

CHAPTER ONE

INTRODUCTION

1.1 General Background

Nepal is a least developed country with a low human development index rating. It has been facing the various conflicts, such as political, economical and social. So the country itself is in crisis politically and economically. In such situation, development is not able to foster properly. People are compelled to live difficult life. Especially for the marginalized and people with disabilities (PWDs), development has become an unachievable goal. They have been left behind the mainstream of development process. According to the census of 2001, 1.63% of Nepal's total population are disabled which comprises the number of people almost 0.37 million. Different researchers have shown different incidences of disability. According to study done by New Era, of the total disabled people, 53.6% are male whereas 46.4% are female. Comparative analysis of prevalence of disability in different censuses shows a remarkable revelation that though the incidence of disability among men is higher than that of women, the percentage of female disabled are increasing gradually. The incidence of disability among men was 62.6%, 60.0% and 53.6% in census of 1980¹, 1998² and 1999³ respectively whereas the incidence of disability among women is 37.7%, 40.0% and 46.4% in 1980, 1998 and 1999 respectively.

Disability is a global problem which affects people of all the nations and races. This is known to exist from the very beginning of the human existence. It is also a socio-medical problem which is known to have been prevalent in every corner of the world. The magnitude of the problem, however, varies from country to country and from one region to another region, within the same country. There is varying meaning of disability. It is understood in many senses. It is difficult as the state in which people live in a vulnerable or distressful condition either in physical, mental or psychological context. There is no standard definition of disability. However, the World Health Organization (WHO) has developed an International Classification of Impairments, Disabilities and Handicaps." Impairment's refers to a defective limb, organ or mechanism of the body, 'disability' as the resulting lack of function, and 'handicap'

¹ Report on Sample Survey of Disabled People in Nepal 1980

² Disabled Situation Analysis of Nepal 1998, Poudel, M.M. and Dr. K.L. K. Poudel, APROSC

³ A Situation Analysis of Disability in Nepal, New Era 1999

denotes the limitations on daily life which ensue from disability" (Darke, 1999) .This definition is both widely accepted around the world and strongly criticized by disability activists as a definition imposed by professional (non-disabled) individuals. They argue that disability is the result of disabling social, environmental and attitudinal barriers (Howe, 2000). Nepal also lacks a standard definition of disability (New Era 2001: 3). However, the definition the Government has adopted and approved under the committee formed under subsection 2 of the Protection and Welfare of Disabled Persons Act 2039, has classified in 5 categories: physically disabled, visually impaired, intellectual disability, hearing impaired and mental disease. Recently, Nepal government has reclassified the type of disability into seven categories, which are as follows:

- 1) Physically disabled
- 2) Visually impaired
- 3) Deaf
- 4) Deaf Blind
- 5) Speech and hearing disability
- 6) Mental disability
- 7) Multiple disability

(AAN and NFDN, 2006)

1.2 Statement of Problem

Disabled person is still thought to be a stigma to the family. Due to lack of awareness majority of the people see disability as a result of the sin in the past. In most developing countries the society views disability as a penance to the sins so people with disability are taken as ill omen. People with disabilities are hidden as a matter of social prestige by family is still practiced largely. Because of many social and political barriers the voice of PWDs is still suppressed. Unlike other citizens of the society disabled people live in most deplorable conditions, isolated and excluded from their communities by barriers of policy, environment and attitude. They are unquestionably the largest and most discriminated minority group in the world, whose human rights are systematically violated. This violation against the poorest of poor result in worsening living conditions, degrading in human treatment, lack of adequate

housing health care, education, social inclusion and often face death (Sapporo Declaration, 2002).

According to the research conducted by New Era, there are 70.1% of the people with disabilities have stigma and difficulties to live in the society with self-respect. People with disabilities are confronted with regular discrimination and barriers in an educational, employment and social activities. Rights of all people with disabilities to participate in society have not been practiced by the state. In Nepal, the estimates of the prevalence of disabilities vary, and there is sparse information specifically about people with disabilities. So there is no actual data on disability. The recent study conducted by NEW Era on the Situation Analysis on Disability 1999 (unpublished) indicated that the service centers and the organizations for Persons with Disabilities are concentrated in the inaccessible locations of the country. Thus, Persons with Disabilities in remote areas are deprived of services. Disabled people live in most vulnerable condition in the society. Most of them are isolated from society. The large proportions of disabled people are of working and productive age but they are ignored in job. The condition directly or indirectly affects the national economy (CBS, 2002). Although the voice on behalf of people with disabilities has been raised since the universal declaration for human rights 1948, Nepal has not lunched the effecting strategy and policy on them. However some legal amendment has been made.

According to the Muluki Ain 2019, under the heading of “Poor and Kanganal” it is stated that blinds are to be provided with second class facilities, other generals disabled are to be provided with third class facilities and those who are able to study to be managed in teaching. But government has failed to provide such facilities.

Various organizations working in disability sector claim that there are about 10% PWDs out of the total population in Nepal. But the result of national census 2001 does not agree with this claim. The data shows that 0.46 percentages of total population are people with disability. Among them 39.39 percentages people were found to be physically impaired. Similarly, 24.94 percentages were blind, 12.69 percentages were mentally retarded and 7.47 percent were found to be having multiple disabilities. The statistics displays that 54.56 percent of disabled are females, which also reflects the social injustice. Deaf and hearing-impaired federation does not accept the data published by CBS and claims that there is about 0.5 percent are people

who are deaf of hearing impaired. Nepal Blind association is also not satisfied with the data and claims to be about 200,000 blinds (including visually impaired.)The census shows comparatively smaller scale, which might have caused by the error in measurements of disabled in census questionnaire.

1.3 Objectives of the Study

The general objective of this research is to study about the socio-economic condition of PWDs in Mustang district

Specific objectives of the study are as follows

-) To assess socio- economic status of the PWDs of Mustang district.
-) To analyze the family and social behavior towards the PWDs in Mustang District.
-) To explore the existing and potential opportunities of PWDs.

1.4 Rationale of the Study

As the main objective of this research is to identify the socio-economic status of PWDs in the study area of Mustang, it will provide information on living standard of people with disabilities in the study area. It will show the relationship within family and society and try to find out the potentialities of PWDs in economic development. The results will be useful to the scholars, social scientists, planners, policy makers, and concerned people to make policies and programs related to people with disabilities. The study will help to sensitize the PWDs issue in the study area as well.

1.5 Limitation of the Study

Due to constraint of time and limit budget, the research is very general in nature. There are some limitations in this research which are as follows:

1. The study is focused only to find out the socio-economic Status of disabled people where it has tried to study the relationship between disabled individual and family, family and society. It has also tried to analyze potential opportunities for disable people according to their nature of disability.

2. Due to constraints of time and limit budget, the study is based only a small sample size of different kinds of disabled people in the VDC. The research is based on purposive sampling through which respondents for the questionnaire were chosen.

1.6 Organization of the Study

This study consists five chapters. Chapter one consists six parts which give the general introduction of the study. Similarly, chapter two has five parts which give details about literature review on term of disability. Chapter three deals methodology about this study and it has got eight parts. Chapter four describes the socio-economic background of the study area. Data analysis and interpretation are given in this chapter. It has got two titled and fifteen sub-titles. Lastly, chapter five deals about major findings about this study along with conclusion and recommendations.

CHAPTER TWO

REVIEW OF LITERATURE

2.1 Reviews on the Term of Disability

Disability is the physical and mental situation of body when one is unable to do the usual activities easily because of physical or mental impairments. The term "Disability" is described in various way according to different scholars and researcher from different places. According to the Voluntary Health Association of India (1994), British has used three different terms namely loss of faculty, disability and disablement in order to test disability. There are some means verified to separate concepts about disability.

) Loss of Faculty

Loss of faculty is any pathology condition or any loss reduction of normal physical or mental functions of an organ or part of the body. A loss of faculty in itself may not be a disability but is an actual cause of one or more disabilities, for example, the loss of one kidney.

) Disablement

It is sum total of all the separate disabilities an individual may suffer from. It means an overall inability to perform the normal activities of life- the loss of health, strength and power to enjoy a normal life. While assessing an individual, his/ her physical and mental condition, inconvenience, genuine embarrassment, or anxiety, are taken into account.

) Disabilism

Voluntary Health Association of India (1994) defines the number of people and agencies deeply concerned with the issues relevant to disabilities are increasing all over the world. They are demanding greater opportunities for their full participation in society so that the disabled enjoy independent living and economic self-sufficiency. These people are actually aware of the existence of a social process described as Disabilism.

) Impairments

Technically, the term 'impair' denotes damage or loss of physiological, psychological or anatomic function or structure or mental function. This could

mean loss of foot/arm, poor eyesight, eyesight, hearing impairment, paralysis of limbs, defective vision.

) **Disability**

As a result of impairment a person might not be able to perform activities of daily life considered normal for his/her age, sex, etc. A disability describes a functional limitation. For example, being disabled means having difficulty communicating (includes difficulty seeing, hearing and speaking), having difficulty moving and having difficulty learning. In other words, 'it is the restriction or lack of ability to perform and the manner or within the range, considered normal for a human being'.

) **Handicap**

A handicap is a disadvantage in a person's life due to impairment or disability as compared to other persons in performing the roles expected of him/her in society, like not being able to attend school or get a job being socially isolated. Thus, a handicap is loss or limitation of opportunities to take equal part in social life.

) **Development Disability**

The term 'Development disability' is used to denote the condition of a child who needs special care as well as service to live independently. Due to physical disorder, mental retardation or other sensory disorders, child becomes unable for proper development during the developing period. 'Developmental disability' is used to denote the condition of a child who needs special care as well as special service to live independently. Due to physical disorder, mental retardation or other sensory disorders, child becomes unable for proper development during the developing period (Bhattra, 2003).

In 1980 the World Health Organization (WHO) adopted an international classification of 'impairment', 'disability' and 'handicap'. There is clear distinction between these three. 'Impairment' is any loss or abnormality of psychological, physiological, or anatomical structure or function. Impairment can be temporary or permanent. This includes the existence of or occurrence of an anatomy defect or loss in a limb, organ tissue or other structure of mental function. A disability is any restriction or lack of ability (resulting impairment) to perform an activity within the range considered normal for a human being. A disability may be temporary or

permanent, reversible and progressive or regressive. A handicap result from impairments or disability and limits or prevents the fulfillment of a function that is considered normal for human beings.

Many languages fail to make an important distinction between disability and handicap. Disability refers to the person; handicap does not. For many reasons the projective and confusing level of the handicapped should not be used at all. The word handicap originates from horse races and describes the disadvantages by the rules of race (R.E. Allen (ed.), 1990).

Standards Rules on the equalization of Opportunities for Persons with Disabilities states the term disability summarizes a great number of different functional limitations occurring in any population in all countries of the world. People may be disabled by physical, intellectual or sensory impairments, medical conditions or mental illness. Such impairments, conditions, or illness may be permanent

Internationally, various researches have been done relating the disability as main topic. But in the case of our country it is still difficult to find satisfactory study on disability. Studies on other marginalized group like dalit, ethnic group can be found easily than the study on disability. Due to lack of standard study on disability in Nepal's context we should overview on international studies too.

