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## Overcoming Inequalities

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# Acronyms

AAA	Arjumand and Associates
ADB	Asian Development Bank
APWA	All Pakistan Women's Association
AusAID	Australian Agency for International Development
BMF	Biwako Millennium Framework for Action
CAT	United Nations Convention against Torture and Other Cruel, Inhuman or Degrading Treatment of Punishment
CBO	Community Based Organisation
CBR	Community Based Rehabilitation
CEDAW	Convention on the Elimination of All Forms of Discrimination against Women
CIDA	Canadian International Development Agency
CRC	United Nations Convention on the Rights of the Child
CRPD	Convention on the Rights of Persons with Disabilities
CSO	Civil Society Organisation
CSR	Corporate Social Responsibility
DAWN	Development Alternatives with Women for a New Era
DFID	Department for International Development of the United Kingdom
DGSE	Directorate General of Special Education
DPI	Disabled Peoples' International
DPO	Disabled Persons Organisation
FWB	First Women Bank
FATA	Federally Administered Tribal Areas
GAD	Gender and Development
GDI	Gender-related Development Index
GEM	Gender Empowerment Measure
GGG	Global Gender Gap
GRAP	Gender Reform Action Plan
GRB	Gender Responsive Budgeting
GSP	Gender Support Programme
HDI	Human Development Index
IBRD	International Bank for Reconstruction and Development
ICCPR	International Covenant on Civil and Political Rights
ICD-10	International Statistical Classification of Diseases and Related Health Problems, 10 <sup>th</sup> Revision
ICERD	International Convention on the Elimination of All Forms of Racial Discrimination
ICESCR	International Covenant on Economic, Social and Cultural Rights
ICF	International Classification of Functioning, Disability and Health
ICIDH	International Classification of Impairment, Disability and Handicaps
ICRMW	International Convention on the Protection of the Rights of All Migrant Workers and Members of Their Families
ILO	International Labour Organization
IMF	International Monetary Fund
IYDP	International Year for Disabled Persons
JICA	Japan International Cooperation Agency
LABAD	Lahore Business Association of Disabled
LGO	Local Governance Ordinance
LHW	Lady Health Worker
LSLS	Lahore Speech and Language School
MDG	Millennium Development Goal

MoSW&SE	Ministry of Social Welfare and Special Education
MoWD	Ministry of Women Development
MTDF	Medium Term Development Framework
NCRDP	National Council for the Rehabilitation of Disabled Persons
NCSW	National Commission on the Status of Women
NGO	Non-Governmental Organization
NIH	National Institute for the Handicapped
NISE	National Institute of Special Education
NL&RC	National Library & Recourses Center
NMCH	National Maternal and Child Health Strategic Framework
NMITC	National Mobility and Independence Training Center
NOWPDP	Network of Organizations working for Persons with Disabilities, Pakistan
NPA	National Plan of Action
NPDEW	National Policy for Development and Empowerment of Women
NPPD	National Policy for Persons with Disabilities
NTCD	National Training Centre for the Disabled
NTCSP	National Training Center for Special Persons
NTD	National and Provincial Trusts for the Disabled
OMCT	World Organisation Against Torture/Organisation Mondiale Contre la Torture
PCO	Pakistan Census Organization
PDF	Pakistan Disability Forum
PIDE	Pakistan Institute of Development Economics
PLC	Public Listed Company
PPAF	Pakistan Poverty Alleviation Fund
PPP	Public-Private-Partnership
PRSP	Poverty Reduction Strategy Paper
PSDP	Public Sector Development Programme
PTCL	Pakistan Telecommunication Company Limited
PTV	Pakistan Television Corporation
SDC	The Swiss Agency for Development and Cooperation
UN	United Nations
UNAIDS	The Joint United Nations Programme on HIV/ AIDS
UNCTAD	United Nations Conference on Trade and Development
UNDP	United Nations Development Programme
UN ESCAP	United Nations Economic and Social Commission for Asia and the Pacific
UN-ESCWA	United Nations Economic and Social Commission for Western Asia
UNESCO	United Nations Educational, Scientific and Cultural Organization
UNFIP	United Nations Fund for International Partnerships
UNFPA	United Nations Population Fund
UNICEF	United Nations Children's Fund
UNIFEM	United Nations Development Fund for Women
USAID	United States Agency for International Development
RSI	Rising Sun Institute
SDC	Swiss Agency for Development and Cooperation
STEP	Special Talent Exchange Program
VAW	Violence Against Women
VDPA	Vienna Declaration and Programme of Action
VREPD	Vocational Rehabilitation and Employment of Persons with Disabilities
WAF	Women's Action Forum
WFP	World Food Programme
WHO	World Health Organization
WID	Women in Development



WPA	World Programme of Action Concerning Disabled Persons
WTO	World Trade Organization
WWDA	Women with Disabilities Australia

## Non English Terms

Deeni Madaris	Religious schools
Fitrah	Islamic concept of human nature as predisposition for goodness and submission to one God
Hudood	Limits/bounds of acceptable behaviour in Islam
Khairat	Religious motivated charity
Qazf	Wrongful allegation or testimony/false accusation implicating a person of Zina
Sadqa	Non-obligatory religiously giving of money
Sharia	Islamic Religious Law
Tehsil	Administrative division
Ushr	Religiously mandated levy on agricultural output
Zakat	Religiously mandated levy on income for distribution amongst poor
Zina	Extra-marital consensual sexual intercourse/adultery

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If there was a country called disabled,  
I would be from there.  
I live disabled culture, eat disabled food,  
make disabled love, cry disabled tears,  
climb disabled mountains and tell disabled stories.

If there was a country called disabled,  
I would say she has immigrants that come to her  
From as far back as time remembers.

If there was a country called disabled,  
Then I am one of its citizens.  
I came there at age 8. I tried to leave.  
Was encouraged by doctors to leave.  
I tried to surgically remove myself from disabled country  
but found myself, in the end, staying and living there.

If there was a country called disabled,  
I would always have to remind myself that I came from there.  
I often want to forget.  
I would have to remember... to remember.

In my life's journey  
I am making myself  
At home in my country.

*Faris Mughal*



# 1 Introduction

In every sphere of life, women with disabilities in the developing world experience a triple bind: they are discriminated against because they are women, because they are disabled and because they are from the developing world. (DAWN Ontario 2003)

Although the *Universal Declaration of Human Rights* states in Article 1 that “[a]ll human beings are born free and equal in dignity and rights” (UN 1948) and therefore explicitly dispels any form of discrimination, the reality is far removed from this ideal. Peoples' self-perceptions and the conflicting perceptions of others that form the basis of all concepts of difference, often seem to work in contradiction to equality. Worldwide, people are being discriminated against on the basis of their skin colour, their religions or beliefs, their gender and sex, political views, their disabilities, even their nationality and many other, similar reasons. Slowly, the international community has started to respond to these incidents and give special attention to the specific needs of those affected by such discrimination. While initially seen as a threat, pluralism began to be perceived by dominant discourses as instead, an opportunity for sustainable development; with this shift, approaches incorporating this idea were given more attention. The paradigm of international development, for instance, has seen many adaptations on a universal scale. Programmes are being adjusted according to national and local needs: discrimination against women, who represent half of the world's population, has become one of the main objects of focus within development projects. However, including such pluralistic concerns and perspectives effectively is a daunting task. Since people do not fit only into one category, but represent many categories at the same time, these strictly delineated schemata are blurring and with this blurring, more specific individual needs are increasingly being recognised. Yet, some categories, such as people with disabilities, are often still neglected from policies and their implementation, even though 10 percent of the world population, or in other words 650 million people live with some level of disability and 80 percent of these people live in development countries. (UN 2006a)

Consequently, women with disabilities in developing countries are facing three forms of discrimination: as women, as persons with disabilities and as persons from the so-called third world. Hence, these women are related to three different categories and at the same time, they build their own category combining all three. Therefore, special efforts are necessary in this case to decrease prejudices and to meet and combat discriminations relating to this specific, albeit

diverse group. Efforts to eliminate such discrimination take place on three fronts: on an international level, in terms of the transfer of financial resources and knowledge; on a national level, in the form of policy making and implementation; and at the level of civil society, through a great variety of activities. Actors from all three levels work to a greater or lesser extent to meet the needs of women with disabilities, either directly or indirectly, some being more successful and working with more motivation than others. To understand the status of women with disabilities in Pakistan, it is useful to look into the operational scope of these actors and to analyse the means available to them.

Considering the special position and situation of women with disabilities, the existing international framework for their protection, the engagement of Pakistan's government on a national and international level, as well as efforts within civil society, the following questions are guiding my research:

*How does the international politico-legal framework impact efforts aimed at overcoming political, economic and socio-cultural inequalities for women with disabilities, in the case of Pakistan?*

To answer this main question, further aspects have to be investigated. What are the kinds of inequalities that women face? Who are the stakeholders involved? Do efforts at the international level meet the requirements of the national or local level? Where are the shortcomings in the procedures, proposals, provisions and implementation of international treaties on gender and persons with disabilities and of Pakistan's legislation? How far does the Pakistani government meet the commitments made on an international level? What is the role of the civil society? From the point of view of civil society, how beneficial can treaties on gender together with treaties on persons with disabilities be for developing suitable strategies to overcome discrimination against women with disabilities? Where are the gaps in policies and their implementation? What do the findings of this paper mean for development programmes?

Pakistan is a country that faces many political, social, economic, ecological and security related problems, and women with disabilities are at greater risk of being affected by the interplay of these factors compared to other parts of society. While some important modifications towards gender equality and the empowerment of women as well as persons with disabilities have been

made, these are, when compared to the total population of Pakistan, wholly inadequate. For this reason I hypothesise that,

- 1. Unless international treaties are shaped according to an inclusive approach, which is open enough for overlapping categories, they will contribute to a solidification of exclusion on domestic levels.*
- 2. The implementation of treaties by Pakistan's government will not be actuated without stimulation either from the international actors or from the civil society.*
- 3. The international politico-legal framework is the primary instrument used by the civil society to pressurise Pakistan's government to take action towards reducing inequalities for women with disabilities.*

The aim of this thesis is on the one hand, to contribute to creating greater visibility of the marginalised category of women with disabilities in Pakistan, and on the other hand, to identify options for overcoming different forms of discrimination, with a focus on the use of the international scientific, legal and political framework in this endeavour. In order to achieve the desired result, the *first objects of research* are international treaties as well as national arrangements by Pakistan. The relevant United Nations (UN) framework, in particular the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW), the Beijing Platform for Action, the Convention on the Rights of Persons with Disabilities (CRPD), the Biwako Millennium Framework for Action towards an inclusive, barrier-free and rights-based society for persons with disabilities in Asia and the Pacific (BMF), the Millennium Development Goals (MDG), the Poverty Reduction Strategy Paper (PRSP) Pakistan, the National Policy for Development and Empowerment of Women (NPDEW), the National Policy for Persons with Disabilities (NPPD), as well as the relevant National Plans of Action in relation to ground realities within Pakistan will be discussed. Additionally, analytical secondary literature with a focus on gender and disability studies are guiding this research. The *second main objects of research* are existing statistical data and other information regarding women in Pakistan and people – in particular women – with disabilities in Pakistan. The research undertaken by the Pakistani government, usually subsidised, is quite unreliable, due to methods of data collection and time lags in their inquiry. Quantitative inventories occur only in very sporadic intervals, or are not undertaken at all. Consequently, this may create a margin of error. To counter this potential risk, additional sources of information are being included. A small number of research

papers generated by private actors comprise informative details about Pakistan's realities and will therefore serve as one of the main sources of information. The *third objects of research* are three interviews conducted with experts in the fields of gender and disability in Pakistan as well as relevant actors from the civil society, in order to test the statistical evidences against realities on the ground. The results are presented throughout this paper.



## 2 Outline of the Problem

As pointed out in the introduction, individual subjects of the discourse under examination belong to multiple categories: women, people with disabilities and people from developing countries. Due to the multi-faceted nature of the group under discussion, a summary of the current state of affairs has to be the first step in analysing the status of women with disabilities in Pakistan. This section gives a comprehensive outline of the problem, which this paper is examining. Terms will be clarified and the status quo of existing research (the theoretical basis of this paper) will be presented. Although all the specific issues pertaining to this topic cannot be entirely covered within the limits of this paper, the aspects most relevant for answering the research question and hypotheses will be focused upon.

### 2.1 From Feminism to Gender

As part of their efforts to uncover paternalistic inequalities, feminist authors often reproduce an image of a Global Sisterhood. This homogenisation, created by women on women, is one of the paradoxes within feminist theories. To fight the biological concept of sex segregation, women crusaded against social, political and economical exclusion in the name of 'women'; by which they in effect, produced these segregations rather than eliminating them (cf. Scott 1996: 3f.). Thus in 1972, the British sociologist Ann Oakley (1972: 16) adopted the term *gender* as an analytical category used to separate the biological and sociocultural determinants of identity creation: “‘Sex’ is a word that refers to the biological differences between male and female [...] ‘gender’ however, is a matter of culture: it refers to the social classification into ‘masculine’ and ‘feminine’. The constancy of sex must be admitted, but also must the variability of gender.” With this new term, it should not only become possible to make biological differences between men and women visible, but also to point out social stratifications between the two. Within the social sciences, the term *gender* has been used in various ways. Critics point out that gender has now become a synonym for the term *sex* and therefore the binary division between men and women was only shifted to another level, instead of being eliminated. Important impetuses within the general gender-discourse that caused a paradigm shift can be attributed in particular to influences outside of the US and Europe but also from within. Criticism by black feminists, Afro-American Feminists, post-colonial feminists as well as queer theorists began in the 1980's, underpinned by

the main argument that the aim of uncovering social differences through the gender concept has not been wholly satisfactory. Authors like bell hooks (1982) argued militantly against the adoption of the 'northern', 'white', heterosexual woman as a norm, and for the extension of the analysis of the category 'race' (Frey 2003: 47f.). Post-colonial criticism from scholars like Chandra Talpade Mohanty and Gayatri Chakravorty Spivak, widened the critique towards an international perspective. By challenging the postulated Global Sisterhood, which implied an homogeneous group of women with the same problems and interests, their work provided crucial input for the debate on the category of gender. The dominance of 'northern' feminists, particularly within the knowledge industry, was highlighted as a result of this research. Papers on representation and homogenisation point out that the claim of the universality of the gender concept leaves the historical and substantial realities as well as power relations (even between women) unconsidered (cf. *ibid.*: 49ff.). By broaching the issue of the inner contradictions within feminist discourse, a critical conceptualisation of and between other analytic categories such as 'women' became common, and consolidated terms came to be seen as increasingly problematical. Herein one can look at the example of 'Islamic Feminism', a term introduced in the 1990's by western scientists as a collective denotation of Muslim feminist movements who did not see themselves embedded in western streams. This stream of feminist thought focuses on the main question of whether women's emancipation is compatible with the principles of Islam. Although Mojab (2001: 131) argues that Islamic feminism in its many forms is not really a serious challenge to patriarchy, and instead reinforces the traditional patriarchal system, the Islamic movements are valuable in underlining the meaning of categories. Other claims, for example by Judith Butler, which appeared within the same time frame of the 1990's to deconstruct the category of gender, represent another break within feminist theories. This happened at a time when gender as a term was finding wide popularity in daily practices and theories, in thinking and in action (cf. Frey 2003: 57f.).

### **Definition/Terminology**

The Department of Gender, Women and Health of the World Health Organization (WHO GWH 2006a, emphasis in original) offers the following answers to the question of the distinction between *sex* and *gender*:

'Sex' refers to the biological and physiological characteristics that define men and women.

'Gender' refers to the socially constructed roles, behaviours, activities, and attributes that a given society considers appropriate for men and women. To put it another way:

**'Male' and 'female' are sex categories, while 'masculine' and 'feminine' are gender categories.** Aspects of sex will not vary substantially between different human societies, while aspects of gender may vary greatly.

As gender has become a vital modern creation that is promoted in all areas of life, and on one level, is dealing with the attainment of equalisation between the sexes, it was necessary to briefly reveal its contradictions and potentials. What has become clear is that social roles are not distinctly divisible along the lines of sex; they are determined instead by a multiplicity of categories and aspects, all of which are distinct and flexible. With this amendment of circumscribed perception, the still popular assumption that, for example, women with disabilities are included in any consideration, as it is a 'bad' tradition within the Gender debate, becomes questionable. Amongst other things it will be shown in this paper that such is not the case and even more importantly, that this alleged inclusion in discourse is insufficient.

### **2.1.1 Gender in the Development Sector**

With the emergence of a scientific and social discourse on the discrimination of women, the first attempts were made to promote the inclusion of issues specifically relating to women on the international agenda. Following the dominant modernisation strategies of the 1970's, the newly introduced Women in Development (WID) approach put the primary focus on the female workforce and related economic aspects. However, following the realisation of missing social concerns, the absent financial support and the disappointing experiences of the implementation of the WID during the UN Decade for Women (1976-85), the new term, "gender" was introduced to facilitate a broader political discourse of and about the relationships between men and women. This reformulation found its way into established institutions working on women's issues such as the United Nations Development Fund for Women (UNIFEM), which was founded in 1976. After initially following the WID approach and focusing on development programmes, the organisation reacted to its perceived shortcomings, was restructured and subsequently built its objectives upon the concept of gender mainstreaming. UNIFEM's new policy became that of the full integration of and agenda setting by women for women. These reformations were inspired by the southern women's network *Development Alternatives with Women for a New Era* (DAWN) which introduced the term 'empowerment' into the development cooperation discourse during the Nairobi Women's Conference in 1985, and accompanied the international assertion of the Gender

and Development (GAD) approach. Due to growing research in the 1980's, the term *gender mainstreaming* began to be used increasingly in screening and designing policy at the macroeconomic and macro-political level. The term became even more relevant at the Fourth World Conference on Women in Beijing, when bilateral as well as multilateral organisations presented themselves endowed with wide dimensions of gender mainstreaming. (Braunmühl 2001: 187) Gender mainstreaming became the new, popular global paradigm behind the enforcement of equality and empowerment of women in policy-making and implementation efforts within the development sector. It was held that for all policy levels, including planning, budgeting and implementation, the dynamics of gender relations as well as their impact on activities should be measured. (cf. Bergmann/Pimminger 2004: 20) The primary underlying assumption was that gender mainstreaming is “the process of assessing the implications for women and men of any planned action including legislation, policies, and programmes, in any area and at all levels” (UN ECOSOC 1997). Till today, gender mainstreaming remains the dominant concept used to advance gender equality, but this approach, it can be argued, has failed to significantly change existing realities. In examining the reasons for this deadlock, Rao and Kelleher (2005: 59) note that gender mainstreaming has been “caught between a rock and a hard place”. This is because on a

macro level, it is operating in a policy environment which is increasingly hostile towards justice and equity, and which is further feminising poverty. At a meso level<sup>1</sup> of organisations, gender mainstreaming has become a random collection of diverse strategies and activities, all ostensibly concerned with moving forward a gender equality agenda, but often not working in ways we would have hoped. At this level there is still active resistance to the value of women's rights and gender equality goals. (ibid.)

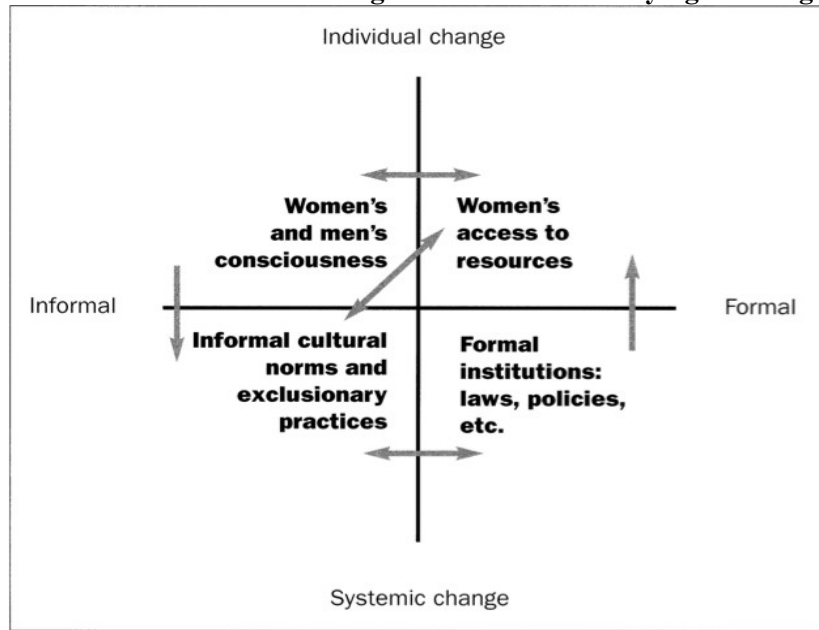
Therefore, authors such as Rosenstreich (2002: 33) have voiced their concern that gender mainstreaming could continue or even reinforce the hierarchisation of social groups. Today, different indicators are being used and varying strategies are being followed, all of which offer specific instruments, to make gender inequalities visible and to eliminate gender disparities respectively. The most common examples of these have been developed and instituted by the United Nations. To offer valuable insight regarding changes in gender relations, the United Nations Development Programme (UNDP) has developed the Gender-related Development Index (GDI) and the Gender Empowerment Measure (GEM). Both indicators scientifically prove an inequality of men and women all over the globe (cf. UNDP 2009b). Despite these developments, traditional topics related to the category of gender within international

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<sup>1</sup> The meso-level concerns the role of development agencies and economic actors in the political make-up of their region, and involves the operation of individual agencies or networks of development bodies within the region. (Danson/Whittam 2005)

organisations such as education, health, labour, political empowerment and rights, somehow persistently stuck to the categories of women in addition to gender. The WHO gives a typical explanation for why it combines the areas of gender, women and health within one department, even though gender means both, “masculinity and femininity, not just one or the other” (WHO GWH 2006b). The structural discrimination of women within the health care sector requires special support to establish gender equality in healthcare. Every organisation that is devoted to the abolition of gender disparities stands within this supporting role. The WHO further acknowledges that differences between the two sexes could also result in adverse consequences on the health of men, but generally lead to the systematic devaluation or negligence of female health. (ibid.) As a result of this reasoning, the department “has a special role as an advocate for *women's* health”, though “gender has as much to do with men as it does with women” (ibid., emphasis in original). Over time however, it became obvious that single-sided approaches, which only targeted women in relation to specific issues, were unsustainable and could not strike root within societies. Any development process, it was realised, has to give special attention to or include gender, since women do not simply represent more than half of the world's population, but are also a category of people who are, due to sociocultural factors, at a greater risk of poverty. Further, issues that seem related only to men are also issues that affect women and the other way around. The fact that both men and women are affected in some way by every policy is one of the preconceptions of “human” rights, which provide the modern foundation for poverty reduction instruments and mechanisms through such tools as the MDGs or the PRSPs. The question then is, why gender issues need a separate body in institutions, if they are to be mainstreamed in every department and programme anyway? Although many attempts to redefine gender as an overlapping term have found their way into policy-making and new theoretical concepts have been introduced and adjusted repeatedly, substantial changes are still absent. This is because “while women have made many gains in the last decade, policies that successfully promote women's empowerment and gender equality are not institutionalised in the day-to-day routines of State, nor in international development agencies.” (Rao/Kelleher 2005: 57). In seeking to identify the obstacles to constructive change, Rao and Kelleher (2005: 60) have identified four main areas of organisational efforts: formal, informal, individual and systematic. To gain gender equality, all four of them have to be targeted, as they interact with and influence each other. It should be noted that as yet, institutions only focus on one or the other of these areas, which contributes to the static trends relating to gender that we see today.

**Figure 1 What are we trying to change?**



Source Rao/Kelleher 2005: 60

That the most viable method of generating change lies in a holistic approach, which addresses and integrates men and women likewise while emphasising pluralism, is often neglected. The reason for this gap between reality and theory within the development sector is on the one hand, the focus on theorising about this term and its implications in particular in the west, and on the other hand, the dilemmas faced in the field and the fact that theories are little used in meeting the most urgent needs and claims of people on a local level. As per the example of Pakistan, problems of the day to day discrimination of women seem to overshadow any attempt at theory construction; the propagation of a simplistic categorisation, and therefore generalisation of women can be justified as necessary to eliminate the worst manifestations of such discrimination. This would partly explain the practice of international organisations. On the other hand, as the national implementation often proves, many people drop out from development efforts no matter what approach will be chosen, because they might not fit into categorised target groups. The goal should be therefore, to work with methods which minimise this exclusion.

### 2.1.2 The Status of Women in Pakistan

The pluralism within the category of gender is apparent in Pakistan. In a country that is culturally divided to a great extent, there can be no homogeneous category of women. Depending on their social status, residence and similar factors, Pakistani women can experience entirely different kinds of discrimination and may be subject to varying restrictions and prospects. The divide between the rich and poor, educated and uneducated, urban and rural dwelling decides the level of participation and self determination. Nevertheless, the all-embracing circumstances that still dominate social realities cannot be dismissed.

Women in Pakistan live in a world structured around strict religious, family and tribal customs that essentially force them to live in submission and overall fear. In a nation where Islamic law dictates traditional family values and is enmeshed in the legal system, Pakistan's government, law and society discriminate against women and condone gender-based violence. (Bettencourt 2000: 3)

Various figures and facts support Bettencourt's statement. In the Human Development Report 2009, the Gender-related Development Index (GDI) value of Pakistan, which is subject to the same indicators as the Human Development Index (HDI), though it includes a consideration of inequalities in achievement between women and men, achieves 93.0 percent of its HDI value. 152 countries out of 155 have a better ratio than Pakistan. In other words, this encompasses one of the world's lowest life expectancies at birth, an outstandingly high illiteracy rate and a generally low level of education for women. In the Gender Empowerment Measure (GEM), which goes beyond the GDI to include inequalities in opportunities to control earned economic resources, as well as participate in political and economic decision-making, Pakistan ranks 99th of 109 countries. (UNDP 2009a) Additional evidence is given by the World Economic Forum's Global Gender Gap (GGG) Index 2009. This index measures a country's division of resources and opportunities among its female and male population, in the four categories of economic participation and opportunity, educational attainment, political empowerment as well as health and survival. Out of 134 countries, Pakistan ranks 132nd and oscillates repeatedly among the bottom 10. (WEF 2009: 13) To illustrate such severe attestations, the substantive issues that women in Pakistan are generally exposed to according to international organisations, can be summarised as shown below in Table 1. Again, we can see the usual areas of education, health, labour, political empowerment and rights dominating the graph. While there is no hierarchy indicated within the categories *chronic and underlying*, *immediate* and *emerging issues* themselves, ADB provided a useful ranking across these divisions in 2000, making the category of *immediate issues* of utmost importance.

**Table 1 Substantive issues for women in Pakistan**

<b>Chronic and Underlying Issues</b>	<b>Immediate Issues</b>	<b>Emerging Issues</b>
Poverty	Lack of health services	Attacks on NGOs providing family planning services
Low social and economic status of women	Poor quality of care	Heightened resentment of anything considered as 'western'
Overburdening of women with triple roles (e.g., wife, mother, worker)	Low health and nutritional status of women	Social Status, mobility and security are the critical concerns for the female service providers
Early marriages and frequent pregnancies	Non-availability of medicine	Work place sexual harassment
Son preference	High infant mortality rate among female children	Inadequate facilities ( infrastructure, supplies, medicines, transport and reliable referral support at higher levels)
Limited decision-making authority of women in marital relationships	High maternal mortality rate	Refresher courses for Lady health visitors and midwives
Patriarchal control over women's sexuality	Higher incidence of diseases among women	Consistent advocacy and action for sex disaggregated health data
Cultural barriers to discussing sexual issues within marriage	Illegal and unsafe abortions	
Illiteracy	Shortage of competent doctors and nurses especially in rural areas	
Lack of women's access to information	Lack of female service providers	
Restrictions over women's mobility	Absenteeism of health personnel at service facilities especially in rural areas	
Violence against women	Distant and inappropriate locale of health services	
Inconsistent health policies	Weak supervision and monitoring	
Restricted budget for the health sector	Inadequate community outreach	
Structural weaknesses		
Lack of access to clean water and sanitation		
Male biases inherent in public health system		
Low quality of service		
Lack of female medical service providers		
No wage incentive for doctors to work in underserved areas		
Absenteeism of health personnel at service facilities especially in rural areas		
Bottlenecks in monitoring and supervision of the health services and initiatives, especially in rural areas		
Community outreach		
Illegal and unsafe abortions		
How to make women get more control over their biological processes rather than their bodies		

Source SDPI 2008: 67 and ADB 2000: 7



Women have been and are still being victimised within patriarchal societies, though their subordinate status within all areas of life has not always been discriminatory to a high extent. On the other hand it is very common in countries like Pakistan, for example, for women to serve as flagships for religious and social frictions. While there have been times such as in 1961 with the Family Laws Ordinance and in the 1970's during the regime of Zulfikar Ali Bhutto, when the development of women-friendly spaces was encouraged by offering mobility, social opportunities, as well as an adequately open political and legal environment, there have also been contrasting periods. A particularly drastic degradation in the status of women in Pakistan followed the introduction of the Hudood Ordinance in 1979 by General Zia-ul-Haq, then President of Pakistan. By implementing a clearly discriminatory legal system under the pretence of Islam, women across Pakistan were thrown into a dire situation and exposed to unsanctioned physical and mental violations. The legacy of this ordinance remains to this day with it existing in an altered but nevertheless discriminatory form. Moreover it has contributed to a shifting of social boundaries and deferred the acceptability levels of gender bias. However it would be inaccurate to picture the women of Pakistan as helpless or passive members of society. As early as in the times of pre-partition India, women of the social elite actively supported the independence movement alongside male family members. Different women movements and organisations arose, either with a charitable or progressive purpose. Although “victims of the double oppression of class and gender” (Samiuddin/Khanam 2002: 1), and threatened by fundamentalist religious groups and their anti-female ideologies (ibid.), Pakistani women remained increasingly active. The most renowned organisations working to advance the interests of women were the *All Pakistan Women's Association* (APWA) and the *Anjuman-e-Jamhooriyat Pasand Khawateen*, of which only the less political and more elitist APWA could maintain itself. Virtually all the groups working for women followed the same pattern of “altruism combined with reforms, reforms imposed from the top, changing the system to make it bearable but without fundamentally transforming reality or even directly confronting the inequities extant in it.” (ibid.: 5). During the Zia regime (1978-88) the women's movement experienced a new rise. Feminist groups, including the Women's Action Forum (WAF) and the Democratic Women's Association, aligned together in the struggle against oppressive policies. Today, women are present everywhere, but in public. Who is or can be politically active, is mirrored in the membership of women movements, consisting mainly of elite women. Rich, urban upper class women have more means to develop their standing as women in society. Although subject to social pressure,

“[i]n Pakistan marriage continues and will continue to remain the most popular generally accepted career for women” (Chaturvedi 2003: 273), elite women have access to education up to the university level and to a certain extent, can maintain professional careers, even if it is only in inoffensive non-governmental organisations. Now, small groups of educated women are contemplating and adopting specific measures according to their beliefs which themselves have specific effects on the implementation of their projects. This top-down approach consolidates social disparities, because urban women make decisions for those living in rural areas and elite women make decisions for the rest of the female population. In the tradition of women organisations, Chaturvedi (2003: 273) underlines the nature of charity and the 'quasi' top down approach of these elite women when she points out: “In Pakistan, the destiny of the urban and rural women is inevitably linked together. The privileged urban woman has, therefore, to help her less fortunate rural sister on the path of progress.” The diversity of women in contemporary Pakistan hence cannot be ignored. In short, the situation of women in Pakistan remains extremely challenging and what they need and demand “[m]ore than anything else [...] is the elimination of injustice, social and economic insecurity, and discrimination against them on the basis of sex. The need to be respected for their own, individual self and not as someone else's daughter or wife.” (ibid.) Bearing this highly crucial aspect in mind, chapters two, three and four of this paper will discuss how these needs may be met best.

## **2.2 Disability: Problem or Value**

The discrimination of persons with disabilities can be traced as far back as ancient times. In all eras and across all regions, being different or in any way offside the norm was used as grounds for exclusion, persecution – and even murder. Within the western scientific discourse of the first half of the 20th century, mainly the fields of psychology and psychoanalysis were concerned with the subject of disability and that too generally with a medical perspective. Disability was usually defined and handled within these areas as a condition causing trouble. (Titchkosky 2000: 206) Early papers in social sciences such as Goffman's *Stigma: Notes on the Management of Spoiled Identity* (1963), mark an important turning point within disability research, a shift towards a perception of disability as a social issue. According to him, disability is a “mark of difference (attribute) [which, S.A.] is generated *between* people” and therefore can be interpreted as an “occasion” (Goffman qtd. in Tichkosky 2000: 203ff., emphasis in original). The social

sciences have the responsibility to “unpack [... the existing, S.A.] norms of identity” since there is a “general impossibility of normalcy” (ibid.: 205). Triggered by this paradigm shift, the developing interdisciplinary disability studies brought new life into the primarily medically oriented discourse. They were understood as a critique on the

body of knowledge and practices which constitute disability as an asocial and apolitical condition of lack and inability, i.e., the discourses which shape the meaning of disability in conformity with the medical model's version which holds that disability is primarily a problem condition located in an individual's body, mind, or senses. (Titchkosky 2000: 214)

Although the perspective on disability remained predominantly medical, a *Minority Group Model* (Waxman-Fiduccia/Wolfe 1999: 5) was established; within this model, persons with disability were framed as a social category similar to the categories of race, class or gender. Subsequently social and political issues became essential parts of the discourse. (cf. Kudlick 2003: 764; Thomson 2002) In the 1990's, disability studies experienced another boost, finding increasing space in the form of scientific papers on disabilities and in current discourse, with the establishment of journals such as the *Disability Studies Quarterly*, a periodical of the Society for Disability Studies. Nevertheless, it remained questionable whether disability studies was qualified to be a subject in itself, as the discourse on norms and normalcy as well as that on inclusion and exclusion had not found their conclusion either. (cf. Davis 1999: 501). Moreover, empowerment approaches such as those Simi Linton's manifesto *Claiming Disability. Knowledge and Identity* (1998) fostered, emphasising a liberation of persons with disability from “the institutions that have confined us, the attics and basements that sheltered our family's shame” (Linton qtd. in Davis 1999: 500), have been arising as a result of a new empowerment trend within disability studies. The only apparent consensus within the “conflicting interpretations surrounding disability” (Titchkosky 2000: 215) is, that socially and economically, people with disabilities are generally still profoundly marginalised. The difficulties in integrating the subject of disabilities or rather persons with disabilities in policy-making, include on the one hand, the heterogeneity within the articulation and understanding of the term itself and on the other hand, the underlying assumptions about persons with disabilities. Picturing disability as “incapacity and socioeconomic dependence” rather than as “a social construction that is the result of interaction between physical or mental impairment and the social environment” (Krieger 2001: 223f.), implies completely different outcomes. The controversy surrounding the differentiation between physical and social perceptions can also be seen in the gender discourse. It should further be noted that the two models of approach, medical and social, need not be

mutually exclusive. People who do not need medical treatment for example, do still face many difficulties in their daily lives. (cf. Jones 2001: 377) Both sides must therefore be considered in conjunct. Taking into account the complexity of the phenomenon and the wide discourse of disability, it is understandable, why the international community could not compromise on a general definition, although many useful approaches were proposed. Despite efforts to describe the phenomenon further, the basic problem of defining and categorising disability itself remained. The term still has negative connotations and is therefore avoided from many sides. But since the possibility of assessing disability scientifically can only come with defining the term, it is paramount for the successful implementation of development programmes and projects. To accurately measure health and disability, the WHO has been formulating such essential definitions on behalf of the international community since 1980. Today, on an international as well as national level, they are the most frequently used characterisations of disability. The first such framework developed in 1980, the *International Classification of Impairment, Disability and Handicaps* (ICIDH) outlines three dimensions of disability:

**Impairment:** Any loss or abnormality of psychological, physiological or anatomical structure or function.

**Disability:** Any restriction or lack (resulting from an impairment) of ability to perform an activity in the manner or within the range considered normal for a human being.

**Handicap:** A disadvantage for a given individual, resulting from an impairment or a disability, that limits or prevents the fulfilment of a role that is normal, depending on age, sex, and social and cultural factors, for that individual. [...] Handicap is therefore a function of the relationship between disabled persons and their environment. It occurs when they encounter cultural, physical or social barriers which prevent their access to the various systems of society that are available to other citizens. Thus, handicap is the loss or-limitation of opportunities to take part in the life of the community on an equal level with others. (UN enable 2003-04a)

Based only on these three dimensions and leaving out other essential factors such as the consideration of a person's environment, the ICIDH is a deficit oriented model (cf. DIMDI 2005: 5). Seeing that this categorisation is based on a cluster of negatively connoted terms such as loss, abnormality, restriction, lack and disadvantage, it is apparent that it is rooted in an understanding of disability as a deficiency. Furthermore, the excessive use of the dichotomy of normal and abnormal has caused a lot of criticism due to it's stigmatising character and unquestioning acceptance of hidden power structures. However Jones (2001: 377f.) argues that – against modern interpretations of disability – it is useful to retain these three terms as they unite the various models. But the definitions do have to be modified. Impairment, Jones states, has to include cultural determination since definitions of what is and is not characterised as abnormal are not globally uniform. The problem with the interpretation of disability lies foremost in the use of the term *normal*, because here also it is unclear what can be considered typical and what is

atypical. The definition of “handicap” is most problematic due to the same reason. The origin of the term itself, in “implying that disabled people are expected to beg favours of the able” (ibid.: 378), is discriminatory and is therefore rightly rejected. The usage of the terms *impairment* and *disability*, as Jones further shows, lies in a recognition of extra physical substrates to the existing disability that cause disadvantages through the disability. *Handicap*, in being defined “as an impairment in the attitude to disability in others of individual members of society” (ibid.: 379), points to the magnification of discrimination not only based on environmental factors but resultant from stances about disabled people. Nonetheless, an adjusted definition of the term 'disability' was offered in 2001 with the *International Classification of Functioning, Disability and Health* (ICF), ratified by all 191 WHO member states (WHO 2010b). In the ICF, disability is considered,

an umbrella term, covering impairments, activity limitations, and participation restrictions. An impairment is a problem in body function or structure; an activity limitation is a difficulty encountered by an individual in executing a task or action; while a participation restriction is a problem experienced by an individual in involvement in life situations. Thus disability is a complex phenomenon, reflecting an interaction between features of a person's body and features of the society in which he or she lives. (WHO 2010a)

This framework is not based on deficiencies anymore, as was the case with earlier attempts, but rather on the health situation of individuals which can be influenced by changes of body function and structure, as well as by environmental factors. Nevertheless, the ICF remains a primarily resource and deficit oriented model, that enables a systematic classification of functions and structures, activities, as well as participation; all with a consideration of contextual factors such as the environment or personal factors. It “is a classification of health and health-related domains [which, S.A.] are classified from body, individual and societal perspectives by means of two lists: a list of body functions and structure, and a list of domains of activity and participation.” (WHO 2010b). Further,

[t]he ICF is WHO's framework for measuring health and disability at both individual and population levels. [...] Unlike its predecessor, which was endorsed for field trial purposes only, the ICF was endorsed for use in Member States as the international standard to describe and measure health and disability. (ibid.)

In addition to the ICF, the ICD-10 is available through the International Statistical Classification of Diseases and Related Health Problems. The WHO (2002: 3) advises that the ICD-10 and the ICF should be used together, since their distinct approaches complement each other. The main difference is that the “ICD-10 is mainly used to classify causes of death, but ICF classifies health” (ibid.). The improvements of this new classification is that it takes “a truly holistic view on the problems accounted by people with disabilities” (Jones 2001: 379) and that it aspires to be applicable in real life (Hahn 2002: 2). Both classifications, the ICIDH and the ICF, were created

to facilitate an internationally comparable codification of human conditions (DIMDI 2005: 11) and while both are controversial, they are still relevant to the international discourse on disability. All in all, criticism revolves around a lack of discussion on data collection and dissemination, the absent privacy rights of people with disabilities, the remaining use of unsatisfactory definitions that are offensive for many people with disabilities who do not identify themselves as such, as well as insufficient discussion in relation to limitations of the use of the classification scheme, and finally, the ambiguity regarding the measurement of health outcomes and so-called *quality of life* indicators (Hahn 2002). Referring to new socio-political approaches within disability studies, there is another shift of perception which Kudlick (2003: 769) has summarised as “one of the most challenging aspects of disability”: namely, “to convince [disabled and, S.A.] non-disabled people that even when it involves pain and hardship, disability is not always a tragedy, hardship, or lack but in fact often provides much of value.” This new view of disability therefore is not mainly one related to medical concerns anymore, but also acknowledges the untapped added value of these individuals for a society. As the case of disabilities in the development sector shows, this aspect is not only relevant on a national level, but is critical for the international agenda also.

## **2.2.1 Disabilities in the Development Sector**

In the course of the 1960's movements in Europe and the USA, the so called 'disabled' also deployed to claim their rights for self-determination. In continuity with existing discourses of and about people with disabilities in the scientific and civil society, as presented earlier, disability issues found entrance into international organisations as well. With a leading role of the UN and its sub-organisations, relevant aspects regarding disabilities were brought up on the international agenda. By proclaiming the International Year for Disabled Persons in 1981 (later renamed the International Year of Disabled Persons) and submitting its main outcome, the *World Programme of Action (WPA) Concerning Disabled Persons* in the following year, the UN attracted international attention. The WPA was established by the General Assembly to ensure the effectiveness of the findings of 1981 and to reform disability policies in the three areas of prevention, rehabilitation and equalisation of opportunities. (UN enable no year b) For the national and international implementation of these reforms, the *UN Decade of Disabled Persons* was proclaimed between 1983–1992. Regional initiatives followed, such as the *Asian and Pacific Decade of Disabled Persons*, first from 1993-2002 and again from 2003-2012, which had

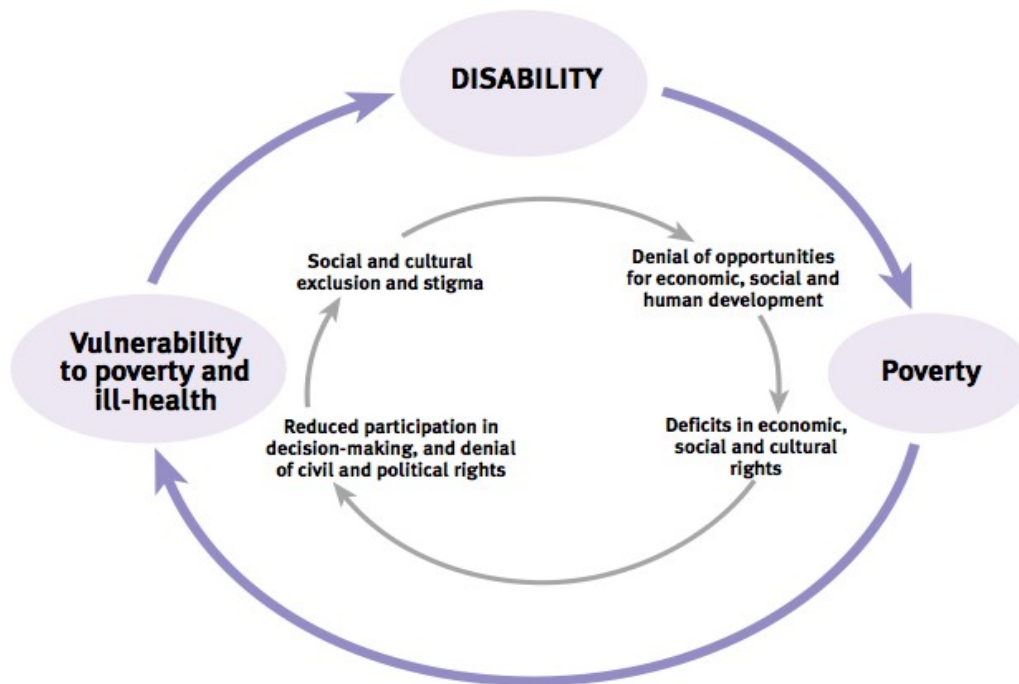
as its goal, the full participation and equality of people with disability. Although disability was not specifically taken into consideration in the Millennium Development Declaration, the World Summit 2005 in New York, however, discussed among other things, the future commitment towards people with disabilities within the MDGs. Article 129 in the outcome document (UN 2005: 28), adopted by the General Assembly in 2005, states: “We recognize the need for persons with disabilities to be guaranteed full enjoyment of their rights without discrimination. We also affirm the need to finalize a comprehensive draft convention on the rights of persons with disabilities.” Subsequently in 2006, the UN agreed on the *Convention on the Rights of Persons with Disabilities* (CRPD), a human rights treaty whose purpose is to protect and enhance the rights and opportunities of people with disabilities. This treaty made it obligatory for all signatory countries to adapt their national laws in accordance with the provisions contained therein. The major improvement of the situation for people with disabilities provided by this convention is a paradigm shift towards human rights. This means a renunciation from the medical and welfare associated view of disability to a more legal approach, which understands the isolation of people with disabilities as an abuse of human rights. (cf. Weigt 2005: 25) This shift becomes obvious in the definition of disability presented in the CRPD, which recognises disability as “an evolving concept” which “results from the interaction between persons with impairments and attitudinal and environmental barriers that hinders their full and effective participation in society on an equal basis with others” (UN 2006b: Preamble). It was an increasing realisation of the linkages between poverty and disability that made disability concerns relevant to the agenda of international development organisations. While the causes of disability often remain unclear, they are, in many cases, connected to poverty. The more typical causes can generally be categorised as following:

- Pre-natal causes, chromosomal or genetic causes;
- Pre-natal environmental causes, such as infections, toxins and maternal health;
- Poverty related causes, such as deprivation of basic needs;
- Perinatal causes, such as premature birth or oxygen deprivation;
- Causes in childhood, such as injuries and diseases;
- Environmental and socio-economic causes, such as poor housing, bad nutrition or lack of social interactions;
- Causes in adolescence, such as accidents or drug abuse; as well as
- Causes in old age, such as chronic diseases. (cf. NOWPDP 2008: 14ff.)

