Report on the Participatory Rural Appraisal
In 30 Villages of District Jhelum
To Monitor the Changes in the Lives of the Persons with Disabilities

Under
Inclusive Development by Mainstreaming Persons with Disabilities through Social Mobilization, District Jhelum, Punjab Province, Pakistan

April 2010

H. No. 2, Street 10, F-7/3, Islamabad
(Ph. 051-2651276)

Plot # 1, Street 9 G-8/2 Islamabad.
(Ph. 051-111-111-920, Fax 051-2280081)
Email: info@chip-pk, Web: www.chip-pk.org
Table of Contents

CHAPTER 1: INTRODUCTION ...........................................................................................................3
1.1 About The Project ....................................................................................................................3
1.2 Locations ................................................................................................................................3
1.3 Time Period ..............................................................................................................................3
1.4 Objectives of the Project ..........................................................................................................4
1.5 Rationale ..................................................................................................................................4
1.6. Objectives of the PRA ............................................................................................................4
1.7 Methodology ...........................................................................................................................4

CHAPTER 2: FINDINGS ..................................................................................................................6
2.1 Technical Assessment ..............................................................................................................6
2.2 Referred to Doctor ..................................................................................................................6
2.3 Assistive Device ......................................................................................................................6
2.4 Membership in CCB/WO ........................................................................................................7
2.5 Consultation by CCB on Community Development Project ......................................................7
2.6 Participation in Social Activities .............................................................................................8
2.7 Skill Training ..........................................................................................................................8
2.8 Alteration in the Accessibility of House ...................................................................................9
2.9 Construction of Accessible Latrine ...........................................................................................9
2.10 Participation in Sports/ Membership in Cricket Team ...............................................................9
2.11 Gift or Sports Item ................................................................................................................10
2.12 Income Earning Opportunity ................................................................................................10
2.13 Street Pavement ....................................................................................................................10
2.14 Admission in School .............................................................................................................11
2.15 Sewing machine ...................................................................................................................11
2.16 Findings of the interviews of CCB/WO members .................................................................11

CHAPTER 3: IMPACT ....................................................................................................................12
3.1 Medical Check Up by the Doctor ..........................................................................................12
3.2 Assistive Device .......................................................................................................................12
3.3 Membership in CCB/WO .......................................................................................................12
3.4 Consultation by CCB on Community Development Project ................................................12
3.5 Training ..................................................................................................................................12
3.6 Participation in Social Activities ...........................................................................................12
3.7 Skill Training ..........................................................................................................................12
3.8 Alteration in the Accessibility of House ................................................................................12
3.9 Construction of Accessible Latrine .......................................................................................12
3.10 Participation in Sports/ Membership in Cricket Team ...........................................................13
3.11 Gift or Sports Item ...............................................................................................................13
3.12 Income Earning Opportunity ...............................................................................................13
3.13 Street Pavement ....................................................................................................................13
3.14 Admission in School ............................................................................................................13
3.15 Sewing machine ...................................................................................................................13
3.16 Impact at CCB/WO Level .....................................................................................................13

CHAPTER 4: RECOMMENDATIONS .............................................................................................14
4.1 Community Mobilization/Membership for PWDs .................................................................14
4.2 Skill Development for PWDs/Trainings ................................................................................14
4.3 Inclusive Infrastructure/Independent Living ........................................................................14
4.4 Health Hygiene Training for PWDs/Socialization .................................................................14
4.5 Assistive Device ....................................................................................................................14
4.6 WO Formation/Mobilization ...............................................................................................14
4.7 Local Resource Mobilization ................................................................................................14
4.8 Understanding of Project ......................................................................................................15
4.9 Education/Enrollment of Children with Disabilities ..............................................................15
4.10 Leadership Development .....................................................................................................15

Chapter 5: Conclusion ..................................................................................................................16
CHAPTER 1: INTRODUCTION

1.1 About the Project
Civil Society Human & Institutional Development Programme has been implementing its integrated development project in rural areas of Tehsil Sohawa since September 2004. To allow for different gender needs to be met, communities were organized into men’s and women’s CCBs and these were mobilized to access legally available resources from local government. Despite taking into account gender-specific needs, CHIP realized that disabled people were neither represented in the CCBs nor able to voice their concerns in their own villages and therefore remained excluded. Therefore to include the voices of Persons with Disabilities (PWDs) in communal development by mainstreaming them in existing development system a project on Inclusive Development was started in July 2008.

