

**NATIONAL PLAN OF ACTION  
2006  
TO IMPLEMENT  
THE NATIONAL POLICY FOR PERSONS  
WITH DISABILITIES**



Government of Pakistan  
Ministry of Social Welfare and Special Education  
(Directorate General of Special Education)  
Hanna Road, G-8/4, Islamabad.

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## FOREWORD

The overall vision of the first ever National Policy for Persons with Disabilities, 2002 is to provide by the year 2025 an enabling 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. For effective implementation of this Policy, a National Plan of Action 2006 has been formulated through a consultative process involving all stakeholders.

2. Major thrust areas of the National Plan of Action 2006 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.

3. The success of the National Plan of Action 2006 requires a strong commitment on the part of the Federal, Provincial and local governments, non-government organizations, international organizations and institutions at all levels. Additionally the most efficient and effective implementation of the National Plan of Action 2006 requires adequate mobilization of resources at all levels as well as new and additional resources from all available funding mechanisms, including multilateral, bilateral and private sources.

4. While we are committed to implementing the National Plan of Action 2006 in its true spirit, I urge the United Nations system, regional and international financial institutions, other relevant regional and international organizations, and all sectors of civil society to fully commit themselves and contribute to the implementation of this National Plan of Action 2006.

5. Let us dedicate ourselves unreservedly to addressing the constraints and obstacles the special persons are confronted with and thus enhancing further their advancement and empowerment through our whole hearted actions in the spirit of determination, hope, cooperation and solidarity, now and to carry us forward in the years to come.

March 30, 2006

**MS. ZOBAIDA JALAL**  
FEDERAL MINISTER  
SOCIAL WELFARE & SPECIAL EDUCATION

**Government of Pakistan**  
**Ministry of Social Welfare and Special Education**

**National Plan of Action**  
**2006**  
**to implement the**  
**National Policy for Persons with Disabilities**

The National Plan of Action (NPA) responds to the approved National Policy for Persons with Disabilities 2002 and is based on the findings of the situation analysis conducted between March to May 2004. This strategic plan has been developed after holding detailed individual and group consultations with over 100 governments, NGO and private sector stakeholders at federal and provincial levels, a few in-house meetings, a National Consultation attended by more than 100 stakeholders including government and non-governmental organizations and more importantly, by incorporating the Actions required to achieve Targets given in the UN-ESCAP's document titled "Biwako Millennium Framework for Action towards an inclusive, barrier-free and rights-based society for persons with disabilities in Asia and the Pacific" to which Pakistan is signatory. This NPA is more focused for actions to be taken in next five years. However, recommendations upto 2025 have been made.

The NPA is based on the philosophy that access, inclusion and equalization of opportunities for Persons with Disabilities (PWDs), which form 2.49% of population of the country, according to 1998 census, cannot be achieved by isolated interventions. The services are therefore to be designed in an integrated manner with the goal of full inclusion. Investments in PWDs cannot be realized if services are unable to work in a coordinated manner. To meet the philosophy, funds will have to be mobilized through several sources. Furthermore, the goal will only be met by extending the services to the rural areas (where two-third of the disabled live) that are currently neglected.

The areas for action to implement the NPA are:

1. Determining the extent of disabilities and distribution of causes.
2. Improving prevention of injuries, deficiencies, diseases and other factors known to cause disabilities.
3. Mobilizing early detection and intervention.
4. Escalating the medical rehabilitation services.
5. Strengthening of Special Education for children with severe and moderately severe disabilities.
6. Promoting Inclusive Education for children with Special Education Needs (SEN).
7. Women with Disabilities.

8. Access to information and communication, including Information, Communication and Assistive Technology.
9. Expanding and reinforcing vocational training, employment (including self-employment) and economic rehabilitation.
10. Poverty alleviation through capacity building, social security and sustainable livelihood programmes.
11. Legislative support for PWDs.
12. Creation of Barrier-free physical environment.
13. Raising public acceptance and improving social integration and environment.
14. Sports for PWDs.
15. Boosting capacity for production and supply of prosthetics, orthotic and assistive aids and other supporting items and facilitation in duty free imports.
16. Increasing support to the NGOs for Service Delivery in Rural Areas.
17. Linkages at Federal, Provincial and District level.

Implementation of the NPA is an inter-sectoral and inter-departmental activity. Therefore, in order to **effectively implement** the above 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. The detailed Action Plan therefore is based on actions/activities relevant to the below mentioned organizations, along with the given time frame for their achievement. While doing so, necessary funds shall have to be generated by these organizations themselves to implement the activities envisaged.

**Action 1: Determining the Extent of Disabilities and Distribution of Causes.**

<b>Goal/Outcome</b>	Accurate assessment of magnitude of the problem and the causes of disabilities at district level for efficient planning and effective implementation of disability services.
<b>Identified Barriers:</b>	The available data on PWDs are not accurate and distribution of causes is not determined.
<b>Performance Indicators</b>	Reliable mechanisms instituted for collection of district level information.

Short Term Steps (July 2006-June 2009)	Responsibility	Timeframe
1.1 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. However till new data / statistics are compiled at National level, the present statistics provided through National Census 1998 be adopted.	MoSW&SE and MoH with WHO's Technical Support.	July 2006 - December 2006.
1.2. Sample surveys are conducted in selected districts, based on standardized definitions to determine the distribution of causes and extent of the disabilities.	DGSE, PMRC / Federal / Provincial Bureau of Statistics through professional firms.	January, 2007 - June, 2007.
1.3. Databanks on disability be established at Federal Provincial and District level, which should include statistics on causes, types and frequencies of disabilities, as well as available services and programmes.	Federal and Provincial Bureau of Statistics.	July 2007 onwards.
1.4 Data generated to be disseminated by posting on the web, through Associations of persons with disabilities and actively sharing with the government and NGOs officials working for the programme.	DGSE / NLRC	January 2008 onwards.
1.5. Carefully designed modules based on "International Classification of Functioning, Disability & Health" (ICF) be introduced in National Population Census and other public sector household surveys.	DGSE, FBS and PCO.	January 2008 onwards.

**Action 2: Improving prevention of injuries, deficiencies, diseases and other factors known to cause disabilities.**

<b>Goal/Outcome</b>	Reduction in incidence of disabilities through primary and secondary prevention.
<b>Identified Barriers:</b>	The current programme has no role or linkage with prevention programmes.
<b>Performance Indicators.</b>	Formal inter-sectoral linkages are established at all programme levels.

Short Term Steps (July 2006-June 2009).	Responsibility	Timeframe
2.1 Amicable collaborative efforts with MOH <u>will</u> be initiated to strengthen current disability prevention programmes and take new initiatives: <ul style="list-style-type: none"> <li>➤ Measles Immunization</li> <li>➤ IDD Control</li> <li>➤ Iron Supplementation</li> <li>➤ Training of skilled birth attendants</li> <li>➤ Genetic Counseling at Teaching and other Hospitals.</li> </ul>	MOH / DGSE / Provincial Health Departments.	July 2006 onwards.
2.2 Strengthening of the Expanded Programme of Immunization (EPI) to include routine immunization against diseases like polio, measles, mumps and rubella.	MoH and Provincial Health Departments.	July 2006 onwards.
2.3 Improvement of MCH services through extensive training of birth attendants enhanced emergency and obstetric care and rational drug use.	MoH and Provincial Health Departments.	July 2006 onwards.
1.0 Prevent genetic disabilities (especially those related to cousin marriages) through genetic counseling on risks and enhanced family life education.	MoH and Provincial Health Departments.	July 2006 onwards.
2.0 Improvement of nutritional status through introduction of programmes for fortification and supplementation of nutrition such as iron, iodine and Vitamin A and D.	MoH and Provincial Health Departments.	July 2006 onwards.
2.6 Award severe punishment on preparation and sale of low quality and the expired drugs.	MoSW & SE, MoH, and Prov. Health Departments.	July 2006 onwards.
2.7 Award punishment to un-qualified and qualified Health Practitioners whose negligence leads to disability.	DGSE, MoH and Prov. Health Departments.	July 2006 onwards.
2.8 Strict legislation and its enforcement to eliminate quackery to check proliferation of disability.	MoH, MoL&PA, Provincial Health Departments / District Govts.	July, 2007 onwards.
2.9 Plan and conduct in collaboration with Associations of disabled and NGOs working for disabled, a series of seminars and workshops in schools and colleges on prevention of disabilities, both in rural and urban areas.	DGSE, MOH, Provincial Health Departments / District Governments.	January 2008 (after survey of causes of disabilities).