Considering the causes of disabilities outlined above, as well as the fact that 15 to 20 percent of the people living in poverty are affected by disability (cf. Elwan 1999: 15, Footnote 76) and that

in developing countries, about 50 percent of avoidable disabilities can be directly traced back to poverty (Weigt 2005: 25); the connection between poverty and disability cannot be ignored. Consequently, the international development community and its instruments, such as the MDGs must not neglect matters of disability either. Poverty and disability can be said to exist in a vicious circle because poverty leads to a multiplicity of disabilities and disability increases the risk of poverty. (cf. AusAID 2008: 6; DFID 2000: 3f.; Elwan 1999: 1; Weigt 2005: 25)

**Figure 2 Poverty and disability – a vicious cycle**



Source DFID 2000: 4

Despite assurances and efforts made on the international level and in development institutions, the situation for people with disabilities is still far from unobjectionable. The first of the proclaimed MDGs, to eradicate poverty and hunger, relevant for disabled persons as well, has not nearly been achieved. Many gaps remain untouched. Currently various approaches and strategies to reduce poverty among people with disabilities compete with each other. Mainstreaming disability, in a manner similar to gender mainstreaming, is an often postulated approach. According to Miller and Albert (2005: 10), such a term can be defined in reference to the the ECOSOC definition of gender mainstreaming from 1997, as the

process of assessing the implications for disabled people of any planned action, including legislation, policies and programmes, in all areas and at all levels. It is a strategy for making disabled people's concerns and experiences an integral dimension of the design, implementation, monitoring and evaluation of policies and programmes in all political, economic and societal spheres so that disabled people benefit equally and inequality is not perpetuated. The ultimate goal is to achieve disability equality.



Related to mainstreaming, one of the most popular approaches regarding persons with disabilities in development is the Twin Track Approach. Favoured inter alia by the European Commission and the British Department for International Development (DFID), the Twin Track Approach emphasises raising awareness about persons with disabilities as well as disability mainstreaming in development projects. This includes the involvement of persons with disabilities in all programmes and projects as well as specific projects for persons with disabilities. (cf. Griffo 2007: 8; Lorenzkowski 2005: 47) But experience on different levels of the implementation of this approach in development projects – such as those regarding persons with disabilities – have shown that problems handled on the sideline improve only sluggishly. Thus, it is unsurprising that many approaches strive in the same direction, towards a more inclusive strategy. It is claimed to be the only way to meet the challenges posed, and will therefore obtain further attention in this paper.

### **2.2.2 Women with Disabilities**

Disabled women and girls are of all ages, all racial, ethnic, religious and socioeconomic backgrounds and sexual orientations; they live in rural, urban and suburban communities; they have one or more impairment and experience barriers to their independence and opportunity at home, school, work and in the community. (Waxman-Fiduccia/Wolfe 1999: 3)

The multi-faceted nature of the category of 'women with disabilities' gives a sense of how many different issues they are likely to face. It should be noted that this does not necessarily mean that all women with disabilities are discriminated against, nor are they all challenged by similar disadvantages and discriminations. What the above assertion intends to imply is that it is the multiple *risk* of being discriminated against as a woman and also as a person with a disability, which makes women with disabilities a particularly vulnerable category. Supra-regional studies have shown that in comparison to disabled men and non-disabled women, women with disabilities are “less educated; experience higher rates of unemployment; are more likely to be abused; are poorer; are more isolated; experience worse health outcomes; [and, S.A.] generally have lower social status.” (Stubbs/Tawake 2009: 9) The main purpose of all development endeavours is to identify these potential risks and to minimise them. Certain areas and issues associated with women with disabilities have been shown by scientists and development experts to be most crucial, in a sense of affecting most people, worldwide. For this paper, the below categories serve as a framework for further discussion. While it is obvious that they are vigorously interdependent, there is nonetheless, an added value in observing them separately due

to the complexity of the overall topic being studied. Hence, this paper will discuss them in further detail, and with specific reference to the case of Pakistan.

**Table 2 Main problematic areas for women with disabilities.**

<b>Main categories</b>	<b>Including</b>
Attitudes	Images and Stigma
Rights	Legal Issues, Citizenship, Human Rights, Social Inclusion
Advocacy, Leadership and Political Participation	
Education	Educational Equity for Women and Girls with Disabilities, Girls in Special Education
Employment and economic development	Income Support, Cost of Disability, Work Disincentives, Leadership and Mentoring
Mobility	Transport
Family Life	Housing, The Marriage Penalty, Relationships, Care Giving, Motherhood and Parenting, Ageing, Housing Restrictions, Accommodation Issues, Raising disabled Girls, Oppression
Health	Access to Health Care, Higher Risk of HIV/Aids Infection
Sexuality, Reproductive Rights and Health	Eugenics and Euthanasia, Prenatal Screening and Genetic Testing Birth Control, Sterilization Abuse, Abortion
Violence and Abuse	Domestic Violence, Rape and Sexual Assault, Violence Caused Disability, Violence against Girls

Source Arnade/Haefner 2006: 7ff.; Frohmader 2009; Tataryn/Truchan-Tataryn 2009; Waxman-Fiduccia/Wolfe 1999

### ***i. Attitudes***

Human beings understand their surroundings based on their personal experience. Their interpretation of the environment is based on prior knowledge and is often shared by the community. Preconceptions develop not by chance, but through the correlation of existing knowledge and a constrained perspective. Prejudices based on sex, religion, skin colour, social status and likewise disability, are socially anchored. In Pakistan, a rigid patriarchal mindset results in viewing women as being weak and in need for protection; as such it is thought better for them to stay behind the four walls of the house. (Saleh 2010) This societal conception becomes internalised in women, particularly those with disabilities. Thus, it is not surprising that a lack of self-esteem is one central reason for women with disabilities to fail to improve their situation.

Shown from birth, either through neglect or through over-protection, that they have little value or are unable to do much, girls with disabilities grow up with the burden of that stigma and expect little of themselves. Even a woman who becomes disabled later in life will have her own sense of self-worth eroded by the prevailing attitude that she has become a useless dependant. (UN ESCAP 1995: 3)

This attitude means that women with disabilities face severe limitations not only regarding their rights, mobility, education, employment opportunities, access to health, etc., but also in decision-making of any other personal aspect of their lives. Arguments based on notions of culture and religion often serve as underpinnings to explain, justify and legitimise the discrimination of women with disabilities.

## ***ii. Rights***

With the Declaration of the Rights of Disabled Persons in 1975, the UN explicitly proclaimed the right of all persons with disabilities to all human rights, including the right to self-reliance and to “medical, psychological and functional treatment” (UN 1975). This commitment was then further emphasised and extended in ensuing human rights treaties. By building upon a human rights approach, today's development cooperation aims to support those affected by poverty and marginalisation and to create instruments and mechanisms for poverty reduction (cf. Lukas/Kuehhas 2007: 27). Despite the commitments on paper, however, in reality, human rights are far from being adequately safe-guarded and it is undeniably women who suffer most from this failure to prevent violations of their rights. As discussed previously, the general legal situation for women in Pakistan is not inadequate to say the least, and for women with disabilities it is even more difficult to achieve equal rights. This is because this category of women faces even greater challenges in acquiring the capability and social acceptance to claim these rights to begin with. Moreover, they face many violations within the domestic sphere itself, ranging from forced marriage and abuse to any kind to limitation of freedom. The prosecution of these and other violations fail on different levels, including at the level of relatives, executive forces or the judiciary. Depending on the circumstances, the possibility to speak up can be very limited or entirely non-existent. Many of the issues that women face are social taboos and therefore, their examination will not be sanctioned in Pakistani society. Outside of the family, counselling and support is limited. At the same time it is also social inclusion, the right to participate actively in society and the right to represent oneself, which are often restricted or non-existent, particularly for women with disabilities. Since human rights touch every sphere of life, the problems are intricate. Thus in the context of Pakistan, it can be seen that women, particularly those with disabilities, face an intricate host of problems related to various cultural, religious, societal and institutional influences that make it nearly impossible for them to exercise agency in support of their human rights.

### ***iii. Advocacy, Leadership and Political Participation***

Inadequate representation and a lack of opportunities to participate in decision-making are frequently identified by development experts as primary barriers hindering the ability of women with disabilities to develop their full potential. Moreover, the actual contribution to economic and social development of people with disabilities generally is underestimated. The United Nations Economic and Social Commission for Asia and the Pacific (UN ESCAP 1995: unpagged) has stated that the degree of integration of the interests and concerns regarding women with disabilities in the overall policies for women in development is only marginal. Furthermore, the self-help movement of people with disabilities in developing countries is showing little effort “to incorporate women's concerns into its agenda”, and generally, measures of incorporation “have been too few and generally ineffective” (ibid.). Organisations often face a lack of “resources for sustained action” and lack “strategic focus in the activities organized to promote the advancement of women with disabilities” (ibid.). One of the main causes for this situation is that “[p]olicies and programmes for disabled women and girls are still too often thought of in terms of providing welfare services for them” (ibid.). This trend “may be indicative of the poor awareness of gender issues among the male policy-makers who predominate in these organizations” (ibid.). It is obvious that this perception results primarily in a service delivery approach, which fails to fulfil the aim of increasing the participation of women with disabilities in decision-making related to those activities meant to increase their well-being; “[t]here continues to be little recognition that they can be partners in development” (ibid.). It is forgotten that “[p]olitical activism has indeed been an essential means of transforming disadvantages experienced by oppressed groups” (Waxman-Fiduccia/Wolfe 1999: 30). Hence, it is unsurprising that the policies executed fail to meet the needs of women with disabilities, since they are basically excluded from the development as well as the realisation of future plans. They are reduced to the role of passive receivers. The lack of representation described above can also be seen in relevant numbers at the governmental level in Pakistan.

The 2001 Local Governance Ordinance (LGO) guarantees the reservation for women of 33% of local government seats and 17% national and provincial assembly seats. This legislation represents a radical step by the government to accelerate women's political representation, and, in theory at least, to sanction a space for their voices to be heard in community decision making. (ADB 2008a: 16)

The ADB's evaluation of these measures can only be partially accepted. On the one hand, it is true that in Pakistan the “basic concept of women having a place in public decision making is gradually becoming accepted since the instigation of quotas for female councils and legislators”

(ibid.: 18). Furthermore, “leadership programs are among the newest community development programs offered to help people to effectively participate in decision making in their communities” (Waxman-Fiduccia/Wolfe 1999: 30). On the other hand, however, in reality the participation of women in general and especially of women with disabilities, is relatively small. In 1999, women's representation at the federal and provincial legislation level in Pakistan made up only 3 percent of the National Assembly, practically 7 out of 217 seats, in the Senate 2.3 percent or 2 out of 87 seats, and as little as 0.4 percent overall in the four provincial assemblies, with 2 out of 483 seats (SDPI 2008: 13). There are many problems that hinder female participation, such as the lack of experience, skills and resources (cf. ADB 2008a: 17). Women with disabilities further face the same “barriers to leadership” as non-disabled women: “sexist assumptions and male domination” (Waxman-Fiduccia/Wolfe 1999: 30). “With little exposure to the political process and often hostile attitudes from their male colleagues, women need to be prepared to run for office and how to participate fully in the planning process” (ADB 2008a: 18). In Pakistan, female participation on any decision-making level, be it at the level of policy or on an organisational level, cannot be considered as given. Further efforts to increase training and to build confidence amongst women “to ensure their needs and interests” (ibid.) have to be undertaken. These must also include men who “have to be encouraged to support these changes in gender roles in public decision making” (ibid.).

#### ***iv. Education***

Education can be understood as a wide range of activities, programmes and initiatives. Although in many developing countries it is merely used as a synonym for literacy, education in fact goes far beyond this meaning. Persons with disability actively demonstrate, what education can also stand for: the promotion of a self-determined day-to-day life. Worldwide “[l]ess than 5 per cent of children and young persons with disabilities have access to education and training; and girls and young women face significant barriers to participating in social life and development” (UN 2001: 23). In Pakistan, an insufficient and mismanaged educational system is a major development problem.

The education sector in Pakistan suffers from insufficient financial input, low levels of efficiency for implementation of programs, and poor quality of management, monitoring, supervision and teaching. As a result, Pakistan has one of the lowest rates of literacy in the world, and the lowest among countries of comparative resources and social/economic situations.” (Shaheed/Zaidi 2005: 10)

The gaps between women and men, the disabled and non-disabled population as well as the large discrepancies between rural and urban areas, as displayed below, are alarming.

**Table 3 Literacy Rate of Total Population and Disabled Population (10 years and above) and Formal Literate Disabled by Education Attainment by Sex and Residence**

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	79,4
Male	46,4	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

Source AAA 2004: 20

As discussed in chapter 2.1.2, girls receive less education than boys, and illiteracy or a low level of education are a prevalent reality for women. There are several reasons for the situation: A chronic shortage of public schools, the high admission fees and costs, as well as the discriminatory attitude towards women all support the low school enrolment ratio of girls, or in other words “poverty, cultural constraints and supply side inadequacies” (SDPI 2008: 24). Teaching methods and aids are far from adequately adapted to the specific needs of girls with disabilities. As a consequence, they are even further excluded from meaningful participation in the educational system.

## v. *Employment and Economic Development*

People with disabilities in general face difficulties in entering the open labour market, but, seen from a gender perspective, men with disabilities are almost twice as likely to have jobs than disabled women. When women with disabilities work, they often experience unequal hiring and promotion standards, unequal access to training and retraining, unequal access to credit and other productive resources, unequal pay for equal work and occupational segregation, and they rarely participate in economic decision-making. (O'Reilly 2003: 32)

In Pakistan, male participation in the labour market is significantly higher than the involvement of women (cf. GoP 2010). Looking at the segmentation of the employment status as shown in Table 4, it is strikingly clear that women disproportionately represent unpaid workers while at the same time, they form a lower share of the

countries paid labour force. The reasons are eclectic. The main barrier is the generally low status of women within society. Even if a woman is well educated, once she gets married, decisions regarding where she will live, whether or not she will work etc. are made by her husband and his family. A change from this pattern may result due to

**Table 4 Distribution of Employed:  
Employment Status (%)**

Employment Status	2003-04		
	Both sexes	Male	Female
Employers	0.9	1.1	0.1
Self-employed	37.1	41.4	15.9
Unpaid Family helpers	24.1	18.3	52.8
Employees	37.9	39.2	31.2
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>

Source SDPI 2008: 85

economic realities. In particular in the cities, where living expenses are higher than in rural areas and the mindset is often a more liberal one, many women can even be encouraged to enter the paid labour force. (cf. Khan 2010) Nevertheless, a lack of opportunities and ownership are subsequent problems that a woman faces even after entry into the work force. Moreover, most women are working in unpaid conditions, predominantly in the household or in the informal sector, and their contribution to the national economy is not being recorded. (SDPI 2008: 85) For women with disabilities, the dual pressure of working as a disabled female, and the need to earn enough to cover higher costs that disability can entail, makes their experience in the workforce even harder. To make matters worse, work disincentives such as an insufficient and badly equipped environment pose additional hindrances to engaging in labour outside the home. The small number of available jobs are often labour-intensive and poorly paid, but due to “little job mobility and few skills, disabled women workers may be forced to endure oppressive working conditions” (UN ESCAP 1995: 7). Alternative self-employment can barely be considered as a realistic option due to the lack of any “credit schemes, entrepreneurial skills training and

advisory services to include disabled women” (ibid.). In summary, it can be stated, that there is a complete absence of possibilities for income support in the case of women with disabilities, who suffer severe consequences as a result of this absence.

## **vi. Mobility**

Conveyance plays an essential role for the capabilities and opportunities that women can enjoy. Safe, reliable and low cost means of transport are basic preconditions to this necessary mobility. In Pakistan, however, public transport is limited primarily to rickshaws and buses. Rickshaws are too expensive to be used for regular transport to a workplace; public buses, on the other hand, are relatively cheap, but have no reliable schedule and are overcrowded. This applies to urban regions, but in rural areas reality looks a bit different. Women travel only rarely, usually for specific occasions. Private means of transportation are seldom and public transport is inherently non-existent:

nobody facilitates travelling by the women. [...] how many people own a car in Pakistan? That is a [...] very serious issue. And then [...] 15 to 20 percent of the [public, S.A.] transport is reserved for the women, other 80 percent is there for the male. [...] so it becomes difficult to move, and then [...] she is not welcome outside. And [...] the harassment she goes through, like people staring, or [...] somebody just say [...] good or bad words, she is looking beautiful or something like that. (Khan 2010)

These circumstances make the distance between the home and any potential workplace, educational or training institution, any health facility or other consulting or legal entity in most cases insurmountable. Khan (2010) describes how, in villages, mobility is a critical issue. Using the example of access to health, he explains how many factors and issues are related to a lack of mobility. The access to high quality medical service in the cities also depends on

how many times, or how much she can afford. [...] like somebody [..., living, S.A.] two hundred kilometres from Lahore [...] would have to travel to reach the specialist, [...] spend a day and go back, and then she would have to [be, S.A.] accompanied by somebody, some male member or female member so... if it is a male member, then he will take a day off from work. [...] how long they can afford, when it comes to five, six visits to a doctor or something like that, ok, and then there is a loss of family income as well, so that creates a problem. (ibid.)

With this description, Khan also points out another aspect: “[t]he sociocultural constraint on the mobility of girls and women” (ADB 2008a: 1). They are a “significant factor limiting their access to development opportunities” (ibid.), and are again determined by attitude.



## **vii. Family Life**

In the domestic sphere of the the family, girls and women in Pakistan experience many disadvantages. As in other

societies which favor boys, families with scarce resources might expend greater attention in meeting the needs of boys which can result in poorer nutrition and/or reduced health care among girls, likely to hamper healthy development and to increase the possibility of disability and exacerbate any existing disabilities or lead to secondary disabilities. (McClain-Nhlapo/McDonald 2009: 35)

In practice this means, that

if [...] a boy child [is ill, S.A.], then everybody at home will [...] take care of him and [everyone will be, S.A.] ready to pamper him [...] when it comes to the girl child there is [..., a different, S.A.] attitude. [...] For, S.A.] example if you cook a chicken, [...] the boy will get the best piece of the chicken, and the girl might get the worst part. Or [...] we have like the habit the males will eat first, and then the females will eat. So you know, the portion that has been consumed [...] is always or is maybe the better [..., one, S.A.] boy gets the first choice, he gets the better thing. (Khan 2010)

It is mainly this attitude which leads to discrimination. “Throughout her life, a woman is to a large extent defined by her capacity as a daughter, wife or mother” (UN ESCAP 1995: 4). Under these conditions, women with disabilities are confronted with specific preconceptions. “The disabled woman is not considered 'marriageable' because her disability is seen as a 'defect' and there is fear that her disability could be passed on to her children. There is doubt, too, whether she would be able to fully look after the home and family” (ibid.). Thus oppression in form of marriage penalties, restrictions in relationships and a limited liberty to make decisions about motherhood and parenting are often what disabled women have to face:

when it comes to the [...] the rural level or at the home level, [...] then the female face the problem for access to decision making, access to resources, economic activity, [...] even if they are earning, and they have their own money, they may have the family pressure to spend the money on something like that and they may do not have the independence to enjoy whatever they are earning. (Khan 2010)

Another relevant aspect is care giving. Disabled women, particularly girls and elderly women, often do not receive suitable care and support. Adequate accommodation and housing restrictions can also be a tremendous issue for disabled women. At the same time, women especially have a great number of duties within the household, of which one primary duty is caring for others. Overall in the domestic sphere, many kinds of structural and physical violence can be found. Statistically, about 90 percent of women in Pakistan face violent acts in the domestic sphere, including physical and sexual attacks “within the family or within an intimate relationship” (Minallah/Durrani 2009: 13).

### **viii. Health**

According to the UN Standard Rules (UN 1993b), persons with disabilities can be disabled and healthy. The well-being of a woman is determined by factors such as urban or rural residence, marital status, number of children, education, income and nutrition. Health not only means the prevention, supply of treatment and cure of disabilities, but to arrive at a stage, where diagnosis, therapy and rehabilitation can be implemented without problems. The Standard Rules define rehabilitation as “a process aimed at enabling persons with disabilities to reach and maintain their optimal physical, sensory, intellectual, psychiatric and/or social functional levels, thus providing them with the tools to change their lives towards a higher level of independence.” (ibid.) Nevertheless, women with disabilities on average, need more medical services than non-disabled women (cf. Waxman-Fiduccia/Wolfe 1999: 8). But while it is the limited access to health care that makes it difficult for women in general to receive appropriate treatment and assistance, the situation is even worse for women with disabilities. Medical services are expensive and health facilities are hardly ever well-equipped to provide adequately for persons with disabilities; whether regarding equipment, such as ramps or handrails, knowledge of the specifics of treatment for disabilities and accompanying medical problems, or adequate information material or appropriate communication tools. In Pakistan, cultural factors also play a major role in accessing health care. Khan (2010) explains that

facilities may be there, but there are the cultural constraints [...] that women are not open to talk about their health. [...] she has like a specific problem or she had some disease like that, she may [...] can talk to [...] her mother, or she maybe talk to her friend, but she will not be able to communicate it to some male member in the family. [...] if somebody is suffering from the breast cancer, or something like that [...] the word breast [...], is, S.A.] not acceptable you can [say, S.A.].

Beside the taboo of female health issues even within the domestic sphere, the shortage of female doctors signifies a major hindrance for women to access medical consultancy, since many Pakistani women feel ashamed in consulting a male doctor. Furthermore, transportation to and from health-care facilities can be a major barrier for women with disabilities. Long distances and inadequate means of public transport limit their overall mobility. Especially in rural areas, women often do not have the opportunity to receive adequate treatment. Another health aspect is the risk of infection with HIV/Aids. A survey conducted by the University of Yale and the World Bank (2003) has shown, that people with disabilities, in particular women, are disproportionately affected by HIV/Aids. The study identifies poverty, a low level of education, inadequate access to health education and sexual violence as the main causes for this aggravated risk.

## ***ix. Sexuality, Reproductive Rights and Health***

Historically, reproductive health and related rights are frequently discussed as subjects of ethics, population and socio-political norms. Deprivation from perceived normality and ignorance of the social environment have in the past and even today, led to discriminatory regulations and inhuman measures, inter alia sterilisation and euthanasia. For women with disabilities, the

access to reproductive health care is minimal and as a result they suffer greater vulnerability to reproductive health problems. There is a lack of awareness regarding women with disabilities and reproductive health needs. More often than not, it is assumed that they do not form part of the target groups because being disabled is associated with being sexless. (DFID 2000:3)

Sexuality is an often forgotten but cross-cutting issue. It “is more than having a sexual relation with someone. The way a woman is intimate with her partner, the way she relates to her own body and the way she thinks about herself as a woman are all part of her sexuality” (Maxwell/Watts-Belser/David 2007: 139). As a result, women with disabilities not only “find it difficult to get information about sexual health, they may have less control over how and who they have sex with. This makes them more vulnerable to being taken advantage of sexually, and more likely to get a sexually transmitted infection, including HIV” (ibid.: 157).

## ***x. Violence and Abuse***

According to the United Nations Declaration on the Elimination of Violence against Women from 1993, the term 'violence against women' (VAW) is defined as

“any act of gender-based violence that results in, or is likely to result in, physical, sexual or psychological harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or in private life.” (UN 1993a)

Worldwide, “among women aged between 15 and 44, acts of violence cause more death and disability than cancer, malaria, traffic accidents and war combined” (UN Women 2010a). Furthermore, “women with disabilities are twice to three times more likely to be victims of physical and sexual abuse than women with no disabilities.” (DFID 2000: 3) The phenomenon of violence against women is “pervasive across class, religion, ethnicity and urban/rural divide in Pakistan” and stretches across various phases of women's lives, as shown in Table 5 (Minallah/Durrani 2009: 1).

**Table 5 Phases of women's lives and types of violence**

Phase	Types of Violence
Pre-birth	Sex-selective abortion; effects of battering during pregnancy on birth outcomes
Infancy	Female infanticide; physical, sexual and psychological abuse
Girlhood	Child marriage; physical, sexual and psychological abuse; incest; child prostitution
Adolescence and Adulthood	Courtship violence (e.g. acid throwing); incest; sexual abuse in the workplace; rape; sexual harassment; forced prostitution; trafficking in women; marital rape; dowry abuse and murders; psychological abuse; abuse of women with disabilities; forced pregnancy
Elderly	Forced “suicide” or homicide of widows for economic reasons; sexual, physical and psychological abuse

Source Minallah/Durrani 2009: 1

But again, as sexuality is a taboo in Pakistan and not discussed, incidents within the family are often not raised in public. Cases of discrimination against women with disabilities often remain unheard and perpetrators frequently escape without any consequences as these women are perceived by society as abnormal. “Few victims ever talk or complain, let alone press charges. Many lack confidence that they will be taken seriously, and fear of reprisals is common. In fact, most victims simply do not know where or to whom to turn for help.” (UN ESCAP 1995: 5)

### **2.2.3 Structural Violence**

The categorisation into civil, political, social, economic and cultural discriminations against women with disabilities, listed at the beginning of this paper is reflected in the main categories stated above. The interdependence between categories underlines the argument that none of the issues can be treated in isolation, nor can they be handled in separation from their environment. These categories illustrate the vast and multi-faceted extent of discrimination and describe how women with disabilities generally

form part of society's most poor and excluded members. A review of the limited available literature suggests that they are not being included in policies meant for all women. Neither are the specific issues of women with disabilities successfully captured by organizations that represent people with disabilities, in which men tend to be the more powerful stakeholders. (Walji 2009: 29)

I find the term *structural violence* particularly useful in describing the current situation of women with disabilities as it focuses on the absence of inclusion, not solely on actual exclusion itself (cf. Walji 2009: 29). The term was coined by Johan Galtung (1969: 168), who argued in the

course of his peace studies for an extended understanding of violence, which is “broad enough to include the most significant varieties, yet specific enough to serve as a basis for concrete action.” He defined violence as “influence”, which is “*the cause of the difference between the potential and the actual*, between what could have been and what is” (ibid.: 170f., emphasis in original). Thus, the term 'structural violence' includes omission also. Besides other distinctions such as physical and psychological violence, Galtung differentiates between “*personal or direct*” violence, which is the result of an individual's actions, and “*structural or indirect*” violence, “where there is no such actor” (ibid., emphasis in original). Hence, structural violence means that “[t]he violence is built into the structure and shows up as unequal power and consequently as unequal life chances” (ibid.: 171). Building upon the framework of analysis that the concept of structural violence offers, violence against women can be seen as a question of power relations. Who has the power to make decisions, to define, to include or to exclude? There are many different levels of power relations, not only between men and women, but between women also. Additionally, the invisibility and inaudibility of persons that are not present (even though they are supposedly included and represented in all considerations) are forms of structural violence. Decisions over resources and therefore essentially over the distribution of power itself, are often made for women or persons with disabilities without their actual input or participation. Such obvious paternalism and the underlying assumptions made therein naturally have negative consequences. This understanding of the problematic nature of unbalanced power structures is supported by Davis' assumption, which he outlined in *The Need for Disability Studies* (1997), that conscious negligence, based on the control over resources and the feeling of superiority, is not the best approach to address existing problems, as “the denial of the political and social constitution of disability is, nonetheless, a political and social act” (Davis qtd. in Titchkosky 2000: 215). Twenty years later, Galtung (1990: 291) expanded his concept of violence by adding *cultural violence* to direct and structural violence, as the “legitimiser of both” (ibid.: 294). Cultural violence involves “those aspects of culture, the symbolic sphere of our existence - exemplified by religion and ideology, language and art, empirical science and formal science (logic, mathematics) – that can be used to justify or legitimize direct or structural violence.” (ibid.: 291) This discussion becomes relevant in particular when it comes to the national level of this analysis. The collective histories of States give many examples of structural violence against women, such as the deprivation of equal rights for women and the inferior status of women throughout the past. If it was not done through practices, such as burning women at the stake for

being 'witches', it was and still is done through a system of regulations to keep women in dependency. The same is true in the case of people with disabilities and therefore women with disabilities face an even higher risk of such structural and cultural violence. Dick Sobsey (1994: 87), a researcher of violence and disability, points out that disability itself does not create vulnerability to abuse; “[c]omplex interactions between disability, society, culture, and violence” artificially construct this vulnerability. In the example of Pakistan, it can be seen that many forbearances and actions occur under the guise of culture and religion. Discriminatory regulations and violent practices were implemented by abusing cultural and religious structures. And Pakistan is not an isolated case in this regard. Internationally, the category of women with disabilities has been detected as a group that merits particular attention; above all because of an international emphasis on the equality in dignity and rights for all human beings, which is a key aspect within the internationally agreed upon human rights. Therefore, to enable all individuals to develop to their full potential, the indirect or direct occurrences of structural violence have to be identified and overcome. Moreover, a gender and disability sensitive concept of violence has to include the dimension of symbolic violence (cf. Bourdieu 1985). Furthermore, “[a]ll approaches to bringing about gender equality must have a political component. This is because gender relations exist within a force field of power relations, and power is used to maintain existing privilege” (Rao/Kelleher 2005: 59).

#### **2.2.4 Women with Disabilities in the International Framework**

Since this theoretical debate about disabilities has found its way into many organisations worldwide, women with disabilities have become subjects of action and theory. A provision specific to women with disabilities in the field of gender was first included in the second World Conference on Women, held in Copenhagen in 1980, where governments were urged to “[d]irect special attention to the needs of elderly women, women living alone and disabled women” (Report of the World Conference of the United Nations Decade for Women: Equality, Development and Peace, held in Copenhagen from 14 to 30 July 1980 qtd. in UN enable 2003-04b). The foundation of the *Disabled People's International* (DPI) in 1981 as “an international non-governmental cross-disability coalition of organizations of persons with disabilities” offered a “mechanism by which [women with disabilities, S.A.] could seek to influence the development agenda of the United Nations to be more disability responsive and gender sensitive” (UN enable 2003-04b). The World Conference on Women as well as the DPI created more space for women

with disabilities. Two paragraphs on women with disabilities were included in the final conference document and the women themselves claimed and received more room to be heard and to participate. Considering the generally male dominated knowledge production and agenda setting, also within disability concerns, the closing document of the first United Nations Seminar on Women with Disabilities 1990 (which was also the first official paper to include over seventy recommendations concerning women with disabilities) marked an important advancement. (cf. *ibid.*) Finally, on an international level, the Beijing Declaration and Platform for Action included and reflected former documents whereby women with disabilities were “gradually incorporated into the draft Platform” (*ibid.*). Today, international organisations such as the UN and its sub-organisations, as well as national donor organisations such as AusAid and USAID in particular, include a consideration of women with disabilities in their programmes. Although their focus remains mostly oriented towards early prevention of disability, women with disabilities receive special attention. Projects for prenatal prophylaxis, for example, are now a common component within the development sector. It remains unclear, however, as to how far the woman herself is at centre of these efforts at the level of NGOs and implementing agencies, and not included simply by chance or due to donor requirements. The status of people, especially women with disabilities in Pakistan and the actions taken to meet their needs will be discussed further.

### **2.2.5 Persons with Disabilities in Pakistan**

Women and men with disabilities in Pakistan share a similar dilemma. “Persons with disabilities are mostly unseen, unheard and uncounted persons in Pakistan” (JICA 2002: 5). The current total number of persons with disabilities in the country is unclear. The available data is fragmented, surveys are faulty, of poor quality and in most cases not up to date. Nevertheless, to give a preliminary overview of the estimated numbers of persons with disabilities in Pakistan, the latest data gathered by a governmental body, the Pakistan Census Organization (PCO), is shown below. The indicators are questionable, but unfortunately this data is the only official information available, as there has been no census carried out since 1998. According to the data, out of a total population of 132.35 million in 1998, almost 2.48 percent were persons with disabilities, of which 42 percent were women and 58 percent men. More than half of the total disabled population in Pakistan, an estimated 66 percent live in rural areas, 28 percent of them women.

**Table 6 Disabled Population by Sex, Nature of Disability,  
Urban and Rural Areas (1998 census)**

<b>Area/ Province</b>	<b>Total</b>	<b>Blind</b>	<b>Deaf and dumb</b>	<b>Crippled</b>	<b>Mentally retarded</b>	<b>Insane</b>	<b>Other disabled</b>
Pakistan	3286630	264762	244254	622025	249823	210129	1695637
Male	1915102	145656	139168	379989	134489	119139	996661
<i>Female</i>	<i>1371528</i>	<i>119106</i>	<i>105086</i>	<i>242036</i>	<i>115334</i>	<i>90990</i>	<i>698976</i>
URBAN							
Pakistan	1112631	92606	80537	175891	90702	81053	591842
Male	654858	51954	45941	110250	49083	47013	350617
<i>Female</i>	<i>457773</i>	<i>40652</i>	<i>34596</i>	<i>65641</i>	<i>41619</i>	<i>34040</i>	<i>241225</i>
RURAL							
Pakistan	2173999	172156	163717	446134	159121	129076	1103795
Male	1260244	93702	93227	269739	85406	72126	646044
<i>Female</i>	<i>913755</i>	<i>78454</i>	<i>70490</i>	<i>176395</i>	<i>73715</i>	<i>56950</i>	<i>457751</i>

Source GoP 2007c: 429, emphasis S.A.

The census accounts for 2.16 percent women with disabilities out of 63,48 million females and 2.78 percent of 68,87 million men (GoP 2007c). This could mean either that more men than women could be affected by disability or women are simply less statistically covered which is more likely due to the relative lack of access and other problems of elicitation. This assumption is supported by the valid criticism, uttered in relation to variety of issues: As observed by the Pakistan Institute of Development Economics (PIDE), the data shows “various inadequacies and inconsistencies”, due to “misreporting; under-reporting or hesitation on the part of respondents to disclose factual information on PWDs” (PIDE qtd. in NOWPDP 2008: 24). Although all subsequent reports and papers are based on the data provided by the government, there have been some attempts by non-governmental actors to make up for lost time. Mainly executed but also supported by bilateral donor agencies or international development organisations, such as the *Japan International Cooperation Agency* (JICA) or the World Bank in areas such as the economy, a number of surveys have been conducted. There are also reports and information services disseminated by NGOs, such as the *Network of Organizations Working for Persons with Disabilities, Pakistan* (NOWPDP) or the *Special Talent Exchange Program* (STEP), dealing with persons with disabilities in Pakistan and working in collaboration with international



organisations. These publications primarily give an overview of legal facts and of existing organisations and institutions in the field that are working for persons with disabilities in Pakistan. Most of them do not specifically discuss women with disabilities or the social aspects relating to disabilities. Naturally, they often lack adequate information and are limited in their selected focus areas. When it comes to disabilities, the main target group of both governmental and non-governmental efforts remains to be children and subsequently, attention is given to the relevant needs of children through, inter alia, special educational institutions. A comprehensive study on the situation of persons with disabilities in Pakistan was conducted by Arjumand and Associates (AAA) in 2004 on behalf of the World Bank. The key findings of this data collection and analysis will be further examined within this paper.

## **2.3 An Aside: Inclusive Approach**

*In 'A Society for All' the needs of all citizens constitute the basis for planning and policy. The general system of society is made accessible for all. By accommodating its structure and functioning to the needs of all, a society mobilizes the potential of all its citizens and, consequently, strengthens its development potential. [...] The concept of 'A Society for All' encompassing human diversity and development of all human potential, can be said to embody, in a single phrase, the human rights instruments of the United Nations. Defining and translating the human rights of disabled people into specific measures and programmes remains a foremost challenge. (Report of the Secretary-General to the 49th General Assembly qtd. in Widman 2003: 6)*

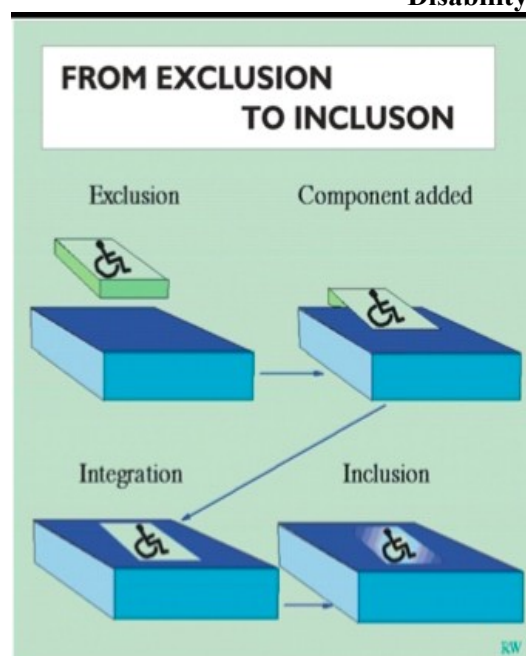
The previous chapters have shown how easily categories begin to become delineated and distinct, if only they are examined in detail. As it turns out, many people fail to fit into gridlocked categories and therefore are at risk of dropping entirely out of the focus of developmental and other initiatives. While there has been much effort to minimise this risk, it matters how “people with disabilities are perceived by policy makers and how development policy addresses disability” (Laurin-Bowie 2005: 51). In the field of gender, acceptance of an integrative approach has accelerated since the introduction of gender mainstreaming, as it became obvious that women could not be observed or addressed outside of their environment. For persons with disabilities this inclusive approach came along with growing public attention towards this group. Frustration regarding existing approaches and an increasing awareness of the complexity and magnitude of disabilities and related phenomena, reinforced the demand for an overarching strategy that found entrance into the development sector in the form of an inclusive or universal approach. As stated in the CRPD,

'Universal design' means the design of products, environments, programmes and services to be usable by all people, to the greatest extent possible, without the need for adaptation or specialized design. 'Universal design' shall not exclude assistive devices for particular groups of persons with disabilities where this is needed. (UN 2006b: Art. 2)

Hence an inclusive design comprises of several approaches. Wiman (2003: 17f.), although using other terms, explains the differences by classifying four basic strategies to fulfil disability concerns in the development sector. As the most common one, he identifies the *disability-specific approach*. This approach basically means that activities and programmes focus specifically on people with disabilities and their needs. Secondly Wiman talks about the *component approach*, in which disability-specific components are integrated into mainstream activities. The *inclusive approach*, the third main strategy, considers disability issues as pivotal components of all mainstream development activities. A fourth strategy is developed out of the component and the inclusive approaches. This *integrated approach* means that disability concerns are centrally integrated into all mainstream activities but simultaneously keep specific components of their own. In practice this implies that on the one hand, development cooperation has to consider people with disabilities in all projects and programmes, while on the other hand, it requires programmes and activities particularly oriented for persons with disabilities with a focus on encouraging their social participation (cf. Weigt 2007: 42). In short, they have to be socially

embedded. Furthermore, people with disabilities and organisations that are working in this field have to be involved in all phases of development cooperation; in the design, execution and evaluation of programmes and projects (ibid.). Conny Laurin-Bowie (2005: 51) argues for a “shift from disability policy to inclusive development” which basically means an integration of disability issues in larger policy agendas such as the MDGs. Table 7 below shows the relevance of disability issues on the execution of the overall goals of the MDGs, and indicates how this shift in approach could affect them.

**Figure 3 The Evolution of Approaches to Disability**



Source Wiman, 2003: 19

**Table 7 Inclusion international's MDGs**

Inclusion International MDG's	Data Shows	What We Know From People
<b>1. Eradicate Extreme Poverty For People with Disabilities and their Families</b>	<i>The World Bank estimates that people with disabilities account for as many as one in five of the world's poorest people, suggesting that 260 million (43%) of the estimated 1.3 billion people world wide living on less than \$1 per day have a disability.</i>	Due to lack of inclusive education, basic services and health care, people with disabilities are prevented from integrating into society. It is very difficult to gain employment with a lack of training and facing employer discrimination. Without a job or an education people with disabilities cannot break the cycle of poverty.
<b>2. Achieve Inclusive Education</b>	<i>Recent UNESCO studies suggest the highest incidence and prevalence of disabilities occur in the poorest areas, where less than 2% of children with disabilities attend school.</i>	The systematic discrimination and segregation of children with disabilities extends to the classroom where teachers have not been properly trained, and inadequate resources are in place to develop inclusive education for all children.
<b>3. Promote Gender Equality for Women with Disabilities</b>	<i>UNICEF estimates that only around 1% of girls with disabilities are literate.</i>	Responsibility of care giving falls disproportionately on mothers or female siblings resulting in even fewer opportunities for female family members to gain employment or complete schooling.
<b>4. Reduce the Mortality of Children with Disability</b>	<i>Mortality for children with disabilities may be high as 80% in countries where under five mortality as a whole has decreased to below 20%.</i>	The lives of infants with disabilities are often so undervalued that they are not cared for or fed as families struggle with meager resources.
<b>5. Achieve the Rights of Children and Families</b>	<i>It is estimated that only 2% of people with disabilities in developing countries have access to rehabilitation and appropriate basic services.</i>	Families report that time to build social networks and support circles, friendships, get involved in their community are consumed with the need to just <i>get by</i> resulting in fewer mechanisms for support and limited social capital
<b>6. Combat HIV/AIDS</b>	<i>The World Bank performed an international survey which concluded that HIV/AIDS is a significant and almost wholly unrecognized problem among disabled populations worldwide.</i>  <i>While all individuals with disability are at risk for HIV infection, subgroups within the disabled population – most notably women with disability, disabled members of ethnic and minority communities, disabled adolescents and disabled individuals who live in institutions – are at especially increased risk.</i>	Extreme poverty and social sanctions against marrying a disabled person mean that they are likely to become involved in a series of unstable relationships. Disabled woman are often a target for rape, which puts them at risk.  There are almost no sexual education programs targeted towards people with disabilities. The global literacy rate for people with disabilities is estimated to be only 3%, thus making sexual education and HIV/AIDS information difficult to disseminate, especially for those who are deaf and/or blind.
<b>7. Ensure Environmental Sustainability</b>	<i>UN statistics state that about 20% of all disabilities are caused by malnutrition and over 10% are caused by infectious diseases.</i>	Poor nutrition, dangerous working and living conditions, limited access to vaccination programmes, and to health & maternity care, poor hygiene, bad sanitation, inadequate information about the causes of impairments, war and conflict, and natural disasters all cause disability.
<b>8. Develop a Global Partnership for Development</b>	<i>Recent estimates indicate that there are approximately 450 million people with disabilities living in the developing world. Approximately 30-40% of households care for a member with a disability.</i>	The exclusion and systemic undervaluing of people with disabilities perpetuates a cycle of poverty and isolation. Unless disabled people are brought into the development mainstream by creating global partnerships for advocacy and development it will be impossible to achieve full human and economic rights.

Source Laurin-Bowie 2005: 54

### 3 The International Situation

On an international level, the community of states has developed a great number of treaties with the aim of protecting specifically vulnerable groups according to their needs. The selected approach aims at reaching these groups under the umbrella of the international human rights framework, which intends to guarantee all humans the same rights and opportunities. International treaties are “international legal instruments which legally binds, in international law, those States who chose to accept the obligations contained within it” (UNIFEM no year). They are integrated well in international organisations. Through these institutions, certain issues, especially relating to the development sector, are being raised with national governments; more specifically, governments are being pressurised to ratify as well as to implement these treaties.

Only

[u]pon ratification, the State becomes legally bound by the treaty as one of its States parties and must put its provisions into practice by giving effect to the treaty domestically. The States parties are also committed to submit national reports, at least every four years, on measures they have taken to comply with their treaty obligations. (ibid.)

This system should function as a stimulator to motivate governments to bring human rights issues on the political agenda. The potential of this approach to accomplish its intended aims will be discussed in this chapter.

#### 3.1 *International Treaties on Women*

As outlined previously in the introduction, on an international level, the category of 'women' increasingly gained significance within development from the 1970's onwards; starting with the International Women's Year 1975 and the first *World Conference on Women* (Mexico City) that took place the same year that marked the beginning of the *United Nations Decade for Women* (1976-1985). The conference in Mexico approved the *World Plan of Action*, in which the General Assembly confirmed 3 goals, which would become essential for future efforts to improve the status of women: “Full gender equality and the elimination of gender discrimination; The integration and full participation of women in development; An increased contribution by women in the strengthening of world peace” (UN DPI 2000). Today, “[i]ncluding treaties, conventions, covenants, agreements between governments, exchange of letters and notes about a treaty, protocols, optional protocols and amendments to existing treaties, there are 100 United Nations

treaties that concern or include women” (UNIFEM no year), of which nine core treaties hold particular significance. Some of the first instruments implying the equality of men and women are the International Convention on the Elimination of All Forms of Racial Discrimination (ICERD), adopted in 1965 and entered into force in 1969 (UN 1965), the International Covenant on Civil and Political Rights (ICCPR), adopted in 1966 and brought into force 1976 (UN 1966a), as well as the International Covenant on Economic, Social and Cultural Rights (ICESCR), adopted 1966 and entry into force 1976 (UN 1966b). While all of the human rights instruments mentioned recognise the rights of women, a specifically crucial breakthrough is marked by the adoption of the *Convention on the Elimination of All Forms of Discrimination against Women* (CEDAW) in 1979, which came into force in 1981 (UN 1979). Within 30 articles, this treaty outlines its framework of operation and defines gender discrimination as being

any distinction, exclusion or restriction made on the basis of sex which has the effect or purpose of impairing or nullifying the recognition, enjoyment or exercise by women, irrespective of their marital status, on a basis of equality of men and women, of human rights and fundamental freedoms in the political, economic, social, cultural, civil or any other field.” (ibid.: Art. 1)

By 2007, 186 parties had ratified CEDAW (UN 2010). CEDAW is critical, as it marks the beginning of an increasing emphasis on including gender issues and women related aspects on the international agenda. CEDAW was followed by further treaties which incorporated women's rights to a certain extent, but were generally criticised for failing to include women in any tangible way. Examples of such documents are the Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment (CAT), adopted 1984 and entry into force 1987 (UN 1984), the Convention on the Rights of the Child (CRC), adopted 1989 and enforced one year later (UN 1989), and the International Convention on the Protection of the Rights of All Migrant Workers and Members of Their Families (ICRMW), adopted in 1990 and enacted in 2003 (UN 1990). However, other international agreements and conferences were more successful in advancing the issue of women's rights. The UN Conference on Environment 1992 in Rio de Janeiro, the UN Conference on Human Rights 1993 in Vienna, the International Conference on Population and Development 1994 in Cairo and the World Summit for Social Development 1995 in Copenhagen all addressed women's issues adequately. Among the instruments regarding women's issues, the fourth World Conference on Women 1995 is considered the most important one so far, as it led to the adoption of the Beijing Platform for Action (UN 1995).

