

## THE SOCIO-ECONOMIC SITUATION OF DISABLED PERSONS IN MALAYSIA

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### ABSTRACT

*Due to a significant relationship between poverty and living outcomes of persons with impairment and/or chronic illness, comprehensive data on disabled persons' socio-economic status is of great importance to identify gaps and solutions. For this reason, this paper provides exploratory data on the socio-economic situation of disabled Malaysians such as in education status, employment status, income, expenditure, and access to government aid. 145 research participants take part in the survey representing a diverse background in gender, ethnicity, category of impairment, and state of residence. The majority of them live in an urban area and about one-fifth of them support three dependants or more. With regard to educational status, 133 research participants (91.7%) completed both primary and secondary education. Also, 64 research participants (44.1%) have a post-secondary education level and 74 research participants (51%) are continuing their studies at the time of data collection. Besides that, 36 research participants (24.8%) identify themselves as self-employed, and 26 research participants (17.9%) report as unemployed. Additionally, 50 research participants (34.5%) declare that they have no monthly income at all, while 18 research participants (12.4%) have an inconsistent monthly income. On top of that, almost three-quarters of them do not own a house and more than three quarters have no insurance. The majority of research participants also spend around RM900.00 or less on monthly living expenses. The implication for a national census on disabled Malaysians' socio-economic status, social protection reform, and future research are also discussed.*

*Keywords:* Census, cost of living, disabled persons, expenditure, socio-economic status.

### INTRODUCTION

Recently, on 5 October 2020, the ASEAN Secretariat, the General Election Network for Disability Access (AGENDA), and the ASEAN Disability Forum (ADF) co-organized a webinar on the economic integration of disabled persons in the Southeast Asian region. The webinar focuses on the ASEAN member states' responsibilities and target programs under the ASEAN Economic Community (AEC) pillar in the ASEAN Enabling Masterplan 2025: Mainstreaming the Rights of Persons with Disabilities. Under the AEC pillar, there are 25 key actions that encompass various economic issues such as employment, financial inclusion, entrepreneurship, digital economy, infrastructure, human capital development, healthcare, and smart cities.

In Malaysia, the government plan for economic integration and economic empowerment of persons with impairment and/or chronic illness is evident in the first and second Action Plan for Persons with Disabilities. For example, in the Action Plan for Persons with Disabilities 2016-2022, the attention is not only on increasing the employment rate among disabled persons and encouraging their participation in entrepreneurship, but the plan also encompasses programs to increase the number of community-based rehabilitation centers that produce products and train skilled workers among their clients. Besides that, the government also implements a number of policies to this end through employment quota, tax incentives for the employers, business launching grants, business expansion grants, and disabled worker allowance.

However, with the current realities of the COVID-19 impact on the social and economic sector, there is a strong need for us to review existing social and economic policies, and ultimately the whole institution and system, which govern and affect our basic living necessities and overall wellbeing. In July 2020, the poverty line has been revised from RM980.00 to RM2,208.00 (Mohamad, 2020; Wartawan MalaysiaGazette, 2020), and there is also a proposal to increase the amount of welfare aid and other social safety net programs (Hashim, 2020; "PM Cadang Naikkan Kadar Bantuan" 2020). Having said that, one of the most poignant challenges which we continuously confront is the lack of data (Economic and Social Commission for Asia and the Pacific, 2016, 2018). The present article supplies preliminary and basic data on the socio-economic situation of disabled Malaysians. This paper begins with an examination of the past literature and then proceeds to an explanation of the research methodology. Next, I present an overview of the research findings and continue with its discussion.

