

COVID-19 and State Responses in Pakistan's Policy towards Persons with Disabilities

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The outbreak of COVID-19 has initiated debate in the world about the response mechanism towards different communities in society. Pandemics have a long history in human societies, changing not only human behavior but also world politics. The Russian flu of 1889, the Spanish flu of 1918, the polio pandemic of 1949, H2N2 virus, 1956, HIV/AIDS 1981, Swine flu 2001, SARS 2002 among others have caused millions of deaths in contemporary recorded history. This paper examines Pakistan's response mechanisms for persons with disabilities through an analysis of relevant policy documents, UN guidelines and content analysis of key speeches by the Prime Minister Imran Khan, interviews and initiatives taken by the government. The paper concludes that in the absence of any definitive policy for persons with disabilities during COVID-19, there has been a general ignorance and apathy towards the way persons with disabilities were given care or in dealing with them during the lockdown situation. As the COVID-19 second wave started in different parts of the world, it is time for the government to take substantive measures to ease problems faced by persons with disabilities.

Keywords: Pakistan; Policy; Covid-19

Introduction

Is there any state policy for persons with disabilities in Pakistan's response towards COVID-19? How is Pakistan's state response tackling the problems faced by persons with disabilities in terms of provision of health facilities, the issue of economic fallout of the pandemic, and its impact on the rights of persons with disabilities? This paper examines these questions through an analysis of policy documents on the rights of persons with disabilities in Pakistan, the inclusion of facilities for them in the Pakistani state response mechanism, a content analysis of key speeches by Ministers in Pakistan during the pandemic to examine the mentioning of or policies targeted at persons with disabilities, and interviews. Taking the case study of policy for persons with disabilities in a situation of 'saving lives and livelihoods' is a challenge and

an opportunity to improve the condition of persons with disabilities in crisis situations and disaster management responses.

To date, Pakistan has 432,327 COVID-19 patients, out of who 379,092 have recovered and 8,653 people died from COVID-19 related complications (Pakistan, World Ometer). The highest mortality rate is in the province of Khyber Pakhtunkhwa while Sindh province responded the earliest to COVID-19 with lockdown enforced across the province followed by the federal government and three provinces. The World Health Organization praised Sindh government's immediate response as the 4th best in the world and the 2nd best in Asia following China. Details of the policy responses, give a more generalized view and does not address marginalized communities or persons with disabilities. This lacuna in Pakistan's COVID-19 policy response mechanism is not very visible as people in general and government in particular have little or no sensitivity to the understanding of problems faced by persons with disabilities either during normal situations or in emergencies like COVID-19.

Pakistan's policy towards persons with disabilities before COVID-19

Globally 1 in 7 people in the world have some or other disability, which means roughly 1 billion people (The Economist, 2014). Pakistan has ratified the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD) in 2011 though little or no progress has been made to improve the condition of persons with disabilities to participate fully and effectively in society. Before 2011, Pakistan had just one law addressing the rights, issues and concerns of persons with disabilities across the country, that is the Disabled Persons Employment and Rehabilitation Ordinance of 1981. This law requires a mandated 2% of all jobs within the total workforce to be dedicated towards persons with disabilities. Since its implementation, unfortunately, the law has remained weak. Later, Pakistan also established the National Council for the Rehabilitation of Disabled Persons and National Trust for the Disabled in 1985.

Even though there was just one law in regard to the rights of Persons with Disabilities, as outlined above, in 2002, Pakistan developed and implemented the National Policy for Persons with Disabilities. In 2006, the National Plan of Action detailed 17 short term objectives for persons with disabilities to be completed by June 2009 and long-term objectives by July 2025. The National Data Base Authority (NADRA) in 2011 registered 600,000 people with different kinds of disabilities while the Special National Identity Card (SNIC) was issued for persons with disabilities (National Database and Regulatory Authority NADRA, 2011). Despite Pakistan ratifying the UNCRPD in 2011, there has been no new law to reflect the Pakistani Government's new commitments to the realisation of disability rights (except for the Transgender Act 2018) though some policy programs like Benazir Income Support Program or

Ehsaas Programs are initiated, but which also need effective implementation strategy and consistency.