While the efforts of the previous two decades [...] had helped to improve women's conditions and access to resources, they had not been able to change the basic structure of inequality in the relationship between men and women. Decisions that affected all people's lives were still being made mostly by men. Ways had to be sought to empower women so that they could bring their own priorities and values as equal partners with men in decision-making processes at all levels. (UN DPI 2000)

As the starting point of a “new phase in the history of the international women's movement and its attempts to influence the course of development” (Kabeer 2005: 2), the conference enabled NGOs, religious women's lobbies, official delegates and other stakeholders to establish a “holistic and transformative vision for the future, a testimony to the remarkable negotiating skills and lobbying efforts of feminists within and outside the official conference” (ibid.). Two new developments during this conference are worth mentioning – the serious involvement of different stakeholders and interest groups on the one hand, as well as a shift from a narrow focus on women to gender mainstreaming intended to equally address both men and women, on the other hand. “For example, instead of striving to make an existing educational system gradually more accessible to women, gender mainstreaming would call for a reconstruction of the system so that it would suit the needs of women and men equally” (UN DPI 2000). The main achievements of the Beijing process were the mobilisation and inclusion of heterogeneous women organisations on a larger scale than before and its impact on national governments and international agencies. This new understanding of social structures and of development itself was the basis for further steps taken by the international community of states. Consequently, the status of women became an essential component of the Millennium Development Goals (MDGs) which came into action in 2000, with 191 countries adopting them. Of the eight goals set forth, it is MDG 3 that targets gender equality, particularly in the fields of education and employment. In addition, 5 other goals include special notice of women and girls with regard to the issues of poverty, illiteracy and health risks. But it should be noted that the MDGs have been criticised by different women's organisations and interest groups for their “complete inadequacy of the targets and indicators” (Kabeer 2005: 4), in particular their “deliberate exclusion of [...] fundamental indicator of women's human rights and empowerment” (Antrobus 2003: 2). Furthermore, due to their exclusive formation at a high diplomatic level with little input from the civil society, the MDGs have been perceived as products of a top-down-approach that do not provide a sense of ownership (cf. Kabeer 2005: 4). Antrobus (2003: 1) has dubbed them a “Major Distraction Gimmick”, which only distracts from the essential objectives of the Beijing Platform for Action. The consideration of complex coherences between causes and effects, essential for the equalisation of women in all areas of life, was not adopted in the MDGs. However, as a time-

bound and international agreement, the MDGs offer possibilities for constructive action and tools to monitor progress. Similar potential lies in the latest treaties concerning women, particularly the Convention on the Rights of Persons with Disabilities and the International Convention for the Protection of All Persons from Enforced Disappearance (the latter was adopted in 2006 but has not entered into force yet). Nevertheless, it is clear that women and gender have become essential parts of international efforts. In this process, CEDAW and the Beijing Platform have built the most relevant and influential framework to gain international recognition in relation to so-called women issues, not only in the developed world but also developing countries, as will be shown later in this paper.

### **3.2 International Treaties on People with Disabilities**

On an international level, the Universal Declaration of Human Rights of 1948 can be seen as the first document relevant to persons with disabilities, albeit implicitly. By stating that “[e]veryone is entitled to all the rights and freedoms set forth in this Declaration, without distinction of any kind, such as race, colour, sex, language, religion, political or other opinion, national or social origin, property, birth or **other status**” (UN 1948: Art. 2, emphasis S.A.), its scope “clearly extends to discrimination in respect of disability” (Lansdown 2009: 13). The same is true for the International Covenant on Economic, Social and Cultural Rights, as well as the International Covenant on Civil and Political Rights, both from 1966. However, the first attempts to create international regulations specifically regarding people with disabilities followed with the Declaration on the Rights of Mentally Retarded Persons (1971), and the Declaration on the Rights of Disabled Persons (1975), both of which had much less force than a convention. (Lansdown 2009: 13) After the International Year of Disabled Persons and the adoption of the World Programme of Action concerning Disabled Persons, the Disability Decade marks the establishment of several serious instruments dealing with disabilities. The *Tallinn Guidelines for Action on Human Resources Development in the Field of Disability* were adopted in 1989 with a main focus on education and employment, and in 1991 the *Principles for the Protection of Persons with Mental Illness and for the Improvement of Mental Health Care* was adopted to define the fundamental freedoms and basic rights of persons with mental illness. Also during this period *Standard Rules on the Equalization of Opportunities for Persons with Disabilities* were adopted by the General Assembly in 1993. “They comprise 22 rules in total: four relating to

preconditions for equal participation, eight relating to target areas for equalisation of opportunities and ten relating to implementation measures.” (Lansdown 2009: 13) Although not a legally binding declaration, “[t]he rules serve as an instrument for policy-making and as a basis for technical and economic cooperation” (UN 1993b). Lansdown (2009: 13) argues further, that since this “resolution was adopted by consensus [...], without a vote [...], it is, S.A.] politically and morally binding on governments.” In 2003, as a continuum of the Asian and Pacific Decade of Disabled Persons, the *Biwako Millennium Framework for Action towards an inclusive, barrier-free and rights-based Society for Persons with Disabilities in Asia and the Pacific* (BMF) was adopted. Based on 7 priority areas for action with 21 targets, and 4 major strategic areas with 17 strategies, the BMF has

shed lights on many of these, including linkage between poverty and disability, community-based rehabilitation, promotion of disabled persons employment in multinational corporations, women with disabilities, self-help organizations of persons with disabilities, and a proposed international convention on promotion and protection of dignity and rights of persons with disabilities. (Akiyama 2005: 122)

One of the main achievements of this initiative is the high degree of national integration of the guidelines on a policy level (ibid.). As briefly mentioned in the introduction, the *Convention on the Rights of Persons with Disabilities* (CRPD) has the potential to accomplish something new, respectively break new grounds vis a vis disability rights. A whole article of the convention is devoted to the fact that there will be no sustainable development without giving special attention to people with disabilities (UN 2006b: Article 32); this marks a milestone for the rights of inclusion of people with disabilities ([b3w] 2006: 41).

It takes to a new height the movement from viewing persons with disabilities as 'objects' of charity, medical treatment and social protection towards viewing persons with disabilities as 'subjects' with rights, who are capable of claiming those rights and making decisions for their lives based on their free and informed consent as well as being active members of society. (UN enable no year b)

In the CRPD, a person is considered disabled, if she or he has to face barriers, such as infrastructure, communication and policies, which hinder her or him from participating within society. So it is stated in the preamble “that disability is an evolving concept and that disability results from the interaction between persons with impairments and attitudinal and environmental barriers that hinders their full and effective participation in society on an equal basis with others” (UN 2006b). By emphasising equality of opportunities and social participation for persons with disabilities, the CRPD represents an international law for an inclusive development cooperation. (Weigt 2007: 41f.) Thus, this latest treaty along with its predecessors has the potential to not only include more people into the international agenda, but also to address development problems in a



more holistic manner. The implications of these developments for women with disabilities will be discussed in further chapters.

### **3.3 Relevance for Women with Disabilities**

Bradley (2005: 68) states, that people with disability have been “systematically excluded from international development agendas because a homogenous image of an underdeveloped Other continues to influence development practice and policy.” She further criticises the “oppressive impact of using broad labels and images to describe the experiences of others.” The fact that people or women with disabilities form a highly heterogeneous group, whose needs are embedded in various fields and therefore require an inclusive approach of policy making, which is however still in the early stages of development, supports Bradley's conclusion of exclusion. Nevertheless, there are a number of treaties relevant for women with disabilities. The following documents, it should be noted, apply to women with disabilities in specific instances only, but they all work for the rights of disabled women in some category or another. The International Covenant on Economic Social and Cultural Rights and the International Covenant on Civil and Political Rights both endorse the fact that women with disabilities fall into more than one of the named bases of discrimination, precisely “race, colour, sex, language, religion, political or other opinion, national or social origin, property, birth or other status” (UN 1966b: Art. 2 and UN 1966a: Art. 2). With this variety of categories, once again it becomes obvious, how difficult it is to grasp the topic of women with disabilities. Nonetheless, in 1983, with the International Labour Organisation's (ILO) *Vocational Rehabilitation and Employment (Disabled Persons) Convention* (No. 159) and *Recommendations* (No. 168), the first binding international treaty that specifically mentioned women with disabilities was adopted. It “addresses the instruments related to the right to decent work of persons with disabilities and prohibits discrimination on the basis of disability.” (McClain-Nhlapo/McDonald 2009: 36) Moreover, the 1990 *Convention on the Rights of the Child* (CRC) includes several references to children with disabilities. In addition to the emphasis in Article 2 on the need to respect and ensure the rights of each child without discrimination of any kind, including sex and disability, Article 23 is in particular dedicated to children with disabilities. Overall the convention holds that a decent life and active participation of mentally or physically disabled children, as well as the right for special care and education without extra charges, should be guaranteed. Furthermore, the exchange of information and

knowledge (an essential part of all international cooperation) shall ensure the reinforcement of state capabilities to provide adequate “preventive health care and of medical, psychological and functional treatment of disabled children, including dissemination of and access to information concerning methods of rehabilitation, education and vocational services” (UN 1989). Another human rights declaration, the *Vienna Declaration and Programme for Action* (VDPA) supports the existing human rights framework, including the Universal Declaration of Human Rights and the United Nations Charter, and makes specific references to women. Paragraph 18 of Part 1 accentuates not only the importance of women and girls as beneficiaries of universal human rights, but also states the necessity of their participation in “political, civil, economic, social and cultural life, at the national, regional and international levels” (UN 1993c). The Declaration goes on to propose legal measures, national action and international cooperation in the fields of “economic and social development, education, safe maternity and health care, and social support” (ibid.) as methods of implementation of this aim. The VDPA also includes provisions against any discrimination based on sex and any “gender-based violence and all forms of sexual harassment and exploitation, including those resulting from cultural prejudice and international trafficking” (ibid.). The UN *Declaration on the Elimination of Violence Against Women* (1993) further builds momentum in the same direction. This treaty is relevant in many ways for women with disabilities who are at higher risk of experiencing violations and abuse, as stated earlier. The declaration covers many forms of violence, including acts of forbearance and measures for their prevention. Since “most Governments tended to regard violence against women largely as a private matter between individuals,” it was an innovation to perceive of VAW as “human rights problem requiring State intervention” (UN DPI 1996). Similarly, *The Girl Child* resolution not only refers to the Beijing Platform for Action, the CRC, CEDAW and the CRPD but also includes some important aspects regarding girls with disabilities, such as sexual and reproductive health and forced marriage. (cf. UN 2009b) While the UNESCO Salamanca Declaration on Special Needs Education from 1994 (UNESCO 1994) has another thematic focus to it, it nevertheless includes an examination of discrimination against women and girls with disabilities. Other relevant treaties that deal further with issues concerning women and in particular girls and women with disabilities will be discussed later in more detail.

### **3.3.1 Convention on the Elimination of All Forms of Discrimination against Women**

Whereas CEDAW was a groundbreaking international agreement regarding women's rights, it did not contain any specific reference to women with disabilities. Only after 1991, when the General Recommendation No. 18 (10<sup>th</sup> CEDAW session) on women with disabilities was adopted by the Committee on the Elimination of Discrimination against Women, an expert body was installed to monitor the progress of women in the signatory States parties to CEDAW. Through this document, concerns regarding women with disabilities found entrance into CEDAW. It was stated that

states parties provide information on disabled women... and special measures taken to deal with their particular situation, including special measures to ensure that they have equal access' to various social services and the opportunity to 'participate in all areas of social and cultural life' (McClain-Nhlapo/McDonald 2009: 36)

Practically “[t]his meant that every State Party to the Convention had to report on the status of women with disabilities in their countries” (Mathiason 1997: 3). However, Kinoti (2006: unpagged) points out, that

[t]he reporting mechanism under CEDAW and its Optional Protocol has not been sufficient to serve women with disabilities, particularly due to the fact that many countries have not signed the Optional Protocols that allow for shadow reports by civil society organizations and for investigations into cases of alleged rights violations.

Nevertheless, CEDAW addresses many issues relevant for women with disabilities. Summarising the thrust of articles,

articles 2(a-g), 3, 5(a), 6 and 15(1.2 and 3) deal specifically with violence against women. In addition, articles 13(a & b), 14.1, 2(c), 2(g) and 2(h) deal with social exclusion of women. Similarly articles 3, 5, 8, 11, 13 and 14 prohibit gender based economic discrimination that also falls within the purview of VAW. Articles 7, 8, 11 and 14(2-a) emphasize non-discrimination in power structures and decision making. (Minallah/Durrani 2009: 6)

### 3.3.2 Beijing Declaration and Platform for Action

In contrast to CEDAW, several references to girls and women with disabilities can be found in the Declaration and Platform for Action of Beijing. After relevant concerns were raised during former international conferences on women, such as the third World Conference on Women in Nairobi, many of the most pressing issues were incorporated into the Beijing Declaration. Article 46 recognises “that women face barriers to full equality and advancement because of such factors as their race, age, language, ethnicity, culture, religion or disability, because they are indigenous women or because of other status” (UN 1995: Art. 46). The plurality of discriminations against women with disabilities is thus identified and is further addressed in various parts of the document: of the 12 critical areas of concern, 9 contain paragraphs relevant to disabled women. Among them are poverty elimination measures, access to qualitative education and training, affordable and qualitative health care and information, prevention and elimination of violence against women, strengthening of women's economic capacity and equality of opportunities, participation in decision-making, research and documentation, human rights, as well as additional barriers for girls with disabilities (Mathiason 1997: 5ff.). Thus it can be seen that the interdependence and interconnectedness between disability and poverty were finally recognised, which provided the grounds for a more inclusive approach. The Beijing Platform for Action and CEDAW share many similarities. Overall, their main target areas are again dominated by traditional views in relation to the category gender, education, health, labour, political empowerment and rights. Some examples of parallels, according to the main areas of concern regarding women with disabilities, are given below in Table 8. The overlaps and supplements seen between both treaties motivate decision-making to cross-reference between the two and therefore consider them both in relation to actions being taken.

In the measuring progress for both CEDAW and Beijing Platform for Action, explicit referencing has been made to ensure that states reporting on progress for each of these international documents must also entail and refer to the other document. For example, in 1996, CEDAW committee revised its guidelines and invited state parties to take the twelve areas of concern into consideration when preparing for the report and in 2002, this was further revised to ensure that the reports submitted to the CEDAW committee have clear reference to progress made in implementing the Beijing Platform for Action. (UN-ESCWA 2009: 2)

Indeed, both treaties did influence policies and stakeholders, but the effect remains limited due to some structural weaknesses contained therein.

**Table 8 Similarities CEDAW And Beijing Platform for Action**

	<b>CEDAW Articles</b>	<b>Beijing Platform for Action</b>
<i>Attitudes, Images and Stigma</i>	Eliminate social and cultural stereotypes and practices based on gender inequality (article 5.a)	Eliminate negative cultural attitudes and practices against girls (strategic objective L.2)
<i>Rights</i>	Embody the principle of the equality of men and women in national constitutions (article 2.a) Abolish existing laws, regulations, customs and practices that discriminate against women (article 2.f)	Ensure equality and nondiscrimination under the law and in practice (strategic objective I.2)
<i>Education</i>	Eliminate discrimination against women to ensure equal rights between men and women in education (article 10)	Eliminate discrimination against girls in education, skills development and training (strategic objective L.4) Develop non-discriminatory education and training (strategic objective B.4)
<i>Mobility/ Transport</i>	States Parties shall accord to men and women the same rights with regard to the law relating to the movement of persons and the freedom to choose their residence and domicile (article 15.4)	Ensure that women's priorities are included in public investment programmes for economic infrastructure, such as water and sanitation, electrification and energy conservation, transport and road construction; promote greater involvement of women beneficiaries at the project planning and implementation stages to ensure access to jobs and contracts. (strategic objective F.2/167.d)
<i>Employment and economic development</i>	Eliminate discrimination against women to ensure the same rights for men and women in employment (article 11) In particular, ensure the same employment opportunities, free choice of profession, benefits and conditions of service, vocational training and equal pay for work of equal value (article 11.b, 11.c, 11.d)	Revise laws and administrative practices to ensure women's equal rights and access to economic resources (strategic objective A.2) Eliminate occupational segregation and all forms of employment discrimination (strategic objective F.5) Provide business services, training and access to markets, information and technology, particularly to low-income women (strategic objective F.3)
<i>Housing and Family Life</i>	Ensure equality between men and women in marriage and family life and, in particular, the same rights for both spouses regarding ownership, acquisition, management, administration, enjoyment and disposition of property (article 16.1.h)	Promote harmonization of work and family responsibilities for women and men (strategic objective F.6)
<i>Health</i>	Eliminate discrimination in the field of health care, to ensure equality between men and women in access to health-care services, including those related to family planning (article 12.1)	Increase women's access throughout the life cycle to appropriate, affordable and quality health care, information and related services (strategic objective C.1)
<i>Sexuality, Reproductive Rights and Health</i>	The same rights to decide freely and responsibly on the number and spacing of their children and to have access to the information, education and means to enable them to exercise these rights;	Undertake gender-sensitive initiatives to address sexually transmitted diseases, HIV/AIDS and sexual and reproductive health issues (strategic objective C.3)
<i>Violence and Abuse</i>	Take all legal and other measures necessary to provide effective protection against gender-based violence (General Recommendation #19)	Take integrated measures to prevent and eliminate violence against women (strategic objective D.1)

Source UN 1995; UN 2010; UN-ESCWA 2009: 2; Waldorf 2004

### 3.3.3 Millennium Development Goals

Waldorf (2004: 7f.) suggests that the MDGs should be seen “as a new vehicle for CEDAW and Beijing implementation” and an increased focus could be placed on the possibilities they provide. She further states that the reporting and monitoring process, which is an important part of the concept, “not only provides the opportunity for the global MDG framework to be fine-tuned to individual country circumstances but, as part of this effort, for the gender equality dimensions of each Goal to be given proper attention” (ibid.: 8). Three out of the eight MDGs are directly linked to health, MDG 3 addresses gender equality, and MDG 2 aims for universal primary education while the overall goal of these tools to achieve the eradication of extreme poverty and hunger is also relevant. But overall, “only two of the eight indicators have a clear reference to gender equality and women's advancement” (UN-ESCWA 2009: 2). Although formulated and accepted by the majority of nations with the ambitious aim to better the world, the MDGs are criticised as being a weak effort in several crucial aspects. Carol Barton (2005: 4, emphasis in original) argues that the MDGs “ignore an **intersectional analysis of multiple oppressions** due to gender, race/ethnicity/caste, class, sexual orientation, age and national origin” and do not address persons with disabilities. Considering the strong link between poverty and disability as well as the manifold risks for discrimination of women with disabilities as shown above, the neglect seems fairly surprising. Furthermore, “[t]he MDGs do not use the human rights framework of the Millennium Declaration, which gives primacy to international law, including affirmation of CEDAW“ (ibid.) The concept is therefore not holistic (cf. Hakro/Talpur 2005: 9). After receiving a lot of criticism regarding the missing consideration of disability within the MDGs, the international community tried to make up for this omission. The *Biwako Millennium Framework for Action towards an inclusive, barrier-free and rights-based society for persons with disabilities in Asia and the Pacific* is one example of the integration of the more inclusive approach: “The regional framework for action explicitly incorporates the millennium development goals and their relevant targets to ensure that concerns relating to persons with disabilities become an integral part of efforts to achieve the goals” (UN ESCAP 2003). On a more universally representative level, the United Nations General Assembly adopted the following resolution in 2006: *Implementation of the World Programme of Action concerning Disabled Persons: realizing the Millennium Development Goals for persons with disabilities* (UN 2006c). Therein it is recognised that the human rights and fundamental freedoms of persons

with disabilities need to be promoted and fully protected in order to achieve the MDGs.

### 3.3.4 Poverty Reduction Strategy Paper

Like the MDGs, the PRSP plays a substantive role in policy making, given the correlation between women, women with disabilities and poverty and as outlined above, their trigger-oriented approach.

*A PRSP describes the macroeconomic, structural, and social policies and programs that a country will pursue over several years to promote growth and reduce poverty, as well as external financing needs and the associated sources of financing. They are prepared by governments in low-income countries through a participatory process involving domestic stakeholders and external development partners, including the IMF and the World Bank. (IMF 2010, emphasis in original)*

In accordance to the idea of Poverty Reduction Strategies (PRS), PRSP are designed very differently, according to specific country needs. Nevertheless, their development and therefore the extent to which persons with disabilities are included, are influenced by different means. For one thing, although ownership by the implementing country is a priority within the PRS process, the IMF and the World Bank have great influence over strategies since they link their grants, loans and debt relief conditions to fulfilment of the PRS (cf. Miller 2007: 24). Because the World Bank “failed to notice people with disabilities and their requirements” as well as “lacks a comprehensive approach that appropriately addresses the issue” (Miller/Ziegler 2006: 8), relevant countries did not have anything to stimulate them to attend to disability concerns. Secondly, the intricate linkage of PRSPs with other concepts in development cooperation such as the MDGs (Esser 2007: 39), and the fact that respective treaties are not linked to persons with disabilities, are other reasons why policy initiatives are missing. Thirdly, whereas the civil society was meant to be an essential part in the development of PRSPs, persons with disabilities and their organisations “seldom participated in the PRSP process” (Miller/Ziegler 2006: 8). Finally, a lack of data on persons with disabilities and issues associated with them, leads to the misguidance of proposed actions (ibid.). Despite the above critique of PRS, Miller (2007: 24) identifies three major advantages of and improvements to the strategy. Firstly, a new multilayered definition of poverty as the centre of all endeavours meant an important shift in concept. Secondly, the partnership based approach encourages harmonisation of the development cooperation. Finally, the dialogue between governments and the civil society is strengthened, making it easier for organisations of and for persons with disabilities to approach governmental entities. However, this conclusion is not commonly shared. Kabeer (2005: 5) argues that PRS

have been adopted at a time when changing aid modalities associated with the PRSPS had begun to shift resources and priorities almost exclusively to governments as policy support and away from the civil society actors who would hold government responsible and accountable for the promises it made in its policies and legislation as well as in the conditionality on which it received such support. Given that women have far less access to government resources than men, resources made available through international agencies had helped to partly compensate for this shortfall.

Thus it can be said that opportunities to influence social and political conditions for and of women with disabilities have not been fully developed. This conclusion is backed by the fact that poverty might be central for the content of PRSP and persons with disabilities might be considered a vulnerable group, but the acknowledged correlation between poverty and disability has not been analysed and therefore persons with disabilities remain sidelined. (Miller 2007: 26)

### **3.3.5 Standard Rules on the Equalization of Opportunities for Persons with Disabilities**

To create a “tool for policy-making and action for persons with disabilities and their organizations” (Mathiason 1997: 2), the Standard Rules were finalised in 1993. The idea to achieve equal rights for girls, boys, women and men with disabilities with every other citizen was not new, given the human rights declaration of 1948. Nevertheless, Rule number 9 includes some new and innovative goals:

3. States should promote measures to change negative attitudes towards marriage, sexuality and parenthood of persons with disabilities, especially of girls and women with disabilities, which still prevail in society. The media should be encouraged to play an important role in removing such negative attitudes. (UN 1993b)

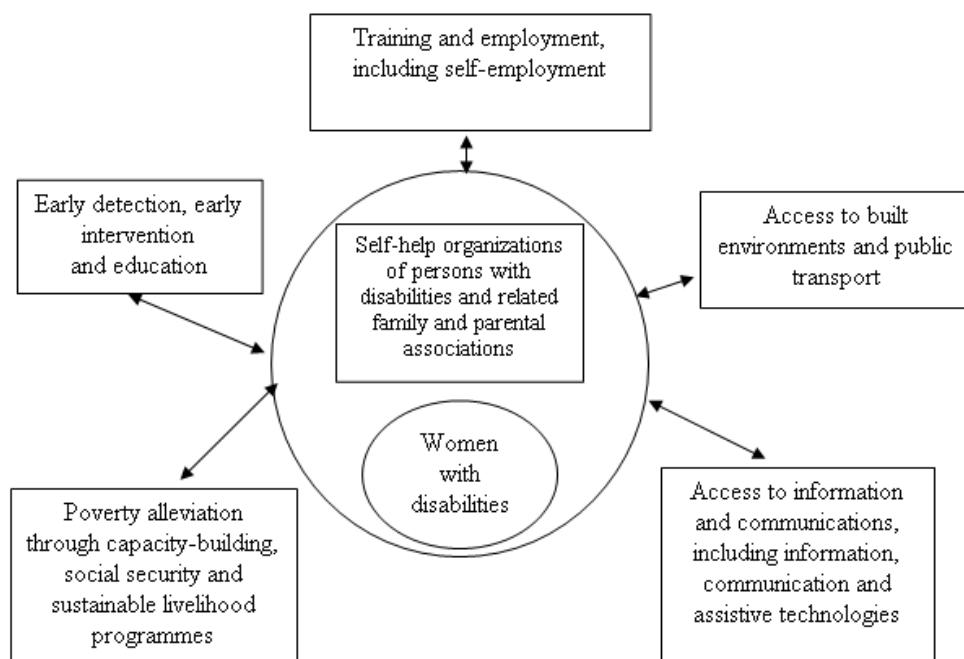
Incidentally to change attitudes and to acknowledge the essential role of the media in doing so are important alterations. Also, to place persons with disabilities and their organisations in a vital role in achieving the new aims marks an improvement. However, the Standard Rules were criticised for their insufficient gender dimension. According to Mathiason (1997: 3), this can be partly ascribed to the fact that “[a]gain, most of the delegates concerned with drafting the 'Rules' were men, who did not see the need to include a gender dimension in the text of the 'Standard Rules'.” She further notes that only Chapter II of the Rules, the Target Areas for Equal Participation, are particularly gender-sensitive.



### 3.3.6 Biwako Millennium Framework for Action

The BMF 2003–2012 “places particular emphasis on the inclusion of women with disabilities” (Walji 2009: 31). Priority area B refers directly to women with disabilities. Five critical issues are identified, and three targets and 12 required actions are presented to achieve these targets. Following the recognition of multiple disadvantages and discriminations, the BMF urges Governments to ensure anti-discriminatory measures, DPOs to adopt policies to promote full participation and equal representation of women with disabilities, and national mainstream women's organisations to include women with disabilities (UN ESCAP 2003). Five years later, the Biwako Plus Five (UN ESCAP 2007a: 6) extended the goals from 2003 by calling for sensitisation of “communities in remote areas to the potential negative impacts of culture on women and girls with disabilities” and by claiming measures to develop respect for the marriage, parenthood and relationships of women with disabilities. With these targets the BMF is specifically supportive of women with disabilities with disabilities, a fact that makes it more relevant than other treaties. Figure 4 further underlines this given significance.

**Figure 4 Graphic presentation of the priority areas**



Source UN ESCAP 2003

To put women with disabilities in the centre of all endeavours and to recognise the strong linkage between their consideration and other priority areas of action, is a critical step to the goal of achieving an inclusive approach. Furthermore, the focus on participation in particular on a policy level is an important impetus for overall inclusion.

### **3.3.7 Convention on the Rights of Persons with Disabilities**

Since the CRPD has been praised for its ground-breaking achievements, as outlined above, it has to be investigated as to whether it adequately includes women with disabilities and to what extent it meets the expectations. It is undeniable, that “[f]or the first time, a widely acknowledged and ratified UN core human rights treaty emphasizes in detail the rights of all people with disabilities – with specific attention to the rights of women with disabilities” (McClain-Nhlapo/McDonald 2009: 37). It can be seen that already in the Preamble of the CRPD (UN 2006b), women with disabilities are being recognised in two ways. Firstly, it is acknowledged that persons with disabilities are subject to “multiple or aggravated forms of discrimination on the basis of race, colour, sex, language, religion, political or other opinion, national, ethnic, indigenous or social origin, property, birth, age or other status”. Secondly, and more directly, it is recognised “that women and girls with disabilities are often at greater risk, both within and outside the home, of violence, injury or abuse, neglect or negligent treatment, maltreatment or exploitation”. Article 6 of the CRPD is the first stand-alone article within a UN Convention dedicated particularly to experiences and rights of girls and women with disabilities:

1. States Parties recognize that women and girls with disabilities are subject to multiple discrimination, and in this regard shall take measures to ensure the full and equal enjoyment by them of all human rights and fundamental freedoms.
2. States Parties shall take all appropriate measures to ensure the full development, advancement and empowerment of women, for the purpose of guaranteeing them the exercise and enjoyment of the human rights and fundamental freedoms set out in the present Convention.

According to Women with Disabilities Australia (WWDA 2005) the stand alone article would initiate five points: Firstly, the focus lies on the needs and particular concerns of women with disabilities; secondly, it provides a basis for the establishment and reorientation of services and programmes for disabled women; thirdly, the article initiate feasible policies and strategies which will provide a reference point for policy development and resource allocation; fourthly, it provides clear rationale for the development of specific programs; fifthly, it encourages the development and maintenance of mechanisms which increase the participation and representation of disabled women in all decision-making; finally, the paragraph provides a basis

for the monitoring, evaluating and reporting of progress. McClain-Nhlapo and McDonald (2009: 37f.) argue against this article however. They point out that

the rights of women with disabilities should not be seen as separate from those of all persons with disabilities – for the CRPD pertains to all people with disabilities. The effective and appropriate translation of the CRPD to on-the-ground activities and objectives requires the application of a gender lens whereby women with disabilities are mainstreamed into all aspects of project design, planning, implementation and evaluation.

Article 8 of the CRPD seeks an attitudinal change of mindsets by requesting states to "combat stereotypes, prejudices and harmful practices relating to persons with disabilities, including those based on sex and age, in all areas of life" (UN 2006b). An entirely new approach in this regard is that gender mainstreaming is conceived of as an inherent part of this convention, and made overtly visible through the gender sensitive language used (cf. Kinoti 2006). Furthermore, some articles such as Article 25 pointedly make direct reference to this motive in declaring, for example, that "States Parties shall take appropriate measures to ensure access for persons with disabilities to health services that are gender-sensitive, including health-related rehabilitation" (UN 2006b). Article 16 refers to freedom from exploitation, violence and abuse with a focus on the gender-based aspects of these violations. Kinoti (2006: unpagged) criticises the article though, on the grounds that it "fails to recognize that women are the primary victims"; such critique may be objectionable however, as women with disabilities may not necessarily conceive of themselves primarily as victims. Article 28 is of particular relevance for the development sector, as it initiates the access to social protection programmes and poverty reduction programmes for women and girls with disability (UN 2006b). As with all human rights instruments, the main challenge of the CRPD remains its adequate implementation on the ground. Some states have shown their reluctance towards the realisation of this treaty, and even some signatory states fall short of fulfilling their commitments to it. Such lip-service and this lack of concrete action seems to be a pattern when it comes either to rights of persons with disabilities or women's rights. Similar problems have emerged with the implementation of treaties like the CEDAW. One of the main methods to pressurise nations to fulfil their commitments with regard to such treaties, lies in their obligation to report publicly and regularly on the status of the instruments' implementation. Through this, the civil society, regional bodies and the international community of states can not only monitor the actions undertaken, but also gain a sense of what still has to be done and in what areas, non-governmental actors have to compensate for or supplement governmental activities (cf. Kinoti 2006; McClain-Nhlapo/McDonald 2009: 37). By facilitating the functioning of organisations of persons with disabilities as a 'watchdog' through such

methods as described above, the international framework involves the civil society in the monitoring of development actions. Hence one of the main claims, based on the modern concept of 'nothing about us without us', is officially acknowledged. Griffo (2007: 5) assumes that the CRPD will contribute to transforming development cooperation, so that it

- Ensures that international cooperation, including international development programs is inclusive of and accessible to persons with disabilities;
- Facilitates and supports capacity-building, including through the exchange and sharing of information, experiences, training programs and best practices;
- Facilitates cooperation in research and access to scientific and technical knowledge;
- Provides, as appropriate, technical and economic assistance, including by facilitating access to and sharing of accessible and assistive technologies and through the transfer of technologies.

It can be concluded that for women with disabilities, the CRPD offers a series of new opportunities for participation. McClain-Nhlapo/McDonald (2009: 37) identify four areas of great potential if the CRPD is implemented carefully:

- Increased Recognition and Voice of Women with Disabilities in the International Community and in Decision-Making.
- A More Inclusive and Responsive Development Agenda.
- Increased Socio-Economic Empowerment and Agency of Women with Disabilities.
- Reduced Stigmatization of women with disabilities at local, national and international levels.

Overall the CRPD is an ambitious document, which holds high potential for the rights and participation of persons with disabilities. That its implementation lags often behind is the main problem in most of the countries, many are far away from the set target, as will be shown using the example of Pakistan.

### ***3.4 Consolidation: Potential for the Future***

The above examination of the international policy framework shows a fair number of treaties that acknowledge the multifaceted nature of discriminations against women and girls with disabilities, and address various concerns regarding them. Over time, and particularly with the adoption of the CRPD, substantial progress and success has been achieved in some specific areas. While the process of developing progress and monitoring reports is often believed to be the driving force in stimulating the national implementation of treaties, it remains questionable whether the quality and scope of these reports is sufficient to influence government entities and whether they are being used to reflect and improve targets, strategies and actions. Overall, opinions of development actors are divided in regard to which of the two different approaches

should be adopted: they either support the view, that special attention needs to be given to women with disabilities as a stand-alone issue, or they urge for mainstreaming the inclusion of women with disabilities in all fields of society. However, neither perspective finds women with disabilities represented satisfactorily on the overall international policy level. Considering the number of treaties in which they are overtly mentioned, it becomes obvious that women with disabilities receive little scope and attention as a category. Bradley's assumption, as discussed in chapter 3.3, was that on the international agenda, people with disabilities are systematically excluded. Partially, this has indeed been confirmed. Even in documents specifically addressing persons with disabilities, women with disabilities are only marginally taken into consideration. This brings back the question of whether women are simply assumed as being part of considerations anyway, and whether this approach is sufficient. The experience of gender studies shows that implicit incorporation is ineffective and in most cases a deception. Therefore, the following questions must be considered indispensable for anyone developing policies:

- Is mainstreaming an effective strategy for including women with disabilities in gender and disability policy?
- Are there additional strategies that can be deployed alongside mainstreaming focusing specifically on women with disability?
- Have lessons from gender mainstreaming in other sectors been adequately absorbed so that the similar oversights are avoided in disability policy?
- Is it enough for disability policies to pledge a commitment to equal participation, contribution and benefit for men and women with disabilities when women with disabilities experience marginalization and exclusion in diverse and different ways to men? (Walji 2009: 32)

It remains to be seen whether, after years of negotiations, the finally established UN Entity for Gender Equality and the Empowerment of Women, short *UN Women* will bring about any change or improvement to the current situation.

UN Women will have two key roles: It will support inter-governmental bodies such as the Commission on the Status of Women in their formulation of policies, global standards and norms, and it will help Member States to implement these standards, standing ready to provide suitable technical and financial support to those countries that request it, as well as forging effective partnerships with civil society. It will also help the UN system to be accountable for its own commitments on gender equality, including regular monitoring of system-wide progress. (UN Women 2010b)

UN Women's aims of addressing policy-making on an international stage and monitoring its domestic implementation on the ground in cooperation with the civil society, are not new. Which innovations, in particular for women issues, will come with the creation of this body, depends on a variety of questions. Certainly, as an UN sub-organisation, UN Women embodies an authority now independent of the oversight of UNDP or UNFPA, and can be expected to work autonomously with a considerable budget of its own. UN Women merges four existing parts of

the UN system which had been working on gender equality and women's empowerment: the Division for the Advancement of Women (DAW), the International Research and Training Institute for the Advancement of Women (UN INSTRAW), the Office of the Special Adviser on Gender Issues and Advancement of Women (OSAGI) and the Development Fund for Women (UNIFEM). (cf. *ibid.*) The new status of this body on par with other main UN programmes potentially provides for better cooperation, increased knowledge transfer and new allocation of funds. Previous attempts to integrate gender in treaties and organisations have only been partially successful. Gender has become a hollow phrase. For this reason, UN Women is a much needed attempt to advance the interests of all human beings in programmes and policy. For women with disabilities, UN Women represents a new platform to assert their interests and requirements. It is to be hoped that the trend of incorporation and recognition of persons with disabilities on the international agenda will be reinforced with the establishment of this UN body.

## **4 Statement of Facts: Pakistan**

The international level does not necessarily represent national dimensions adequately and has therefore often little impact on ground realities. Even if governments sign and ratify international treaties, national implementation and promotion often lags behind those initial actions. The case of Pakistan is not different in this matter. Certainly, due to its unique historical, cultural and political composition, Pakistan faces specific kinds of social and political challenges, but these cannot justify the numerous violations against human rights that occur in the country; specifically, in relation to Pakistani women. Moreover, neither can the context justify the general negligence and discrimination that minorities and specific population groups have to face in Pakistan.

### ***4.1 Perpetual Struggles for Peace, Structure and Identity***

In the attempt at nation building after independence from British India in 1947, Pakistan had to create its own unique national identity to justify its existence and to dissociate itself from India. To achieve this collectivisation of identity, religion was used as the flagship for the separation, as it was one pillar that received wide acceptance throughout the country. Other identity markers were less conclusive and had to be negotiated within a long social and political process. For this reason, it took the country until April 1973 to agree on a Constitution. Keeping in mind that the population consists of six main ethnic groups that together speak more than sixty languages, the enormous cultural diversity is evident. The country is divided into four provinces plus the capital city Islamabad, which are highly different in ecological, economical, political and social structures. The dominant province is Punjab; the federal government is concentrated here, and it also has the highest population. Overall, there is great disparity between provinces, as well as between Pakistan's rural and urban areas. Pakistan has had and still has to face problems peculiar to multiethnic post-colonial countries such as separatist movements, civil wars and ethnic heterogeneity (Korff 2007: 178). Today, the country's situation is not less complex than it was before or during its foundation. In fact, it is even more challenging; the country faces armed conflicts and war on national territory, a shortage of resources and political instability, in addition to other problems such as those related to poverty, commonly faced by developing countries. Facts and figures offer valuable clues to social realities. Pakistan's Human Development Index

(HDI) 2009 ranked 141 out of 182 countries (numbers are from 2007 and prior, UNDP 2009b: 173). This is calculated taking into account the low average life expectancy at birth, measured at 65.9 years for males and 66.5 years for females in the case of Pakistan; a high rate of illiteracy with 67.7 percent males being literate and 39.6 percent literate women; a weak gross enrolment in schools; as well as a generally poor standard of living (UNDP 2009b: 183). Although it is true that not all citizens are living in poor conditions, it is equally true that about one third of the population does (cf. ADB 2002b: 9). Politically, Pakistan is frequently labelled a fragile state. According to the British Department for International Development (DFID 2005: 7), this means that the government “cannot or will not deliver core functions to the majority of its people, including the poor.” Furthermore, it is not providing “[t]he most important functions of the state for poverty reduction [which, S.A.] are territorial control, safety and security, capacity to manage public resources, delivery of basic services, and the ability to protect and support the ways in which the poorest people sustain themselves.” Moreover, Pakistan ranked 10<sup>th</sup> in *The Failed States Index 2010* (FP 2010). This means practically, that the government “can no longer perform its basic security, and development functions [...], has no effective control over its territory and borders [and, S.A.] can no longer reproduce the conditions for its own existence” (CSRC 2006). Since the proclamation of the Islamic Republic of Pakistan in 1956, the country has seen thirteen Presidents, including four military leaders. All in all, the Constitution has been suspended and again restored three times, the last time in 2007 under the former President General Pervez Musharraf. The military is still the most powerful institution in Pakistan, followed by a moderate judiciary and civil service, leaving a weak leadership and police organisations far behind in terms of power. (FfP 2009)

In the absence of well-organized political parties, the clash between a centralized administrative structure and a regionally differentiated Pakistani society has strengthened provincial sentiments, confounding the task of forging an exclusively Islamic identity. Long-lasting structural imbalances within the state, polity, and economy, not the lack of a coherent religious ideology, have been at the root of Pakistan's domestic instabilities. (Krieger 2001: 626)

It can be seen that Pakistan's main problem today is social disparities, aggravated by severe population growth as well as the absence of economic reforms and employment opportunities. These issues are intensified by a shortage of resources, especially in rural areas. (Schetter/Mielke 2008: 19) The problems are multilayered deep-seated, so too are the consequences. This does neither mean that awareness regarding them is non-existent in the country, nor does it mean that Pakistan, its citizens and its policy makers are unconscious of the situation in all its complexity. This argument will be illustrated in the following chapters.



## ***4.2 Pakistan in the International Arena***

Although on the surface, Pakistan is a breeding ground for domestic conflicts, numerous violations against human rights and extremist thought, its essential value and conceived role within the geographical region of South Asia and therefore internationally, is an open secret well known to all. Pakistani governments have never been reluctant to play within this political arena, according to their interests and benefits. Especially after September 11, 2001, Pakistan has strengthened its strategic bonds with the USA and has reinforced efforts to restore its regional relations, particularly to China, as an alternative to the USA, and to Saudi Arabia, due to its dependency on oil and labour migration. With Iran and Central Asian countries the bonds are weaker, but expandable. (Schetter/Mielke 2008: 34) Contrary to the cases of India and China, Pakistan doesn't display any obvious intention to be a global player or an active participant in global governance. Pakistan's interest lies instead in preserving its regional position of power and to repel influences such as the implementation of human rights, that could weaken its unstable internal power structures. (cf. FRD 2005: 21; Schetter/Mielke 2008: 34) At the same time, Pakistan uses international and bilateral resources for its own political benefits such as nuclear weapons technology. This focus on regional power becomes distinct through an examination of Pakistan's selective engagement in regional, international organisations and confederations. Nevertheless, Pakistan is an active participant of many global and regional key organisations and has signed a number of international treaties; it is member, inter alia, of the United Nations (UN), the Asian Development Bank (ADB), the International Bank for Reconstruction and Development (IBRD), the International Labour Organization (ILO), the International Monetary Fund (IMF), the United Nations Conference on Trade and Development (UNCTAD), the United Nations Educational, Scientific and Cultural Organization (UNESCO), the World Health Organization (WHO), and the World Trade Organization (WTO). As a result of its membership, Pakistan hosts many representatives of these organisations, and receives financial support, transfer of knowledge, as well as specifications on framing policies. By supervising governmental institutions in policy making and the development of programmes, such as the PRSP or National Action Plans, international organisations can influence the directions and content of action substantially. Over time, Pakistan's various governments have made some efforts to improve the state of human rights and the situation for women and people with disabilities, especially since the year 2000.

## 4.3 The Government and Women

*No nation can rise to glory unless your women are side by side with you. We are victims of evil customs. It is a crime against humanity that our women are shut up within the four walls of the house as prisoners. There is no sanction anywhere for the deplorable condition in which our women have to live. You should take your women along with you as comrades in every sphere of life.*

(Mohammad Ali Jinnah, first Governor-General of Pakistan, in a speech at the Aligarh Muslim University Union on 10 March 1944, qtd. in Samiuddin/Khanam 2002: 3, emphasis in original)

### 4.3.1 Policies for Women in Pakistan and their Implementation

It is undeniable that the social and legal status of women in Pakistan has had to face many obstacles and throwbacks. But in contrast to the widespread perception that Pakistan has failed to institute efforts to reduce gender inequality, there exist a wide range of institutions and instruments that are not only concerned with the topic, but indeed play an active role in overcoming gender disparities. One of the most significant statute in the context of Pakistan is the *Constitution of Pakistan* (GoP 1973); in Article 25, the equality of citizens is legally positioned:

- (1) All citizens are equal before law and are entitled to equal protection of law.
- (2) There shall be no discrimination on the basis of sex.
- (3) Nothing in this Article shall prevent the State from making any special provision for the protection of women and children.

These frequently cited statements as well as other articles in the same text, as will be shown further in this chapter, not only stipulate the equality of all citizens, but furthermore, strongly point to the equality of men and women in employment, education and other areas. On the basis of this text, further efforts were made to reduce gender inequality in the public space. In 1983, the government of Pakistan established a Commission on the Status of Women with the purpose of ascertaining the rights and responsibilities of women within Pakistani society as well as their participation in combating social intolerance, poverty and health-related issues. Furthermore, the Commission was directed to identify measures for providing education, health and employment opportunities for women. Consequently, the recommendation to create a permanent commission as an independent statutory body to influence policy and law making, resulted in the establishment of the National Commission on the Status of Women (NCSW) in 2000. Its main responsibilities were to review and monitor all laws, rules and regulations, to encourage research and to develop and maintain interaction and dialogue with NGOs and experts. (cf. GoP 2008a: 16) In 1996, Pakistan acceded to the Convention on the Elimination of All Forms of

Discrimination against Women (CEDAW) and submitted its first implementation report in 1998, with reports two and three submitted in 2007. Further international treaties relating to women's rights that Pakistan has committed itself to, include, inter alia, the Vienna Declaration and Programme of Action (VDPA), the Convention on the Rights of the Child (CRC) and most prominently, the 1995 Beijing Platform for Action as well as the MDGs. (cf. ADB 2008a: 35)

The National Plan of Action (NPA) for Women was established by the Ministry of Women Development (MoWD) in 1998 and formally approved in March 2000, as a result of the Fourth World Conference on Women 1995 in Beijing. It aspired to be more inclusive than former instruments, with its stated goal of facilitating the participation and protection of women in all spheres of life. Accordingly, the focus areas were framed according to the twelve critical areas set forth in Beijing, namely: Women and Poverty, Education and Training for Women, Women and Health, Violence Against Women, Women and Armed Conflict, Women and Economy, Women in Power and Decision Making, Institutional Mechanisms for the Advancement of Women, Human Rights of Women, Women and Media, Women and Environment as well as The Girl Child. (cf. GoP 2008a: 16f.; SDPI 2008: 83)

With a focus on three major intervention areas, namely social, economic and political empowerment of women, a new *National Policy for Development and Empowerment of Women* (NPDEW) was established in 2002. These three key categories included the sub-areas of education, health, law and access to justice, violence against women, women in the family and community, and the girl child; poverty, access to credit, remunerated work, women in the rural economy and informal sector, and sustainable development; and power and decision making (SDPI 2008: 83).

