024-25 shows a nominal increase from the previous year's low, it remains 45% lower than its peak in 2022-23 (NPR 33.9 million versus NPR 60.3 million). Furthermore, the scale of compliant spending has historically been overshadowed by allocations for institutional care. In 2023-24, for example, funding for institutional models (NPR 169.1 million) was approximately ten times greater than the total for all compliant activities (NPR 16.6 million).

This combination of unstable funding for rights-based programs and the concurrent funding of segregated services creates a contradictory fiscal environment. This pattern makes it difficult to demonstrate steady and deliberate advancement, which is a core aspect of the principle of progressive realization under CRPD Article 4. A claim of progress based on isolated budget lines is challenging to sustain when the overall financial framework continues to support systems that are incompatible with the core right to live independently and be included in the community (Article 19).

3.1.5 Conclusion: Systemic Misalignment with Mandate

The analysis of the MoWCSC's budgetary practices indicates a significant misalignment with its core mandate to uphold the rights of women, children, and senior citizens, particularly those with disabilities. The ministry's financial allocations have historically sustained a system of segregation, thereby creating a contradiction between its policy objectives and its fiscal operations.

A key finding is the direct funding of segregated institutions, including allocations designated for a "disability village" (NPR 11 million in 2021/22 and NPR 5 million in 2022/23). The subsequent removal of this explicit budget line in later years may indicate a responsiveness to advocacy from OPDs. However, this does not resolve the underlying structural commitment to institutional models, which stands in direct contradiction to the rights-based, community-living approach explicitly promoted by Nepal's National Disability Policy.

This legacy, combined with the persistent underfunding and extreme volatility of community-based programs, points to a fundamental policy-funding disconnect. Aligning the MoWCSC's budgets with the CRPD requires a strategic overhaul. This reform must address the current fiscal framework, which does not adequately support accountability mechanisms, as evidenced by the minimal budgeting for monitoring and the lack of dedicated funding for OPD participation, presenting challenges to fulfilling CRPD Articles 4(3) and 33(3).

3.2 Ministry of Education, Science and Technology (MoE): Promising Strategy, Volatile Execution

Overall Assessment

The Ministry of Education's (MoE) budget demonstrates a strategic orientation that is more closely aligned with the objectives of the CRPD and Nepal's Inclusive Education Policy than that of the MoWCSC. Its investments are directed toward systemic capacity-building initiatives, such as teacher training and the development of accessible learning materials.

However, the effectiveness of this strategy is challenged by significant volatility in year-to-year budget allocations. This fluctuation creates uncertainty and risks disrupting the continuity of essential programs, thereby presenting an obstacle to the steady and deliberate advancement required by the principle of progressive realization.

3.2.1 Investment in Accessible Learning Materials: Strategic Alignment and Funding Instability

The provision of education in accessible formats is a core obligation under the CRPD. The Ministry of Education's (MoE) investments in accessible learning materials are aligned with this strategic objective.

However, the execution of this strategy is marked by significant fluctuations in annual funding allocations. This volatility in budgeting presents a challenge to ensuring the consistent and reliable availability of these essential resources for students.

Table 8: Budget Allocation for Accessible Learning Materials (NPR '000)

Types of Disabilities	2022_23	2023_24	2024_25	2025_26
Blind	20536	625	7800	13000
Disability	0	0	400	1538
Deaf and Blind	0	0	215	0
Intellectual	0	0	500	0
Children with Autism	0	0	0	1000
Low-vision, Blind	0	0	0	700
Total	20536	625	8915	16238

Source: Redbooks of MoE

Analysis: Funding Volatility and Strategic Consistency

The budget data for accessible learning materials shows considerable variation across fiscal years. Allocation decreased from NPR 20.5 million in 2022/23 to NPR 625,000 in 2023/24, before a projected increase to NPR 16.2 million in 2025/26.

While the 2025/26 allocation indicates a substantial recovery from the previous year's low base, it remains below the 2022/23 peak. This pattern of significant year-to-year fluctuations complicates long-term planning, making it challenging for schools to ensure a consistent and reliable supply of accessible materials for students. Furthermore, the varying focus on different disability types in annual budgets suggests an approach that has not yet been consolidated into a comprehensive, multi-year strategy.

Policy Link: Sustained Investment as a Requirement for Inclusion

The types of investments in accessible learning materials are consistent with the obligations under CRPD Articles 9 (accessibility) and 24 (inclusive education). However, the historical volatility of these allocations presents a challenge for upholding the principle of progressive realization (Article 4), which requires steady advancement. The effective implementation of inclusive education requires a consistency in resource provision that is incompatible with unpredictable budget cycles.

For the increased allocation in 2025-26 to signify a lasting shift, it must be followed by a stable, multi-year funding commitment. Without such stability, the current funding patterns may result in the inconsistent implementation of inclusive education initiatives.

3.2.2 Investment in Teacher Development: A Notable Increase Requiring Consolidation

Investment in teacher training is widely recognized as a foundational component of inclusive education systems. The Ministry of Education's allocation for this purpose in FY 2025/26 (NPR 41.71 million) marks a significant departure from the pattern of the preceding three years. This allocation represents a substantial increase compared to the previous year's budget and provides an opportunity to assess the ministry's capacity to sustain this level of investment to achieve lasting systemic impact.

Table 9: Investment in Teacher Capacity Development (NPR '000)

Types of Disabilities	2022_23	2023_24	2024_25	2025_26
Intellectual	900	1000	0	23000
Disability (Not specific)	1835	5704	0	14582
Psychosocial	0	700	0	1000
Deaf	0	0	0	2242
Autism	900	0	0	886
Blind	0	671	0	0
Total	3635	8075	0	41710

Source: Redbooks of MoE (budget published by MoE)

Analysis: A Notable Increase and the Path to Systemic Impact

The historical budget data for teacher training shows periods of limited investment, including a zero allocation in 2024-25. The substantial increase for FY 2025/26 (NPR 41.71 million) therefore represents a significant shift in budgetary priority.

This increased investment is coupled with a broader strategic scope, now encompassing training for educators of Deaf and Hard of Hearing students. Whether this signifies a sustained scaling of ambition remains to be seen. To achieve systemic impact, this level of investment requires consolidation into a stable, multi-year strategy. Effective teacher professional development depends on continuity, and a single year of high funding, while notable, may be insufficient to build the long-term capacity needed after a period of limited investment. Furthermore, the absence of dedicated funding for Blind/Low Vision teachers in the 2025-26 budget, despite previous allocations, highlights an ongoing challenge in maintaining strategic consistency across all disability groups.

Policy Link: From Intermittent Initiatives to Systemic Change

This significant allocation strongly aligns with the best-practice approach mandated by CRPD Article 24 (Inclusive Education). However, the principle of progressive realization (Article 4) requires steady and continuous improvement. The critical test will be whether the MoE can maintain and strategically refine this level of investment in the coming years, supported by robust, disaggregated data to track whether increased expenditure translates into tangible improvements in enrollment, retention, and learning outcomes for children with disabilities. Without a multi-year commitment, this promising surge risks being a peak in a volatile cycle rather than the start of a sustained transformation needed to fulfill the long-term goals of the School Education Sector Plan (SESP).

3.2.3 Key Observations: Strategic Shifts with Significant Implementation Risks

The FY 2025/26 budget represents a major quantitative shift in the MoE's approach to inclusive education. While overall funding has increased substantially, the distribution and historical context of these allocations reveal strategic priorities accompanied by significant implementation risks.