In the 1998 National Population Census of Pakistan, the total count of persons with disabilities was 2.38%, however, this number was 80% lower in the census of 2017- 0.48%. This was because the government did not have a question on disability, however, a separate count was later done on the request of the Supreme Court. The census of 1998 categorized persons with disabilities as blind, deaf/mute/ crippled, insane, mentally retarded, multiple disabilities and others. Later, the category of transgender was also added to the impairment categories. In the 2017 census, the same categories were applied to define persons with disabilities as in the 1998 census. The National Census 2017 has provisional status till today due to objections by certain segments of the population.

Pakistan's COVID-19 response mechanism and persons with disabilities

COVID-19 does not only pose a risk to human life, but also social and economic life, including the livelihoods of the citizens of Pakistan. Pakistan's policy response for COVID-19 was coordinated through different bodies formed at the national and provincial level. After the constitutional amendment in 2010, known as the 18th amendment, provinces have a much bigger role in formulating policies in different sectors especially in the health sector. However, during emergencies or other sudden unforeseen situations, the Federal Government is bound to step in, help and coordinate emergency interventions and protections with the provincial governments. This process formed the basis of Pakistan's COVID-19 response.

Pakistan announced a fiscal package of RS1.2 trillion for 7 million poor and low-income people (Ehsaas Program, 2020). However, no special package was announced for persons with disabilities. Neither has a comprehensive policy to ensure their safety and wellbeing been provided by the federal and provincial governments. The Pakistan Government's policy response was more unidimensional in the health sector compared to a much-needed multidimensional approach keeping in view different segments of society including disabled, transgender, and other marginalized segments. However, on the International Day of Persons with Disabilities (IDPD), 3 December 2020, the Prime Minister of Pakistan announced the "Ehsaas Kafaalat Policy for Special Persons". According to this policy, persons with disabilities will be eligible for a monthly stipend of RS 2000. This was termed a step towards a disability inclusive and sustainable post-COVID-19 world (PASS, 2020)

Pakistan established a National Command and Control Centre (NCOC) with the aim of ensuring effective coordination between the federal and provincial governments. A COVID-19 response desk was established at the Ministry of Foreign Affairs to support the Federal Government's developing coordination of international support and assistance. This was in addition to a special task force at the federal and provincial levels for national resource

management of health services and interventions. Along with the NCOC, the National Disaster Management Authority (NDMA) and Provincial Disaster Management Authorities (PDMA) are also responsible for the overall operational agency of COVID-19 Pakistani state responses.

As a result of the involvement of these different Pakistani state agencies and coordination bodies, a two-pronged strategy was developed by the Government of Pakistan as a response to the COVID-19 pandemic. The aim has been to prioritize efforts to contain and mitigate the spread of the virus and to address the secondary humanitarian and socio-economic impacts. In order to support the actions of the Pakistani state, there are three internationally supported initiatives that address the COVID-19 pandemic and its consequences:

1. “The Strategic Preparedness and Response Plan (SPRP) aims to stop transmission of COVID-19. The tracking of assistance and actions is done through the COVID19 Partners Platform. It is facilitated by the World Health Organization (WHO).
2. ‘Shared responsibility, global solidarity: Responding to the socio-economic impacts of COVID-19’ is a set of recommendations to mitigate the socio-economic consequences of the pandemic. It is developed by the United Nations (UN).
3. Integrated Humanitarian Response Plan – the HCT in Pakistan, under leadership of the Humanitarian Coordinator, is developing an integrated response plan to address the humanitarian impact of the COVID-19 situation on the most vulnerable groups, as identified above. This targeted approach builds off existing support being provided to the Government in-line with existing humanitarian plans and activities” (OCHA: 10, 2020).
4. The Ministry of Human Rights published a booklet for Persons with Disabilities about guidelines on COVID-19 awareness and dealing with it effectively. It was also published in braille. This booklet was distributed among persons registered with the National Special Education Program attending special schools, colleges and Universities comprising all age groups (Ministry of Human Rights, 2020).