Although not specifically targeting women, the first Poverty Reduction Strategy Paper (PRSP), introduced in Pakistan for the time period 2003-2006, was nonetheless relevant for women's concerns. The four core elements within the Paper were acceleration of economic growth, improvement of governance, investment in human capital and targeting the poor and vulnerable. Although not given priority, gender equality and women empowerment was considered one main arena for achieving stated goals. The second PRSP 2008-2011, builds on the “lessons learnt during the implementation of PRSP-I and takes into account recent political, economic and social events, both domestic and international, which have adverse impacts on Pakistan” (GoP 2008b: 5). While main target areas were adjusted and extended, women and gender concerns remained merely a side issue. Another major set of initiatives that resulted from conclusions that gender-related gaps had not been significantly reduced through existing national and international instruments (cf. GoP no year c),

were the five national Gender Reform Action Plans (GRAPs), approved during 2004-05. These Plans “propose policy, institutional and budgetary reforms at the federal, provincial and local levels across all sectors” (GoP 2008a: 18) with the aim of facilitating women's access to economic, political and social resources. As a result of the policies discussed above, several legal measures were implemented after the beginning of the new millennium. The Criminal Law Amendment adopted in 2004, targets not only traditional practices involving violence against women but also promises more effective provision of justice with regard to crimes against women. The amendment focussed particularly on crimes committed in the name of honour and made changes in “the existing criminal law to deal effectively with offenders.” (GoP no year e). The Women's Protection Bill, or Protection of Women (Criminal Law Amendment) Act 2006 aims to encompass a wider scope: To “provide relief and protection to women against misuse and abuse of law and to prevent their exploitation”, the “Pakistan Penal Code (Act XLV of 1860), the Code of Criminal Procedure, 1898 (Act V of 1898), the Dissolution of Muslim Marriages Act, 1939 (VIII of 1939), the Offence of Zina (Enforcement of Hudood) Ordinance, 1979 (VII of 1979), and the Offence of Qazf (Enforcement of Hadd) Ordinance, 1979 (VIII of 1979)”, were all amended (GoP 2006b). By promising “to curb abuse of police powers and [to, S.A.] create a just and egalitarian society” (ibid.) the objectives of this bill are quite ambitious. In 2009, three more legislative steps were carried out. One of them was the Domestic Violence (Prevention and Protection) Act 2009, which condemns “all intentional acts of gender based or other physical or psychological abuse committed by an accused against women, children or other vulnerable persons, with whom the accused is or has been in a domestic relationship” (GoP 2009a: 3). The other statutes of significance are the Criminal Law (Amendment) Act from the same year, and the Women Protection Act 2010 which targets sexual harassment at the workplace. In short, the government of Pakistan has indeed instituted a legal framework to improve the situation of women in the country. The reasons for this can be found in the ineffectiveness of instruments that had already been in place, and the great demand by the civil society and international actors to reform existing legislation. However, the effectiveness of Pakistani legislation has been and still is criticised by many sides, including from within the Pakistani government itself. “Government structures are currently set up on the assumption that policy formulation and implementation are gender neutral, so new platforms for analysis within a wide range of ministries have to be established for gender mainstreaming to be effective” (ADB 2008a: 39). Moreover, the theoretical and practical approaches have changed. By implementing global concepts to improve

the status of women, the specific target areas and respective methods have been extended and adjusted in detail. How this affects the status of women with disabilities will be discussed in more detail later in this paper.

#### **4.3.2 Related and Responsible Governmental Authorities**

In 1979, the first division for women in the cabinet secretariat was implemented. An upgrade in its designation to the *Ministry of Women Development* (MoWD) followed ten years later in 1989, and was done with the aim of improving the overall status of women in Pakistan, to promote their participation within governance and society, to ensure the implementation of international commitments, and to advance gender mainstreaming and equality. (GoP 2009b) Under the supervision of the MoWD, several Divisions are working towards gender equality and the protection of women. The Women Development Division for example, “is responsible for making policies and programmes for the welfare of women and protection of their rights.” (GoP no year d) Since its institution, the MoWD is one of the most important authorities concerning women with disabilities, as it deals with several actors including governmental entities, donor agencies and civil society, in order to implement policies regarding women and persons with disabilities. Due to its role as both a coordinating and implementing body, the results and achievements of the MoWD have been critically judged in several ways. “The MoWD continues to be hampered by weak political will, misplaced focus on direct project implementation at the grassroots rather than at the policy level, inadequate capacity, and poor resources” (ADB 2008a: 39). In other words, the main barriers to the Ministry's work are its limited focus on the project level, a shortage of resources and missing analytical capacity. These weaknesses are being recognised by the MoWD. This is evident from the statement on the Ministry's website, which recognises that

[i]n the past, the Ministry of Women Development has largely remained engaged in monitoring activities and setting up institutions that have proliferated throughout the country that are neither visible nor functioning properly with the result that they have had very little impact on the promotion of welfare of women. (GoP no year d)

This realisation is mirrored in the development and implementation of policies and programmes. Overall the MoWD has implemented some pilot projects together with NGOs and private actors (cf. SDPI 2008: 82). The stated aim of gender mainstreaming becomes evident in the example of the NPA for women. This plan of action states that Ministries and Departments have to “take the lead role in integrating gender issues and initiating activities in their respective sectors” (GoP

1998: viii). In total, 12 different Ministries and 8 related Departments were responsible for the implementation of the NPA, including the Ministry of Agriculture, Ministry of Defence, Ministry of Environment, Ministry of Interior, Ministry of Information & Media Development, Ministry of Labour & Manpower, Ministry of Law, Justice and Human Rights, Ministry of Population Welfare, and the Planning Commission. It can be seen that gender is envisioned as an integrative component within all Ministries. But progress remains limited to the classic 'soft' Ministries such as education, health and women, which have an augmented focus on gender or are envisaged as key players in implementing gender related programmes and activities. Gender mainstreaming in Pakistan has therefore a long path ahead.

## **4.4 The Government and Persons with Disabilities**

*How our Govt. murdered its commitment to persons with disabilities as espoused in the 1981 Ordinance of Disabled Persons and the 2002 Policy on Disability. No representation of persons with disabilities and organizations off for persons with disabilities in all discussions, planning and legal formulation directly or indirectly affecting persons with disabilities. Lack of accessibility in buildings and roads, no elevators and ramps for wheelchair users, no braille blocks for the blind and symbols for the deaf, no job opportunities for PWDs who can work; no scholarship programs for PWDs who want to study and enhance their skills. What a shameful govt. we have!!* Faris Mughal<sup>2</sup> in a Letter to all Disabled Peoples' Organisations from 8 October 2009 (Mughal 2009)

### **4.4.1 Policies for Persons with Disabilities in Pakistan and their Implementation**

Traditionally, disability issues fall within the scope of the health sector, because of a more medically oriented view of disability itself. One consequence of this arrangement is an increasingly selective treatment of the phenomenon in question, particularly with regard to social and legal aspects. In Pakistan, disability issues had not been part of the domestic agenda until the 1980's. The first legal instrument promulgated by the government was the *Disabled Persons' (Employment and Rehabilitation) Ordinance* in 1981, initiated by the UN's proclamation of the year as the *International Year for Disabled (IYDP)*. In this statute, a person with disabilities is defined as “a person who, on account of injury, disease or congenital deformity, is handicapped for undertaking any gainful profession or employment in order to earn his livelihood, and includes a person who is blind, deaf, physically handicapped or mentally retarded” (GoP 1981). The aim of these developments simply was “to provide for the employment, rehabilitation and

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<sup>2</sup> Faris Mughal is poet, writer and runs his DPO (DOST)

welfare of disabled persons” (ibid.), inter alia by establishing a *National Council for the Rehabilitation of Disabled Persons* (NCRDP). The Council was made responsible for the realisation of the ordinance on a federal level. It had to ensure the formulation of policies as well as evaluate, assess and co-ordinate their execution by the respective Provincial Councils (ibid.). The Ordinance also provides for the formation of the *Disabled Persons Rehabilitation Fund*, that was made up of substitutional payments by establishments, governmental grants and donations. The Fund was set up to be utilised for persons with disabilities through the creation of training centres, financial assistance, scholarships, welfare and medical support. According to the Ordinance, establishments have to employ at least one percent persons with disabilities within their workforce, under equal treatment as not disabled employees. Alternatively, the establishments can make an adequate payment into the installed fund, to support the Provincial data collection about disabled population and the setup of training centres for people with disabilities. The problems with attempting to execute this part of the Ordinance concern firstly, the possibility of exemption for establishments by the National Council, and secondly, a limitation of admissibility for legal actions (ibid.). There are various, wide-ranging reasons for the Ordinance not to materialise. One of them is the fact that these instruments are not dynamic enough to cope with the needs at hand. For example, the amount collected for the Fund was highly “insufficient to start any viable project for the disabled” (NOWPDP 2008: 48). However, the Ordinance forms the overall basis for the legal framework of people with disabilities in Pakistan. The only change that has been made since its introduction was in the Office Directive for “Enhancement Quota for Disabled Persons”, which raised “the quota for Persons with Disabilities in the government sector from 1 to 2 %” (JICA 2002: 15). Since then, under the given statutes, the government has set up several institutions with different focus areas to create execution strategies and to implement goals. In 1985, the *Directorate General of Special Education* (DGSE) was established on a federal level with the objective to

- (i) formulate national policies for the handicapped, (ii) conduct census of disabled persons, (iii) train manpower relating to special education, (iv) provide specialized aids and equipment for the use of disabled, (v) provide vocational training, (vi) provide job opportunities to the persons with disabilities, and (vii) give legislative support for the disabled person. (AAA 2004: 25)

Since its foundation, the DGSE has developed several institutions, most of which focus on training and education. Beside the adoption of the First National Policy for the Education and Rehabilitation of disabled in 1986, there was a short term increase in efforts in the same year, to establish more initiatives for persons with disabilities. The *National Institute of Special*

*Education* (NISE) was also founded during this period. Its aim was to develop and improve special education for children by developing training manuals, curricula and information material for professionals, the children and their parents; these objectives were to be carried out by collaborating with other national and international institutions, and by promoting research and evaluation activities. (cf. ILO no year) By 2004, NICE had set up 289 courses (AAA 2004: 25). The *National Mobility and Independence Training Center* (NMITC) has a different approach however. This Centre conducts courses for visually disabled persons with the specific goal of instilling confidence in participants to live an independent life. Furthermore, the *National Library & Recourses Center* (NL&RC), functions as the main source of printed and audio-visual materials on special education and disabilities. The vocational training and rehabilitation institution, the *National Training Center for Special Persons* (NTCSP), established in the same year, was the other main source of such material. (ibid.) Two years later, in 1988, the *National and Provincial Trusts for the Disabled* (NTD) was created under Pakistan's Charitable Endowment Act and was headed by the Prime Minister. Its main goals were to fund model institutions, offer vocational training, conduct research on the daily difficulties that people with disabilities face, provide financial support for these persons and their families, and promote Pakistan's national and international involvement in the field of special education. The main achievement of this trust was the foundation of three multi-purpose complexes for people with disabilities in rural and slum areas. (ILO no year) "Its functions are very similar to that of DGSE and it is envisioned that over the years DGSE would be merged within NTD, which will emerge as an autonomous body to function without bureaucratic hindrances" (AAA 2004: 26). In addition, *Departments for special Education at Universities* were developed in Islamabad, Punjab and Karachi (ibid.: 27). In 1992, the Pakistani government, together with the ILO and the UNDP, initiated a project under the designation *Vocational Rehabilitation and Employment of Persons with Disabilities* (VREPD). The Project was described as "innovative project in terms of shifting the policy from disability-benefit, charity-based services, to the integration of Persons with Disabilities in the local labor market" (JICA 2002: 18). The central points of concern were motivation, participation, integration and active support for persons with disabilities and their families (ibid.: 18f.). The *National Institute for the Handicapped* (NIH), a government owned hospital, was developed in 1987 and became operational in 1997. Its aim was to launch governmental projects for the prevention of disabilities, as well as for delivering services such as the coordination of national programmes and projects; to conduct research and data collection on



early detection systems, multi professional assessment and diagnostic systems, as well as health surveillance systems; to provide treatments and medical rehabilitation, stationary and ambulant; and most importantly, to form a primary health care system (ibid.: 12). To date, the most relevant statute passed by the Pakistani government on this issue was the *National Policy for Persons with Disabilities*, adopted in 2002, with its main goal being to empower “persons with disabilities, irrespective of caste, creed, religion, gender or other consideration for the realization of their full potential in all spheres of life, specially social, economic, personal and political” (GoP 2002a). Involved in the developing process of this policy were the relevant Federal Government Ministries such as Education, Health, Labour and Manpower, Housing and Works, Science and Technology and Planning and Development, the Provincial Social Welfare and Education Departments as well as prominent NGOs, in lieu of the stated overall intention to facilitate multi-sectoral implementation. In 2006, the *National Plan of Action to Implement the National Policy for Persons With Disabilities* (NPA) was issued, in order to make the National Policy more effective. With its idea to pool and mobilize all resources, such as human and institutional resources, and to keep short as well as long term measures up to the year 2025 in mind, this strategy is seen by some as incorporating an inclusive approach. “The long term objectives reflected in NPA focus on creation of barrier free physical environment for [persons with disabilities, S.A.] in all public, private and commercial buildings and public places and revision of construction bye laws” (NOWPDP 2008: 49). Beside policies particularly designed for people with disabilities, there are some regulations within other policies, mostly in the field of health, that are relevant to this group as well. The *National Health Policy* of 1990 placed “[e]mphasis on mental health disorders, blindness, traffic accidents leading to physical disability, and [the, S.A.] improvement of prenatal care” (JICA 2002: 12). “Prevention, Education and Rehabilitation” (ibid.) was part of the *National Social Welfare Policy* in 1994. The *National Maternal and Child Health Strategic Framework* (NMCH) targets the areas of safe birth, nutrition and neonatal health interventions, by focusing on advocacy, community mobilisation and health education (cf. SDPI 2008: 57). Commendable effort was made by the government to increase women's access to health care in rural areas in cooperation with the ADB. The *Women's Health Project* was based on the assumption that “[s]ome 30,000 women die each year due to complications of pregnancy, and 10 times as many develop life-long, pregnancy-related disability” (ADB 2008b: 3). To decrease the number of affected women, an inclusive design based on awareness raising, health care and family planning services as well as capacity

building, was implemented. Related to, but extending beyond the Women's Health Project, was the *Lady Health Workers' Program*. Started as part of the Prime Minister's Programme for Family Planning and Primary Health Care through the Ministry of Health in 1994, the programme today “employs almost 100,000 women across Pakistan as community health workers” who “directly address [...] women's reproductive health needs by attempting to provide them information, basic services and access to further care if necessary” (Khan 2008: 2). With this initiative, basic health care became more easily available to women particularly in rural areas. Overall, the government has initiated a variety of policies, programmes, institutions and other services for persons with disabilities. But the weak definitions, exemptions and legal limitations hinder the adequacy, enforcement and implementation of the plans. On 25 September 2008, the government signed the *Convention on the Rights of Persons with Disabilities* (UN enable no year a), but it has not yet been ratified, nor has any action taken place in relation to it.

#### **4.4.2 Related and Responsible Governmental Authorities**

The main governmental entities dealing with disability related issues are the Ministry of Women Development (MoWD) and the Ministry of Social Welfare and Special Education (MoSW&SE). Between 1997 and 2004, the two ministries were merged and became the Ministry of Women Development, Social Welfare and Special Education. In the course of a reorganisation of Federal Ministries and Divisions in 2004, the Social Welfare and Special Education Division of this ministry was itself upgraded to the status of a Ministry, “for uplift of the marginalized and down-trodden segments of society” (GoP 2007a). The responsibilities of this government body are clearly defined and include the translation and realisation of international commitments, such as the CRC, the CRDP and other related Optional Protocols and International Commitments concerning Social Welfare and Special Education (ibid.). Furthermore, “through its various Wings and Institutions and in consultation with stakeholders, NGOs and experts, [it should, S.A.] prepare Action Plans/Projects for the welfare of needy people including special persons, women, children and senior citizens”; hence, the ministry is “performing the role of coordinator by linking civil society's initiatives with that of the Government” (ibid.). And finally, the ministry has “to combine its efforts with the similar initiatives of the Provincial Governments in a more sustainable manner” (ibid.). This new approach, to institute an entity cooperating with several stakeholders and with clearly defined responsibilities, mirrors the increasing trend in Pakistan

towards reforming the judicial system so that the laws' conformity with international human rights increases. Subordinate to the ministries is the National Coordination Committee, which has the purpose of implementing projects planned by the MoWD and MoSW&SE. The committee consists of the NCRDP, which acts as the policy designer on employment and rehabilitation issues and oversees their execution at the provincial level, and by major related NGOs. Besides the ministries and the committee, there are other key players on the federal level, namely the NTD, the DGSE, the Special Education Department in Universities and the NIH (AAA 2004: 28). These are all more or less related, but their influence and functions vary. The most vital and influential body within this group is the DGSE. The DGSE functions on an equal level with relevant Ministries, providing numerous special education institutions in all provinces and keeping close relations with the provincial agencies: the provincial Social Welfare Departments in Khyber Pakhtunkhwa, Sindh and Balochistan, and the independent Department of Special Education (DoSE) in Punjab. In contrast to the weaker Social Welfare Departments, the DoSE “has the overall responsibility for policy, planning, coordination” as well as for educational programmes (ibid.). In addition, the Ministry of Health and the Ministry of Population Welfare are responsible for health issues as well as the provision of health services related to persons with disability. While only key players are mentioned above, there are a number of government bodies involved in this area of concern. In the NPA for persons with disabilities, over 90 entities responsible for implementing the policy paper are listed, of which 67 are government entities on the national, provincial or district level, as the

[i]mplementation of the NPA is an inter-sectoral and inter-departmental activity. Therefore, in order to effectively implement the [...] Actions, there is a need to actively involve all stakeholders including relevant line ministries, provincial government departments, district governments, and associations of and for persons with disabilities at national, provincial and district levels. (GoP 2006a)

#### **4.4.3 National Institutions and (their) Focus Areas**

The data set regarding national institutions is limited for researchers, as the government does not provide these details to the public. Nevertheless, there are a number of publications listing governmental and non-governmental institutions, which can serve as informative summaries of the state of affairs. Four documents will be further analysed to get a sense of the situation, namely the *Disability Framework in Pakistan* by the Special Talent Exchange Program (STEP no year), *Journey of Hope. A report on the status of persons with disabilities in Pakistan and the way forward* by the Network of Organizations working for Persons with Disabilities, Pakistan

(NOWPDP 2008), the *Final Report. Situation Analysis and National Plan of Action for Persons with Disabilities* by Arjumand and Associates (AAA 2004), and *A Guide to Services for Persons with Disabilities* by Telenor Pakistan (no year). The purpose of this analysis will be to discover governmental trends relevant to disabled persons, especially women. Out of the 112 governmental institutions listed in the five documents, one-third each is allocated to Punjab and Khyber Pakhtunkhwa respectively, while Sindh and Balochistan share roughly the remaining one-third. The high number of these institutions in Khyber Pakhtunkhwa can be traced to the fact that many donors target this area and therefore encourage the government to be more active here. This is also true in the case of Balochistan, although to a lesser extent. Overall, nearly 77 percent of these governmental institutions work with disabled children, 11 percent with disabled persons and the remaining 11 percent do not specify. Only one institution focuses specifically on girls with disabilities. The disabilities that these institutions list in their areas of concern are hearing (34 percent), physical (15 percent), visual (12 percent), mental (10 percent) and learning (7 percent) disabilities. For 22 percent of the organisations, no specification was made. The areas of operation are vocational training and other, not specified training with around 9 and 6 percent respectively, 3 percent rehabilitation, 4 percent without specification and almost 77 percent listing special education. The areas of activity are limited on one hand to the four exclusive classifications of Visual Handicap, Hearing Impairment, Physical Handicap and Mental Retardation; and on the other hand, to the dominant areas of concern such as education, special education and vocational training. A focus on women with disabilities is basically non-existent and the salient feature present in most institutions is instead, special education. This also explains the high number of institutions that are working with children. Governmental institutions are supervised by the DGSE and function under the administrative control of the federal, provincial and district/city government. (cf. NOWPDP 2008: 37ff.) There are a great number of special education institutions that even enrol adults with disabilities. Their approach is generally based on regular educational concepts, and includes reading and writing. Overall their number is insufficient and their quality leaves much to be desired, as will be discussed further in this paper.

## **4.5 Relevance to and Achievements for Women with Disabilities**

All the above named policies, laws and institutions concerning women and persons with disabilities in general, relate in many ways to women with disabilities. In the context of the main categories of discrimination, there are some instruments that have greater scope and influence than others or that target specific aspects within this area. One such significant instrument is the convention on the rights of the child. In their report entitled *Rights of the Child in Pakistan* the World Organisation Against Torture (OMCT) summarises the Pakistani government's accomplishments and failures in implementing the Convention on the Rights of the Child (CRC). Quoting the Pakistani government's *Progress Report on the implementation of the Convention on the Rights of the Child* (2000), the reports states:

Pakistani authorities affirm that there is no discrimination against children with disabilities, against children belonging to different provincial, linguistic, religious or economic backgrounds and against refugee children, nevertheless 'a few odd cases crop up now and then'. (Berti 2003: 7)

Beside the slightly cynical language near the end, the fact that young girls with disabilities are not discriminated against, is simply not true. It may not be willingly done, but the omission of reference to environmental shortcomings in the integration of affected girls is nothing but structural violence. However, it is indeed true that the government has “adopted various measures to give effect to the implementation” of the Convention,

including introduction of the second National Plan of Action towards the well-being of the Pakistani Children. Changes have been made to different laws related to children [...] and various other major changes and policies of administrative as well as legislative nature are in the process. Due to various changes in the administrative setups of the concerned departments after decentralization and initiating various policies and programs such as [...] Gender Reforms Action Plan (GRAP) and Access to Justice program various targets have been achieved and positive changes are evident in the lives of Pakistani children. (UN 2009a: 10)

Another important human rights document that Pakistan affirms is the resolution of the *World Conference on Human Rights* 1993 in Vienna. Along with the UN system and other governments, Pakistan declared to work “towards the elimination of violence against women in public and private life”, including “of all forms of sexual harassment, exploitation and trafficking in women; of gender bias in the administration of justice; and of any conflicts arising between the rights of women and the harmful effects of certain traditional or customary practices, cultural prejudices and religious extremism” (UN DPI 1996). One important step in this direction made by the Pakistani government was the adoption of the *Women's Protection Bill*, or Protection of Women (Criminal Law Amendment) Act 2006. Another relevant financial and social development programme with its main target areas of poverty reduction and human development, is the *Ten-*

*Year Perspective Development Plan, 2001-11* (GoP 2001). This plan recognises on the one hand, the importance of women development for the overall economic growth of Pakistan (Chapter 12, Gender and Development) and on the other hand, it advances particularly education and rehabilitation programmes for the disabled persons (Chapter 11, Social Welfare). Following the international trend, CEDAW and the Beijing Platform are the bases for Pakistan's national policies regarding women, particularly, the National Policy for Development and Empowerment of Women 2002 (NPDEW) and the Plan of Action for women. For the National Policy and Plan of Action for persons with disabilities, the Biwako Millennium Framework for Action is identified as the main source of inspiration. Other international instruments, specifically, MDGs, GRAPs and PRSP, have also been relevant treaties for women with disabilities in the Pakistani context and will therefore be analysed further in relation to national policies and regulations. The question is, how pertinent these treaties are for women with disabilities and to what extent they implicitly or explicitly include women with disabilities in their focus. A closer examination of these instruments will provide further evidence regarding the scope and opportunities given to this category.

#### **4.5.1 CEDAW**

CEDAW is a document that is highly relevant at the international level as well as on a national level in Pakistan. The aspects of life covered therein, such as education, employment, health and violence against women relate to women with disabilities considerably. Keeping in mind the reservations made by Pakistan's government with regard to family law and marriage (ADB 2008a: 35), the treaty is not likely to be implemented in its entirety. However, according to Saleh (2010), the 30 articles of CEDAW have by and large been adopted with a few exceptions that are due to religious and cultural values, such as the right to abortion. Indeed, the MoWD (GoP 2009b: CEDAW Articles & Constitutional Provisions) attests to several parallels between the Constitution of Pakistan and CEDAW, specifically on the issues of human trafficking, political rights, education, employment, health, rural women, equality before the law and in family matters, as well as economic, social and cultural rights. In validating this claim, Article 25 of the constitution, which guarantees equality to all citizens, is used as conspicuously often. On the one hand, it is true that crucial elements of relevance to women with disabilities are indeed already envisaged in the Constitution. These include political participation, non-discrimination in the access to public places, prohibition of forced labour, access to education and employment,

equality between urban and rural women, as well as upholding the status of women. The conformity of several legal and practical national measures with CEDAW, or the other way around, implies that the government is working to fulfil its commitments (cf. GoP 2009b: Government Initiative to implement CEDAW Articles). On the other hand, some of the stated 'similarities' are harder to accept, such as the constitutional statement “[t]o protect the marriage, the family, the mother and the child” as sufficiently covering the health aspects of CEDAW. Besides some theoretical parallels, many observers, particularly from the civil society, disagree on the effectiveness of CEDAW in Pakistan. Shaheed and Zaidi (2005: 12f.) summarise the main barriers to the implementation of CEDAW, identifying the political instability of the last years as a primary issue. Further problems include “considerable resistance to CEDAW amongst the bureaucracy as well as policy-makers” and missing provisions in the current legal framework to translate international commitments into domestic law (ibid. :12). That the given endeavours are not satisfactory, can be best observed by looking at national regulations and policies. Since CEDAW is the basis for all the instruments that have followed, they can be measured accordingly.

#### **4.5.2 Beijing Platform for Action**

The fact that “Pakistan was a participant and signatory to this conference and subsequent protocols” (Minallah/Durrani 2009: 6) is reflected in several succeeding national activities, eminently in the National Plan of Action (NPA) in 1998, the National Policy for Women's Development and Empowerment as well as the ratification of CEDAW. Further achievements were the establishment of the Women's Development Departments in 1996, the National Commission on the Status of Women and the creation of the First Women's Bank Limited, a developmental and commercial institution staffed by and catering exclusively to women, including poor women. (Shaheed/Zaidi 2005: 9) Many more initiatives have been undertaken, targeting key thematic areas identified in Beijing such as VAW, human rights, and women's social, political and economic rights. “[W]hile [these, S.A.] measures are far from sufficient, they indicate an important change in attitude signifying greater acceptance of this as an issue that needs to be tackled by government” (ibid.: 10). But “too many of the initiatives fall short of both stated intentions and public expectations for a variety of reasons” (ibid.: 10), which will be further discussed in the following sections.

### 4.5.3 National Policy for Development and Empowerment of Women, 2002

The year 2002 stands for a number of important policy measures regarding persons with disabilities in Pakistan. One of them is the National Policy for Development and Empowerment of Women, because it explicitly aims at the “[e]mpowerment of persons with disabilities, irrespective of caste, creed, religion, or other consideration for the realization of their full potential in all spheres of life, especially social, economic, personal and political” (GoP 2002a: 4). This intention is further reinforced in the main target areas, which can be summarised as following:

- *social empowerment*, including education, health, law and access to justice; implementation of CEDAW, VAW, women in the family and community, and the girl child
- *economic empowerment*, including poverty; access to (micro-)credits, remunerated work, social safety nets; women in the rural economy and the informal sector; sustainable development
- *political empowerment*, including power and decision making, quota for women, and women's employment in the public service (ADB 2008a: 9; SDPI 2008: 83)

With this selection, some of the main issues regarding women with disabilities are made the subject of discussion and action. Many areas are addressed that are highly relevant to women with disabilities, such as concerns relating to poverty; but more sensitive issues are also being targeted, such as reproductive rights and VAW, with the intention to interfere in a domain generally considered private: the domestic sphere. Section 4.4 of the NPDEW is specific to VAW and outlines measures that need to be “adopted by the state to reduce the incidence of family, workplace and custodial violence and to create an enabling environment for sustainable reduction in VAW.” (Minallah/Durrani 2009: 6) The NPDEW,

also puts emphasis on improving the situation of girl child through enabling all girls (including those with disabilities) to develop their full potential and skills through equal access to education and training, nutrition, physical and mental health care and related information and services in line with Pakistan's own national vision and its commitment at regional (SAARC) and international (UN) level. (UN 2009a: 28)

To make this strategy effective, actions on three fronts are being planned simultaneously:

- amending policies and laws to promote women's empowerment and remove gender inequalities;
- establishing new institutional arrangements to effectively implement policies and laws
- changing public resource management systems to correspond to gender commitments. (ADB 2008a: 36)

The ADB attests progress on all three fronts, “spurred on by progressive reforms such as the local governance ordinance (LGO) in 2001 and efforts to provide greater coherence to the gender reform agenda through the adoption of the gender reform action plans (GRAPs)” (ibid.). Other



realisations can be noticed on the example of VAW. According to the *Pakistan National Report Beijing +10*, issued in 2005 by the MoWD (qtd. in NCJP/DCHD 2007: 21), the government has “pledged zero tolerance” against gender-based violence, which was emphasised by four steps:

- Ten Crisis Centres for women in distress were established in five cities.
- In Punjab province, seven women shelters centre and 12 rescue homes are available.
- Women police stations were established in Four cities.
- Only one separate Complaint Cell was set up in the police station in the Capital (Islamabad).

Overall, the NPDEW has successfully initiated the implementation of international commitments and is therefore a notable document. But critics have claimed that the NPDEW, as well as the NPA for women and the NCSW all lack “**implementing mechanisms and concrete policy measures** which hampered the achievement of the desired objectives in all three initiatives” (NCJP/DCHD 2007: 7, emphasis in original).

#### **4.5.4 The National Plan of Action for Women, 1998**

Including a comprehensive set of priority actions to implement gender equality nationwide, the formulation of the NPA fulfils one of the main receivables of the Beijing Platform. Based on a “national participatory process, involving Federal and Provincial governments, NGOs, women organizations and individual experts” (GoP 1998: iv), in each priority area references are made to both CEDAW and Beijing articles. Annex 1 of the NPA consists of strategic objectives, actions as well as concepts and responsible actors for their implementation, particularly with regard to women and girls with disabilities. While this effort has to be acknowledged, it must also be noted that the formulation does not go beyond an abstract wish list. No concrete goals or strategies are given, nor are specifications provided about funding, the envisaged budget or potential resources. Nevertheless, the NPA offers a number of important directions towards a more inclusive development. Out of the 12 main areas covered, 9 address women and girls with disability in particular. Interestingly, in relation to areas A, F and G – poverty, economy, power and decision-making – there are no references to this group, although single aspects are implicitly addressed in other areas. Summarising the objectives to the 9 areas, the priorities in relation to women with disabilities are obvious. As shown in table 9, education, political participation an decision-making are thematised most often.

**Table 9 NPA's main objectives for Women with Disabilities**

<b>Category</b>	<b>Objectives*</b>
<b>Attitude</b>	Remove attitudinal barriers
	Change attitudinal barriers and perception of the society
<b>Rights</b>	Universal standards of human rights in legislation and new laws
	Promote and protect rights and increase awareness of her needs and potential
<b>Education</b>	Universalize formal education
	Create enabling environment for GO-NGO partnership
	Eliminate discrimination in education, skill development and training
	Ensure access to education, skill training
<b>Employment</b>	Provide vocational and professional training opportunities and employment preparation
<b>Housing and Family Life</b>	Equal provision of appropriate support, services and devices for girls and their families
<b>Health</b>	Ensure affordable and quality health care throughout life-circle
<b>Violence and Abuse</b>	Take integrated measures to prevent and eliminate VAW
<b>Decision making and political participation</b>	Enhance participation in decision-making process
	Ensure involvement at the grassroots level and promote representation
	Promote preventive and peace building strategies to prevent increase in number of disabled women
	Increase proportion at decision making planning levels in environmental and sustainable development programmes
<b>Media</b>	Maintain equitable representation and portrayal of issues <i>and</i> concerns
	Increase participation in media, through employment and other opportunities
<b>Data</b>	Ensure availability of disaggregating data on the participation in the economic structure
	Under take research on impact of media on different sections of the society, specially on gender and disability issues

\* all objectives are named in relation to women and girls with disabilities; Source GoP 1998, Annex 1, summary and emphasis, S.A.

An increase in equality in and access to education, as well as in legislative changes is mentioned in various passages of the document. The intention to promote positive images of disability and to change preconceptions within society is another aspiration within the NPA. Moreover, it is striking that the public and private media is repeatedly displayed in the role of an intermediary with the commission to create these positive images and to change negative attitudes towards women and girls with disabilities. In this context, there is a recommendation to conduct surveys on the impact of media in society, and there is in general an aim to improve the data situation.

References to human rights are made throughout the text, and area I. particularly includes a paragraph illustrating a few human rights aspects, which are significant for the language used and for the aims in the Annex, dealing with women with disabilities:

- Remove barriers
- Introduce legislative changes
- Improve linkages with support of institutions
- Portray positive images on the media
- Portray positive images in text books
- Sensitise disability issues with special reference to women at community level
- Ensure that women with disability are registered in the electoral rolls
- Give Training to disabled women in human rights, including political rights
- Increase representation of women with disability at all levels, local bodies, Provincial and National Assembly, Senate (GoP 1998: Annex 1, p. 9)

Violence and abuse as well as health are also addressed; the former particularly with regard to girls with disabilities. Other aspects, such as mobility and transport, employment, sexuality as well as housing and family life are only targeted indirectly or not at all. Further key intentions within the NPA for women with disabilities relate to the allocation of financial resources, and the intention to cooperate with and include women with disabilities, NGOs and other organisation on a community level in the civil society. Overall, the NPA for women includes a great number of aspects relevant to women with disabilities, and uses a modern approach based on human rights, which further represents well-developed concepts and ideas. But considering the vague language regarding the concrete realisation of the goals, it is not surprising that “far too many of the actions outlined in the 1998 NPA document have not been implemented” (Shaheed/Zaidi 2005: 10). Nevertheless, some time has passed and in some areas, such as VAW, positive changes can be observed. For instance, the aim to “[a]dopt measures to deter and address incidence of domestic and sexual violence” (GoP 1998: 32) was put into action over ten years after its introduction, with recent laws such as the Domestic Violence (Prevention and Protection) Act, 2009; the Criminal Law (Amendment) Act, 2009; and the Women Protection Act 2010.

#### 4.5.5 MDGs and Poverty Reduction Strategy Papers

With the adoption of the MDGs, the Pakistani government committed itself to promoting “gender equality and the empowerment of women [...], and to enforcing gender mainstreaming considerations into achieving all MDGs” by 2015 (ADB 2008a: 35). The commitments undertaken to achieve women's empowerment in accordance with the MDGs focus on the issues of girls access to education, female participation in non-agricultural paid employment and the political participation of women (ibid.: 9). The MDGs represent one of the main policy documents targeting poverty reduction and are therefore further relevant for women with disabilities. The government has further aligned the MDGs with the Medium Term Development Framework (MTDF)<sup>3</sup> and the PRSP “[t]o avoid duplications, to reinforce convergence and linkages, and to streamline monitoring and reporting [...] This alignment greatly helps in monitoring of indicators in a holistic and integrated way” (GoP 2005: 2). The PRSP consists of policies and strategies for reducing poverty in Pakistan; it is

currently the main policy document which outlines the government's priorities. Mainstreaming gender and empowering women has been given a special focus in the document and various measures for the political, social, economic and legal empowerment of women have been highlighted. Some of the key affirmative action measures in PRSP-II for empowering women include: provision of primary and reproductive healthcare; improving education by eliminating gaps in enrolment and retention; and reducing gaps in labour force participation. (Minallah/Durrani 2009: 6)

Table 10 shows the alignment between MDGs and the PRSP in Pakistan as of 2005 and gives an overview on the target areas chosen to achieve the goals.

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3 The Medium Term Development Framework 2005-2010 is the operational plan for reducing poverty in Pakistan

**Table 10 PRSP Alignment with Millennium Development Goals**

Goals and Indicators	1990-91	2000-01	2005-06	2011	2015
<b>1. Eradicate Poverty and Hunger</b>					
(1) Overall Poverty level (% of Population)	26.1	32.10	29	22	16
(2) Poverty Gap Ratio		4.53	6.84		
<b>2. Achieve Universal Primary Education</b>					
• Literacy Rate of 15-24 years old (%)	49	58	59.5	78	86
• Gross Enrolment	73	87	104	104	100
<b>3. Promote Gender Equality and Empower Women</b>					
• Ratio of literate females to males of 15-24 years (%)	0.61	0.65	0.65		0.93
• Proportion of Seats held by women in the Parliament:					
National Assembly (%)	0.9	21			
Senate (%)	1.0	17			
Local Councils (%)		33			
<b>4. Reduce Child Mortality</b>					
• Infant Mortality Rate	120	77	63	50	40
• Proportion of fully immunized children 12-23 months	25%	53%	82%	90%	>90%
• Under five mortality rate	140	105	80	65	52
<b>5. Improve Maternal Health</b>					
• Maternal Mortality Rate/100,000	550	450	350	180	140
• Total Fertility Rate	5.4%	4.1%	4.0%	2.5%	2.1%
• LHW Coverage of target population	n/a	45%	77%	90%	100%
<b>6. Combat HIV/AIDS, Malaria and other Diseases</b>					
• Incidence of TB/100,000	n/a	177	133		45
<b>7. Ensure Environment Sustainability</b>					
• Sustainable access to safe water	82%	86%	90%		93%
• Population with access to sanitation		28%	51%	55%	

Source GoP 2003: 92

Overall, the PRSP recalls existing commitments such as the Beijing Platform, and has identified, priority areas for addressing gender inequality includ[ing, S.A.]: gender responsive budgeting (GRB) to analyse budgets at different administrative levels for allocation of resources; leadership training of women councilors and members of provincial assemblies; micro-credit facilities for women through Pakistan Poverty Alleviation Fund (PPAF), First Women Bank (FWB), Agricultural Development Bank (ADB) and Khushali Bank; reinstitution of 5% quota for women in government jobs, among others. (Mumtaz 2008: 11)

With assistance from international donors, these priority areas were “translated into programmes” (ibid.) such as the UNDP assisted Gender Support Programme (GSP) and the ADB

funded Gender Reform Action Programme (GRAP). The GSP incorporates a wide range of activities under three pillars: enhancing political participation, such as the Women's Political School project; promoting economic opportunities, for example the Gender Promotion in the Garment Sector through Skills Development initiative; and facilitating institutional reform, most prominently through the Gender Responsive Budgeting Initiative and through technical support to MoWD (ADB 2008a: 43; Mumtaz 2008: 12). One of the main benefits of this programme is the “harmonized approach to gender mainstreaming among international development partners” (ibid.: 42). By

[e]ngaging with key planning and finance agencies at national and provincial levels is a key step forward in effective gender mainstreaming, and in building alliances to sustain adequate resources to overcome gender disparities in PRSP and MTDF outcomes. (ibid.: 43)

According to Minallah and Durrani (2009: 5) the GRAPs were initiated by the government together with the ADB with the goal “to mainstream gender at all levels of governance and institutionalize gender in all policies, programs and projects of the Government.” The government has expressed this aim to an even greater extent, by stating that GRAP “is about creating space for women within the existing systems while trying to improve the efficiency of the system.” (GoP no year c) To realise this objective, GRAP envisaged a three-pronged strategy of gender mainstreaming; ensuring firstly that women could participate as decision makers in the public sphere and their concerns be addressed effectively; secondly that policies are developed on the basis of gender analysis and sex-disaggregated data; and thirdly that the delivery of government services is equitable. Political participation, institutional restructuring, women's employment in the public sector as well as policies and fiscal reforms based on gender mainstreaming are the main categories for the planning and implementation of GRAP (GoP no year c). Some of the key objectives of GRAP, particularly in relation to women with disabilities, are to improve the status of women and to ensure effective implementation of gender equality in relation to international conventions like CEDAW (cf. Minallah/Durrani 2009: 5). Keeping in mind the interdependence inherent in the implementation of central goals of intervention, the first essential question is: Who is making the decisions? It is usually men who hold positions of power, although GRAP states that women themselves should have power over their own decisions, especially in the public sphere. This aim could only partly be achieved due to a lack of equality in opportunities, motivation and stimuli for women to join the political arena. After two extensions, the programme was closed in June 2010 (GoP 2009b: Gender Reform finally institutionalized). Against initially high expectations, the GRAPs faced several challenges and

problems. The ADB (2008a: 36) has described the implementation of the GRAPs as “uneven”. Overall they have “been heavily critiqued by NGOs and donors alike. In fact some major donors have shown complete disillusionment with the implementation of the GRAP” (SDPI 2008: 82). Nevertheless, some of the initiated projects have been important steps to broaden the discourse on gender, such as the establishment of gender departments in various Universities throughout the country. All in all, Pakistan has made some progress in implementing the PRSP.

According to Poverty Reduction Strategy Paper report, Gross Enrolment Rate has increased from 72 % in the year 2000-01 to 87 % in the year 2005-06. Net Enrolment Rate (NER) has also shown upward trend as it increased from 42 % in the year 2001-02 to 52 % in the year 2005-06. Pakistan has made sound progress in NER at primary school level. (UN 2009a: 11)

Further, the PRSP-II document acknowledges the seriousness of combating VAW and therewith “underscores government's initiative of establishment of women crisis centres throughout Pakistan to provide relief and rehabilitation to women survivors of violence” (Minallah/Durrani 2009: 6). But major criticism was voiced regarding both documents, the MDG and the PRSP respectively.

The MDGs have been criticized for ignoring the critical role of socio-political context at the root of poverty in achieving the targets and lacking in a focus on economic, political and social reforms while setting up goals and measurements; of failing to go beyond delivery systems to ensure access, utilization and equity by addressing social exclusion and gender bias. PRSP, too while recognizing social inequalities and concomitant unequal opportunities and capabilities is faulted for not addressing the skewed power structures that are at the core of Pakistan's deep rooted poverty. (Mumtaz 2008: 5, Footnote 2)

The “generic gender-mainstreaming approach proposed” by PRSP II has further been criticised “for failing to truly focus on women and addressing their needs” (ADB 2008a: 38).

#### **4.5.6 Biwako Millennium Framework for Action**

The BMF “has served as the region's guideline for policy development and action.” (UN ESCAP 2007b: 1) This assertion is verified by the fact that the BMF is held as a frame of reference for all disability related policy documents in Pakistan. However the actual effects of the framework at a national level have to be looked at in greater detail. At the *High-level Intergovernmental Meeting on the Mid point Review of the Asian and Pacific Decade of Disabled Persons* on 19 September 2007, Pakistan's representatives issued a statement (GoP 2007b) regarding the country's achievements up to that point. It is striking that here again the constitution was quoted to show the compatibility between fundamental Pakistani law and desired international targets. This comparison between Pakistani law and international instruments has the advantage of justifying Pakistan's engagement within international initiatives (in relation to human rights), since it shows

that the underlying bases of the respective treaties are compatible with Pakistan's specific values.

Articles 38 (d) and (e) of the Constitution stipulate:

The state shall provide for all persons employed in the service of Pakistan or otherwise, social security by compulsory social insurance or other means; provide basic necessities of life such as food, clothing, housing, education and medical relief, for all such citizens, irrespective of sex, creed, caste, or race, as are permanently or temporarily unable; to earn their livelihood on account of infirmity, sickness or unemployment; reduce disparity in the income and earnings of individuals. (ibid.)

This responsibility of providing social protection to the population is reaffirmed, as it represents one of the core pillars behind the PRSP and MTDF; and

[t]he Government of Pakistan is making serious effort to provide by 2025 an environment that would allow full realization of the potential of persons with disabilities through their inclusive mainstreaming and providing them full support of the Government, private sector and civil society. (ibid.)

In the national Progress Report on the Biwako Millennium Framework for 2003-2008 (UN enable 2007), Pakistan's achievements in each priority area were outlined. As summarised in Table 11, steps have been taken in all the main target areas of the BMF.