### LITERATURE REVIEW

Issues surrounding the socio-economic situation of disabled persons emerge as one of the frequently-discussed topics during the early days of disability studies scholarship, either for theoretical debate or public policy implication, and remain so in the current pandemic era and the future. From the materialist critique (Barnes, 2011; Oliver, 1990, 1999), to the application of capability approach (Benbow, Rudnick, Forchuk, & Edwards, 2014; Burchardt, 2004; Graham, Moodley, & Selipsky, 2013; Mitra, 2006) to the resistance against neo-liberalization in global and local spheres (Malacrida & Duguay, 2009; Mitchell & Snyder, 2015; Mladenov, 2018; Soldatic, 2019). The discussion about the socio-economic situation of disabled persons involves various intersecting aspects such as needs, access, human rights protection, support system, capacity building, cost of living, distribution of resources, and power relations (either in an administrative, legislative, or financial sense).

From the analysis of the data obtained by the World Health Survey in 15 countries, disabled persons are found to have a low level of educational achievement, which in turn reflects in the low participation in the labor market (Mitra, Posarac, & Vick, 2011, pp. 42-44). Furthermore, households with disabled members tend to face difficulty in owning assets and have lesser purchasing power

compare to other families (Ibid, pp. 44-46). In certain countries, there is evidence that disabled people and their families live in chronic poverty and pass down such circumstances to the next generations (Lwanga-Ntale, 2003). According to the mid-term evaluation of the Incheon Strategy, more disabled persons are living in extreme poverty in Asian and the Pacific countries compared to their non-disabled counterparts, even though the percentage of poverty rate among disabled people is declining over the years (Economic and Social Commission for Asia and the Pacific, 2018, p. 13). The situation of women living with impairment is far worse than disabled men due to disabling gender norms which limit their participation in the labor market (Ibid, p. 15).

Problems such as lack of access to education (Graham, Moodley, & Selipsky, 2013; Li, Devine, & Heath, 2008), disparities in job opportunities and income (Li, Devine, & Heath, 2008), lack access to social assistance (Graham, Moodley, & Selipsky, 2013), and forced retirement (Denton, Plenderleith, & Chowhan, 2013) among disabled people cause an enormous impact to their livelihood. Viewing from the perspective of cost of living among disabled people, several factors must be taken into consideration, which is: (1) The differing needs among different categories of impairment, ranging from the high-to-medium level of needs to low-to-medium level of needs, including the possibilities of changing and episodic exigencies; (2) The fact that disabled persons across categories of impairment require a certain amount of essential resources to ensure their effective participation in the society; and, (3) The importance of human services (Smith, Middleton, Ashton-Brooks, Cox, Dobson, & Reith, 2004, pp. 68-71).

For children with physical or cognitive impairment, they may confront with serious socio-economic risks such as hampered growth, exposure to poor health conditions, the likeliness to acquire additional impairment or health problems, and social exclusion (Emerson & Hatton, 2007). In some countries, poverty impels disabled children to engage in beggary (Anam, Bari, & Alam, 1999), which leads to abuses and further exclusion in society. On the other hand, according to one study in Norway, almost half of the mortality cases among disabled male pensioners can be attributed to low socio-economic conditions (Gjesdal, Mæland, Hagberg, & Alexanderson, 2007).

Some scholars assert that the Convention on the Rights of Persons with Disabilities supplies a general strategy to emancipate disabled persons from poverty (Degener, 2016) and brings a positive change in certain countries, for instance, in India (Cobley, 2013). However, Barnes (2011) warns that simply enacting a human rights-based framework, either in the form of an international convention or local legislation, does not challenge the root causes of disablement of persons with impairment and/or chronic illness, which is the discriminatory political and economic systems. Oliver (2012) expands this critique by pointing out the entrenchment of capitalism as the global norm and the free market fanaticism among economists, which I postulate is also steering the world governments' ideology on economic empowerment and integration. Russell (2002) also submits the same argument which she discusses the contradictions between civil rights legislation for disabled people in the United States, which is the American with Disabilities Act, and the capitalist system hence fails to address the structural causes of disabled people's struggles.