2.1.1 International Studies on Disability

According to UN estimation, the Asian and the Pacific region have nearly 200 million people with disabilities. Additionally, there are about 600 million people with disabilities (about 10% of world population) worldwide. Among them 82 percent live in developing countries (UN, 1995). The UN stresses that, likewise demographic trends in the region that due to increasing life expectancy several developed countries have already experienced a phenomenal increase in aging population and developing countries are on the threshold of facing the same (UN, 1995). During the United Nations' Decade of People with Disabilities (1983-1992), it was recognized that people with disabilities particularly in developing countries were not considered as potentially contributing to social and economic development. Unlike other citizens of the society disabled people live in most deplorable conditions, isolated and excluded from their communities by barriers of policy, environment and attitude. They are unquestionably the largest and most discriminated minority group in the world, whose

human rights are systematically violated. This violation against the poorest of poor result in worsening living conditions, degrading in human treatment, lack of adequate housing health care, education, social inclusion and often face death (Sapporo Declaration, 2002). The information Kit on the United Nations Standard Rules on the Equalization of opportunities for persons with disability, 1995, states that 98% of disabled people of developing countries are not rehabilitated (UN, 1995). Some essential data that UN has revealed are:

-) About 20 million people who need wheel chair are not provided with wheel chair. In some countries, disabilities of more than 50 percent disabled people were caused by disease or war (UN, 1995).
-) In some countries, 90 percent children with disabilities die before 20 years. Ninety percent mentally retarded children don't live more than 5 years (UN, 1995).
-) In Zimbabwe, 52 percent children with disabilities don't have access to education; the percentage is 25 in Hong Kong and 97-98 in India (UN, 1995).
-) 28.4 percent disabled children in Britain go to different school (UN, 1995).
-) 41 percent of disabled people get only primary education in Canada (UN, 1995).
-) 67 percent disabled people of working age 15-64 are unemployed in USA and UK. The percentage is 58 in Tunisia (UN, 1995).
-) One in 3200 deaf people dies of HIV/AIDS in United Kingdom (UN, 1995).

The "young old" group (aged 60-69) in 1990 constituted 62.65 million persons in China, 38.39 million in India, and 7.37 million in Indonesia. The "Young Old" group continues to work in self-employment or non-organized sectors without pensions or social security till they are able to work. Similarly, the Health and Activity Limitation Survey 1986 shows that 13.2% of the Canadian population has physical and mental disability. The study has tried to examine the overall socio-demographic structure of disability in Canada, Model impact of Rural-Urban difference in disability and on support services, provide estimation of disability at the regional scale using rates directly from HALS, and demonstrate an ecological approach to modeling disability rates at the census tract level for census metropolitan areas.

Approximately 1 in 10 of the population in most 3rd world countries is handicapped or disabled in some way. The single most salient fact to recognize is the close connection that exists between poverty and disability in the 3rd world. Poverty is itself a major cause of disability so it creates vicious circle over disabled people and their freedom too. New hazards are emerging which threaten to make the burden of disability born by the world's still heavier. The kind of development now occurring in many 3rd world countries provide them with the improved standard of living that eventually followed the industrial revolution in the developed countries (TWGFD, 1983).

In women's context, approximately there are 15 million women with disabilities of reproductive age group who were reported to have inadequate of options for effective contraceptives. The inadequacy was attributed to physical access barriers, socio-economic factors, and educational gaps on the part of medical providers and the disabled women. Moreover, women with disabilities have little opportunity to receive contraceptive information or safe sex messages since health education classes are not geared to handle issues pertaining to disability and are often excluded from these classes (Walner SL, 1999).

According to WHO Regional Health Report 1998 (WHO, South-East Asia Region), women in developing countries are generally more malnourished than man because of biological demands such as menstruation pregnancy and lactation process they need more nutrition. These biological processes make women nutritionally deficient. If mother gets frequently gross deficient, in basic and proper foods(deficient in calories, protein and several nutrients), it affects the fetus directly resulting various types of disabilities such as mental retardation, visual impairments, physical disability etc.

2.1.2 Social and Medical Model of Disability

Disability from the perspective of the social model is seen as a product of a disabled person's relationship to the economy (Finkelstein, 1980; Stone, 1984). Because disabled people are seen as unable to contribute to the economy society due to their functional limitation, they are being excluded from work place and suffer great social and economic deprivation (Oliver, 1990; Doyle, 1995). Disabled people are especially disadvantaged in meeting their basic needs including the economic ones such as the need for remunerated employment (Turmusani, 1999)

Social model of disability proposes that systemic barriers, negative attitudes and exclusion by society are the ultimate factors defining who is disabled and who society is not in particular. It recognizes that while some people have physical, sensory, intellectual if psychological variation, which sometime may cause individual functional limitation of physical impairments, this does not have to lead the disabilities, unless the society fails to take account of and include regardless of their individual differences. The social model doesn't deny that some individuals' differences lead to individual limitations or impairments, but rather that there is not the cause of individuals being excluded. The model is a different way of thinking about disability. It has been developed over years by academicians and campaigns which replace old style of thinking with a very different perspective. In social model, it has been argued that disability is caused by the barriers that exist within society and the way society is organized, which discriminates against people with impairments and excludes them from involvement and participation. ⁴

The origin of the approach can be traced to the 1960^s and the disabled people's Civil Rights Movements. The specific term itself emerged from the United Kingdom in the 1980s. Before the social model came in raise the medical model was used to think about people with disabilities. In past the medical model was a standard way of thinking about disabilities that remains fine for doctors but less useful for others. The medical model concentrates only on disease and impairments. It puts what is wrong with someone in the foreground. The model concerned with causes of disease. Instead of emphasizing the disability, the social model puts the person at the forefront which emphasizes dignity, independence, choice, privacy as well as freedom. So the key concept of social model is that society disables people where as medical model emphasizes that some disease or body's impairment makes people disabled. (Wikipedia)

2.1.3 Situational Analysis of People with Disabilities in Nepal

However some researches done in past decades have tried to pull out the real situation of disabled people in Nepal. The study done by New Era in 1999 is found more significance in situational analysis on disability. According to New Era's study 1999 the status of disabled people is very low in family. Disabled people are usually

⁴ <http://www.open.ac.uk/inclusiveteaching/pages/understanding-and-awareness/models-of-disability.php>

seen as a burden by the household member. 90.5% of the households reported that they had faced various problems having disabled persons in the households. The study indicates that 31.4% of the household heads felt that the disabled member was a huge economic burden for the household.). Due to lack of authorized definition of disabilities in Nepal, it is difficult to identify the exact number of disabled people in Nepal. Nevertheless, different surveys of different organization have revealed varied perspective and magnitude of disabled people ranging from 1 to 13 % of total population. (Rana, 2008).

National census 2001 has counted 1, 03,795 (0.46% of total population) disabled people in Nepal. Among them 5, 6633 were female and 47,162 were male. Most of them were physically disabled in both sexes followed by deafness (Table: 1).

Table 2.1: Population by Types of Disability in Nepal

Types of Disability	Population		
	Male	Female	Total
Physical	19495	21001	40798
Blindness	5483	11043	16526
Deafness	11948	13592	25540
Mentally Retarded	6469	6692	13171
Multiple	3455	4305	7760
Total	47162	56633	103795

Sources: CBS, 2002

There is considerable dispute within Nepal regarding the available prevalence data on disabled people. The latest census findings included a prevalence rate of 0.45 percent. A number of studies have been undertaken over the past 30 years which have produced widely desperate figures ranging from 1.5 percent to 5 percent (CBS, 1971). A disability survey conducted in Kanchanpur district in 1995 estimated that 5.04 percent of the population was disabled and yet a national survey in 1995 indicated that 4.90 percent of total population had intellectual disability (DS, 1995) (Laansdown, 2003). Despite, few research studies have tried to find out the data on disability we are still unable to get reliable data due to lack of sincerity of stake holders and government.

2.1.4 Socio-economic Status of People with Disabilities

Disabled people are living in low socio-economic condition and in some cases they are deprived of consuming facilities. Disabled people are more vulnerable of being handicapped and often discarded from the household. Most of the cases of disabilities are by birth. The disability by birth may be caused by Lack of Anti natural care (ANC) or Delivery Care (DC). Disabled people are one of the deprived as well as vulnerable groups (Kayastha). Disparities in education, employment and relationships are more pronounced in PWDs. They are deprived of enjoying same human rights or equal access to services as peers without disabilities (website: www.social.un.org/youthyear2010-2011). UNESCO estimates that 98% of children without disabilities in developing countries do not attend school and 99% of girls with disabilities are illiterate). The considerable variation in the prevalence of disability is women report significantly higher rates of disability than men. When examining prevalence across racial and ethnic groups, Puerto Rican men and women have the highest rates of disability, regardless of the indicator used to measure disability. Anglo men and women report the lowest rates. Women, regardless of disability status are more disadvantaged than are men. This situation is exacerbated for Black and Puerto Rican women with disabilities, who are less likely to be employed, work fewer hours, have lower wages, and are more dependent on income from social welfare programs (Santago, 1994).

In Nepal's context, recent study conducted by New Era summarizes that among the total household's heads surveyed the majority where Hindu comprising of 68 percent, while 11.9 percent was Buddhist. The prevalence of disability was found more in Buddhist household. Where, 9.56 percent of the Buddhist families had had disabled member. A much higher percentage of Buddhist households found in the mountains were from Tamang and Sherpa communities. The prevalence of disability has been found to be high among Tamang and Sherpa communities with prevalence of 16.74 percent of households as compared to other groups. The prevalence among the Magar community has also been prominent with 10.82 percent (New Era, 2001).

The other prominent group has the occupational caste group with prevalence of 10.36 percent household. The group includes blacksmiths, tailors, sweepers, cobblers, laundry-men, etc (New era, 2001). In the most cases they were deprived of participating in the community activities and using community facilities such as schools, public water taps and community wells. It is evident that this group of people

is deprived of social justice and more susceptible to the consequences of disability (New Era, 2001). The prevalence of disability among the Tharu/Rajbansi has also been prominent with a prevalence of 10.39 percent of the total number of those households (New Era, 2001). According to the educational level of survey by New Era 2001, 26.8 percent of the children of school going of 6-9 had not been yet enrolled in school. It was found that 31.2 percent of the total population had obtained primary education and this figure mostly represents children of primary school age. Only 5.3 percent of the population had pursued higher education level of S.L.C. and above (New Era, 2001).

In mountain region, 49.5 percent of the population was illiterate. The hilly region was found to be better with 35.3 percent having no education. Even in the case of acquiring higher level of education level of education it was hills that had better position (New Era, 2001). Among the total households with disabled members, 57.6 percent of household's heads had no education while the figure for household without disabled members was 50.7 percent with regards to location, there were more rural household's heads who were not education. In the rural location the households with disabled members had 59.9 percent of household heads with no education and the households without disabled members had 52.8 percent of the household heads with no education (New Era, 2001).

The research conducted by New Era demonstrates that 89.8 percent of the households with disabled persons had land and 10.2 percent were landless. Most of the main-earning members of the households were involved in agricultural work, and made up 60.1 percent of the total households. However this figure seems to be lower than the estimate of the Nepal Human Development Report (HDR) with 80 percent and NFHS with 90 percent involved in this sector. This could be due to the difference in the target population. The NFHS 1996 dealt with the occupation of the women and Human Development Report dealt with all earning members. The present concerns only the main-earning members.