Table 10: MoE Budget Allocation by Strategic Pillar (NPR '000)

Strategic Area	2022_23	2023_24	2024_25	2025_26
Teacher's Development	3635	8575	0	41710

Assessable Materials	20536	625	8915	16238
System Strengthening	6685	13063	1000	6857
Direct Student Support	617	677	0	31491
Monitoring and Research	500	0	5500	500
Reasonable accommodation	0	0	0	10000
Funding through Institutions	0	27000	0	68370
Total	31973	49940	15415	175166

Source: Redbooks and Budget Excel sheet of MoE Published in Ministry's site

3.2.4 Analysis: Expansion Amidst Systemic Implementation Risks

The 2024/25 budget indicates a significant scaling of investment in inclusive education, marked by several key developments:

- **Substantial Increases in Core Areas:** Allocations for Teacher Development and Direct Student Support have seen major increases, suggesting a focus on expanding access and building educator capacity.
- **Introduction of Rights-Based Programming:** The establishment of a Reasonable Accommodation program aligns with CRPD Article 5, though its implementation details are not specified in the budget.
- **Increased Institutional Grants:** Funding for institutions has also risen significantly.

However, this expansion is accompanied by several implementation risks that threaten its sustainability and impact:

- **Persistent Funding Volatility:** The sharp reduction in System Strengthening and the history of fluctuations in other key areas challenge long-term planning and contradict the principle of steady advancement required by CRPD Article 4. The minimal allocation for Monitoring and Evaluation (M&E) further limits the capacity to track the impact of these new investments.
- **Risk of a Project-Based Approach:** The pattern of large, single-year injections into various programs, without a visible multi-year framework, risks prioritizing short-term activity over the sustained, systemic capacity-building necessary for lasting inclusion.
- **Critical Gaps in Essential Support:** Despite overall growth, the allocation for Accessible Materials remains substantially below its previous peak. This creates a resource constraint that could undermine the effectiveness of efforts to bring more children into schools.

3.2.5 Insufficient Investment in Monitoring & Evaluation

Finding: Concurrent with large-scale program investments, funding for monitoring, evaluation, and research remains minimal and intermittent, with an annual allocation of only NPR 500,000. This represents a negligible proportion of the total disability-specific budget.

Policy Implication: An Accountability Deficit

This underinvestment presents a significant challenge to governance and accountability, creating difficulties in upholding CRPD Article 31 (Statistics and data collection). The current M&E capacity is insufficient to answer critical questions regarding:

- **Effectiveness:** Whether investments in teacher training and student support are translating into improved learning outcomes.

- **Efficiency:** Whether funds are reaching intended beneficiaries and programs are being implemented as designed.
- **Impact:** The overall effect on school enrollment, retention, and the quality of inclusion for students with disabilities.

Without a robust M&E system, the Ministry lacks the data necessary to guide evidence-based policymaking and to demonstrate measurable progress, thereby challenging the fulfillment of its obligations under the principle of progressive realization (CRPD Article 4).

3.2.6 Policy Vision vs. Budgetary Reality: A Fragmented Approach to a Systemic Goal

The School Education Sector Plan (SESP) 2079-2088 outlines a transformative vision for inclusive education. However, the federal budget demonstrates a fragmented approach to implementation, characterized by funding that is not structured to meet the scale, reliability, or equity required by the SESP's core commitments.

SESP Policy Commitment	Federal Budgetary Reality
Retrofitting 13,000 schools with accessible infrastructure.	No dedicated, scalable budget line for a national retrofitting program. Funding is fragmented into small, unpredictable allocations.
Nationwide coverage across 753 local governments.	No clear, ring-fenced funding mechanism to ensure equitable resource distribution, creating a risk of geographic disparities.
Scholarships for 45,116 students with disabilities.	While Direct Student Support has increased (NPR 31.5 million in FY 2025/26), it is a lump-sum allocation without a transparent formula linking it to the specific SESP target, complicating progress tracking.
Development and distribution of accessible learning materials.	Volatile and inconsistent funding (e.g., a significant drop in 2023-24), challenging the reliable supply required for continuous learning.
A mandatory 5% teacher reservation quota for persons with disabilities.	A new Reasonable Accommodation program (NPR 10 million) has been introduced, but no specific budget is allocated for the comprehensive support system (e.g., recruitment, workplace accommodations) needed to make the quota effective.
Investment in teacher training on inclusive pedagogy.	Fluctuating investment (e.g., zero allocation in 2024-25) that hinders the sustained, nationwide program required for systemic capacity building.

Analysis: Disconnect Between Systemic Planning and Project-Based Funding

The Ministry of Education's budget reflects strategic priorities that are broadly aligned with the SESP's goals. However, the modality of funding—characterized by volatile, project-specific allocations—differs from the SESP's vision of a coordinated, systemic transformation.

This disconnect is evidenced by a lack of synergy between key budget lines. For instance, a substantial one-year investment in Direct Student Support, aimed at increasing school enrollment, may be offset by concurrent reductions in System Strengthening and unstable funding for Accessible Materials and teacher training. This pattern of funding individual components in an isolated and unpredictable manner challenges the development of a coherent ecosystem, which requires synchronous investment in accessible infrastructure, trained teachers, reliable materials, and robust M&E.

Consequently, without a dedicated, multi-year financial plan explicitly linked to SESP milestones, there is a significant risk that the plan's strategic commitments will not be fully realized. This presents a

challenge to operationalizing the state's duty to ensure the progressive realization (CRPD Article 4) of the right to inclusive education.

3.2.7 Conclusion: Strategic Intent Constrained by Systemic Implementation Gaps

The Ministry of Education's budget demonstrates a strategically compliant framework, correctly prioritizing investments in the core pillars of inclusive education: accessible learning materials and teacher capacity development.

However, this strategic intent is compromised by critical implementation failures. Severe funding volatility disrupts long-term planning, while the absence of a robust Monitoring and Evaluation (M&E) system precludes accountability. Furthermore, the budgeting process operates without the meaningful, funded participation of Organizations of Persons with Disabilities (OPDs).

These systemic gaps—in stability, accountability, and participation—collectively prevent the government from determining whether its financial investments are achieving tangible progress toward inclusive education. This constitutes a significant accountability shortfall under the CRPD.

It is important to note that this analysis is limited to assessing financial inputs and their strategic alignment. A definitive evaluation of the efficacy and outcomes of these expenditures requires implementation data and results metrics not present in budget documents alone.

3.2.8 Recommendations: A Pathway from Policy to Tangible Outcomes

To translate Nepal's policy commitments into tangible improvements in the lives of persons with disabilities, the following systemic reforms are essential. These actions address the core gaps in stability, accountability, and inclusion identified throughout this analysis.

- 1 **Ensure Funding Stability through Multi-Year Budgeting:** The Ministry of Finance and the National Planning Commission should pioneer multi-year budget ceilings for key system-strengthening activities (e.g., framework development, curriculum adaptation). This is critical to ending disruptive boom-bust cycles and enabling sustainable planning by government agencies and their partners.
- 2 **Establish a Government-Owned M&E System for Disability Inclusion:** A robust, centrally funded Monitoring and Evaluation (M&E) system, capable of tracking disability-inclusive outcomes across government, must be institutionalized. This system should be co-designed with OPDs and generate disability-disaggregated data to measure real-world impact. Funding for this core government function must be separate from program delivery budgets to ensure its integrity and sustainability.
- 3 **Institutionalize and Fund Mandatory OPD Participation:** The participation of Organizations of Persons with Disabilities (OPDs) must be formalized, funded, and embedded as a mandatory step in all stages of the budget cycle—from planning and design to implementation and evaluation. This is a non-negotiable requirement for complying with CRPD Articles 4(3) and 33(3) and should be reflected in national budgetary guidelines.
- 4 **Mandate Transparency for High-Value Allocations:** For significant investments, such as the NPR 41.7 million for teacher training, the MoE should be required to publicly disclose key implementation details. This includes the target number of trainees, curriculum, methodology, and expected outcomes to enable proper public scrutiny and ensure value for money.
- 5 **Prioritize Targeted Investment for the Most Excluded:** The government must develop and fund targeted programs, informed directly by relevant OPDs, to support children with psychosocial, intellectual, and other underrepresented disabilities. These groups remain the most marginalized

within the education system and require specifically designed interventions to achieve equitable inclusion.