The project was aimed at the rehabilitation and inclusion of PWDs through social mobilization. The project will assist Civil Society Organizations and local government to work together to promote and strengthen the establishment of Citizen Community Boards in District Jhelum, Punjab Province as provided by the local government ordinance 2001. They will be specifically supported to enable Persons with Disabilities (PWDs) to realize their rights to participate in decision making processes which affect their lives, through social mobilization using rights based approach. Lessons and recommendations will be utilized to advocate for the implementation of legislation and pro-disability poverty alleviation strategies within the mainstream development agenda. The total population within the district is one million approximately. The population of the project area is 30,000 with an estimated 3,000 people with disabilities. All of these will benefit from improved CCB capacity and associated development projects.

1.2 Locations
30 villages of two tehsils i.e. Tehsil Sohawa and Tehsil Jhelum in District Jhelum

1.3 Time Period
Four Years (July 2008 – June 2012)
1.4 Objectives of the Project
1. Citizens, civil society and disabled people are mobilized to participate in local development processes;
2. A network of linkages and relationships established between citizens, civil society organizations including DPOs, local government, elected representatives and the private sector;
3. Experiences and learning will be utilized to advocate for disability mainstreaming.

1.5 Rationale
To proceed towards the above stated outputs, project identified 388 PWDs and activities to promote inclusive development were conducted in 30 villages of Tehsil Sohawa and Tehsil Jhelum. Activities conducted were election of PWDs as CCB/WO members, formation of inclusive CCBs/WOs, training of PWDs in performing activities of independent living, provision of assistive devices, conduct of disability equality training, enrollment of children in mainstream schools, construction of inclusive infrastructure i.e. inclusive toilets, inclusive schools, accessible streets and establishment of enterprises. To gauge the progress on above mentioned three outputs and change in the lives of the PWDs as well as general community a research was conducted. 100 PWDs in both the Tehsils were elected as direct beneficiaries of the project. Details of the interviews conducted and extracted information is to follow in Chapter 3.

1.6 Objectives of the PRA
a. To assess the changes in lives of PWDs residing in villages of Tehsil Sohawa and Tehsil Jehlum after CHIP’s intervention;
b. Identifying areas of adjustment, if required.

1.7 Methodology
The Steps Involved
The following steps were followed to conduct this study:

Step 1 Planning Meeting
A planning meeting was conducted among staff members and community mobilizers to develop a complete research design. Under given steps were clearly chalked out in this planning.

Step 2 Development of Questionnaires
The study was an amalgam of qualitative and quantitative techniques. Semi Structured Interviews (SSIs) were conducted to collect information from benefitted PWDs, CCBs and WOs. A strategy to collect the data from the PWDs and other stakeholders was devised. For details see Annex 1 and annex 2. Each of the variables was supposed to receive responses on:
• What benefit was provided i.e., inclusive toilet, assistive device, sewing machine, etc?
• How the provided benefit helped PWD to participate in social and cultural activities?
• What are the challenges and barriers for PWDs hindering them to participate in communal activities?

Step 3 Training of Research Team
Research team was comprised of staff members and Community Mobilizers (CMs). A one day orientation session on the questionnaires of the research team was conducted to orient them about project. Each of the questions in the questionnaire was explained to the team so that a homogeneous understanding of the team on the questionnaire is developed and every team member comes up with the right input from the respondents. Orientation of the team was carried out to acquaint them with the appropriate methodology of conducting interviews i.e., probing techniques, questionnaire filling and cleaning.

Step 4 Pre-Testing of Questionnaire
First day in field, the questionnaire was pre-tested by the respondents and on the same day in debriefing meeting enumerators shared their feedback for the improvement of questionnaire and guidelines. A couple of questions were revised.

Step 5 Data Collection
Collected data was cleaned on the daily basis in consultation with the research team and data was entered in software for the analysis. A total number of 80 questionnaires were filled and entered in the software.