In developing countries, maximum population of PWDs is apart from social justice and earning opportunities. Despite Nepal has ratified the UN Convention on the rights of people with disabilities, disabled people still have less freedom of enjoying their rights fully. Due to low socio-economic background people with disabilities are compelled to live in miserable condition. Particularly in remote area, neither there are opportunities of education nor access of skill oriented trainings.

2.2 Review on National and International Legislative Actions

In the late 20th and early 21st centuries, many countries have formed policies and laws at reducing discrimination and prejudice against people with disabilities. These laws have begun to appeal as the notion of civil rights has become influential worldwide. The disability right movement aims to improve the life standard of people with disabilities and to confront disadvantages and prejudice against PWDs. The major concern of the movement is to achieve civil rights for people with disabilities. Later, it focuses on issues of accessibility in transportation, physical infrastructure and equal opportunities in employment, education and housing. Similarly, the movement deals with self determination and independent life. The movement has played a vital role to raise the voice of disabled people for their rights. Additionally, they have become active in social and political affairs as well. Therefore, some changes can be seen in disabled community (C. Thomas, 2004). In 1976, the United Nation launched its International Year for Disabled Persons (1981), later it is renamed as the International Year of Disabled Persons (IYDP). It was declared under the theme "Full participation and Equality" taken by the UN General Assembly. It was an important breakthrough in the field of disability. As the follow-up program of IYDP, the years 1983-1993 was declared as The UN Decade of Disabled Persons featured a World Program of Action Concerning Disabled Persons. The decade was closed in an address before the General Assembly by Frank Bowe and Robert Davila who are deaf and had represented the planning of IYDP 1981. (Wikipedia)

The convention on the rights of person with disabilities and its optional protocol was adopted on 13th December 2006 at the United Nation Head quarter in New York. It was opened for signature on 30th march 2007. It is highly appreciated convention of UN. The propose of the convention is to promote, protect and ensure the full and equal enjoyment of all human rights and fundamental freedom by all people with disabilities and to promote respect their inherent dignity. The convention was signed by Nepal in 2008 which marked Nepal's commitment towards the international policy framework for person with disabilities. In 2009, December 27th Nepal's government has ratified the UN convention under the house parliament assembly.

In developing countries, disability service systems have tended to consist of small scale rehabilitation, education, training and sheltered employment programs and projects imported from industrialized countries. And the Community Based

Rehabilitation CBR programs tend to be initiated and heavily supported by development agencies and NGOs. The World Bank currently supports at least one of these efforts, the War Victims Rehabilitation Project in Bosnia-Herzegovina. (Metts, 2000).

Nepal's government has issued various policies to conserve the rights of disabled people from time to time. The Protection and Welfare of Disabled Persons Act 2039, which is the first step of government to aware about disable right. Later, the government has issued service policy 2053, special education policy 2053 for people with disabilities, distribute disabled identity manual card 2064 and from the interim plan 2064-2067 has taken a strategy to involve the disabled people in mainstream development. The government has not properly implemented these policies though.

CHAPTER THREE

METHODOLOGY

3.1 Research Design

As this study is the first in the field of disability in Mustang, descriptive research design has been adopted to ease researcher in collecting information about Socio-economic status of disabled people. For data collection, mostly qualitative technique is used to explore social and family behavior towards the disabled people which would help to know their status in society and own family. However, quantitative technique is also used to identify the income, education and livelihood status of disabled people in the study area.

3.2 Study Area

The population of Mustang in 2001 was 14,981. Altogether 3,263 households are located in the districts. The average household size of Mustang is 5.4 members. Gurungs and Thakalis are dominant groups representing 84% of the total population. Dalit, Magar, Sherpa, Newar, Tamang, Brahmin and Chhetris are in minority representing 16% of the total population. Amongst Dalits, Bishwokarmas and Pariyars represent 8.2% of the total population. Majority of Thakali community resides in the lower Mustang. The research is based on kunjo VDC as it has highest number of disabled people in lower Mustang. . Although some places in the district are connected through roads and by air, the Kunjo VDC is still inaccessible. From District Woman Development Committee data collected, it was identified that out of the total VDCs in the district, *Kunzo* VDC had high number of recorded PWDs identity cards distribution. Out of the total PWDs who received the identity cards in the VDC, 22 were taken as respondents. Similarly, 12 PWDs who had not yet received the card were also taken as respondents for the survey.

During the field visit the researcher had tried to meet all disabled people but without success.

3.3 Preparation of Tools for Data Collection

The measure tools of data collection were semi-structured interview and unstructured interview. Semi-structure interview was designed to interview the

disabled people and their family member to know the socio-economic status of disabled people. Due to its flexibility I had used semi-structured interview so that it could be easy to raise further question while interviewing with respondents. Similarly, unstructured interview was designed for the key informant interviews. These tools were developed on the basis of literature review and suggestion of intellectuals with disability and experts.

3.4 Sampling Procedure

3.4.1 Sample Size and Sampling Method

Though the entire PWDs population was planned to be taken as respondents, it was not succeed due to migration and some other causes. So, only 34 respondents were taken for the study. Among them 22 PWDs were taken as respondents from those who were distributed with identity card and 12 from those who had not received identity card yet. Purposive sampling was used to ease the researcher for collecting data. It became useful to include all types of disability in the study area.

3.5 Tools of Data Collection

3.5.1 Semi-structured Interview

The semi-structured interview comprised of more than 100 questions. The questions were both open and closed. The questions were developed to identify the actual status of people with disabilities and the behavior of society and family members towards the people with disabilities. Some questions were developed to find the potentialities of PWDs in income earning.

3.5.2 Focus group discussion (FGD)

Focus group discussion was held among the local intellectuals, local leaders, family members and disabled people. The discussion was conducted using FGD checklist as given in Annex. The discussion revolved around the status of disability in the VDC, existing problems and future prospects. FGD was conducted regarding these topic namely access on education, health facilities, disabled right (identity care, citizenship card, government allowance etc), social and family behaviour towards them, participation in social activities and problem facing by family member for their member with disabilities.

3.5.3 Case Study

Three people with disability were studied in depth to identify their existing socio economic condition, their sources of livelihood and behaviour of society and family towards them. These respondents were chosen purposively to serve the needs of the research. Life history and in depth interview were the tools used to collect the information for the case studies.

3.6 Reliability and Validity

As the study is qualitative in nature, there has been no use of statistical methods for testing reliability and validity of data. However, various methods of triangulation, observations and cross-questions have been used to cross check the collected data.

3.7 Constraints or Limitation in Data Collection

There were various constraints during the data collection. Geographical remoteness became one of the barriers for meeting respondents on the allocated time. Due to the engagement of people on their seasonal activities (harvesting season was running during the time of the field visit), the researcher faced difficulty in meeting the target group. Majority of the respondents encountered were suffering from hearing and verbal disability, and therefore there was difficulty in communication.

3.8 Data Processing and Analysis

The data and the information culled from the semi-structured interview, in depth interview and focus group discussion are tabulated and analyzed. The information that are directly related to the socio-economic status of people with disability were studied with extra effort while those unnecessary and insignificant one were paid less attention and thus were left behind. The essential data were rearranged in the tabular and graphical manner the way they make suitable appearance and be easier to study. The table, graphs, maps and diagrams were used to analyze the information and to reach the conclusion.

CHAPTER FOUR

DATA ANALYSIS AND INTERPRETATION

4.1 Introduction of the Study Area

Mustang district, a part of Dhaulagiri zone, is one of the seventy five districts of Nepal, which is located in North Nepal. The district covers an area of 3,573 km² and has population of 14,981(2001). There are 16 Village Development Committee in Mustang among which Kunjo is one which has beautiful natural assets. According to the population census of 2001, the total Population of Kunjo is 728 including male population 409 and female population 319. The census shows the total number of household 143, but the field survey found changed in the number. It has 9 wards including 154 households now. Agriculture is the main source of livelihood in Kunjo VDC. As it has fertilized land, the VDC is known as food grain in Mustang. Maize, barley, buckwheat and potatoes are main crops. The VDC is surrounded by pine forests. It is said to be a proper place from where Dhaulagiri, Nilgiri and Annapurna can be observed easily which are known as popular mountains in the world. Because of its natural beauty the VDC has potentialities in tourism development. Now the area is used as an alternative way to visit Annapurna base camp. TT Lake in Kunjo VDC is one of the beautiful pieces of Mustang where we can see swan and different kind of birds like peasant, dove so on.

4.2 Settlement Pattern

The settlement pattern of Kunjo VDC is scattered. There are 5 to 60 kilometer distances according to the villages. According to the villages, It takes 30 to 2 hours (on foot) to reach one to another. The house structure in the VDC is traditional but somewhere we can see the modern type of house due to impact of tourism. We can find caste diversity in the VDC. The majority of Thakali community can be seen in the VDC.

4.3 Facilities Available

The facilities available in the study area are not sufficient. The infrastructures are not appropriate for disabled people. There is only one health post which is not enough to treat ill people. The area is apart from the road so physically impaired

people feel difficult to travel one place to another. Anyway the VDC does possess good electricity and drinking water facilities. There is only one lower secondary school, which is located near the VDC office. After completion lower secondary level one needs to go another place for further study. There are total five primary schools in the VDC. Some local organizations are running development programs in collaboration with INGOs and NGOs.

4.4 Occupation

The main occupation of the people in Kunjo VDC is agriculture as there is no alternative way of livelihood. The VDC lacks tourism business due to lack of awareness and proper marketing. Especially the male people with disabilities are involved in ploughing and the female are involved in carrying manure but the living status of people with disabilities is not fine. They are living under the instruction of able member of family. They do what the able member order.

4.5 Socio Economic Background of People with Disabilities (PWDs)

According to Oxford Dictionary, the Socio-economic status (SES) is a kind of measurement of human development which attempts to classify individuals, families or household in terms of indicators such as occupations, income and education. The main objective of the study was to study about the socio-economic status of people with disabilities in Kunjo VDC in Mustang. In this chapter analysis and interpretation of data in terms of cast, age, types of disability, marital status, education level and other socio-economic related background are presented and explained to attain the basic objectives. The data are shown in different tables and chats. The analysis of the chapter is based on the questionnaire survey, interview and observation. Mainly the data from primary sources have been analyzed to meet the various objectives.

4.6 Social status of the respondents

The social status of people with disabilities was measured by the factors namely age, gender, caste, types of disabilities, causes of disabilities, marital status, residential status and the level of education.