**Table 11 Pakistan's Achievements according to Biwako Millennium Framework**

<b>Priority Area for Action BMF</b>	<b>Pakistan's Achievements</b>
<i>A. Self-help organizations of persons with disabilities and related family and parent associations</i>	Self-help organizations of persons with visually impaired and hearing impaired have been established in Pakistan since long.
	Self help organizations are fully involved in all policy making processes relating to disabilities.
<i>B. Women with disabilities</i>	Article 25 (2 and 3) of Islamic Republic of Pakistan
	Women with disabilities are active and have representation in all the organizations of disabled
<i>C. Early detection, early intervention and education</i>	Presently at federal level 75, provincial level 180 and NGO level 150 institutions are in operation for the education and training of disabled where services of assessment, management and education of disabilities are available.
<i>D. Training and employment, including self-employment</i>	Establishment of National Council for Rehabilitation of Disabled (NCRDP) 1981
	Emphasis of National Policy for Persons with Disabilities
	Vocational Rehabilitation and Employment of Disabled Persons (VREDP) project: (1) Registration of disabled persons = 4742 (2) Placement on training = 1645 (3) Income Generation = 1175 (4) CBR training to NGOs = 24
<i>E. Access to built environments and public transport</i>	A survey of infrastructures and facilities for persons with disabilities available in public and private sector was conducted in 2005
	Design manual and building bye-laws-2006 have been prepared for designers and implementing authorities
	Instructions to all line Ministries, Provinces, ERRAs and Executing Agencies were issued to ensure provision of facilities for challenged people in all new projects and make required modifications in existing infrastructure and buildings and amend



	bye-laws of executing agencies
	No progress on public transportation has been possible
<i>F. Access to information and communications, including information, communication and assistive technologies</i>	Development of standard Braille System and standardized Pakistani Sign Language
	In urban areas internet facilities are available easily for every person.
	Federal Government has introduced computer literacy programme in all Special Education Centres.
<i>G. Poverty alleviation through capacity-building, social security and sustainable livelihood programmes</i>	Little work has been done in this area.

Source UN enable 2007

The formulation remains vague, however, and quantitative indicators are insufficient for creating an accurate picture of the actual achievements. To state, for example, that the “Pakistan Association of the Blind and National Association of the Blinds have been playing very active role for education and welfare of the blind community” (ibid.) does not provide any tangible indices of the real level of success. Area B, women with disabilities, is no exception here; the explanations are insubstantial.

Article 25(2) of Islamic Republic of Pakistan categorically speaks out that “there shall be no discrimination on the basis of sex.” para (3) of the said article has a provision for making special provision for the protection of women and children. All the institutions of disabled are equally accessible for women with disabilities.

Women with disabilities not only have representation in all the organizations of disabled, they are very much active for the promotion of empowerment of persons with disabilities. However women with disabilities in the rural areas have not access to such organizations. National Plan of Action has suggested to facilitate establishment of a mechanism at the Regional, National and sub-regional level to disseminate relevant gender related information among women with disabilities. (UN enable 2007)

On the one hand, the report states that women with disabilities have always been considered and included in policy formulation. This is based on the notion that the Constitution is conceptualised in a gender-neutral way and refers to the equality of women and men in a number of paragraphs. On the other hand, this can be seen as an easy way out, because the gender equality enshrined in the constitution does not allow to infer any actual implementation on other policy or implementation levels. That women with disabilities have equal access to various institutions and that they are very active on their own behalf, can not be concluded from articles of the constitution. Pakistan further acknowledges greater disadvantages and discriminations faced by women living in rural areas, compared to women living in urban areas. Overall, the greatest self-declared achievement of the government was the establishment of the NPA for persons with disabilities and its influence on subsequent policies. (cf. ibid.)

#### **4.5.7 National Policy for Persons with Disabilities, 2002**

Although the NPPD was adopted one month after the BMF was finalised, it is presented as one of the accomplishments of the BMF. There is no reference made in the NPPD to the BMF, and the priority areas of the two instruments do not match either. Nonetheless, the NPPD was the foundation for the NPA for persons with disabilities and therefore needs to be closely examined. The Guiding Principles of the policy give several important directions for efforts in this sector. Firstly, Pakistan's international commitments on human rights instruments are reinforced, including therefore, its commitment to the BMF. Secondly, “[n]on-discrimination and gender equity at all levels” is reaffirmed (GoP 2002a: 5). Thirdly, the aim of this policy to achieve a holistic approach, covering all areas of life for persons with disabilities and their community, is advanced; greater emphasis is given to the rights-based rather than a welfare approach (ibid.). Fourthly, close cooperation between stakeholders, namely the government, the private sector and the civil society, is aspired (ibid.). This point is also one of the main achievements of the policy: the realisation that an expansion of qualitative services and facilities can only be realised by applying a multi-sectoral and multi-dimensional approach based on an active cooperation of governmental entities on all levels, including NGOs, the families of persons with disabilities, the community at large, as well as professionals in the field (NOWPDP 2008: 49). Basically, the policy specifies the direction, in which endeavours for persons with disabilities should be pursued and suggests actors, who should implement these ideas. The text refers to children with disabilities in particular, and persons with disabilities in general as its target groups. There is no exclusive section with regard to women with disabilities, but as stated in the policy, focus lies on the realisation of the full potential of persons with disabilities in all areas of life, particularly “health, education, social, economic and vocational needs” (GoP 2002a: 4). Hence a pre-selection of priorities has been made, which can be traced throughout the policy document. Nonetheless, the very ambitious target areas include

(A) Early intervention, assessment and medical treatment; (B) Education and training; (C) Vocational training, employment and rehabilitation; (D) Research and development; (E) Advocacy and mass awareness; (F) Sports and recreation; (G) Design of buildings, parks and public places; (H) Institutional arrangement/mechanism; (I) Funding; (J) Monitoring (GoP 2002a: 6ff.)

All these aspects are addressed and specified in one way or another, although the extent of their focus differs according to the priority setting. The aim of achieving closer cooperation between all possible stakeholders and their integration in implementation processes is indeed reflected in various paragraphs, and consequently delineates one of the main areas of planned action.

Moreover, the strikingly frequent references to existing governmental institutions are worth noting. Their progress is recognised, but at the same time, they are required to adjust and reinforce their efforts, as well as to participate in future planning. Education and training are further focused upon. Suggested areas of activity here include an increase and improvement of educational services, special education, integration and mainstreaming, adjustments of curricula, alignment of policies, as well as more workshops, training programmes and centres. To achieve the targets set in education and training, one important determining factor identified is the enhancement of facilities, for example by providing special aid and equipment. This also encompasses the fields of sports and recreation. The policy particularly acknowledges the importance of designing and implementing processes for the collection, procession and dissemination of data regarding persons with disabilities. Academic and applied research, central records and information, as well as the development of need assessments, are all part of the proposed strategy. Furthermore, raising awareness through awareness training and advocacy are meant to change the overall attitude in Pakistani society with regard to this topic. As is pointed out:

The public attitude plays an important role for persons with disabilities to function as fully participating members of society. This is a long process and can only be achieved through constant exposure of positive images of the persons with disabilities and by the projection of their success stories through mass media. (GoP 2002a: 10)

Another step towards modernisation through strategies and facilitation is the proclamation to invest in new technologies, particularly information and technologies for greater mobility and assistance. Together with the investment in vocational rehabilitation, the introduction of quotas, incentives to employers and other initiatives providing shelter and support for employment, these technologies are also meant to create employment opportunities. Other designated areas of concern are related to the allocation and increase of the available budget for the given proposals, measures for improved access to the environment for persons with disabilities, as well as proposals related to health, particularly in the field of early detection. All in all, the policy is promoting measures which should have positive effects on women with disability. Gender equality is explicitly mentioned, which implies some kind of awareness regarding the issue of gender based inequality. Looking at the targeted areas though, it can be said that these priorities are not meeting the needs of women and particularly women with disabilities, either directly or indirectly. The proclaimed holistic approach cannot be attested to in practise.

#### **4.5.8 National Plan of Action for People with Disabilities, 2006**

In contrast to the National Policy, the NPA refers to the BMF and states explicitly that its priority areas are integrated into the 17 areas of action of the NPA. Further, envisaged as an operationalisation tool of the NPPD, the NPA moves in the direction set by its mentor documents. “[B]ased on the philosophy that access, inclusion and equalisation of opportunities for Persons with Disabilities [...] can not be achieved by isolated intervention” (GoP 2006a: 4) the NPA suggests that all stakeholders are responsible for effectively implementing the planned actions and activities, including the generation of funds. As outlined above, the great number of named actors mirrors this goal. More than 15 federal ministries are named 216 times in the document, as key players in the implementation of the NPA. According to my own calculations, it is predominantly the MoSW&SE that is referred to, with nearly 40 percent of the designations of responsibilities within all ministries, followed by around 16 percent Ministry of Health, 7 percent each of Ministry of Education and Ministry of Labour and Manpower, and others including the Ministry of Information Technology and the MoWD. The DGSE and District governments are also amongst the leading actors expected to play an essential role in implementing necessary steps. Although governmental entities on all levels have the main responsibility to manage the implementation of the NPA, the civil society also has to do its share. Most notably, civil society includes NGOs, Associations of Disabled Persons, Self Help Organisations, Sports Clubs, Universities, as well as actors from the private sector such as professional firms and banks. Hence, a close cooperation between the stakeholders is required. As necessary, these members of civil society function as main actors or in collaboration with others. But the great number of involved players implies a challenging level of communication and cooperation, a task which has been proven to be a critical hindrance to success. In this matter, it has to be mentioned that international organisations and other actors, such as the WHO, are involved in the process of linking different actors. They are further included in plans through the provision of technical and financial support. Within the 17 critical areas, 192 short term steps and 15 long term measures are to be achieved at the very latest by 2025 (GoP 2006a: 5ff.). Hence, not only is accountability for implementation maintained, but also a definite time frame for all activities. Overall, the major areas of concern for the NPA include

early intervention, assessment and medical treatment, education, and training, vocational training, employment and rehabilitation, research and development, advocacy and mass awareness, sports and recreation, barrier free buildings, parks and public places, strengthening of institutional mechanisms and adequate funding. (ibid.: 3)

The short term measures, which specify how the achievement of set targets is planned, cover inter alia

- establishment of data bank;
- sample surveys of persons with disabilities in selected districts;
- reduction in incidence of disabilities through primary and secondary preventive care, strengthening of disability prevention programmes;
- arrangements for early detection and institutional interventions;
- escalating medical rehabilitation services;
- promoting inclusive education;
- expanding and reinforcing vocational training;
- employment including self employment;
- legislative support to persons with disabilities; and
- boosting up public opinion and increasing support to NGOs. (NOWPDP 2008: 49f.)

The long term objectives can be looked upon as reflective of the NPA's "focus on creation of barrier free physical environment for PWDs in all public, private and commercial buildings and public places and revision of construction bye laws." (ibid.: 50) Overall, the suggested actions outline considerable proposals for concrete initiatives. Action 7 deals exclusively with targets addressing women with disabilities (GoP 2006a: 17). As displayed in Table 12, the given outcomes, barriers and performance indicators are inadequately defined. The goal to encourage women with disabilities to be more active is a modern one, but it is questionable whether disability friendly sports events are the way forward. Moreover, the aim to include women with disabilities in all stages and levels of programmes is also contemporary. To promote and uphold the rights of women with disabilities at all times is stated to be the overarching target. The suggested short term steps to achieve this include important aspects. Focus lies on

**Table 12 Outcomes, Barriers and Indicators addressing women with disabilities**

**Goal/ Outcome**

Women with disabilities have a role to play for their betterment, through sport services.

**Identified Barriers**

They have presently no access to the existing programmes/services, both in public and private sector.

**Performance Indicators**

Programmes are prepared/implemented associating women with disabilities at every stage of development, preparation and implementation.

Source GoP 2006a

the access to and creation of training opportunities of different kinds, including through the development of appropriate training materials and leadership training. Other focus areas include access to education, employment, health services, as well as information dissemination and support. Actions of advocacy as well as awareness raising about the situation of women with disabilities and VAW, are meant to promote a positive attitude towards the target group. Overall, Action 7 is meant to be handled by the MoSW&SE and the MoWD on the governmental side, and from NGOs and self-help organisations in the civil society. It can be concluded that the main

benefit of the NPA is that it targets women with disabilities, particularly by aiming for inclusive development. But looking at the number of actors, the types of activities and the envisaged budget, it can be stated however, that the goal of achieving these targets by 2025 is completely unrealistic.

## ***4.6 Implementation: Claims and Discrepancies***

With policies, it is always the *how* that counts; how to meet challenges and how to move forward. In relation to the policy documents above, tremendous differences and gaps appear between what is planned and what is accomplished. However, the language used throughout the policies reflect great thought and purpose behind selected priority areas and actions. An increased consideration of relevant international knowledge regarding root-causes and interdependencies of the issues, as well as new development approaches have influenced not only the language of policy documents, but also their aims and targets. Despite the progress made, it has to be recapitulated that all policy documents have been criticised for their weak implementation. The main hindrances, or as NOWPDP (2008: 54) has labelled them “challenges and constraints”, for the adoption and implementation of international agreements on a national level, can be summarised in the following range of interconnected issues.

### **4.6.1 Conceptual Flaws**

As discussed earlier, the international level offers a framework of knowledge and experiences for the development of a country and for the protection of human beings. This pool of information and development ideologies is almost inexhaustible. An obvious risk might be that although appropriate methods and strategies may be passed on, there is also a concurrent risk of transporting inadequate approaches. If leading strategies in the fight against poverty, such as the MDGs or the PRSP do not consider persons with disability specifically, it is most likely that countries will not compensate for this deficiency during their implementation. This does not mean that Pakistan's government is strictly heteronomous, but considering the impact of international concepts and ideas, this deficiency has to be identified as one factor of influence for substantial errors in reasoning. Another aspect that leads to problems is an overall lack of interpretation of international ideas on the national agenda. Supported by international agencies, the government translates concepts into national policies. For example, the NPPD proclaims a

holistic approach, which has turned out to be rather unrealistic, as has been shown through the weak implementation. Another instance is the government's assertion that it is “committed to ensuring that all of its initiatives integrate a gender perspective” (GoP 2009b: Government initiatives to implement CEDAW Articles). In reality, gender is considered a women's affair in Pakistan, and is treated as a side issue, as can be seen by the disregard of the MoWD within all other ministries. Even on the governmental level awareness regarding the promoted concept is lacking, and documents are generally assumed to be gender neutral. But it is essential for decision-makers to define and make clear their concepts, because they will influence implementation realities. It makes, for example, a significant difference whether one is working towards gender equality or gender equity.

Gender equality is the result of the absence of discrimination on the basis of a person's sex in opportunities and the allocation of resources or in access to services.

Gender equity entails the provision of fairness and justice in the distribution of benefits and responsibilities between women and men. The concept recognises that women and men have different needs and power and that these difference should be identified and addressed in a manner that rectifies the imbalances between the sexes. (Husain/Adham 2005: Annex I)

This can evidently lead to consequences on the implementation level, since these policies drive the structures of gender equality and mainstreaming. For example,

GRAP needs a good collaboration and it is felt [by the civil society, S.A.] that the political will towards gender is only due to the international pressure and the financial resources that are attached to gender in the current development debate. In the National Plan of Action the process failed because the government did not accept internally that the process failed, policies are made as if for a foreign country, not for Pakistan – keeping the cultural, religious context in mind. (SDPI 2008: 82)

Another misperception is that of disability as a traditional area of competence for women, due to its most perceived connections to, inter alia, education, health and care. This is reflected in the extent to which the MoWD and MoSW&SE are given the responsibility to implement action plans for women and for persons with disabilities, regardless of the aim to achieve gender mainstreaming in all ministries. Many women's organisations have expressed concerns regarding the merger of the MoWD and its provincial Departments with the MoSW&SE. “This reinforces the existing tendency to approach women's issues from an exclusively 'social welfare' orientation. Instead of women's rights and development needs being seen as entitlements of half the country's citizens, this approach reduces women's issues into activities for the 'poor, indigent and needy' women” (Shaheed/Zaidi 2005: 13). This view is still prominent despite the fact that initiatives such as the VREPD, specifically aim to initiate a shift in this conception. This also means that previous regulations could not achieve any real change. But since sustainability is a

major concern in analysing the efficacy of policies, not only short but also long term objectives have to be kept in mind. The action plans do include such targets, but since governments in Pakistan change frequently (along with their ideologies and strategies), it is difficult to work on long term goals. Having said this, one can determine the extent of influence these concepts have on mindsets and attitudes, or rather how the two are interconnected. The specific choice of language and similar indicators, for example, are very influential in determining future action, be it at the policy or implementation level. To illustrate this, it can be said that to call a person 'dumb' is not only politically incorrect, but also transports specific attributes to that individual that are reflected in the goals set. Based on stereotypes and prejudices, these actions can hardly meet the requirements of the people categorised under this term. Vague references in language are not enough to cover this lack of clarity.

#### **4.6.2 Attitudinal Hindrances**

In Pakistan, many observers find that the overall societal attitude, especially of men towards women, is a major obstacle in strengthening the status of women (cf. Khan 2010; Saleh 2010). In effect, men see women in relation to themselves as sisters, wives or daughters, but not individually, as human beings. This attitude is based on a patriarchal mindset and is further mistakenly justified by religion and culture. Saleh (2010) explains that “children are taught that women are supposed to look after families and that's how the Islam is, or that's how culture has been, which is wrong.” She states that women have always been equal to men in Islam. They have been involved in every sector, such as war, business as well as participation in social and cultural concerns, and “therefore the mindset that would say that Islam does not allow women to work or does not allow women to participate in economic activities or any activities which is out of their house boundary is wrong, so that needs a change of mindsets.” That religion is further misapplied to support an ignorant attitude and used to justify passiveness and ignorance, can also be observed elsewhere. “Until recent past, the issue of child sexual abuse and exploitation was not accepted as a problem of Pakistani society. The common perception was that being an ideological nation-state following Islamic ideals; the society was some how immune to immorality” (UN 2009a: 48). At the beginning of this paper, the concept of cultural violence was discussed, which is, according to its creator Johan Galtung, the legitimiser of structural violence. This concept has application in this context too; religion and culture are being used to justify omission and oppression. The major question is and will remain, if there is a change in attitude,



and if not, how this attitude can be changed? Since the relationship between attitude and public policy is essential for inclusive development, institutions can be key players in igniting this change. To amend the curricula, to increase female participation, and to further gender-awareness trainings are seen as the most difficult, yet most crucial components of programmes, because they influence the changing of mindsets (cf. Saleh 2010). Some might contest that increased inclusion of gender issues and perspectives into policies will also lead to changes in attitude, but factually this cannot be supported. In any case, changes in the mindset happen only at a slow pace and are often not visible in public. But the fact that there is increasing realisation that certain topics (such as child abuse) have to be addressed, must be acknowledged as progress. “Given the sensitivity of the issue in Pakistan, the development of NPA is a leap forward from a mode of denial to one of acceptance” (UN 2009a: 48). In this case however, it is the overall status of women resulting from attitudes and concepts such as religion and tradition, which has to be changed. For actions in relation to society, the government views the media as the main actor to transport positive images about women with disabilities that result in more unbiased awareness for disability and its causes and effects. Why this particular transfer of responsibility is problematic will be discussed later in this paper.

#### **4.6.3 Inadequate Data**

“The first step in implementation is to see where we are: to take a snapshot of the present situation of women with disabilities” (Mathiason 1997: 11). This step is necessary, in order to generate information about the target group, as well as the dimensions involved and the adequacy of planned measures. Pakistan's lack of reliable and accurate data regarding the situation of persons with disabilities in Pakistan, as well as a lack of appropriate need assessments, are some of the major hindrances for meeting the articulated development targets (cf. NOWPDP 2008: 54). Khan (2010) states that plans to conduct a new census were scrapped simply “because we can't go and headcount the people in half of the country and for that half we neglected the other half.” This was said with regard to the collection of basic data sets on the population, but also holds true for measuring programme achievements. For example, “there are huge data inconsistencies in terms of measuring the targets” and achievements of the MDGs (Hakro/Talpur 2005: 9). It is therefore not only the quantity of available and reliable data that is lacking, but the quality too.

On the whole, data on the disabled population in Pakistan present a number of problems including those of definitions, reference periods, inconsistent categories, heavy dependence on the respondent's self-reporting that obscures objectivity and makes enumeration of disabilities difficult. (NOWPDP 2008: 22)

And it has to be considered, that

[t]he demography of disability is [generally, S.A.] difficult. Counting persons with disabilities is far more challenging than is counting males. That is because disability is not just a status condition, entirely contained within the individual. Rather, it is an interaction between medical status (eg having low vision or being blind) and the environment. (ibid.)

Other factors include social taboos:

Even in the most developed countries, it is not easy to document the actual incidence or prevalence of child abuse. It is always difficult to obtain information on sensitive and highly stigmatized issues, and even more difficult when the victims are children who cannot narrate their woes. (UN 2009a: 48)

But naturally, the “wide variations in data would make one question the credibility. In view of the unreliability of these data, what basis do the disability programme planners have?” (NOWPDP 2008: 22). Since the “ownership of any programme largely depends upon the common needs of the beneficiaries and key stakeholders” (ibid.: 54), the government has not only articulated the objective to improve the current data base in Pakistan, but has already taken some important steps in this direction. One successful case in point is that of birth registration. The government has increased the number of registrations at birth in some district areas of NWFP and Balochistan, “where there was no concept of birth registration earlier” from 4 percent to 30 percent (UN 2009a: 36). “The commitment of the government to promote birth registration is becoming evident through their allocation of funds and erecting mechanisms” (ibid.: 37). Particularly international organisations have supported the government in conducting surveys. Overall, Pakistan's legal system provides a great number of institutional and statutory measures which have the explicit task of promoting and conducting research and evaluation activities. These include early detection and diagnostic systems, research into the daily difficulties for people with disabilities and the impact of media on society. Hence, it is somewhat strange that comparatively so little has been accomplished.

#### **4.6.4 Weak Structures**

Frequent references to the Constitution that highlight parallels between international documents and the national legislative foundation, create the impression of functioning political structures in Pakistan. But in fact, criticism can be raised that while the Constitution was formulated in the 1970's, to date there has not been any significant progress in improving structures and areas of concern, such as gender equality. Rather, phases of deterioration can be observed within legislative conditions in Pakistan. Existing structural problems include corruption and the misallocation of funds. Furthermore, the policies themselves are problematic, because they include loopholes that can be used to justify certain actions. The Ordinance from 1981 is a good example for such a case. The Ordinance allows for exceptions regarding the legal quota of disabled persons in establishments, bypassing one of the main achievements of Pakistan's polity. This along with limited admissibility for legal action and the ample scope for implementation can all be seen as invitations for corruption and avoidance of real action. Another problem lies in coordination. Pakistan's policies have a strong emphasis on comprehensive cooperation between a great variety of actors and the leading role of governmental entities lies in communicating between these stakeholders. However, the absence of coordination and networking mechanisms on a governmental level, between the government and other stakeholders as well as between civil society organisation, offsets the target of achieving cross-sectoral and inclusive programmes. The results are a “duplication of efforts, absence of strong advocacy and lobbying and lack of linkages with donors, general public and persons with disabilities” (NOWPDP 2008: 54). International organisations try to compensate for this issue, but they can only play a supporting role. Structures that allow room for all members of society have to be created. This includes the creation of structures, in which women are an integral part of any decision making process. Saleh (2010) points out one important problem: “the whole government sector is [...] being run by male, men. And [...] that's the same patriarchal mindset. So therefore, I don't see much change until more women are in the public sector.” With this opinion she does not stand alone, as other actors also consider “women's political participation as a driver of change in Pakistan” (SDPI 2008: 14). But it is not only inclusive decision making that is a structural necessity. “Major barriers responsible for low female participation rate include inadequate recognition of their contribution, women's immobility, ignorance about opportunities and societal perception of women as lower status dependents” (SDPI 2008: vi).

#### 4.6.5 Inadequate Policy, Legislative and Enforcement Framework

The values of a society are reflected in its laws. The adjustment of laws can therefore be an important and difficult step forward. For example, with the adoption of the *Women's Protection Bill*, Pakistan has made immense efforts to “protect women from the discriminatory social attitudes and customs and abolish anti-women and girl child practices, including depriving women from inheriting property, un-Islamic marriage with Holy Quran, Vani, Swara, and violence which are also contrary to the Islamic injunctions” (UN 2009a: 28). It “is significant as far as, expression of government's willingness to engage on issues concerning women; however the difficulties under the discriminatory Hudood laws 1979 remain” (NCJP/DCHD 2007: 7). The adjustments are therefore on the one hand insufficient, but on the other hand, it “is the low level of implementation of laws”, which is the main problem that “Pakistan shares with other developing countries” (UN 2009a: 31). Policies and laws for the welfare of women and persons with disabilities in general are not being followed due to weak enforcement mechanisms and a lack of awareness on the part of major decision makers. “For example, the 2% quota in all jobs reserved for PWDs is not being followed but there is no mechanism to ensure its implementation” (NOWPDP 2008: 54). Overall, it lacks “adequate training to appropriately deal with the situation and apply the relevant provisions of the law” (UN 2009a: 31). Furthermore, laws alone are not sufficient for changing attitudes.

There is no doubt that law serves a useful purpose in promoting social change, but mere legislation cannot change society overnight. Traditions die hard and it is only under persistent and strenuous efforts that they give way in time. Pakistani women have, therefore, still a long way to go before their dignity as equal citizens is restored and all their cherished ideals are realized. (Chaturvedi 2003: 266)

It rather needs laws *and* the underlying knowledge that supports their claim. “A weak institutional mechanism, skewed attitude of the law enforcing agencies and court staff towards women litigants, posed numerous restrictions in seeking judicial redress” (NCJP/DCHD 2007: 7). Moreover, “procedural technicalities and the weaknesses and inefficiency of the players of the criminal justice system [the police, lawyers and judges, S.A.] are some of the main reasons why people do not get justice” (UNDP no year: 93).

[T]he legal system has its own lacunae. Major reason being, that the law enforcement agencies / functionaries generally have preconceived notions about women's morality. In this way they justify such actions. The procedures provided him enough loopholes to be free and remain a threat. Situation like this demands a thorough analysis to identify the gaps and then steps could be taken to improve the situation in different areas of life. (NCSW 2008: 29)

#### 4.6.6 Mismanagement of Financial Resources

Access to resources is one crucial precondition to further development. First and foremost in this regard, are financial resources. Since the “budget is considered as the most important policy statement of the government and reflects the direction of underlying national policy” (Sabir 2009: 1), it is worth taking a closer look at Pakistan's expenditure. Saleh (2010) points out that one main area of cooperation for civil society with the government, is to make the government realise that women need separate budgetary and fiscal resources. Attempts to fulfil this goal culminated with Gender Responsive Budgeting, a strategy to “mainstream gender into the various stages of the budget cycle” (GoP 2008a: 9). Pakistan has committed to this strategy in several governmental documents, particularly in the PRSP papers; and in fact, as shown in Table 13, an overall increase in gender related budgeting can be ascertained within the last years. From Rs 7.6 billion in 2007-08, the women specific expenditures have increased by 4 percent, with Rs 44.5 billion in the time period 2008-09 (Sabir 2009: 1). Within all efforts, a greater focus lies on the sectors of health and education.

**Table 13 Three Way Categorization of Federal Budget**

	2004-05		2007-08		2008-09
	Budget	Revised	Budget	Revised	Budget
Targeting gender-based expenditures	10.3	9.9	10.6	9.9	47.6
Women & Girls	10	9.6	7.9	7.7	44.7
Men & Boys	0.3	0.3	2.6	2.3	2.9
Pro-women Expenditures	<b>2.7</b>	<b>2.7</b>	<b>4.5</b>	<b>4.5</b>	<b>4.5</b>
General / mainstream budget expenditure	492	567.6	756.2	1052.6	967.1
<b>Total Federal Expenditures</b>	<b>505</b>	<b>580.2</b>	<b>771.2</b>	<b>1067.1</b>	<b>1019.3</b>
<b>Share in Total Expenditure</b>					
Targeting gender-based expenditure	2.00%	1.70%	1.40%	0.90%	4.70%
Pro-women Expenditures	0.50%	0.50%	0.60%	0.40%	0.40%
General budget expenditure	97.40%	97.80%	98.10%	98.70%	94.90%
<b>Total Federal Expenditures</b>	<b>100.00%</b>	<b>100.00%</b>	<b>100.00%</b>	<b>100.00%</b>	<b>100.00%</b>

Rs. in millions, Source Sabir 2009: 13

An overall increase in resource allocation to the MoWD by the government can also be verified, with a rise to Rs 837 million in the 2002–2003 Public Sector Development Programme (PSDP). Considering that this is still “less than 1% of total PSDP”, the progress is relatively slow (ADB

2008a: 39). In terms of quality, Sabir (2009: 35) attests that “[i]n the context of Pakistan, both, gender targeted and pro-women expenditures either contribute in greater gender equality or highlight the causes of gender differences.” Fact is that “‘Social Welfare & Special Education’ has been an integral part of development planning in Pakistan but this sector has always remained at the lowest priority in resource allocations (except for a few years in the early 1980s)” (NOWPDP 2008: 56). Within the last 5 years, even a decrease in financial allocation to the MoSW&SE can be observed (ibid.). But overall, an increase in the financial allocation of public funds to programmes and projects targeting persons with disability can be attested. In the Ten-Year Perspective Development Plan (2001-2011), the Planning Commission has allocated Rs. 6,282.280 millions, particularly to the education, training and rehabilitation of disabled persons, in the course of the NPPD and hence, the NPA for persons with disabilities. The government admits though, that the “estimated financial resources required” to achieve the goals set “would be about Rs. 25 billion” (GoP 2002a: 12). This also means that the “[c]ost targeting and budgeting are not sufficiently emphasised” (Hakro/Talpur 2005: 9). To fill the immense gap, the government plans to acquire “other sources for funding such as international organizations and relevant national agencies” (GoP 2002a: 12). The DGSE's budgetary allocation for children with disabilities in the past years, as shown in Table 14, resulted in a number of new projects and upgrades for many existing projects (UN 2009a: 21). Overall pro-poor “expenditures on human development (including health and

education etc.) increased from Rs. 90.67 billion in 2001-02 to Rs. 196.84 billion in 2005-06” (ibid.: 20). But even if there is clear improvement within budgetary allocation for women and persons with disabilities, the expenditures for these groups of

**Table 14 DGSE's budgetary allocation**

<b>Year</b>	<b>Existing projects budgetary allocation</b>	<b>New projects budgetary allocation</b>
<b>2003-04</b>	<b>170.186</b>	<b>167.874</b>
<b>2004-05</b>	<b>289.764</b>	<b>192.713</b>
<b>2005-06</b>	<b>178.396</b>	<b>207.681</b>
<b>2006-07</b>	<b>198.098</b>	<b>268.586</b>
<b>2007-08</b>	<b>231.017</b>	<b>281.122</b>

Numbers in Rs. millions, Source UN 2009a: 21

society are very low compared to other sectors in the overall budget, such as military spending. “Micro credit facilities that help in gaining self employment, leading to greater socio-economic empowerment, are rarely made available by most institutions to PWDs” (NOWPDP 2008: 49). Another problem has to be highlighted at this point; the discrepancy between allocation and implementation. According to Saleh (2010), there are several reasons why the implementation of policies fails. Firstly, there is no separate allocation of funds, “therefore [..., Pakistan, S.A.] can

not look after 50 percent of the population.” Secondly, not all of the funds are being utilised. Saleh (2010) remarks: “suppose if we have even allocated 2 percent of the GDP, we hardly end up giving 1 percent.” Thus it can be presumed that “the failure of the development policy was not just the absence of services, but the failure of the policy to ensure widespread distribution of resources (services) where they were available.” (Khan/Bari 2005: 8)

#### **4.6.7 Shortage of Services, Facilities and Human Resources**

On a policy level, the government has recognised that facilities, which provide services for persons with disabilities, play an important role for realising desired changes. For example, the NPPD “acknowledges the need for the provision of a comprehensive range of facilities for persons with disabilities from prenatal to postnatal period through proper assessment education, vocational training and employment” (NOWPDP 2008: 49). The extension and enhancement of these facilities is a continuous aim of most policies in Pakistan. The objective of creating a barrier free physical environment in all public, private and commercial buildings and public places for persons with disabilities is a frequently repeated target, above all in the NPA and NPPD. The goals range from the establishment of buildings to the development of adequate materials and the furnishing of the institutions with appropriate equipment. These goals are to be accomplished in collaboration with national and international institutions, primarily in the field of special education. But it is undeniable that there are at present, several hindrances and inadequacies in the provided services and facilities (cf. *ibid.*: 56f.). For one thing, the focus areas are limited. Special education is the dominant field of action that the government operates in. And although inclusive education has generally become a topic of discussion, “the perceptions by the society that disabled people deserve segregated educational facilities” has not changed and leads to an exclusion of persons with disabilities from regular educational system (*ibid.*: 55). “Hence 'inclusive education' for persons with disabilities has also remained an exception” (*ibid.*). Another concurrent problem is the general discrimination of girls in education. According to the Survey of Facilities and Services for Persons with Disabilities (2006) by the Directorate General of Special Education (DGSE) of the Government of Pakistan, about two thirds “of the total students enrolled in the special education centers are male” (DGSE qtd. in NOWPDP 2008: 42). Added to that is the paucity of vocational training facilities and services (cf. NOWPDP 2008: 56). For adults with disabilities, there are hardly any institutions that provide education, training and support (Perveen-Hannesen 2010). Furthermore, the quality of these institutions and their

services is insufficient. It is one thing to acknowledge education and training as a central preoccupation, but another to ensure its qualitative provision, including, *inter alia*, through the removal of environmental barriers. Obsolete and inadequate methods are therefore a significant problem.

While science and modern technology have made tremendous leaps in the latter half of the 20th century opening up new avenues and new horizons for the able-bodied, the disabled are still being trained in traditional crafts and for simple repetitive jobs like basketry, chair-caning, handloom weaving, packing, assembling, light electrical/mechanical works etc. Sadly, the opportunities for employment even in these limited fields are dwindling rapidly. Agencies and institutions for the disabled find it easier to continue to operate on traditional approaches [sic!]. (AAA 2004: 75)

The lack of adequate training for people working with persons with disabilities is not helping the issue. Although the government has made some efforts to establish and extend education and training facilities for teachers (cf. *ibid.*: 66ff.), their curricula and numbers are not sufficient (cf. Perveen-Hannesen 2010). Also “[t]he number of existing services and facilities for PWDs are absolutely insufficient and in no way correspond to the number of PWDs. The availability of only 531 institutions in the country for the disabled population of 3.29 million is almost negligible” (NOWPDP 2008: 56). And another inadequacy becomes obvious in this matter, namely, the urban concentration of services (*ibid.*).

[T]he availability of trained and qualified teachers has improved considerably in big cities like Lahore, Karachi and Islamabad with the establishment of training institutes including Departments of Special Education in Punjab University, Karachi University and AIOU Islamabad. But the institutions established at other places mostly lack trained and qualified teachers. Similarly there is an acute shortage of allied technical staff in the existing institutions which include audiologists, speech therapists, physiotherapists and occupational therapists. (NOWPDP 2008: 55)

Overall, to increase the number and quality of institutions for people with disabilities is a clear goal of policy-makers, although the concepts, strategies and fundings are not always adequate. Furthermore, women with disabilities are not specifically targeted and their needs are only included marginally within policies and activities related to women and persons with disabilities. There is also a lack of information dissemination, that poses a barrier for women with disabilities to benefit from existing facilities. People with disabilities “who are not networked with each other [...] are not aware of the full range of facilities and services offered by various organizations. This keeps them marginalized and detached from the rest of society” (*ibid.*: 54). UN ESCAP (1995: 5) describes, that “[f]or most women with disabilities, their only hope for some degree of rehabilitation lies in CBR reaching them where they are, with the active involvement and support of their families and communities.” By providing “many essential types of assistance” such as “training in basic skills such as self-care (eating, drinking, dressing and



personal hygiene) and mobility for visually-impaired women” in the environment of respective persons, “a highly significant contribution to the development of the self-reliance and dignity of a woman with a disability” can be achieved (ibid.). But there is a lack of community based programmes, because of existing concepts about persons with disabilities.

In Pakistan, disability had for long been considered a medical problem and the state was considered to be responsible for addressing it. Thus, the concept of community based rehabilitation and education programmes could not flourish much. This trend has changed over the years due to the efforts of numerous NGOs and other civil society and corporate sector institutions but we still need to do a lot. (NOWPDP 2008: 55)

#### ***4.7 The Influence of External Forces on the National Level***

Officially, Pakistan follows international treaties and activities. In all major national treaties, references are made to international conventions and similar documents. As stated previously, the influence of the Beijing Platform is evident in that the same categories given in it are adopted on a national level for the NPA related to women. But the NPA also acknowledges several other human rights documents that the Pakistani government has committed to, including CEDAW and the CRC. In the National Policy for Persons with Disabilities 2002, Parveen Qadir Agha (at the time, Secretary of the Ministry of Women Development, Social Welfare and Special Education) identifies the UN International Year of Disabled Persons as the relevant starting point to initiate activities related to people with disabilities in Pakistan from the 1980's onwards. Furthermore, in the preamble of the NPPD, the international movement of and for Persons with Disabilities, and the active involvement of Pakistan is recognised by noting that these conventions and agreements make the “Government of Pakistan a partner in the global movement for the betterment of this segment of society” (GoP 2002a: 3). The NPA for persons with disabilities goes beyond this. For its success, the Federal Minister of Social Welfare and Special Education, Zobaida Jalal incorporates the role of international organisations and institutions not only through their formal commitment but as “additional resources from all available funding mechanism, including multilateral, bilateral and private sources” (GoP 2006a: 3). Moreover, besides the policy and additional inquiries on national and provincial levels, the “[a]ctions required to achieve Targets given in the [BMF, S.A.], to which Pakistan is signatory” is said to be an important factor of influence for the NPA (ibid.: 4). The intention to update methods and categories of data collection and to improve statistics in accordance to international standards, in particular the “National Population Census and other public sector household surveys”, is made

evident in Area 1: “Design and adept WHO's 'International Classification of Functioning, Disability & Health' (ICF) for measuring disabilities and propagate the same at all levels i.e. from federal policy levels to service delivery points in the community” (ibid.: 6). However, at the level of deciding priority areas and planned action within the named policy documents, these international treaties are only partly implemented. Nonetheless, the influence of international entities is seen in two major ways. Firstly, in the creation of an international framework, which encourages states to participate in the development and adoption of international concepts. Secondly, due to the transfer of funding and knowledge to bodies working at the implementation level. International entities can also be seen as stimulators for national action, especially in certain directions. This can be observed on the example of gender.

It is... true in a sense, that [...] gender is a major component of all the donor agencies. [It is an, S.A.] integrated theme [...] If, S.A.] the project is for any kind of development activity, they integrate gender into it. Okay, if it is health, how many males, how many females? If it is [...] road, [...] economic empowerment, or skill building, how many females will be using it, how many males will be using it? So when it comes to the donor agents, they take specific care of it and [...], the international conventions the government has signed, and National Plan of Action, that makes it compulsory for government to take certain steps. (Khan 2010)

How the donor agencies operate in practice, or in other words, how international concepts are being implemented can be observed in the education sector. A considerable amount of financial assistance pours into Pakistan, particularly in the form of loans and grants provided by international organisations, notably the ADB and the World Bank. But

[t]here is an extreme lack of synchronisation among donor agencies and the GoP [Government of Pakistan, S.A.] for improving literacy rate of Pakistan. In reality, donors have their own agendas rather most of the donations are experimental and not real contribution to the system. Hence the government and donors need to be missionary zeal if they want to see real results of their efforts. (SDPI 2008: 49)

Nevertheless, for women with disabilities the influence of international players certainly means a higher chance of gaining attention, since their concerns have become part of the international agenda.

## **4.8 Summary and Recommendations**

According to Krieger (2001: 224), policies related to people with disabilities are basically “on education, employment, public service, and participation in civic life.” In the case of Pakistan, this does not hold true. Here, the government is focused on education, health and economic activities, but it also articulated a number of goals related to other sectors. A great number of overlapping targets have been suggested and planned for, including an attempt to initiate attitudinal changes towards persons with disabilities in Pakistan's society. This approach, together with policies relating to women, opens up many opportunities for women with disabilities. One of the benefits of this is the trend to foster closer cooperation between a great variety of stakeholders, not only at the level of implementation, but also in the planning process. A lack of coordination jeopardises this approach and will be further discussed below. Another positive facet of Pakistan's policies is their objective of raising the level of awareness regarding disabilities and to promote a positive image of persons with special needs. The implementation strategy of this goal, however, is merely to make it the responsibility of the public and private media. The media, in the eyes of planners, should function as a transmitter of positive images of persons with disabilities and women in general. But limited control over the media by government bodies also means that these actors cannot be counted as dependable, or in any way permanent. One positive point to note is that the government does attempt to revert to existing political and local structures, as well as animate, improve and extend them. The issue is that transferring implementation processes is linked with a shift of responsibilities, which often leads to problems of coordination, monitoring and overall sustainability. For example, there was no structure for gender that would function as facilitator and monitoring observer, before 2002 in Pakistan. International influence is not only present in the transfer of knowledge, in the form of guidelines and best practices, but also actively demanded by the Pakistani Government in the form of financial assistance. By replicating international recommendations and ideas, the government is heading towards economic and social progress. International donors further play an important role in supporting and conducting surveys and collecting data on Pakistan's population in general, and particularly on neglected issues such as disability. The question is always, who benefits in the end? This essentially must include opportunities as well as knowing about them and the courage to use them. Walji (2009: 32) suggests the following points as useful steps that the government should take to improve the status of women with disabilities:

- Engaging women with disabilities in dialogue and decision-making in both the areas of gender and disability policy prioritization.
- Collecting adequate disaggregated data on women with disabilities and building local capacity to do this effectively, so that policy is informed by evidence.
- Focusing on the financial, attitudinal and physical barriers that prevent equal access (bearing in mind that women with disabilities face different obstacles to women without disabilities and men).
- Strengthening the leadership of organizations specifically representing the experiences and interests of women with disabilities.
- Increasing the capacity of women with disabilities to represent themselves in both disability and gender interest groups.
- Create mechanisms for accountability in both sectors and including women with disabilities in all aspects of this process.
- Developing a specific policy addressing the key concerns of women with disabilities, and ensuring these are well integrated into both disability and gender policies.

Walji focuses on the policy level, and so these guidelines cannot be exhaustive. Nevertheless, they can be helpful in examining and monitoring whether the government intends to or is already working in the directions set by Walji. In the case of Pakistan, what must be stated from the onset is that there is no policy planned for the near future that particularly addresses women with disabilities. Nevertheless, other relevant goals and aspects can be retrieved, in one way or another, from the existing policy documents in Pakistan. Major areas related to this issue are identifiable, that need special attention in Pakistan. Existing literature provides a number of recommendations that can be useful for this purpose. First of all, government entities need commitment and ownership. Only by understanding new concepts and perspectives can mindsets be changed and relevant aspects be included in action plans and activities. This can be supported by a variety of initiatives. One such crucial action would be to sensitise authorities on gender and to develop a gender component in capacity building and training of governmental staff on various levels. The conviction that Pakistan needs to invest in its women, for their currently underestimated value for the national economy and social structures, needs to be developed. For example, there is a lot of unpaid work done by women that is not yet recognised and therefore, mechanisms have to be created to give value to this contribution. Furthermore, the government has to keep in mind that there are many realities. Adequate need assessments and the collection of reliable data can help to identify these differences in realities and provide a better “basis for policy making, project planning and programme implementation” (NOWPDP 2008: 58). To improve the indicators used is one essential precondition in this direction. There is a need to create women and disability friendly spaces and rules in existing political structures. Therefore, policies have to be revised since they are male centred and serve to systematically block other groups. Overall, improvements are needed within the policy, legislative and enforcement

frameworks, including through more serious implementation of international agreements, updating existing policies and laws according to “changes in the society and advancement in various models for the rehabilitation and mainstreaming of” (ibid.) persons with disabilities, as well as strengthening enforcement mechanisms. A change might be initiated by implementing quotas for women with disabilities. Quotas are useful as they are a quick mechanism for visible change and can be removed once they are not required, since in the long term, quotas are criticised as being harmful for fair competition. Another main aspect is the need for strong partnerships between the government and the civil society, which again can be accomplished through clear structures, such as institutional mechanisms that coordinate and connect different divisions and stakeholders, as well as the stronger inclusion of civil society in programmes and projects as well as on the policy level. Wider coordination and networking mechanisms have to be developed, which “should be open to all organizations working for PWDs, irrespective of their location, size and nature of programme as long as they work for the larger good of PWDs” (NOWPDP 2008: 58). Intensifying this cooperation could bring about an improvement in data baselines, lobbying and advocacy, as well as the provision of information and services (ibid.). This requires first and foremost, the inclusion of women with disabilities on all levels. To achieve their participation in decision making as well as implementation, training has to be provided to build their capacities as well as self confidence. Therefore adequate facilities, including necessary equipment and methods are essential. One of the main components of such effort is the development of special education teachers, who are trained in the required skills and knowledge to enable them to effectively work with women and girls with disabilities. To overcome the enormous cleavage between rural and urban facilities, some consider Community Based Rehabilitation (CBR) as the most suitable approach that the government should invest in. This term is explained by the ILO (1994: 12), emphasis in original) by dividing the two phrases,

**Community-based:** a planned programme of action which has its origins and its primary focus on service and resources within the community in which it is operational. A community-based project is one which is not imposed from the outside and is recognized by the community at large as necessary and desirable for them. **Rehabilitation:** a process whereby a disabled person is assisted towards the fullest possible restoration and use of his or her physical, mental, social, educational and vocational potential consistent with the existence of disability within the individual.

Based on the recognition and the support of the community, these projects can have a positive effect regarding possible outreach and the suitability of the proclaimed actions. Furthermore, it has greater potential for self-sustainability. It should be noted, that Pakistan is already active in this regard, but only to a certain extent and with limited success. One of the reasons for this is

that in practice, these projects are “professionally unsatisfactory, difficult to organize as self-sustaining programmes and unfeasible without major support from outside the community” (ibid.). Overall, budgets have to be made more gender and disability sensitive, and alternate sources have to be mobilised to increase the total expenditures; two facts that have been previously emphasised. These actions are, in some cases, already envisaged by the government, as can be seen in several policy documents. But to enhance the outcome, an increased cooperation with the private sector and the civil society and the development of a social protection program to coordinate existing resources could contribute to an improved overall situation of women with disabilities. (cf. NOWPDP 2008: 60)

## 5 The Goals and their Subjects

The previous chapters of this paper have not only discussed the theoretical framework related to women with disabilities, but also extensively analysed the relevant international context as well as the national agenda pursued in Pakistan. But it is the reality on the ground that is most critical. The analysis of international and national frameworks have shown many gaps and difficulties in implementing the relevant initiatives. These gaps are structural and institutional hindrances, which keep societies from achieving desired changes in legal, social and economic issues; and form part of the barriers that stand in the way of the inclusion and participation of women with disabilities in society. Civil society is believed to have the potential to expose social injustices and examine dominant goals and their objects. This final chapter will outline power relations, identify relevant goals and objects of the international framework, government and civil society and their contradictions, and question how these aims are being implemented.

