UNDERSTANDING DISABILITY AND THE PATH TO INCLUSIVE EDUCATION IN PAKISTAN

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Inclusive education is the "process of addressing and responding to the diversity of needs of all learners... [by] increasing participation in learning, cultures, and communities, and reducing exclusion from education and from within education."[1] In practice, it represents the most fundamental implementation of the basic human right to education. The Sustainable Development Goals of 2030 have reaffirmed the importance of universal and inclusive access to education and learning through SDG 4 and its Targets 4A: "Build and upgrade inclusive and safe schools" and 4.5: "Eliminate all discrimination in education"[2].

Before any measures can be taken to resolve barriers to education, it is imperative to identify the nature and scale of these barriers i.e. what are the factors keeping children out of school, and how many children are affected by them? Perhaps one of the most poorly understood of these barriers in Pakistan is that of disability. The World Health Organization describes disability as an umbrella term covering "impairments, activity limitations, and participation restrictions"[3]. An impairment is a "problem in body function or structure"; an activity limitation is a difficulty encountered in "executing a task or action"; and a participation restriction is a problem experienced in "involvement in life situations"[4]. The reasons disability in Pakistan is so poorly understood are two-fold. First, Pakistan has yet to define a holistic mechanism to protect the rights of people with disability on a constitutional level, and second, there is a lack of data to quantify the magnitude of the issue. As a response to the latter, ASER Pakistan piloted an initiative to document disability prevalence in Pakistan for the first time in 2014 through its household level survey. 2019 marks the sixth year running that ASER has continued building on this initiative and has included questions on disabilities in the school level survey which is one of the ways through which ASER captures data. This allows disability prevalence to be measured by the number of students with disability enrolled in schools.

Table 1 shows the proportion of schools reporting children with disability in their student population, and the number of children with disabilities as a proportion of the total number of children enrolled. By these estimates, 0.29% of the students enrolled at schools have some kind of disability. This proportion is the highest in Khyber Pakhtunkhwa at 0.53% and the lowest in Sindh at 0.11%.

Table 1: Province-wise Breakdown of Disability in Pakistan

Province	Proportion of Schools Reporting Children with Disabilities	Proportion of Enrolled Students that Have A Disability
AJK	19.4%	0.23%
Balochistan	11.5%	0.28%
FATA	23.7%	0.42%
GB	28.4%	0.40%
KP	30.6%	0.53%
Punjab	20.8%	0.24%
Sindh	10.5%	0.11%
Total	**20.4%**	**0.29%**

Source: ASER 2019

Prior to ASER, the only national initiative to collect data on disability was through the Pakistan Population Census of 1998, which found only 2.49% of the population to have some kind of disability. The 2017 Population Census found this number to be even lower at 0.48%. If we contrast the results from the population census and the ASER school survey to other measures of disability, including ASER's own results from 2018, interesting points of comparison emerge (Table 2).

The primary reason for these differences is the way in which the questions in these surveys are framed. Historically, asking a yes/no question on disability has resulted in underreporting. This is possibly because binary questions do not capture any nuance in the severity and types of disability. Responders may be inclined to report only the most severe cases of disability, or they may choose to disclose disability only if they have visible impairments. This is made worse by the fact that disability still carries a level of stigma, and responders may not choose to identify as disabled if they can avoid it.

In recognition of the limitations of binary questions, ASER Pakistan and TEACh (Teaching Effectively All Children) used a more functional approach to collecting data on disability by using the full set of questions from the Washington Group on Disability Statistics for 'Child Functioning' for children aged 5 – 16 years and 8 – 12 years respectively . These questions cover a range of functioning including; seeing, hearing, walking, self-care, understanding speech, remembering, controlling behaviour, focusing, accepting changes, making friends, being worried, and being sad[5]. In addition to these, the questionnaire allows parents and caregivers to report the level of difficulty faced for each impairment to account for the degree of severity. The TEACh survey was conducted in three districts in Punjab, and ASER 2018 administered the full set of the questions from the Child Functioning Module (CFM) to a sample of five districts across Punjab and Sindh. Simultaneously, a shorter set of questions focusing only on physical impairments and cognitive functioning was administered to a larger sample across Pakistan. Table 2 captures the results from these surveys.