Concluding Insight: The analysis confirms that the Ministry of Education largely understands what to fund for inclusion. The fundamental challenge lies in how it is funded. Achieving stability, equity, and accountability requires fixing the broader systemic frameworks for M&E and participatory governance that underpin all public spending. This is not solely the MoE's responsibility but a whole-of-government imperative led by the Ministry of Finance and the National Planning Commission.

3.3 Ministry of Health and Population (MoHP): An Assessment of Strategic Alignment

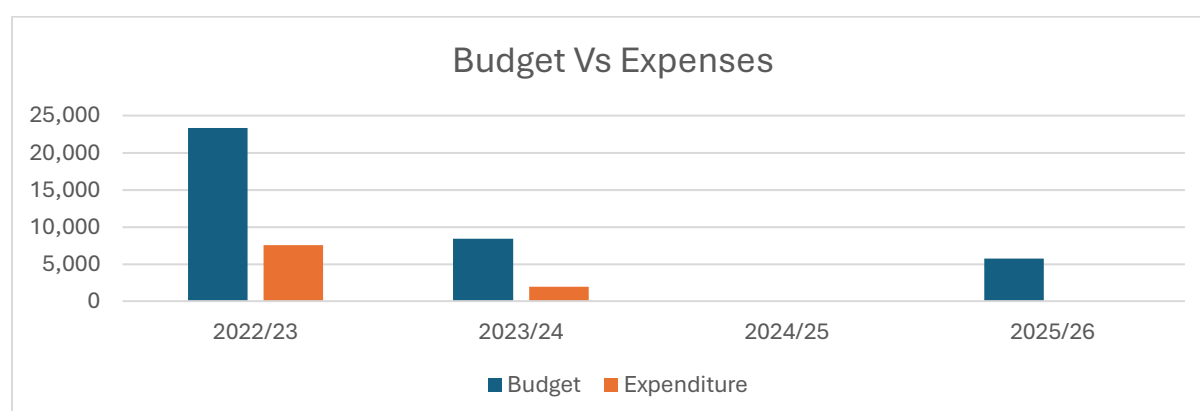
3.3.1 Overall Assessment

The budget of the MoHP indicates a significant gap in its strategic approach to addressing the health rights of persons with disabilities. Allocated funding is minimal, exhibits high volatility, and is not structured to support a systematic or rights-based health program. This pattern of investment is inconsistent with the requirements of the CRPD, which mandates the provision of inclusive and accessible health services.

Table 11: Health Ministries Budget in Disability Management (NPR)

program activities	2022/23 _bu	2022/23_ ex	2023/24 _bu	2023/24_ ex	2024/25_ bu	2025/26_ bu
Disability Assessment	3600	0	1300	0	0	0
Day Celebration	500	305.139	100	70.221	0	0
Rehabilitation and assistive device	16200	6697.204	6100	1425.054	0	1290
leprosy	3000	504.195	950	438.346	0	1650
Health and Equity for the persons with disability	0	0	0	0	0	4000
Total	23300	7506.538	8450	1933.621	0	6940
Health Ministry Budget	69,380,000		83,990,000		86,240,000	95,810,000
Percentage allocated to Disability Sector	0.034		0.01		0	0.007

Source: Health Ministry



3.3.2 Key Findings

Limited Scope and Scale of Allocated Resources

The budget data indicates that the disability-specific allocations within the MoHP are minimal, representing between 0% and 0.034% of the ministry's total budget over the four-year period. The funded activities are narrow in scope, with no visible allocations for several key areas of health inclusion, such as targeted services for women and children with disabilities, training for mainstream health workers, accessible health information, or community-based health programs.

High Volatility and Discontinuity of Programs

The data reveals significant instability in year-to-year funding. Key program lines, such as 'Disability Assessment' and 'Rehabilitation and assistive devices,' were funded for one or two years and then discontinued or significantly reduced. For instance, the budget for 'Rehabilitation and assistive devices' was reduced by 62% in 2023/24 and had no allocation in 2024/25. This pattern of volatility challenges the continuity of services and long-term health planning for persons with disabilities.

Significant Gap Between Budgeted and Executed Amounts

A consistent pattern of under-spending is observed across several programs. In the 2023/24 fiscal year, only 23% of the budget for 'Rehabilitation and assistive devices' was executed (NPR 1,425k of NPR 6,100k). Similarly, in 2022/23, only 17% of the 'Leprosy' budget was spent (NPR 504k of NPR 3,000k). This indicates a systemic challenge in translating budgetary allocations into implemented activities.

Programmatic Focus Reflects a Narrow Approach

The structure of the budget shows a predominant focus on specific, traditional categories. A single disease-specific program ('Leprosy') has received consistent funding, while investments are primarily directed towards discrete interventions like 'Rehabilitation and assistive devices' and 'Day Celebration.' This allocation pattern differs from a comprehensive, rights-based health strategy as envisioned by CRPD Article 25, which requires the provision of inclusive, accessible health services on an equal basis.

3.3.3 The Policy-Budget Disconnect in Health

The National Health Policy, 2076, establishes broad commitments to health rights and equity. However, the MoHP's budget allocations do not demonstrate a corresponding financial strategy to implement these commitments for persons with disabilities. The following table illustrates the gap between policy objectives and fiscal implementation.

Policy Promise (National Health Policy, 2076)	Budgetary Reality (Evidence from MoHP Data)	Implications for CRPD Alignment
Universal Health Coverage & Equitable Access (Sections 6.1, 6.2, 6.5)	No targeted funding to ensure health services are accessible and inclusive. No budget for training health workers on disability inclusion or providing reasonable accommodation.	Creates barriers to fulfilling the right to health on an equal basis, as per Article 25.
"Disability-Friendly Infrastructure" (Section 6.23.3)	No dedicated, scalable budget for a national program of accessibility retrofitting in health facilities.	Hinders the realization of Article 9 (Accessibility), as the physical environment remains exclusionary.

Expansion of Mental Health Services (Section 6.17.5)	Funding is erratic and minimal, with no clear link to rights-based, community-led services. The budget shows a historical focus on a disease-specific approach (leprosy).	Does not support the development of inclusive community-based services required by Articles 19 & 25.
Inclusion & Data (Implied throughout)	No budget for OPD consultation. No budget for disability-disaggregated health data collection.	Presents challenges for upholding participation mandates under Articles 4(3) & 33(3) and the data collection requirements of Article 31.

In conclusion, the MoHP's budget is not aligned with the transformative ambitions of the National Health Policy. The absence of targeted, stable funding for inclusion results in a fiscal framework that perpetuates a residual approach to disability, rather than financing a system capable of delivering on the right to health for all.

3.3.4 Recommendations for MoHP

To align its financial operations with its policy commitments and the CRPD, the Ministry of Health and Population should consider the following actions:

Transition from a Disease-Specific to a Mainstreamed Approach: Integrate disability inclusion as a cross-cutting priority within all core health programs (e.g., maternal health, child health, non-communicable diseases), supported by dedicated budget lines, rather than maintaining it as a separate, marginalized issue.

Develop a Costed National Action Plan for Inclusive Health: Formulate and implement a multi-year, funded strategy to achieve inclusive primary healthcare. This plan should include standardized training for health workers on disability inclusion, guidelines for providing reasonable accommodations, and a timeline for procuring accessible medical equipment.

Establish a Stable and Predictable Fund for Assistive Technology: Create a dedicated, annual budget line for the provision and maintenance of assistive devices. This would provide a reliable supply of these essential technologies and move beyond the current model of volatile, insufficient funding.

CHAPTER 4 CONCLUSION AND RECOMMENDATIONS: BRIDGING THE GAP BETWEEN POLICY PROMISE AND BUDGETARY REALITY

4.1 The Policy-Budget Disconnect: A Synthesis of Findings

Nepal's legal and policy frameworks for disability rights are robust and represent significant progress toward alignment with international standards. However, an analysis of budgetary data indicates a significant disconnect between these rights-based commitments and their financial implementation. The allocation of resources remains predominantly oriented towards a social protection model.