4.6.1 Age Structure

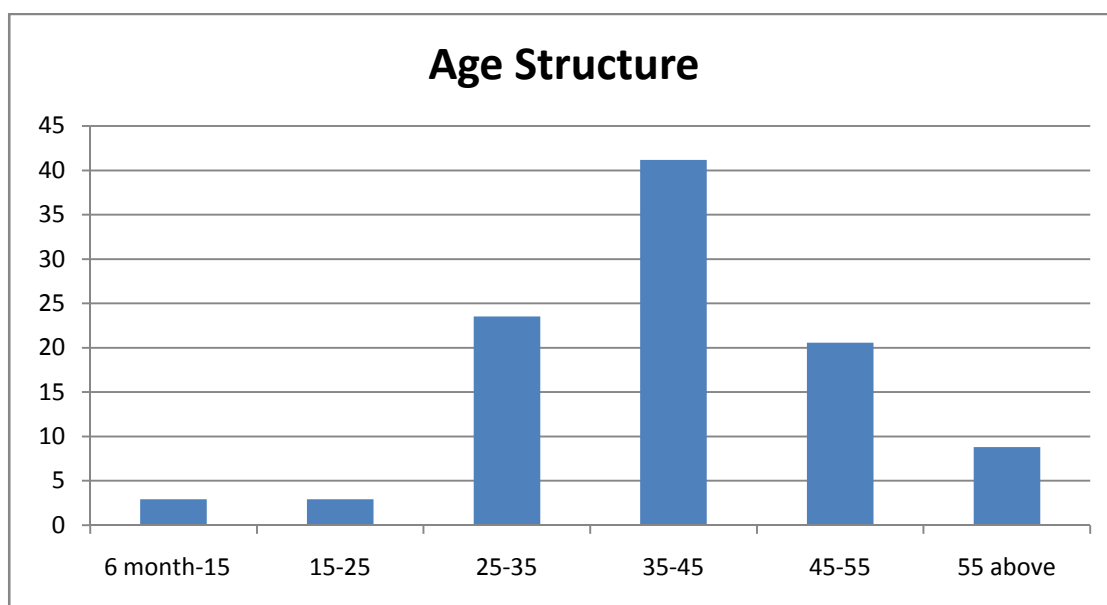
Age is an important demographic feature and an essential variable in analyzing the status of an individual. Most situations like educational, occupational and health are influenced by the age factor. Capability of doing something is influenced by the age. It is linked with marriage, bearing children, fertility and other productive works of people. So it is needed to analyze the age factor of the respondents so that it could be easy to study socio-economic background of the respondents. Hence, the age structure analysis of the workingwomen of the area is shown below.

Table 4.1: Age Structure of the Respondent

SN.	Age Distribution	Number	Percentage (%)
1.	5-15	1	2.94
2.	15-25	1	2.94
3.	25-35	8	23.52
4.	35-45	14	41.17
5.	45-55	7	20.58
6.	55-above	3	8.82

Source: Field Survey, 2010

Figure1: Age Structure presented in Bar Diagram



Source: Field Survey, 2010

The table shows that 41.17 % of the total respondents belong to the age group 35 to 45, 23.52% belong to the age group 25 to 35, 20.50% belong to the age group 45 to 55, 8.82% belong to the age group 55 above and total 4% belong to the age group 5

to 15 and 15 to 25. This shows that most of the people with disabilities are of the age group 35 to 45. According to this data most of the respondents were of working age group.

4.6.2 Gender

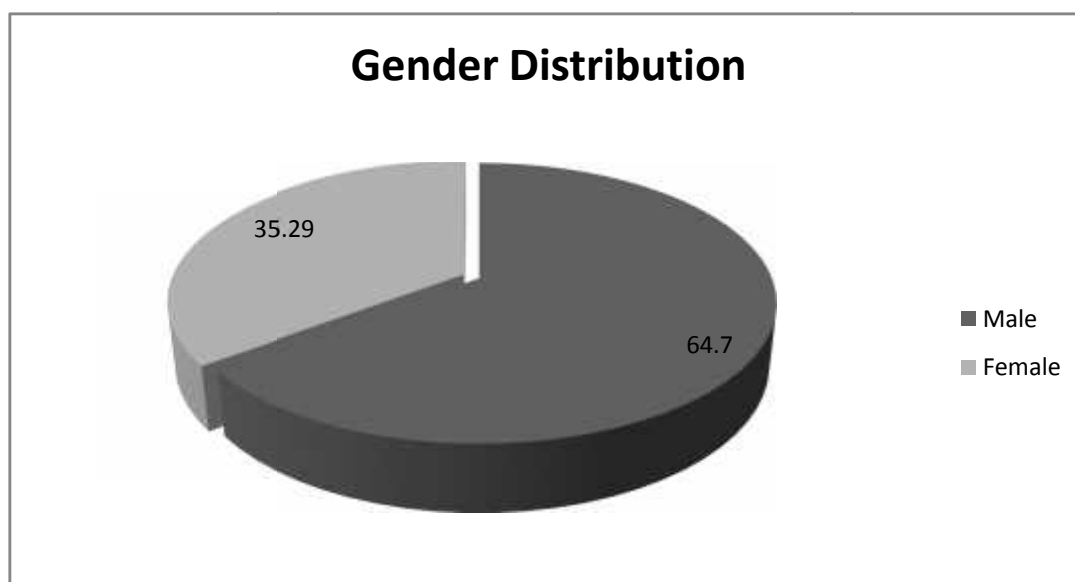
Gender is a major factor which affects society economically and socially. It must be taken as an index to analyse the social status of People with Disabilities. The term refers to the socially constructed roles, behaviours, activities and attributes that a particular society consider appropriate for men and women.⁵ In developing countries, there is a higher chance of gender discrimination rather than in developed countries. Social behaviour towards the People with Disabilities varies through gender perspective. The table below has shown the gender distribution in the study area.

Table 4.2: Gender Distribution

SN.	Distribution	Number	Percentage (%)
1.	Male	22	64.70
2.	Female	12	35.29

Source: Field Survey 2010

Figure 2: Gender Distribution presented in Pie-Chart



Source: Field Survey 2010

The chart shows that most of the respondents were found to be male. The percentages of male respondents were nearly double comparatively female respondents. Among the respondents 35.29% were females where as the number of

⁵ World Health Organization

male respondents were 64.7%. The main cause behind the huge difference between males and females number was found that most of the parents had sons than daughters.

4.6.3 Types of Disability

It is necessary to categorize the types of disability found in the study area so that it could make research easy to analyse the status of people with disability. Types of disability affect the living status. Comparatively people having multiple disabilities have more difficulties in living than other.

Table 4.3: Types of Disability shown in table

SN.	Distribution	Number	Percentage (%)
1.	Speech and hearing disability	16	47
2.	Multiple	9	26.47
3.	Physically disabled	3	8.82
4.	Mental disability	2	5.88
5.	Visually Impaired	2	5.88
6.	Deaf blind	1	2.94
7.	Deaf	1	2.94

Source: Field Survey, 2010

The table shows the highest rate of speech and hearing disability. It shows that 47 % of the total respondents were having speech and hearing disability. Among the 34 respondents 26.47% were having multiple disabilities whereas 8.82 % were physically disabled, 5.88% were visually impaired and 5.88% were mentally disabled. Deaf and deaf blind had equal rate which is 2.94%.

4.6.4 Age on Onset of Disability

It is immensely important to know the age on onset of disability, to analyze the plight of people with disability.

Table 4.4: Age Onset of Disability

S.N.	Age on set of disability	Number	Percentage (%)
1.	By birth	24	70.58
2.	5months-5 years	5	14.70
3.	5 years-15 years	3	8.82
4.	After 15 years	2	5.88

Source: Field Survey, 2010

The above table shows that 70.58% of the total 34 respondents were disabled by birth which is the highest number in all. 14.70% were disabled at the age of 5 months to 5 years. 8.82 were disabled at the age of 5 years to 15 years. 5.88% of the total respondents were disabled after 15 years. The table shows that most of the respondents were disabled since their infant age.

4.6.5 Causes of Disability

Identifying the causes of disability can help us to analyze the social, economical, family and physical environment that people with disability live. There may be different causes of disability which should be known for the socio-economic research. Identifying the reason of disability can give information about the history of respondent so that it can alert next generation.

Table 4.5: Causes of Disability

S.N.	Cause Distribution	Number	Percentage (%)
1.	By Birth	24	70.58
2.	Other (wrong treatment)	6	17.64
3.	By Accident	4	1.76
	Total Number of Respondents	38	100

Source: Field Survey, 2010

The above table shows that 70.58% of the total respondents were disabled by birth. It can be said that there may be hereditary trait and other health problems of expected mother which causes being disabled. 1.76% respondents were disabled due to accident, whereas 17.64% were disabled because of wrong treatment and superstition (dhami jhakri), and others were due to the negligence (Illiteracy, poverty etc). Here is one case study added which shows the superstitious belief of people which causes disability.

A Man became Disabled due to Superstitious Belief

Khim Narayan Sherchan 32 years old is the second son of Durga Narayan Sherchan and Purna Kumari Sherchan. He is a young and energetic person having hearing and speech disabilities. In addition, he has a sound mind and interesting skill. He works as a carpenter. Although, he is an illiterate person, he is sharp in measurement. In addition, he can write his name too. Among the people with disabilities in Kunjo, Sherchan is living his life in a prodigious way. He earns 600 rupees per day. Local people are satisfied with his work. He is good in digging and ploughing so, sometimes he goes to farming too.

He seems very happy with his marital life. He has a wife who is physically and mentally well. She is elder than him. There is a sound understanding between them. They have a daughter. He loves his daughter very much. He is eager to see his daughter to be educated. If he was provided with any vocational training related his interest, he could be a perfect man. His parents had urged him to send school. They also tried but without success because there was no appropriate education system for those who were not able to listen and speak. He communicates with the help of bodily gesture. He doesn't know the sign language which is used widely by deaf and speechless people in developed world. The cause behind his disability seems to quite strange. When he was 3 years old, he fainted suddenly. Then he felt sick for a long time. His parents called local jhankri (which called the witch doctor) for the treatment. The Jhakri did his duty but no change had seen. Now his parents doubt on the jhankri for his wrong treatment. The effect is seen by using the hot spatula by the shamon. (tato panyule hat gala khuttama dameko huda tesaiko asar pareko hunasakne). They regret for not considering Khim's health treatment on time.

Major findings

- J No education due to the lack of sign language
- J No vocational training
- J Disabled is seen because of wrong treatment (dhami Jhankri)
- J Repentance by parents

4.6.6 Marital Status

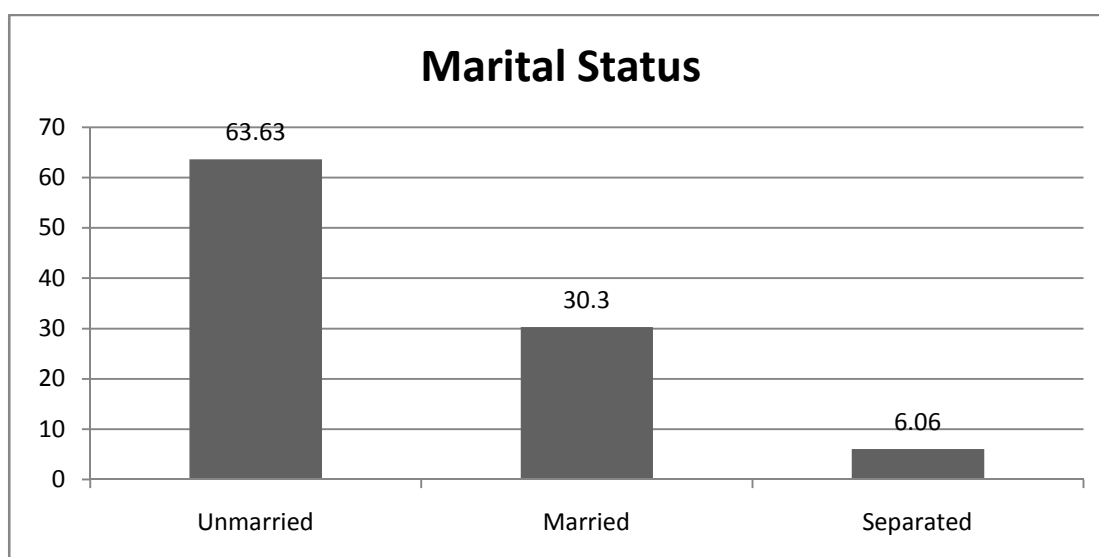
Marriage is one of the social process which affects human life socially and economically. It is a measurement used to analyse the status of human beings. Marriage can play a vital role in changing human life. Some people feel their life full of happiness and some feel themselves entangled with boundaries after marriage. Anyway marriage is a factor which has contributed in transforming life one stage to another. It is a permission given by a society to stay both opposite sex under one roof where they have a physical relation and create a family ties with blood. Because of disability, disabled people rarely have chance of getting married. They have to face many hindrances to get marry. It is not easy to find suitable partners. Most of the family members seem not interested in marriage of disabled people. Due to unwillingness of the family and their own thought the marital status of people with disability seems very sensitive. The table below shows the marital status of respondents.