### 5.1 Civil Society

The idea that “good institutions could substitute for bad policies” (Campos/Khan/Tessendorf 2004: 50), puts the civil society in a position to participate in decision making, inter alia by awareness raising on issues such as human rights and women in development, but also by providing basic services, such as health care and education. At the same time, civil society institutions are being pressurised to fill in the existing gaps that result from governmental failures. But how exactly is this civil society dealing with gender, women and persons with disabilities? Therein exists a long and extensive discourse about what civil society stands for and what it includes, which exceeds the possibilities of this paper. A brief outline of the term *civil society* with a focus on persons with disabilities will be sufficient for the purposes. In political theory, society is often subdivided into three entities: state, private enterprise and civil society; an arrangement, which is adjustable since discord dominates over their members and characteristic features. The only feature considered common to them is their separation from the government. Besides the function of compensating for the absence of government, civil society also means “a sphere where *citizens* can actively participate in *non-state institutions*, in order to influence or challenge the state's formal rule” (SDPI 2003: 202, emphasis in original). In Pakistan, the words '*can participate*' can be seen as reference to the space that is allowed for by the government to participate and also to the engagement of persons in specific issues. Krieger (2001: 140) is more specific in his understanding; for him, the “[...] civil society is that collection of diverse interest groups and social organizations that is strong enough to

provide some autonomy and protection to individuals from the authoritarian and hegemonic tendencies of states.” Nevertheless, the question still remains, as to who is ultimately part of civil society. Some argue that civil society does not include the private sector and media “due to their for-profit nature” (Baig 2001: 1, Footnote 1). Essentially, this reduces civil society to the non-profit sector. A different perspective is given by McLean/McMillan (2003: 264); according to them, the civil society “includes voluntary associations and firms and other corporate bodies.” Considering the case of Pakistan, the media is one main forum in which the public can voice its concerns, and the corporate sector is an active non-state actor of different means, such as Corporate Social Responsibility (CSR). Henceforth in this paper, civil society should be seen in an all-inclusive manner, as represented by Civil Society Organisations (CSO), private actors, the corporate sector and the media. They all play a critical role in highlighting the voice of minorities and therefore have an important impact on the issues relating to women with disabilities in Pakistan.

### **Civil Society Organisations and Private Actors**

Non-profit organisations represent an important part of the civil society, standing outside both the state and the private sector (cf. Ghaus-Pasha/Jamal/Iqbal 2002: 8). Most commonly, civil society is related to NGOs. Kahn and Bari (2005: 3) attest that NGOs have a high grade of effectiveness due to their ability “to deliver services and act as catalysts in the development process”. Disabled Persons Organisations (DPO) are a part of this category, but Könkkölä (2007: 11) expresses concern that “[i]n general, international DPOs are weak. They have not been able to influence international development policies, but they still play an important role in representing disabled people worldwide.” This view can only be partly accepted as in recent years, DPOs have increased their participation in policy litigation. This is not only because they became continuously better connected with each other, but also because the international framework increasingly encourages relevant organisations to take part in planning, implementing and monitoring international and national treaties and regulations. As previously pointed out, NGOs played an essential role in developing the Beijing Platform for Action. Another concrete example is the influence of Disabled People's International (DPI), an international non-governmental cross-disability coalition of organisations of persons with disabilities on the “agenda of the United Nations to be more disability responsive and gender sensitive” (cf. Mathiason 1997: 1). The latest illustration of the new role of civil society on an international level is the fact that the participation of NGOs and DPOs was requested in the development of the CRPD. Alongside the development of treaties, it is the NGOs and DPOs that represent essential parts of civil society, that are today among the most influential factors in implementing programmes and projects at a level that impacts societies.



## Corporate Actors

In the search for additional financial and methodological means to enhance sustainable development, the corporate sector was regarded as a potential partner. The inclusion of private companies not only increased the number of active actors in the development cooperation on an international and local level, but also brought in new means of resource mobilisation and innovation. Most popular in the development sector today is cooperation with the private sector through the concepts of public-private-partnership (PPP) and corporate social responsibility (CSR). PPPs usually imply “voluntary and collaborative relationships among various actors in both public (State) and private (non-State) sectors, in which all participants agree to work together to achieve a common goal or undertake specific tasks” (ILO 2008: 1). They are “typically established as structured cooperative efforts with a sharing of responsibilities as well as expertise, resources and other benefits” (ibid.) and can be applied in any development sector, such as education, health and infrastructure. They can further include

activities such as funding or donations in kind by or between actors in the partnership; joint development and implementation of projects or other operational activities; organization of meetings or events; joint campaigning or advocacy; cooperative research and publications; temporary exchange of staff; or arrangements concerning the exchange or pooling of knowledge and information. (ibid.)

Many international organisations cooperate with private entities. With the Fund for International Partnerships (UNFIP), the UN has even established an interface for partnerships between the UN system and private funds. This was possible due to the enormous amount of donations received from the private sector for this purpose. The UNFIP takes the responsibility of distributing the available funds among UN projects focusing on “Children's Health, Women and Population, Environment, and Peace, Security and Human Rights” (UNOP 2010). One of the incentives for many companies to engage in non-firm activities is the modern concept of Corporate Social Responsibility (CSR). The definitions as well the perspectives of CSR are as controversial as those of the PPP. Basically CSR “aims both to examine the role of business in society, and to maximise the positive societal outcomes of business activity” (UN 2007: 1). In other words, CSR is generally understood as the “contribution of business to sustainable development” (UN 2007: 1). Fox (2004: 34) argues however, that “[t]he contemporary CSR agenda is failing to fulfil its potential contribution to development. It is skewed by the dogma that often limits it to voluntary business activities, by its domination by actors in the North, and its focus on large enterprises.” Without a doubt, the private sector has become an important player within development cooperation. Private enterprises are not only willing to provide financial aid to projects led by international organisations, governments or the civil society, but also contribute to knowledge, innovation and infrastructure. The risks related to private sector involvement are related to the subliminal influence

of neo-liberal ideologies and policies as well as an economisation of development. This contains the risk of a neglect of existing social disparities.

## **Media**

The media is often not considered a part of civil society, but does hold an intermediate position between different stakeholders and has tremendous power over information and public opinion due to its different means and outreach. According to Jacobs (2000: 22) the

news media and the public sphere<sup>4</sup>, have always been intricately intertwined [...] Like public sphere, news media can circulate in private, public, or virtual spaces, and they involve matters of common concern. But whereas public spheres are oriented primarily towards the circulation of discussion, news media deal in the circulation of information, broadly construed. Certainly the information being disseminated includes public sphere discussion; but it includes other things as well.

This naturally implies means of exchange, contribution and dissemination of information, but also power itself, because the media has a broader area of contribution compared to other actors. Misuse of the charge of information dissemination is one of the predominant risks, because “[l]arge media offer a powerful forum for changing public opinion, by defining what issues people are most likely to talk about” (ibid.: 25). What and how this is projected, is the main issue though, and is dependent on the medium being used, on journalists and on the audience. Information is not always being reviewed (cf. Khan 2010), and the media will always be tempted to increase audience and reputation. Internationally, the media has shown that the projection of a country is always different from its realities (cf. ibid.). Nevertheless, by portraying and addressing side-issues, the media can generate the necessary public support for certain social issues and concerns. The media can indeed help to change societies' perceptions by providing exact and selective information.

## **5.2 Civil Society in Pakistan**

The civil society in Pakistan is described in a variety of ways. Some argue that it is in “moderately 'good health'” (Baig 2001: 5); others, particularly non-locals, disqualify the functioning of the civil society in Pakistan, pre-eminently through comparison to western standards (Schetter/Mielke 2008: 19). Baig (2001: 1) states, that “Pakistan's civil society is characterized by hybrid forms, multiple inheritances, and the unresolved struggle between the practices and values of pre-capitalist society and new modes of social life, between authoritarian legacies, and democratic aspirations.” The range of organisations, their target groups, goals, strategies and achievements is very broad, including inter alia activities, services and institutions concerning refugees, legal issues, matters of

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<sup>4</sup> Jacobs defines public sphere here as “open discussions about matters of common concern taking place in civil society”

health and education. In practice “[c]ivil society in Pakistan comprises NGOs, community-based organizations, think tanks, trade unions, cultural groups, and informal citizen organizations” (Bajoria 2008). Their number is not steady and can only be estimated. Ghaus-Pasha/Jamal/Iqbal (2002: 4) evaluated around 45,000 active non-profit organisations with nearly 264,000 full-time paid employees and 212,000 full-time volunteers in Pakistan for the year 2000. Their major activities, as shown below in Table 15, give an impression of the dominant areas of operation in Pakistan. It reveals a significant concentration of educational institutions. Even collectively, the other five areas of activity, consisting of civil rights and advocacy, do not receive as much attention as education does alone. Following the previous assumption that civil society tries to substitute for the absence of government, it can be said that these organisations select their fields according to the major weak points of governmental efforts. The relationship to the government is complicated and often laden with conflict. Sometimes the government is supportive, but at other times it is more obstructive than anything else. The policy of State institutions towards civil society greatly determines the sphere and level of activity of the organisation.

**Table 15 Organizational Major Activities (%)**

Education and Research	46
Civil Rights and Advocacy	18
Social Services	8
Development and Housing	7
Health	6
Culture and Recreation	6
Religion (Management of Religious Events)	5
Business and Professional Associations	4

Source Ghaus-Pasha/Jamal/Iqbal 2002: 4

While authorities are supportive at the policy level and are providing much increased financing support to CSOs through apex institutions such as the Pakistan Poverty Alleviation Fund, local authorities tend to be less so at the operational level where CSOs are sometimes seen as competitors for funds and influence. Further, officials are generally supportive of the welfare and service-providing role of the nonprofit sector as compared to nonprofit organizations in social and political advocacy. (ADB 2009b: 4)

Even public CSOs and particularly NGOs are met with scepticism. Due to widespread corruption and the misuse of funds, society in Pakistan is suspicious of such bodies. Other doubts voiced concern the partnership of some CSOs with international organisations: By taking up sensitive issues, above all human and women's rights, some fear influences which could “harm [...] the ideology and the integrity of the country” (ADB 2009b: 5). The civil society in Pakistan is multifaceted and highly capable of adjusting to different fields and their methodological approaches. In the following chapters, I will discuss specifics of the field activities of the different actors in Pakistan, including their crucial weaknesses, potential strengths, and their increasing cooperation with other stakeholders involved.

## **5.2.1 Non-Governmental Organisations**

The immense financial aid that Pakistan receives, mostly from the United States, has made possible the survival and even flourishing of a vigorous NGO sector in the country (cf. Khan/Bari 2005: 7). “As these NGOs grew in size and scale of their activities, they became major players in the socio-economic development of the country” (ibid.: 8). Due to the diversity of their activities and their prevalence, they are not only prominent within the population, but are also recognised by the government as key actors particularly within development cooperation.

NGOs have made their presence felt throughout the country and are actively participating in almost all sectors of socio-economic development. They are involved in programs and activities ranging from health and education, to advocacy and awareness. In variety of ways, they have actively contributed in formulation of Government policies and plans. Their presence is strong in the field of gender & women development and issues of children, both are crosscutting. (GoP 2002b: i, Introduction)

The “strong emphasis on public private partnership in the development effort” (Khan/Bari 2005: 4) within the last twenty years have made the role of NGOs even more significant. Among other actors, primarily private companies, NGOs are prevalently engaged in implementing governmental projects. Nevertheless, despite all the efforts undertaken to fill existing gaps in services “[t]he total coverage of NGO's currently, is relatively insignificant compared to the magnitude of the poor population” (UNDP 2003: 100). More importantly, there are several profound problems in the NGO sector. Overall, NGOs in Pakistan seem to have basic difficulties with successful fundraising, credibility, transparency and accountability (ADB 2002a: 13). This is aggravated by the fact that, while human rights organisations find respect within the population based on their moral intention, the majority of NGOs are discredited because they are perceived as agents of foreign interests. This is particularly prevalent in areas such as the Federally Administered Tribal Areas (FATA), Khyber Pakhtunkhwa and Balochistan (Schetter/Mielke 2008: 25). Furthermore, many NGOs are top-down initiatives rather than grassroot movements, and are initiated by politicians, who aim to feed their clientèle network and serve their own interests. These weaknesses are some of the reasons, why many non-state actors engage in society through alternative ways, such as in private initiatives.

### **5.2.1.1 NGOs concerned with Gender and Women in Pakistan**

According to Pakistan's National NGO Database (GoP no year b), only 10 out of all registered NGOs deal explicitly with gender-related issues. It is striking that most of them are obviously big players in the NGO sector, with annual budgets somewhere between a quarter to 10 Million Pakistani Rupees. They are all active in a great number of fields besides gender. Below these large, officially registered entities, some smaller NGOs are working for gender equality and equity the country. There are several explanations for this limited quantity and for hindering NGOs in Pakistan

from a political understanding of gender. As Saleh (2010) pointed out, one core problem is that gender in Pakistan is considered a *cliché* not a *political ideology*. NGOs tend to include gender issues in their work simply due to the high amounts of earmarked money coming from international donors, without actually intending to focus on this area. The reason behind this is the dependency of NGOs on donors in terms of funds, which continuously changes their priorities “according to their different approaches and different programs”; hence, “the NGOs keep moving” (Saleh 2010). This bears the risk that NGOs operate only in limited areas, specifically those determined by donors. Saleh further states that there is little networking between NGOs in Pakistan to exchange knowledge and information which is one of the reasons why they cannot challenge the government seriously (ibid.). Interpreting NGOs as apolitical social reformists, argues Saleh, hinders them from challenging decision-makers. Another reason for the limited number of NGOs active on gender related issues, is the lack of awareness regarding the topic and the wide-spread assumption that gender is an issue within national debates due to external, especially 'western' interests (Ghaznavi/Khan 2006: 10). Organisations working on women related issues face similar judgements, but in contrast to gender related organisations, there are a great number of NGOs dealing and working with women. They have a long history in Pakistan and have an obvious cause: the women themselves. The National NGO Database (GoP no year b) records a total number of 23,749 organisations concerned with women and women related issues, as shown in Table 16. In addition, there are many more unregistered and smaller NGOs working with women that are not mentioned in the database. Their main fields of operation are overlapping, but remain along the lines of welfare, health, education, rights and empowerment. Welfare sometimes includes disability, but as observed previously, this is rarely the case. This will be shown below in greater detail.

**Table 16 Fields of Activity Organisations working with Women**

Field of Activity	Number of registered NGOs
Female Education	46
Women Empowerment	20
Women Reproductive Health	25
Women's Rights	103
Women Welfare	23555

Source GoP no year b

#### **5.2.1.2 NGOs concerned with Persons with Disabilities in Pakistan**

Besides governmental institutions for persons with disabilities, there are a fair number of NGOs working in this field. According to Arjumand and Associates (AAA 2004: 36), in 2004 there were about 117 NGOs working with persons with disabilities in Pakistan, although “the information about total number of enrolment with all of them could not be obtained.” A more accurate number is given by Pakistan's National NGO Database (GoP no year b), which lists a total number of 214

registered NGOs working with 'Disabled Persons'. The numbers at hand are not necessarily reliable, since registration is based on the individual initiative of respective organisations and, as noted previously, there is little networking between organisations and governmental entities to propagate information and therefore no impetus for them to register. Still, the database provides a useful synopsis and valuable details of respective NGOs. The data supports conclusions drawn regarding the overall situation of the NGO sector in Pakistan, as has been discussed above. Aside from the contact information and management of NGOs, details about their demographic areas of operation, financial means and expenditures, year of registration as well as their fields of activity are included. With 102 registrations, most of the active NGOs are located in Punjab, followed by 77 organisations in Sindh, 19 in Khyber Pakhtunkhwa and 13 in Baluchistan (ibid.). These numbers were to be expected, as they correlate closely with ratios in terms of population and resources between the different regions/provinces. 48 percent of these NGOs are operating in urban areas, 44 percent in rural and only 8 percent in both. Total numbers of persons with disabilities from the last census in 1998 have shown that 66 percent of the disabled population are living in urban areas and 34 percent are located in rural areas, of which there are 14 and 18 percent women with disabilities respectively (GoP 2007: 429). Compared with the allocation of the NGOs as provided by the database, this diffusion is unbalanced. This can be interpreted as validation for the fact that persons, and in particular women, living in rural areas are disadvantaged compared to women living in urban areas. On the other hand, this could also be indicative of the domination of other forms of organisations and initiatives in rural areas, such as religious, community based or private programmes, or simply be the result of fewer numbers of rural NGOs registering. The consequences of these numbers can be, for example, the uprising of *Madrassas*, religious schools for boys, especially in the rural areas of Khyber Pakhtunkhwa and Balochistan. Even where there is a dominance of schools, the participation and integration of girls may be prohibited. Subsequently, girls with disabilities are barred from education as well. Most of the NGOs in the disability sector (86 percent) are working on a district level and have resources as limited as Rs. 100,000; only 10 percent of the NGOs have higher budgets, some even up to Rs. 50 Million (GoP no year b). Given such budgetary constraints, most NGOs can only work in more or less limited areas. The correlation becomes clearer when the fields of activities are looked at more closely: 15 percent of all registered NGOs work only in the field of 'Disabled Persons', 71 percent work in up to 4 more fields and only 5 percent are active in a great variety of fields (ibid.). Hence, there are many NGOs working on issues related to disabilities in Pakistan, but often in combination with other fields. They usually have financial limitations and particularly in rural areas, lack access to information and knowledge. Overall, the work of NGOs in Pakistan is being recognised as a major factor of support for persons with disabilities.

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. (AAA 2004: 36)

However, it must be noted that despite all its efforts, the civil society cannot fill the gaps of much needed services and support that governmental institutions fail to provide. Unfortunately, in most cases, even committed NGOs show little awareness regarding the situation of women with disabilities in Pakistan. Hence, they can barely accommodate the level of activities and programmes sought for by this group. The resulting consequences and conclusions will be elaborated extensively in chapter 5.3.

## **5.2.2 Private Actors**

Beside governmental and NGO bodies, there are a great number of private foundations and charity organisations that focus on social activities. They are usually non-governmental and non-profit, but otherwise diverse in terms of intended interventions and the like. Rather than development goals, they represent civic interests, such as those related to human rights. (Schetter/Mielke 2008: 25) Increasingly, grassroot movements on the municipal level in cities and rural areas are engaged in attempts to gain governmental and non-governmental support for developing communal facilities (ibid.: 19). As pointed out in previous chapters, these actors are often not registered with the government. They administer themselves and represent the interests of a socially disadvantaged strata of the population. And although they have political concerns, they are usually not politically active themselves and do not show any interest in taking over existing governmental services (ibid.). One of the biggest and most famous institutions in Pakistan is the the Rising Sun Institute (RSI), a project of the Rising Sun Education & Welfare Society, based in Lahore. Rising Sun's objective is to provide education for mentally or otherwise disabled children, teaching them to “cope with their disability, exploit their potential to the fullest” and to make “them independent and productive members of the house rather than sheer liabilities” (RSI no year). Among the provided services are basic medical care, speech therapy, physiotherapy and vocational training. Although the main target group is children, the institute has no age limit and offers vocational training to young adults as well. Since its founding in 1986, the RSI has grown constantly and has generated long and short term committed financial aid from a great variety of private and public donors. One of the major supporters of the organisation is the Defence Housing Authority Lahore, a military owned and run housing society. Due to this continuous and stable support, the RSI is a stable and reliable actor in the field, which not only steadily expands its services but also commands wide public

attention for its work and for disability concerns (RSI no year).

Another institution, much smaller in scale, but with an innovative approach, is the Roshni Association – Society for the Welfare of Special Persons. Founded in 2001, by Shahida Perveen-Hanneson, the Roshni Association is a project with a holistic policy, addressing persons with disabilities starting from the age of 16. Since 2008, the Roshni Village houses around 45 adults with mental disabilities who work in sheltered workshops producing wooden toys, textiles and baked goods. Although more men than women are enrolled in the project, both sexes are being addressed. A combination of organic farming and community based integration of persons with disabilities drawing on Waldorf methods, as well as primary education for children from the surrounding villages make this project unique in Pakistan. Roshni is mainly financed through private donations from Europe and Pakistan. The government supports the activities with sporadic contributions through the Social Welfare Trust, for example, by funding new classrooms, as well as with a more constant commitment, by paying the salary of one of the 30 employees. Live Stock donated one cow. (Perveen-Hanneson 2010) The Roshni Village has a high reputation, particularly among the upper-class.

The Lahore Speech and Language School (LSLS) is another example of a private initiative. This school for deaf and hard of hearing children was founded by Zara Husain, who herself has studied technology in special education in USA with the aim to “help the deaf community” in Pakistan. (Husain qtd. in Blackburn 2008) The LSLS has the ambitious goal

to provide world class research on languages and literacy, curriculum and assessment strategies, teacher development, encouraging social advocacy and mainstreaming of minorities, with a tab of an anthropological focus into services delivery and monitoring mechanisms, as realized through interactions with deaf communities, of the mainstream education. (LSLS 2010)

By incorporating different contemporary methodologies, strategies and theories, including inter alia auditory and speech therapy; as well as different programmes, including a debating society; for different age groups, the project contributes to a broadened perspective on the quality of education for persons with disabilities. The LSLS manages its operation entirely without governmental support. Husain is convinced, that her school “could serve as a model, offering Pakistani educators a vision of how technology could be used to help people with all kinds of disabilities” (Husain qtd. in Blackburn 2008).

As explained, private actors other than companies in Pakistan are essential in delivering services where the government is absent, while doing little to change the general public attitude and behaviour on a greater scale. They do, however, have enormous impact on their narrower social environment. Mostly, they work in the field of special education and cater “the needs of middle and upper income groups” (AAA 2004: 37). These actors are competing with NGOs for donations and



their strength lies especially in volunteers. Overall, inequalities in the rights and opportunities for people with disabilities are been recognised as problematic and even if they are not active in this field, most of these organisations have a vision of a social change. Some private actors also voice their demands in public. One of them is JADAAL, Pakistan's First Newspaper on Disability. Besides reporting on political or social events, it supports networking activities and political actions. For instance, they announced a public protest organised by the Pakistan Disability Forum (PDF) on 26 June 2010 against the

Government Act in which [they government, S.A.] neglect disabled persons in [the, S.A.] Budget 2010-2011. There is no fund allocated for disabled persons specially DPO's (Disabled person Organizations) this is a common injustice and we are obligated to obey. But now we disabled persons are well awake regarding our right (JADAAL no year).

This rights-based approach is also prominent in the policies of other committed initiatives.

At the center of many of our struggles in the national and international disability rights movement is a fight against Consider [sic!] all person wth [sic!] disabilities as full and responsible citizens of the country and to ensure that they enjoy the same rights,privileges and opportunities as other citizens. (Mughal 2009)

To attribute an apolitical attitude to private actors is therefore not quite correct. There are several organisations which target specifically political topics, openly criticise the government, as well as announce and perform political actions. Their main concern is to pressurise the government to take action on the policy level and in implementation. In doing so, references to the international framework are often made and gaps and failures are pointed out and denounced. Thereby, networking plays an important role. Thus overall, private actors are an influential and powerful group of actors based in the community. This is also the case for another significant segment of private organisations: religiously motivated actors. Since social support networks are the essence of the Islamic understanding of society, they are consequently prevalent in Pakistan. There are numerous religious institutions which represent an Islamic civil society. (ibid.: 19) According to ADB (2002a: 7f.), “20 percent of all individual giving in 1998 was religiously motivated”. Furthermore, “65 percent of all monetary giving is directed at individuals” (ibid.) which also implies then that organisations only get a small share. The same year, out of the other 35 percent donations given to organisations, 94 percent were directed to religious groups. Beside the donations, another reason why these organisations can operate effectively is the contribution made by voluntary workers. The ADB (ibid.: 11) states that,

[i]n 1998, volunteerism in Pakistan was valued at Rs. 29.4 billion. The country is featured in the Guinness Book of World Records for having the largest volunteer ambulance service in the world, managed by the Edhi Foundation. There are several examples of NPOs which have built a strong volunteer base to support their development agenda.

An interesting fact provided by the ADB is that the majority of volunteers are women (cf. ibid.). This is a good example for the uncounted contribution to the economy and development

cooperation made by women in Pakistan. It is also an indication of the fact that women act more as care takers but do not receive the same care as others, particularly as men with disabilities do. That this is a general phenomenon not limited to certain actors, will be shown further.

### **5.2.3 The Corporate Sector in Pakistan**

Although the informal economy is estimated to “equal about 30 percent of the formal economy” (FRD 2005: 10), in Pakistan, the number of registered businesses is enormous, particularly in the urban centres. The predominant driving force of the economy are the services industries, in particular telecommunications and finance (cf. ADB 2009a: 17). With the increasing influx of international firms in Pakistan and the rise of major national companies, CSR has become a relevant element of everyday corporate policies. Today “[m]ost responsible organisations and businesses in Pakistan are making cash and in-kind donations for humanitarian and religious reasons. About 60 per cent of Public Listed Companies (PLCs) make some sort of contribution to charitable or social development initiatives” (CSR Pakistan 2010). In some cases, these commitments take on considerable scale. An example of such serious effort is the Barclays Bank: “After starting commercial operations in August 2008, the bank has already committed over PKR 25 million to CSR projects, and PKR 30 million to a global partnership with UNICEF to bring about a positive change” (ibid.). Two major aspects are critical in this case: the great amounts donated and the cooperation of international organisations. By following the CSR approach, bigger companies have the benefits of publicity and enhanced reputation, which consequently has a positive impact on their business and more importantly, furthers their influence on public decisions. In the case of persons with disabilities in Pakistan, several companies have started projects to include them in their business activities. The variety of activities supported or initiated thereby is large; but nevertheless concentrated most notably on matters of education and health and on providing their respective services and facilities. Other common CSR elements range from vocational training to initiatives to foster long term employment. The communication company Telenor has directed some of its CSR contributions specifically to persons with disabilities. It cooperates in its efforts with governmental agencies as well as with civil society and has developed various initiatives, such as NISE, NTCS and STEP. With its project Khuddar Pakistan, Telenor intends to meet the challenges persons with disabilities face with a very modern perspective:

We want to change the public mindset by creating awareness about their abilities. We want to help develop technologies that will give them the opportunity to actively participate in our society. We pledge to integrate persons with disability fully into our workforce. (Telenor Pakistan 2010)

Another initiative targeting this markedly underprivileged and vulnerable group of the society was undertaken by the Pakistan Telecommunication Company Limited (PTCL) in 2008. As part of the company's CSR strategy, PTCL sponsored, for instance, the World Telecom Day event in Islamabad with Rs. 6,8 Million raised – an event which followed the worldwide theme of “Connecting Persons with Disabilities”. They further announced the creation of “five academic scholarships per year for persons with disabilities so that they could pursue their career of choice by obtaining higher education at any university with Pakistan.” (PTCL 2009) Such contributions by private entities are based usually on a policy that argues for “giving something back to the society they operate in” (Asfar 2009). Moreover, it is increasingly expected and claimed by both the government and the society. Subsequently, more and more companies accommodate the calls for socially responsible behaviour. Indeed, some projects actually focus on persons with disabilities; but many of them are only or predominantly beneficial for *men* with disabilities. Women far too often remain excluded or simply forgotten, even within otherwise honourable efforts to include the vulnerable and underprivileged of Pakistan's society.

#### **5.2.4 Media in Pakistan**

The media landscape in Pakistan is a vital and complex one. It is highly diverse in languages and regions of operation. “To a large extent the media enjoys freedom of expression in spite of political pressure and direct bans sometimes administered by political stakeholders” and the military (IMS 2009: 14). The state owns one TV station, Pakistan Television Corporation (PTV), providing 6 channels and a radio network which operates over 40 stations. As with many countries, the private broadcasting media in Pakistan is regulated by governmental authorities. Private TV broadcasters and radio stations are considerable in number and some foreign programmes and channels are additionally available via cable TV (status of 2007, CIA 2010). Newspapers in Pakistan are the only sector solely in private hands, a fact that often enables them to openly comment on state performance and state authorities (cf. IMS 2009: 20). During the last years, the media has been perceived as more reliable and its impact in public has increased. Nonetheless, it should be noted that access to quality media information varies immensely between the sources and the location. One of the reasons for this is the influence of the ownership structure, which is dominated by three “media moguls, or large media groups (Jang Group, DAWN Group and Nawa-Waqt Group), which to some extent also have political affiliations. Due to their dominance in both print and broadcast industries all three media groups are very influential in politics and society.” (ibid.: 14) In short, the media in Pakistan can be described as a seminal actor within civil society for addressing peripheral

issues in the public, which is limited in its independence by the influences of existing power brokers. Nevertheless, Khan (2010) states that the media is increasingly active for oft-neglected groups of society, such as minorities. The TV channel GEO Pakistan, for example, has dedicated 51 percent of its programmes to women related issues. (ibid.) Thus, the media has the potential to act as a role model and to contribute to social change. Indeed, the power of the media in Pakistan should not be underestimated. The civil society takes more and more advantage of the opportunities that the media provides to voice their concerns. NGOs successfully gain attention for their work. They may, not without reason, hope to initiate and influence related discourses within broader society.

### **5.3 Are Women with Disabilities the Beneficiaries of Development?**

The theoretical framework for how the needs of persons with disabilities ought be met is considerably broad. On the international level, treaties provide common guidance towards social development for governments and civil societies alike. While the government's role in this relation was discussed earlier in this paper, the same question remains vis a vis the civil society. To what extent does the civil society and its actors meet the needs of women with disabilities? Thus, the aim of this chapter is to find out, how much space is given to women with disabilities in Pakistan's civil society. A consideration of the the spheres of activity that the civil society is involved in, can give some indication of this matter. In an examination of the organisations working with persons with disabilities given on the National NGO Database (GoP no year b), for example, it is striking that women welfare is the most often stated category together with disabled persons. In Table 17 it can also be seen that services for children receive attention above average. Another notable combination with disabilities is that with poverty. The confluence of disability-women-poverty is conspicuous. This implies two things: firstly, the fields of civil society activity confirm the existing gaps of governmental services; and secondly, it could indicate a more modern understanding of disability that takes interlinkages between social phenomena into consideration.

**Table 17 Fields of Activity Organisations working with Persons with Disabilities**

<i>Area of Activity</i>	<i>Named*</i>
<i>Women Welfare</i>	53
<i>Youth Welfare</i>	35
<i>Child Welfare</i>	33
<i>Education</i>	31
<i>Social Education</i>	16
<i>Patient Welfare</i>	12
<i>Rehabilitation</i>	11
<i>Beggars Welfare</i>	11
<i>Physical and Mentally Handicap</i>	10
<i>Health</i>	9
<i>Recreational</i>	7
<i>Family Planning</i>	7
<i>Poverty Alleviation</i>	7
<i>Poor People Welfare</i>	6
<i>Community Welfare/Development</i>	4

\*Times named beside Disabled Persons; Numbers are in Total;  
Source GoP no year b

As in chapter 4.3.3, which aim was to obtain a clearer picture of the focus areas of national institutions, the following calculation is based on the same four documents (AAA 2004; NOWPDP 2008; STEP no year; Telenor Pakistan no year) to shed light on the fields of activities of non-governmental actors as well as their target groups and disability types concerned. In total, 142 institutions are named. The categories given besides governmental institutions subdivide into 30 private initiatives, 48 DPOs, 24 NGOs and 11 international NGOs; while 29 institutions are not categorised. 36 percent of these institutions target persons with disabilities, 24 percent children with disabilities and the rest do not specify. The number of DPOs working with persons with disabilities, and private entities operating with children with disabilities, is notable. In 63 percent of institutions, the type of disability targeted is not specified. The remaining are divided in hearing, visual, physical, mentally and learning disabilities, with 12, 10, 9, 5 and one percent respectively. As shown in Table 18, the fields of activity are manifold. Many institutions are active in more than one field. Special education is where most institutions, particularly private ones, are active. DPOs are most engaged in counselling and miscellaneous services, followed by sports, welfare and awareness programmes, as well as legal rights, independent living and education initiatives. The activities of NGOs are more diverse. Their areas of operation have a focus on both rehabilitation and special education, and often aim at a great number of different fields at the same time. In comparison with governmental institutions, the civil society offers a wider range of activities. Though special education is likewise the favoured field, the variety of organisations and their fields of activity seem more versatile than the government's focus areas. On the basis of this calculation's results can be concluded that the demands and needs of persons with disabilities are not fully met by the government. Women with disabilities do not receive special attention in the civil society either, but that fact does not necessarily imply an exclusion of this group. However, it is obvious that these endeavours put stronger emphasis on men with disabilities. Different perceptions relating to men and women with disabilities are apparent from the corresponding discourse on this subject. Perveen-Hannesen (2010), for example, argues for a greater need for men with mental disabilities to be involved in education and training. Embedded in social and cultural norms in Pakistan, men with disabilities see their male relatives,

**Table 18 Fields of Activity Civil Society**

<b>Field of Activity</b>	<b>Number*</b>
<i>Special Education</i>	32
<i>Counselling and Misc</i>	22
<i>Rehabilitation</i>	16
<i>Training</i>	10
<i>Awareness</i>	9
<i>Vocational Training</i>	8
<i>Welfare</i>	8
<i>Sport</i>	7
<i>Education</i>	6
<i>Miscellaneous</i>	6
<i>Independent Living</i>	5
<i>Legal Rights</i>	4
<i>Artificial Limbs and Braces</i>	4
<i>Job Board</i>	3
<i>Development</i>	3
<i>Empowerment</i>	3
<i>Computer Training</i>	2
<i>Not Stated</i>	25

\*Times named; Numbers are in Total  
Source: AAA 2004, NOWPDP 2008, STEP no year, Telenor Pakistan no year e

particularly their fathers and brothers, going to work. As they themselves are unemployed, this results in lower self-confidence as well as a sense of tediousness. For women with disabilities, on the other hand, the situation is different, since they can be involved with and integrated in household activities alongside their mothers and other female relatives. But Perveen-Hannesen also indicates that it is often forgotten that persons with disabilities need friends and groups of people, with whom they can interact comfortably. This addition seems to be contradictory to the alleged greater need in regard to public engagement of male family members, since women need social interaction just as much as men do.

## **5.4 Donors in Pakistan**

Representatives of international organisations cannot really be considered part of Pakistan's civil society, since they work on behalf of their superiors abroad and therefore are tied to the policies and instructions of their agencies. In most cases, international donors focus on the funding and evaluation of programmes, while the implementation is carried out by other actors, mostly government entities or local NGOs. Moreover, many of the leadership positions of international agencies within local offices are held by Pakistanis. Within the main objectives set, an ample scope exists for local decision makers within these organisations to prioritise the allocation of funds. Therein reside the possibilities of both influence and space for participation. Although many organisations, especially the government and NGOs, rely on private and foreign donations, it is important to note that more than half the organisations within civil society draw their revenues from fees and charges, such as sales proceeds, membership fees and user charges. (cf. Baig 2001: 8; Ghaus-Pasha/Jamal/Iqbal 2002: 22) Nevertheless, it must be noted that while the motives behind activities, the means employed, and the targets of donations in Pakistan are various, they all show similar patterns. In this paper, I follow the ADB's (2002a: 19ff.) approximate division of financiers of development projects in Pakistan into the four major categories of religious, government, corporate and expatriate donors; but I add a fifth category, namely, international and bilateral donors. The first category is important due to the religious component of welfare within Islamic beliefs. Besides *Zakat* (offering to the poor), the compulsory Islamic charity, other forms of Islamic giving include *Sadqa*, *Khairat* (charity) and *Fitrah*; donations that are given primarily to individuals, but also to organisations, especially religious groups and also NGOs with a high level of social recognition, such as the Edhi Foundation. In 1998 religious donations amounted to “Rs. 13.7 billion or 20 percent of all giving in the country” (ibid.: 19). Based on the dominant Sunni Muslim perspective that the collection and distribution of donations are one function of the Islamic

State, a Zakat system was adopted in 1980 which puts a compulsory levy of 2,5 percent on selected assets, including bank accounts. Furthermore, the allocation of donations was centralised and put in the control of governmental institutions on national, provincial, district and tehsil level. (Mohammad 1991: 1119ff.) The corruption and misuse of these funds is a problem that should not be underestimated. One of the latest scandals in this regard was reported from the province of Sindh. According to an article in *The Nation*, there have been “financial irregularities in the disbursement of Zakat money during financial year 2007/08 of previous provincial government” (Chandio 2010). It was further revealed that “unjustified Zakat funds were also released to un-registered and ghost Deeni Madaris (religious schools) in Sindh by district Zakat committees” (ibid.). Unsurprisingly, there is a lack of trust in the government. Nevertheless, the government remains the largest welfare actor in Pakistan and therefore forms the second category as per the ADB. For example, the

National Council for Social Welfare has been playing a pioneering role in fostering the growth and development of NGOs and other humanitarian services throughout the country. NCSW is providing financial and technical assistance to NGOs. Budgetary allocation for NCSW during the reporting period is as under:

Year	2003-04	2004-05	2005-06	2006-07	2007-08
Budget in Rs.	9 842 000	12 013 000	11 938 000	14 919 000	19 384 000

Source UN 2009a: 25

Due to close cooperation with international and bilateral donor organisations, the government not only runs its own programmes and projects, but also hands down mandates and enters into partnerships with non-governmental actors on the federal, provincial and district level (cf. ADB 2002a: 25ff.). The corporate sector forms the third category of donors. As previously outlined, private enterprises operate their own projects but also serve as financial supporters of activities of various kinds. Specific figures are not available but with the current trends of economic growth, the tendency can be expected to be bullish. The fourth category consists of expatriate Pakistanis, who launch their own NGOs or fund existing civil society institutions and activities in Pakistan. (cf. ibid.: 36) The remittances sent home by overseas Pakistanis mostly from UAE, USA, Saudi Arabia, GCC countries (including Bahrain, Kuwait, Qatar and Oman), UK and EU countries make up a significant source of funds. Due to the global trend of falling remittance flows in the course of the economic crisis and the aim to “enhance the flow of remittances” through formal channels, the government together with the State Bank of Pakistan developed the Pakistan Remittance Initiative. “The monthly average remittances for the July-December 2009 period comes out to \$755.17 million as compared to \$606.67 million during the same corresponding period of the last fiscal year, registering an increase of 24.48 percent” (SBP 2010). For the whole fiscal year of 2009, the remittances to Pakistan even increased by 27 percent (cf. IBRD/WB 2010: 38). A more

institutionalised international cooperation is represented by category five. As mentioned earlier in this paper, with the growing collaboration of the USA and an increase in international and bilateral financial assistance, donor organisations became essential players within the development sector in Pakistan. International NGOs including Oxfam, Save the Children, Asia Foundation, British Council, ActionAid, CARE, Muslim Aid, and World Vision are active in Pakistan. International development partners, which support gender programming in seven key areas, are shown in Table 19, which illustrates that primarily multinational organisations are focusing on this field, with classical sectors of activity: health, education, economy, gender mainstreaming, political participation, law reforms and human rights. Some categories, such as sexuality that are particularly relevant for women with disabilities, are partly or fully neglected. However, organisations such as the ADB, which are also active in working for persons with disabilities, have a higher chance of considering women with disabilities within their programmes. The practical side of this presence of international donors can be described on the example of UNDP. Khan (2010) explains that UNDP Pakistan is very active in gender specific projects. In doing so, UNDP involves members of the civil society in their work plans, strategies and implementation and often operates in cooperation with private companies such as Caltec and Nestlé. These “stakeholders”, according to Khan, are “partners” (ibid.). Overall, the two major problems regarding the allocation of international funds for persons with disabilities are the lack of providing financial resources to initiatives that specifically target persons with disabilities, and the missing disability mainstreaming in existing development cooperation (Griffo 2007: 4). Fulfilling both, or in other words, following a twin track approach, is recognised as essential by institutions such as the European Commission. It can be summarised that the types of donors, their level of activity and their influence in Pakistan is diverse. Nevertheless, through the financial support they provide, they have become essential players in the development of the country influencing both approaches and policies.

**Table 19 Sectors of Activity International Donors**

Sector of Activity	Development Partners
Health and maternal child health	ADB, DFID, UNAIDS, UNFPA, WFP
Education	ADB, DFID, UNESCO, WFP
Economic empowerment	CIDA, ILO, SDC, UNDP, WFP
Gender mainstreaming	(GRAP and GSP) CIDA, DFID, SDC, UNDP
Political participation	CIDA, USAID
Law reform	SDC, UNDP
Human rights	CIDA, USAID

Source Development Partners Support for Gender Programming in Key Sectors, Source: Interagency Gender and Development Group (INGAD) matrix dated January 2007, qtd. in ADB 2008a: 43



## ***5.5 Consolidation: The Influence of Civil Society on the National and International Level***

As stated earlier, financial support from international agencies is one of the main reasons for the flourishing of the NGO sector. “Where previously the impetus for their growth was the absence of publicly available services, it has now been reinforced by a reassessment by the donors” (Khan/Bari 2005: 7). Hence, through interactions with other actors, NGOs are influenced in two ways. On the one hand, they follow the priorities of donors in order to generate more funds. Most organisations supplement the international and governmental agenda, by focusing on four major areas of concern: welfare, special education, rehabilitation and health. On the other hand, NGOs react to social issues that exist in their environment. Examples illustrating this two-fold preoccupation include microcredit projects and actions to prevent violence against women. CSOs, particularly NGOs and CBOs, are mostly issue based (cf. Khan 2010). Within the international development framework, the civil society, especially NGOs, have achieved a respected status: the perception of the role of NGOs within development cooperation has shifted from being primarily that of actors in project implementation, to being experts in their fields. Hence the civil society, particularly NGOs and DPOs, have on the one hand started to demand their participation, and on the other hand, have received more respect by decision makers, leading to an increase in their involvement in development activities.

The voices of people with disabilities played a significant role in the international push towards greater recognition of rights and in the development, design and overall acceptance of the CRPD in various countries throughout the world. Similar to other, nationally-based disability movements, this ownership has resulted in a sense of empowerment and reinforcement of the more relevant outcomes when ensuring all policies and interventions are based on the principles of nothing about us – without us (McClain-Nhlapo/McDonald 2009: 37)

On a national level in Pakistan, the idea of an active and participatory civil society is present, but in practice, its role is limited to selected areas and activities. Officially, the governmental attitude towards NGOs is indeed encouraging.

As part of the global village, Pakistan is cognizant of international norms and practices on various issues and concerns, and is obligated to take necessary measures to meet its international commitments sponsored by the UN system especially in cases to which Pakistan is a signatory, Government fully recognizes the role the NGOs can play in assisting the Government to implement the recommendations emanating from international consensus. (GoP 2002b: unpagged)

The government considers the inclusion of NGOs as part of its international commitments and follows this approach in all its policy papers. However, according to Baig (2001: 21), in reality “the role of civil society organisations, particularly development NGOs and advocacy groups in policy making and monitoring of the government, has apparently remained minimal.” In his opinion, an exception are faith-based organisations since they

have had a significant influence on policy drafting and generation. These are sometimes co-opted by the state in order to capitalise on religious sentiments and to legitimise their rule in the name of religion; and sometimes the street power wielded by such groups forces the government to accommodate such demands. (ibid.)

But Baig is only partially correct, because although their participation in the development process is limited in practice, there is evidence that NGOs have found ways to influence policy makers. One vehicle of such influence, the media, not only have power over information but have also been able to influence public opinion. “The role of media in changing society's view of disability and disabled people is vital but there is no tangible communication between the media and organizations serving and representing the rights of persons with disabilities” (NOWPDP 2008: 55). Although private actors and semi-public organisations do have the implicit aim to influence and shape their environment, they often do this in an indirect way. It appears that these institutions place more value on the quality of their activities than do governmental organisations and institutions. The size of private and semi-public institutions is usually much smaller and their financial and other capacities are limited. Nevertheless, through the power of sheer number and the multiplicity of goals and areas of activity delineated; and also because non-governmental actors tap alternative resources, such as volunteers or international funding, these actors gain a lot of publicity for their work and therefore can have considerable impact on the decision-making level. “For instance, there are huge, positive signs that women's groups and human rights activists have played a significant part in highlighting women's issues, focusing on Hudood Law and other discriminatory practices and encouraging the participation of women in local government” (Hakro/Talpur 2005: 8f.). In essence, the level of influence that civil society together with international agencies can exercise, was illustrated by ADB (2008a: 39) on the example of the MoWD:

MoWD is also under pressure because despite limited influence with other government agencies, its profile is pushed forward by public debate on many women's issues. There is also considerable pressure from development partners and foreign media to account for women's status in Pakistan. This pressure is exacerbating the demand for technical resources and expertise within the ministry that are simply not available.

One main hindrance to the inclusion of persons with disabilities, particularly women with disabilities, in these activities is not necessarily a negative attitude, but rather a lack of awareness and the adoption of inadequate approaches. This not only includes the government and civil society organisations, but also the people themselves. As Husain (qtd. in Blackburn 2008) says: “You all have a responsibility to help the government as much as they have a responsibility to help you. Teach them how to communicate with you. Learn to help each other. You have to let go of that helplessness and be assertive.” However, to encourage and empower women with disabilities to become active, certain preconditions have to be met. Hakro and Talpur (2005: 9f.) have summarised what the overall scope of the civil society's role should include:

- Every stakeholder should prove his commitment;
- Awareness is foremost: advocacy, information-sharing, fundraising, use of media, etc.;
- Civil society should formulate its own strategy and coalition to pressurise government to show its 'seriousness';
- Civil society can make a difference subject to the enabling environment provided by the government. Policy and institutional reforms are foremost requirements for the government;
- There should be strong and effective private public partnership.