One of the earliest scholarly writings about disabled people in Malaysian economic development is an article written by Jayasooria, Krishnan, and Ooi (1997), which discuss the opportunities and challenges of disabled people's inclusion in Malaysian industrialization agenda at that time. In their article, they put forward a few possible pathways in terms of expansion of education and vocational training for disabled people, accessible infrastructure development, support for those who become permanently impaired due to accidents at the workplace, and the roles of organizations catering to the affairs of persons with an impairment in this country. Since then, we can observe quite a number of initiatives from the government of Malaysia, both in employment and entrepreneurship, besides other financial aids. Other entities such as the private sector, non-governmental organizations, and state Zakat centers also provide some forms of monetary assistance and empowerment programs for disabled Malaysians.

Nevertheless, poverty among disabled Malaysians persists. A study by Amin and Manap (2015) finds that factors such as geography, poverty, and disability affect the access of disabled women who are born into low-income families to healthcare services, education, and employment. Over the years, we can observe an increase in research concerning disabled people's economy in Malaysia, either in the context of employers' perception (see for example Nasir, Wong, Chin, Wong, & Choo, 2019; Rosli, Sabri, Wahab, & Zakaria, 2015), Zakat eligibility (see for example Rahman, 2018), and social entrepreneurship (see for example Rozali, Yaacob@Salleh, Manshor, Abdullah, & Bahari, 2016). Despite this development, there is an urgent need for comprehensive and critical interrogation of structural and systemic forces in economy and politics that impact the meaningful participation of disabled Malaysians as consumers, workers, and taxpayers. Our inquiry about the economy of persons with impairment and/or chronic illness in Malaysia must move away from the perspective that frames the disabled community as welfare recipients and national dependent ratio.

Throughout the decades, entities around the world such as governments, international organizations, academicians, and civil societies have come up with a range of strategic proposals to empower and integrate disabled persons in the economic sector. One particularly popular keyword nowadays is 'inclusive', be it in written or rhetoric form. Yet, based on a series of case studies in the Kenyan context, Cobley (2012) finds that specific programs and policies for the disabled community still have its significance and benefits despite the many advantages that come with employing inclusive strategies. This is where the disaggregated inclusion approach, which my colleague and I proposed (Nasir & Efendi, 2020b), is of utmost useful. Disaggregated inclusion refers to:

“... the efforts to incorporate the needs and interests of marginalized groups (in this case is disabled people) as an inherent part of general provisions and at the same time recognize the need to have specific measures or thematic areas affecting the marginalized groups.” (Nasir & Efendi, 2020b, p. 15)

Another important keyword in mainstreaming disabled persons in the development agenda is participation. A review of the inclusion of disabled persons in poverty reduction strategies programs reveals that disabled people do not have the opportunity to be involved in the poverty reduction strategies planning (International Labour Office, 2002). Though the significance of disabled

people's participation is recognized and encouraged, besides the need for leadership and partnership (Kidu, 2011; Pratt, 2011), a critical examination of the nature of such participation is also important. We frequently hear the call to include persons with impairment and/or chronic illness beyond consultative roles in the policymaking process, but the question is whether the governments, policymakers, and policy implementers are ready to share such power with this group.

## METHODOLOGY

The present study employs a quantitative research design as its data collection strategy. I develop an online questionnaire using the google form application. The questionnaire is divided into three main parts. Part A collects the research participants' demographic information, part B gathers their socio-economic status and expenditure, whereas part C inquiries about their expenditure for their dependents. To ensure better comprehension, all questions in the survey are written in Malay and English language. The dissemination of the questionnaire begins in September 2018 and ends in February 2019. I blast the questionnaire on several Facebook and WhatsApp groups at least once every month for six months. I also acquire assistance from a few individuals from different disabled people's organizations to get more research participants for this study. Due to the space limit, the focus of this article is limited to the data obtained from Part B of the survey.

