

DEVELOPMENT OF SERVICES FOR PERSONS WITH DISABILITIES IN PAKISTAN

Nasir Sulman*
Shaista Naz**

Abstract

This paper seeks to provide the historical development in the field of special education in Pakistan. Firstly, a number of the current shortcomings in the areas of prevalence, institutional development, and institutional arrangement were explored. In order to arrive at a deeper understanding of the available services for persons with disabilities in the country and to establish a sound theoretical base, the issues were addressed from past records, survey reports, demographic studies and related documents. The services were critically analyzed and was found to be inadequate when compare to them the needs of persons with disabilities.

* Nasir Sulman, Associate Professor, Department of Special Education, University of Karachi, Karachi, Pakistan

** Shaista Naz, Assistant Professor, Sindh Madrasa-tul-Islam University, Karachi, Karachi, Pakistan

Introduction

This study is the first in a series on “Disabilities in Pakistan: A Situation Analysis”. The content is particularly concerned with development of services for persons with disabilities (PWDs) in the country with major focused on prevalence studies, institutional development, institutional arrangement, financing of the services and overall challenges faced by these persons. The area is new and therefore many issues remain unresolved. The development of this concept and its application is likely to play a major role in the development of and changes to the delivery of services in the coming decade. Probably the most critical aspect will be the direct role that PWDs and sponsors play in this process. It is becoming recognized that they must be given or seize the opportunity to play a more dominant role in designing and selecting the types of services that they require, and the people who will be responsible for delivering the services to them.

The study was conducted by a method of ‘desk review’ on internet sources. The desk review primarily draws attention on published literature on the internet; including identifying publications, journal articles, and project reports from national and international institutions working in the country. To verify the authenticity of the data, additional documents were collected and analyzed from a variety of in-country sources.

1. Magnitude of the Problem

There are no reliable data available concerning the prevalence rate of disability in Pakistan; gathering information through door – to – door surveys has not so far been established as a trustworthy method of identifying disabilities in our country, due to social stigma attached to abnormalities of all kinds and dislike by the general population for unwanted interviewers visiting their homes (Ahmed, 1994).¹ Anyhow, there are two sources for the prevalence of disabilities in Pakistan, including:

1.1 Epidemiological Studies

1.2 Population Census

1.1 Epidemiological Studies

A number of studies in Pakistan concerning the health of school children have demonstrated that a large number as students are suffering from anemia, malnutrition, dental problems, defective vision, infected ears, and chronic respiratory conditions (Sajida, 2011²; Monazza & Kingdon, 2010³; Hasnain, Muneeba, Asma & Waqar, 2009⁴;

¹ Ahmed, Tauseef. “The Population of Persons with Disabilities in Pakistan,” *Asia-Pacific Population Journal*, vol. 10, n. 1 (1995), pp. 39-62, <http://www.un.org/depts/escap/pop/journal/v10n1a3.htm> (accessed March 16, 2012).

² Hussein, Sajida Abdul. “Prevalence of Mental Health Disorders amongst 5-11 Years Old Primary School Children in Karachi,” *Pakistan Journal of Pakistan Psychiatric Society*, vol. 8, n. 1, (2011), http://www.ipps.com.pk/display_pages.asp?p=contact&page=contacts, (accessed March 16, 2012).

³ Aslam, Monazza & Kingdon, George., “Parental Education and Child Health – Understanding the Pathways of Impact in Pakistan,” *This paper part of the Research Consortium on Educational Outcomes and Poverty*

Ahmed et al., 2006⁵; Kadir, Fatmi, Janjua, 2005⁶; Miles, 1991⁷). Besides these physical ailments, there is the further hazard of psychological disorders that indicate some of the invisible problems suffered by children from disturbed, poor and discouraging home situations (Hassan, 1971⁸; Tareen et al. 1983⁹).

Durkin, Z. Hasan and M. Hasan (1998)¹⁰ reported the prevalence rate of mental retardation and associated factors based on a population survey to 20 to 9- year – old children in Greater Karachi Pakistan. A two phase survey was implemented during the years 1988-1989. Estimates of the prevalence of mental retardation were 19.0/1000 children.

The disability prevalence according to the findings of the study conducted by Hunzai (1991)¹¹ is 20 percent when applied to the defined population of under 15 years and around 13 percent (by applying the study statistics to the whole population), which means that 15.4 million people are disabled in Pakistan at that time.

In an another study (Khan and Mirza, 1992)¹² was based on the case studies of 1,714 children with severe disabilities in the age range of three to sixteen years at forty nine special education centers in 33 cities of Pakistan. The results shows at the 36.7% of the sample are physically handicapped. However, the percentages recorded in mental retardation, physical handicaps, and visual impairments are slightly different from the percentages presented by the United Nations. Ahmed et al. (2006)¹³ in a sample of

(RECOUP), funded by DFID (2010), <http://www.csae.ox.ac.uk/workingpapers/pdfs/2010-16text.pdf> (accessed March 25, 2012).

⁴ Hasnain, Syed Muhammad; Khan, Muneeba; Saleem, Asma & Waqar, Muhammad Anwar, "Prevalence of Asthma and Allergic Rhinitis Among School Children of Karachi, Pakistan," *Public Medica*, Vol. 46, n. 1(2009), pp. 86-90, <http://www.ncbi.nlm.nih.gov/pubmed/19191144> (accessed April 5, 2012).

⁵ Ahmed, Kamal; Khan, Muhammad Anwar; Khan, Muhammad Dildar; Qureshi, Muhammad; Chaudhry, Tanveer & Gilbert, Craft, "Perceptions of eye health in schools in Pakistan," *BMC Ophthalmology*, Pakistan Institute of Community Ophthalmology (2006), <http://www.biomedcentral.com/1471-2415/6/8> (accessed April 10, 2012).

⁶ Kadir, Muhammad Masood; Fatmi, Zafar & Janjua, Naveed, "Lead pollution and its implications for children in Pakistan," *Department of Community Health Sciences*, Aga Khan University, Karachi, Pakistan, http://www.albany.edu/ihe/Conferences/Almaty-2005/Fatmi_En.pdf (accessed April 12, 2012).