Social inequalities became very obvious with the emergence of COVID-19 in different parts of the world. These inequalities impacted persons with disabilities due to lack of inclusion, equal opportunities, social justice and health facilities. Pakistan gave a general response mechanism and policy to address COVID-19, however, it did not address persons with disabilities in particular. This became a major gap in Pakistan’s Covid-19 policy. Major NGOs and private sector organizations tried to fill this gap. In this regard, the work of Christoffel-Blindenmission (CBM) (CBM) and its partner BEDARI, a local women’s rights organization, is important concerning tele-health and online psychological support initiatives for women with disabilities. Similarly, Network Organization Working with People with Disabilities, Pakistan (NOWPDP’s disability inclusive program) is also noteworthy in private sector initiatives. Psychosocial Disability Rights Network, National Disability and Development

Forum (NDF), ROZAN for persons with disability during COVID-19, Dar-ul-Khusnud, Centre for mentally Handicapped Children and Adults, also played a very important role in provision of COVID-19 related health services.

Neither the federal government, nor provincial governments gave any specific instructions to hospitals for dealing with persons with disabilities suffering from COVID-19 nor had any special attendants in hospitals or care-givers policy for in-house patients or disabled patients admitted in hospitals. In such a situation, non-governmental organizations and charity organizations helped persons with disabilities through different sources. There are many cases of persons with disabilities suffering during the pandemic especially concerning social distancing and employment opportunities. As there are no official guidelines for persons with disabilities during COVID-19, the needs are very complex and families have to deal with them especially after the closure of schools and rehabilitation centres.

People at the personal level are providing help to families of persons with disabilities and also transgender communities who suffer from barriers due to pandemic (International Disability Alliance, 2020). In a webinar organized by different organizations working for persons with disabilities, these called on the government to formulate a Disability-Inclusive COVID-19 response in order to address issues faced by persons with disabilities. These include hygiene issues, caregiver support, physical and economic support, increase tele medicine platforms to reach out to doctors and buying medicine (Digital Baitakh, 2020).

Persons with disabilities and speeches of the Prime Minister: an analysis

A content analysis of Prime Minister Imran Khan's key speeches and meetings on how to deal with COVID-19, shows that an overall policy on the Covid-19 pandemic was formulated with no specific mention of persons with disabilities. The first meeting of the National Security Committee chaired by the PM on 13 March 2020 outlines the response mechanism of the government. However, it does not include any mention of dealing with patients with disabilities or persons with disabilities (PM office Archives, 2020). On 27 March 2020, the PM held a meeting with the CEO National Disaster Risk Management Fund (NDRMF) to discuss the preparedness of the government in terms of logistics, however, this important meeting also did not cover the logistic needs of disabled COVID patients nor any special equipment or policy in this regard (PM office Archives, 2020).

On 8 April 2020, during his visit to the National Command and Operation Centre, the PM discussed the measures, medical equipment, and other needs and again, excluding the needs of persons with disabilities. Unfortunately, the website of the office of Prime Minister of Pakistan is not updated with the speeches he made after 26 February 2020 when the first case of COVID-19 appeared in Pakistan. Therefore, newspaper reports on the Prime Minister's speeches will

be considered as source. In his speech in the National Assembly on 26 June 2020, the PM gave a policy statement on the response mechanism to COVID-19, in which he emphasized the need for balancing ‘life and livelihood’ during the pandemic (DAWN, 2020).

