

ASSESSMENT OF PERSON WITH DISABILITY LIVELIHOOD OPTIONS INDIVIDUALLYIN THE SELECTED BLOCKS OF UTTARAKHAND

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1. Introduction

As per the World Health Organization; Disability is an umbrella term, covering impairments, activity limitations, and participation restrictions. Impairment is a problem in body function or structure; an activity limitation is a difficulty encountered by an individual in executing a task or action; while a participation restriction is a problem experienced by an individual in involvement in life situations. Thus disability is a complex phenomenon, reflecting an interaction between features of a person's body and features of the society in which he or she lives. As per the census 2011, prevalence rate of person with disability India is 2.21 in which male are 2.41 and female are 2.01. The census also indicated that there is no wide difference of prevalence rate among the person with disability between various economic, social and geographical regions. However, various studies made clear that the status of health, education, livelihood indicators are clearly depends on socio economic condition and geographical location of individual, families and communities.

The census 2011 also indicated the prevalence rate is higher in elderly age groups and lower in younger age groups (In 0-4 it is 1.41% and in 80-89 it is 8.41%). Maximum number of persons with disability has found between age groups 5-40 years (58%). The percentage of school enrolments and school going children with disability are less than 25% in the state and only less than 10% person with disability are financial independents. The Uttarakhand state statistics department indicated that less than 1% of person with

disability are in government employ or involve in government supported project and programs.

The individual Livelihood Index is an authentic tool which can helps disability people organizations (DPOs), community base organizations (CBOs), local NGOs and family members to build a specific empowerment and economic sustainable program for individual, groups and community of person with disability in inclusive manners.

In spite of the emphasis on the right-based approach to disability, about 82% of disabled people worldwide live below the poverty line (Cramm and Finkenflugel, 2008:16). An estimated 65-80% of 60 million disabled people in rural areas of India do not have access to basic minimum facilities (Ghai, 2001:29). 'Disability' still remains overwhelmingly marginalised at mainstream developmental research, institutional, policy and programme levels (Grech, 2009). Social and economic discrimination, architectural, transportation, institutional and policy barriers continue to prevent disabled people from accessing any opportunities (Rust and Metts, 2007).

In the contemporary world economic factors determine a person's quality of life, dignity and value. The World Health Organization (WHO, 2010b) suggests that secured access to livelihoods can reduce poverty among disabled people. 'Livelihoods' not only refers to the ability to earn but also the opportunity to develop one's full potential with control over factors that shapes his/her life and contribute to society's development (Coleridge and Venkatesh, 2010). Sustainable rural livelihoods approach emphasizes access to resources; market and economic services; removal of barrier to participation; reform in basic services and improvement in rural infrastructure to improve the livelihoods of all, including disabled people (Akroyd and Duncan, 1998). However, the situation regarding employment and livelihoods for disabled people depicts a poor picture. The statistics suggest that unemployment for working age disabled people in developing and industrialized countries is between 80-90% and 50-70% respectively

(Naami et al. 2012:192). Furthermore, unemployment among disabled women is almost 100% in developing countries. As per the Government of India's Planning Commission poverty estimate for 2014-2015, Odisha is one of the poorest states in the country (GOI,

2012). However, the conditions of disabled people in across the country may be worse. The Census of India (2011) finds the highest disability rate (3.8%) in Puri district in Odisha and their employment rate is 26% in urban, and 25.1% in rural, areas. However, a recent study in Uttarakhand suggests that 77.8% of disabled people survive as dependents and among the rest, 45% are self-employed and 29% are daily laborers (Mohapatra, 2012a). The statistics also indicated that 67% people with disable belong to BPL families and do not have sufficient income even for manage minimum regular expenses.

2. Objectives

- To understand the current status, issues, challenges in livelihood activities of person with disability
- To understand their economic status, participation and role and responsibilities at individual, family and community levels
- To explore their future potential, interest, planning regarding the livelihood options

3. Study methodology and Statistical Analysis

The study was conducted in 3 selected blocks from two districts of Uttarakhand state. The selection of blocks was made purposely because these were the intervention blocks for Community Base Rehabilitation program. Both qualitative (interviews and community meetings) as well as quantitative (direct interviews) tools were used for the data collection.

3.1 Tools of data collection

Identification of person with disability (18-40 years) was selected from the blocks and house-to-house visited by the investigators for conducting their interviews. Out of the total cases of person with disability reported, study cases were selected randomly ensuring representation of all villages. For the qualitative data, the interviews and community meetings were conducted through based a pre designed and pre tested semi - structured questionnaire. The interviews were conducted with other stakeholders at the

block level. Six community meetings were organized, one in each of the identified block. The meeting were attended by person with disability, panchayat members other stakeholders. Pre designed checklist was used for the discussion during the community meeting. For both quantitative and qualitative information final questionnaire was developed in Hindi with investigators were given flexibility to use local dialect and words at the time of interviews.

The recruitments of investigators were done based on their qualification and pervious experiences in research and data collections. All the selected investigators attended oneday orientation programme, which include fieldwork.

3.2 Plan of Statistical Analysis

The questionnaires submitted by investigators teams were coded (Identification number) and data were directly entered in statistical packages SPSS for Window, version 18. The missing values were allowed for the analysis and frequencies were calculated from the univariate analysis. Bivariate analysis was used to describe the relationship between different variables and the dependent variables.