⁷ Miles, Christine., "Mobilizing Skills for Children with Learning Difficulties in Pakistan: A Personal Cross-cultural Experience," *International Journal of Special Education* Vol. 6 n.2 (1991): 201-212.

⁸ Hassan, Khawaja Zaki, *Final Report on Research in Mental Retardation* (Karachi: Jinnah Post Graduate Medical Centre, 1971).

⁹ Tareen, Khalida. et al., *Epidemiological Study of Childhood Disabilities in Pakistan*. Lahore: Unicef, 1983.

¹⁰ Durkin, Z. Hasan and M. Hasan, *Report on Rapid Epidemiological Assessment of Childhood Disability in Pakistan*. Karachi: Jinnah Post Graduate Medical Centre, 1998.

¹¹ Hunzai, Gul, *An Epidemiological Study of the Disabled Children in Pakistan*. Islamabad: Ferozsons (Pvt.) Ltd., 1991.

¹² Khan, Qamarunisa & Mirza, Laeeq, *Trend of Family Marriages in Pakistan*. Islamabad: National Institute of Special Education, 1992.

¹³ Ahmed, Kamal; Khan, Muhammad Anwar; Khan, Muhammad Dildar; Qureshi, Muhammad; Chaudhry, Tanveer & Gilbert, Craft, "Perceptions of eye health in schools in Pakistan," *BMC Ophthalmology*, Pakistan Institute of Community Ophthalmology (2006), <http://www.biomedcentral.com/1471-2415/6/8> (accessed April 10, 2012).

mentally retarded children in Lahore found a male-female ratio of 5 to 1. Akbar (1989)¹⁴ in a nationwide survey of special education facilities for handicapped children found the male-female ratio to be 3 to 1.

Beside the genetic factors, social and cultural factors also contribute to the observed higher number of handicapped boys. In our society, the female child has a long history of being neglected. Parental bias, the need for girls' participation in household chores, early marriages, social taboos, and ignorance regarding the importance of female education have all contributed toward dampening a demand for female education and to the high dropout rates of females (Shaista, 2010).¹⁵ This problem is more severe if the female child has been congenital or acquired handicap (Humaira, 2007).¹⁶ Since most of the surveys are carried out on children in special education centers, greater emphases on male attendance may be one of the reasons for observing higher numbers of disabled boys as compared to girls.

1.2 Population Census

In Pakistan, the data on disabled persons has been collected in all the censuses held to date i.e. in 1961, 1973, 1981 and 1998. Besides these, during 1984-1985., the Federal Bureau of Statistics (FBS) conducted a national survey to collect detailed information on disabled from a sample of 5,638 households. However, the categories and definitions of disabilities were not consistent with those of the 1981 census that restricted the comparison of disability – specific rates. In 1986, a survey was conducted in Islamabad and Rawalpindi districts by the Directorate General of Special Education (DGSE). It is important to note that variable pattern of prevalence of disability has been reported in the censuses and these surveys.

Table 1: Estimates of Disability (1961-85) Pakistan

	1961	1973	1981	1984/85
Total Population	42,880,378	60,509,535	84,253,644	-
Number of Disabled	135,668	1,257,454	371,420	-
Percentage of Total	0.23	2.08	0.44	--
Percentage: Age Group				
0-4	13.4	3.9	3.4	3.4
5-9	-	2.6	8.3	9.2
10-14	16.7	8.8	8.1	10.9
15-19	-	3.8	6.6	9.5
20-29	21.3	12.6	12.5	13.5

¹⁴ Akbar, Rais, A Survey of Special Education Facilities for the Handicapped Children in Pakistan, Unpublished Master's Thesis. Islamabad: Department of Education Planning & Management. Allama Iqbal Open University, 1989.

¹⁵ Naz, Shaista. "Effectiveness of Leadership Models in Special Schools of Pakistan for Raising Quality Impact on Child Performance." PhD diss., University of Karachi, 2010.

¹⁶ Aziz, Humaira. "Community Based Rehabilitation Projects and the Development of Special Need Children." M. Phil diss., University of Karachi, 2007.

30-39	-	9.5	10.4	8.7
40+	48.6	58.8	50.7	44.6
60+	-	40.1	34.7	24.3

Source: Asia-Pacific Population Journal, Vol. 10, No. 1, March 1995

The variations in the prevalence of disability were presumably due to misreporting or underreporting resulting from hesitation on the part of respondents to disclose factual information on disabled persons. Moreover, concerns have also been expressed about the likelihood of enumeration and instrument bias i.e. only severely disabled were enumerated that led to under reporting of overall prevalence of disabilities and handicaps. Inconsistencies in data sets on disability are apparent (Table 1).

Census 1998 recorded 3.3 million (2.56%) disabled persons in Pakistan out of a total population of 129.2 million at that time. Among them, 1.9% was males and 1.4% was females out of 67.2 million and 62 million, respectively, showing more disability among males.

Table 2: Disabled population by Gender and Residence – Pakistan (1998)

Residence	Disabled Population (in million)		
	Male	Female	Total
Urban	0.65	0.45	1.11
Rural	1.26	0.92	2.17
Total	1.91	1.37	3.28

Source: Disabled Population of Pakistan, Dr. Abdul Razzaque Rukanuddin/ PIDE. July 2003, Islamabad

The disability rate per 1000 population was found to be 25.4 for rural and 25.9 for urban areas, however, in terms of absolute numbers, the disabled population was almost double in rural areas as compared to the urban areas.

The prevalence rates are stable in five-year age groups 0-4 to 30-34 and ranges between 19.7 to 21 per 1000 population, except in age group 5-9 where it is 24.2 per thousand population and the increase is more evident among male children. Then it increases gradually up to age 45-49 and reaches 25 per thousand populations. After that, the rate begins to climb steeply and the prevalence reaches to 91 and 142 per 1000 population in age groups 70-74 and 75 years and above, respectively.