2.10 Vigorously pursue strict enforcement of relevant road safety laws such as those for use of helmet, car seat belt, use of mobile phone during driving, prohibition for use of pressure horns etc.	DGSE, MoC, MoI, Provincial Home Departments, Traffic Police.	July 2006 onwards.
2.11 Observe high standards for grant of driving licenses of public transport including age limit 18, qualification at least matriculation and medical fitness.	DGSE, MoC, MoI, Provincial Home Departments, and Traffic Police.	July 2006 onwards.
2.12 Award severe punishment, including cancellation of driving license, in case of negligent driving. Killing of person(s) in road accident should be a non-bail able offence, particularly for commercial vehicles.	DGSE, MoC, MoI / Provincial Home Departments, and Traffic Police.	July 2006, onwards.
2.13. Arrange to compensate through Transporters to the persons who become disabled on account of accidents during traveling.	DGSE and MoC	July 2006, onwards.
2.14 Local manufacturers of automobiles should be asked to make specialized vehicles/three wheelers for all four categories of the PWDs these vehicles should be available in the market. In cases where a specialized vehicle is required by the PWD the manufacturer should possess the requisite facility to make it.	DGSE in coordination with Ministry of Commerce and Ministry of Industry.	July, 2006 onwards.
2.15 Observe high standards regarding fitness of public transport on road.	DGSE, MoC, MoI / Provincial Home Departments, NHA and Traffic Police.	July, 2006.
2.16 Improve roads condition for the benefit of PWDs and public at large and specific arrangements like wheel chair crossing point, special signal for Persons with Disabilities crossing shall be made at busy intersections in urban areas.	DGSE, MoC, MoI / Provincial Home Departments, NHA, Traffic Police.	July 2006 onwards.

2.17 Introduce disability prevention as a subject of training for boy scouts and girl guides all over the country at district level.	DGSE, Girl Guides, Boy Scouts Associations and District Governments.	January 2007 onwards.
2.18 Implement programmes to raise public awareness of consequences of violence against women and children that lead to disabilities.	NCCWD and Human Rights Agencies.	July, 2006 onwards.
2.19 Initiate Family Counseling and Guidance programme for awareness about disability related issues.	DGSE, MoSW&SE, MoH, Provincial Health Deptts. and Distt. Govts.	July, 2006 onwards.
2.20 Provide earplugs and moulds made of silicon to the workers to protect them from noise of the machinery.	MoL&MP, Provincial Labour Deptts. and Factories / Industrial Units.	July, 2006 onwards.
<b>Long Term steps (July 2009-June, 2025)</b>	<b>Responsibility</b>	<b>Timeframe</b>
2.21 Forcefully advocate the implementation of Occupational Health and Safety (OHS) laws in industries in both formal and informal sectors, particularly those that are hazardous.	DGSE, MoL, Provincial Labour Departments and Trade Unions.	July 2009 onwards.
2.22 Vigorously, pursue the Mental Health Ordinance 2001, which has a potential in significantly impacting psychiatric impairments.	DGSE, MoH, Provincial Health Departments, NGOs.	July 2009 onwards.
2.23 Conduct studies / Research on cousin marriages and on genetically transmitted eye diseases and if confirmed as responsible factor, may be publicized for public awareness.	MoH, Provincial Health Departments and District Governments.	January 2007 onwards.

**Action 3: Mobilizing Early Detection and Intervention.**

<b>Goal/Outcome</b>	Minimize the incidence and impact of disabilities.		
<b>Identified Barriers:</b>	Early detection and interventions are being carried out at a minimal level in public and NGO sectors.		
<b>Performance Indicators.</b>	Enhanced rates of early detection and intervention in public service delivery system and NGO centres.		
<b>Short Term Steps (July 2006-June 2009)</b>		<b>Responsibility</b>	<b>Time frame</b>
3.1 Make arrangements for earliest possible detection of disabilities and institution of interventions without any loss of time. Special arrangements should be made to strength the school health services for early detection of physical, mental and learning disabilities in young school children and also to monitor immunization status of children with special emphasis on rural primary and secondary schools.		MoH and Prov. Health Departments.	July 2006 onwards.
3.2 Arrange increased access to Health facilities, especially in the rural areas.		MoH and Prov. Health Departments.	July 2006 onwards.
3.3 Arrange increased knowledge and awareness about disabilities and their prevention.		MoH and Prov. Health Departments.	July 2006 onwards.
3.4 Increase in the number of teams of specialists (eye, ear, orthopedics etc) to foster a multi-professional approach and also to improve screening measures.		MoH and Prov. Health Departments.	July 2006 onwards.
3.5 Arrange increased awareness of community-based workers (LHWs, CBWs, Teachers, TBAs and community nurses) about disabilities, their causes and prevention.		MoH and Prov. Heath Departments.	July 2006 onwards.
3.6 Formulate referral protocols for all health care providers.		MoH and Prov. Heath Departments.	July 2006 onwards.
3.7 Expand training opportunities for multi-disciplinary teams (like speech, occupational, physiotherapy, clinical psychology and learning disorders etc).		MoH and Prov. Heath Departments.	July 2006 onwards.

3.8	Develop rehabilitation centres at DHQ hospitals with services like speech, occupational, physiotherapy, clinical psychology and learning disorders etc.	MoH and Prov. Heath Departments.	July 2006 onwards.
3.9	Develop referral system and service delivery points at DHQ hospital level.	MoH and Prov. Heath Departments.	July 2006 onwards.
3.10	Establish Institutes for handicapped at least in one provincial teaching hospital and link it with the National Institute of Handicapped, Islamabad.	MoH and Prov. Heath Departments.	July 2006 onwards.
3.11	Establish Rehabilitation Medicine Departments in every teaching hospital.	MoH and Prov. Heath Departments.	July 2006 onwards.
3.12.	Courses be developed / adapted for refresher trainings for on-the-job teachers / Lady Health Workers, etc.	DGSE, MoH, MoE and Prov. Edu. Deptts.	July 2006 onwards.
3.13	NGOs who have demonstrated successful implementation of out-reach and mobile services in early detection and intervention, finding difficulty to reach such areas should be financially supported for further expansion.	NTD, Prov. SW & SE Depts. & District Governments.	July 2006 onwards.
3.14	Modules be developed and in-service training of pediatricians, psychiatrist, clinical psychologists and speech therapist on "Early Childhood Development" (ECD) be initiated at DHQ Hospitals.	DGSE, MoH, Prov. Health Departments.	July 2006 onwards.
3.15	Initiatives being taken in the private sector for training of medical and paramedical staff on ECD, be evaluated and if feasible be supported for countrywide expansion.	DGSE, MoH & NGOs	January, 2007.
3.16	A course focusing early detection should be developed in collaboration with NGO sector and incorporated in the curriculum of regular B. Ed and M.Ed. courses.	DGSE, MoE, MoH and Prov. Health Departments.	January 2007
3.17	DHQ Hospitals be strengthened to provide early intervention with necessary trained staff and provision of assistive aids including orthotics and prosthetics.	Prov. Health Departments.	July 2007
3.18	Initiate establishment of referral services delivery points and propagate at district level.	District Governments / DHQ Hospitals.	January 2008.

Long Term Steps (July 2009- June 2025)	Responsibility	Timeframe
3.19 Early Childhood Development (ECD) be incorporated in the curricula of para- medical, nursing and medical colleges.	DGSE, PMDC & PNC	July 2009 onwards.
3.20 Training of Medical Officers, LHVs, LHWs at Rural Health Centres and Basic Health Units on Early Childhood Development be planned and conducted.	DGSE, MoH, Prov. Health Deptts. and District Govts.	July, 2009 onwards.
3.21 Modules for LHWS be developed and provided training in screening early childhood development delays. (Should be conducted in those areas where doctors at BHU, RHC and consultants at DHQ have been trained).	DGSE, MoH, WHO.	January 2012 onwards.

**Action 4: Escalating the Medical Rehabilitation Services.**

<b>Goal/Outcome</b>	Provision of timely and effective medical rehabilitation services for people disabled by disease, injury or congenital impairments.
<b>Identified Barriers:</b>	At present, mainstream government led system is not fully geared and hence does not contribute its full potential in addressing the issue.
<b>Performance Indicators.</b>	A specialized network of medical rehabilitation services is established at district level in next 10 years.

