

Disability in Nepal

Joshi SK¹

¹Lecturer, Dept. of Community Medicine, KMCTH

Most people seem to know what a disabled person is and are certain that they would be able to identify an individual as disabled, either because the disability is noticeable or because they are aware of a specific medical condition that lends itself to be called disability. However, what precisely the term disability means is less easy to determine. A common vision is that having a disability makes an individual less competent of performing a variety of activities. However, they are capable to carry out various activities ranging from simple to highly skilled. Now it is more costmary to refer to such people as “differently abled” rather than disabled.

To understand this term better, one has first to differentiate it from other related concepts that are often perplexed with disability. The most frequent misunderstanding is to equate disability with disease. Differently abled people are often described as the opposite of healthy people and, consequently, as needing the help of the health profession. However, they need medical help only in situations of acute sickness or illness. Even in cases where the disability results from a protracted or chronic illness, such as diabetes or a cardiac disease, it is not the sickness as such, but its social consequences that are involved here.

It is true that a disabling condition may affect to varying degrees the personal life of an individual and his or her relations with family and community. The individual who has a disability may, in fact, experience the disability as something that sets him or her apart from others and that has a negative impact on the way life is organized.

There are a large and growing number of people with disability in the world. It was estimated that by the end of the second millennium, the number of disabled was 600 million. It is not known exactly how many people in Nepal are disabled. According to the World Health Organization, approximately 10 percent of the total world population are disabled. Thus it is presumed that at least 10 percent of Nepal’s population suffers from disability.

In the past, medical science was insufficiently developed, so the people accepted disability as part of their fate or as the punishment by God for some sin committed in the past life and were reconciled to live with it. Now, with the advancement in science, many disabilities can either be minimised or cured. The concept of society towards disabled persons has considerably changed after the success of Mr. Thomas Whittaker from USA in climbing Mt. Everest in 1998 with the help of an artificial leg. Another US citizen Erik Weihemmyer, a blind person climbed Mt. Everest in 2001 and laid another brick on the wall of success.

The United Nations has played an important role in society’s change of concept towards disabled persons. Declaration of the International Year of Disabled Persons (IYDP) 1981 under the theme “Full Participation and Equality” taken by the UN General Assembly was an important breakthrough in the field of disability. It was strongly urged that the UN system should make all facilities totally barrier-free, and encourage equality and full participation of disabled persons in all activities of the society. All the member states were requested to form National Committees or similar coordination bodies to deal with the problem of disability. As a follow-up programme of IYDP, the years 1983-1992 was declared The UN Decade of Disabled Persons.

Substantial change in the perception of Nepali society towards disabled persons took place in 1977 after the formation of the Social Service National Coordination Council that was headed by Her Majesty Queen Aishwarya Rajya Laxmi Devi Shah. It was followed by several important changes like establishment of the Ministry for Social Welfare, the enactment of legislation for the Rights and Welfare of the Disabled, establishment of Social Welfare Council etc. In Nepal, since 1992, every year December 3rd is celebrated as International Day of the Disabled persons with various programmes like procession of disabled persons, talk programmes, workshops, seminars etc.

Various surveys have been conducted in Nepal to find out the prevalence and causes of disability, socio-economic status, education and employment of disabled persons. Examples of some of those important studies are National Census 1971, Sample Survey of Disabled Persons in Nepal 1980, National Survey of Blindness 1981, National Survey of Mental Retardation 1989, National Survey of the Prevalence of Deafness and Ear Disease in Nepal 1991, disability survey of Kanchanpur District 1995, Survey of persons with disability in Sindhuli District 1998, Situation analysis of disability by National Planning Commission 2001 etc.

Different Ministries of HMG/N with the help of UN agencies and other INGOs have played important roles in the prevention of avoidable disabilities and also in providing various services to the disabled persons in their rehabilitation. For the last three years, Ministry of Women, Children and Social Welfare in collaboration with CTEVT has started providing different vocational training for about 100 differently abled persons every year. Social Welfare Council has made arrangement with banks to provide such persons with loans without bank deposit to start self-employment trades. This programme has been suspended for the present.

Many disabilities are avoidable and preventable by the creation of public awareness and by means of early detection and timely intervention. This is far less expensive and less time consuming than the education, vocational training and rehabilitation of disabled persons. For the prevention of disability, measures such as reduction in vaccine preventable diseases, strict compliance with the road and occupational safety regulations, development of public awareness programmes, training of peripheral health personnel etc. should be followed. Non-governmental organizations working for the welfare of differently abled persons should not concentrate their work only on rehabilitation, but also for the

prevention of disabilities with effective and result-oriented programmes. Similarly, all types of differently abled persons must get equal opportunities for rehabilitation and preventive programmes. For example, lot is being done for blind people, as the people can have clear idea of the problem. On the contrary, though the hearing impaired do get elicit sympathy, not many realises their actual status of disability.

Particular conditions like fear, lack of knowledge, disregard and superstition have isolated disabled persons with different abilities and delayed their development in the past. Now, the concept has changed to inclusive, barrier-free, equality-based and right-based society for persons with different abilities. Through education and rehabilitation, persons with different abilities have become more active and turn into a driving force in the future development of the disabled population and nation.

There are lots of things to be done in the field of disability. The environment should change in harmony with the needs of disabled persons. Construction of ramps, escalators, conveyor belts etc. in the busy public places like airports, bus stations, hospitals, hotels, government and private offices would significantly ease their daily activities. Modification of traffic signal lights and overhead crossing bridges have become essential. It is hard to say, if we need specially constructed toilets for differently abled, while there are not enough such facilities for average Nepali citizen. Only organizations working for the betterment of life and living conditions of differently abled persons may find it difficult to do everything. Those organizations should be encouraged to do so and they should be incorporated in policy-making bodies on disability. The plan of action and programmes should be realistic and keeping in mind the economic condition of the country and the capacity to implement programmes and achieve results.