It is important to note that only 57% disabled persons have been classified as blind, deaf and mute, insane, crippled or with multiple disabilities. The remaining 43% have been characterized as “others” in spite of the fact that the categories of disabilities were increased from 4 in 1972 to 6 in 1981 and to 7 in 1988 census.

At the time of Census, the highest proportion (55.6%) of the total PWDs in Pakistan was living in Punjab, Sindh had 28.3%, Khyber Pakhtunkhwa had 11.4%, Balochistan had 4.5% and Islamabad had 0.2%. This is astonishingly similar pattern to the distribution of population in Pakistan in 1998.

Table 3: Age, Gender, Residence Specific Prevalence of Disability per 1000 Population

Age (Year)	Rural			Urban			Total		
	Male	Female	Total	Male	Female	Total	Male	Female	Total
0-4	19.9	19.4	19.7	21.1	21.1	21.6	21.3	20.2	20.0
5-9	25.7	20.9	23.4	28.5	28.5	23.4	26.0	26.5	24.2
10-14	20.6	17.2	19.0	24.0	24.0	18.9	21.1	21.5	19.7
15-19	22.1	17.8	19.8	23.4	23.4	20.3	21.9	23.4	20.6
20-24	22.6	17.9	20.2	24.6	24.6	19.7	22.3	23.4	21.0
25-29	23.3	17.2	20.2	23.9	23.9	20.4	22.3	23.5	21.0
30-34	22.5	17.3	20.0	24.9	24.9	21.1	23.2	23.4	21.0
35-39	23.0	18.8	20.9	26.8	26.8	21.6	24.4	24.5	22.3
40-44	26.3	19.8	23.0	30.1	30.1	22.0	26.3	27.8	24.2
45-49	28.2	19.8	24.1	30.8	30.8	22.0	26.8	29.1	25.0
50-54	35.0	25.2	30.4	38.3	38.3	24.8	32.0	36.1	30.9
55-59	39.7	30.4	35.4	45.9	45.9	27.0	37.5	41.8	36.1
60-64	57.8	40.6	42.8	57.6	57.6	37.8	48.6	57.7	49.4
65-69	73.7	52.6	63.5	67.5	67.5	40.8	55.0	70.8	60.9
70-74	109.8	78.9	95.3	97.6	97.6	59.2	79.8	105.8	91.1
75+	177.9	117.3	150.3	145.9	145.9	82.1	116.7	169.7	141.7
All Ages	28.3	21.9	25.2	28.8	28.8	22.7	25.9	28.5	25.4s

Source: Disabled Population of Pakistan, Dr. Abdul Razzaq Rukanuddin /PIDE, July 2003, Islamabad

However, the prevalence rate of PWDs per 100 population was the highest in Sindh (30.5), followed by Punjab (24.8), Balochistan (22.3), Khyber Pakhtunkhwa (21.2), and Islamabad (10.5). The literacy status and educational attainment by sex and rural – urban residence is given in the Table 5.

Table 4: Distribution of Disabled Persons by Province

Province	Distribution of General Population (percentage)	Distribution of Disabled Population (Percentage)
Punjab	55.6	55.6
Sindh	28.2	28.3
Khyber Pakhtunkhwa	11.4	11.4

Balochistan	4.4	4.5
Islamabad	0.2	0.2
FATA	2.4	NA

Twenty-eight percent of the total PWDs 10 years and above were literates, which is expectedly lower than the percentage among the total population. The proportion of PWDs having matric (grade 10) and above level education was the highest in Sindh. For achievement between matric and below degree level was also highest in Sindh (28%) followed by Balochistan and Islamabad (25%), Khyber Pakhtunkhwa (24%) and Punjab (20%). The degree and above education level was again reported high in Sindh (11%), followed by Balochistan (8%), Islamabad (7%), Punjab (4%) and Khyber Pakhtunkhwa (3%).

Table 5: Literacy Rate of Total Population and Disabled population

Residence/ Sex	Literacy Rate		Formal Literate	
	Total Literate Population	Disabled Literate Population	Total Population	Disabled Population
Pakistan				
Both Sexes	43.9	27.5	43.5	27.0
Male	54.8	31.7	54.4	31.3
Female	32.0	21.3	31.6	20.8
Rural				
Both Sexes	33.6	19.9	33.2	19.4
Male	46.1	25.3	46.0	24.9
Female	20.1	12.1	19.7	11.6
Urban				
Both Sexes	63.1	41.6	62.6	41.3
Male	70.0	43.3	69.6	43.1
Female	55.2	39.1	54.6	38.7

Only 14% of the PWDs 10 years and above were working and 5% were looking for work. The gender disparity for economic activity was evident as among those working, 22% were males and 2% females. Among them, the higher proportions were deaf and mute (19%), followed by person who has multiple disability (15%) and crippled (11%). Out of the total 3.3 million PWDs, 99.7% lived in households and only 0.23% (7731 individuals) lived institutions. The remaining 0.07% (2403) was homeless. Overall, a PWD was found in 1 in 8 (13%) household.

The various correlates of disabled household indicate that disabled population is characterized by a general level of poverty. Higher proportion of disabled households are living in substandard housing units with lack of basic facilities and high housing density. They are the one who are severally burdened with high dependency and other socio-economic burden.

2. History of Institutional Development

The history of institutional development in Pakistan can be divided chronologically into five periods. These five eras are:

- 2.1) Situation at independence (1947 – 1950)
- 2.2) Slow progress (1950 – 1970)
- 2.3) Nationalization of special schools & revitalization (1970 – 1980)
- 2.4) Spurt of activities for the disabled persons (1980 – 1990)
- 2.5) Infrastructure extension (1990 to 2011)
- 2.6) Scenario emerged after the 18th Amendment in the Constitution (2010 - till date)

2.1) Situation at independence (1947 – 1950)

Shaista (2010) reported that at the time of creation of Pakistan in 1947, only two notable institutions for the deaf, blind and physically disabled existed: (i) “Ida Rieu Center for the Disabled” deaf and physically disabled children numbering 50 to 60 in Karachi and (ii) “Emerson Institute for the Blind” in Lahore. She further added that “pressure from parents of deaf children resulted in the formation of a “Deaf and Dumb welfare society” at Lahore in 1949, and a special school for the deaf, Gung Mahal, opened afterwards. Social Welfare Department in the Government sector was given the responsibility for education, welfare training & rehabilitation of disabled persons”.