<p style="text-align: center;"><b>Short Term Steps (July 2006 - June 2009)</b></p>	<p style="text-align: center;"><b>Responsibility</b></p>	<p style="text-align: center;"><b>Timeframe</b></p>
<p>4.1 Criteria for various levels of rehabilitation services (Basic and Comprehensive) should be established in consultation with professionals in the field. After the massive earth quake that has lead to creation of a large disabled population in the country, it is of utmost importance that establishment of paraplegic centre for care and rehabilitation of paraplegics be taken up on urgent basis. This should include their physical, vocational and social rehabilitation.</p>	<p>RMD, Mayo Hospital, Lahore / AFIRM / NIH / DGSE.</p>	<p>July-06 December 2006.</p>
<p>4.2 Departments of Orthopaedic at DHQ Hospitals be expanded to minimally provide basic medical rehabilitation services.</p>	<p>Prov. Health Departments, DHQ Hospitals.</p>	<p>January, 2007 onwards.</p>
<p>4.3 The NIHD be restructured and reorganized to serve as rehabilitation medicine training centre for various disciplines. The current courses offered by it be upgraded for accreditation nationally or externally.</p>	<p>MoH, CPSP and DGSE.</p>	<p>January- December 2007.</p>
<p>4.4 At provincial level, at least one institute should be identified and strengthened for training of paramedics for medical rehabilitation.</p>	<p>DoH and DGSE</p>	<p>July 2006 - June 2009</p>
<p style="text-align: center;"><b>Long Term Steps (July 2009 - June 2025)</b></p>	<p style="text-align: center;"><b>Responsibility</b></p>	<p style="text-align: center;"><b>Timeframe</b></p>
<p>4.5 Steps should be taken to establish "Rehabilitation Medicine" departments in all public and private teaching hospitals.</p>	<p>MoH, CPSP &amp; DGSE.</p>	<p>July 2009 to December 2020.</p>
<p>4.6 Steps should be taken to ensure that ENT Departments in hospitals are adequately equipped for hearing assessment facilities.</p>	<p>MoH and Prov. Health Departments.</p>	<p>July 2009 to December 2020.</p>

**Action 5: Strengthening of Special Education for Children with Severe and Moderately Severe Disabilities.**

<b>Goal / Outcome:</b>	All children with SEN have opportunity for quality education from kindergarten to class 10 level and develop fullest capacity for economic and social integration that promotes self confidence and empowerment*	
<b>Identified Barriers:</b>	About 1-2% children with disabilities have access to commensurate SE centers (SEC). Rural children have no access to SEC.	
<b>Performance Indicators:</b>	By year 2025 all children with SEN have access to quality educational services.	
*An important point to note is that it has been assumed that severely handicapped and moderately severely handicapped children will continue to require special education centres, while moderately handicapped and mildly handicapped can acquire inclusive education in regular schools. Hence, it is proposed to work in both directions, i.e. increase the number of SECs and also promote inclusive education.		
<b>Short Term Steps (July 2006 - June 2009)</b>	<b>Responsibility</b>	<b>Timeframe</b>
5.1 Define criteria for classifying the degree of disability into four categories such as profound, severe, moderate and mild.	DGSE, MoH and NIH.	December, 2006
5.2 Develop assessment and diagnostic tools for assessment of type and extent of disability.	DGSE, MoH and NIH.	December, 2006.
5.3 Formulate National Curriculum Committee on Disability (NCCD) for standardizing disability specific curricula for education and diploma courses.	DGSE / NISE and MoE / BoE.	December, 2006
5.4 NLRC be developed on modern lines.	DGSE	December, 2006
5.5 Establish chapters in provinces in collaboration with professional institutions on the pattern of NISE.	NISE / DGSE	January - December 2007
5.6 Improve in service training courses for SEC teachers. Further, training needs assessment be conducted and training programmes duly recognized and accredited be developed.	NISE / DGSE and similar training Institutions of Provinces.	July - December 2007.

5.7 Evaluate and if necessary prepare / revise syllabus in consultation with concerned boards of education and examination.	NISE / DGSE and BoE / MoE.	July - December 2006.
5.8 Introduce a separate curriculum on Disability in the Training Schools for teachers to overcome acute shortage of SE teachers.	DGSE / MoE / Prov. Edu. Deptts.	July - December 2006.
5.8 Mechanism for monitoring and follow up of teachers be instituted for ensuring quality education.	NISE / DGSE and similar Training Institutions of Provinces.	July 2006 onwards
5.9 Curricula of masters level courses offered by the universities be updated, periodically. Further, laboratories and model schools be established (or formally linked with existing SECs).	HEC, Universities and DGSE.	January 2006-June 2009.
5.10 The serving faculty members in Department of SE in Universities be sent abroad for higher education to acquire state-of-the-art knowledge and skills.	HEC, Universities and DGSE.	July 2006 onwards.
5.11 Information sharing conferences be held at national / provincial / district level, periodically.	DGSE, Provincial and District Governments.	July 2006 onwards.
5.12 Up-grade SECs from primary level onwards, incrementally.	DGSE, Provincial SE Departments.	January 2007
5.13 Researches be conducted to strengthen the programme. Provide small grants to students of departments of special education, sociology, social works, anthropology, psychology, public health etc. for this purpose.	DGSE, HEC, Provincial Governments / District Governments and Universities.	July 2007 onwards.
<b>Long Term Steps (July 2009-June 2025)</b>	<b>Responsibility</b>	<b>Timeframe</b>
5.14 SECs under management of DGSE located in districts to function as model centres for replication by the respective district government.	DGSE, District Governments.	July-December 2009

5.15 Certificate / diploma course in special education be initiated at provincial level to meet the increasing demand of SE teachers.	NISE / DGSE and Provincial Governments.	July 2010 onwards
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**Action 6: Promoting inclusive Education for Children with Moderate and Mild Disabilities.**

<b>Goal /Outcome</b>	Inclusive Educational opportunities are available to large number of children with moderate and mild level disabilities from kindergarten to class 10 in cost effective ways.	
<b>Identified Barriers</b>	Regular schools are not geared to accommodate children with special needs.	
<b>Performance indicators.</b>	All regular schools have provision for children with special needs.	
<b>Short Term Steps (July 2006-December 2009)</b>		
	<b>Responsibility</b>	<b>Timeframe</b>
6.1 Enact legislation, with enforcement mechanism, to mandate education for all children, including children with disabilities, to meet the goals of the Dakar Framework for Action and the millennium development goal of primary education for all children by 2015. Children with disability need to be explicitly included in all national plans for education, including national plans on Education for All of the Dakar Framework for Action.	MoE and DGSE / MoSW & SE.	July 2007 onwards.
6.2 On issuance of a written policy on Inclusive Education, introduce the required shift in admission policy through incorporation of a system of assessment for placement of CWDs.	MoE	January, 2007 onwards.
6.3 Amendment be made in curriculum including textbooks and methodologies for facility of children with SE needs.	MoE	January, 2007 onwards.
6.4 Develop a mechanism governing education, evaluation and examination system for children with SE needs.	MoE	January, 2007 onwards.
6.5 Review existing curriculum of teachers training at all levels to ensure incorporation of inclusive education as an integral component of the training modules and also increase such training opportunities.	MoE	January, 2007 onwards.

6.6 Working group representing M/O Education and M/O Social Welfare and Special Education be formed to progress in the direction of Inclusive Education.	MoE and DGSE / MoSW & SE.	January, 2007 onwards.
6.7 Initiate modifications in physical environment of regular schools to make them accessible for special children.	MoE, Provincial Edu. Deptts. and District Governments.	January 2007 onwards.
6.8 Arrange adequate accommodation in normal school buildings to manage mainstream education.	MoE, Prov. Education Departments and District Govts.	January 2007 onwards.
6.9 Sensitization, orientation and training of regular school teachers on special educational needs of children with disabilities.	MoE, Prov. Education Departments and District Govts.	July 2007 onwards.
6.10 Provision of resource material and specialized aids in selected districts to be followed by wider expansion.	District Governments.	July 2007 onwards.
6.11 Arrange incremental provision of IE in regular schools from kindergarten to class 10.	MoE, Prov. Edu. Deptts. and Distt. Govts.	July 2007 onwards.
<b>Long Term Steps (July 2009-June 2025)</b>	<b>Responsibility</b>	<b>Timeframe</b>
6.12 At least one Inclusive Education unit per Union Council and one Special Education Unit at Tehsil level along with hostel facilities be established by Provincial/District governments or NGOs over a period of 5 years, wherever required.	DGSE, Provincial Governments / District Governments / NGOs.	July 2010-December 2025

**Action 7: Women with disabilities.**

<b>Goal/Outcome:</b>	Women with disabilities have a role to play for their betterment, through sport services.
<b>Identified Barriers:</b>	They have presently no access to the existing programmes/services, both in public and private sector.
<b>Performance Indicators:</b>	Programmes are prepared/implemented associating women with disabilities at every stage of development, preparation and implementation.