145 respondents completed the online questionnaire. Of these, 58 of them (40%) are female respondents and the remaining 87 respondents (60%) are male. The research participants are also diverse with respect to age group, ethnicity, categories of impairment, and state of residence as shown in Table 1, 2, 3, and 4 below.

Table 1: Age Group

Age Group	Number of Respondents
18-30 years old	66
31-50 years old	57
51-70 years old	21
71 years old and above	1

Table 2: Ethnicity

Ethnicity	Number of Respondents
Malay	116
Indian	14
Chinese	13
Others	2

Table 3: Categories of Impairment

Categories of Impairment	Number of Respondents
Hearing impairment	12
Visual impairment	69
Physical impairment	50
Speech impairment	0
Learning disabilities	8
Mental health problem	1
Multiple impairments	5

Table 4: State of Residence

States	Number of Respondents
Johor	10
Kedah	5
Kelantan	1
Melaka	5
Negeri Sembilan	6
Perak	8
Perlis	0
Pulau Pinang	5
Pahang	24
Selangor	42
Sabah	2
Sarawak	2
Terengganu	4
W.P. Kuala Lumpur	30
W.P. Putrajaya	2
W.P. Labuan	0

With regard to marital status, 86 research participants (59.3%) are single, 55 are married (37.9%), and 4 are divorced (2.8%). In this context, ‘divorced’ status includes widow and widower. As to the type of residential area, 81 research participants (55.9%) reside in urban areas, 25 of them (17.2%) live in rural areas, and the remaining 39 respondents (26.9%) stay in suburban areas. Looking at these numbers, reasons such as higher job opportunities, accessible infrastructure, better connectivity, and more opportunities to acquire training may explain a huge number of research participants live in urban areas. Furthermore, 76 research participants (52.4%) report that they do not have any dependents, 39 research participants (26.9%) have 1-2 dependents, whereas 30 research participants (20.7%) support three dependents or more. In fact, one research participant has more than 6 dependents. For the purpose of this study, dependents may include parents, spouses, children, and other family members.

Due to the unequal number of research participants in relation to gender, category of impairment, ethnicity, and state of residence, I am unable to conduct disaggregated data analysis. Therefore, I will only present a general descriptive analysis of the data in the following section. As such, the findings in this paper must not be generalized and I wholeheartedly support wide-scale longitudinal research on this topic. Nonetheless, I believe this study may offer us preliminary pointers in furthering the research agenda as well as informing public policy advocacy concerning disabled Malaysians’ participation and inclusion in the local economic sector.

**THE LIVING CONDITION OF DISABLED MALAYSIANS**

According to the data gathered, 133 research participants (91.7%) have basic primary and secondary education. Plus, 44.1% (64 research participants) possess a post-secondary education level. However, 11 research participants (7.6%) claim that they do not go to school and one respondent only finished primary education. In 2019, there are about 10,200 classes for disabled children opened throughout the country with the total number of disabled students at the primary and secondary level is 88,419 (Jabatan Penerangan Malaysia, 2019). This is indeed a very positive development, but a zero-reject policy is only the first step to ensure disabled people’s and disabled children’s access to education.

Table 5: Level of Education Qualification

Level of Education	Number of Respondents
Never go to school	11
Primary education	1
Secondary education	69
Diploma	23
Bachelor’s degree	26
Master’s degree	5
Doctoral degree	2
Others	8

As illustrated in Table 6 below, 74 research participants (51%) are continuing their studies at the time of data collection. The data from the Higher Education Statistics in 2009 until 2016 points to a continuous increase in enrollment rate among disabled persons into Malaysian public universities (Nasir & Efendi, 2020a, p. 45). However, enrollment is only one side of the issue. We need to examine graduation rate, drop-out rate, and the ability to convert one’s level of education to gainful employment.