4. Result

A total of 101 disabled persons (between 18 and 60 years) were interviewedduring the disability screening survey. Out of 101, 30 (29.7%) from Chakrata, 35 (34.3%) from Doiwala and 36 (36%) were from Nazibabad. Findings indicated that male was 73 (71.6%) and female was 29 (28.4%) person disable participated in study however lowest number (5) female participation was in Chakrata block. Majority of screened cases were found between 21 and 40 age groups (66%) while only 2% person with disability above than 61 years.

The screened data showed that among 101 responders about 32 percent of person with disabled never attained school.Although 10.8 percent had completed study to primary level, only 19 percent had completed juniorsecondary school (up to grade eight). Only 18.6 % person completed higher secondary school (grades 9-10) and 13.7% person

completed their Secondary School Certificate. A similar pattern was reflected in the qualitative sample. A number of sight or hearing impaired FGD participants talked about their lack of special education and mentioned that due to a lack of specially targeted medium of instruction fordeaf and blind children they did not go to school.

The disability screening survey identified the various types of disabilities that respondents reported as hampering or reducing their ability to carry out or perform dayto-day activities. The findings indicate that of those who reported a disability, the majority (70.3 percent) weresuffering from a physical impairment. Approximately 5.9 percent reported avisual impairment and 9.5 percent experienced hearing and speech difficulties. It was also found that 3 percent of respondents had Intellectual disability. A significant proportion (about 5.9 percent) ofpeople with disability reported experiencing multiple impairments. For example some individualsexperienced both speech and learning difficulties or physical and mental disabilities.

Study data shows that out of 101 people with disability, 30 percent (31) were not engaged with any income generating activities. Another 20 percent person with disability partially involved in income generation activities. However, 44.4 people with disability were working as farmer or wage laborers (agriculture and other day labour). In the qualitative sample the working status of respondents who were engaged with incomegenerating work was limited and only 9.9 percent were doing small skill based activities such as tailoring, weaving, packaging, running small shops and carpenter work.

The qualitative analysis indicated that gender inequality is deeply embedded in the overall social structure in Uttarakhand. In this patriarchal setting women are deprived in most spheres of their lives. Social customs and traditions, high illiteracy rates and poor employment opportunities have hampered the integration of women into mainstream of development activities. In this study we observed that poverty affected men and women project beneficiaries in different ways, since their social roles were different. Disabled women tended to be the most disadvantaged group among the extreme poor. Several other studieshave also showed that women with disabilities

suffer a double discrimination, both on the groundsof their gender and their impairment.

Findings from the individual interviews demonstrate that a significant number of people with disability looking forward for skill training which can help them in the strengthening of their small businesses both scale and quality wise. Study indicated that very small businesses such as tailoring, weaving, Jewelry making, packaging, carpentry are the viable livelihoods options for people with disabilities. These required minimalphysical effort and mobility and allowed disabled people to earn a regular income. Most of therespondents were able to run shops, cloth or firewood businesses from their home. Those with visual impairments did better with handicrafts such as mat weaving. These activitiesbenefit from technical and vocational training on different items to increase skills.People with psychological disorders, behavioral problems and learning difficulties were more likelyto be involved with unskilled work such as day labouring.

It was found that in particular those who have visual, speech and hearing difficulties are deprived ofspecial education and other opportunities. As disabled people are not getting access to propereducation, they are unable to get skilled jobs, driving them further into poverty.Findings also revealed that the ill health associated with their impairments often further erodes theirincome and assets, as they lose working days and have to spend money on treatment. Sometimesthey are even forced to sell assets to pay for treatment costs.

The focus group discussions were indicated that behavior of family members and wider society, often through bullying, which leads to self-lowesteem. Thus discrimination, social exclusion and isolation are a frequent part of life, for both the disabled person and their family. They are often neglected by their families, neighbors and community. The study revealed that alternative arrangements with family members and relatives benefitted both people with severe disabilities and their family members and relatives. The Inclusive self-help groups also showed how people with disabilities have been able organize to claim their rights and

entitlements.Inclusion into income generating activities and skill development are two important ways of supporting extremely poor disabled people and reducing their vulnerabilities. The involvement withincome generating activities or the productive use of an asset provided disabled people theopportunity to improve their incomes and social dignity, and allowed them to strengthen theirability to cope with crises or shocks in a sustainable way.

Conclusion

It is clear that disabled people are the most vulnerable and disadvantaged group.. Disabled people face significant challenges in maintaining their livelihoodactivities. The most common limitation is an inability do physical work over long periods due tophysical impairments, which results in prospective employers not wanting to recruit or hire them. Anumber of respondents who had physical and mental disabilities experienced wage discriminationwithin the workplace. They are therefore deprived of employment opportunities and deprived of afair wage.

Recommendation

A range of specific issues emerge from this study which urgently need to be addressed in order thatextremely poor disabled people are adequately supported in income generation and protected from discrimination as they work to improve their lives. Establish networks with disabled people's organizations to ensure community based rehabilitation, and better access to assistive devices. Community based rehabilitation can also improve skills and attitudes, support on the job training and provide guidance to employers. Strengthening local inclusive self-help group at community level can build motivation and encouragement of people with disability to maintain their participation in regular activities.

5. References

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