Table 4.6: Marital Status of Respondent

SN.	Distribution	Number	Percentage (%)
1.	Unmarried	21	63.63
2.	Married	10	30.30
3.	Separated	2	6.06
Total		33	100

Source: Field Survey, 2010

Figure 3: Marital Status of Respondents in Bar Diagram



Source: Field Survey, 2010

For PWDs aged from 16 and above, questions on marital status were asked during the field survey. While the marriage law requires that the minimum age for marriage should be 20 for a man and 18 for woman, in fact many people got married at much earlier age, especially in rural and remote areas. The data shows a very high proportion of PWDs at studied provinces who were unmarried. This figure shows clearly how the PWDs were disadvantaged regarding marriage. Among the respondents, 63/63.82% were found to be unmarried whereas 30.30% were married. Similarly, 6.06% were found to be separated.

Table 4.7: Marital Status by Gender

SN.	Male	Number	Percentage	Female	Number	Percentage
1	Unmarried	14	66.66	Unmarried	7	58.33
2	Married	5	23.80	Married	5	41.66
3	Separated	2	9.52	Separated	-	-
	Total Number	21	100	Total Number	12	100

Source: Field Survey, 2010

There was a tremendously sharp disparity in marital status between male and female respondents. As shown in table among the 21 male respondents, 66.66% were found to be unmarred whereas 58.33% of total 12 female respondents were found to be unmarried. Similarly, 23.80% male respondents were married where as 41.66% were found to be married. There was 9.52% male respondents were found to be separated in contrast, there was no separated female respondents found in the study area.

4.6.7 Causes of Not Being Married

People with disability rarely have chance of getting married. There are various reasons which have been playing a role for not getting married. Having a disability is not only the cause of being unmarried. There are other causes which make them apart from marital life. The table below shows the causes of not getting married found in the study area.

Table 4.8: Causes of Not Getting Married

S.N.	Distribution	Number	Percentage (%)
1.	Family	9	47.36
2.	Not found suitable partner	6	31.57
3.	Not wish to Marry	3	15.78
4.	Not able to marry	1	5.26
	Total Number of Respondents	19	100

Source: Field Survey 2010

In this data, family has been seen as the main cause of being unmarried. One of the family members of a respondent named Santa Kumari Sherchan told what they would do after getting married while they had nothing to make their partners happy. Similarly, other parents of disabled people shared same thoughts that their family members with disability were not able to handle their marital life so they didn't want them to get marry. In contrast, the respondents had shown their eager on the topic. Even they blamed their parents for not supporting them to get marry. The table shows that the cause being unmarried behind the 47.36% of total unmarried respondents was found to be family. Similarly, 31.57% respondents were found to be unmarried due to not getting suitable partners and 15.78% of the total unmarried respondents were found to be uninterested to get marry. In addition, one person was found to be unable to get marry because of his disability situation.

4.6.8 Caste

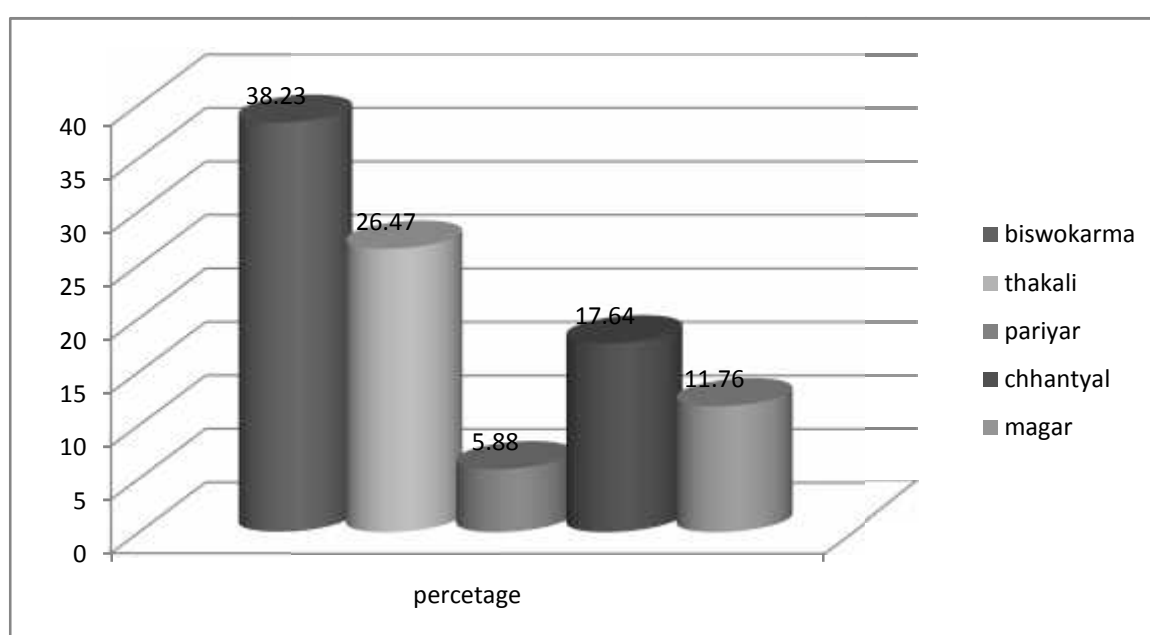
Caste is also one of the major determiners of the socio-economic status of any group of people. In Nepal mostly higher caste people are rich and prosperous in social, economical and political context whereas lower caste people are poor and deprived of riches and social, economical and political rights. So the lower caste people especially Dalit and other marginalized group are struggling for the existence. The caste also acts as a major component in socio-economical development. So it is necessary to have caste wise study in socio-economic research.

Table 4.9: Caste Distribution

SN.	Cast Distribution	Frequency	Percentages (%)
01	Biswokarma (dalilt)	13	38.23
02	Thakali	9	26.47
03	(dalit) Chhantyal	6	17.64
04	Magar	4	11.76
05	Pariyar	2	5.88

Source: Field Survey, 2010

Figure 4: Caste Distribution on Bar Chart



Source: Field Survey, 2010

The above table shows that the majority of the people with disability in Kunjo VDC are from Biswokarma (Dalit) which is 38.23% of the total 34 respondents. 26.47% of the total respondents are from Thakali, so called higher caste in Mustang. The table shows that 17.64% are from Chhantyal, 11.76% are from Magar and 5.88% are from Pariyar (Dalit) which is the least.

4.6.9 Educational Status

A number of surveys and research studies have demonstrated that PWDs achieve fewer chance of being educational and higher qualification than people without disabilities. Education is the major component in making the people aware, informed and can play vital role in the overall development and upliftment of the

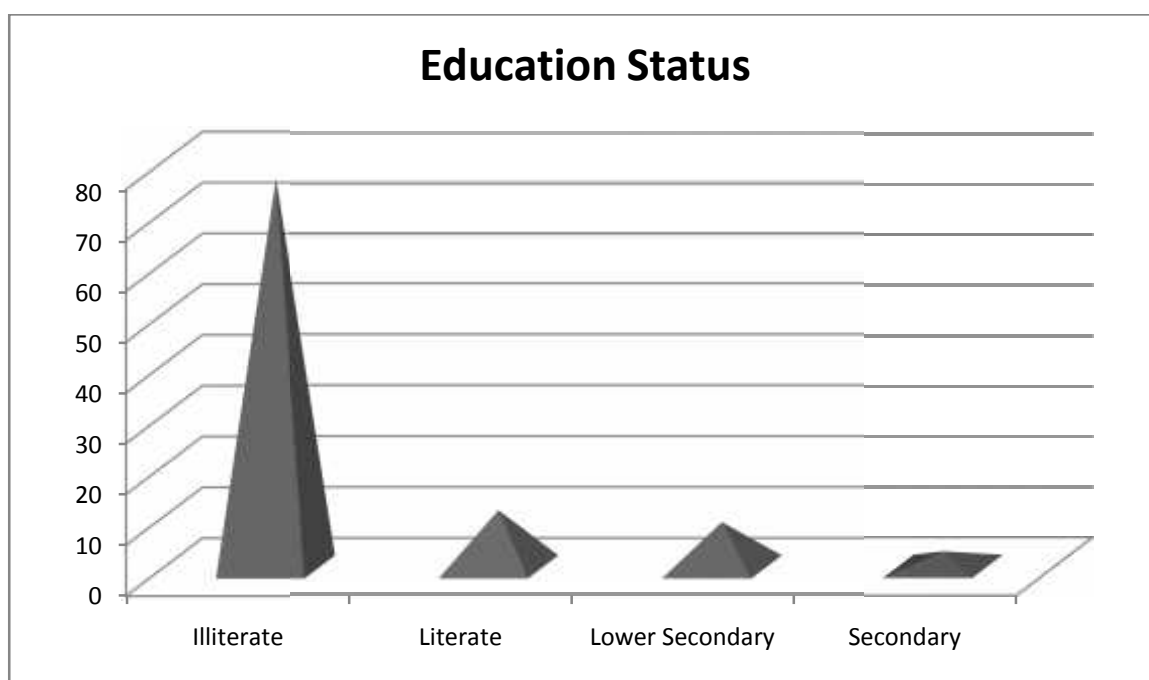
society. It is essential human rights, a force for social change and the single-most vital element in combating poverty, empowering people from all exploitative and hazardous labour and any kind of exploitation. Education is also a path towards international peace and security. The possession of education makes a great difference in the lives of people in term of all socio-economic, political, moral and any other aspect of life. So it is very necessary to analyze the educational status of respondent so that it could help in socio-economic research. With the help of their educational background we can analyze about the overall status of them.