Table 6: Current Education Status

Current Education Status	Number of Respondents
None	71
STPM	11
Matriculation	0
Foundation Studies	0
Diploma	9
Bachelor’s degree	32
Master’s degree	11
Doctoral degree	2
Others	9

Subsequently, the study inquiries about the cost of education for those who are continuing their studies. 21 research participants (28.4%) do not incur any cost for their education. As for the remaining 53 research participants, 25 of them (47.2%) spend RM10,000.00 and below for their education per year. The next bracket with the second-highest number of research participants is RM10,001.00 to RM20,000.00 per year, with 12 research participants (22.6%). Surprisingly, 3 research participants (5.7%) spend more than RM40,000.00 per year on their education.

Table 7: Cost of Education Per Year

Cost (RM)	Number of Respondents
10,000 and below	25
10,001-20,000	12
20,001-30,000	9
30,001-40,000	4
More than 40,000	3

The present study also focuses on the various degree of respondents' participation in the labor market, including full-time students, retirees, and those who are unable to work. As shown in Table 8 below, we can see various degrees of employment status among research participants, where 36 research participants (24.8%) identify themselves as self-employed, and 26 research participants (17.9%) report as unemployed. Besides that, 4 research participants (2.8%) engage in other types of employment arrangements such as working part-time in a non-governmental organization and working three days a week.

Table 8: Status of Employment

Status of Employment	Number of Respondents
Full-time student	28
Studying while working full-time	5
Studying while working part-time	0
Studying while doing business	2
Working full-time in the public sector	20
Working full-time in the private sector	11
Working full-time in NGO	7
Self-employed	36
Unemployed	26
Retired	3
Doing more than 1 part-time jobs	2
Unable to work	1
Others	4

At the time of data collection, 50 research participants (34.5%) have no monthly income, while 18 research participants (12.4%) have an inconsistent monthly income. If we add the number of full-time students, the unemployed, and those who unable to work in table 8 above, it seems at least 5 research participants have some form of income. One possible source of income for these respondents may be welfare aid. It is also worth noting that 32 research participants (22.1%) earn RM1,000 and below per month. If we use the recently revised poverty income line in Malaysia, at least 48 research participants (33.1%) earn RM2,000 and less.

Table 9: Amount of Monthly Income

Amount of Income (RM)	Number of Respondents
No income	50
1,000 and below	32
1,001-2,000	16
2,001-3,000	10
3,001-4,000	4
4,001-5,000	6
More than 5,000	9
Inconsistent	18

The survey also identifies the number of research participants who receive financial aid, either from the government or non-governmental organizations. Only 57.9% of research participants (84 respondents) receive financial assistance from the government. In addition, 11 research participants (7.6%) receive monetary aid from non-governmental organizations. It is interesting to research the reasons that almost half of the research participants do not receive government financial aid. This may relate to eligibility, difficulty in application procedures, and other socio-cultural factors.

Table 10: Number of Respondents Receiving Financial Aid

Source of Financial Aid	Number of Respondents	
	Yes	No
Government	84	61
NGO	11	134

Table 11 shows the number of research participants who own a house. 101 research participants (69.7%) do not own a house at the time of data collection. This means most of the research participants are renting either on their own, sharing with friends, or staying with their parents or siblings. Besides the financial ability to own a house, there may be other social and environmental factors leading to the choice of living arrangement and even when purchasing a house among persons with impairment and/or chronic illness in Malaysia.

Table 11: House Ownership Among Respondents

Ownership Status	Number of Respondents
Yes	44
No	101

For this study, housing cost includes room rent, house rent, or payment for a housing loan. 40 research participants (27.6%) spend RM500.00 and below, whereas 19 research participants (13.1%) spend between RM501.00 to RM1,000.00 every month for housing. On the other hand, 67 research participants (46.2%) report that they have no housing cost. Some of these research participants may live in an institution, training center, staying with family members, or already owned a house.