4.1.1 Analysis: Resource Allocation for Welfare versus Empowerment

The data from Table 2 shows that social protection transfers, such as the disability allowance, consistently account for over 90% of disability-related expenditure. Programmatic investments for empowerment represent a correspondingly small proportion of the total. In contrast, programmatic investments aimed at empowerment—including inclusive education, community participation, and accessibility—constitute a minor share of the total expenditure.

This allocation structure highlights a tension within the government's approach. While policy documents advocate for a human rights model focused on empowerment and inclusion, the financial resources are primarily directed toward a support model. This approach may not fully address the systemic barriers that hinder the participation and empowerment of persons with disabilities.

Furthermore, the concentration of funding in direct transfers, alongside minimal investment in the institutional capacity of Organizations of Persons with Disabilities (OPDs) for independent monitoring, presents a risk. It may create dependencies that can inadvertently constrain the ability of OPDs to provide critical oversight. This is compounded by documented allocations to segregated living arrangements, which are not aligned with the right to live independently and be included in the community.

This analysis identifies three core systemic challenges:

1 The Participation Gap: Technical Planning Versus Lived Experience

Budget formulation appears to be primarily a technical exercise, with limited documented evidence of systematic input from persons with disabilities through their representative organizations. This report has observed this gap in:

- The MoWCSC's historical allocations to institutional care, which were not aligned with the advocacy of OPDs for community-based services.
- The MoE's volatile funding for key programs, which could be stabilized through long-term, OPD-informed planning.
- The MoH's programmatic focus, which remains narrowly centered on specific disease-based programs (e.g., leprosy) rather than the broader spectrum of health rights and accessibility needs identified by persons with disabilities. This is compounded by significant under-execution of its already minimal budget, indicating a disconnect between planning and implementation.

2 The Accountability Gap: Limited Measurement of Impact

A critical finding across ministries is the minimal investment in mechanisms to track the outcomes of public spending. The evidence for this includes:

- Negligible and often intermittent budget lines for monitoring and evaluation.
- An inability to assess the effectiveness or efficiency of significant allocations, such as the NPR 41.7 million for teacher training.
- A systemic lack of disability-disaggregated data, which prevents an assessment of whether services are reaching their intended beneficiaries.

3 **The Policy-Budget Misalignment: Contradictory Priorities**

Financial allocations in several instances run counter to stated policy objectives. This report has documented:

- The MoWCSC's past financing of segregated institutions ("disability villages") despite a national policy commitment to deinstitutionalization.
- Volatile funding for accessible learning materials, which challenges the consistent implementation of the Inclusive Education Policy.
- Large, one-off budget injections for direct support that lack a clear, strategic connection to the multi-year capacity-building goals of the SESP.

The combined effect of these three gaps is a budgetary system that is not optimally aligned with Nepal's CRPD obligations. It creates a cycle where limited participation leads to misaligned programs, a lack of accountability prevents corrective action, and the misalignment between policy and funding hinders the realization of rights. Addressing this requires a strategic re-orientation of public financial management towards participatory planning, transparent reporting, and results-based outcomes.

4.2 **Recommendations for a CRPD-Compliant Budgeting Framework**

To address the systemic gaps identified, the following recommendations focus on institutionalizing participation, transparency, and strategic alignment.

4.2.1 **Closing the Participation Gap: Institutionalize OPD Engagement**

Formalize and fund the mandatory participation of OPDs in all stages of the budget cycle—from planning and design to implementation and evaluation. This should be embedded in national budgetary guidelines as a standard procedure for all disability-related initiatives.

4.2.2 **Solving the Accountability Gap: Build a Transparent and Data-Driven System**

- 1 **Mandate Inclusive Disability-Disaggregated Data:** The Ministry of Finance should require all line ministries to collect and publish disability-disaggregated data using an inclusive methodology. This methodology must be developed in partnership with a diverse coalition of OPDs to ensure it accurately captures the population of persons with disabilities, including those with psychosocial disabilities.
- 2 **Earmark Funds for Participatory M&E:** Allocate a minimum of 3-5% of program budgets for disability inclusion to robust, participatory M&E, co-designed with OPDs to measure outcomes, not just expenditure.
- 3 **Publish a "CRPD Budget Statement:"** Introduce an annual statement with the national budget that links all disability-related allocations to specific CRPD articles and policy targets, providing a public justification for the level of funding.

4.2.3 Bridging the Policy-Budget Misalignment: Align Funding with Rights

- 1 **Shift from Segregation to Inclusion:** Develop a time-bound plan to reallocate resources from segregated institutions to the development of community-based support services, such as personal assistance and inclusive housing, in line with CRPD Article 19.
- 2 **Ensure Strategic, Stable Funding:** Move from volatile, project-based funding to multi-year budgeting for core inclusion activities, such as teacher training and the production of accessible learning materials, to ensure continuity and systemic impact.

4.3 Concluding Message

Nepal's policy commitments lay a strong foundation for inclusion. The budget, however, has not yet been fully leveraged as the primary tool to realize this vision. By implementing these recommendations to foster participation, ensure accountability, and strategically align resources with rights, the government can transform its public financial management into a powerful engine for achieving an inclusive society.

Appendices

Appendix A: Detailed Policy Review - National Disability Policy, 2080

Overview

Nepal's National Disability Policy (NDP), 2080, represents the nation's flagship framework for realizing the rights of persons with disabilities. It is explicitly grounded in the Constitution and the UNCRPD, marking a potential turning point from past welfare-based approaches. This review assesses the policy's ambition against its operational credibility, evaluating whether its robust rhetorical commitments are matched by the mechanisms for implementation, particularly focusing on participation (Articles 4(3) & 33(3)), non-discrimination (Article 5), and the right to independent living (Article 19).

Evaluation of CRPD Compliance

Substantive Strengths & Foundational Progress

- **Explicit Rights-Based Foundation:** The policy's direct anchoring in the UNCRPD (Section 1) and its mandate for legal reform (Sections 10.2, 11.2) provide a powerful framework for rights-based advocacy and align with Article 4.
- **Comprehensive Scope:** The policy commendably addresses a wide spectrum of rights—across employment, health, and education (Sections 10.3, 11.5, 11.7, 11.8)—and explicitly includes psychosocial disabilities, signaling a move towards inclusivity.
- **Intersectional Acknowledgment:** Targeted strategies for women with disabilities (Sections 11.3.3, 11.6.5) demonstrate an understanding of compounded discrimination, aligning with Article 6.
- **Detailed Accessibility Standards:** Section 11.9's provisions for infrastructure, ICT, and communication access (braille, sign language) are concrete and align strongly with Article 9.
- **Data for Accountability:** The emphasis on disaggregated data collection (Sections 11.3.5, 16) is a critical prerequisite for evidence-based policy and monitoring under Article 31.

Critical Implementation Deficits & Non-Compliance

- **Participation as an Afterthought:** The failure to explicitly mandate OPDs' role in the policy's design and, crucially, in its monitoring (Section 16) voids its legitimacy. This violates the core CRPD principle of "nothing about us without us" (Articles 4(3), 33(3)) and repeats a key failure noted in the 2018 CRPD Concluding Observations.
- **Contradictory Legal Foundation:** The policy's effectiveness is nullified by its acknowledgment of over 74 discriminatory laws (Section 10). Promoting rights while existing laws restrict legal capacity and employment access for psychosocial disabilities creates an irreconcilable contradiction with Articles 5, 12, and 27.
- **Promotion of Segregation:** The policy's focus on "rehabilitation centers" (Section 11.7.12) actively invests in a model of institutionalization that contravenes the right to independent living and community inclusion enshrined in Article 19.
- **Operational Vagueness:** Critical sections on awareness-raising (11.4.2), employment (11.5.3), and accessibility (11.9) are characterized by vague measures, unclear budget allocations, and weak enforcement mechanisms, rendering compliance discretionary and unmonitorable.