2.2) Slow progress (1950 – 1970)

The special education programs grew slowly in the two decades of 1950s. Majority of the centers/ schools during this period were established in the voluntary or private sector. The subject of special of special education was transferred from social welfare to Education both at Federal and Provincial levels, and it received the lowest priority (Sindh and Punjab did not comply with this change).

The National Planning Board took due cognizance of the vital need and problems of the disabled persons, and included a specific program “Services for the physically Handicapped” in the very First Plan of National Development (1955-60). However, the program could not be implemented due to lack of administrative support, funds, and trained personnel (Aqeela, 2004).¹⁷

Children with various impairments and disabilities continued to be part of the normal enrolment throughout the primary and even secondary school classes. The commission on National Education Pakistan (1960) recommended that government should be responsible for training of teachers to serve in institutions for the handicapped urn by private philanthropists but serious contemplation was not given to till 1980s.

¹⁷ Khatoon, Aqeela. “A Historical and Evaluative Study of Special Education in Pakistan.” PhD diss., University of Karachi, 2004.

2.3) Nationalization of special schools & revitalization (1970 – 1980)

Fatima (2007)¹⁸ identified that the progress for the education, welfare, care and uplift of the disabled persons received a serious setback with the Nationalization of Education Program under Martial Law Regulation No. 118 in 1972, as it stopped philanthropic investment. This view further seconded by Shaista (2010)¹⁹ and concludes as “The spirit of selfless services with missionary zeal was turned into a bureaucratic setup and in 1970s status quo was maintained in the 65 centers of the public sector.”

Aqeela (2007)²⁰, for instance, pointed out that after the change of government in 1977, and with the special interest of the new Head of the State in disabled persons due to personal reasons, the program was revitalized. The fifth Five-Year Plan (1978-83) allocated a sum of Rs. 26 million for the purpose as compared to a meager sum of Rs. 2 million provided in the First Five- Year Plan. The program was transferred to the Ministry of Health and Social Welfare.

In 1979, the international year of the child was observed in Pakistan and the needs problems of the disabled were highlighted in a workshop inaugurated by the then President of Pakistan. This was followed by a number of workshops and seminars at Divisional Headquarters. A National Consultation followed, in which the then president met a number of representatives of the voluntary organizations. These measures brought the issue of the disabled to the forefront at the national level (Fatima, 2008).²¹

2.4) Spurt of activities for the disabled persons (1980 – 1990)

The International year of Disabled Persons 1981 was observed for promoting and pursuing the cause of special education and training of disabled persons in pursuance of the United Nation General Assembly Resolution. It created unprecedented interest and awareness among the Government and non-government organizations, institutions, people, and above all among the disabled persons themselves. The then President of Pakistan himself provided leadership in the observance of the International Year of Disabled Persons as Patron-in-Chief of the National Committee, IYDP, 1981. He issued a number of directives to the Ministry of Health and Social Welfare to accord this sector due priority to provide organizational and administrative structures, services and delivery systems, funds, personnel, equipment, institutional buildings, transport, etc.

Shahida (2004)²² has commented that the disabled persons (Employment & Rehabilitation) 1981 was promulgated which provided one percent quota for the

¹⁸ Fatima, Kaniz. “The Problems of Prevention and Treatment of Disabilities in Pakistan in an Environmental Perspective.” PhD diss. University of Karachi, Karachi, 2007.

¹⁹ Naz, Shaista. “Effectiveness of Leadership Models in Special Schools of Pakistan for Raising Quality Impact on Child Performance.”

²⁰ Khatoon, Aqeela. “A Historical and Evaluative Study of Special Education in Pakistan.”

²¹ Fatima, Kaniz. “The Problems of Prevention and Treatment of Disabilities in Pakistan in an Environmental Perspective.”

²² Sajjad, Shahida. “The Status of Vocational Training Programs for the Disabled Persons in Pakistan.” PhD diss., University of Karachi, 2004.

compulsory employment of disabled persons in each establishment having more than 100 employees. National Council for the Rehabilitation of Disabled Persons (NCRDP) and its provincial chapters Provincial Council for the Rehabilitation of Disabled Persons (PCRDP) were created to implement and employment of disabled.

In pursuance of the U.N. Assembly proclamation, Decade for the Disabled was observed in Pakistan from 1982 to 1991, to follow-up the achievements of IYDP-1981. A National Task Force was formed to implement the directives of the President as well as recommendation and findings of the conferences/ workshops/ seminars and studies.

A Cabinet Committee was commissioned to assess the existing situation of disabled children and to prepare a Five-Year Plan for the special education and training. Several national and international experts were invited to contribute in the development of the program.

Shaista (2010)²³, in her analysis of the situation of special education in Pakistan reported that four-model National Special Education Centers were established in Islamabad, one each for visually handicapped (VH), hearing impaired (HI), physically handicapped (PH) and mentally retarded (MR). It was decided to establish 127 new special schools in the provinces: 102 by the governments and 25 by the NGOs at a cost of Rs. 623.90 million, and 14 special schools in FATA and FANA worth a sum of Rs. 52.9 million, while Rs. 31.5 million was proposed to be expanded to set-up 8 special schools in Azad Jammu and Kashmir. Thus a total sum of Rs. 835.225 million was the financial layout to implement the plan. Those estimates included cost of land and building, staff, equipment, transport, miscellaneous items and sundries.