Short Term Steps (July 2006-December 2009)	Responsibility	Time-frame
7.1 Take measures to uphold the rights of women with disabilities and to protect them from discrimination. Measures in particular be taken to ensure equal access of them to health services, education, training and employment. Also to implement programmes to raise public awareness of consequences of violence against women and children that lead to disabilities.	MoSW & SE and MoWD, NGO's SHOs and Human Rights Agencies.	July, 2007 onwards.
7.2 Implement programmes to raise the public awareness of the situation of women with disabilities and promote positive attitudes, role models and opportunities for their development.	MoSW & SE, MoWD, NGOs and SHOs.	July, 2007 onwards.
7.3 Facilitate establishment of a mechanism at the regional, national and sub-regional levels to disseminate relevant gender-related information among women with disabilities. The information should include, but not be limited to, international documents and information on national legislation.	MoSW & SE and MoWD.	July, 2007 onwards.
7.4 Ensure that women with disabilities are represented at the local, national and regional levels of the organizations.	MoSW & SE, MoWD, NGOs and SHOs.	July, 2007 onwards.
7.5 Self-help organizations to ensure that women with disabilities constitute at least half of their delegations at meetings, workshops and seminars.	NGOs and SHOs.	July, 2007
7.6 Women with disabilities be encouraged to take part in and be given priority in receiving training opportunities in managerial and general subjects provided by the government institutions and self-help organizations.	MoSW & SE, MoWD, NGOs and SHOs.	July, 2007
7.7 Government, NGOs, self-help organizations and donors to provide leadership training for women with disabilities to raise their awareness at all levels of self-help organizations of PWDs and in advocacy and consultative roles with Government and in civil society.	MoSW & SE, MoWD, NGOs and SHOs.	July, 2007 onwards.

7.8	Women with disabilities to form self-help groups within self-help organizations and form national and regional networks as a means of support and of disseminating and sharing information.	MoSW & SE, MoWD, NGOs and SHOs.	July, 2007 onwards.
7.9	Groups and networks of women with disabilities to promote development of girls with disabilities with particular emphasis on access to education, health information, training and social development.	NGOs and SHOs.	July, 2007 onwards.
7.10	National and regional groups and networks of women with disabilities to advocate to mainstream women's groups for the inclusion of women with disabilities, their self-help groups and concerns into the organizations and networks of mainstream women's groups, for information dissemination and supports.	MoSW & SE, MoWD, NGOs and SHOs.	July, 2007 onwards.
7.11	Mainstream women's organizations to specifically include women with disabilities in their training programmes by providing accessible venues, arrangements and support as well as training materials in accessible formats.	MoSW & SE, MoWD, NGOs and SHOs.	July, 2007 onwards.
7.12	All agencies, including Governments, NGOs, self-help organizations, donors and civil society must promote and uphold at all times the rights of women with disabilities to choice and self-determination.	MoSW & SE, MoWD, NGOs and SHOs.	July, 2007 onwards.
<b>Action 8:</b>	<b><u>ACCESS TO INFORMATION AND COMMUNICATION, INCLUDING INFORMATION, COMMUNICATION AND ASSISTIVE TECHNOLOGY.</u></b>		

<b>Goal / Outcome</b>	PWDs have information and are able to apply knowledge on Information Communication and Assistive Technology.
<b>Identified Barriers</b>	Presently PWDs have no or a very limited knowledge/information on this important field of Information Communication and Assistive Technology.
<b>Performance indicators.</b>	Programmes are developed and implemented whereby PWDs start applying knowledge gained in their routine activities.

Short Term Steps (July 2006-December 2009)	Responsibility	Timeframe
8.1 Promulgate and enforce laws, policies and programmes to monitor and protect the right of PWDs to information and communication; for instance, legislation providing copyright exemptions (when admissible) to organizations which make information content accessible to persons with disabilities, under certain conditions.	MoSW & SE and MoIT.	July. 2007 onwards.
8.2 Set up an ICT accessibility unit subject to provision of specific details, within the ICT Ministry / regulatory agency, and encourage private sector/companies to establish an equivalent unit to coordinate activities within and outside agencies/companies for facility of PWDs.	MoSW & SE, MoIT and private companies.	July. 2007 onwards.
8.3 Conduct and encourage awareness-raising training on availability of resources for ICT policy makers, regulatory agencies, representatives as well as technical personnel of private ICT companies to raise understanding of disability issues, including disabled persons' ICT accessibility needs, their capability and aspiration, to be productive members of society.	MoSW & SE, MoIT and private companies.	July. 2007 onwards.
8.4 Support computer literacy training and capacity building for PWDs, subject to provision of special equipment and proper training plan through training on how to communicate with software and hardware developers and standards organizations to address their needs.	MoSW & SE, MoIT and private companies.	July, 2007 onwards.
8.5 Arrange to develop Urdu software for the Speech Therapy / Speech Development of hearing impaired persons.	MoSW & SE, MoIT and private companies.	July, 2007 onwards.
8.6 Provide various forms of incentives, including exemption of duties for ICT devices used by PWDs and subsidize the cost of assistive technology equipment (in consultation with Finance Division / CBR ) to ensure that they are affordable for PWDs in need.	MoSW & SE, MoIT and CBR.	July, 2007 onwards.
8.7 Support the creation and strengthening of networks, including cooperatives of consumers with disabilities at the national, regional and international levels in order to increase the bargaining and buying power for ICT products and services, which are generally expensive to buy individually.	MoSW & SE, MoIT and private companies.	July, 2007 onwards.

<p>8.8 Take all necessary steps to ensure, in the development of measures and standards relating to ICT accessibility, that organizations of PWDs are involved in all stages of the process.</p>	<p>MoSW &amp; SE, MoIT and private companies.</p>	<p>July, 2007 onwards.</p>
<p>8.9 Adopt and support ICT development base on international standards which are universal/open/non-proprietary (after studying in detail) to ensure the long-term commitment to ICT accessibility for PWDs among all sectors, with special attention to standards that have accessibility components and features with a proven record of effectiveness. Examples of these are the Web Accessibility Initiative of the World Wide Web Consortium and the Digital Accessible Information System Consortium.</p>	<p>MoSW &amp; SE, MoIT and private companies.</p>	<p>July, 2007 onwards.</p>
<p>8.10 Require that local language applications and content use national / international standard character encoding and modeling, such as the Unified Modeling Language, and encourage dialogue on accessibility requirements of character encoding and modeling.</p>	<p>MoSW &amp; SE, MoIT and private companies.</p>	<p>July, 2007 onwards.</p>
<p>8.11 Support participation of civil society organizations representing and reflecting the requirements of PWDs in discussions on regional and international standards towards a goal of increased harmonization of international standards supporting the requirements of PWDs. Where such international standards are lacking, Government should support alternative initiatives to address those needs, with attention to compatibility and interoperability with international standards.</p>	<p>MoSW &amp; SE and Ministry of IT.</p>	<p>July, 2007 onwards.</p>
<p>8.12 Bilateral and multilateral donor agencies and international funding agencies should adopt award criteria based on the social responsibility of the receiving agencies / organizations, including their obligation to promote ICT accessibility for PWDs.</p>	<p>MoSW &amp; SE, Ministry of IT and EAD as well as private companies.</p>	<p>July, 2007 onwards.</p>
<p>8.13 Support and establish a regional working group on availability of resources to develop standards in ICT, telecommunication and broadcasting to ensure that new and existing technologies are based on disability inclusive standards and are developed on a universal design concept. In addition to ICT, measures to ensure communication of PWDs, including development of standardized Sign Language and Braille, need to be established.</p>	<p>MoSW &amp; SE and Ministry of IT.</p>	<p>July, 2007 onwards.</p>

**Action 9: Expanding and Reinforcing Vocational Training, Employment (including self-employment) and Economic Rehabilitation.**