After considering Pakistan's civil society, it can be concluded that private actors play a significant role in providing services in Pakistan, with an enormous number of community based initiatives. However, attitudinal changes and an awareness of social disparities and their negative effects on the community are insufficient and therefore, the fields of activity of these actors remain limited. Women with disabilities in many areas of Pakistan, do not have the means to generate or access information and services. Also within society, they are primarily perceived as receivers of support and addressed implicitly in current discourse. In essence, the needs of women with disabilities can only be met, when issues are articulated by the women themselves; but owing to socio-cultural factors, these persons are unable to voice their concerns in the public sphere and therefore development initiatives targeting them are lacking.

## 6 Conclusions

The primary objective of Pakistan's foreign policy is the protection of territorial integrity and national sovereignty. This necessarily includes protection against external threats and aggression as well as a strong legal focus on issues of organised crime, national security and domestic peace (FRD 2005: 21 and 27). The concept of human rights as an essential universally applicable set of provisions, puts the State in a position of legal obligation to comply with international law and by implication, significantly challenges the principles of national sovereignty. Such a challenge to Pakistan's strict conception of sovereignty as well as the strong national focus on security, results in little attention being placed on human rights related priorities and concerns at the state level. Pakistan's position regarding human rights instruments and the reservations made on the basis of security, portray the country's set priorities well. An example that is also directly related to this paper is the case of Pakistan's policy towards CEDAW and its subsequent signatory agreement. Pakistan declared that it “does not consider itself bound by paragraph 1 of article 29 of the Convention” (UN 2010), which reads:

Any dispute between two or more States Parties concerning the interpretation or application of the present Convention which is not settled by negotiation shall, at the request of one of them, be submitted to arbitration. If within six months from the date of the request for arbitration the parties are unable to agree on the organization of the arbitration, any one of those parties may refer the dispute to the International Court of Justice by request in conformity with the Statute of the Court. (ibid.)

Considering the problematic landscape of national security and stability that Pakistan manoeuvres in, it is natural for attention to be concentrated on the pressing bilateral and even multilateral conflicts the country is involved. As a result, Pakistan retains the prerogative of adopting laws according to its contextual needs and insists on its right to customise international treaties to its own conditions and perceptions. Problems of weak governance and a troubled internal situation that Pakistan undoubtedly has, may only partially serve as reason for the absence of the proper implementation of international treaties and their translation into national laws. Moreover, “[t]he excuse that Pakistan is a poor country is unacceptable in the wake of huge spending on administration and armaments building” (NCJP/DCHD 2007: 34). Officially, however, the government remains committed to the protection and promotion of human rights as agreed upon in international law. In the Guiding Principles of the National Policy for Persons with Disabilities (GoP 2002a: 5), it is indeed stated: “The constitutional guarantees and accession to international instruments on human rights, as the reiteration of the Islamic principles of justice and equality.” In fact, the government has undertaken some serious steps to implement and integrate international treaties, particularly those that come under the human rights umbrella. Ostensibly, concordance

between the international human rights framework and the Constitution of Pakistan exists; it seems that the fundamental political principles represented on an international level are already stipulated in national legislation. A closer look reveals that this perception is indefensible in reality. The equality of women and men, for example, which is one of the most frequently mentioned facets of fundamental human rights, is set forth in the Constitution itself, but lacks implementation on the ground.

Returning to the first hypothesis of this paper, which claimed that *unless international treaties are shaped according to an inclusive approach, they will contribute to a solidification of exclusion on domestic levels*, it can be said that international treaties themselves fall short in meeting the requirements for gender equality and persons with disabilities, as suggested in chapter 3. Inadequate national approaches are sometimes the result of this failure, even if formulated with the best of intentions. Moreover, in Pakistan, certain topics, especially those considered sensitive, are rarely included on the political agenda without the pressure of international players and legal regulations, and even then, measures are enforced slowly and only partially. One example of this is the CRPD from 2006, which is still far away from being ratified and implemented. In close cooperation with international organisations, action plans and programmes were developed with the aim to improve policies and their implementation. Throughout national policy papers, references to specific agreements from the international agenda are made. And indeed, rudimentary, but constant adaptations to existing policies can be observed: while health, education, as well as social, economic and vocational needs were the main areas of the NPPD, the focus in the NPA for persons with disabilities was completely different with access, inclusion and equalisation. It is noteworthy that in the main policy documents regarding women, children and persons with disabilities in Pakistan, violence against women has become a prominent topic. As a matter of fact, linkages between different policies have increased and improved in quality. However, the adaptation of policies into concrete practical strategies for Pakistan on the whole remains insufficient. For instance, the government has recognised the disadvantages faced by women living in rural areas and has signalled that it will be initiating programmes to reduce those hindrances, but barely any concrete concepts and initiatives were actually developed accordingly. Moreover, the little actually taking place in terms of implementation, lacks consistency; and the priority areas of national documents generally do not reflect the provisions set forth in corresponding international treaties. In short, no sustainable strategy in the policy structures can be observed. Despite these inconsistencies on the policy level, additional problems arise at the level of implementation:

Firstly, the institutions responsible for policy implementation often remain inefficient, as they can only build upon a weak regulatory framework in their operations. Secondly, despite having recognised the important role of civil society, these institutions do neither have the will nor the knowledge or capacity to include its actors in their operations in practice. Hence, a critical issue in implementation processes would be to strengthen cooperation with and inclusion of such stakeholders in programmes. To a certain extent, all policies and programmes have indeed incorporated a variety of actors such as private entities, media and NGOs, according to their respective sphere and scope of operation. Unfortunately, this approach remains primarily theoretical, and results in fundamental problems on the ground. Thirdly, coordination and communication *between* different governmental agencies, but also between state actors and the civil society is extremely weak and uncoordinated. Fourthly, the number of actual facilities and projects as well as the provided funds and resources bear no relation to the estimated needs of the affected population. Lastly, marked spatial differences can be observed in regard to the efforts of different provinces, as well as between urban and rural areas within these provinces. As has been shown previously, the government predominantly becomes active in the areas of gender and disability with the support and involvement of the international community. International donors contribute to national and local harmonisation efforts. An example in this respect would be the UNDP's Gender Support Programme for harmonising gender mainstreaming. Furthermore, the Pakistani government has also started to promote community-based rehabilitation (CBR), when working together with international actors such as UNICEF, to establish outreach programmes and to provide services in the areas of health, education and rehabilitation (JICA 2002: 14). This fact holds implications for the second hypothesis guiding this research: *The implementation of treaties by Pakistan's government will not be actuated without stimulation either from the international actors or from the civil society.* On the part of international bodies, this influence and stimulation can be confirmed; the civil society on the other hand, can only partially be considered a promoter of governmental activities, because the political engagement is limited, as outlined in chapter 5.2.

Since there are a great number of innovative projects carried out by private actors and the civil society in Pakistan, it was essential for the objectives of this paper to analyse these efforts for the improvement of the situation of women with disabilities in the country. In recent years, NGOs and the corporate sector have become increasingly active in contributing to environmental and social development. By “providing social and economic services, they also became more active in setting the development agenda” (Khan/Bari 2005: 8). It should be noted, that most of these organisations only survive because of female volunteers working for them without pay. This emerging civil society that aims to fill gaps left open by the state, doesn't see itself as 'political'; but considering its

agents' objectives, it can be confirmed that those do aim to influence their surroundings according to their own social policies. In this regard, some of them, particularly the media and NGOs, tend to refer to the agreements and obligations that Pakistan has committed to on the international level. This rationale is often used to highlight governmental failures in complying effectively with international standards. It remains unclear, however, how successful such references are in effect, when it comes to influencing the political agenda. *The international politico-legal framework* can therefore only be partly considered *the primary instrument used by the civil society to pressurise Pakistan's government to take action towards reducing inequalities for women with disabilities*, as stated by the third hypothesis.

In chapter 2.2.2 of this paper, I outlined the crucial aspects that need to be considered in relation to women with disabilities in Pakistan, namely attitudes, rights, advocacy, leadership and political participation, education, employment and economic development, mobility, family life, health, sexuality, reproductive rights and health, as well as violence against and abuse of women. In the course of this paper, I have shown how these are reflected and met by development players only to a limited extent.

One of the main issues hindering developmental improvements for women with disabilities remains the *societal attitude*. According to Zara Husain, in Pakistan, there is a “paternal attitude toward people with disabilities” (Husain qtd. in Blackburn 2008). This results in the trend to “pity them and they help give them hearing aids, but they don't encourage them to do things on their own” (ibid.). The international level has recognised that a change of such mindsets is essential to achieve substantial improvements for the group under consideration. Several treaties include articles pointing towards the need for such an attitudinal shift. The government of Pakistan has also made it very clear in its national policies that such change is indeed essential. For this purpose, the media is conceptualised as the key intermediary: by being more sensitive towards women with disabilities and by fostering a positive image of them, the media can contribute best to attitudinal changes in Pakistan's society. Actors within the civil society involved in this area mostly share this perspective. Several private actors and organisations actively challenge discriminatory policies and the underlying mindsets by running various awareness raising campaigns. Needless to say, due to the limited scope and resources of such initiatives, the overall attitude remains essentially the same: *patriarchal*. To date, there is little awareness or interest regarding women with disabilities and their particular needs.

This attitude also continues to impede the enjoyment of equal *rights* for women with disabilities in Pakistan on the whole. The policy framework in place provides certain means of protection and support for women with disabilities. However, the mentioned issues of implementation as well as the limited access of women with disabilities to information hinder its enforcement. Moreover, the lack of financial and advisory support, limit its effectiveness.

There is no state system or institution to provide information and guidance to women about their rights and ways to seek judicial redress and provision of legal assistance. Unnecessary delays in the conclusion of trials in civil matters, inherent in criminal trials of issues relating to life, liberty and freedom of individuals and hostile court environment discourage women to pursue judicial redress.” (NCJP/DCHD 2007: 14)

Poorly trained court personnel and executive agencies further contribute to the weak performance of anti-discriminatory measures. Generally, legal adjustments have been shown to be weak and not committed; adjustments have been ineffectual, or in other words, not strong enough to combat inequality before the law. For example, the

Muslim Family Laws Ordinance (1961) contains discriminatory provisions (e.g.) a marriage certificate requires disclosure of the marital status of the bride only. A man can **divorce** a woman without proving and disclosing the reason, whereas a woman wanting divorce has to file a suit and to go through a **legal procedure** for getting a divorce certificate. Rights of divorced women are not defined under any law and a woman seeking divorce has to return to the husband the bridal gifts (Mehr) which limits women's rights to divorce. Women are not considered qualified to have the **custody of children** below 18 years of age after the dissolution of marriage. (NCJP/DCHD 2007: 9, emphasis in original)

Repeated promises in national policies and by institutionalised agencies, to review and revise existing laws and to suggest new policies have remained merely a lip-service. The treaties, lacking effective implementation, also continue to be incongruous. Another reason for this inaptitude to meet the challenges of women with disabilities, is the deliberate exclusion of precisely those, for whom the laws are allegedly designed, in the formulation of the legal text and the formulation process of legal policies.

Much needed *political participation, advocacy and leadership* are also limited to paper in Pakistan; particularly, when it comes to women with disabilities.

There must be an understanding that an airing of differences in perspectives and opinions are an essential part of a dynamic society and necessary for good governance. Debates need to be encouraged to maximize overall understanding and so that policies and schemes are formulated on the basis of the widest possible information. (Shaheed/Zaidi 2005: 10f.)

The promise to grant political participation in decision-making processes is well integrated in policy papers such as the NPA for women and the MDGs in Pakistan, but this commitment remains lip-service. Attempts to resolve this matter need both the support of official entities as well as the engagement of the civil society to seize and claim participation for women with disabilities. “In particular, disabled women [...] need to understand the gender perspectives of the problems they face, and to work towards their right to equal participation in the policy-making and management



activities of [..., respective, S.A.] organizations” (UN ESCAP 1995: unpagged). In other words, in theory, these realisations exist, but their implementation lag far behind.

A second major area of concern for persons with disabilities is *education*. Notably, 'special education' is the best developed sector in Pakistan regarding persons with disabilities. Apart from the fact that the number of institutions and their quality are inadequate, the majority of initiatives that are designed to improve the situation for persons with disabilities are concentrated within the educational sector. While persons with disabilities generally face discrimination and hostility in Pakistan's everyday society, girls are affected to an even greater extent. Their enrolment to educational institutions is usually limited. Besides the difficulties faced by women within their own social environment to raise awareness for their needs and demands, it is also a lack of interest shown by civil society actors and the development sector that aggravate this problem. Institutions are open for girls, but due to discrimination, disinterest and lack of awareness, the participation of girls in education is severely hampered, and particularly girls with disabilities face even greater barriers to gaining the required skills for a self-determined future.

Consequently, the *employment* situation for and the *economic development* of women with disabilities is even worse than it generally is for women in Pakistan. Women with disabilities have extremely limited options and usually end up doing labour-intensive and poorly paid activities such as weaving, sewing, basket making, assembling toys and producing handicraft items. “Women are contributing actively in the National economy but are denied of **adequate protective labour laws, equal wages** and recognition of the value of work in economy” (NCJP/DCHD 2007: 8, emphasis in original). The physical environment at workplaces is a serious obstacle for any attempt of women with disabilities to get paid labour outside their homes. Considering the troublesome status of actual policy implementation, it is needless to say that the realisation is very slow. The government is offering work preparation training in some of its institutions and since 1981, has further tried to enforce a quota for the employment of persons with disabilities in private establishments and governmental bodies and institutions, inter alia by offering incentives to employers, but has so far failed in achieving any significant results.

The same is the case for transportation and *mobility*. As the government has itself admitted; “[p]ublic transport is still a barrier for Persons with Disabilities. No progress on this issue has been possible however government is committed to address the issue through advocacy” (UN enable 2007). Small projects to improve local infrastructure are being implemented, but no changes in the overall structure of transportation either in the cities or rural areas of Pakistan are foreseeable in the near future. Poorly developed public transportation will therefore continue to be a restriction for women in the public sphere and in many cases an insurmountable obstacle for accessing health care,

paid work and education. Unsurprisingly, the lack of mobility and means of transport remain one of the main problems for women with disabilities.

The rules of as well as the habits and routines pertaining to average Pakistani *family life* are much determined by the mindset of its members. As elaborated above, in Pakistan, a patriarchal and religiously conservative mindset is most dominant. The low status ascribed to women within this hierarchical social structure makes it nearly impossible for women with disabilities to live a self-determined life. Most crucially, this includes decisions regarding their own relationships, marriage, motherhood and parenting. Surprisingly, the government started as early as with the National Policy for Advancement and Empowerment of Women (2002) to address the domestic sphere, but “[n]o specific law on **domestic violence** was enacted” (NCJP/DCHD 2007: 8, emphasis in original). Again, the attempts remained ineffective and the domestic sphere continues to be considered a private matter with all the consequences that follow this notion.

*Health* care in Pakistan does not meet the needs of the population at all. The inadequacy of the system to appropriately treat seriously ill patients results not only in an overtly high mortality rate, but also in higher rates of long term disabilities. Thus, the health care system itself increasingly 'produces' cases of disabilities; moreover, it is primarily inaccessible for persons with disabilities. Limited mobility and family restrictions particularly hinder women with disabilities in receiving even the most basic health care. Although the government considers health as one essential area of activity for development, it fails to countervail these restrictions.

A Health for All policy was launched in 2001 but the government run programs were insufficient to improve the health conditions for the citizens in general and women in particular. A majority of female population was **anemic, malnourished**, and many died every year in pregnancy due to lack of basic medical care. **Paucity of health services** especially in rural areas results in higher mortality rate. Lack of trained practitioners in government health units, stereotypes against **family planning**, added to deteriorating health conditions. (NCJP/DCHD 2007: 8, emphasis in original)

Just like most other areas of concern outlined in this paper, health faces the issue of isolated examination. This is problematic because “[p]aying attention to contextual factors” would help “in understanding the role of the state, society and market forces influencing health agenda building, health planning and implementation, and even more important health outcomes” (SDPI 2008: 53). The difficulties faced by persons, especially women, with disabilities in accessing proper health care are further aggravated by the lack of knowledge regarding their specific conditions and needs, as well as by untrained and inexperienced medical staff.

Since *sexuality* is in general, a societal taboo in Pakistan, it is unsurprising that women with disabilities are seen *completely outside the bounds of sexuality*. Due to the notion of sex being a general taboo in society and a pejorative attitude towards women with disabilities, these women are exposed to a much higher risk of sexual abuse. The government of Pakistan has adopted various

measures to reduce the abuse of women, but the *reproductive rights and health* for women with disabilities do not seem to be a concern even at the governmental level. Since this is a highly sensitive topic, it remains unclear, whether and in what way, it could be addressed in future at any level, be it internationally, nationally or locally.

An interconnected and interdependent issue to the neglect of sexuality, increased risk of *abuse* and general devaluation of women and persons with disabilities is that of *violence against women* (VAW). Again, discriminatory attitudes towards women and their inferior social status deriving thereby, allows crimes against women with disabilities to remain unprosecuted and unpunished. “The government of Pakistan failed to institute concrete policy reforms and mechanisms to curtail social practices sanctioning violence against women” (NCJP/DCHD 2007: 8, emphasis in original). Police and courts treat violence against women often as a domestic dispute to be solved in the strongest institution of Pakistani society – the family itself. Legal regulations, allowing the perpetrator to be exonerated from his crimes in law, if the victims' family simply “forgives” him, contribute to this attitude. If the perpetrator is part of the family itself, as is the case in many incidents of domestic violence, such rules are a farce reducing the law to an absurdity. Religious interpretations, serving the interest of a patriarchal, oppressive social understanding, are often accepted as justification for acts of violence against women even in courts. Nevertheless, VAW is the one area that is addressed by almost *all* policy papers regarding women and persons with disabilities. Indeed, even the public has shown great concern regarding the issue.

Stories of chopping off women's body parts, dishonoring women in public, acid throwing, stove burning and other forms of violence are highlighted by the press and the electronic media as sensational issues but very soon such issues die down without an official response in terms of a long term policy. (NCJP/DCHD 2007: 22)

Despite the observed awareness of the general public regarding the issue of women falling victim to violence and becoming disabled, neither concrete action against these trends nor a reduction of such incidents could be observed. Overall, “[v]arious government bodies assigned to redress the situation failed in their job and to make public an authentic data on violence against women” (NCJP/DCHD 2007: 22).

In conclusion, it can be maintained that, for a population of over 170 million (CIA 2010), the actions and activities undertaken are “extremely insufficient and slow” (NCJP/DCHD 2007: 22). The situation is unlikely to change in the near future. But despite all the challenges identified, today more women and persons with disabilities have access to education and employment than in previous years. There is increasing pressure from the civil society, demanding a change in social politics that may positively affect women with disabilities in the long run. Critical remains how

women with disabilities are integrated on the international, national or local levels, but also whether an inclusive approach is followed. In short, it can be said that information, awareness, organisation and mobilisation are essential components for achieving the considerable and democratic participation of women with disabilities in collective decision-making processes (cf. Kabeer 2005: 8). It certainly needs “more effective enforcement and expansion of social assistance and social security programme under the provisions of existing laws” (NOWPDP 2008: 49).

This paper has attempted to show the extent to which the international politico-legal framework of development cooperation affects national activities relating to women with disabilities in Pakistan. While specific legislation for this category is limited, this research outlines how instruments regarding women and disabled persons are relevant to actions for women with disabilities. However, it is obvious that with existing problems of societal mindset, infrastructure and discourse creation, women with disabilities in Pakistan will continue to face many adverse challenges. As Faris Mughal (2009) states, “it is imperative that we begin to take the disability rights movement to the next stage, to strive for a higher level of inclusivity”. With regard to Pakistan, the disability movement still lacks crucial gender specific development, and it is in this area that further research needs to be conducted and that greater emphasis should be placed on the implementation of programmes for women with disabilities.

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## Appendix I: Interview Transcript 1

***DIPLOMARBEIT. Overcoming inequalities.  
Women with Disabilities in Pakistan. University of Vienna.***

### Interview Transcript

<b>Interviewer:</b>	Stefanie Andruchowitz
<b>Narrator:</b>	Barak Ullah Khan United Nations Development Programme (UNDP)
<b>Date and Time:</b>	08/06/10 Start 11:22, break: 11:29, restart: 13:32, end: 14:00, 35 minutes
<b>Place:</b>	Narrator's Office UNDP Office Lahore
<b>University:</b>	University of Vienna
<b>Prof.:</b>	Dr.in Silvia Michal-Misak
<b>Date completed:</b>	30 September 2010



Persons present: Stefanie Andruchowitz  
Barak Ullah Khan

Stefanie: Please give me a your name the organisation that you work for and the position that you hold.  
Barak: A my name is a Barak Ullah Khan and I am working for UNDP, United Nations Development Programme. And a, I am heading the like a... Provincial Project Manager for the Gender Based Governance System Project. And a, I am overlooking the operations on the provincial level.  
Stefanie: Aem, how would you judge, or what's your opinion about the status of women in Pakistan?  
Barak: The status of women, for a women in Pakistan is concerned they, the, it varies as per area, class and the race to which they belong. It vary from very worst to developed divisions, but when we say it, overall, then ya, there is need, it is a lot of work is to be there.  
Stefanie: A lot of work has to be done  
Barak: Ya, has to be done, ya  
Stefanie: Ahm  
Barak: Overall if you consider it  
Stefanie: What do you think are the worst or the most urgent problems? [door/not understandable]  
Barak: Well, as far as the women are concerned, education, health, mobility, they are the common problems everywhere  
Stefanie: You think they are the most urgent  
Barak: ya, ya, they are the most urgent. And as far as a, like,a, when we talk about the education, at ahm the rural areas, there maybe the missing facilities. There is no facilities for education, or there is a ahm, a facility of education is there, but the family circumstances maybe that it is better that the girl works, rather than go to school. She is more productive in working.  
Stefanie: A lack of facilities and a lack of support  
Barak: Lack support, family support, ya or societal support if you want to call it, that is missing  
Stefanie: So its also the community then?  
Barak: Community, ya  
Stefanie: Ok.  
Barak: And when you talk about the education, a health ya facilities may be there, but there are the cultural constraints, and that women are not open to talk about their health.  
Stefanie: Mmh.  
Barak: Ya, even she has like a specific problem or she had some disease like that, she may, she can talk to um, her mother, or she maybe talk to her friend, but she will not be able to communicate it to some male member in the family.  
Stefanie: So is that... like, if what?  
Barak: Aeh like, if somebody is suffering from the breast cancer, or something like that. Ok, the word breast, maybe, so mh, ahm not acceptable you can, female say something about her breast or she talks about like that, so that thing maybe harder, because when second person reports it or third person reports it about somebody else then the situation would be very different. And aeh, like in rural areas if you go, there maybe not somebody who is specialised for that disease.  
Stefanie: Mmh.  
Barak: In ok, in cities, when you come to the cities, it maybe that the doctors are there, the specialists are there, and you would talk to them and aeh, like when if some woman is having problem in the village or something like that, then the mobility she has to move to the city, to consult that and ok, how many times, or how much she can afford. That's a big issue of the mobility. You know, coming to the city may cost something like aehm maybe it cost maybe like aeh, you can call it like somebody is like two hundred kilometres from Lahore and so she would have to travel to reach the specialist. Travel 200 kilometres, spend a day and go back, and then she would have to accompanied by somebody, some male member or female member so... if it is a male member, than he will take a day off from work, and aeh, how long they can afford, when it comes to five, six visits to a doctor or something like that, ok, and then there is a loss of family income as well, so that creates a problem.  
Stefanie: Then there is an issue.  
Barak: Ya and similarly, I am talking about the mobility, ya, there are no... nobody facilitates travelling

by the women, ok, how many people own a car in Pakistan? That is a very eh, very serious issue. And then when you use the public transport, and then like you can call it 15 to 20 percent of the transport is reserved for the women, other 80 percent is there for the male. And aeh, so it becomes difficult to move and then like, she is not welcome outside. And uh, the harassment she goes through, like people staring, or she is aeh somebody just say it good or bad words, she is looking beautiful or something like that, so that comes into...

Stefanie: So, you basically also said, that there is a difference between the rural and urban women

Barak: Yes.

Stefanie: Like the rural would face far more difficulties

Barak: Difficulties, yes

Stefanie: So the situation there is worse

Barak: there is worse, because in urban areas, like people are concentrated on the few cities and then there you have the facilities, you have the schools, you have the health centres, you have specialist doctors, ok, you have like you have the buses, you have the rickshaw, you have the taxi's, you have the public transport, you can walk, you have law and order. The worst thing is, ok law and order. you know, if you say it ok there will be some policeman or somebody watching or if something happens, it could be in Lahore, [not understandable...you call it,] no the rest 122. They can reach anywhere in 11 minutes in Lahore. And this you cannot say it in the rural areas. If something happened, if it is reported, if rescue goes, it will take like very long time, it will take a very long time, but when you consider it, like when you talk about the national at national level or the national development, then each and every individual whether she is in some rural area, far off village, educated, uneducated, everybody counts. So the population at the eh, rural area is more than, if you go to the exact statistics, I might not be wrong, like they just 70-30 rural-urban divide. So if the 30 percent have the recourses or they are, they can reap the recourses, that's a different thing. But what about the other 70 percent of people?

Stefanie: Mhm. What do you think are the main hindrances like the aeh, impediments of equality for women and men in Pakistan?

Barak: This is paradox, you know, when it comes to the hindrance, when we go to the religious level, or something like even at the community level, like we talk about in India or some other people in the region, they, they will have a abortion if there is a female child. That trend is very high in India. But when it comes to Pakistan, and specially to the villages, especially to the cities, and even in the villages, female is never considered uhm, bad, female child, so there is always saying its a blessing of the god. It has never happened [interrupted]

[break] [break]

Stefanie: Ok now, so we have been talking about women being like not equal with men and now the question that I have is what are the main ehm, strategies of, like, in general, how to meet that problem, or how to make women more equal?

Barak: Government of Pakistan is signatory to different international protocols and eh, like CEDAW and they have National Plan of Action and even they have at the provincial level a gender reform action programme called GRAP. We have the ministry and Departments on provincial level, we are working on gender issues

Stefanie: Mhm.

Barak: Even now the government has the gender specialist at district level, who work with the CCOs, District Coordination Officers, and other departments and towards gender integration or they look into the aspect of gender into the new project, like they members of, a, District Development Committee, and the committee that approves the project. So government is doing its bit of, its bits and pieces and even with the more educated females, and a, children and the media, coming up very proactive for the rest of ehm, like the people who are neglected or people who are from the minorities, media projects them.

Stefanie: So the government is working with the media?

Barak: No. The media is independently working.

Stefanie: Ok.

Barak: Because it gives more time, more attraction to the people who are in neglected, or who are in the minorities, or the issues that need to be taken up, like we have the very famous ehm, TV channel,

Geo. ya. They have like 51 percent programme, so many on the women. They say it. Ok, they are 51 percent, and so their issues needs to be checked. But a, when it comes to the grassroot at the very... You can call it at the rural level or at the home level, or at the ehm, ehm then the female face the problem for access to decision making, access to resources, economic activity, or even, like, even if they are earning, and they have their own money, they may have the family pressure to spend the money on something like that and they may do not have the independence to enjoy whatever they are earning.

Stefanie: So, but you said that the government is doing something, but what exactly are they doing? They are trying to, ehm, they have eh, have more specialists now working in this field now? Or working for women equality?

Barak: Ya, they have.

Stefanie: They place more women in these positions, is that true as well?

Barak: Ya.

Stefanie: Do you think these are the main things the government is doing right now?

Barak: Ya, and it is even encouraging civil society organisations to come up and play the role

Stefanie: Is it?

Barak: Like Aurat Foundation we have and CCHD, you were working for, and they are all doing this.

Stefanie: Mhm, and so, who exactly stands behind those policies in Pakistan?

Barak: It is the Ministry of Women Development, and they are the major actor behind everything that is happening to.. for the women. And then this aspect is integrated into the different policies, different departments as well, as like Ministry of Youth, they have their own like they also tackle the youth, female youth, and when it comes to the education then girl child is also taken care and when it comes to the health department, then mothers health the new born baby's health, that is also taken care, ok because if it is a boy child, then everybody at home will take care, take care of him and will all ready to pamper him or blabla like that when it comes to the girl child there is also attitude ok, we have a simple like example if you cook a chicken, ya, so... the boy will get the best piece of the chicken, and the girl might get the worst part. Or, it happens like this, ok the boys are the gentlemen will get the best part, or we have like the habit the males will eat first, and then the females will eat. So you know, the portion that has been consumed maybe the, is always or is maybe the better than... boy gets the first choice, he gets the better thing. [laughs]

Stefanie: Ya, but the , aehm like if basically that the theory or the, the reality of the policy that it is implemented in all the different ministries?

Barak: Ya.

Stefanie: Is that a theory or is it also in the reality the case?

Barak: No, it's in reality also ya, ya... No the female literacy rate, they have gone up and there are female enrolment has gone up. Like normal has a start rate Rs. 200 per girl child, they go into, they go to the schools, so the education till tenth grade is free in Punjab,

Stefanie: In Punjab now

Barak: In Punjab. In Pakistan also I think, ya if you attend a government institutes, then its free, so in addition you get the free books... not the uniform but the female child in districts and some areas, they also get a Rs. 200 stipend as well.

Stefanie: But are there enough school, because you said the governmental schools are free, are there enough school to cover all the girls, or all the children?

Barak: I think they, their number is good, but the people actually want, ok, good education, quality education then it comes that they tend to go to the private schools, and anybody who can afford, they can do it, but education is happening and it is not changing the scenario and female education is the focus, whether it's like aeh if you go into the statistics of aeh the number of girls in medical collages or women in medical colleges, getting medical education, becoming doctors, or in like in engineering Universities they are greater than the boys.

Stefanie: Ya, but these are uh, don't you think there, these are exceptions?

Barak: They are the exceptions, but ehm, they are working. And the trend is, ok, whether one is educated then they become a part of the labour force. Then there is another issue. The girl becomes educated and she has been, like knows everything, skills blabla, but can, when she is married to another family they allow her to work? And then... that's where the things go wrong. The female gets MBBS, she is Medical graduate, but she will not be working. She is like home

planner, but she is not working. She is staying at home. So basic is the orientation of the family or something like aeh in the society that is happening. But aeh, a forced thing on it is the economic reality. Economic reality is like ok, if you are living in a city, you have to have a high costs. So if one person is earning, it will be hard to meet the both ends , but when the two of them are working, like she is educated but she was not working before, but now the economic realities have changed. It is the cost have climbed, gone up , so both of them will start... and this pressure, economic pressure is resulting in women, more women coming to the work force.

Stefanie: So there is a uh, change of trend?

Barak: Ya.

Stefanie: Ok, but in the policy making who do you think can also have an influence beside the ministries and the governmental actors. Like what about international organisations and international donors? Number one

Barak: Ya, ya.

Stefanie: And the second, what about civil society? How big can their influence be and is there an influence out of your judgement?

Barak: And in fact uh, gender is seen or perception is that gender is donor driven and

Stefanie: Mhm.

Barak: Ya...That's very strong perception. All over the country

Stefanie: Do you think its true or not?

Barak: It is... true in a sense, that aeh that gender is a major component of all the donor agencies. And this is like uh, integrated theme as well. Even if the project is for any kind of development activity, they integrate gender into it. Ok, if it is health how many males, how many females? If it is uh, like aeh road, aeh economic empowerment, ok skill building, how many females will be using it, how many males will be using it? So when it comes to the donor agents, they take specific care of it and aeh, the international conventions the government has signed, and National Plan of Action, that makes it compulsory for government to take certain steps.

Stefanie: Does that, do you think they have an effect on the government.

Barak: Yes they have. They have. I can't talk about the complete, what they have, but actually you have to take care, you have to like report on the field of implementation. What have you done on the CEDAW? So, donor agencies, like UNDP we, in Punjab, even in the cities, in Lahore we have four projects working, Like gender governance systems into capacity building of the government functionaries and political office holders and we have alternative gender justice through that is on alternate that looks from the aspect of the female and when, then we have the Genchrome? that is targeting women in the garment industry and how their skills can be built how they become the more, more capacity, their capacities are enhanced so they are working. And then there was a Caldec? That we recently UNDP closed, so they were giving the credits to women in dairy industry. Who were rearing up the cattle and other things .. and they increase to the family, family income. So, like, UNDP, they are into the gender, very specific gender projects. And aeh we have aeh like international NGOs working directly into this, into, on gender and they are working also for the counterparts. Pakistani NGOs. So there is two kinds of activities.

Stefanie: So the International donors work with the NGOs and the government and they also can influence the, the governmental decision making by international treaties.

Barak: Yes, Like my project, when you talk about, I have a steering committee and I have two civil society members. Ok, when it comes to the approval of the annual work plan, strategies, implementation, they have their say. They come and they can, ok, I, they give them suggestions and we implement it, like I was talking about the GENPROM? Then university of, uh, government college university Faisalabad is implementing it. So and uh, like uh, Caltec? Nestle was working with the UNDP and in Punjab, and in Sindh and ?

Stefanie: So you are also working with the corporate sector?

Barak: Corporate sector also, yes. So they have also that aspect when it comes to the UNDP, otherwise its integrative to everything

Stefanie: So the the corporate sector plus NGO sector is integrated more into the governmental work because of the international donors.

Barak: Yes.

Stefanie: So they bring them in basically.

Barak: Yes you can call it the stakeholders or they are the...partners...

Stefanie: So that's how they can influence... what about direct ahm, influence by NGOs? How is the interaction with the government? NGO or civil society...

Barak: Ahm they are working. In like GRAP I told you, the Gender Reform Action Plan, they are working with the civil society. It's actually at the government level, and ah, as far as civil society is concerned, they are issue based. Ya, issues, ok, somebody's taking up the microcredit issue, somebody is taking up violence against women. So they are issue based, and whenever the things come out, or there is some, like violence against women incident, then they become proactive.

Stefanie: Ok, so it obviously depends on the topic itself. So there is no like, strong civil society which is watching the overall action of the government

Barak: Yes, that is uh, lacking. They are just like incident based or or issue based.

Stefanie: Does this mean they are not political, what would you say?

Barak: They have their own agenda.

Stefanie: But they are still political, in their way.

Barak: Yes, ya. Because even you know, there common perception is, that the certain NGOs or human rights organisations who act the female issues, they are anti-Pakistan. Because when you portray it, ok, somebody has been thrown acid on her face or something like that, when you portray into the international media or rape incidents or you blow it up, and then they, people, government people also perceive them as anti Pakistan, they are working for, they are bringing bad name to the country as well. Ok, they should just discriminate between what should be portrayed, or, ok, there has been an incident and the incidents happen everywhere. but they should not be blown up or given like a picture, oh, everything is bad. Like the, you are working here and there may be the hundred incidence happening around in the country or something like that, or it may be the perception that ok, the, Pakistan is not good for the foreigners, visitors or blabla. And your personal experience, would be quite different. Ya, and like projection in the international media is always different to what the things are here.

Stefanie: But what is the international media based on? That's the question. So where's the problem? They, are they making this up?

Barak: I don't...uh..there is a perception about the NGOs ok, they make money for projecting, projecting different things so, this is what is common perception and uh, they have to like uh, and common conception is they have to look at the countries image as well, they should like, image should not be distorted.

Stefanie: Mhm.

Barak: Ya. (Pause)

Stefanie: That's the responsibility of the international media?

Barak: Ya, they should uh, go into the details, before like, they should authenticate it, they should verify it, other than projecting like things. We had a very famous video, a lady being beaten in Swat, you would have seen it on the YouTube or uh, everywhere and it was projected on the tv and something, and later on, it was proved to be wrong... That it was a film making, actually that was, that has been proved that it was film making. And now the wrong that has to be done on the reputation, that has been done. And you cannot have a 5 column story, when it happens something wrong, uh, it is true or untrue and when it comes to acknowledgement that it was not true then a backpage, one single column, three liner...it happens in the media [laughs].

Stefanie: Ya... on the other hand reports show that uh, its not, like not even a half of the incidents are reported. So that is the other, the other extreme...

Barak: Ya, ya. That is the other way, ya.

Stefanie: But back to the policies. Which do you think are the most important policies right now for Pakistan? Which are the most effective and uh, also like in relation to implementation, how do you see it, towards gender equality...towards...?

Barak: I think the ehm, the education being compulsory for tenth grade, it would be um, major breakthrough.

Stefanie: That's not the case, you mean if that would happen...

Barak: No, that is there. But now it comes to the implementation. You should make it a law that, ok if somebody don't send his child to the school, his or her child to school, then he has to be punished

or there should be some incentive, carrot or stick both... and the education can change only the education can change and exposure advocates? the women rights or the human rights. What one is supposed to get from the society, what one is supposed to get out of the government, if that is known to a lady walking there that, ok if I walk into some government office then I will get these services... then, things would be better... and that is only through the exposure and the uh, advocacy...it could be advocacy through media and the education. Basically education gives you the access to the different resources uh, like, you have the knowledge how to operate a computer so if you can go on the internet you can read anything and you can get any information you like... what the basic thing was you have the computer literature?...that's it. that is the tool and similarly education would be the tool to achieve this.

Stefanie: Mhm... But what is like, the government, like the policies themselves [not understandable] what about PRSP? Do you think its very influential?

Barak: Yes, they also target... what I, we have been talking... PRSP, NRSP and other microfinance and other organisations they take the gender into this aspect, and like the NGOs, they know it if they make a gender sensitive project then they get the foreign funding as well so that makes it attractive so... civil society is working, they do go for the gender sensitive projects.

Stefanie: Do they, do you think they also pressurise the uhm, the government?

Barak: Pressure tactics... it happens but uh, government has its own reality. Government has its own like, finances, the financial cake, it has to cater to so many things. Like uh, if you see the present budget it is 66 or uhm, 60% for debt, middle portion, like one-third will go to debt retirement and you pay the debt and their interest and then for the military and then for the administration and everything else and that is like 40 more percent of the cake. So how long you can press the government? That is why the donor agencies or international agencies come into play because it uh, it may be...important to reduce poverty than to do something else or like, uh, what program are you, we have the sasti roti (cheap bread) here you know...

Stefanie: They come together, no?

Barak: Ya they come together what...

Stefanie: Reducing poverty really comes with other aspects at the same time...

Barak: Yes, yes...Our, one thing is like, the political government, they come in short spans of time, you have like three years rule then another government two years rule, another government like it is happening [not understandable] and then you have the ten years of martial law, the military rule and that is happening every like.... ten years of government, civil rule you can call it or democracy you can call it and then you have the twelve years gap for the military. This is how it is happening in this country, so... politicians are actually answerable to the people they go to get vote after two years or three years the weight is happening, and so they are answerable but when it comes the military regime or something like that, then they are answerable to nobody. So whatever happens (dont understand)the international compulsions, war of terror is going on like in Musharraf, ok, war against soviet union during the Zia regime. so then internationally, they overlook the gender aspect or the development aspect of Pakistan and what comes, what everybody would ask, ok, go hard on the terrorism. Ok, soviet union, ok, you should uh, save the world from soviet, [laughs] you know from communism..that's reality... things happen like that.

Stefanie: Mhm, then what do you think? What are your recommendations? What could be done? What are the most urgent aspects? Who has to do what? Like governmental agencies, international agencies, donor organisations in the country, you know, charity? What do you think? What are the key areas?

Barak: I think whatever the international compulsions are, because it controls Pakistan's whole scenario. Im talking about like from 70s to now, you have from '77 to '85 military rule, war against soviet union. Then you have this war against terrorism...

Stefanie: You mean that the international agenda or international ...uhm...relations...

Barak: Ya they should...ya international relations, the effect of the international relations. What they should do it. ok whatever happens, you will have this much of allocation for social sectors or you will have this much of the target to achieve, and you will not have them reallocated for something else. That has to be made compulsory for the government of Pakistan, they should come up, they... Because when you say it, ok, you go hard on the terrorism then you have...expenditures of every gun fired that has uh, of every bullet that is fired, you know there

will be the cost of that bullet, there will be the cost of that man behind it, and whole lot of things you can draw it from policy level like that. Ok. And then like uhm, common is, common thing, this is disaster area, so no taxis from here so the taxi revenue goes down. Ok there is war on terrorism here, schoolchildren, they are not going to the school. Ok, health facilities people will not be availing? of the health facilities. it is very dangerous.

Stefanie: Mhm so you mean that not everything is forgotten just because of the war...[not understandable]

Barak: Like we were getting the census. We just forget it because we can't go and head count the people in half of the country and for that half we neglected the other half...  
[unintelligible conversation]

## Appendix II: Interview Transcript 2

***DIPLOMARBEIT. Overcoming inequalities.  
Women with Disabilities in Pakistan. University of Vienna.***

### Interview Transcript

<b>Interviewer:</b>	Stefanie Andruchowitz
<b>Narrator:</b>	Farrah Parvaiz Saleh Citizens' Commission for Human Development (CCHD)
<b>Date and Time:</b>	26/06/10 Start: 14:27, end: 14:45, 18 minutes
<b>Place:</b>	Narrator's Home SUI Northern Gas Colony Defence Housing Authority, Lahore
<b>University:</b>	University of Vienna
<b>Prof.:</b>	Dr.in Silvia Michal-Misak
<b>Date completed:</b>	10 July 2010



Persons present: Stefanie Andruchowitz  
Farrah Parvaiz Saleh

- Stefanie: Please give me your name, the organisation and position held in this organisation.
- Farrah: My name is Farrah Parvaiz Saleh and my organisations name is Citizens' Commission for Human Development and I work there as Executive Director.
- Stefanie: How do you judge the status of women in Pakistan? Just a brief statement.
- Farrah: How do you?
- Stefanie: How do you judge the status of women in Pakistan?
- Farrah: Well, there are many ways. One way is obviously the scientific way to go through the research and the status of data available, the other thing is you can see the condition yourself, because you are working in the field also, and you hear the voices of women in the field and the community level, and then the third area is the media, which also give you some kind of portrait of women ahm in Pakistan.
- Stefanie: So and the status is, is it very bad, is it very good? How would you judge it?
- Farrah: Well, the data available on women, ah, whether it is on education or on health or is in Islamic sector and particularly in economic sector, I mean formal sector is ah not up to the market. Although in particular participation we have made from inroads, we have ah better gender equity over there. But there is still a long way because that is just the participation and ah still ah, decision making level is still one area where we have to work hard.
- Stefanie: What do you think, which are the most urgent problems or which are the biggest problems?
- Farrah: Well, if you look at the the ground reality frankly speaking education of women is ah one of the major problems because lack of education deprives them of opportunity and their rights. And the second is health. Health is the basic right of every individual and we don't have save drinking water, we don't have save mother and child ah programs. And ah, we have programs but the services are not up to mark. And these two areas are big problems. And the third area women in economic force as an equal citizen over there, ah I mean in Pakistan, like many other countries [not understandable] for their job, so these three areas are major areas.
- Stefanie: What do you think are the main ah hindrances for equal rights between men and women in Pakistan?
- Farrah: Ah main hindrances are mhm, social, cultural and economic background of the society. Ah we have a, it is a patriarchal society and ah, we have a mindset, patriarchal mindset, and we, we consider ourselves very much unfortunately much nation and there therefore we take women not as fellow citizens, but rather very ordinary citizens. And ah and we feel that women are weak, they need to be protected. Therefore, they should be behind ah, the four walls of the house.
- Stefanie: Which are the main strategies to overcome this inequality in Pakistan, now?
- Farrah: Ah, no the main strategies, there are, I mean a number of strategies, because no single strategy can work really, so you have to go with the multi prong strategies. One is strategy where you have to work along with the government to improve the status of women, to make the government realise, that the women need separate budgetary recourses and fiscal recourses for their improvement. And the other area is the mindsets, where you have to have a continuous awareness raising and advocacy programs where you say that yes, women are equal to men and women have been equal to men in religion. Ah in our religion at least, and our prophet always gave good ah, always gave high importance to women. In every sector, whether it was taking women to war, it was taking women to business, or if it was taking their advice on many social or cultural issue at that time. So therefore the mindset that would say that Islam does not allow women to work or does not allow women to participate in economic activities or any activities which is out of their house boundary is wrong, so that needs a change of mindsets. And the mindset is unfortunately can only can be changed when we change our curriculum. So our curriculum is ah again ah having a very patriarchal mindset. And in that children are thought that women are supposed to look after families and that's how the Islam is, or that's how culture has been, which is wrong. Because in, if you look at the rural areas, 70 percent of the labour force in agricultural sector is women. And they are working there, so, and it is only the middle class when we come to the middle class there, there is a lot of enforcements, ah there is enforcement ah

about other issues of, even after giving education to their children.

Stefanie: Ok so, who is behind, like on a policy level, who is behind the policy making? Like on a governmental level and like on local level?

Farrah: See our governmental and local level, because women have not been really educated as such and they, we have a low literacy rate amongst women, therefore it's easily, you can easily assume that women are not in the government sector where the policies are made. So when women are not there themselves, so the men are making policies and men have that same mindsets, therefore the policies are also ah after their mindset and they are also sitting in the finance ministry and in other finance departments where the fiscal allocation is ah is ah is allocated for programs. So again, the same mindset does not allow women to come up. This is one which is keeping the women ah women ah you can say that keeping women in this condition, the other mindset that I said, we ourselves, women and men, both in society, we don't allow our women to make decisions, we don't want them to be aggressive, we have a very sad ah sad I would say, a sad picture of a women, which is a women in a veil, or women in in in a scarf, and a woman cooking for the family and looking after the children, and never saying ah raising her voice ah against the husband or the father or or the brother, or any other male member of the family. She is just there to be very obedient.

Stefanie: Which stakeholders are involved in the policy-making? Who is it? Is it like, what kind of governmental people are involved? Or who decides the government sector is involved in policy making?