Step 6 Debriefing Meeting
Debriefing the whole day was a usual exercise during data collection. Enumerators were asked to debrief all the activities with their supervisor in debriefing meeting. Strategies were identified on daily bases to overcome problems related to data collection and respondents.

Step 7 Data Entry
Collected data was entered into the software and was analyzed in the tabulated form, a snap shot of which is to follow in the next chapters.

Step 8 Draft Report
Draft report was designed with the help of collected data and information.

Step 9 Final Report
Final report is to be finalized after incorporating feedback given by senior management on the PRA with PWDs to monitor the change in their lives inclusive development project has been able to bring in.
CHAPTER 2: FINDINGS
Total 100 PWDs benefited from different inclusive development interventions were interviewed to gauge changes in their lives. 79 PWDs (41 Women, 38 Men) out of total 100 benefitted from the project were met and interviewed. 21 respondents could be met as they were away with either their daily routine activities or were unavailable for any reason. The findings of the PRA against selected variables are as under. The responses are categorized in three categories for quantification i.e. positive (who were happy), negative (who were disappointed) and neutral (who were neither positive nor negative).

The findings against the variables are as followed:

2.1 Technical Assessment
Total 59 PWDs were technically assessed (31 in Sohawa, 28 in Jehlum). In all the respondents a similar feeling was observed. Due to inaccessibility and unawareness they have not been able to visit a doctor ever in their lives. They never were examined for their disabilities and deformities do they know the type of their disability i.e. reversible or irreversible etc. They were highly obliged and delighted over the fact that they were identified and finally been technically assessed. Type and reason for their deformity and disability was known. Previously they were not that hopeful for their future prospects which had made life miserable and they consider themselves to be burden over their families. The technical assessment had kindled some hope of betterment in future. They were of the opinion that at least their hardships had been realized and thought about and they would be just like other individuals of the society and no more social outcast.

On the basis of technical assessment, enabling and empowerment plans of 79 PWDs were developed. Enabling plan involves the modification of the home into inclusive one whereas empowerment plan involves the strengthening of PWDs by helping them in education, health and economic opportunities. So a road map for PWDs, their families and CCB/WO exist for the rehabilitation and inclusion of PWDs.

<table>
<thead>
<tr>
<th>Table 1: Technical Assessment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Responses</td>
</tr>
<tr>
<td>Male</td>
</tr>
<tr>
<td>Female</td>
</tr>
<tr>
<td>Total</td>
</tr>
</tbody>
</table>

2.2 Referred to Doctor
Out of two tehsils, only one respondent from Sohawa was referred to for further medical examination. However the respondent told the team that he was not satisfied with the medical services provided there. He stated that his leg was fractured and the doctor could not diagnose it properly so he had to visit another doctor.

2.3 Assistive Device
In total 31 respondents (18 in Sohawa and 13 in Jehlum) were provided with assistive devices. Usage rate of the assistive devices was observed as 50%. Rest of the 50% both in Tehsil Sohawa and Tehsil Jehlum were not using the
assistive devices whether because of their own fears or the sizes of some of the PWDs varies and required some corrective measures.

Assistive devices (orthodics and wheel chair) helped the PWDs to make use of inclusive infrastructure, their mobility, accessibility followed by the use of enabled/inclusive facilities was enhanced. Participation in educational and social activities.

### Table 2: Assistive Devises

<table>
<thead>
<tr>
<th>Responses</th>
<th>Positive</th>
<th>Negative</th>
<th>Neutral</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>10</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Female</td>
<td>11</td>
<td>3</td>
<td>3</td>
</tr>
<tr>
<td>Total</td>
<td>21</td>
<td>5</td>
<td>5</td>
</tr>
</tbody>
</table>

### Table 3: Membership of CCB/WO

<table>
<thead>
<tr>
<th>Responses</th>
<th>Positive</th>
<th>Negative</th>
<th>Neutral</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>12</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Female</td>
<td>14</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Total</td>
<td>26</td>
<td>2</td>
<td>3</td>
</tr>
</tbody>
</table>

2.4 Membership in CCB/WO

In Tehsil Sohawa, 18 PWDs have become part of CCB/WO and are content to be a part of it. However, there is quite a variation concerning the level of their contribution in CCB/WO activities. One respondent shared that no one in the village is happy on PWDs inclusion in the committee. Three respondents expressed that their advice has been taken during the decision making process. Four respondents have not taken part in any activity but have been enrolled as the members. One respondent commented that there are only discussions no implementation can be observed in their village regarding any plan, it is only waste of time.