<b>Goal /Outcome</b>	Empowerment of PWDs to achieve the level of competencies and abilities required generating income leading to economic empowerment.		
<b>Identified Barriers</b>	Limited vocational training and vocational rehabilitation opportunities available for PWDs in Pakistan.		
<b>Performance indicators.</b>	The ratio of PWDs generating income for their needs should be proportionate to that of comparable general population.		
	<b>Short Term Steps (July 2006-December 2009)</b>	<b>Responsibility</b>	
		<b>Timeframe</b>	
9.1	Examine, ratify and implement the Vocational Rehabilitation and Employment (Disabled Persons) Convention, 1983.	MoSW & SE.	July, 2007 onwards.
9.2	Have policies, a written plan, a coordinating body and some mechanism to evaluate and monitor the success of programmes for persons with disabilities in training, employment, self-employment and poverty alleviation programmes. These activities should include consultations with organizations of and for persons with disabilities as well as employers' and workers' organizations.	MoSW & SE and MoL&MP.	July, 2007 onwards.
9.3	Develop and implement employer incentives and strategies to move persons with disabilities into open employment and recognize that government, as a major employer, should be a model employer with regard to the hiring, retention and advancement of workers with disabilities.	MoSW & SE and MoL&MP.	July, 2007 onwards.
9.4	Examine and/or enact anti-discrimination legislation that protects the rights of workers with disabilities to equal treatment and opportunity in the workplace and in the marketplace. Also encourage and promote employment of persons with disabilities in the private sector and provide a mechanism for the protection of rights of those persons with disabilities affected by layoffs and downsizing exercises.	MoSW & SE and MoL&MP.	July, 2007 onwards.
9.5	Collaborate to increase the availability and upgrade the competencies of staff providing training, employment and vocational rehabilitation services to ensure that trained and competent staff are available. Persons with disabilities be actively recruited and included in such training programmes and hired as staff.	MoSW & SE, MoL&MP, International organizations, NGOs, Training Institutions and other social partners.	July, 2007 onwards.

<p>9.6 Government, with the assistance of NGOs should ensure that persons with disabilities have the support services they require to participate in mainstream vocational training and employment and allocate additional funds required to remove barriers to inclusion, with the full recognition that the price tag related to exclusion is higher.</p>	<p>MoSW &amp; SE, MoL&amp;MP and NGOs.</p>	<p>July, 2007 onwards.</p>
<p>9.7 Collaborate more with employers, trade unions and other social partners to develop partnerships, policies, mutual understanding and move effective vocational training and employment services that benefit persons with disabilities working in formal, informal or self-employment settings.</p>	<p>MoSW &amp; SE and MoL&amp;MP and NGOs.</p>	<p>July, 2007 onwards.</p>
<p>9.8 Government, in collaboration with employers' organizations, organization of and for persons with disabilities and other social partners should review current policies and outcomes related to the vocational training of persons with disabilities to identify gaps and needs and develop a plan to meet these needs in the light of workplace changes related to globalization, ICT and the needs of persons with disabilities living in remote and rural communities.</p>	<p>MoSW &amp; SE and MoL&amp;MP and NGOs.</p>	<p>July, 2007 onwards.</p>
<p>9.9 Funds be allocated to meet the needs of those with the most extensive disabilities to provide training and employment services in dignified and inclusive settings to the extent possible, by using strategies such as transitional and production workshops and community-based and supported employment.</p>	<p>MoSW &amp; SE and MoL&amp;MP and NGOs.</p>	<p>July, 2007 onwards.</p>
<p>9.10 Recognizing the lack of formal job opportunities for PWDs, Government, international agencies, donors, NGOs and others in civil society must ensure that persons with disabilities and organizations of and for persons with disabilities have equitable access and are included in programmes related to business development, entrepreneurship and credit distributions.</p>	<p>MoSW &amp; SE and MoL&amp;MP and NGOs.</p>	<p>July, 2007 onwards.</p>
<p>9.11 Regional organizations, including those of PWDs, in collaboration with government and international agencies, should develop mechanism for the collection and dissemination of information related to good practices in all aspects of training and employment, especially those that reflect regional and cultural needs.</p>	<p>MoSW &amp; SE and MoL&amp;MP and NGOs.</p>	<p>July, 2007 onwards.</p>

9.12 Conduct labour market surveys to identify disability specific vocations. Also to identify modifications and the type(s) of assistive devices required facilitating an individual to perform maximally.	MoSW & SE and MoL&MP and NGOs.	July, 2007 onwards.
9.13 Pursue and implement 5% quota for admission of PWDs in government sector technical training institutions.	DGSE, NCRDP, PCRDPs, Prov. Labour Deptts.	July, 2007 onwards.
9.14 Financially support NGOs to replicate successful CBR models such as that of VREDP and others.	NTD	July, 2007 onwards.
9.15 Reorganize NCRDP and PCRDP by providing necessary manpower, required logistic resources and effective mechanisms for successful implementation of the employment ordinance.	MoSW & SE and Provincial SW Departments.	July, 2007 onwards.
9.16 All SECs that are upgraded to class 10 to have a strong vocational training programme based on their district market research survey.	MoSW & SE and Prov. Govts.	July 2007 onwards.
9.17 For CBR, create opportunities for on the job apprenticeship for different vocations in association with business unions like trader's union, shopkeeper's union, agricultural and dairy producers union, and chambers of commerce etc.	NCRDP/ PCRDPs, provincial SW / SE Depts. Chamber of Commerce etc.	January 2007 onwards.
9.18 Work done on Community Based Rehabilitation Programmes be supported for successful implementation in rural areas and urban slums.	DGSE, NTD, CBOs.	July 2007 onwards.
9.19 Take necessary steps to actively involve Ministry/Department of labour in implementation of 2% employment quota.	NCRDP, PCRDPs, Ministry & Depts. of Labour & Manpower.	July 2007 onwards.
9.20 Include assessment of employment status of PWD in annual Labour Force Survey (LFS).	NCRDP / PCRDPs and Federal Bureau of Statistics.	January 2007 onwards.
9.21 The existing VTCDs are to revise their training programmes and provide trainings in market appropriate trades.	DGSE (NTCSP) and Provincial SW Dept.	July 2007 onwards.
9.22 Create avenues for promotion of vocational training for PWDs in the country, as the existing facilities are quite inadequate to meet the requirements.	DGSE and Provincial SE/SW Departments.	July, 2007 onwards.

Long Term Steps (July 2009-June 2025)	Responsibility	Timeframe
9.23 All micro credit institutions and banks should develop and promote a special micro credit product with simplified procedures for PWDs.	NCRDP, PCRDPs, SMEDA, FWBL, Khushali Bank, First Micro Credit Bank etc.	July 2009 onwards.

<b>Action 10:</b>	<b><u>POVERTY ALLEVIATION THROUGH CAPACITY- BUILDING, SOCIAL SECURITY AND SUSTAINABLE LIVELIHOOD PROGRAMMES.</u></b>
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<b>Goal /Outcome</b>	PWDs have an access to all developmental activities leading to poverty alleviation.	
<b>Identified Barriers</b>	Arrangements for development of PWDs to become economically independent citizen are non-existent.	
<b>Performance indicators.</b>	Arrangements are made that enable PWDs to become earning members of the family and society.	
Short Term Steps (July 2006-December 2009)	Responsibility	Timeframe
10.1 Include immediately, as a major target group, PWDs in their national poverty alleviation programmes in order to achieve the millennium development goal target to eradicate extreme poverty and hunger.	MoSW&SE, Federal line Ministries and Provincial and District Governments.	July, 2007 onwards.
10.2 Allocate adequate rural development and poverty alleviation funds towards services for the benefit of persons with disabilities.	MoSW&SE, Federal line Ministries and Prov. and District Governments.	July, 2007 onwards.
10.3 Government should include disability dimensions and poverty mapping and disability into the collection and analysis of millennium development goal baseline data on income poverty, education, health etc., so as to ensure baseline data for poor persons with disabilities.	MoSW & SE, Federal line Ministries and Provincial and District Governments.	July, 2007 onwards.