During the period, the following major milestones were achieved:

- **The Directorate General of Special Education** was established at the federal level in Islamabad in 1985. The DGSE had been endeavoring to achieve its goals and to date have established several institutes, center/ schools for the education and training of disabled persons. National Institutes established at Islamabad were as follows.
- **National Institute of Special Education (NISE)** established in 1986 and is dedicated to the task of developing specialized training courses for teachers of government and non-government institutions.
- **National Library & Resource Center (NL&RC)** established in 1986 serves as a resource center for printed and audio- visual material on SE and disabilities.
- **National Training Center for Special Persons (NTCSP)** established in 1986 with the prime objective to provide vocational training and rehabilitation to persons falling under VH, HI, MR and PH categories.
- **National Mobility and Independence Training Center (NMITC)** was established in 1986 to conduct courses and instill confidence among visually handicapped for

²³ Naz, Shaista. "Effectiveness of Leadership Models in Special Schools of Pakistan for Raising Quality Impact on Child Performance."

their independent mobility on roads, shopping areas, work place and in their community.

- **National Trust For the Disabled (NTD)** was established in 1988 under the Charitable Endowment Act 1980 to establish model institutions for the care and rehabilitation of the disabled; to prescribe and undertake specialized programs of training and instructions; to conduct research about the nature and extent of problems of the disabled; to arrange financial assistance and advisory services for individuals/ families; and to deal with national and international organization. Currently NTD is independently running 3 SE schools, 2 in Sindh and 1 in Punjab.
- **The First National Policy** for the Education and Rehabilitation of disabled was formulated and adopted in 1985-86 soon after the establishment of DGSE which was reviewed and revised on the basis of field operations in 1988.

2.5) Infrastructure extension (1990 to 2011)

Special education and vocational training centers have been established in Islamabad and at provincial headquarters in Lahore, Karachi, Quetta and Peshawar and at several Divisional and District Headquarters. The detail of centers established is given as under:

Table 6: Special Education & Vocational Training Centers at Federal and Provincial Levels

Location	Special Education Center by Type				
	Hearing Impaired (HI)	Mentally Retarded (MR)	Visually Handicapped (VH)	Physically Handicapped (PH)	Total
Islamabad	1	1	1	1	4
Punjab	5	5	5	4	19
Sindh	1	2	3	2	8
Khyber Pakhtunkhwa	2	2	2	2	8
Balochistan	1	1	0	1	3
Northern Areas	1	0	0	0	1
AJK	0	0	0	1	1
Total	11	11	11	11	44

Source: DGSE, Islamabad, March 2004

2.6) Scenario emerged after the 18th Amendment in the Constitution (2010 - till date)

After the 18th amendment in the constitution of Pakistan, special education institutions devolved in all over Pakistan, which were previously run by federal government. Now, there are 48 institutions working actively in the Sindh province which are providing the following facilities: Justified and transparent provision of facilities to the students of its special education centers/ schools/ institutes including uniform; free pick and drop facility; nutrition; school bags, books, pencils, reading / learning material at free of cost;

provision of voice hearing aids / equipment; wheel chair for persons with physical handicapped; and white can for children with blindness. Finally, provide stipend to the staff who is working on voluntary basis in 19 special education centers in the Sindh province.²⁴

3. Institutional Arrangements

Institutional arrangements for the services of persons with disabilities in Pakistan are discussed under following levels:

- 3.1 Special Education
- 3.2 Inclusive Education
- 3.3 Vocational Training
- 3.4 Community Based Rehabilitation

3.1 Special Education At Federal Government Level

The programs for PWDs are dealt under the Ministry of Women Development, Social Welfare and Special Education (MoWD, SW & SE). Like other Ministries this is also headed by a Minister and implementation is managed by a Secretary who is assisted by an Additional Secretary and other officers in the hierarchy. The three components of the Ministry, as visible by its name, are clearly demarcated and function independently within their given charter of duties. It is to be noted by Sulman (1998)²⁵ that three major social sector programs are being managed under the umbrella of one Ministry, which puts a very heavy workload on top hierarchy. Hence, any program that has stronger political backing receives priority for interventions and development.

The DGSE is the nuclear department working for the disabled persons. A Director General, who oversees the functions of 6 directors, heads the Directorate. Director I is Admin and Finance, who also deals with administrative matters, finance and accounts. Director II supervises development of physical infrastructure. Director III is for Planning and Development (P&D), who monitors the ongoing projects and plans new projects in consultation with other directors. Director IV, V and VI are responsible for overseeing the functioning of over 50 Special Education institutes within their jurisdiction and also maintain liaison and support for over 20 NGOs. Out of the three components of the Ministry, it is encouraging to note that the DGSE service network for education and rehabilitation of disabled has spread up to several divisional and to some district headquarters (Aqeela, 2007).²⁶

²⁴ First Draft of Provincial Policy for the Special Education & Rehabilitation of PWDs in Sindh 2012-20 <http://www.scribd.com/doc/94104470/First-Draft-of-Provincial-Policy-for-the-Special-Education-Rehabilitation-of-PWDs-in-Sindh-2012-20> (accessed April 29, 2012).

²⁵ Sulman, Nasir. "Effectiveness of Home Based Instructional Program for Disabled Children in Pakistani Society: A Study of Families Coping with Disability." PhD diss. Hamdard University, 1998.

²⁶ Khatoon, Aqeela. "A Historical and Evaluative Study of Special Education in Pakistan."

In 1982, Four Rehabilitation Centers, one each for the four main disabilities (VH, MR, PH and HI) were established in Islamabad under Ministry of Health and Social Welfare. The current enrolment in these centers is presented in Table 7.

Shaista (2010)²⁷ maintained that the reported services at the center includes assessment (medical physical, psychological), education programs, parents counseling and guidance, home-based program for children who cannot attend the school regularly, referral services, co-curricular activities, (outings, stage show, social gatherings), pre-vocational skills, vocational training activities, training in practical life skills (cooking etc. for girls), indoor and outdoor sports. Disability specific educational aids in the centers of HI and VH are available.