Whereas, all 13 PWDs who have become a part of CCB/WO in Tehsil Jehlum expressed their happiness and gratitude over the inclusion in the CCB/WO. After becoming a part they feel themselves to be like other people from their village. They are elated to express their ideas and opinions and take active part in the activities of the organization they are part of. 3 respondents shared that they have not been actively involved or taken part in the activities of the organization. Needs of the PWDs included in the development agenda of CCBs, PWDs involved in the membership to play their roles in communal decisions and accessible society.

### Table 3: Membership of CCB/WO

<table>
<thead>
<tr>
<th>Responses</th>
<th>Positive</th>
<th>Negative</th>
<th>Neutral</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>12</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Female</td>
<td>14</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Total</td>
<td>26</td>
<td>2</td>
<td>3</td>
</tr>
</tbody>
</table>

### Table 4: Consultation by CCBs

<table>
<thead>
<tr>
<th>Responses</th>
<th>Positive</th>
<th>Negative</th>
<th>Neutral</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>11</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Female</td>
<td>5</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>Total</td>
<td>16</td>
<td>0</td>
<td>1</td>
</tr>
</tbody>
</table>

2.5 Consultation by CCB on Community Development Project

Four PWDs in Tehsil Sohawa and 13 PWDs in Tehsil Jehlum were consulted and made part of decision making in development project by CCB/WO. It is a source of pleasure for all these PWDs to express their opinions and encourages them to lead their lives like others. Participating in the decision making process and sitting with other villagers boosts their spirits and makes them optimistic for their betterment in future. At this platform they can identify with others and share their feelings which they have not been able to share for the past so many years. They are glad that they are part of a
purposeful activity which is being initiated for the welfare and betterment of the PWDs. This has brought a pleasant change in their lives and opened up new horizons for their future. They are of the view that they will be no more a misfit made in the society on the other hand they will move hand in hand with other villagers for the development of their village. Needs and wants of the PWDs were incorporated in the development agenda of CCBs/VOs. Accessibility and mobility requirements of the PWDs were listed and addressed.

2.6 Participation in Social Activities
In Tehsil Sohawa 13 respondents shared that they have attended the social activities conducted by CHIP, while the number was 8 in Tehsil Jehlum. All these respondents are delighted to be part of the events and attending them is a source of enjoyment for them. They thoroughly enjoyed these events and it was a unique experience for them which they had never imagined to be part of. They further expressed their satisfaction over the fact that at least something is thought for them and they are honoured to be a part of it. Participation in social activities reflected that socialization is an equal right for the PWDs.

<table>
<thead>
<tr>
<th>Table 5: Socialization</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Responses</strong></td>
</tr>
<tr>
<td>Male</td>
</tr>
<tr>
<td>Female</td>
</tr>
<tr>
<td><strong>Total</strong></td>
</tr>
</tbody>
</table>

2.7 Skill Training
Ten PWDs (6 in Sohawa and 3 PWDs in Jehlum) have acquired skill training. Out of these six people from Sohawa and two from Jehlum have learnt stitching while the other two got midwife and teaching training respectively. Three respondents from Sohawa who learned stitching are of the opinion that the stitching training would help them to earn their livelihood and they will not have to depend on their families for financial assistance. They are satisfied that at least they have been identified and were considered worth to be part of the skill training. One respondent discontinued the training due to some conflict with the teacher. Two PWDs from Jehlum have made great use of the skill they have learned. One respondent is still in the process of learning process and desires to support herself using the skill. One respondent who got the training of midwife considers it to be of no use. One respondent who took the training of teaching has made it a source of income. One respondent from Sohawa received training on kitchen gardening followed by one who received training in vocational teaching skills and has now established her VTC for earning. Provision of skill training continued the promotion of human and institutional development in the communities.