Forward-Looking Assessment

The National Disability Policy, 2080, is a document of profound contradiction. It presents a vision of inclusion while retaining the architecture of exclusion. Its strengths in scope and language are critically undermined by the absence of three pillars necessary for its success: (1) meaningful OPD ownership, (2) the repeal of discriminatory laws, and (3) a definitive shift from institutions to community-based living. Until these core issues are resolved, the policy risks being a sophisticated rights-based narrative overlaying a non-compliant status quo.

Recommendations for Transformative Implementation

For the NDP 2080 to become more than text, the following non-negotiable actions are required:

1. **Legislate OPD Power:** Immediately formalize by directive that a consortium of OPDs, with guaranteed representation for diverse groups (women, psychosocial, rural), must co-chair the national and provincial monitoring committees for this policy, with veto power over implementation plans and budget allocations.
2. **Condition Implementation on Legal Reform:** Halt the rollout of any new programs under this policy until a time-bound action plan, co-designed with OPDs, is in place to repeal or amend the 74+ discriminatory laws identified in Section 10, starting with those affecting legal capacity.
3. **Divest from Institutions, Invest in Community:** Immediately freeze all funding for new "rehabilitation centers" (Section 11.7.12) and reallocate 100% of those resources to piloting personal assistance services and community-based support in 5 districts within the next fiscal year.
4. **Operationalize Vagueness into Action:** Within one year, task the mandated OPD consortium (Rec. 1) with converting every vague clause in the policy into a specific, measurable, and budgeted action plan with clear accountability lines.

Conclusion

The National Disability Policy 2080 is at a crossroads. It is the most progressive policy document on disability in Nepal's history, yet it remains a promise unfulfilled. Its value will be determined not by its words, but by the state's willingness to dismantle the legal and institutional barriers it itself acknowledges and to transfer power from policymakers to persons with disabilities. Without this courageous next step, the policy will join its predecessors as a symbol of intention without impact. The time for rhetorical alignment with the CRPD is over; the time for enforceable action is now.

Appendix B: Detailed Policy Review - Nepal's 16th Periodic Plan (2081/82–2085/86)

Overview

Nepal's 16th Periodic Plan (2024/25–2028/29) emphasizes inclusive education, accessible employment, and integrated social protection, aiming to align with the UN Convention on the Rights of Persons with Disabilities (CRPD). This evaluation assesses the plan's compliance with the CRPD, focusing on **meaningful participation of OPDs** (Articles 4(3) & 33(3)) and concrete obligations related to accessibility, independent living, education, health, employment, social protection, and data collection.

Evaluation of CRPD Compliance

Strengths

- **Policy Alignment with CRPD Principles:** The plan's focus on inclusive education (Section 5.20), disability-friendly infrastructure (Section 5.29), and social protection (Section 8.6) reflects Nepal's constitutional and legal commitments to disability rights, aligning with CRPD Articles 9, 24, and 28.
- **Social Security Provisions:** The inclusion of benefits for persons with severe disabilities (Section 8.6) lays a groundwork for fulfilling Article 28 (adequate standard of living).
- **Accessibility Commitments:** References to disability-friendly infrastructure (Section 5.29) signal intent to comply with Article 9, building on existing national guidelines.

Critical Gaps

- **Lack of Meaningful OPD Engagement:** The plan is silent on the mandatory participation of Organizations of Persons with Disabilities (OPDs) in its design, implementation, or monitoring. This constitutes a direct violation of Articles 4(3) and 33(3) of the CRPD and disregards the 2018 CRPD Concluding Observations for Nepal.
- **Absence of Measurable Targets:** The plan lacks specific, time-bound goals (e.g., number of accessible schools, employment quotas, inclusive health services), undermining accountability under Articles 24, 27, and 25.
- **No Disability-Disaggregated Data System:** The failure to incorporate a robust data collection mechanism (Article 31) prevents evidence-based planning and monitoring, perpetuating invisibility.
- **Weak Intersectionality:** The plan overlooks the specific needs of women and girls with disabilities and those from marginalized communities, failing Article 6.
- **Vague Implementation Mechanisms:** Commitments to accessibility and social protection lack detailed budgetary allocations, timelines, or enforcement strategies, violating Article 4(1) (progressive realization).

Recommendations for CRPD Compliance

To ensure the 16th Periodic Plan fulfills Nepal's CRPD obligations, the following actions are urgently needed:

1. **Institutionalize OPD Leadership**
 - a. **Action:** Establish a National Disability Advisory Committee with ≥30% representation from women-led and marginalized OPDs (e.g., psychosocial, deafblind). This committee should co-design and monitor all disability-related initiatives.
 - b. **Implementation:** Embed this structure within the National Planning Commission's framework, with quarterly reporting mechanisms.
 - c. **Accountability:** Use OPD-led audits to evaluate progress and align with CRPD General Comment No. 7.
2. **Ensure Transparent and Targeted Budgeting**
 - a. **Action:** Allocate 5% of national budgets for education, health, and social protection to disability-inclusive programs, with public annual reports.
 - b. **Implementation:** Pilot participatory budgeting at the local level with OPD oversight to track resource allocation and outcomes.

- c. Data Leverage: Use prevalence estimates (e.g., WHO's 15% disability rate) to justify allocations until national data is available.
3. Embed Intersectionality
 - a. Action: Reserve 50% of disability-specific scholarships for girls and ensure gender- and disability-responsive disaster preparedness plans.
 - b. Implementation: Collaborate with women-led OPDs to design and implement programs in high-risk regions like the Terai.
 - c. Data Justice: Collect and use intersectional data to inform policy and measure inclusion.
 4. Accelerate Deinstitutionalization
 - a. Action: Develop a time-bound strategy to transition from residential institutions to community-based services, reallocating funds to personal assistance and inclusive support.
 - b. Implementation: Conduct a national audit of institutions with OPDs and pilot community-based models in five districts by 2026.
 - c. Monitoring: Report annually on reductions in institutionalization and increases in community living.
 5. Enforce Accessibility Standards
 - a. Action: Mandate OPD-led accessibility audits of 40% of public infrastructure (schools, health facilities, government offices) by 2028.
 - b. Implementation: Adopt and enforce the 2018 National Accessibility Guidelines, with clear sanctions for non-compliance.
 - c. Innovation: Leverage digital accessibility tools to ensure inclusive information systems.
 6. Drive Sectoral Inclusion
 - a. Education: Train 20,000 teachers in inclusive pedagogy by 2027, with OPD-certified curricula.
 - b. Health: Integrate mental health and psychosocial support into primary healthcare, with dedicated funding.
 - c. Employment: Introduce a 5% employment quota for persons with disabilities in public sector jobs, with incentives for private sector compliance.

Forward-Looking Assessment

The 16th Periodic Plan provides a rhetorical foundation for disability inclusion but lacks the operational rigor to achieve CRPD compliance. Without urgent reforms to embed OPD leadership, measurable targets, and robust accountability mechanisms, the plan risks perpetuating the exclusion highlighted in the 2018 CRPD Concluding Observations.

Conclusion

Nepal's 16th Periodic Plan represents a tentative step toward disability inclusion but falls short of its CRPD obligations. Its success hinges on translating broad commitments into actionable, funded, and monitored strategies co-owned by OPDs. By prioritizing participation, transparency, and intersectionality, Nepal can bridge the gap between policy intent and tangible outcomes for persons with disabilities.

Appendix C: Nepal Government Plan and Policy for Fiscal Year (2025/26)

Overview

The Government of Nepal's Plan and Policy for Fiscal Year 2082–83 (2025/26) outlines national priorities, including inclusive development, social protection, education, and health. While disability is superficially mentioned (Points 82, 83, 85), the plan lacks detailed strategies, measurable targets, and implementation mechanisms for persons with disabilities. This review evaluates its alignment with the UNCRPD, focusing on participation (Articles 4(3) & 33(3)), resource allocation (Article 4(1)), and intersectional rights (Articles 6, 9, 19, 24, 25, 31).