Table 12: Cost of Housing Per Month

Cost (RM)	Number of Respondents
None	67
500 and below	40
501-1,000	19
1,001-1,500	8
1,501-2,000	3
2,001-2,500	3
More than 2,500	5

To assess the socio-economic status of disabled Malaysians, it is imperative to identify their ownership of any financial products such as saving account, investment account, and insurance. According to Table 13 below, 130 research participants (89.7%) have a saving account, while 41 research participants (28.3%) have an investment account. However, only 31 research participants (21.4%) are insured. Despite the existence of specific insurance package for disabled people in Malaysia, for instance, the insurance package by Agrobank, such packages fail to attract their intended target groups. This may relate to financial capability, insurance coverage, and application procedures.

Table 13: Ownership of Financial Products

Types of Financial Products	Number of Respondents	
	Yes	No
Saving account	130	15
Investment account	41	104
Insurance	31	114

Regarding healthcare expenditure, 56 research participants (38.6%) spend RM500.00 or less, while 19 research participants (13.1%) spend more than RM2,000.00 per year. A simple extrapolation from this data indicates more than a quarter will spend at least RM6,000.00 and about 13% of research participants in this study will spend more than RM24,000.00 in a year for healthcare. It is also important to note that this does not count emerging healthcare necessities and other healthcare-related expenses such as transportation to and from the medical center.

Table 14: Cost of Healthcare Per Year

Cost (RM)	Number of Respondents
None	43
500 and below	56
501-1,000	16
1,001-1,500	8
1,501-2,000	3
More than 2,000	19

Disabled persons use assistive devices to enjoy independent living in their community. Assistive device utilization is thus indivisibly reflected in the cost of living among disabled persons as it becomes an essential part of their daily lives. According to Table 15 below, only 51 research participants (35.2%) in this study use assistive devices. Even though not all persons with impairment and/or chronic illness require an assistive device, it is also vital to understand factors impeding one's utilization of the assistive device, particularly those who are needing it.

Table 15: Assistive Device Usage

Usage	Number of Respondents
Yes	51
No	94

Subsequently, the research participants are asked about their total assistive device expenditure. If we subtract the number of those who are not using assistive devices from the number of those who do not spend any amount of money on assistive devices, 5 research participants seem to bear no such expenditure. These individuals may apply for government aid for such devices. On the other hand, 8 research participants (5.5%) spend more than RM10,000.00 in total on their assistive devices.

Table 16: Assistive Device Expenditure

Cost (RM)	Number of Respondents
None	99
5,000 and below	24
5,001-10,000	14
10,001-15,000	2
15,001-20,000	2
More than 20,000	4

Finally, in this study, I compound daily expenses such as food, clothing, transportation, and other bills into one general expense and refers to it as monthly living expenses. The data in Table 17 shows 34 research participants (23.4%) spend more than RM900.00 per month. The majority of research participants, which is 111 of them (76.6%), spend RM900.00 or less on monthly living expenses.

Table 17: Monthly Living Expenses

Cost (RM)	Number of Respondents
300 and below	49
301-600	40
601-900	22
901-1,200	8
1,201-1,500	14
More than 1,500	12

**DISCUSSION**

Although the findings from the survey obviously cannot be generalized to explain the overall socio-economic situation of Malaysians living with impairment and/or chronic illness, I want to put forward several preliminary useful pointers for further rumination and exploration. First, persons with a different impairment who occupy different demographic and socio-economic positions in society have different needs, hence reflect their cost of living. A university student with severe impairment and have no way to earn an income has certain needs and face certain struggles compare to a person with the same degree of impairment who works in the public sector. The same goes for a woman with chronic illness who unable to work compare to working women with severe impairment. This, in turn, calls for a re-examination of existing policies and programs which supposedly assist disabled Malaysians in the local social and economic sector.