In his televised address on 22 March 2020, the PM went on to announce a relief package for the poor through the Ehsaas program (a social protection program), by giving financial support to 12 million families. On the 9th of February 2020, the Special Assistant to the Prime Minister (SAPM) on Health, Zafar Mirza, told the nation that the country’s health facilities are ready to deal with any pandemic (Maqsood, 2020). In his address on 1 June, and later on 11 June 2020, the PM placed an emphasis on standard operating procedures (SOPs) to curb the spread of the virus in the country, again without mentioning disability as an issue during the pandemic (The Statesman, 2020). In another speech, while addressing the International Labour Organization’s Global Summit on 8 July 2020, the PM urged the global community to protect the vulnerable segments of the society especially Labourers (ILO Global Summit Speech, 2020). On 3 December 2020, the Prime Minister finally announced on twitter a policy towards a disability inclusive and sustainable post-COVID-19 world (twitter @Imran KhanPTI, 2020), however, the benefit of a monthly stipend to persons with disabilities is limited to one person per family.

Programs and initiatives by Pakistan to tackle COVID-19

In this regard, the government increased the income support program –a social protection initiative to cover 12 million families through the Ehsaas Emergency Cash Program, the Ehsaas Rashan Program (food program) and the Sehat Sahulat Program (health program) for poor and under-privileged people. However, if one goes through the goals of the Ehsaas program, there is no mention of persons with disabilities. On the website of the Ehsaas Program it provides a set of seven time-bound goals and targets:

- Safety net for at least 10 million families
- Livelihood opportunities for 3.8 million individuals
- Financial access to healthcare for 10 million families
- Scholarships and education incentives for 5 million students (50% girls)
- Financial and digital inclusion for 7 million individuals (90% women)
- Enabling environment for poverty reduction
- Equality promoting mutli-sectoral partnerships and innovations (Ehsaas Goals, 2020).

In the 134 policies, however, programs and initiatives under the Ehsaas Program, only 8 initiatives are exclusively for persons with disabilities (which are not specifically COVID-19 related but covers general initiatives). These include:

1. Ensuring universal access to assistive devices (e.g. wheelchairs, crutches and other assistive devices)

2. 20 centers for the physically challenged in under-privileged districts in the public-private partnership mode
3. Treatment cover of all disabled registered under NADRA through Insaaf card
4. 2% disabled quota in all government jobs
5. 1% quota for disabled government employees in government accommodations
6. 2% quota will be reserved for the disabled in Naya Pakistan housing scheme
7. All public-sector hospitals will be instructed to issue disability certificates as per UN definition so that persons with disabilities can benefit from Ehsaas policy actions.
8. To give greater salience to disability in public policy, no PC-1 shall be approved, until it is disability friendly

(Ehsaas List of Initiatives)

On the 3rd of December 2020, the Special Assistant to Prime Minister Dr. Sania Nishtar announced the COVID-19 related 'Ehsaas Kafaalat Policy for Special Persons'. This includes measures to address the improvement of situations of special persons, whereby each family with a special person will receive RS. 2000 per month through the Kafaalat program. This is limited to only one beneficiary per family (PASS, 2020).

Concerning education for persons with disabilities, the Government of Pakistan implemented the 'Government Rules and Disability Act 2014', which introduced admission quotas for students with disabilities at all education levels. In 2019, Tertiary education institutions were asked to exempt candidates with disabilities from admission tests, relax age limits, provide fee concessions, and offer appropriate examination modalities (The 2020 Global Education Monitoring Report, 2020). In August 2020, the Supreme Court of Pakistan directed the federal and provincial governments to implement the 2% quota in response to a petition where a person with a disability was denied a job in a school. The Court also asked the government to provide necessary and appropriate adjustments, once a person is appointed to a post, including accessible infrastructure, assistive technology, modifications to the work environment, and other forms of support so that people with disabilities can effectively perform their job. The Supreme Court also directed the federal and provincial governments to discontinue the use in all official documents and correspondence of terms such as 'disabled', 'physically handicapped', and 'mentally retarded', and instead use 'persons with disabilities' or 'persons with different abilities' as it shapes public perceptions (HRW, 2020)

The response and policies of the provincial governments are very important in this case. Although there was no coherent policy by federal government for persons with disabilities during COVID-19, it had few general guidelines under the Ehsaas program and the Ministry of Human Rights. However, there was no policy statement by the Prime Minister or the provincial governments in this regard. Under the 18th amendment, health is a provincial subject and provinces are free to develop their response mechanism, nevertheless, no provincial government formulated any policy or issued statement in this regard.

