

Status of Physical education services for PWDs in Pakistan

Although there is no widely accepted definition of persons with disabilities, two definitions can be found in the National Policy for Special Education in Pakistan: “Disability” means the lack of ability to perform an activity in a manner that is considered to be normal. A person with disabilities means a person who, on account of injury, disease, or congenital deformity, is handicapped in undertaking any gainful profession or employment, and includes persons who are visually impaired, hearing impaired, and physically and mentally disabled.

The 1998 Population Census defined the term disability as, any restriction or lack (resulting from an impairment) of the ability to perform an activity in the manner and within the range considered normal for a human being. Impairment means any loss or abnormality of psychological, physiological or anatomical structure or functional”.

According to the census for 1998, there are 3,286,630 people with disability constituting 2.54 per cent of the population (Bureau of Statistics, 1998). The figure is underestimated, as the definition of disability did not include moderate and mild disability. Data collectors for the census were not trained to identify and classify all forms of disability.

Services for PWDS Persons

To date in Pakistan, services for disabled people have been based on an understanding of disability as individual pathology, the disabled person being seen as a problem to be corrected. Disability as malfunction has since grown to be seen as a specialized health problem, at the heart of which is an emphasis on clinical diagnosis. Consequently the aim of medical rehabilitation is to assist the individual to be “as normal as possible”.

In traditional societies such as Pakistan where education is low and economic development has not taken off, any disability among household members is normally concealed, especially disabilities acquired from birth or those developed soon thereafter. Intellectual disabilities and physical deformities are perceived as stigmata since their existence could jeopardize the “family name”, which becomes especially important in societies with extended families.

Another reason why family events relating to disabilities are concealed relates to the “exchange” phenomenon in marriages, especially on the bridegroom’s side. The fear that other children in the family concerned may also carry genes which could adversely affect their progeny means that parents often will not reveal that such a person exists in the family, since it would be difficult for them to find spouses for their other, non-disabled children. Such fears are much greater for families that are socially mobile or who have a relatively higher social status.

In societies lacking social norms and institutions that should provide family support in terms of the socialization and rehabilitation of persons with disabilities, families are put under extra pressure owing to the heavy demands on their time to make up for this lack of support. A child born in a community where such beliefs exist is at risk in a number of ways. A disabled child is more likely to face extreme negative attitudes at birth and this increased risk for ignorance reappears throughout the life span. This behavior compounds already existing social, educational and economic marginalization that limits the lives and opportunities of these children. For example, disabled children are far less likely than their non-disabled peers to be included in the social, economic and cultural life of their communities; only a small percentage of these children will ever attend school; a majority of street beggars are disabled children. Disabled children living in remote and rural areas may be at increased risk. In societies and including Pakistan where there is stigma against those with disability, research indicates that some parents respond with ignorance because of the shame the child had brought on the family or respond with violence because a lack of social support leads to intense stress within the family.

In Pakistan as a general practice, the child is kept home to ensure his or her own safety, as parents fear that the child may be struck by a cart or abused by someone in the neighborhood. When it comes to convincing Pakistanis that special education is important, especially the rural poor, the key individuals that arguments must be targeted to our parents. Parents must be persuaded that special education is valuable and necessary for their children with special needs.

Mostly in Pakistan, Disabled children are often kept in environments that can only be described as inhumane. Institutions for disabled children are often at the bottom of government priority lists and lack adequate funding, consistent support or oversight from government or civil society. Institutions are often overcrowded, unsanitary and suffer from lack of both staff and resources which lead directly to avoidable suffering and below the growth standards. Disabled children frequently

receive no formal education or low quality education, their working lives often begin earlier than those of their nondisabled peers.

Conclusion:

Parents must be persuaded that special education is valuable and necessary for their children with special needs. Societies must take care of special person as they are part of our lives.