<table>
<thead>
<tr>
<th>Table 6: Skills Training</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Responses</strong></td>
</tr>
<tr>
<td>Male</td>
</tr>
<tr>
<td>Female</td>
</tr>
<tr>
<td><strong>Total</strong></td>
</tr>
</tbody>
</table>
2.8 Alteration in the Accessibility of House

Six houses were altered (4 in Tehsil Sohawa and 2 in Tehsil Jehlum) to increase their accessibility within their houses. Their lives have become much easier as they can conveniently transport from one place to another. Previously there was a barrier which did not allow them to leave their houses. Now due to easy accessibility they can think of going out of their houses at any time without the assistance of any family member. They have become quite self-sufficient in their transportation and mobility outside their houses. One respondent expressed that the ramp has not been properly constructed so the family members have to take the responsibility of taking to the latrine.

2.9 Construction of Accessible Latrine

Accessible toilets were constructed in houses of 12 PWDs of Sohawa and 9 PWDs of Jehlum. 9 respondents from Sohawa and 9 from Jehlum shared that their lives have really changed as they do not have to go outside the house anymore. It was really difficult to go outside in rainy days. But now they can go to the latrine which has been provided to them anytime when they are in need. For this reason their eating habits have also improved and their health is much better than in past. This change has made their lives much better and they feel less dependent. However, three respondents from Sohawa stated that it was of no use as the family had to spend a lot of money to use the raw material been provided and CHIP has not given the seat and PWD cannot use the traditional toilet, one did not get the stand and one expressed that there is no use of latrine as it is of plastic and lighter than weight of the PWD.

2.10 Participation in Sports/ Membership in Cricket Team

One respondent from Sohawa took part in marathon in Islamabad. He really felt excited to be part of sports. People treated him very well which encouraged him to participate in sports activities in future too. Participation in sports has made him realize his worth and he feels to be like other human beings who can play and enjoy their lives. It has made his dream come true which he nurtured for so many years. In Tehsil Jehlum, two respondents have taken an active part in sports events held in their village. They were quite excited to be part of the sports. They had never thought of taking part in any sports before and after their participation they are quite happy.
2.11 Gift or Sports Item
Nine PWDs (6 from Sohawa and 3 from Jehlum) respectively were awarded gifts at eid day. The gifts included bangles, mehndi, pencils, rubbers, sharpeners, cricket dress kit and toys. 8 respondents stated that they felt really honored to be considered by CHIP worthy enough of the above mentioned gifts. They are glad that CHIP remembers them on occasions and festivities. These gifts mean a lot for them as they have never been thought to be like others and always considered to be misfit in the society. While, one respondent from Sohawa was of the opinion that if CHIP wants to give anything he wants to get a wheel chair.

<table>
<thead>
<tr>
<th>Table 10: Gift/Sports Item Responses</th>
<th>Positive</th>
<th>Negative</th>
<th>Neutral</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>2</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>Female</td>
<td>6</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Total</td>
<td>8</td>
<td>0</td>
<td>1</td>
</tr>
</tbody>
</table>

2.12 Income Earning Opportunity
Six PWDs (2 from Tehsil Sohawa and 4 from Tehsil Jehlum) were provided income generation opportunity by CHIP. Out of six, five have become self sufficient. They stated that they are no more a burden on their family members for financial support and have found source of income. The opportunity has transformed their life as earlier they were idle and had nothing to do at all. Sitting idle reminded them of their weakness. But now they can generate income and now there is no looking back. However, 1 respondent who was teaching in CHIP supported vocational training centre, generated income for six months but due to decline in number of students could not continue her job. She is willing to transmit her skill to others but circumstances are not favorable. As soon as the shortfall is met she will resume her training class.

<table>
<thead>
<tr>
<th>Table 11: Income Earning Opportunity Responses</th>
<th>Positive</th>
<th>Negative</th>
<th>Neutral</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>5</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Female</td>
<td>1</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Total</td>
<td>6</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

2.13 Street Pavement
Twelve PWDs (7 in Sohawa and 5 In Jehlum) have been benefited by the street pavement in their villages. Their mobility has increased to a greater extent. Prior to this development they could not go from one place to another and their mobility was highly restricted. Going outside home had become miserable for them and they were completely shunned from the outside world. But life at present is quite different for them. Their mobility has increased and now they can easily go from one place to another. To go outside for toilet was also a difficult experience for them which has become quite comfortable now. The respondents socialize more and can easily interact with others as they can go outside and visit people around. This has brought a pleasant change in their lives and they can well relate with the others in their village.