<p>10.4 Government should mainstream disability issues into pro-poor development strategies through:</p> <ul style="list-style-type: none"> <li>(k) Increased resource allocation for poor persons with disabilities and the introduction of social budgeting for disability;</li> <li>(l) Participatory evaluation of existing social and economic policies through more effective methodologies, including the use of citizen's report card method;</li> <li>(m) Establishment of appropriate social protection schemes, such as financial support to families having disabled children, specially with multiple and profound problems schooling subsidy and/or health insurance for poor families with disabled children and older persons with physical and mental disabilities.</li> <li>(n) Comprehensive development policies targeting PWDs and families with disabled persons.</li> </ul>	<p>MoSW &amp; SE, Federal line Ministries and Provincial and District Governments.</p>	<p>July, 2007 onwards.</p>
<p>10.5 Government should document and disseminate good field-based practices in poverty alleviation for PWDs that can be used as models for capacity-building in government sectoral ministries, civil society organizations and the private sector.</p>	<p>MoSW &amp; SE, Federal line Ministries and Provincial and District Governments.</p>	<p>July, 2007 onwards.</p>
<p>10.6 Government should encourage the building of strategic alliances among and advocating the importance of disability issues to policy makers, organizations of persons with disabilities and community development organizations, with assistance from the United Nations system, with a view to incorporating disability issues into development policies.</p>	<p>MoSW &amp; SE, Federal line Ministries and Provincial and District Governments.</p>	<p>July, 2007 onwards.</p>
<p>10.7 The national strategy should acknowledge the role of all three approaches, institutional, outreach and community-based, in the rehabilitation of PWDs. Community-based approaches, in particular, should be emphasized to achieve maximum coverage and outreach of services as well as to maximize their cost-effectiveness.</p>	<p>MoSW &amp; SE, Federal line Ministries and Provincial and District Governments.</p>	<p>July, 2007 onwards.</p>
<p>10.8 The health service delivery structures, both governmental and non-governmental, should include rehabilitation services such as physiotherapy and occupational therapy as well as the provision of essential assistive device services. Little is known about gender-specific measures and health care approaches for mental health and physical disabilities among older women and men. Service provision for mental illness in older people needs attention. Special emphasis should be placed on ensuring that such services are available at the local level, including rural and urban poor areas.</p>	<p>MoSW &amp; SE, Federal line Ministries and Provincial and District Governments.</p>	<p>July, 2007 onwards.</p>

10.9 Government should support the formation of self-help groups of PWDs in rural and urban poor areas and their federations, with a view to developing their capacity in mutual support, advocacy and participation in the decision-making process.	MoSW & SE, Federal line Ministries and Provincial and District Governments.	July, 2007 onwards.
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**Action 11: LEGISLATIVE SUPPORT FOR PWDs.**

<b>Goal /Outcome</b>	All existing laws for prevention of disabilities or rehabilitation/employment of PWDs be implemented in letter and spirit and required new laws are drafted and enforced.		
<b>Identified Barriers</b>	Current implementation status of Disabled Persons (Employment and Rehabilitation) Ordinance, 1981, Workmen' Compensation, Social Security and Occupational Health Safety Acts is weak.		
<b>Performance indicators.</b>	Tangible progress in enforcement of all existing and new relevant laws.		
	<b>Short term Steps (July 2006-December 2009)</b>	<b>Responsibility</b>	<b>Timeframe</b>
11.1 Article 27 of the Constitution of Pakistan, which says that there will be no discrimination in employment on the bases of caste, creed or gender, may be amended to the extent to include disability so that the right to employment of PWDs is protected and guaranteed.		MoSW & SE and MoL&PA.	December 2006.
11.2.Improve the Disabled Persons (Employment & Rehabilitation) Ordinance, 1981 in the following areas:- 1.0.0 Ensure effective implementation of 1 percent quota for PWDs, as stipulated in Section 10.  2.0.0 Enhance employment quota from 1 to 2 percent.  11.2.3 Enhance penalty for non-employment of PWDs in relation to grade/scale of the employee, which may be at least double pay and scale of the post.  11.2.4 Fund recovered be distributed at the district rather than the provincial level and DCRDPs may be constituted for the purpose.  11.2.5 PWDs be represented in the NCRDP, PCRDPs and DCRDPs.  11.2.6 Extended enforcement of this law to the Federally Administered Tribal Areas.		Mo SW & SE / Provincial S.W. Departments.	December 2006.

11.3 Take effective measures to remove known constraints (administrative, financial and logistical) hampering functioning of PCRDPs.	MoSW & SE / Provincial S.W. Departments.	December 2006
11.4 Modify and improve the currently used disability assessment tools to accommodate candidates with a variety of disabilities.	NCRDP/PCRDP in collaboration with Departments of Rehab. Medicine.	December, 2006
11.5 Action required for expanding processing of employment applications of PWDs in all District Employment Exchanges.	NCRDP, PCRDP, Prov. Labour Deptts. and Distt. Governments.	July 2006 onwards.
11.6 Expand the membership of the Assessment Boards by including members from associations of PWDs and the NGOs.	PCRDPs	July, 2007 onwards.
11.7 Sensitize informal and unregulated sectors employing women and children to obey disability protection laws.	NCCWD, NGOs and Associations of disabled persons.	July, 2007 onwards.
11.8 Following action be taken to improve Mental Health Ordinance, 2001:  11.8.1 The Ordinance may be revised for exclusive focus on mental illness relating to psychiatry, which could be broadened to include all types of mental illnesses.  11.8.2 Professional experts such as psychologists, counselors and social workers may appropriately be included in the Ordinance.	MoSW & SE and the authorities concerned.	July, 2007 onwards.
11.9 Amend laws relating to beggary to include a separate clause on prevention of exploitation of PWDs for beggary and to enforce punishment on violators.	MoSW & SE and MoL&PA.	July, 2007 onwards.
11.10 Amend custom laws to allow for tax concessions for procurement of vehicles, tools and equipment for PWDs.	MoSW & SE and CBR.	July 2007 onwards.
11.11 Grant extension in concession in public transport fares to all categories of PWDs viz. the visually impaired, physically handicapped, mentally handicapped and the hearing impaired.	MoSW & SE and concerned organizations.	July, 2007 onwards.

11.12	Legislative may be introduced to cover the following areas:- 1.0.0 Law on Equalization of opportunities for PWDs. 11.12.2 Include disability dimensions in all new and existing laws, policies, plans, programmes and schemes.	MoSW & SE and concerned organizations.	July, 2007 onwards.
11.12.3	Legislation to prohibit marriages between families, which have a history of genetically transferable diseases (as inter marriages between different families of genetically transferable diseases is hazardous for the next generation).	MoSW & SE and concerned organizations.	July, 2007 onwards.
11.12.4	To create a disabled-friendly environment in all public buildings, parks and public places.	MoSW & SE and concerned organizations.	July, 2007 onwards.
11.12.5	To prevent cruelty, mistreatment and humiliation of PWDs.	MoSW & SE and concerned organizations.	July, 2007 onwards.
11.12.6	To facilitate PWDs for embarkation on and disembarkation from public and private transport, including air travel.	MoSW & SE and concerned organizations.	July, 2007 onwards.
<b>Long Term Steps (July 2009-June 2025)</b>		<b>Responsibility</b>	<b>Timeframe</b>
2.0	Ensure implementation of Workmen's Compensation, Social Security and OHS Acts.	MoL&MP and Departments of Labour & Manpower.	July 2009 onwards.

**Action 12: Creating Barrier-Free Physical Environment.**

Goal /Outcome	Barrier free access for PWDs in all public, private and commercial buildings and public places.
Identified Barriers	The present physical environment is not user friendly for people with disabilities, elderly, children, expectant women, infirm and weak.
<b>Performance Indicators.</b>	Physical environment designed and equipped for PWDs in all new development/civil works.

<p>12.1 Government, in collaboration with disabled persons' organizations, civil society groups such as professional architecture and engineering associations and other in the corporate sector, should support the establishment of national mechanisms to exchange information on means to realize accessible environments, with research and/or educational architectural and engineering establishments.</p>	<p>MoSW &amp; SE, MoH&amp;Ws, PEC and NGOs.</p>	<p>July, 2007 onwards.</p>
<p>12.2 Ensure that professional education and academic courses in architecture, planning and landscape and building and engineering contain inclusive design principles; "teaching the teachers" courses in effective teaching of practical accessible design are established for all design schools, including traveling workshops which involve the active participation of persons with disabilities; and support continuing education professional development courses on best practices in inclusive design techniques for experienced practitioners, including those professionals who work closely with the end-users, such as community-based rehabilitation personnel.</p>	<p>MoSW &amp; SE, MoH&amp;Ws, PEC and NGOs.</p>	<p>July, 2007 onwards.</p>
<p>12.3 Encourage innovative techniques, such as through design competitions, architectural and other awards and various other forms of support, to identify particular applications that enhance accessibility and apply local knowledge and materials. Local materials to make built environments accessible, e.g., tactile blocks and non-slip floor tiles, should be developed and made available. Networks to disseminate innovative techniques should be developed.</p>	<p>MoSW &amp; SE, MoH&amp;Ws, PEC and NGOs.</p>	<p>July, 2007 onwards.</p>
<p>12.4 Support the establishment of appraisal mechanisms on how codes and standards have been developed, applied and enforced and how they have increased accessibility in various counties. Feedback and case studies on areas (rather than on a single new or upgraded building) are important, with publicity and dissemination of the findings, and show how improvements could be made.</p>	<p>MoSW &amp; SE, MoH&amp;Ws, PEC and NGOs.</p>	<p>July, 2007 onwards.</p>
<p>12.5 Ensure that the accessibility needs of PWDs be included in all rural / agricultural development programmes, including but not limited to access and use of sanitation facilities and water supply through a process of consultation that includes disabled user-groups.</p>	<p>MoSW &amp; SE, MoH&amp;Ws, PEC and NGOs.</p>	<p>July, 2007 onwards.</p>