Table 7: A Profile of National SECs

National SEC	No of Students		Level of Education	Average of Size of Class
	Provision in PC-1	Actual		
		M F Total		
For MR	200	117 63 180	Formal and informal education	11 – 12
For HI	400	238 133 371	Nursery to College	15 – 20
For PH	500	93 49 142	Nursery to Matric	15 – 20
For VH		87 60 147	Nursery to Matric	15 – 20
Total		535 305 840		

Source: Monthly Report of the Centers, April 2004

After the establishment of DGSE in 1985, 40 SECs were established in all provinces, AJK and Northern Area during 1986-87. Following table shows their province and disability wise distribution.

Table 8: DGSE Managed SECs in Provinces

Province	SECs for MR	SECs for HI	SECs for HV	SECs for PH	Total
Punjab	6	5	4	4	19
Sindh	3	1	3	1	8
Khyber Pakhtunkhwa	2	2	2	2	8
Balochistan	1	1	-	1	3
AJ& K	-	-	-	1	1

²⁷ Naz, Shaista. "Effectiveness of Leadership Models in Special Schools of Pakistan for Raising Quality Impact on Child Performance."

Northern Area	-	1	-	-	1
Total	12	10	9	9	40

Source: Monthly Report of the Centers, April 2004

PC-1 proposed, on an average, admission of 60 children each year from nursery to class V. As per notification of DGSE, every SEC has formed body of Parents Teachers Association (PTA) that has been registered as an NGO under the Voluntary Social Welfare Agencies (Registration and Control Ordinance) 1961. With the financial contribution by PTAs, may SECs have managed to increase the number of students over hundred. PTAs mainly provide funds or hiring of extra staff (teachers, speech therapist, and occupational therapist) and funds for POL, uniforms, books and extra-curricular activities.

Table 9: Province Wise Current Enrolment in 40 SECs

Province	Number of Students			Male - Female Ratio in %
	Male	Female	Total	
Punjab	1058	674	1732	61% - 39%
Sindh	402	199	601	67% - 33%
Balochistan	138	50	188	73% - 27%
Khyber Pakhtunkhwa /N.A	379	173	552	69% - 31%
Total	1977	1096	3073	64.5% - 35.5%

In the context of the present discussion Fatima (2008)²⁸ has pointed out that the monitoring of each center is mainly done through assessment of Monthly Progress Report by the respective Director at DGSE, or rarely by visit. NISE that trains the teachers has no role in monitoring. It was learnt that the performance of these centers vary from excellent to poor. The reasons are several, such as posting of in appropriate staff (e.g. physiotherapist working for training of HI children.), non-availability of assistive aids (e.g. hearing aids), lack of interest in making proper assessment of children, etc.

Overtime, the DGSE institutions have accumulated a considerable knowledge and experience in education and vocational training of disabled children and adolescents. Despite above-mentioned shortcomings, the established infrastructure and services provided by DGSE has served as a motivating factor and model to the provincial governments to replicate. During 1994-95, National Trust for the Disabled established

²⁸ Fatima, Kaniz. "The Problems of Prevention and Treatment of Disabilities in Pakistan in an Environmental Perspective."

three SECs in Karachi, Mianwali and Naushero Feroze. All these centers have classes for children with all disabilities from nursery to class V (Sulman, 1998).²⁹

Table 10: Profile of NTD Centers

Location	Current enrolment	Total attended till 2003	Additional Services
Karachi	115 (68-M – 47F)	233	Physiotherapy, occupational therapy, home based programs, vocational training
Mianwali	98 (68M – 30F)	135	
Naushero Feroz	41 (35M – 6F)	132	

SECs of Provincial Governments and NGOs

Research studies by Shaista (2010)³⁰, Fatima (2008)³¹ and Aqeela (2007)³² demonstrated that in general, NGOs are providing services to a large number of PWDs and share considerable workload of the government. For example, there are two NGOs in Karachi (Ida Rieu and DEWA) that have 1700 students as compared to about 4000 students in 44 centers managed by DGSE. Services are either free, at subsidized costs or in some cases on profitable charges.

There are about 117 NGOs working for the disabled in Pakistan, however, the information about total number of enrolment with all of them could not be available to the investigator.

Table 11: Number of NGOs for Disabled in Pakistan

Location of NGOs	Number of NGOs
Islamabad	6
Northern Area	1
Balochistan	4
Punjab	54
Khyber Pakhtunkhwa	24
Sindh	28
Total	117

Source: Information Collected during the Study

²⁹ Sulman, Nasir. "Effectiveness of Home Based Instructional Program for Disabled Children in Pakistani Society: A Study of Families Coping with Disability."

³⁰ Naz, Shaista. "Effectiveness of Leadership Models in Special Schools of Pakistan for Raising Quality Impact on Child Performance."

³¹ Fatima, Kaniz. "The Problems of Prevention and Treatment of Disabilities in Pakistan in an Environmental Perspective."

³² Khatoon, Aqeela. "A Historical and Evaluative Study of Special Education in Pakistan."

Most NGOs are providing special education and/or vocational training services with varying degree of quality ranging from fair to high. The majority of the beneficiaries belong to middle and lower middle income groups, mostly from the urban areas. The provincial governments and NGOs manage 209 SECs (92 provincial governments and 117 NGOs), while armed forces have established 10 SECs.