Second, the present study engenders a range of pivotal topics such as food security, access to housing programs, access to social safety schemes, and equity for assistive devices ownership among disabled people. A thorough evaluation of current government policies for disabled persons in Malaysia is expressly needed, especially the review of achievement of target programs underlined in the Action Plan for Persons with Disabilities 2016-2022. Admittedly, this study is just a small first step and does not address the structural and systemic issues of disabled people’s economic participation as espoused by previous scholars. These structural issues include the question about the extent of disabled people’s participation and inclusion in past and current industrial revolutions, the political economy of disablement and/or inclusion through national and state budgets, and ultimately, the underlying episteme for economic empowerment and integration of the disabled community in Malaysia.

Third, as evident in the current realities of the COVID-19 pandemic era, we owe to the citizens of this country, especially the vulnerable groups such as persons with impairment and/or chronic illness, to re-examine and replace our social and economic status quo ideology. Previously, my colleague and I propose the practice of transformative egalitarian politics which constitutes of three principles (Nasir & Efendi, 2019, p. 347):

1. Each person has rights and needs. These rights and needs must be recognized, respected, and fulfilled despite the persons’ differing backgrounds and positions in society.
2. The recognition and embrace of interdependence between humans, including human and non-human interdependence, which transform into a network of care.
3. Willingness to carry out positive and proactive measures to remove disabling political, economic, social, cultural, and technological systems so everyone can enjoy a meaningful life in society.

In that same article, I suppose transformative egalitarian politics can be a balancing force in a capitalistic system, but I no longer believe transformative egalitarian politics is compatible with neoliberal capitalism due to the differing basic nature between the two ideologies. In current realities, I assert that we cannot sustain the status quo driven by the fetishization of money, commodification of human needs, and over-emphasis on self-sufficiency. Though I support radical changes to the whole system, I must be cautious and not encourage idealistic fallacy because such a grandiose undertaking happens gradually. I believe, at the very least, our discussion about the economy must not focus too much on the stock market. Instead, we must come back to the necessities such as healthy food, housing, mobility, and healthcare.

To address the first and third points above, I advocate for the application of a disaggregated inclusion approach in all of the Malaysian social and economic policies, including annual budgets and Malaysian Plan. The 12<sup>th</sup> Malaysian Plan, for example, must have a specific chapter or cluster of actions on socio-economic empowerment and integration of Malaysians with impairment and/or chronic illness, besides ensuring general provisions and chapters in the plan are inclusive for all citizens.

Last but not least, the present study hopefully serves as an initial basis for a nation-wide socio-economic census of the population of persons living with impairment and/or chronic illness in Malaysia. This data is paramount for the government to develop and implement appropriate social protection programs to meet the diverse need of Malaysians with impairment and/or chronic illness. Besides collecting from a huge sample, there are a few improvements that can be made to the survey. One of them is to break up the monthly living expenses into smaller components such as cost of food, cost of transportation, cost of human services (such as sign language interpreters and personal assistant), and utility bills.

## CONCLUSION

We obtain several notable positive findings from the survey, especially concerning educational status among research participants. There are also several troubling points such as housing ownership, insurance, and income. In addressing this issue, I submit the advantages of adopting a disaggregated inclusion approach in national social and economic policies, including in the annual budgets, Malaysian Plan, and so forth. The present study also opens up to a number of crucial and fascinating topics, from the simplest micro issue to broader structural challenges in society. This, hopefully, will interrogate the underlying episteme of social, economic, and political institutions which then are replaced with more inclusive ideology and system for all.

I am aware that the present study only gathers superficial data and has a limited number of samples. Therefore, its findings must not be generalized. Nevertheless, it foregrounds a national socio-economic census of Malaysians with impairment and/or chronic illness. Besides its relevance for appropriate policies and programs, the census can provide much-needed data regarding the situation of disabled persons and contribute to the achievement of the 8<sup>th</sup> goal of the Incheon Strategy. The data can also assist the disabled community and their representative organizations in public policy advocacy, particularly concerning the social safety net for Malaysians with impairment and/or chronic illness.

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