According to the Murtaza Wahab, the spokesman of the Chief Minister of Sindh province:

No special policy for disabled persons was adopted. The Government of Sindh policy was aggressive testing by the way of effective contract tracing and that was meant for segments of our society. We faced an unfortunate situation where ‘Dar ul Sukun’ (a care home for children with disabilities) faced an outbreak. Government of Sindh province immediately responded to their requests which included turning a portion of the premises into an isolation facility, provisions of PPEs, medicines and testing. An amount of RS 25 million was also given as a part of the annual grant” (Interview and policy statement, 04 August 2020)

The provinces of Khyber Pakhtunkhawa, Baluchistan and Punjab likewise have no clear policy or directives for persons with disabilities. According to Mushtaq Ahmad Jan, Assistant Professor at the Centre for Disaster Preparedness and Management, University of Peshawar, ‘till date there has been no policy for persons with disabilities during the pandemic’. He quoted the case of Arsalan Wahid, a young man with a disability who lost his leg in a road accident and later died of Covid-19. In his last tweet on social media, the young man mentioned the stigma attached to wearing masks in the society which is considered a sign of weak faith and fear of death in society. This neglect by his close family members and associates cost his life (Interview, Mustaq Ahmad Jan, 21 June 2020). Similarly, the Humanity & Inclusion (HI) program mentioned the case of children with disabilities and the way they are facing quarantine due to isolation and lack of interactions with other children. The issue of not attending rehabilitation centres is affecting children with disabilities as they are feeling more isolated and dependent on families for their basic needs amidst economic pressures (Humanity and Inclusion, 2020). According of Aziz Ullah Surani, Communication Officer at UNICEF Pakistan, ‘there has been no data segregation for the persons with disabilities or any vulnerable segments. The government has not specified any specific documents for any disabled victims of COVID-19 for this issue’ (Interview with Aziz Ullah Surani, 19 June 2020). Dr. Ali Haider, senior consultant Neurosurgeon at the Lady Reading Hospital Peshawar says, ‘As far as I know, there is no specific policy or protocol for the persons with disabilities suffering from COVID-19 nor is there any specific policy statement or notification regarding such patients. No case yet reported at our hospital who has disability and suffering from COVID-19’. (Interview, 5 August 2020)

Persons with disabilities and COVID-19 in Pakistan

During the first wave of the pandemic, the response mechanism of the government towards persons with disabilities was not very targeted. However, some NGOs and organisations recorded cases of such persons facing difficulties during COVID-19. As the hospitals and doctors didn’t receive any government’s guidelines, they were ill-prepared and hardly mentioned any cases during interviews. The United Nations Population Fund (UNFPA)

developed a Women Safety Smart App, an initiative of the Punjab Safe Cities Authority, helping women to report violence and their location coordinates to the police via emergency helpline or WhatsApp message. Abia Akram, an activist for the rights of women living with disabilities stated how ‘During quarantine, women with disabilities are left even more isolated and prone to gender-based violence...During the COVID-19 pandemic, the Women Safety app provides me with a sense of security and much needed access to emergency services.’ (UNFPA, 2020)

International Disability Alliance (IDA) started a series of stories from Pakistan to give voice to patients with disability. Fahad, a man in early 30s working in a hospital and having a physical disability, while narrating his story, said:

I am the eldest of siblings. In our social system, the elder of the house has the responsibility to support everyone. I spent all my savings to meet the needs of myself and my family during COVID-19...People with disabilities who used to earn some money by working for themselves and can’t continue doing so are seen as a burden on the national economy...People with disabilities who were working somewhere or running their own small business lost everything because of COVID19 (IDA, 2020).