Likewise, Shaista's (2010)³³ study of special education in Pakistan indicated that about 85% of these centers have educational provision till primary level, and only 35 SECs for HI & VH have middle or matric level education. Four for HI have graduate level education and are located in Karachi, Lahore and Rawalpindi, and one (DEWA in Karachi) is being converted into a University. One (Ida Rieu in Karachi) also has degree level education for blind as well. Almost all SECs have provision for prevocational or vocational training units. Some have free boarding and lodging facilities. It is important to note that more than 70% of teachers do not have relevant educational qualification (most hold B.A. or M.A. degree in any subject of Arts or Science). However, over time they have acquired considerable skills for effectively meeting the needs of their jobs (Hina, 2010).³⁴

Table 12: SECs Run by Governments and NGOs

Province	Hearing Impaired		Mental Retardation		V.H		PH		Multiple Disabilities Centers	
	Govt	NGO	Govt	NGO	Govt	NGO	Govt	NGO	Govt	NGO
Punjab	32	11	3	12	11	14	3	8	1	9
Sindh	2	6	1	10	1	6	Nil	1	14	5
Khyber Pakhtunkhwa	9	5	1	2	7	7	Nil	5	3	5
Balochistan	1	2	1	Nil	1	1	1	Nil	-	1
Islamabad	-	1	-	3	-	-	-	-	-	2
N.A.	-	-	-	-	-	-	-	-	-	1
Total	44	25	27	27	20	28	4	14	18	23
Grand Total	69		33		48		18		41	

Aqeela (2010)³⁵ reported that out of 92 provincial government SECs, 33 are for HI and only 3 for MR, though the percentage of HI within the universe of disabled is half (10%) as compared to the percentage of MR (20%) 50. the enrolment profile shows 3492 HI

³³ Naz, Shaista. "Effectiveness of Leadership Models in Special Schools of Pakistan for Raising Quality Impact on Child Performance."

³⁴ Fazil, Hina. "Development and Validation of Teaching Learning Resource Package for Children with Autism." PhD diss., University of the Punjab, 2010.

³⁵ Khatoon, Aqeela. "A Historical and Evaluative Study of Special Education in Pakistan."

students attending the schools and one college and only 156 MR attending 3 schools for them. One apparent reason for this staggering difference of disability wise beneficiaries is apathetic attitude towards MR children. The other reason may be the presence of Teacher Training Institute for HI (Gung Mahal) since 1954. The Institute has been running 1-year diploma course (TD) for about half a century.

Hina (2010)³⁶ in her study about facilities and services available to children with Autism pointed out that the special education facilities in Baluchistan are nominal. There is only one education complex (having separate sections for HI, VH, PH, MR) of provincial government located in Quetta, and 2 centers for HI, run by NGOs. The link between Non-Governmental Organizations (NGOs) and DGSE is mandated, however, functionally it is not optimally productive.

3.2 Inclusive Education

The GOP in its Perspective Development Plan 2001-11 spells out the need for integrated education of disabled in regular schools in all provinces. The plan states that all government schools would have provisions such as training of regular school teachers in Special Education and complimentary teaching aids and equipment for implementation of integration plan. Further an administrative mechanism at State spells out the need for integrated education of disabled in regular schools in all level would be put on place to achieve the goals of integration during the plan period extending 2001-11. However the issue has been ignored or relegated to the background.

Currently many children with SEN are in regular schools, without any additional or special assistance. These children experience difficulties in regular schools and find themselves eventually pushed out of the school system particularly after primary education (Sabiha, 2009).³⁷

The current thinking towards inclusion of children with special needs in regular classrooms poses a considerable challenge. Rahat (2005)³⁸ claimed that currently there is no system led provision for their transition from SE into the regular school system. Such inclusion is expected to expose students to individual differences and encourage social interaction between special and normal children.

3.3 Vocational Training

The programs and services for vocational rehabilitation (VR) for disabled persons in Pakistan are limited. Currently a variety of VR training programs are being pursued by the government and NGO organization to increase a disabled individual's opportunity to

³⁶ Fazil, Hina. "Development and Validation of Teaching Learning Resource Package for Children with Autism."

³⁷ Haider, Sabiha. "Development of a Model for Introduction of Inclusive Education in Karachi's Primary School." PhD diss., University of Karachi, 2009.

³⁸ Hussain, Rahat. "Problems & Prospects of Inclusive Education in Pakistan." M. Phil diss., University of Karachi, 2005.

earn a steady income. Training programs in tailoring, embroidery, carpet weaving, handloom, block printing, candle making etc. have been developed and implemented to prepare children with disabilities move from the school environment to a work situation. These programs consist of a combination of skills instruction and practical training in a vocation (Shahida, 2009).³⁹

The first Vocational Training Center for the Disabled (VTCD) now called National Training Center for Special People (NTCSP) was established by DGSE in 1986. It caters for person with all 4 types of disabilities for both boys and girls. It had the mandate to: (i) provide vocational training in specified trades. (ii) Facilitate provision of job placement services for successful trainees. (iii) Demonstrate to the community the ability of handicapped to become contributory members of the society. It is the only vocational center, which gives a certificate on completion of successful training. Since 1987 to 2003, a total of 1901 (1514 male and 338 female) disabled persons have attended this center and out of these 553 passed out with a certificate. According to the limited follow up, 149 of these were found employed.

In the last 4-5 years DGSE has set up a VTCD at all the four provincial Headquarters, however the information about the total enrolment to date is not available. All the five centers provide training in 19 trades, including computer-training programs. Besides these, 12 other exclusive VTCD are working in Pakistan as shown in the Table 13.

Table 13: Vocational Training Centers for Disabled (VTCD)

Location	Fed Govt. Centers	Provincial Govt. Center	NGO/Private Sector	Total
Islamabad	1	-	-	1
Punjab	1	4	2	7
Sindh	1	-	3	4
Khyber Pakhtunkhwa	1	-	3	4
Balochistan	1	-	-	1
Total	5	4	8	17

Source: Information collected during the field visits

In Sindh 14 RCMH also have provisions for vocational training in few trades along with the classes from 1 to 5. They take children of all the four categories (PH, VN, HI, and MR). The number of students reported by the concerned officers of Directorate ranges between 30 at a time.

In Punjab, at each district (34 in all), a District Rehabilitation Training Committee has been established under Directorate General of Social Welfare. These committees give medical/ financial assistance for self- employment. The report for the year 2003,

³⁹ Sajjad, Shahida. "The Status of Vocational Training Programs for the Disabled Persons in Pakistan."

mentions that 364 persons were employed through the funds of these committees in 11 districts. No information is available for 23 districts.