<p>12.6 Create access officers or posts which include the function of access officers at local, provincial and national levels whose functions include providing architects / designers / developers with technical advice and information on access codes and application of inclusive design, and appropriate technology in the natural and built environments in rural, peri-urban and urban contexts.</p>	<p>MoSW &amp; SE, MoH&amp;Ws, PEC and NGOs.</p>	<p>July, 2007 onwards.</p>
<p>12.7 Disabled persons' organizations should implement confidence-building and advocacy measures to present their needs collectively and effectively in the built environment in one voice representing the needs of different disability groups, including not only persons with physical, visual and hearing disabilities but also persons with intellectual disabilities.</p>	<p>MoSW &amp; SE, MoH&amp;Ws, PEC and NGOs.</p>	<p>July, 2007 onwards.</p>
<p>12.8 Implement 14 actions approved by the federal cabinet for improving access in buildings, Parks, foot-paths and public places (offices, shops factories, schools universities, hotel restaurants, cinemas bus and train stations airports etc).</p>	<p>MoH&amp;Ws / Prov. Housing and Physical Planning Depts. / Development Authorities.</p>	<p>July, 2007 onwards.</p>
<p>12.9 Sensitize key policy makers such as city planners and developers, building control authorities and professional associations of architects and engineers about disabilities issues. The said component should also be included in their curricula.</p>	<p>PEC, Pak. Council of Architects and Town Planners (PCATP), Distt. Govts etc.</p>	<p>January, 2007 onwards.</p>
<p>12.10 Draft laws for provision of barrier-free access to PWDs in new public, private and commercial buildings and public places in urban and rural areas for promulgation.</p>	<p>MoSW &amp; SE and MoL.</p>	<p>January, 2007 onwards.</p>
<p>12.11 The legal department of town planning and building control authorities in districts should only approve all new designs that are based on the requirements of barrier-free access law.</p>	<p>District Governments</p>	<p>January, 2008 onwards.</p>
<p>12.12 All airports and railway stations should have provisions for wheelchair passengers. Airport to have appropriate facilities such as tactile guide ways and with in transit terminals and stops.</p>	<p>MoSW &amp; SE, Civil Aviation Authority and M/O Railways.</p>	<p>July 2008</p>

<b>Long Term Steps (July 2009-June 2025)</b>	<b>Responsibility</b>	<b>Timeframe</b>
12.13 Design new buses, taxi, minibuses and wagons as far as practical to include facilities which can accommodate PWDs.	MoT&C & Distt. Motor Vehicle Fitness Offices.	July 2009 onwards.
12.14 Incentives-disincentives approach be applied in implementation of barrier-free access policy. Incentives to be given like soft loans, government subsidies, and tax reductions etc. to implementers of barrier-free access policy.	CBR, HBFC, Nationalized Commercial Banks.	July 2009 onwards.

**Action 13: Raising Public Acceptance and improving Social Environment and Integration.**

<b>Goal /Outcome:</b>	Conditions of a social milieu that ensures equitable allocation of resources from the public exchequer and a socially supportive environment for PWDs for their inclusion in all aspects of life.	
<b>Identified Barriers</b>	Disability is stigmatized and considered a taboo. PWDs are marginalized from the social mainstream and often perceived as pity and charity.	
<b>Performance indicators.</b>	Rights-based positive perceptions and attitudes towards PWDs in the civil society.	
<b>Short term Steps (July 2006-December 2009)</b>		
	<b>Responsibility</b>	<b>Timeframe</b>
13.1 Encourage associations of PWDs including those of women with disabilities to form advocacy groups at the federal, provincial and district levels for advocacy and monitoring the implementation of NPA as stakeholders.	MoSW & SE, NCSW, Provincial SW Deptts and NGOs.	January 2007 onwards.
13.2 Train persons including women with disabilities on how to participate effectively in decision-making processes in the self-help organizations.	MoSW & SE, MoWD, NCSW, Provincial SW Deptts and NGOs.	January 2007 onwards.
13.3 Self-help organizations to develop programmes for capacity-building to empower their members, including youth and women with disabilities to take consultative and leadership roles in the community at large as well as in their own organizations and enable them to serve as trainers in the development of leadership and management skills of members of self-help organizations.	DGSE and SHOs.	January 2007 onwards.

13.4 National Self-Help Organizations of diverse disability groups to develop mechanism to engage rural persons with disabilities in self-help organizations for mutual support, advocacy and referral to programmes and services and to collaborate actively with rural and urban development NGOs and Government in rural development initiatives.	DGSE and SHOs.	January 2007 onwards.
13.5 International funding agencies and NGOs to give high priority in their development policies to providing funding and technical assistance to promote and strengthen self-help organizations of PWDs.	International funding agencies and NGOs.	January 2007 onwards.
13.6 Eliminate all possible forms of social stigma attached with disabilities by awareness creating through the print and electronic media, production of dramas and role models and use of mosque and other religious places for grass roots advocacy.	MoI&B, MoRA and Provincial Depts. of Information / Press Clubs etc.	January 2007 onwards.
13.7 Ensure participation of representatives of associations of PWDs in high-level political, social and cultural gatherings including diplomatic events and UN functions by using sign language interpreters.	MoSE&SE and other line Ministries / Provincial / District Governments.	January 2007 onwards.
13.8 Conduct research studies / social surveys to assess the perceptions and attitudes towards PWDs in order to facilitate decision makers in taking appropriate measures for creating a proactive environment.	Anthropology, Psychology, Sociology and Social Work Deptts. of Universities and Medical Colleges.	January 2007 onwards.
13.9 Reserve proportional seats for PWDs in the Senate, National and Provincial assemblies and district councils.	MoSW & SE, MoPA & Provincial/District Governments.	July 2007 onwards.
13.10 Adapt school curriculum and encourage other activities for social interaction to sensitize youth about social diversity.	DGSE, MoE, Prov. Edu. Depts. Distt. Govts. & Associations of private Schools.	July 2007 onwards.

13.11	Take appropriate measures to alter institutional attitudes in order to protect the rights of PWDs in places such as police stations, hospitals, banks etc.	DGSE, NM & ITC and Police Department.	January 2007 onwards.
13.12	Add to the existing list of presidential awards, special awards for work on disability and/or for the PWDs attaining outstanding achievements.	MoSW&SE and Cabinet Division.	January 2007 onwards.
13.13	Promote programmes such as Adopt/Support a special child in all public and private Special Education Centres in collaboration with NGOs and the media.	DGSE, EDOs, Community Development and Education & Private school Associations.	January 2007 onwards.
13.14	Secure membership for PWDs in social forums providing opportunities for fellowship public speaking, drama and intellectual discourse.	MoI&B, NGOs for PWDs for Rotary Club, Lions Club, Readers Club etc.	January 2007 onwards.
13.15	Establish a media cell in the Ministry of Social Welfare and Special Education to keep close liaison with the media to build a positive image of PWDs.	MoSW&SE, MoI&B and provincial and District Governments.	January 2007 onwards.
<b>Action 14: <u>Sports for PWDs</u></b>			
<b>Goal /Outcome</b>	PWDs have an access to sports facilities for their physical development.		
<b>Identified Barriers</b>	The existing sports facilities for normal persons are out-of-reach for PWDs.		
<b>Performance indicators.</b>	As a right, PWDs are allowed to utilize the existing sports facilities and special facilities are also created and made available to them.		
<b>Short term Steps (July 2006-December 2009)</b>		<b>Responsibility</b>	<b>Timeframe</b>
14.1	Promote sports facilities with appropriate infrastructure for PWDs at various levels.	DGSE / MoYS&C.	December, 2006 onwards.