Table 4.10: Education Status of Respondents

SN	Distribution	Number	Percentage
1.	Illiterate	26	76.47
2.	Literate	4	11.17
3.	Lower secondary	3	8.82
4.	Secondary	1	2.94

Source: Field Survey, 2010

Figure 5: Education Status of the Respondents



Source: Field Survey, 2010

The table shows that the majority of the respondents are illiterate. Of the total 34 respondents only 2.94% have obtained secondary lever education, 8.82% have obtained lower secondary and 11.17% are literate only. Of the total respondents

76.47% are illiterate which shows that the people with disability in Kunjo VDC are not given priority to education. This gives the picture of our society that people with disability are not given opportunity to read and write. Since the majority of people with disability are illiterate they are more vulnerable in term of socio-economic and social inclusion contest. Most of the respondents with physical disability were found to be literate. However, they did not have higher education due to poverty and the availability of schools near to their houses. The following is a typical example of this.

Shankar drops out school

Shankar is 38 years old an assistant teacher in Bal Vikas Kendra TT village of Kunjo VDC. His type of disability is physical. He got leg pain during his childhood age due to lack of treatment of a boil seen on leg. Once when he was playing with his friends he got to be thrown down. It became a cause of lifelong disability. At this time he was reading in class one. After this accident, he started to walk with the help of stick. He continued his study though he had many challenges. His poor father supported him buying educational items. His mother also had hearing and speech impairments. It was very difficult for Shankar to obtain higher education. When he was in class 5 his hard-working father got sick. He couldn't support his son Shankar who wanted to study continuously. Then Shankar began collecting local mushroom from jungles. Selling those mushroom he collected money for his study. Thus he completed lower secondary level. Since, there were no schools for higher secondary education near to his home he had to go far away from his home town to obtain higher secondary education. With the help of stick it was not easy to walk for four hours distance. Either he should hire a room or there should be a hostel for poor or disabled students. These facilities were not available at that time. Finally, he gave up his aim to join higher secondary class due to lack of money. Now he regrets a lot for not having higher education. He seems to be contempt by himself.

The main causes of not having higher education found here are;

-) School is far from the home
-) No government hostels for those who need it.
-) Poverty

4.7 Economical Background

Throughout the world, people with disabilities are being isolated and excluded from the economy. Since they are excluded from earning opportunities PWDs are forced to live under low socio-economic condition. According to the World Bank, there is a strong link between disability and poverty. People that acquire disabilities due to various causes, tend to slip into poverty due to severe physical and attitudinal barriers to reach employment. Most research exploring socio-economic status of PWDs has proved that economic background of most PWDs is very weak due to deeply rooted prejudice against PWDs. Inequalities in educational and skill development sources impact competitiveness in the labour market. Discrimination on the basis of disabilities and critical behaviour toward PWDs are the primary obstacles to the economic development of PWDs.

4.7.1 Source of Livelihood of the Family

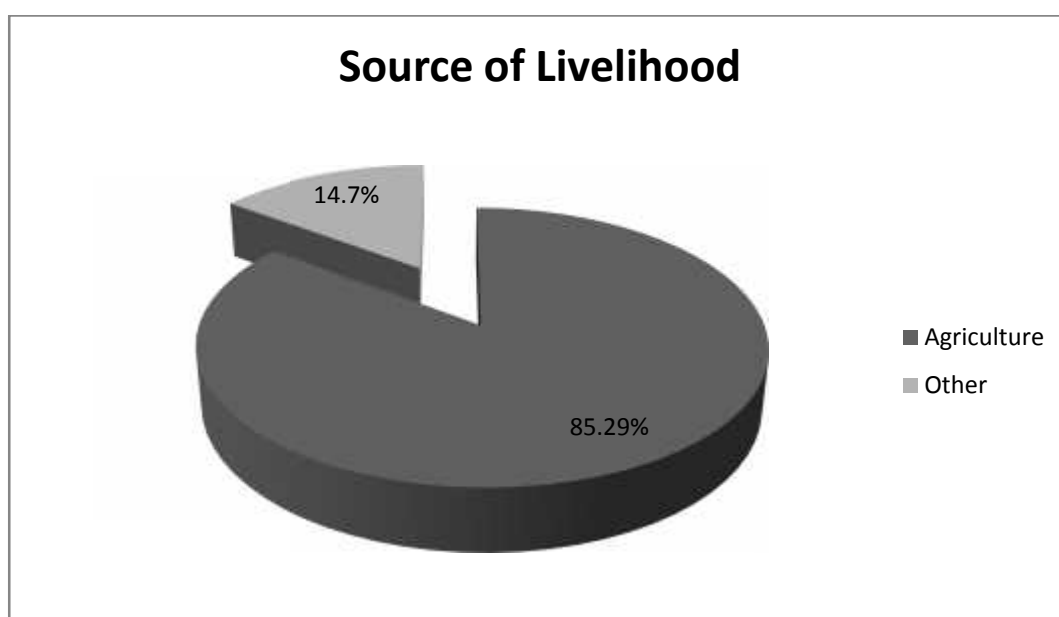
Source of livelihood of family is an important indicator of economic inclusion of people with disabilities. Person with disability whose family have good source of income have high chance of opportunities. Opportunities make them improve their life status. In developing countries, agriculture is the main source of livelihood. In Nepal, about 85% Nepalese are directly and indirectly involved in agriculture. In the study area maximum respondent's family were found to be involved in agriculture.

Table 4.11: Source of Livelihood shown in Table

SN.	Source of Livelihood	Number	Percentage
1.	Agriculture	29	85.29
2.	Other (Labor, Governmental Job, Foreign Employment)	5	14.70
	Total	34	100

Source: Field Survey, 2010

Figure 6: Source of Livelihood shown in Pie-chart



Source: Field Survey, 2010

The data shows that 85.29 % of total respondent's families were involved in agriculture. It demonstrates that agriculture was the primary occupation in Kunjo. Only 14.7% of the total respondent's families were found to be based in service and foreign employment.

4.7.2 Income of Respondents

Lack of education and not receiving the skills to function in the wider society limit the income opportunities for people with disabilities. Therefore, PWDs are compelled to live under low economic status. Income generating activities are out of reach for PWDs due to lack of friendly infrastructure and prejudice behaviour towards them. In developing countries, agriculture is the main source of income. In Nepal, third-fourth Nepalese are dependent on agriculture. So people with disabilities can't be departed from agricultural sources. However it is not easy for them to create the way of income in agriculture because of difficult geographical structure and entrenched traditional way of farming. But due to lack of further opportunities PWDs are involved in agriculture particularly in remote area.

Table 4.12: Income Status of the Respondents

SN.	Distribution	Number	Percentage (%)
1.	Have Not Income	17	50
2.	Have Income	17	50
	Total Number	34	100
	Income Type	Number	Percentage (%)
a.	By self	11	64.70
b.	Allowance	6	35.29
	Total Number	17	100

Source: Field Survey, 2010

The data shows the income status of the respondents. It also reveals that whether the income was earned by themselves or not. Firstly, it shows the equal status of income that 50% of total respondents had income whereas other 50% had not. Secondly, the 50% respondents of total number 17, having income has been broke down into two ways, income by self and allowance. Where we found that 11% people earned by themselves whereas, government allowance was income of 6% respondent of the total people having income.

4.7.3 Skill of Respondents

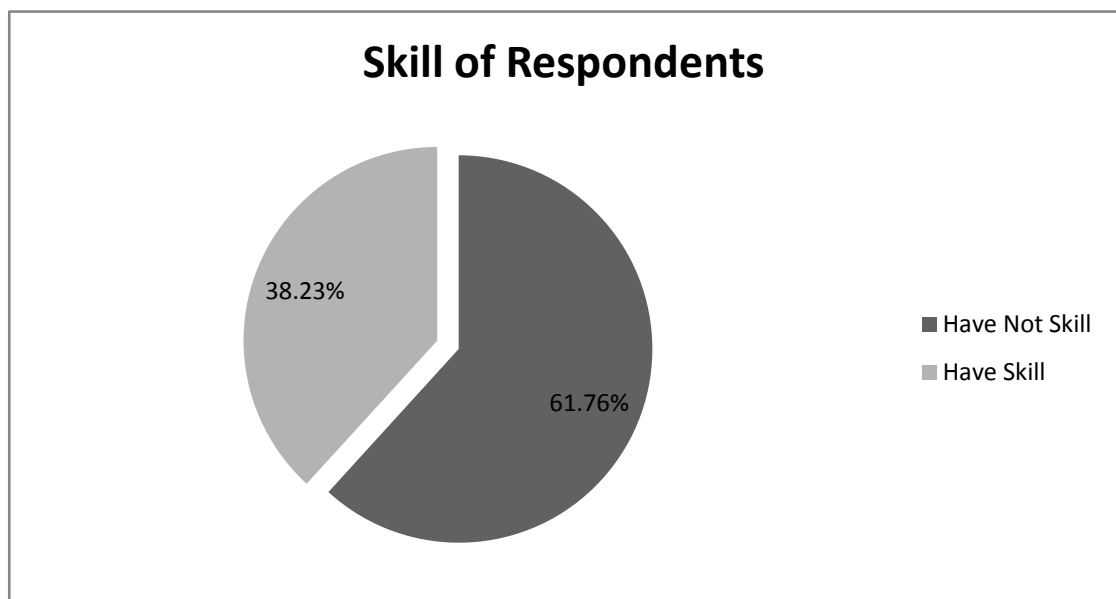
Skill is a primary factor to make people engage in social and economical affairs. Receiving skill is very necessary to function in society. Additionally, having skill can help one to extricate from passive life. It is closely related with qualification too. For people with disabilities, discrimination and negative behaviour towards them impact their potentialities in earning. In developing countries, most of PWDs are deprived of skill receiving opportunities due to ignorance of family and society. Though they have hidden talent and skill of doing something else, they are often ignored. If, opportunities and proper training are provided they of course, can improve their social and economic status.

Table 4.13: Skill of Respondents

SN.	Description	Number	Percentage (%)
1.	Have Not Skill	21	61.76
2.	Have Skill	13	38.23
	Total Number	34	100

Source: Field Survey 2010

Figure 6: Have Skill or Have Not



Source: Field Survey 2010

The data shows that 61.76% of the total 34 respondents were found to be unskilled. They were found to be fully dependent on their family. But if they were provided with agriculture base training, they would have a quite better life status because most of them were involved in agriculture (which seems too monotonous) since their childhood. However, among the 34 respondents, 38.23% were found to be skillful. Some of them were provided with vocational training but the training seemed not efficient for them. Most of them were found to be active at weaving (doko, kahi, chetro, basket, bhakari) similarly disabled women were found to be busy in household work.

Table 4.14: Types of Skill

SN.	Types of Skill	Number	Percentage (%)
1.	Hand Made Good(Furniture, Doko, Baskets etc)	5	38.46
2.	House Hold (Cooking, Cleaning, Making wine etc)	4	30.76
3.	Repairing	2	15.38
4.	Other (Labor, Thekkapatta etc)	2	15.38
	Total skillful Respondents	13	100

Source: Field Survey 2010

In above table we can see that 5% of the total 13 skillful respondents have skill in hand made work such as furniture, doko, baskets, chetro⁶ etc. 4% respondents were found to be active at household work. Some of them earn money by selling wine making by themselves. Among them, a blind woman named Shanta Tulachan was found very active in household work. In-depth interview was conducted with her due to her extra activities.