<table>
<thead>
<tr>
<th>Table 12: Street Pavement Responses</th>
<th>Positive</th>
<th>Negative</th>
<th>Neutral</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>7</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Female</td>
<td>5</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Total</td>
<td>12</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>
2.14 Admission in School

In Tehsil Sohawa, four children with disabilities have been admitted to schools. While in Tehsil Jehlum, one child with disability got enrolled in school. Admission in school has brought a considerable change in their lives. They feel excited while going to school and do not want to miss a day as they really enjoy going to school. Teachers and fellows treat them very well and they have got an opportunity to learn and discover new things which they had never thought about earlier. It is really exhilarating for them to study and play with other children of their age. They feel happy that school is such a place where so many children of their age collectively gather and where they can share their feelings and experiences. Life has become meaningful and there is something purposeful to do.

2.15 Sewing machine

Sewing machines were given to four PWDs in Tehsil Sohawa and to one PWD in Tehsil Jehlum by the support of CHIP. The respondents stated that they do not sit idle anymore and they have something to do now. They can earn their livelihood and be self-sufficient. They are not any more dependent on their families and can support themselves in a much better way. One respondent from Tehsil Sohawa who received a sewing machine refused to share her feelings about getting the sewing machine and one respondent from Jehlum is still in the learning process of stitching.

2.16 Findings of the interviews of CCB/WO members

Interviews of CCBs/WOs members were conducted in all the villages of Tehsil Sohawa and Jehlum. There was quite a similarity in the responses of the members. As far as their endeavors are concerned they have strived hard in ensuring the membership of the PWDs in their organizations. In fact the inclusion of PWDs is quite high on their priority list. There are certain organizations who are even welcoming PWDs in their plans even if they are not active members. These organizations have on their agenda to raise funds from various sources and also to establish linkages with government but at present these developments have not yet materialized. So far, financial support of these organizations is carried out by the community and by CHIP. Government has not extended any financial assistance for their projects.
CHAPTER 3: IMPACT

3.1 Medical Check Up by the Doctor
- Identification and certification of PWDs;
- Enabling and empowerment plans developed;
- Rehabilitation process started.

3.2 Assistive Device
- PWDs enabled;
- PWDs using inclusive infrastructure i.e. inclusive houses, inclusive latrines;
- PWDs generating income;
- Enrollment in school;
- Increased mobility;
- Socialization enhanced.

3.3 Membership in CCB/WO
- Increased self-confidence;
- Participation in decision making;
- Needs of PWDs included in the agenda of CCBs/WOs;
- Enhanced socialization.

3.4 Consultation by CCB on Community Development Project
- Increased self-confidence;
- Participation in decision making.

3.5 Training
- Increased knowledge and awareness.

3.6 Participation in Social Activities
- Step towards inclusive society.

3.7 Skill Training
- Self confidence;
- Opportunity to earn livelihood;
- Productive use of time.

3.9 Alteration in the Accessibility of House
- Less dependency;
- Increased mobility.

3.10 Construction of Accessible Latrine
- Less dependency;
- Improved eating patterns;
- Improved health;
- Hygienic environment.
3.11 Participation in Sports/ Membership in Cricket Team
- Increased self confidence;
- Role model for other PWDs.

3.12 Gift or Sports Item
- Feeling of recognition.

3.13 Income Earning Opportunity
- Increased self confidence;
- Self sufficiency;
- Less dependency;
- Financial contribution in communal activities;
- Role model for other PWDs.

3.14 Street Pavement
- Increased mobility;
- Less dependency;
- Enhanced socialization.

3.15 Admission in School
- Inclusion in mainstream education system;
- Increased self confidence.

3.16 Sewing machine
- Productive use of idle time;
- Opportunity for income generation.

3.17 Impact at CCB/WO Level
- A step towards holistic development;
- CCBs/WOs sensitized and working for inclusive.
CHAPTER 4: RECOMMENDATIONS

4.1 Community Mobilization/Membership for PWDs
Community mobilizers are a group of people elected at local level who are responsible for the rehabilitation and inclusion of PWDs of their respective villages. They can make a very positive impact on the lives of PWDs. Effective social mobilization skills may help them to strengthen the PWDs among their families and communities. They must be equipped with the art of keeping the expectations of families of PWDs low. Community mobilizers should be made responsible to attend CCB/WO meetings to ensure the fulfillment of needs of PWDs.