Farrah: Ah, besides the government sector, I, even the politicians don't have much education and ah and much experience to really make policies. And ah they hardly get time to because they are they have not time they have political to to accomplish the programs they had promised in their manifests. And due to that, the insecurity that you never know for how long are going to be there, so you don't start ah initiatives that might take a long time so therefore you are, you deal with day-to-day matters. So therefore ah I would say that politicians are not also involved in the policy-making and far as NGOs are concerned, the civil society organisations, you can say, yes, they are to some extent providing the the basics information regarding the situation of women and they are trying to improve the status of women, but their say is to the extent where they can only advocate and lobby but they are obviously not the decision makers.

Stefanie: And what about international organisations? Do they have any influence on policy-making in Pakistan?

Farrah: Ah, well I won't not say they have influence, because international organisations or you can call UN organisations, if they want to make any impact, ah on ah on ah at a policy level. They have to go through the ministry of women development. And ah that's a very, that's the focus ministry for women and all the legislation and policies are, are streamlined through that ministry. Therefore they have to impact on the women ministry and that means advocacy and lobbying. And the other thing which has helped us in improving our policies regarding women is our international commitments. Like we have CEDAW, like we have ILO Conventions, ah like we have the IRC the Conventions etc. these have really helped us improve the status of women in Pakistan. And ah, even in CEDAW there are the 30 articles, which are still we still have to like the right to abortion, so we are not doing fully, because we feel that is against Islamic culture. But by large, the CEDAW has been adopted.

Stefanie: How has it helped? How like was it like it didn't influence the government to decision-making and policy-making? And because it pressurised?

Farrah: No it was an international effort. It was international effort across all countries. So therefore all countries were asked to to adopt CEDAW and ah according to their own culture and their own socio-economic conditions. And ah, by the members of CEDAW we we signed the CEDAW it was the government of Benazir Bhutto, and she was more progressive, she went on, and then Beijing platform is another platform, where at international level we advocate, like we are reaching 15 now, at the moment we have again, we are trying that we should bring reforms in policies and not only in policies but fiscal reforms we need also. And we need women in public sector.

Stefanie: So what about the implementation? We do have policies, like international policies and treaties and then implement like adopted national treaties, but what about the implementation?

Farrah: The implementation comes with the national action plans on women.

Stefanie: But how effective are they?

Farrah: Ah, ya, these plans are very good documents actually to look at it and they are suggesting exactly the same which is ah which is discussed on the platform of Beijing Platform for women. And ah but unfortunately, because all those areas, sectors there are 15 sectors in national plan of action for women, all these areas made separate allocation of funds, so therefore, if we don't have separate allocation of funds, we can not look after 50 percent of the population.

Stefanie: So it's the funds basically

Farrah: Ya

Stefanie: Which are the biggest problem.

Farrah: Ya, it's not only the funds, it's the allocation to start with then it's utilisation of the funds, is ah the second area and ah because a lot of utilisation lack, ah we don't utilise 100 percent funds. Although we, first of all, to begin with we have like for education sector I don't remember in this fiscal year how much they have allocated for, but suppose if we have even allocated 2 percent of the GDP we hardly end up giving 1 percent.

Stefanie: Where does the money go?

Farrah: Ah, money doesn't go anywhere, money is not released or either the money is released it's not spent.

Stefanie: Why is that?

Farrah: Why, it's the bureaucracy. Bureaucracy is supposed to implement the programs.

Stefanie: But they are just not taking action

Farrah: They don't take action and a lot of funds go waste like that every year.

Stefanie: How, so you judge the quality of the policies themselves they are quiet good? What you would say...

Farrah: Ya

Stefanie: It's just the implementation then which is the problem.

Farrah: It's the implementation which is the problem, and for implementation again because in the government sector there is hardly 2.8 to 3 percent women.

Stefanie: Mhm

Farrah: So there are, that means the whole government sector is ah, is being run by male, men. And that that's the same patriarchal mindset. So therefore, I don't see much change until more women are in the public sector.

Stefanie: So that offers, about the policies from the policies nothing really arrives on the ground level?

Farrah: Hardly, hardly anything, but you do get a chance to get the commitment from the state that this is you are agreeing upon, this is what you are going to do, and this is going to be your future ah working line. You only get the commitment from the state.

Stefanie: So last question already. Ahm, what are your recommendations?

Farrah: Ah

Stefanie: What do you think must happen, ok you mentioned already that more women in the government sector, but it, but what else can be done, like in a practical way what could be done to make it better or to influence?

Farrah: See, I think women themselves have to come up. There is no other way that you can leave this on others. Because if you conscious about your cause, and you really feel that women need education, women do need health, women do need economic empowerment, political empowerment, then women themselves have to come up. And that means, I personally feel that if more women organisations, who are focussed and who have joint strategy for short term as well as for long term to achieve equal status of women. Then only this will be possible. Otherwise this will keep dragging, the way it is dragging and it can take maybe 300 years. But if they get together and they form a platform together and they ah have a long and short term both strategies and they work for it, then it's possible in 30, 40 years, that you do see women maybe, more women in, in government sector, in public sector, and otherwise status of women also.

Stefanie: Now I have another question. Because you work in the NGO sector, and you know the field quiet well, how is the civil society how big, or what is happening in the civil society for women? How big is the gender related NGO scene, or you know, how would you describe the atmosphere and the influence they can have?

- Farrah: See ah, actually what I see is ah gender is a cliché again. Ah and a lot of civil society organisations which are working on women, ah, they think women and development or women's development, they take women in development or women's development approach. They don't take ah approach of gender empowerment. So ah, and gender itself is, is a political ideology, and either you are a liberal ahm feminist or you are a radical feminist, or you are a democratic feminist, whatever. So until they understand this area of gender is a political ideology they align themselves accordingly, we will be nowhere. So at the moment, because gender is a cliché and money is coming on gender issues so therefore you will see a lot of NGOs working on gender, on women issues, and they call that gender issues. Ah and that's how it's being run, and that's why there is not much progress, although there is a lot of motion growth of civil society organisations in Pakistan since 86 till now and by now the civil society organisations should have ah be strong enough really to ah, to adjust the situation in their own way, the way they would like to and to second is challenge the government. They are not in a position to challenge the government. They are not, I would say they are more ah controlled organisations. Working on very small areas.
- Stefanie: I read in my research many times, that Pakistani civil society is not, or most NGOs they are mostly not political.
- Farrah: Ya
- Stefanie: Why is that?
- Farrah: That's what I said, because they they think that NGO means social reforms and ah social reforms reforms does not mean to challenge. Ah to challenge the status quo.
- Stefanie: But where does the attitude come from then?
- Farrah: It is a compromise, not its a compromising attitude, and the compromising attitude comes because of donors. The donors keep changing their strategy and they keep changing their flow of money according to their different approaches and different programs, and the NGOs keep moving. So they can keep moving because they do need funds obviously to survive, but there has to be a movement which is without ah having ah funds and having a political commitment, and then only it's possible. Because I have seen it ah in many other countries, that ok, you are running an organisation, you are an civil society organisation, you are doing research in 101 researches in different areas, that's fine, but you, but if your organisation has a gender focus, then you are working there voluntarily, you are giving your time, you are giving your expertise. In what other country does this happened. So that's what we lack.
- Stefanie: Thank you very much!
- Farrah: You are welcome.

## Appendix III: Interview Transcript 3

***DIPLOMARBEIT. Overcoming inequalities.  
Women with Disabilities in Pakistan. University of Vienna.***

### Interview Transcript

<b>Interviewer:</b>	Stefanie Andruchowitz
<b>Narrator:</b>	Shahida Perveen-Hannesen Roshni Association. Society for the Welfare of Special Persons
<b>Date and Time:</b>	07/09/10 Start: 15:42, end: 16:16, 34 minutes
<b>Place:</b>	Roshni Village Karbath Soling, Off Bedian Road, Defence Ext. Lahore Cantt.
<b>University:</b>	University of Vienna
<b>Prof.:</b>	Dr.in Silvia Michal-Misak
<b>Date completed:</b>	25 September 2010

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- Stefanie: Grundsätzlich, ich habe einiges von Ihrem Projekt gesehen, ahm mich würde nur noch ein bisschen die Hintergründe interessieren, zur Schule erstmal. Wie viele Kinder gibts jetzt insgesamt. Ich weiss es gibt eine eigene Schule, aber ich mein jetzt ich mein Kinder mit speziellen Bedürfnissen. Wie viele Kinder gibt es da?
- Shahida: Also es sind keine Kinder es sind Erwachsene, wir fangen im Alter von 16 an, ab eigentlich 16 plus
- Stefanie: Hat das einen bestimmten Grund gehabt, dass es nicht Kinder sind sondern Erwachsene?
- Shahida: Der Grund war, dass die, als ich noch in Deutschland lebte und in Pakistan angefangen habe zu arbeiten mit Eltern und die Schüler um zu fragen was sie für Bedürfnisse haben, also was wird gebraucht, also ich wollte eben auch in einem Gebiet arbeiten wo ich mehreren Menschen helfen kann, also da haben sie darauf geschrieben, älter werdende Eltern haben kein Haus oder keine eigene Einrichtung für ihre erwachsenen behinderten Kinder. Und dann habe ich meine Idee umgeplant und statt mit kleinen Kindern haben wir mit Erwachsenen diese Einrichtung gegründet.
- Stefanie: Das heisst die Idee war am Anfang, Kindern zu betreuen und dann kam die Änderung.
- Shahida: Und dann haben wir Erwachsene das ging bis zu 16 Jahre hingehen können. Wir sind keine Schule. Das sind die Werkstätte für die Menschen mit sehr verschiedene Behinderungen.
- Stefanie: Und das heisst auch, es ist wird Wert darauf gelegt das Werkstätte zu nennen?
- Shahida: Ja ja.
- Stefanie: Und es ist auch nicht Betreuung in dem Sinne?
- Shahida: Betreuung ist es natürlich auch gleichzeitig, weil sie auch bei uns leben und das ist eine Lebensgemeinschaft auch.
- Stefanie: Leben alle, weil es gibt auch
- Shahida: Nein, wir wollen dass sie es alle leben aber sie, nicht alle Eltern wollen dass ihre Kindern bei uns sind, weil manche sind auch froh, dass sie abends zu Hause sind.
- Stefanie: Aha, woran liegt das?
- Shahida: Ja weil sie ihre Kinder zu Hause behalten wollen oder sie jeden Tag, sie sind glücklich wenn sie zu Hause sind abends. Aber für manche, haben sie die im Rollstuhl gesehen?
- Stefanie: Ja.
- Shahida: Die könnten, ihre Eltern sind sehr alt und sie könnten sie nicht betreuen.
- Stefanie: Und welche Personen werden, also ich hab gelesen mental disabilities.
- Shahida: Also ja, was man auch nicht sagen mag ist geistig behinderte Menschen. Auf deutsch, in Deutschland sagt man auch pflegebedürftige Menschen.
- Stefanie: Okay, das ist die Hauptzielgruppe?
- Shahida: Ja.
- Stefanie: Was ist der Grund dafür, dass sie diese Gruppe, ah, wie sagt man da, anpeilen?
- Shahida: Ja, es war so, dass hier in diesem Bereich für die Kinder sind viele Schulen in Pakistan, für die also geistig behinderte Kinder, aber für die Erwachsenen war keine Einrichtungen. Es gibt einige staatliche Einrichtungen aber die sind mehr ah so wie Schule. Auch 20-jährige Menschen müssen das Alphabet lernen, lesen und schreiben lernen. Und das ist nicht wichtig, dass sie mit 20 Jahren das ABC lernen müssen. Weil sie sind erwachsene Menschen und sie sehen zu Hause, dass der Vater geht zum Arbeiten, die Brüder gehen zum Arbeiten, sie gehen ins Büro oder ihre Geschäfte. Weil sie sind junge Menschen, diese jungen Männer besonders, so wie Minderwertigkeitsgefühl haben, ich kann nicht ins Büro gehen, ich kann kein Geschäft leiten, während diese Sicherheit zu geben und eine self confidence, also Selbstsicherheit und einen Wert zu geben das sie das Gefühl haben, dass sie arbeiten können. Sie können in der Holzwerkstatt arbeiten, in der Textilwerkstatt weben, sie können backen, in der Gärtnerei arbeiten, so sie nehmen Teil an der Gesellschaft und sie gehen zum Arbeiten. Bei den Frauen sie, also da ist es, ah weil wir haben weniger Frauen, weil die Frauen können leichter zu Hause beschäftigt werden. Sie arbeiten mit der Mutter, spülen, Gemüse schneiden, Wäsche waschen, kehren. Ja, das ist leichter.

Stefanie: Sie sind besser zuhause integriert?

Shahida: Sie sind besser zuhause integriert. Für die Herren ist es sehr schwierig zu Hause zu integrieren. Weil die arbeiten nicht alle in der Küche, also dieser gesellschaftlicher Druck, der Vater arbeitet auch nicht in der Küche, würde er auch nicht, daher also die Herren ahm Arbeit im Haus ist es weniger und sie machen nicht die Arbeit. Daher denk ich ist es für die Jugendlichen, wesentlich schwieriger zu Hause zu bleiben, da sitzen sie vor dem Computer oder Fernsehen oder sie laufen in den Strassen wenn sie sehr arm sind und zu Hause keine andere Beschäftigung haben ahm verbringen sie ihre Zeit in den Strassen. Ahm und haben keinen Sinn im Leben. Daher ist es wichtiger gewesen, dass für sie einen Ort zu schaffen, wo sie arbeiten lernen, arbeiten und gemeinsam mit anderen Menschen leben.

Stefanie: Das heißt, ahm, heißt das jetzt, dass sie gezielt mehr auf Männer, also Männer integrieren oder offen sind?

Shahida: Nee, nee, offen, darüber habe ich sie nur informiert, dass wir sind, also wir haben weniger Frauen als Männer eigentlich. Wir haben mehr Herren.

Stefanie: Okay. Darauf möchte ich später noch zurück kommen, zuerst noch zur Schule zurück. Ahm, wie viele Lehrer oder Betreuungspersonal haben Sie?

Shahida: Wir haben hier 45 behinderte Menschen, und dafür wir arbeiten fast 30 Leute. Aber in verschiedenen Bereichen. Zum Beispiel auch die Fahrer die sie jeden Morgen abholen und zurück bringen, sie arbeiten auch für sie.

Stefanie: Ja.

Shahida: Und der Gärtner arbeitet für sie, die Frau kocht für sie, also so zwischendurch, putzen, das wird auch für sie gemacht und dann gibt es die Werkstätte, die Lehrer die von morgens von 9 bis 2 Uhr mit denen arbeiten und betreuen.

Stefanie: Und die haben eine spezielle Ausbildung?

Shahida: Oeh leider nicht, ohm, nur für die Werkstatt hat diese Dame Erfahrung gehabt, ah, mit Textilien und auch sie hat in eine andere Schule mit behinderten Menschen gearbeitet. Aber die anderen kamen nur so, weil sie mit uns arbeiten wollten. Und das war ganz neu, und ich hab immer, also in den letzten Jahren mache ich die Fortbildung mit denen. Die sind immer so, Tike Training nennt man das, dass sie lernen mit ihnen zu arbeiten. Ohm, aber sie haben keine Ausbildung gehabt. Und das ist ziemlich schwierig in Pakistan soweit ich es weiss, ich bin seit neun Jahren hier, in der Uni gibt es Special Education Programm, aber das ist mehr für die alle, die die Special Education studieren gehen und die schon unterrichten und arbeiten oder so Büroarbeit für sie oder deren Rechte arbeiten oder für deren Wohl arbeiten. Aber selbst Tätigkeiten, zum Beispiel deren Windeln wechseln, für sie spülen, für sie kehren, ihre Zähne zu putzen, diese caring oder Pflegearbeit, das lernen sie nicht. In Deutschland lernt man 4 Jahre lang die Arbeit mit Betreuung zu machen.

Stefanie: Weil es ein umfassendes Konzept ist?

Shahida: Ja.

Stefanie: Sozialarbeit?

Shahida: Sozialarbeit, ja. Aber es gibt einige Unis die die 4-jährige Ausbildung anbieten

Stefanie: Haben sie auch diese Ausbildung gemacht?

Shahida: Ich habe eine 2-jährige Ausbildung gemacht und davor weil ich davor 4 Jahre lang, ah, Klassenlehrerausbildung gemacht habe für die Waldorfschule.

Stefanie: Das heißt Sie waren immer Waldorf?

Shahida: Ja Waldorfpädagogik.

Stefanie: Was ist jetzt besonders geeignet an der Waldorf-Methode für die Arbeit mit Menschen mit speziellen Bedürfnissen?

Shahida: Dass die Menschen erkennen, dass sie sind anders, also das geht überhaupt, das ist ein sehr tiefes und großes Thema eigentlich, aber das Mensch zu erkennen, ich mein, und da, ahm, die Qualität spielt eine Rolle. Für mich ist es sehr wichtig, dass in einem Mensch der ein Mensch der 20 Jahre alt ist, dass ich erkenne in ihm, dass der Mensch ist, den muss ich erkennen. Und für sie arbeiten auch für die Umgebung, eine Umgebung anbieten, dass er sich wohl fühlt und dass die Gesellschaft ihn anerkennt und akzeptiert, oeh, und dass ich denke das wird auch dafür in der Welt gearbeitet, dass die Menschen die, es wird einfach für die Menschen so Rahmen gesetzt, wer ist intellektuell, wer ist Arbeiter, also ist IQ Level Test und so sagt man dieser 20-Jährige

- Mensch hat IQ von 7 Jahren. Und das eben, ich komme nicht zurecht damit.
- Stefanie: Haben Sie das Gefühl, dass sie eine Veränderung oder zu einer Veränderung beitragen konnten mit dieser Schule, oder dass Sie das können?
- Shahida: Ich denke ja, es wir sprechen nicht darüber, aber ich denke alles, was der Mensch tut, wird später leben, und überall. Wenn ich auch nur positiv denken würde in meinem Zimmer hat die Wirkung in meinem Umkreis. Wenn ich nur negativ denke hat das Wirkung im Umkreis, ob ich es ausspreche oder nicht ausspreche. Und was ich auch fühle, was der Mensch fühlt, hat die Wirkung im Umkreis. Das heißt, die Arbeit wird, was wir hier auf einem kleinen Gebiet tun, wir sind 45 behinderte Menschen, 40 Mitarbeiter, so viele Besucher, das ist eine Wirkung hat in der Gesellschaft. Und wir haben 350 Bäume hier, wir haben Tiere hier und auf die Bäume hier kommen Vögel, wir machen organic farming, wir machen Umweltschutzarbeit, ich ...
- Stefanie: Also ein ganzheitliches Konzept.
- Shahida: Ja, ich kämpfe gegen die Plastiktüten. Und auch gute Nahrung, wir machen Bäckerei mit dem, aeh, mit, aeh, wie sagt man? Vollkornbrot backen wir. So, das sind die kleinen Versuche. Und auch in der Textilwerkstatt. Wir arbeiten nicht mit Synthetik oder Nylon, sondern so mit pakistanischer Baumwolle, für alles wir Baumwolle benutzt. Und wir machen Spielzeuge und Holzwerkstatt macht Holzspielzeuge mit dem Ziel, dass die Kinder nicht mit dem Plastikspielzeugen spielen wollen, dass sie lernen, die Tradition, das wir vergessen haben, das wird nicht immer das sein, aber mit der neue Bewusstsein das erkennen und dass die Kinder mit Holzspielzeuge und Stofftiere spielen und wieder mit der Puppe ins Bett gehen können. Die Welt des Kindes teilen, weil mit der Barbie Doll können die nicht ins Bett gehen, das tut weh überall.
- Stefanie: Ja, sind sie vernetzt mit anderen Organisationen oder Institutionen, die in einem ähnlichen Bereich arbeiten, oder mit Menschen mit speziellen Bedürfnissen arbeiten? Wie sind sie vernetzt mit denen?
- Shahida: Ja, nicht sehr große Vernetzung, aber viele, wir kennen einige Einrichtungen, aber in Lahore sind noch weitere Institutionen, die ganz gut arbeiten, Rising Sun ist eine und Amin Maktab, mit denen sind wir verbunden, mehr mit Amin Maktab, und ...
- Stefanie: Inwieweit verbunden?
- Shahida: Verbunden heißt, dass wir uns austauschen, das heißt, wenn wir eine Fortbildung machen würden, können wir da hin gehen. Sie sind sehr große Einrichtungen, sie sind auch schon 30 oder 35 Jahre alt. Wir sind nur 9 Jahre alt.
- Stefanie: Wie schaut es aus mit Einfluss von der Regierung, gibt es irgendeinen Einfluss? Also wie wird das finanziert? Wie finanzieren Sie das hier?
- Shahida: Also vom Staat bekommen wir, also vom Social Welfare Trust bekommen wir eine Unterstützung, aber es ist nicht sehr groß, es ist nur ein Gehalt für ein Büromensch.
- Stefanie: Für eine Person?
- Shahida: Ja, ahm, aber jetzt haben wir eine Spende bekommen, um zwei Zimmer zu bauen, das ist das zweite Mal, dass wir
- Stefanie: Eine private Spende oder von der Regierung?
- Shahida: Nee, nee, von der Regierung, also Regierung heißt, es gibt ein Department, den Social Welfare Trust, der ist zuständig für die Einrichtungen. Und sonst vom Staat, von Live Stock haben wir eine Kuh geschenkt bekommen. Aber sonst sind es private Spenden, also von europäischen Freunden und hier pakistanische Freunde.
- Stefanie: Das heißt, es gibt auch keine Inspektionen oder kein Monitoring von der Regierung, es kommt niemand her und ...
- Shahida: Nein. Doch, wir mussten immer, das machen wir, das wird immer geprüft, wie alle Spenden, zwei Mal im Jahr.
- Stefanie: Also eher die finanzielle Seite.
- Shahida: Ja.
- Stefanie: Und was ist mit Qualität, oder mit der Art und Weise, wie unterrichtet, wie betreut wird?
- Shahida: Das ist nicht so, die sind gekommen und haben gesehen, was wir arbeiten. Die Arbeit die wir hier machen, das macht keiner in ganz Pakistan. Also auf diese Weise, mit diesem Hintergrund, also Methode und Hintergrund. Also es werden Spielzeuge gemacht, also zum Beispiel Stofftiere, aber die werden nicht aus Synthetik gemacht oder Nylonstoff.
- Stefanie: Was mich jetzt noch interessieren würde, weil ich mich mit Frauen mit Behinderung im



speziellen auseinandersetze, wie, aus Ihrer Erfahrung, weil Sie mit Menschen mit speziellen Bedürfnissen zu tun haben, was sind für sie, oder aus ihrer Perspektive, die großen Probleme, die Frauen ... oder was unterscheidet jetzt Frauen mit speziellen Bedürfnissen von Männern mit speziellen Bedürfnissen? Sehen sie da irgendwie Besonderheiten für Frauen, mehr Probleme, andere Probleme? Weil, wir haben jetzt einiges genannt, was Männer für Probleme haben, wie schaut's aus mit Frauen aus Ihrer Erfahrung?

Shahida: Also, ich schätze, habe ich, also meine Erfahrung, die ich mit einige hatte, die kümmern sich um ihre Töchter sehr. Zu Hause fühlen sie sich wohl. Neulich kam ein Herr, aehm, sein Bruder ist gestorben und seine zwei erwachsenen Töchter sind beide behindert. Eine ist 32 und eine 35 Jahre alt. Und jetzt haben die gefragt, ob wir sie betreuen können. Aber sie wollen in ihrem Haus die Betreuung haben, weil sie, sie sind so gewöhnt in ihrem eigenen Haus zu wohnen, dass sie können nicht hierher kommen. Und die Mutter erzählt mir also, wie der Vater beide so gepflegt hat und gefüttert hat wie ein, wie zwei kleine Vöglein. Also, die Eltern haben sie sehr viel Liebe geschenkt und mit sehr viel lieb gepflegt.

Stefanie: Ist das ein klassisches Beispiel, oder ist das eher eine Ausnahme?

Shahida: Ich weiß nicht, aber ich weiß, alle Eltern die bei uns sind, die sind sehr lieb zu ihren Kindern. Nur einmal hab ich gehört, dass sie ihre Kinder gebunden haben, zum Beispiel, weil sie immer ständig weglaufen. Aber das kann ich verstehen, es ist ziemlich schwierig. Die Mutter kann nicht immer hinter dem in den Strassen hinterher laufen.

Stefanie: Hat das mit der Zielgruppe zu tun, also was ist denn die Zielgruppe, also von welcher gesellschaftlicher Schicht, welche Leute kommen denn?

Shahida: Also ich möchte eigentlich gemischt arbeiten, mit beiden, also sagen wir, sie sind weniger verdienende Menschen und es gibt mehr verdienende Menschen, aber leider bis jetzt kommen so nur so zur ersten Gruppe Gehörende, deren Eltern sehr wenig verdienen.

Stefanie: Woran liegt das?

Shahida: Weil wir von Anfang an gesagt haben, dass wir die, das Geld wird keine Maß sein, sie aufzunehmen oder nicht aufzunehmen. Also ich werde nicht sagen, wenn sie nicht bezahlen, ich nehme ihr Kind nicht.

Stefanie: Das heisst es gibt auch school fees?

Shahida: Ja, wir haben natürlich Gebühren, weil wir Geld ausgeben für die. Wir holen sie ab und wir bringen sie zurück, das kostet viel Geld, Auto, für Fahrer und Benzin alles, aber dafür nehmen wir kein Geld, aber es sind nur drei, vier Eltern die die einbezahlen.

Stefanie: Weil die die finanziellen Ressourcen nicht haben?

Shahida: Ja.

Stefanie: Okay.

Shahida: Aber bei, ahm, diese Gruppe, so kommen, es sind nur drei, vier wohlhabende Leute. Mehr wohlhabende Leute, die geben ihre Kinder soweit ich weiß, verbringen ihre Zeit zu Hause vor dem Computer oder sie haben Angestellte, oder sie denken nicht für ihre Kinder, dass sie auch Freunde brauchen oder, ahm, eine Gruppe brauchen, wo sie sich wohl fühlen können. Hm, ja und das ist ihre Meinung, eine Respektfrage. Also wir hatten Freunde, die sagten, also unser Sohn kann nicht, kann doch nicht Holzarbeit machen oder im Garten arbeiten, das ist so schmutzig.

Stefanie: Das ist dann also ein Problem.

Shahida: Ja. Aber das haben zwei Leute habe ich erfahren. Sonst ist das nicht der Fall. Aber ich weiß nicht, wir haben nur 45. Wenn diese, es gibt viele Einrichtungen, da wo sie hingehen. Einige Einrichtungen weiß ich, wo sie hingehen, auch mit arbeitet.

Stefanie: Das staatliche Angebot oder alle Angebote sind nicht ausreichend, nehme ich an?

Shahida: Glaub ich nicht, dass es ausreichend ist. Aber die anderen Schulen arbeiten ganz gut. Die haben mehrere hundert Menschen, die sie betreuen, sie alle kommen nicht in die Schule, weil sie machen Consulting, sie nennen es Aufsichtsperson und da gehen sie hin. Sie können auch ihre Schule besuchen wenn sie wollen.

Stefanie: Wie ist der Name der Schule?

Shahida: Amin Maktab.

Stefanie: Hab ich noch nicht gehört. Was mich jetzt noch zuletzt interessiert, ist wie, was ist auch aus ihrer Erfahrung und ihrem Fachwissen, ahm, welche Vorschläge, oder was denken sie, welche Recommendations hätten sie, was sollte Regierung machen, was sollte die Gesellschaft machen,

- Shahida: was muss sich ändern, damit Menschen mit Behinderung mehr oder besser integriert werden? Also was die Regierung machen soll, kann ich nicht sagen, will ich auch nicht sagen, weil ich weiß, dass sie es nicht tun würden. Das ist also für also die Frage, wie der Mensch denkt, was, wer die Regierung ist es wird auch viel gemacht, viele Gelder gegeben, was ich weiß. Und es gibt sehr gute Einrichtungen, auch vom Staat in Lahore. Die arbeiten auch für blinde Menschen, andere Menschen mit verschiedene Behinderungen haben. Aber ich denke, der Mensch soll einfach das fühlen und denken, das, ahm, wir können die Menschen nicht messen. Und diese Maßnahmen auch für die normale Kinder, Waldorfflehen sag' ich, oder überhaupt als Lehrerin. Mir tut es weh, wenn ich da, oder seh', wie Gesellschaft überall in der Welt. Nur der Mensch, wenn er funktioniert, wird geachtet. Und wer nicht funktioniert wird ...
- Stefanie: Aber was könnte gemacht werden, um diese Meinung zu verändern? Oder gibt es Möglichkeiten?
- Shahida: Ja, das ist sehr viel Materialismus, der nicht weniger wird, sondern der wächst. Und gleichzeitig, vorher wurden behinderte Menschen versteckt. Aber dafür gibt's mehr Arbeit in der Öffentlichkeit. Das ist sehr positiv.
- Stefanie: Also hat sich was getan, auch in Pakistan? Oder ...
- Shahida: Ja, aber ich hab auch in Deutschland gesehen, vor vielleicht vor zehn Jahren war das, da war ein behindertes Mädchen und die Großmutter hab' ich begegnet da in einem, beim Teetrinken und die haben zehn Jahre lang ihre Tochter versteckt wegen der Behinderung. Und das hat mich sehr erstaunt, dass in dieser Zeit, wo es in Deutschland so viel Sozialarbeit gemacht wird. Also in Asien, also ich kann es sagen von Indien und Pakistan, ist so, wenn ein behinderter Mensch da war, also geistig behinderter Mensch, obwohl ich mir immer denke, warum ist es geistig behinderter Mensch, weil der Geist kann nicht krank sein. Deshalb wird gesagt Seelenpflege. Bedürftige Menschen und deshalb können wir dieses Wort nehmen, dann sind wir eigentlich alle seelenpflegebedürftig Menschen. Wer ist nicht seelenpflegebedürftiger Mensch?
- Stefanie: Stimmt!
- Shahida: Na?
- Stefanie: Die ist problematisch.
- Shahida: Daher ist es schwierig, diese, dafür eine Wort zu finden. Haben wir neulich auch ein Meeting gehabt bei der Konferenz, dass, was für einen Namen sollen wir nehmen für diese Menschen? Da ist also viele NGO. In Deutschland haben Richtungen, also Einrichtungen, die sagen, das sind Freunde oder mitlebende Menschen, verschiedene Worte werden gesucht.
- Stefanie: Was würden Sie vorschlagen, welcher Begriff wäre passend?
- Shahida: Na, ich bin auch beschäftigt damit seit einiger Zeit, warum soll man, als ich in Deutschland war, und ich kam ganz neu an, sagten sie, aehm, das sind die Kinder von Arbeitern. Ich habe in einer Schule gearbeitet, und, ah, da sagten sie, das sind die Kinder von Arbeitern. Und mein Deutsch war ganz noch schwach und ich war ganz neu und da hab ich gedacht: Arbeiter? Aber arbeiten tun doch alle, das heißt, das sind Kinder von allen Menschen, aber warum werden sie die Kinder von Arbeitern genannt? Hier tut doch jeder arbeiten, in Deutschland, also im entweder Büro oder am Bau arbeiten. Das war dann auch sehr schwierig für mich. Also Arbeiterkinder und Lehrerkinder, und dann Arztkinder, diese Begriffe. Aber diesen Begriff gibt es nicht in Pakistan, Arbeiterkinder.
- Stefanie: Nicht diese Bezeichnung?
- Shahida: Das sind die Kinder, es sind, ich mein natürlich können sie sagen, das sind die Slumkinder, nur ist das aber extrem, aber sonst kenne ich das nicht, dass es in unserer Sprache so einen Ausdruck gibt.
- Stefanie: Sind die Begriffe die benutzt werden mehr positiv?
- Shahida: Ja.
- Stefanie: Ja?
- Shahida: Und das wollte ich sagen. Wenn in Indien und Pakistan die Menschen mit geistiger Behinderung sind, die wurden so angesehen, dass sie die, die Guru sind, oder die Gotteskinder sind. Die, die wurden auch so genannt. Allah Waalay, also Gotteskinder. Die wurden Allah Waalay genannt, dass sie innerlich, ahm, sehr viel Menschen mit Qualität sind. Und sie haben mit dieser materiellen Welt nichts zu suchen. Für sie ist nicht wichtig, was für Kleider sie anziehen, dass sie ein Haus bauen müssen oder für dieses Haus müssen sie Schulden nehmen und dann, dass sie ihr

ganzes Leben Schulden bezahlen müssen mit Zinsen. Ja.

Stefanie: Wann hat sich denn das geändert?

Shahida: Und dass sie ein Auto haben, kaufen müssen, ja und damit Respekt verdienen. Behinderte Mensch ist das nicht wichtig.

Stefanie: Wann hat sich denn diese Ansicht geändert?

Shahida: Wann?

Stefanie: Ja.

Shahida: Ich ... nee, ich meine, überhaupt, dass wenn ...

Stefanie: Oder ist das nicht wichtig, dass das immer noch gedacht wird, dass

Shahida: Das wird immer noch gedacht. Die werden so, ah, angesehen. Das hat nicht geändert. Sie sind, aehm, immer noch so angesehen, aber natürlich wie manche Eltern kommen, also zwei Familien, der eine lebt auch hier und seine Brüder fragten, wann kann er arbeiten oder ein Geschäft haben. Aber in Deutschland, in Hamburg haben die Eltern einen Versuch gemacht, dass ... sie haben mit Down-Syndrom Leute, mit Mongolen-Behinderten, eine Hotel angefangen. Die haben zehn Betten, oder so ungefähr, und da arbeiteten die behinderten Menschen.

Stefanie: Und das hat funktioniert?

Shahida: Die Eltern haben mitgeholfen.

Stefanie: Das hat sich aber nicht durchgesetzt? Fragt sich warum, warum sich so ein Konzept nicht durchsetzen kann.

Shahida: Das gibt es noch.

Stefanie: Ja, oder durchsetzen mehr erweitert werden kann, oder dass es kopiert wird.

Shahida: Ja, und dann kam die Frage, wie sie sagten, was soll die Gesellschaft machen? Die Gesellschaft soll es akzeptieren. Das ist genauso wie mit organic farming oder Biosachen. Die fragen bei Biogeschäft und die Leute sagen, oh, das ist teuer, deshalb kaufen wir nicht. Aber man muss sich viel Mühe geben, wenn man keine Chemie reintut. Mit verschiedene Schädlinge, die das Gemüse kaputt machen, dann können sie keine Chemiesprays machen. Damit ist es leichter, man muss viel arbeiten. Ah, und man will immer easy-going-Arbeit machen, na?

Stefanie: Das heißt, es braucht viel Aufwand.

Shahida: Ja. Und wo Aufwand ist, zum Beispiel jetzt möchte ich, ahm, für unsere zwei Betreuer, dass sie zwei kleine Wohnungen haben und die anfangen zu lernen selbst ihre Leben in Hand zu nehmen, aber sie können nicht in die Stadt ihre Haus nehmen. Das muss hier, in der Einrichtung, in der Roshni Einrichtung sein. Das ist eine kleine Wohnung, ein Zimmer mit kleiner Küche und Bad, und dass sie da leben, und dass sie da betreut werden. Und eine kleine Frau mit der, ahm, Körperbehinderung, ja, haben sie getroffen? Weil sie so klein ist, da denk ich für sie muss eine extra Küche sein, für ihre Größe, wo sie spülen kann, Wäsche waschen kann und kochen kann.

Stefanie: Ich kenne das von Montessori, ist das auch Teil von Waldorf? Diese Theorie, dass das auch an den Körper angepasst sein sollte?

Shahida: Ja, ja, die!

Stefanie: Und damit Tätigkeiten selbstständig ausgeübt werden können. Das heißt, was gibt es jetzt für Pläne? Wollen sie noch expandieren?

Shahida: Ja, ich möchte noch viel arbeiten und sehen, dass die Gesellschaft Freunde werden, dass sie, ... Jeder muss nicht, ah, Windel wechseln können von behinderten Menschen und mit denen Holzarbeiten machen. Aber dass sie diese Idee unterstützen. Auch moralisch, auch finanziell und auch zeitlich, dass sie denken, aha, ich geb' ein bißchen Zeit für diese Arbeiten, oder ich unterstütze diese Arbeit auf verschiedene Weise. Dass sie das, ahm, im Speziellen auch unterstützen, dann wird die Arbeit besser gedeihen und dass sie ... Diese Arbeit ist nicht zum Geld verdienen, eigentlich. Und dieses materielle Geld brauchen wir wegen, dann ist es schwer Mitarbeiter zu finden [unverständliche Passage]. Aber trotzdem, wir haben ganz liebe nette Menschen. Ahm, aber es braucht ganz viel und die Arbeit ist auch im Weg, so wie viele Sachen, auch wenn keine behinderte Frauen hier sind oder Kinder. In der Welt läuft nicht alles gut. Ich habe in Deutschland auch in einer Schule gearbeitet, wo ich hab' geweint abends, ah, als ich die Schicksale der Kinder und deren Biographie gehört haben, miterlebt habe, was für Eltern sie hatten, die, die ein Kind, der mehrere Tage nicht keine Windel gewechselt bekommen hat. Und wund hat er geschrien und die Nachbarn haben den Sohn da raus geholt. Das, ah, also ich habe sehr schwierige Kinder gehabt, da – wie sagt man? Alltagsstörende Kinder, das ist alles auch viel

gesellschaftlich. Aber der Mensch ist schwierig. Der ist auch sehr lieb, aber auch sehr schwierig.

Stefanie: Wie wahr, wie wahr! Ich danke ihnen.

Shahida: Ob sie behinderte Menschen sind oder nicht behinderte Menschen: ohne Liebe geht es nicht mit beiden. Und das, der Mensch ist nicht nur das Material. Wenn man sich das verdient, wenn man viel arbeitet, wird man geachtet, also wenn wird geachtet. Daher auch in meiner Einrichtung kämpfe ich. Der Gärtner, der den ganzen Tag in der Hitze und in Regen und in Kälte arbeitet, bekommt weniger Gehalt und ein Mensch der in Klimaanlage sitzt, weil er eine Uni besucht hat bekommt immer mehr Gehalt, weil er besser denken kann, anders denken kann, oder so. Aber das ist auch meine grosse Schwierigkeit. Ich würde es umgekehrt machen oder gleich. Aber das, ah, solche Sachen sind für mich sehr schwierig, aber ich denke, die Menschen, die ... Aber es ist ja für mich auch die Frage, vielleicht wenn gut, es gibt auch diese medizinische Sachen, ein Kind ist geboren mit Sauerstoffmangel und ist autistisch. Die Gehirnzellen sind gestorben, so ist er behindert. Aber ein Mensch wie unser Shafik, der mit uns wohnt, der sieht die Sachen anders. Aber es gibt auch viele Menschen, auch die Künstler sehen die Welt anders. Deshalb werden sie von der Gesellschaft nie akzeptiert, weil sie anders sehen, alles als Perspektive sehen sie anders. Sie denken, warum müssen Geld verdienen? Na, warum muss man ein grosses Haus haben? Warum muss man ein grosses Auto haben? Ich werde persönlich, ich hab auch kein Auto und ich würde mich schämen wenn ich ein großes Auto haben würde, wie dieser Land Rover. Wo es in der Welt so viel Armut gibt und für viele Menschen ist es schwierig und ich in so einem großen Auto sitze. Mein Mann und ich, wir haben auch große Haus gebaut hier, dass diese Menschen hier leben können. Also hier leben viele Menschen und es ...  
[Telefon läutet]

## **Abstract**

With every international policy framework comes the need to contextualise international recommendations contained and examine their implementation on the ground. This is true especially in the case of policies relating to persons with disabilities, as this category faces both exclusion at the level of formal discourse as well as barriers resulting from preconceived notions and stereotypes regarding disability. It can be argued that the sub-group that faces the greatest challenges within this category is that of women, who face dual discrimination as a result of their identities as women as well as persons with disabilities. In the case of Pakistan structural development constrains and a patriarchal social environment combine to aggravate the problems faced by women with disabilities in particular. As a member of various international organisations Pakistan is a signatory to many instruments that deal with persons with disabilities as well as with gender. As such, it is relevant to examine the extent to which the international politico-legal framework under which Pakistan operates, supports and influences national and local efforts in combatting the inequalities faced by persons, particularly women, with disabilities in the country. Through the critical examination of documents on the international and national level, as well as detailed interviews with relevant field actors operating in Pakistan this paper underlines the importance of an inclusive approach in international policy formulation as well as the importance of these policies in stimulating action on the government and civil society level in relation to women with disabilities. It is argued that the current status of women with disabilities in Pakistan is the result of a confluence of internal and external factors and as such, this research proposes that international commitments have to be reflected and translated in a more earnest way by decision-makers in Pakistan. Further, the communication and cooperation with and the inclusion of different stakeholders in program planning and implementation has to be increased, foremost women with disabilities and their organisations. Finally, it is the consolidated negative mindset regarding women and rigid social structures in Pakistan, which disqualifies women with disabilities from participating in all social spheres. Therefore, all efforts, internationally and nationally, including the civil society, have to consider an attitudinal change as an essential aspect of development in Pakistan.

## Zusammenfassung

Mit dem Erlass internationaler Abkommen geht die Notwendigkeit einher, die auf internationaler Ebene entwickelten Empfehlungen zu kontextualisieren und ihre konkrete Implementierung zu überprüfen. Diese Arbeit untersucht vor allem jene Policies, die sich auf Personen mit Behinderung beziehen, da diese Kategorie einer doppelten Exklusion ausgesetzt sind: Sowohl auf der Ebene des formalen Diskurses als auch durch Hürden, die sich durch Vorurteile hinsichtlich ihrer Behinderung stellen. Es wird behauptet, dass die Untergruppe, die innerhalb dieser Kategorie die größten Hindernisse zu überwinden hat, jene der Frauen ist, da diese mehrfachen Diskriminierungen ausgesetzt sind, welche sich zum einen aus ihrer Identität als Frauen zum anderen als Personen mit Behinderung ergibt. Im Falle von Pakistan werden die Probleme von Frauen mit Behinderung durch strukturelle Entwicklungsprobleme und ein patriarchales soziales Umfeld zusätzlich verstärkt. Als Mitglied zahlreicher internationaler Organisationen hat sich Pakistan zur Umsetzung einer Vielzahl von Verträgen und Instrumenten verpflichtet, die auf Menschen mit Behinderung und auf Genderfragen ausgerichtet sind. Es bedurfte daher einer Analyse des Ausmaßes, in dem der internationale politisch-rechtliche Rahmen, innerhalb dessen Pakistan agiert bzw. welcher nationale und lokale Bemühungen um die Reduktion von Ungleichheiten von Personen mit Behinderung, aber vor allem von Frauen, unterstützt und beeinflusst. Auf der Basis einer kritischen Untersuchung von relevanten internationalen und nationalen Dokumenten, sowie anhand von Interviews mit AkteurInnen, die in Pakistan vor allem in den Bereichen Gender und Behinderung agieren, unterstreicht diese Arbeit sowohl die Notwendigkeit eines inklusiven Zugangs innerhalb der Formulierung und Umsetzung internationaler und nationaler Policies als auch die Rolle der Policies als Stimulus um Bemühungen der Regierung und Zivilgesellschaft in Bezug auf Frauen mit Behinderung anzuregen. Auf dieser Grundlage schlägt diese Untersuchung vor, dass EntscheidungsträgerInnen in Pakistan internationale Verpflichtungen auf seriöse Weise zu reflektieren und umzusetzen haben. Weiters muss die Kommunikation und Kooperation mit bzw. die Einbindung von unterschiedlichen InteressensvertreterInnen in der Erstellung von Programmen und deren Implementierung forciert werden. Nicht zuletzt sind es festgesetzte negative Denkmuster über Frauen und die strengen sozialen Strukturen in Pakistan, die Frauen mit Behinderung davon abhalten, in allen sozialen Sphären zu partizipieren. Daher müssen alle Bemühungen, sowohl auf internationaler als auch auf nationaler Ebene, die Zivilgesellschaft miteinbeziehend, eine Veränderung von starren gesellschaftlichen Denkmustern als einen essentiellen Aspekt von Entwicklung in Pakistan in Betracht ziehen.

# Curriculum Vitae

**Stefanie ANDRUCHOWITZ**, born on 21 September 1981, Vienna (Austria)

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## EDUCATION

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2005 – present	Political Science Studies (Diplomstudium Politikwissenschaft), University of Vienna
2004 – 2010	International Development Studies (Individuelles Diplomstudium Internationale Entwicklung), University of Vienna
1996 – 2001	College for the Training of Nursery School Teachers (Bildungsanstalt für Kindergartenpädagogik), Vienna

## EXTRA- CURRICULAR ACTIVITIES

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2010	Head of Department Support for the first Muslim Jewish Conference in Vienna, Austria
2008	Delegate of the European Delegation representing Pakistan in the UNDP Committee at the Lahore Model United Nations Conference in Lahore, Pakistan
2007 – 2009	Elected Student Representative of the Student Council 'STV – International Development', University of Vienna, Austria
2006 – 2009	Member of the Student Council 'bagru.ie', University of Vienna, Austria

## PROFESSIONAL EXPERIENCE

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2009 – 2010	Project manager for the Citizen's Commission for Human Development in Lahore, Pakistan
2007 – 2009	Teaching Assistant at the University of Vienna
2007	Trainee at 'International', magazine for International Politics in Vienna, Austria
2007	Volunteer at ICYE – International Cultural Youth Exchange in Mexico for the project 'Comamos y Crezcamos con alegría' in Puebla, Mexico

## RESEARCH EXPERIENCE

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2010	Qualitative Research regarding Women with Disabilities in Lahore, Pakistan
2009	Quantitative Research regarding Violence Against Women in Punjab in Lahore, Pakistan

## PUBLICATIONS

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2010	<i>Report on the Status of Violence Against Women in Punjab, 2009</i> . Citizens' Commission for Human Development, Lahore.
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