Seeking jobs has become a major issue during the pandemic for people with disabilities, so is the availability of personal assistance services scarce due to social distancing and the nature of COVID-19 along with lack of accessibility to education. The majority of people with disabilities are isolated, especially those living in poverty. Fahad started a project to deliver food to 500 families facing disability and economic issues during COVID-19. They also provided assistance to the transgender community, as many other organisations are also providing food and assistance but it is a difficult task to locate and provide food, economic and personal assistance to persons with disabilities (IDA, 2020).

While sharing his experience of dealing with a COVID-19 patient with disabilities, Dr. Shammim, a surgeon in Peshawar said that during the first wave of COVID-19, there were no directives from the provincial and federal government as the hospitals and doctors were not even ready to treat patients with no disabilities in such an emergency. As there were no directives from the administration to help out such patients in a systematic way like their transportation, personal hygiene, pick and drop service, mental health, personal assistance at home, it was up to the doctors alone to deal with all such issues as far as they could do. Nevertheless, we provided help and assistance to such patients irrespective of gender (Interview, 7 November 2020).

The Psychosocial Disability Rights Network in Pakistan is another organization working for disability rights during COVID-19. Waqar Puri, a man with a psychosocial disability says:

It has been difficult to stay in isolation because I am unable to do my regular exercise and have a social life. There are many distractions and noises at home. It is very distressing...Our issues are not seen as important or perceived as an exaggeration, meaning our health is not treated as a priority... Many of us are not allowed to interact with other family members because of shame or fear of doing or saying something that is not appropriate.

Those who are institutionalized are facing greater risk of infection as ‘there are no safety measures and lack of awareness and information’, he says. Many are locked indoors with no access to information, meaning they can easily get infected if they do not have information on how to prevent contagion, which can lead to death’, Waqar said (IDA, 2020). Although the government has launched programs that can assist and help persons with disabilities, most of them find it difficult to register through online portals to get cash, or food or online education either due to unavailability of internet, lack of knowledge, assistance, or lack of devices in getting through the online registration process.

Dr, Salman, working for World Health Organisation (WHO) in Pakistan at the Agha Khan Hospital in Karachi shared his experience with a patient with disability suffering from COVID-19. According to him, the experience was tough and educating. The first day it took a lot of effort to take care of the patient specially to check the diet, pulse, blood pressure and personal hygiene. However, as patients with disabilities were not visiting hospital in large numbers, the hospital and doctors were not faced with extra challenges. But as the second wave of COVID-19 was more severe and doctors also have developed understanding along with the public understanding of the disease, patients with disabilities were provided with more care. Dr. Salman suggested provision of hotline services for such patients to communicate with healthcare personnel to ensure they are not suffering in total isolation (Interview, 10 November 2020).

Conclusion

Covid-19 has affected every part of the world and all segments of society irrespective of race, religion, case, country or any other boundaries. Persons with disabilities in every society face problems, however, in the global South there is less or no sensitivity to their problems and concerns. The problems they faced during the pandemic are of immense proportion and governments have to adopt disability-inclusive policies through active implementation. The problems of persons with disabilities during COVID-19 are greater than those of people with no disabilities, starting from personal hygiene to economic responsibility. The government of Pakistan through its Ehsaas program and Human Rights ministry tried to provide some focus to the issues faced by persons with disabilities, nevertheless there is no concrete policy nor any statement mentioning them as a priority case during a pandemic both at the provincial and

federal level. It is important for the government of Pakistan to develop an effective policy for persons with disabilities during the second wave of COVID-19, and the care they will receive before a vaccine is developed and given to everyone to provide cure to the people from the pandemic.

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