

HOW WE IMPROVE THE SITUATION:

Improvement shall only be possible when we will work on each and every sector which prevents disability to its severe consequences. The following discussion highlights some of these areas.

1. Prevention:

The majority of disabilities are preventable. There are, however, a number of reasons why there is a failure to prevent disabilities in Pakistan. Although there are a number of policies aimed at preventing disabilities, there is no coherent coordination between the various government departments to ensure that these policies are properly carried out. Also, there are a number of areas in which policies should exist, but do not.

It is recommended that the Ministry of Health, in consultation with other relevant departments and the Directorate General of Special Education (DGSE), facilitate the development of a National Inter-Sectoral Disability Prevention Strategy that will set national norms and minimum standards for the prevention of disabilities.

2. Public Education and Awareness Raising:

One of the greatest hurdles disabled people face when trying to access mainstream programs are negative attitudes. It is these attitudes that lead to the social exclusion and marginalization of people with disabilities. Negative attitudes are continually reinforced. Disability is portrayed as a 'problem' People with disabilities are viewed as helpless and dependent; as ill and in constant need of care and medical treatment, or as tragic victims.

Culture plays an important role in the way we relate to people with disabilities. This contributes to the perception of people with disabilities as different or 'outsiders'. The changing of attitudes is not something that happens automatically or spontaneously. Attitude changing is a complex process which involves moving, in a series of stages, from one set of attitudes to another. Public education and awareness are central to the changing of attitudes.

3. Health Care:

Appropriate, accessible and affordable health services at primary, secondary and tertiary level are essential to the equalization of opportunities for people with disabilities. Such services should include general medical and nursing assistance on an in-patient, out-patient or community home care basis, and specialized health professional assistance.

4. Rehabilitation:

Access to appropriate rehabilitation services can make the difference between leading an isolated and economically dependent life and leading an economically independent life and playing an active role in society. The main policy objectives should be: to enable people with disabilities to reach and maintain their optimal physical, sensory, intellectual, psychiatric, and/or social

functional levels; to provide people with disabilities with the tools to change their lives and to give them a greater degree of independence; to prevent secondary disabilities or to reduce the extent of disability; to take into account the specific needs of different disability groupings.

5. Assistive Devices:

Assistive/rehabilitation technology enables individuals with disabilities to participate on equal terms. If people with disabilities are to access their rights and responsibilities and participate in society as equal citizens, they must have access to appropriate and affordable assistive devices. The production, supply and maintenance of assistive devices are presently uncoordinated. Imported devices are steeply taxed, making them very expensive. Initiatives to develop appropriate and affordable assistive technology have, to date, taken place in isolation from general technology development (i.e. they are aimed at a 'special market'), with very little participation by consumers, or collaboration between the various sectors and agencies.

With the assistance of modern technology, products should be developed for use by people with a range of different disabilities. The aim should be to reduce costs by producing for a larger market. This may require greater standardization of products.

6. Barrier Free Access:

The way in which the environment is developed and organized contributes, to a large extent, to the level of independence and equality that people with disabilities enjoy. There are a number of barriers in the environment which prevent disabled people from enjoying equal opportunities with non-disabled people. For example:

structural barriers in the built environment; inaccessible service points; inaccessible entrances due to security systems; poor town planning; and poor interior design. It is recommended that the Department of Public Works, in consultation with the National Environment Protection Agency (NEPA) and other stakeholders, develop national guidelines and minimum norms and standards with regard to barrier-free access.

7. Transport:

There is a need for rapid progress in developing a public transport system that is flexible and accessible. Without this, people with disabilities will continue to remain largely 'invisible' and unable to contribute to, or benefit from, the services and commercial activities available to most of their fellow citizens. Given the fact that the ability to use services, or attend school or work, is largely dependent on the ability of people to get there, the lack of accessible transport is a serious barrier to the full integration into society of people with disabilities.

Although the major airports in Pakistan have introduced extensive upgrading projects to make their facilities more user-friendly, smaller provincial and regional airports still remain extremely discriminatory against disabled commuters. This is, in part, due to a lack of information on national guidelines and minimum standards and norms. The larger airlines have introduced personnel training programs to facilitate a more sensitive service from airline staff.

8. Communications:

Sign Language is the first and natural language of Deaf people, whatever the spoken language of his or her hearing parents may be. Sign Language is the central focus of Deaf people's human rights. It is important to note that Sign Language is a language in its own right, with its own grammar and syntax. Sign Language uses the modality of space, in contrast with the spoken language which uses the modality of sound. There are several regional variations of Sign Language in Pakistan.

Special Language Systems/Augmentative and Alternative Communication refer to any mode of communication used by people who cannot use a spoken or sign language. They include Braille, touch, Bliss symbols or other means of communication.

Interpreter services are linked closely to the communication needs of Deaf people and people with limited or no speech. These services enable them to communicate freely with society, and are an essential element in the achievement of equal opportunities for people with communication disabilities. They include Sign Language interpreters, lip speakers