An Active Woman Entangled Inside the Cage

Shanta Tulachan is a blind woman. She became blind at the age of 15. She had a low vision since her childhood. Because of visual impairment she got difficulties in her school life that she couldn't compete with her classmates. It raised frustration in her mind. Despite her visual impairment, she hardly completed class six. After then she joined class seven but could not complete it. In spite of her desire of pursuing higher education she had to drop out her school because the school was not near to her house and also the education system was not appropriate for her.

Shanta went to Pokhara and Kathmadu for treatment but her eyes could not have been recovered. At last she became completely blind in her early teen age. It turned her life into a different way. However she consoled herself and began to live in a new way. She tried to be happy anyway. Now, she seems very active in household work and earns little money by making wine. So, she feels proud that she does not need to ask others for money. She is good at cooking and other kitchen work. If she was provided with education opportunity and skill development trainings, she could lead standard quality life. Being an active woman with sweet voice she often spends her time by caring her nieces. She is spinster of 46 years old. She shows her disability

⁶ Like granary, it is used to cover crops or grass.

as the main cause of being unmarried and says that she could not find a suitable partner due to her blindness. Although she is an active woman, she spends most of her time inside the house. Neither she participates in social activities nor does she often go to her relatives. It seems that she is entangling her whole life inside the house due her disability.

<p>Major Findings:</p> <p>Education Barriers:</p> <ol style="list-style-type: none"> 1. Distance of school 2. Lack of proper education system <p>Skill:</p> <ol style="list-style-type: none"> 1. Household work 2. Making wine <p>Causes of being unmarried</p> <ol style="list-style-type: none"> 1. Not found suitable partner

4.7.4 The Residence

It is very important to know the ratio of the respondent's residential condition. It shows the economic condition of People with Disabilities in the study area. Most of PWDs have low chances of being independent due to lack of proper education and opportunities in income earning activities. Consequently, few of them may have chances to build their own residence whereas almost PWDs are confronted to live with parents or relatives. So, having own residence or house demonstrate the economic status of respondents.

Table 4.15: Nature of Residence

SN	Description	Number	Percentage (%)
1.	With own family	28	82.35
2.	With relative	6	7.65

Source: Field Survey 2010

Most of the respondents were found to be living together with family. The table shows that 82.35% of the total population is living with their own family. It shows that most of the respondents are taken care by family as there are no governmental or nongovernmental organization and rehabilitation centre which is very essential for development of those people who are physically or mentally impaired. 7.65% of the total 34 respondents were found to be staying with their relatives. Most of them were staying as a worker as they were orphan and homeless.

4.7.5 Land Ownership

In developing countries, people with disabilities often do not have right to have own land and property. People do not believe them of their capability like securing and handling the property etc. Even, their parents hesitate to hand over property ownership to them. Land is a major factor which is closely related to socio-economic status in country like Nepal.

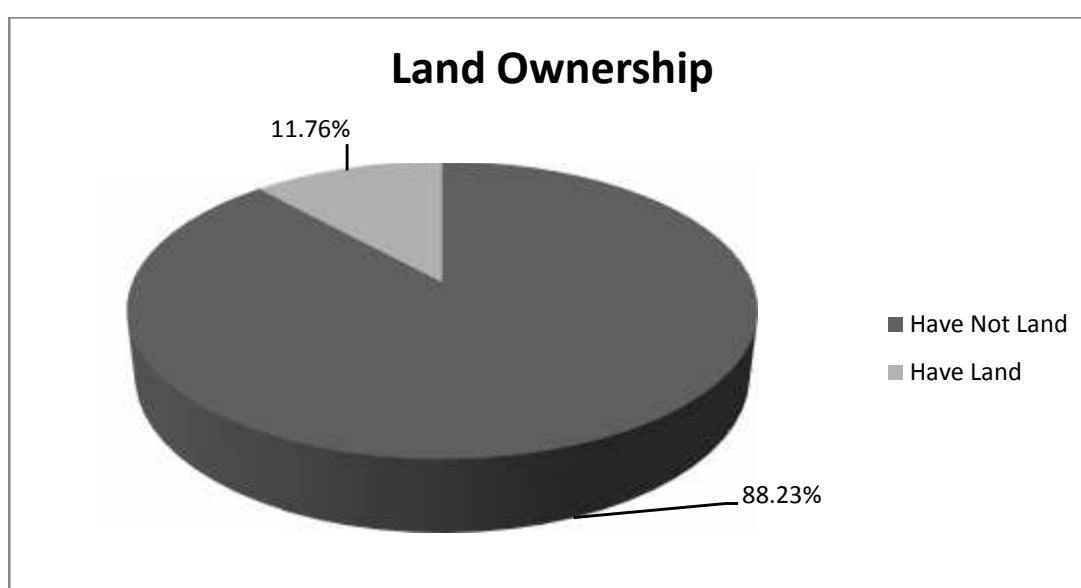
Table 4.16: Land Ownership Shown in Table

SN.	Land distribution	Number	Percentage (%)
1.	Have Not	30	88.23
2.	Have Land	4	11.76
	Total	34	100

Source: Field Survey 2010

Present research reveals that 88.23% of the total 34 respondents did not have land ownership. Their parents did not seem interested in allowing them to have own land. But few of them had own land. The rate of having land was 11.76% of the total respondents. It shows that how PWDs have low chances of owning property. Since, agriculture is the main source of livelihood PWDs should be provided with land so that they could involve themselves for better income. Along this, they should be provided with agriculture base trainings. The status of land ownership has been presented in pie-chart below.

Figure 8: Land ownership shown in Pie-chart



Source: Field Survey, 2010

CHAPTER FIVE

SUMMARY, CONCLUSION AND RECOMMENDATIONS

5.1 Summary

People with disabilities are facing many problems such as social and economical. They are deprived from social participation. Prejudice and discrimination against them seen as a major problem they face. People take them as a result of previous life. Most of the families hide their disabled member from society as a matter of prestige. They take disabled person as a socio-economic burden. So, they do not let them get opportunities in social and economic activities. It is very difficult for them to get standard life status comparatively people without disabilities. In rural area, people with disabilities are deprived even of fundamental needs such as education, health service, and sanitation. Al most people with disabilities are illiterate due to poverty, inaccessibility in physical infrastructure, lack of proper education system, geographical difficulties and lack of family's eagerness. Because of illiteracy, people with disabilities are compelled to live their lives in pitiable condition and are out of income generating activities. Skill base vocational trainings are not provided. Though some organizations conducted this program but the output is not satisfied. Most of the organizations related disability are scattered only in urban areas. In contrast, the remote areas like Mustang district are not concerned by the organizations. Furthermore, government policies and its implementation regarding disability right have been seen weak. So there is no socio-economic development seen in disabled people's life. Additionally, there is no security in their lives due to the negative perception of family member against PWDs. Their parents do not believe them to hand over property such as land, house, business etc. Very few members have chance to own property. Among the people with disabilities women are more vulnerable than men. They are facing double discrimination regarding the socio-economic cultural bond. Sexual violence is a pivotal factor which has a negative impact on women with disabilities. The followings are the major findings of the study:

Findings Regarding the Social Status of the Respondents

- From the research we get that 41.17 % of the total respondents were found to be belonged to the working and productive age group 35 to 45. Similarly, 23.52%

were from the age group 25 to 35, 20.50% were from the age group 45 to 55. And, 8.82% respondents were of the age group 55 above and total 4% were of the age group 5 to 15 and 15 to 25. This shows that most of the people with disabilities are of the age group 35 to 45. This gap of age is taken as a productive and working period of life.

- Most of the respondents were found to be male. The percentage of male respondents was nearly double comparatively to female respondents. Among the respondents 35.29% were female whereas the number of male respondents was 64.7%. The main causes behind the huge gap between male and female number was found that the birth rate of son was comparatively more than the birth rate of daughter.
- Majority of the respondents were found to be having speech and hearing disability. 47 % of the total respondents were suffering from speech and hearing disability. Among the 34 respondents 26.47% were having multiple disabilities whereas 8.82 % were physically disabled, 5.88% were visually impaired and 5.88% were mentally disabled. Deaf and deaf blind had equal rate which is 2.94%.
- There was 70.58% of the total 34 respondents were disabled by birth which is the highest number in all. 14.70% were disabled in the age of 5 months to 5 years. 8.82 were disabled in the age of 5 years to 15 years. 5.88% of the total respondents were disabled after 15 years. The table shows that most of respondents were disabled since their infant age.
- 70.58% of the total respondents were disabled by birth. It can be said that there may be hereditary trait and other health problems of expected mother which causes being disabled. 1.76% of the total respondents were found to be disabled due to accidents cases whereas 17.64% were disabled because of wrong treatment (dhami/jhakri) and other negligence (not try to show doctor).
- For PWDs aged from 16 and above, questions on marital status were asked during the field survey. While the marriage law requires that the minimum age for marriage should be 20 for a man and 18 for woman, in fact many people got married at much earlier age, especially in rural and remote areas. The data shows a very high proportion of PWDs at studied provinces who were unmarried. The figure 3 shows clearly how the PWDs were disadvantaged regarding marriage. Among the respondents, 63/63.82% were found to be

unmarried whereas 30.30% were married. Similarly, 6.06% were found to be separated.

- There was a tremendously sharp disparity in marital status between male and female respondents. As shown in table among the 21 male respondents, 66.66% were found to be unmarried whereas 58.33% of total 12 female respondents were found to be unmarried. Similarly, 23.80% male respondents were married whereas 41.66% were found to be married. And 9.52% male respondents were found to be separated. In contrast, there were no separated female respondents found in the study area.
- Family had been seen as the main cause of being unmarried. Most of the respondent's parents and relatives told what they would do after getting married while they have nothing to make their partners happy. They thought that their family members with disability were not able to handle their marital life that is why they didn't want them to get marry. In contrast, the respondents had shown their eager on the topic. Even they blamed their parents for not supporting them to get marry. According to data, family was found to be cause behind being unmarried of 47.36% respondents. Similarly, 31.57% respondents were found to be unmarried due to not getting suitable partners and 15.78% of the total unmarried respondents were found to be uninterested to get marry. In addition, one person was found to be unable to get marry because of his disability situation.
- Majority of the people with disability in kunjo VDC were from Biswokarma (Dalit) which was 38.23% of the total 34 respondents. 26.47% of the total respondents are from Thakali, so called higher caste in Mustang. The table shows that 17.64% are from Chhantyal, 11.76% are from Magar and 5.88% are from Pariyar (Dalit) which is the least.
- Majority of the respondents were illiterate. According to the table 10, of the total 34 respondents only 2.94% have obtained secondary lever education, 8.82% have obtained lower secondary and 11.17% were literate only. Of the total respondents 76.47% were found to be illiterate. It shows that the people with disability in Kunjo VDC were not provided with the educational right. This gives the picture of our society that people with disability are not given opportunity to read and write. Since the majority of people with disability are illiterate they are more vulnerable in term of socio-economic and social

inclusion contest. Most of the respondents with physical disability were found to be literate. However, they did not have higher education due to poverty and lack of schools near to their house.