Table 2: Measuring Disability Prevalence in Pakistan

Measure	Prevalence	Details
Population Census 1998	2.49%	Total Population
World Report on Disability 2011	13.4%	Pakistan
Disability Evaluation Report Pakistan Poverty Alleviation Fund 2012	8%	7 Districts 80000 households
TEACh 2017	11.2%	8 – 12 Years Old in three districts of Central Punjab
Pakistan Population Census 2017	0.48 %	Total Population
ASER 2018	3.56%	3 – 16 Years Old (Washington Group's Short Set of Questions)
	15.2%	5 – 16 Years Old in five districts of Punjab and Sindh (Washington Group's Child Functioning Module)
ASER 2019	0.29%	ECE to Grade 10 (School Survey)

Source: Various Sources

The results from the TEACh survey and the ASER 2018 find disability prevalence to be much higher than measures using binary approaches. At approximately 11.2% and 15.2% respectively, these estimates are much closer to the World Health Organization's global estimate which finds about 15% of the world's population to be living with some kind of disability[6].

No household or school level questionnaire in Pakistan currently probes responders beyond simple yes/no answers. This represents in a critical gap in understanding disability. The findings from Table 2 indicate that deeper probing is required not only to understand the magnitude of prevalence, but also to produce the type of granularity and depth needed to develop a robust and meaningful policy response to reducing barriers to education.

Implicit in the phrasing of the Washington Group's Child Functioning Module is the understanding that disability can refer to a diverse range of experiences, each distinguished by type in addition to severity. Having disaggregated data on each type will not only prevent underreporting but will also represent an institutional shift towards understanding disability as a multi-faceted condition. Comparing the two approaches used in ASER 2018, it is clear that even using the short set of questions provides insufficient depth in understanding disability prevalence in Pakistan. More importantly, it is not enough to simply have more accurate estimates of the magnitude of disability prevalence. In order to make tailored recommendations to improve accessibility, it is imperative to understand who these children with disability are, but beyond that, the specific challenges they face in attending school, and participating in society in general.

Critical to inclusive education is removing any barriers children might face in attending school. While one factor that contributes to these barriers is the difficulty and stigma associated with disability, another factor is that of gender. Girls in Pakistan already face greater barriers to schooling than boys due to a lack of mobility, and independence, and the data suggests that these barriers may be compounded by disability. Table 3 explores how disability and gender interact by showing the gender breakdown of children with disabilities enrolled in schools. While we would expect the number of girls with disability and the number of boys with disability to be balanced, the data shows a disproportionately higher number of boys than girls. This is true of all provinces except Punjab, where the breakdown appears to be closer to an even split.

Table 3: Gender-wise Breakdown of Disability Prevalence

Province	Percentage of Children with Disabilities that are Girls	Percentage of Children with Disabilities that are Boys
AJK	34.8%	65.2%
Balochistan	29.2%	70.8%
FATA	29.5%	70.5%
GB	33.5%	66.5%
KP	21.6%	78.4%
Punjab	47.9%	52.1%
Sindh	36.2%	63.8%
Total	**32.9%**	**67.1%**

Source: ASER 2019

It is important to stress that reducing barriers to attending school is only one aspect of inclusive education. Just because children are in school does not mean that their path to learning is not beset with challenges. While 20% of schools in Pakistan report children with disabilities enrolled as students (Table 1), only 2.06% report having ramps, and only 4.85% report being fitted with toilets specifically for children with disabilities. The lack of such facilities at schools has two implications. First, it creates a layer of exclusion that prevents students from enrolling in schools in the first place, and second, it makes schools a difficult environment to navigate for currently enrolled children with disability.

In order to facilitate learning for children with disabilities, it is important to ensure that schools are welcoming environments where they are able to participate in a wide range of activities alongside their peers without difficulty or stigma. This involves taking steps to ensure that all schools are required to maintain a basic set of infrastructural facilities to improve accessibility, regardless of whether or not children with disability are current enrolled, and additionally ensuring that children have access to facilities that ease the specific hinderances associated with their disability. For example, using high contrast colours on signage for colour-blind children, and ensuring pathways and halls are wide enough for the easy passage of a wheelchair. These efforts should be complemented by more robust data collection efforts on, not only the functional aspects of disability but, the learning outcomes of children with disabilities as well. This will allow for an understanding of how well children with disabilities are learning, and how teachers can respond to their specific learning challenges.

Finally, while SDG 4's Target 4A emphasizes making schools a safe and inclusive space, it is also important to recognize that schools are only one aspect of the environment a child with disability interacts with in the process of learning. Children who walk to school require footpaths with accessibility ramps to safely reach their destination, and children who take the bus should be able to board it without aid. It is only by holistically transforming local infrastructure to promote accessibility can we truly aim to remove all barriers to education and learning, and ensure inclusive education for all.

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