Evaluation of CRPD Compliance

Strengths

- **Symbolic Recognition:** Point 85's commitment to CRPD implementation and Point 83's focus on "disability-friendly infrastructure" and "community-based rehabilitation" acknowledge disability inclusion at a rhetorical level.
- **Social Protection Framework:** General provisions for free healthcare (Point 82) and gender-based violence response (Point 79) could be extended to benefit persons with disabilities if made inclusive and accessible.

Critical Gaps

- **No Mandated OPD Participation:** The plan does not require consultation with Organizations of Persons with Disabilities (OPDs) in design, implementation, or monitoring, violating Articles 4(3) and 33(3).
- **Absence of Disability-Specific Budgets:** No dedicated budget lines or transparency mechanisms exist for disability inclusion, failing Article 4(1).
- **Vague Accessibility Commitments:** References to "disability-friendly" infrastructure lack enforceable standards, timelines, or digital accessibility provisions, undermining Article 9.
- **Institutionalization Over Inclusion:** The plan's focus on "rescue" and "management" (Point 82) promotes segregated care, contradicting Article 19 (community living).
- **Neglect of Intersectionality:** No targeted measures address the unique needs of women, girls, or gender-diverse persons with disabilities, ignoring Article 6.
- **Exclusion from Education and Health:** No explicit inclusive education strategies (Article 24) or disability-specific health services (Article 25).
- **No Data Systems:** Omission of disability-disaggregated data and OPD-led monitoring violates Articles 31 and 33(3).

Recommendations for Immediate Compliance

7. **Legally Mandate OPD Participation**
 - a. **Action:** Amend the plan to require OPDs (including women-led and underrepresented groups) to co-design and monitor all disability-related initiatives.
 - b. **Implementation:** Establish a CRPD Implementation Unit within the National Planning Commission, led by OPD representatives.
8. **Allocate and Track Disability Budgets**

- a. Action: Earmark 5% of sectoral budgets (education, health, social protection) for disability-specific programs, with public quarterly reports.
 - b. Accountability: Launch a participatory budget-tracking portal with OPD oversight.
- 9. Enforce Accessibility Standards
 - a. Action: Adopt and enforce the 2018 National Accessibility Guidelines, requiring OPD-led audits of 30% of public infrastructure by 2026.
 - b. Scope: Include digital accessibility (e.g., sign language interpretation, easy-read materials).
- 10. Transition to Community-Based Systems
 - a. Action: Replace institutionalization models with funded community-based services (e.g., personal assistance, inclusive shelters).
 - b. Timeline: Phase out all new institutional funding by 2025 and reallocate resources to community support.
- 11. Embed Intersectionality
 - a. Action: Reserve 50% of all disability-specific resources for women and girls with disabilities, ensuring accessible GBV services and scholarships.
 - b. Data: Collect and use intersectional data to track outcomes.
- 12. Integrate Inclusive Education and Health
 - a. Education: Mandate teacher training on inclusion and allocate funds for accessible learning materials.
 - b. Health: Fund sign language interpreters in healthcare settings and integrate psychosocial support into primary care.
- 13. Launch a National Disability Data System
 - a. Action: Integrate the Washington Group Short Set into all national surveys, with OPDs leading data collection and analysis.
 - b. Reporting: Publish an annual disability status report to inform policy.

Conclusion

The FY 2025/26 plan perpetuates a tokenistic approach to disability inclusion, with rhetorical commitments overshadowed by the absence of actionable measures, budgets, and participatory mechanisms. Without urgent revisions to embed OPD leadership, measurable targets, and CRPD-aligned accountability frameworks, the plan will fail to advance the rights of persons with disabilities in Nepal. The government must transition from vague aspirations to tangible, funded actions to avoid another cycle of non-compliance.

Appendix D: Nepal's National Gender Equality Policy, 2077

Overview

Nepal's National Gender Equality Policy (NGEP), 2077, aims to advance gender equality and empower women, girls, and gender minorities through legal and programmatic measures. However, its treatment of disability is peripheral and fails to substantively address the intersectional discrimination faced by women and girls with disabilities, as required by Nepal's ratification of the UNCRPD. This review evaluates the NGEP's compliance, focusing on the core CRPD principles of participation (Articles 4(3) & 33(3)) and the specific rights of women with disabilities (Article 6).

Evaluation of CRPD Compliance

Strengths

1. **Explicit Recognition:** The policy explicitly names women with disabilities as a marginalized group (Section 10, Strategy 3, Policy (d)), providing a foundational hook for targeted action aligned with Article 6.
2. **GBV Framework:** The establishment of mechanisms to address gender-based violence (Section 11, Strategy 2), while not accessible, creates an infrastructure that can be modified to include women with disabilities, per Article 16.
3. **Budgeting Mechanism:** The institutionalization of gender-responsive budgeting (Section 11, Strategy 3, Policies (e), (f)) offers a critical existing government process that can be leveraged to track disability-specific allocations, supporting Article 4(1).

Critical Gaps

4. **Tokenistic Participation:** The complete absence of a mandate to consult with Organizations of Persons with Disabilities (OPDs), particularly those led by women, in the policy's design, implementation, or monitoring frameworks (Section 12) constitutes a fundamental violation of Articles 4(3) and 33(3). This renders the policy's approach to disability presumptuous and uninformed.
5. **Lack of Intersectionality in Action:** Beyond a single mention, the policy contains no specific programs, indicators, or budget lines dedicated to addressing the unique barriers faced by women and girls with disabilities. This neglect of Article 6 reduces their inclusion to a footnote rather than a strategic priority.
6. **Inaccessible Protection Services:** The policy's measures against violence are designed for the non-disabled population. The lack of mandates for accessible shelters, sign language interpreters for helplines, or materials in braille and easy-to-read formats excludes women with disabilities from protection and justice, contravening Article 16.
7. **Invisible in Data:** The commitment to disaggregated gender data (Section 11, Strategy 3, Policies (i), (j)) does not extend to disability-disaggregation. This data erasure makes women and girls with disabilities statistically invisible, violating Article 31 and preventing evidence-based policy.

Forward-Looking Assessment

The NGEF 2077 is non-compliant with the CRPD in its current form. Its strengths are potentialities, not realities. Its framework for gender equality is critically undermined by its failure to incorporate the lived experience of women with disabilities through OPD consultation and its lack of concrete, accessible, and targeted measures to address their intersectional marginalization. The gaps identified in the 2018 CRPD Concluding Observations regarding participation and data remain wholly unaddressed.

Recommendations for CRPD Compliance

To transform the NGEF from a non-compliant document into an effective instrument for inclusive equality, the following actions are essential:

1. **Mandate Meaningful OPD Participation:** Issue a directive to formally amend the NGEF's implementation guidelines to require that women-led OPDs constitute at least one-third of all

coordination councils (Section 12) and are central partners in all monitoring and evaluation activities.

2. **Launch Targeted Intersectional Programs:** Introduce and fund specific initiatives within the NGEF framework, such as:
 - A scholarship fund for girls with disabilities.
 - A program to establish a network of fully accessible safe shelters and GBV response services.
 - Quotas and supported pathways for the economic empowerment of women with disabilities.
3. **Enforce Accessibility Standards:** Integrate mandatory universal accessibility standards across all NGEF-related services, particularly GBV helplines (requiring phone/SMS compatibility for the deaf) and public information campaigns (requiring sign language interpretation and easy-read formats).
4. **Institutionalize Disability-Disaggregated Data:** Mandate that all data collected under the NGEF's monitoring framework (Section 11, Strategy 3) be disaggregated by disability status using the Washington Group Short Set questions, to make the population visible and allow for targeted interventions.

Conclusion

The National Gender Equality Policy, 2077, presents a profound paradox: it seeks to overcome discrimination while inadvertently perpetuating it against women and girls with disabilities through exclusionary design and inaction. Achieving its core mission requires a fundamental shift from token recognition to substantive inclusion. This necessitates legally mandating the participation of women with disabilities in steering the policy, funding targeted programs to address their specific marginalization, and building an accessible and accountable infrastructure that leaves no one behind.