14.2	Share existing sports facilities such as sports stadium, swimming pools and infrastructure to make them usable for PWDs by improving accessibility or by creating dedicated facilities wherever necessary.	MoYS&C and District Governments.	January 2007 onwards.
14.3	Organize sports competitions for PWDs at the national, provincial and district level.	MoSW & SE, MoYS&C and NGOs.	January 2007 onwards.
14.4	Hold classification / categorization courses for various disabilities as well as coaching and training.	MoSW & SE and NGOs.	July 2009 onwards.
14.5	Hold SAARC Paralympic games 15 days after regular SAARC games to follow the established international pattern of Olympic and Paralympic games.	MoSW & SE and the SAARC Sectt.	January 2007 onwards.
14.6	Arrange participation of the Pakistan contingent in International Paralympic Games, Asian Games and other regional competitive events.	MoSW&SE and NPC.	January 2007 onwards.
14.7	Encourage the civil society at large and youth in particular to attend and participate in sports events of PWDs.	Sports Club, NGOs and Associations of Disabled Persons.	January 2007 onwards.
<b>Action 15: <u>Boosting Capacity for production and Supply of assistive aids including prosthetics, orthotics and other supporting items and facilitation in Duty Free Imports.</u></b>			
<b>Goal /Outcome</b>	All disabilities are helped by assistive aids i.e. Prostheses, orthotics and other supporting items.		
<b>Identified Barriers</b>	The existing production facilities in both public and private sectors are deficient in quantity and quality and have not kept pace with international technological advances.		
<b>Performance indicators.</b>	Research and Development (R&D), capacity building and enhanced production capability of quality products up to tehsil level.		
<b>Short term Steps (July 2006-December 2009)</b>		<b>Responsibility</b>	<b>Timeframe</b>
15.1	Improve distribution of free of cost supplies of assistive devices to deserving students in public / private sector SECs.	NCRDP/ PCRDPs	January 2007 onwards.

15.2 Conduct Research and Development (R&D) of assistive devices / aids in collaboration with international disability NGOs and technical institutes.	NCRDP and PCRDPs.	January 2007 onwards.
15.3 Interest free or soft loans be given to NGOs and private entrepreneurs at <b>different levels including</b> tehsil level to set up manufacturing units for assistive aids including prosthesis and orthotics.	DGSE, SMEDA, Khushali Bank and First Micro Credit Bank and Commercial Banks.	July, 2007 onwards.
15.4 Obtain tax exemptions for public and NGO sectors for the import of buses, equipment, assistive devices / parts / raw material and teaching aids and books for SECs.	NCRDP and CBR	January 2007 onwards.

**Action 16: Increasing support to the NGOs for Service Delivery in Rural Areas.**

<b>Goal/Outcome</b>	Disability services are available in urban slums rural areas through NGO participation.		
<b>Identified Barriers</b>	Currently very few disability NGOs are functioning in urban slums and rural areas.		
<b>Performance indicators.</b>	Service delivery up to the Union Council level by NGOs.		
<b>Short term Steps (July 2006-December 2009)</b>		<b>Responsibility</b>	<b>Timeframe</b>
16.1 Conduct listing and in-depth review of existing NGOs to identify their capacity, services and potential for delivering services in the urban slums and rural areas.	NTD through private sector.	July-December 2006	
16.2 Form an Autonomous Board at the federal level to fund NGOs.	NTD	July 2007 onwards.	
16.3 The proposed Autonomous Board be made responsible to bring disability specific NGOs and Associations under a common platform for exchange of technical and program related issues and problem solving.	NTD	January 2007 onwards.	
16.4 Disabilities specific NGOs and associations of higher stature and experience should train and mentor rural based CBOs for disability related work.	NTD, NGOs and Associations of PWDs.	January 2007 onwards.	

**Action 17. Linkages at Federal, Provincial and District level.**

<b>Goal/Outcome:</b>	The core national body entrusted to work for the disabled is empowered to adopt a holistic approach towards the issues of PWDs.		
<b>Identified Barriers:</b>	The current mandates of DGSE are limited and without coordinated function with Federal line Ministries and the Provincial and District Governments.		
<b>Performance Indicators:</b>	Implementation of the NPA is streamlined, without any hurdle.		
<b>Short term Steps (July 2006-December 2009)</b>		<b>Responsibility</b>	<b>Time frame</b>
17.1 Establish National Co-coordinating Council for Persons with Disabilities (NCCPWDs) with membership of relevant ministries, represented by their Secretaries or authorized officers such as Education, Health, Labour & Manpower, Sports and Culture and Media and the relevant Provincial Government Departments etc. Similar Chapters should be established at provincial (PCCPWDs) and district levels (DCCPWDs). Representatives of Associations of Disabled and NGOs working for Disabled be also included as members with proportionate representation. This is important to establish formal inter ministerial and inter departmental linkages at federal, provincial and district levels.		MoSW&SE, Federal line Ministries and Provincial and District Governments.	January 2007- June, 2007.
17.2 National strategies designed at the federal level may be replicated and benchmarked at the provincial and district levels.		MoSW&SE, Federal line Ministries and Provincial Government Departments.	January 2007- June, 2007.
17.3 Define role of each Ministry and Department in the holistic disability services programme and formal inter-ministerial and inter-departmental institutional arrangements be established.		NCCPWD, PCCPWDs and DCCPWDs.	January 2007 onwards.
17.4 Orientation of the elected representatives be made at provincial / Districts levels to strengthen the work for persons with disabilities.		SHOs, line Departments and DGSE.	January 2007 onwards.

17.5 Conduct review/monitoring of progress on NPA, on annual bases.	NCCPWD, PCCPWDs and DCCPWDs.	January 2007 onwards.
17.6 Establish a policy review panel within the National Coordinating Committee on disability to review all policies and their implementation, which directly or indirectly affect PWDs.	DGSE, NCCPWD, PCCPWDs and DCCPWDs.	January 2007 onwards.

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## ACRONYMS

AFIRM	Armed Forces Institute of Rehabilitative Medicine.
BHU	Basic Health Unit.
BoE	Board of education.
CBOs	Community Based Organizations.
CBR	Central Board of Revenue.
CBR	Community Based Rehabilitation.
CPSP	College of Physicians and Surgeons of Pakistan.
DCCPWDs	District Coordinating Council for Persons with Disabilities.
DGSE	Directorate General of Special Education.
DoH	Department of Health.
DHQ	District Headquarters.
ECD	Early Childhood Development.
EDO	Executive District Officer.
FBS	Federal Bureau of Statistics.
FWBL	First Women Bank Limited.
HBFC	House Building Finance Corporation.
HEC	Higher Education Commission.
ICF	International Classification of Functioning, Disability & Health.
IE	Inclusive Education.

LHVs	Lady Health Visitors.
LHW	Lady Health Worker.
MoC	Ministry of Communication.
MoE	Ministry of Education.
MoH	Ministry of Health.
MoH&W	Ministry of Housing and Works.
MoI	Ministry of Interior.
MoI&B	Ministry of Information and Broadcasting.
MoIT	Ministry of Information Technology.
MoL&MP	Ministry of Labour and Manpower.
MoL&PA	Ministry of Law and Parliamentary Affairs.
MoRA	Ministry of Religious Affairs.
Mo SW &SE	Ministry of Social Welfare and Special Education.
MoT&C	Ministry of Transport and Communication.
MoYS&C	Ministry of Youth Sports and Culture.
NCCPWDs	National Coordinating Council for Persons with Disabilities.
NCCWD	National Commission for Child Welfare and Development, Islamabad.
NCRDP	National Council for Rehabilitation of Disabled Persons.
NCSW	National Council of Social Welfare.
NGOs	Non-Governmental Organizations.
NHA	National Highway Authority.
NIH	National Institute for Handicapped, Islamabad.

NISE	National Institute of Special Education, Islamabad.
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NLRC	National Library and Resource Centre.
NM & ITC	National Mobility & Independence Training Centre, Islamabad.
NPA	National Plan of Action.
NPC	National Paralympic Committee.
NTCSP	National Training Centre for Special Persons, Islamabad.
NTD	National Trust for Disabled.
OHS	Occupational Health and Safety.
PCCPWDs	Provincial Coordinating Council for Persons with Disabilities.
PCRDP	Provincial Council for Rehabilitation of Disabled Persons.
PEC	Pakistan Engineering Council.
PMDC	Pakistan Medical and Dental Council.
PMRC	Pakistan Medical Research Council.
PNC	Pakistan Nursing Council.
PCO	Population Census Organization.
PWDs	Persons with Disabilities.
RHC	Rural Health Centre.
RMD	Rehabilitation Medicine Department.
SAARC	South Asia Association for Regional Cooperation.
SEC	Special Education Centres.
SEN	Special Education Needs.
SHO	Self Help Organization.
SMEDA	Small Medium Enterprise Development Agency.

TBAs	Trained Birth Attendants.
VTCD	Vocational Training Centre for Disabled.
WHO	World Health Organization.

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NATIONAL PLAN OF ACTION  
TO IMPLEMENT THE  
NATIONAL POLICY FOR PERSONS  
WITH DISABILITIES.

Government of Pakistan  
Ministry of Social Welfare and Special Education  
(Directorate General of Special Education)  
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