Findings Regarding the Economic Status of the Respondents

- Of the total population 85.29 % families of the respondents were involved in agriculture. It demonstrates that agriculture was the primary occupation in Kunjo. Only 14.7% of the total respondent's families were found to be based in service and foreign employment.
- The research has tried to find out income status of the respondents. Equal number was seen in both have income on have not. But the research reveals that whether the income was earned by themselves or not. Firstly, it shows the equal status of income that 50% of total respondents had income whereas other 50% had not. Secondly, the 50% respondents of total number 17, having income has been broke down into two ways, income by self and allowance. Where we found that 11% people earned by themselves whereas, government allowance was income of 6% respondent of the total people having income.
- In the study area, 61.76% of the total respondents did not have any skill. They were found to be fully dependent on their family. But if they were provided with agriculture base training, they would have a quite better life status because most of them were involved in agriculture (which seems so monotonous) since their childhood. Among the 34 respondents, 38.23% were found to be skillful. Some of them were provided with vocational training but the training seemed not efficient for them. Most of them were found to be active at weaving (doko, kahii, chetro, basket, bhakari). Similarly, disabled women were found to be active in household work.
- Most of the respondents were found to be living together with family. The table 15 shows that 82.35% of the total population was found to be living with their own family. It shows that most of the respondents were taken care by family as there are no governmental or nongovernmental organization and rehabilitation centre which is very essential for development of those people who are physically or mentally impaired. 7.65% of the total 34 respondents were found to be staying with their relatives. Most of them were staying as a worker as they were orphan and homeless.

- Present research reveals that 88.23% of the total 34 respondents were not allowed to have land ownership. Their parents did not seem interested in allowing them to have own land. But few of them had own land. The rate of having land was 11.76% of the total respondents. It shows that how PWDs have low chances of owning property. Since, agriculture is the main source of livelihood PWDs should be provided with land so that they could involve themselves for better income generating activities. Along this, they should be provided with agriculture base trainings.

5.2 Conclusion

From the analysis done above, we can conclude that the socio-economic status of people with disabilities in Kunjo VDC is low. They are living in a pitiable situation that they are not in freedom of doing something else. Due to entrench rigid of society people with disabilities are always taken as a burden. Similarly, family hides their disable member because of prestige-delusion. Disabled people are more vulnerable of being handicapped and often discarded from the household. Most of the respondents are found to be disabled by birth. The disability by birth may be caused by lack of Anti-Natal Care (ANC) or Delivery Care (DC). The issue of childhood demands a closer look in the context of Nepal, where this has been greatly overshadowed to some extent. Studies have found disability among children under 5 to be low. It was reported in the NMIS study, 1997 that for children up to 36 months there were no disabilities noted which accounted for about 98 percent of the children surveyed. One important cause for this could be the difficulty of detecting of disability among small children. It is only after few months or year that the parents realize that the child has a certain disability. Disability at birth indicates that under normal conditions if the child has difficulties without any episode of disease or accident the parents generally state that their child was born with it. So family should be encouraged to provide such facilities to pregnant women. Government should also be concerned to control disease and uplift the socio-economic status of people by providing awareness program and opportunities to involve in economic activities. Since, agriculture is the major source of if income of most PWDs families and their monthly income is comparatively low they should be provided with special training on agro based activities. It helps to develop their skill on productive work. The three fourth of the 250 million disabled

women in the world live in developing countries development programs must consider the specific needs of disabled women who suffer from double discrimination and are more likely than disabled men to live impoverished and isolated lives which lead to depression and despair (Habib, 1995).

5.3 Recommendations

After completing the study about the socio-economic status of people with disabilities in Kunjo VDC of Mustang the research has identified some major points to recommend which are given below.

- Most of the people with disabilities were illiterate due to poverty and lack of accessible physical environment and appropriate education system. Despite, the number of people with speech and hearing disability was very high, there was no sign language practice for them. Education system was only appropriate for those who were physically and mentally able. So, the research recommended that there should be sign language practice among the people with disabilities. There was no access in transportation which created barriers for people with disability. As the difficult geographical structure, the VDC is quite away from the facilities such as hospital, high school and vocational training centre (CTEVT). District Development Committee (DDC) should concern at development of transportation. Every VDC should be linked with the main road so that people with disabilities could be able to consume the services provided by government.
- The research showed that people with disabilities are not involved in income earning activities due to lack of skill oriented training. They need appropriate vocational training that can help them to get opportunities of income generating activities. Agro-oriented economic activities are the major source of income of most of the disabled and their monthly income is comparatively low. So special training should be provided to develop their skills on Agro-oriented activities such as nursery farm, fish farm and live stock. Some of them need furniture and handicraft training because they had shown keen interest at furniture and weaving doko, namlo, basket, chetro etc. The three fourth of the 250 million disabled women in the world live in developing countries, development programs must consider the specific needs rights of disabled women who suffer

from double discrimination and are more likely than disabled men to live impoverished and isolated lives which lead to depression and despair (Habib, 1995).

- The research found that women with disabilities were more vulnerable. They were found to be victims of many forms of violence such as domestic and sexual violence. Sexual violence was seen as a major problem that disabled women faced. Unwanted pregnancies were the result of sexual violence. So, there are some children who are unknown to their father. The reason is that, a man can escape easily after having physical relation with a disabled woman. The man neither marries to her nor takes responsibilities of taking care of those children. There is no effective law regarding sexual violence. The research recommends that there should be effective law regarding the sexual violence. In addition, there is a need of awareness program to sensitize disabled women to be aware about the violence. To circulate this activities, related NGO and INGO should pay their attention to those areas.
- The research showed that there was no organizations related disability. Even an awareness program regarding disability has not been held yet. People with disability were not aware of their fundamental rights. They did not the value of disabled identity card. Therefore they were not showing interest at receiving identity card. Due to lack of knowledge and education most of them felt themselves DISABLED (that mean they can do nothing). People's behaviour towards them was seemed inhuman. Some of them had no real name. They were just called by *Lata Lati* and were discriminated in social activities. So, it is necessary that there should be an organization to deal with disabled right. The organization should empower disabled people. If there was any organization related disability they could have raised their voice against discrimination and negative attitude of society. Thus, National Federation of Disabled Nepal should give concern to this corner too.
- The research shows that there is a lack of Community Based Rehabilitation Program (CBR) to benefit PWDs to improve their daily lives and health practice. Due to lack of CBR, all families of PWDs are bearing socio-economic burden. Since there is high population of PWDs, it is necessary to bring such kind of program to support the PWDs and their families as well.

- There should be fair allowance distribution. For this VDC office should play a vital role to provide allowance those who need it in real. Along this, PWDs in the VDC should have identity card as it is their fundamental right.
- Family should encourage disabled member to participate in social activities so that they can improve confidence level.
- Most of the PWDs are disabled by birth so all expected mother should have properly checked up their health during the pregnancy. Also, family should be encouraged to provide such facilities to pregnant women. Government should also be concerned to control disease and provide health services with awareness program.

Still, more work is required. Providing opportunities for full and equal social, civic and economic participation is beneficial not only to people with disabilities, but also their society as they can contribute to country's development and economic growth. The UN Convention offers hope for improving the current situation of PWDs. To promote PWDs the Convention has facilitated the process that empowers them to address the multiple social challenges they face. However, it's implementation requires of focused effort by all stakeholders, especially the government and policy makers, to ensure that a significant portion of their population does not remain an isolated and invisible segment but one that can realize its' full potential have equal access to all opportunities and exercise same rights as the rest of the citizens.

REFERENCES

- Aryal Khanal (2009), *"A Study on Status of Social Inclusion, Livelihood and Violence Against Disabled Women of Nepal"* Action Aid, Nepal
- Bhattarai, Milan (2003), *"Disability"*, 1st edition, Kathmandu, Nepal.
- CBS (1995), *Population Monograph of Nepal, 1995*
- CBS (2001), *National Population Census of Nepal, 2001*
- CBS (2002), *"National Report of Population Census 2001"* Kathmandu, Nepal
- ESCAP (1994), *"Population Aging and Socio-economic and Development in Asia"*, UN Department for Economic and Social Information and Policy Analysis, New York
- ESCAP (1997), *"Legislation on Equal Opportunities and Full Participation in Development for Disabled Persons: A Regional Review."* United Nation's New York 1995, p.1.
- ISRC (2008), *VDC Profile of Nepal 2008: A socio-economic development database of Nepal*, Kathmandu.
- Kayastha, R. K. (2003), *Socio-economic and Demographic Situation of Disabled People; A study of Disabled People of Sindhupalchok District*
- Metts, L. Robert (2000), *Disability Issues, Trends and Recommendations for the World Bank*
- National Federation of Disabled People-Nepal (2008), *Survey Report on Employment Persons with Disabilities*, Kathmandu
- New ERA (1999), *A Situation Analysis on Disability in Nepal* (unpublished)
- New Era (2001), *"A situation Analysis on Disability in Nepal"*, Published by UNICEF Kathmandu, Nepal
- NPC, HMG Nepal and UNICEF Nepal (2001). *A situational analysis on Disabilities in Nepal 200*, Kathmandu.
- Panthi, Min Raj (2009). *The Disability situation in Nepal*, Nepal Human Development Report 2009: State Transformation and Human Development, UNDP Nepal, Kathmandu.
- Available: http://www.disabilityworld.org/06-08_04/gov/nepal.shtml
- Rana, Ramesh (2008). *Reproductive and Sexual Health Problems and its Coping Mechanism among Adolescents and Youth with Disability (AYD) of Bardia*, NHRC, Kathmandu.

- Santiago, AM (1994), *"The Economic Consequences of Disability Status: Evidence from 1990 Panel Study of Income Dynamics"*, University of Michigan, Population Studies Center, Ann Arbor, Michigan, Research Report No. 94-312.
- Satyral, D.K. (2004), *Study on Physical Disabilities; A case study of CBR in Bhaktapur Municipality*, National Federation of Disabled People-Nepal (NFDN), Kathmandu
- Sharma Kiran (1999), *"Disabled in Nepal and the Commitment of Law, Souvinir."*
- Turmausani, Majid (1999). *Disabled people and Economic needs in The Developing World; A political Analysis of disabled people;*
- UN (2006), *Convention on the Rights of Persons with Disabilities and Optional Protocol*, New York.
- Available at: <http://www.un.org/disabilities/documents/convention/convoptprot-e.pdf>
- UN Afghanistan (2001), *Poverty and Disabled People in Development Context; examples from Jordan and Afghanistan* .United Nations Office for project service, Afghanistan
- UN Afghanistan (2003), *Disabled People and Economic Needs in The Developing World; A Political Perspective from Jordan*, Ashgate Publishing Limited, England
- World Health Organization (1980), *"International Classification of Impairments, Disabilities and Handicaps (ICIDH)"*, Geneva, 1980.

Other Internet Sources:

- <http://www.nfdn.org.np/home/home.php>
- <http://en.wikipedia.org>
- <http://www.disabilityworld.org/index.htm>
- <http://www.un.org/disabilities/index.asp>
- <http://www.un.org/disabilities/default.asp?navid=8&pid=150>
- <http://www.open.ac.uk/inclusiveteaching/pages/understanding-and-awareness/models-of-disability.php>
- <http://www.aimhighersw.ac.uk/download/ld2.pdf>
- <http://eprints.lse.ac.uk/28310/1/CASEREport21.pdf> (disability and social exclusion)
- <http://www.idris.ac.uk/book/Dis%20and%20Soc%20paper.pdf>
- http://siteresources.worldbank.org/EXTECAREGTOPYOUTH/Resources/Youth_wit_h_Disabilities.pdf