Appendix E: Nepal's Child Policy (2023)

Overview

Nepal's Child Policy (2023) aims to protect and promote the rights of all children. However, its alignment with the UN Convention on the Rights of Persons with Disabilities (UNCRPD) is partial and superficial. This review evaluates the policy's compliance, focusing on the core obligations of participation (Articles 4(3) & 33(3)) and monitoring, alongside cross-cutting articles concerning non-discrimination, accessibility, inclusion, and data collection. The objective is to identify gaps and provide actionable recommendations to ensure the policy fully safeguards the rights of children with disabilities.

Key Findings

Strengths

1. **Accessibility Measures:** Commitments to providing free assistive devices and creating disability-friendly infrastructure (Strategies 12.5.9, 12.5.10) align with the principles of Article 9.
2. **Anti-Discrimination Stance:** The explicit address of discrimination against children with autism and other marginalized groups (Strategy 12.3.1) partially fulfils obligations under Article 5.
3. **Educational Access:** Provisions to promote school enrollment and distribute assistive materials (Strategies 12.5.7, 12.5.9) support the right to education under Article 24.
4. **Social Protection Foundation:** The expansion of social security schemes (Strategy 12.4.5) provides a crucial platform that can be leveraged to realize Article 28.

Critical Gaps

1. **Complete Absence of OPD Participation:** The policy was developed and designed without any documented consultation with Organizations of Persons with Disabilities (OPDs) or organizations of children with disabilities. This constitutes a direct violation of the fundamental CRPD principles enshrined in Articles 4(3) and 33(3) and disregards General Comment No. 7.
2. **Promotion of Institutionalization:** The use of welfare-oriented terminology such as “rescue” and “management” (Strategies 11.3, 12.3.5) signals an intention to use segregated institutional care, directly contravening the right to live independently and be included in the community under Article 19.
3. **Incomplete Accessibility:** The policy neglects information and communication accessibility (e.g., Braille, sign language, easy-read), excluding children with sensory or intellectual disabilities from accessing vital information and services, thus failing to fully implement Article 9.
4. **Neglect of Intersectionality:** The policy entirely fails to address the compounded discrimination faced by girls and gender-diverse children with disabilities, overlooking their specific vulnerabilities and violating Article 6.
5. **Absence of Accountability Mechanisms:** There are no provisions for disability-disaggregated data collection or dedicated budgeting for disability-specific initiatives, rendering the policy unmonitorable and unfunded, in violation of Articles 31 and 4(1).

Forward-Looking Assessment

The Child Policy (2023) demonstrates partial compliance through tangible commitments to accessibility and social protection. However, its effectiveness is fundamentally undermined by a charity-based approach that risks institutionalization and its complete disregard for the participatory rights of OPDs. These gaps perpetuate the criticisms outlined in the 2018 CRPD Concluding Observations for Nepal. Without urgent revision, the policy will fail to protect the rights of children with disabilities.

Conclusion

Nepal’s Child Policy (2023) is markedly non-compliant with the CRPD in its current form. Its strengths in accessibility are overshadowed by severe deficits in participation, community inclusion, and accountability. To align with Nepal’s human rights obligations, implementation must be preceded by profound revision. This requires mandating OPD leadership in all phases of the policy cycle, shifting resources from institutions to community-based services, and embedding robust, disaggregated data systems to ensure all children are seen, heard, and included.

Appendix F: School Education Sector Plan (SESP) 2079 - 2088

Introduction

The School Education Sector Plan (SESP) 2079-2088 represents Nepal’s primary strategic framework for ensuring equitable and quality education, explicitly aligning with the national Inclusive Education Policy and the UN Convention on the Rights of Persons with Disabilities (CRPD). This analysis evaluates the SESP’s compliance with the CRPD across five critical dimensions:

- Participation of Organizations of Persons with Disabilities (OPDs);
- Accessibility of infrastructure and learning materials;

- Budgetary transparency and dedicated resource commitment;
- Integration of gender and disability intersectionality; and
- Robustness of enforcement and accountability mechanisms.

Positive Compliance Indicators

Commitment to Inclusive Infrastructure (CRPD Article 9)

The SESP demonstrates a strong commitment to physical and digital accessibility, a core requirement of CRPD Article 9. This is evidenced by ambitious, measurable targets:

- The retrofitting of 13,000 schools with disability-friendly infrastructure, including accessible toilets, classrooms, and ICT facilities over the plan's ten-year duration.
- A nationwide scope ensuring coverage across all 753 local governments, promoting equitable access.

Supports for Inclusive Education (CRPD Article 24)

The plan outlines several concrete measures that align with the principles of inclusive education under CRPD Article 24:

- Provision of scholarships for 45,116 students with disabilities, reducing financial barriers to education.
- Development and distribution of accessible learning materials, including Braille and digital content.
- A mandatory 5% teacher reservation quota for persons with disabilities, promoting representation and role models.
- Investment in teacher training programs on inclusive pedagogy, aiming to build educator capacity.

Critical Compliance Gaps

Absence of Meaningful OPD Participation (CRPD Articles 4(3) & 33(3))

A significant deficiency is the lack of documented, meaningful consultation with Organizations of Persons with Disabilities (OPDs) during the SESP's development phase. This omission contravenes the core CRPD principle of "nothing about us without us" as articulated in General Comment No. 7 and directly violates obligations under Articles 4(3) and 33(3), which mandate the active involvement of persons with disabilities through their representative organizations in policy development and monitoring.

Lack of Budgetary Transparency and Specificity (CRPD Article 4(1))

While the SESP sets laudable programmatic targets, it fails to outline a clear financial framework for their realization, undermining CRPD Article 4(1).

- There is no dedicated budget line for inclusive education initiatives, creating a risk that these programs will be underfunded.
- Disability-specific allocations within the broader education budget are unclear for the years 2022–2025, preventing accountability.

- Crucially, no budget is allocated for formal OPD roles in monitoring implementation, rendering participatory mechanisms ineffective.

Exclusion of Intersectional Gender Considerations

The SESP overlooks the compounded discrimination faced by women and girls with disabilities. The plan lacks targeted interventions or specific provisions to address their unique barriers to education, representing a missed opportunity to apply an intersectional lens and fully comply with CRPD Article 6 (women with disabilities).

Conclusion and Implication for Budgetary Execution

In conclusion, the SESP 2079-2088 presents a dual reality. It contains strong, compliant elements in its commitments to accessibility and inclusive education supports. However, these positive intentions are critically undermined at the strategic level by the exclusion of OPDs in the planning process, a non-transparent budgeting approach within the plan itself, and a failure to address gender-based discrimination.

These foundational gaps in the SESP's design directly predict the challenges seen in its implementation. The lack of dedicated budget lines and clear financial targeting within the policy document has cascading effects, resulting in discretionary and often unclear allocations in the subsequent national budgets. Therefore, the following analysis of the Ministry of Education's actual budget allocations from FY 2021/22 to 2024/25 must be understood as the execution of a plan that was already non-compliant in key areas from its inception. Urgent reforms are required before the 2026 mid-term review to integrate participatory planning, ring-fenced financing, and intersectional strategies to ensure the SESP fulfills its promise of inclusive education for all children.

Appendix G: Inclusive Education Policy, 2073

Overview

Nepal's Inclusive Education Policy for Persons with Disabilities (2073) establishes a framework to guarantee inclusive, quality education for children with disabilities, in alignment with the Constitution of Nepal, the UNCRPD, and international commitments such as the Salamanca Declaration. This analysis evaluates the policy's compliance with the UNCRPD, with a particular focus on Article 24 (Education), to identify strengths, deficiencies, and actionable recommendations for reform.