Some well-organized pressure groups particularly of blind (Pakistan Association of the Blind) and to some extent deaf (Pakistan Association of the Deaf) advocate for themselves, develop employment plans and identify appropriate employers. Darakhashan, a vocational training center in Rawalpindi managed by Pakistan Foundation for Fighting Blindness (PFFB) is the only vocational facility, which targets women with disabilities (Farhat, 2011).⁴⁰

3.4 Community Based Rehabilitation

Efforts to increase the accessibility of services in a community setting are being pursued through Community Based Rehabilitation (CBR) programs both in the public and NGO sectors. Some of CBR programs are complimented with micro credit programs.

In 1992-93, the DGSE launched, Community-based Rehabilitation (CBR) approach by the name of Vocational Rehabilitation and Employment of Disabled persons with Community Participation (VREDP). It had four major objectives: (i) developing a cost effective, non – institutional CBR program to reach larger number of disabled (ii) creating awareness and motivating local communities, disabled persons and their families to participate in the rehabilitation process. (iii) Preparing a national policy for vocational rehabilitation of disabled persons (iv) networking of existing resources.

As suggested elsewhere (Humaira, 2005)⁴¹, the program works through three service Centers, located in Islamabad, Karachi and Gujrat. The staff of Service Center reaches out to low-income suburban localities and nearby villages, and makes contact with any established platform such as local NGOs. They select and train volunteers who work directly under NGO representative and register, assess and evaluate the disabled persons on the formats and system given by the program officials. They also explore and help mobilize the existing community resources (human, institutional, social and financial). The training in the local trades is arranged either through apprenticeship or in the available industrial home or any training Institute in the area of work. Since February 1994 to date they have mobilized about 50 NGOs, trained over 300 volunteers and registered 2215 disabled.

The project has developed a handbook on CBR Model for Vocational Rehabilitation of the Disabled, a manual for training of community based rehabilitation (CBR) managers, and a Manual for training of community volunteers. It also mobilized Lahore Chamber of Commerce and industries, which in 1995 started an Employment Cell for Disabled Persons. Recently the LCCE members have formed an NGO named Lahore Association of Businessmen for Rehabilitation of Disabled (LABARD). This initiative has help 238 disabled persons to get employment.

⁴⁰ Abbas, Farhat. "Status of Special Education in Pakistan." *Monthly Pakistan Special*, July, 2011.

⁴¹ Aziz, Humaira. "Community Based Rehabilitation Projects and the Development of Special Need Children."

There are a variety of national schemes that are designed to promote self-employment both general and specific in character. Coupled with them is a wide range of micro credit and skill development programs designed to encourage self-employment: The Small Medium Enterprise Development Agency (SMEDA) is run as public – private enterprise and is intended to encourage entrepreneurship through the provision of grants and micro loans (Shahida, 2009).⁴²

Furthermore, micro credit granting agency staff often found to be not very helpful in disseminating information. For potential disabled entrepreneurs, information and advice is hard to come by and micro credit employees are being perceived to be obstructive. Considerable confusion and apprehension has also been generated by the procedures, pre-conditions and jargons used in the field. Shaista (2010)⁴³ concluded her literature review as “those who provide training and advice in micro credit field also offered some interesting insights; they do not recollect any significant numbers of enquiries from disabled people about micro credits and self-employment.”

Two service centers of VREDP (Islamabad and Karachi) have a small revolving loan scheme at 8% markup rate, operating since 2000-2001. A loan of Rs. 5000/= is given and the clients are helped and guided to start a small income generation activity (mostly setting up a small shop or a tailoring enterprise). Since its inception, 33 individuals have been given loan of a total of Rs. 154,480 and the recovery has been 90%.

An NGO in Karachi (Pakistan Sports and Cultural Society) and another in Lahore (Pakistan Society for Rehabilitation of Disabled) also have Micro credit scheme to encourage self-employment of persons with disabilities. There is a heavy VR demand, some well-organized activists/ pressure groups from disabled community such as PAB choose their own vocational goals; advocate for themselves; develop employment plans; and identify appropriate employers.

Nevertheless, several of the potential employers realize they were not doing enough to serve people with disabilities and not one favored any negative discrimination, though there were concerns about not understanding disabled people's needs and a large proportion of businesses have not received information specific to disability issues. The situation is compounded by poorly developed networking between disability service providers in both public and the private sectors. Public sector officials have limited or non-existent professional contacts with disability NGO, they find them not very welcoming and are wary of treading on someone else's territory. More positively, however, all disability service providers are making contributions within their resources.

Since a desirable outcome of the education experience is paid employment, the statistics in the foregoing on the employment of those with disabilities are very troubling. There has been surprisingly little thought being given on how VR services need to change in order to meet the very different needs of disabled people in the twenty-first century.

⁴² Sajjad, Shahida. “The Status of Vocational Training Programs for the Disabled Persons in Pakistan.”

⁴³ Naz, Shaista. “Effectiveness of Leadership Models in Special Schools of Pakistan for Raising Quality Impact on Child Performance.”

There is an overall lack of thinking to review traditional approaches to vocational rehabilitation. There is certainly a concern that disabled people are actually being affected more than others by changes in the labor market attributed to the impact of high technology. In spite of the various VR programs and affirmative action plans such as the Disability Quota Employment Scheme, designed to ameliorate their situation. Nonetheless, there is also evidence that generally disabled people do not have the skills that are increasingly required in the present day job market and that this is also due to the barriers they face in accessing high technology based education and training. It is important to bear in mind that the changes in labor market may be affecting disabled people more than others (Shahida, 2009).⁴⁴

Conclusion

This paper has reviewed the issue of situation analysis in the context of services for persons with disabilities have been developed in Pakistan. These services can have unintended negative effects due to their limitations on the various aspects of the adjustment, autonomy and self-reliance of persons with disabilities who are struggling in the country. As a consequence, there is a major service task in pursuing both quantity and quality in terms of the impact of services on person's lives.

⁴⁴ Sajjad, Shahida. "The Status of Vocational Training Programs for the Disabled Persons in Pakistan."