4.2 Skill Development for PWDs/Trainings
Training of PWDs followed by the provision of sewing machines may have made a real impact if PWDs would have supported to establish some enterprise either supported by project or by CCB.

4.3 Inclusive Infrastructure/Independent Living
Inclusive toilets have made the life of PWDs easier to a large extent. However, some toilets do not have the provision for seating for the PWD. There independence in using toilets would have increased if each of the toilet is provided with seating modes i.e., cement planks. Furthermore, toilets for physical disables should be on priority rather than for Persons with Blindness and Hearing and Speech Impairment.

4.4 Health Hygiene Training for PWDs/Socialization
Health and hygiene sessions with PWDs may have added value and meaning of life for PWDs. In socialization events or eid days, provision of hygiene kits as eid gifts subsequently followed by the training of PWDs in using these kits may have help them manifold i.e., improved hygienic conditions, participation in social events, etc.

4.5 Assistive Devices
Assistive devices served as a value addition to this project. Firstly, this value addition is a sound answer for the project responsible persons that without rehabilitation, inclusion is not possible. Secondly, the training and coaching sessions of CMs by physiotherapist and then of PWDs by CMs has made areal impact. But a follow up visit of physiotherapist to those provided with assistive devices may have improved the usage of assistive devices and would have decreased the fear of PWDs who are not using the assistive devices.

4.6 WO Formation/Mobilization
WOs should be consulted by CCBs in every development project they identify as the WOs are also beneficiaries of these development projects. This will provide a basis to

4.7 Local Resource Mobilization
This is a fact that local government system is dysfunctional. An exercise or training of CCBs/WOs in local resource mobilization may help them in
identifying and tapping other opportunities. CCBs may invite the officials from these departments in inauguration ceremonies of their development projects. This can be seen as an eye opener for officials from various departments and can mobilize them in participating by any means in different communal projects.

4.8 Understanding of Project
Community persons i.e., CCBs/WOs should be oriented about the philosophy of project i.e., a development project rather than disability project. This will help us to minimize the expectations of families of and PWDs themselves.

4.9 Education/Enrollment of Children with Disabilities
In schools, where PWDs were enrolled, training of teachers in basic sign language is compulsory. Also one DET session with rest of the students will help PWDs

4.10 Leadership Development
Peer counseling sessions by successful PWDs with rest of the PWDs and their family members may have helped to increase the mobilization process of PWDs.
Chapter 5: Conclusion
The process of inclusive development by mainstreaming PWDs through social mobilization is been kicked off. As 29 CCBs and WOs in 29 villages of District Jhelum (15 in Sohawa and 14 in Jhelum) are implementing the inclusive development projects. PWDs have been elected as members of these organizations. Three of them are executive body members of these organizations and are playing their roles in the key decision making of their CCBs/WOs.

10 PWDs were provided with income generating opportunities through the establishment of enterprises through trainings, capacity building and establishment of enterprises. They are on the way of buying their own needs meeting their wants and are contributing in the saving of their respective organization. However, gender balance has to be addressed in the provision of income generating opportunities.

Assistive devices were provided to thirty one PWDs which have resulted in the enhancement of mobility, accessibility and independence of PWDs. Follow up of CMs and PWDs would make a real impact on the use of assistive devices subsequently leading to the control of deformities.

Six children with disabilities were enrolled in mainstream schools and a trend for the PWDs to get education was set by the project. Though some intensive trainings of the teachers teaching in the mainstream schools on teaching children with disabilities are still required.

Approximately 100 PWDs have benefited of inclusive development project till to date. There is still more to be done. In the remaining project period, the needs of remaining identified PWDs and communities will be catered. Learnings from this report will be utilized to improvise the effects in the next half of the project.

CCBs/WOs still need to make some intensive efforts for the fund mobilization and has to be trained in tapping the funding opportunities other than local governments.