Key Findings

Strengths

1. **Rights-Based Framework:** Explicit references to the UNCRPD (Sections 1, 5) and a commitment to mainstream inclusion establish a foundation that aligns with Article 24(1).
2. **Accessibility Provisions:** Mandates for accessible curricula, learning materials, and infrastructure (Sections 8.3, 10.10, 10.17) demonstrate compliance with Article 9 and Article 24(2)(c).
3. **Institutional Architecture:** The establishment of an Inclusive Education Council (Section 11) and monitoring systems (Section 14) provides a structure that potentially supports obligations under Articles 4(3) and 33, pending their effective and participatory operation.
4. **Teacher Capacity Building:** Provisions for fostering an inclusive culture and conducting teacher training (Sections 10.15–10.16, 10.24) are essential for fulfilling Article 24(2)(d).

5. Disaster Risk Reduction: The inclusion of safety measures (Sections 8.9, 10.29–10.32) acknowledges the heightened vulnerability of persons with disabilities, partially addressing Article 11.

Critical Gaps

1. Exclusion of Psychosocial Disabilities: The omission of psychosocial disabilities from official categories (Section 8.11) constitutes a clear violation of Article 5 (equality and non-discrimination) and undermines the universal inclusion mandate of Article 24(1).
2. Segregationist Assessment Practices: Provisions for functional/cognitive assessments (Sections 9.3, 10.7, 10.8) create a significant risk of segregation into separate special schools, directly contradicting the core integration principle of Article 24(2)(b).
3. Contradictory Emphasis on Special Education: The policy's emphasis on "special education" (Section 3) perpetuates a parallel system that inherently undermines the development of a genuinely inclusive mainstream system.
4. Unspecified Disaster Protocols: Disaster preparedness measures (Sections 10.30–10.32) lack operational specificity and inter-agency coordination mechanisms, limiting their practical effectiveness and compliance with Article 11.
5. Ambiguous Quality Standards: The lack of concrete provisions to ensure quality education (Section 8.1) risks perpetuating unequal outcomes, failing to fully realize Article 24.
6. Paternalistic Language: The use of terms like "disability-appropriate" (Section 8.10) reflects a medical-welfare model that undermines individual autonomy and choice, contravening Article 3 (general principles).
7. Tokenistic OPD Representation: The composition of committees (Section 9.16) lacks guarantees for diverse and representative OPD participation, failing to meet the standard for meaningful consultation required by Article 4(3).
8. Inadequate Data Infrastructure: The failure to mandate robust, disability-disaggregated data collection (Sections 4.5, 8.11) impedes evidence-based planning and monitoring, violating Article 31.

Recommendations

1. Amend Section 8.11 to explicitly include psychosocial disabilities and reframe disability identification around barriers rather than deficits.
2. Repeal or reform Sections 9.3, 10.7, and 10.8 to eliminate assessment practices that lead to segregation and replace them with tools that support inclusion.
3. Revise Section 3 to unequivocally prioritize inclusive education within mainstream settings over the expansion of special education.
4. Operationalize Sections 10.30–10.32 with specific, coordinated disaster response protocols that are co-designed with OPDs.
5. Introduce clear standards and benchmarks in Section 8.1 to ensure measurable quality education for all learners.
6. Replace paternalistic terminology like "disability-appropriate" in Section 8.10 with rights-based, person-centred language.
7. Mandate proportional representation from a diverse range of OPDs in all decision-making bodies (Section 9.16).

8. Strengthen Sections 4.5 and 8.11 to require systematic collection and use of disability-disaggregated data.

Conclusion

The Inclusive Education Policy of 2073 is partially compliant with the UNCRPD. While its strengths lie in establishing a foundational framework and institutional mechanisms, its effectiveness is critically compromised by exclusionary definitions, segregationist practices, and a lack of meaningful participatory and monitoring structures. Achieving full compliance requires urgent, rights-based revisions developed through genuine OPD consultation, followed by robust implementation.

Appendix H: Nepal's National Health Policy, 2076

Overview

Nepal's National Health Policy, 2076, aims to ensure quality, accessible health services as a fundamental right. However, its treatment of disability is **negligible and non-strategic**, failing to substantively address the health rights and specific needs of persons with disabilities, as required by the UNCRPD. This review evaluates the policy's compliance, focusing on core CRPD principles of participation, non-discrimination, accessibility, and the right to health.

Evaluation of CRPD Compliance

Strengths

1. Universal Health Coverage Framework: Commitments to equitable access and universal health coverage (Sections 6.1, 6.2, 6.5) provide a foundational platform that can be leveraged to benefit persons with disabilities, aligning with the spirit of Article 25.
2. Disability-Friendly Infrastructure: The commitment to "disability-friendly infrastructure" in health facilities (Section 6.23.3) partially addresses the physical accessibility requirements of Article 9.
3. Mental Health Service Expansion: The expansion of mental health and psychosocial services through primary hospitals (Section 6.17.5) acknowledges a need, providing an entry point to reform services toward CRPD compliance, per Articles 19 and 25.

Critical Gaps

1. Complete Exclusion from Governance: The policy contains no mandate for OPD consultation, violating CRPD Articles 4(3) & 33(3). Health programs are designed without the people they affect.
2. No Right to Health for Persons with Disabilities: Beyond "disability-friendly infrastructure," there are no provisions for reasonable accommodation, specific health services, or staff training, violating Article 25.
3. Deliberate Invisibility in Data: The policy does not require disability-disaggregated data, making it impossible to track health outcomes for this population, in violation of Article 31.

Forward-Looking Assessment

The National Health Policy, 2076, is **markedly non-compliant** with the CRPD. Its few strengths are undermined by severe, fundamental gaps, including the active promotion of coercive mental health practices and the complete exclusion of OPDs from governance. The policy fails to establish a rights-based health system and instead perpetuates a medical-welfare model that systematically marginalizes persons with disabilities.

Recommendations for CRPD Compliance

To transform the National Health Policy into a tool for inclusion, the following non-negotiable actions are required:

1. **Mandate OPD Leadership in Health Governance:** Formally amend the policy to require that Organizations of Persons with Disabilities (OPDs), including those representing women and persons with psychosocial disabilities, are voting members on all health planning, monitoring, and budget committees.
2. **Enforce a Ban on Coercive Practices and Guarantee Supported Decision-Making:** Replace all provisions allowing for involuntary treatment with a commitment to voluntary, community-based psychosocial services. The policy must explicitly mandate the provision of supported decision-making and accessible informed consent procedures for all persons with disabilities.
3. **Legislate Universal Accessibility in Health Services:** Mandate that all public and private health facilities meet comprehensive accessibility standards, including the permanent provision of qualified sign language interpreters, materials in Braille and easy-read, and mandatory training for all health workers on disability rights and communication.
4. **Institutionalize Disability-Disaggregated Data:** Revise the health information system (Section 6.15) to require the routine collection of disability-disaggregated data using the Washington Group Short Set questions, and publicly report on health outcomes for persons with disabilities.

Conclusion

The National Health Policy, 2076, currently institutionalizes the exclusion of persons with disabilities from the right to health. Its success is impossible without a fundamental shift from a clinical, top-down model to a participatory, rights-based framework that centers the dignity and autonomy of all persons with disabilities. As the concurrent budget analysis in Chapter 3 demonstrates, these policy gaps result in negligible, volatile, and exclusionary funding that actively undermines the right to health for persons with disabilities.

Appendix D: Full Budget Datasets (MoWCSC & MoE)

Appendix E: 10-Point CRPD Compliance Checklist

1. Is there participation of persons with disabilities in the policy/program formulation, implementation, and evaluation stages?
2. Does the program ensure accessibility of information about the program, accessibility of services intended by the program, and close to the community without additional costs?
3. Does the program ensure non-discrimination among the categories of people intended to be covered by the program, including the diversity among persons with disabilities?
4. Does the program have built-in components that support persons with disabilities so that the program is responsive?
5. Is the program Gender sensitive?
6. Does the program have inbuilt mechanisms that ensure the required support services are effective for persons with disabilities?
7. Does the program support lead to the inclusion or exclusion of persons with disabilities?
8. Does the program/policy specifically provide a financial framework for implementation?

9. Does the reporting format for the policy/program talk about data on persons with disabilities?
10. Does it have a monitoring mechanism?



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