# INTEGRATING WOMEN WITH DISABILITIES INTO MAINSTREAM

## Analysis of Data of Disability Assessment Boards by the Women Development Department Punjab

Women Development Department | Government of the Punjab

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# DISCLAIMER

This report is based on the official data received from Social Welfare & Bait-ul-Mal Department and Punjab Information Technology Board till 22nd August, 2023. The responsibility of accuracy lies with the original provider of the data.

**Published in Pakistan**

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# PREFACE

This comprehensive report delves into analysis of data of Persons with Disabilities (PWDs) in Punjab, sourced from the Disability Assessment Boards of the Social Welfare & Bait-ul-Mal Department. Serving as a pivotal component of the Women Development Department's (WDD) "Integrating Women with Disabilities into Mainstream" project in Punjab, this endeavor marks a significant milestone in the ongoing efforts to foster inclusivity and empowerment for women, particularly those with disabilities, across the province.

The necessity to confront the obstacles encountered by women with disabilities stems from an undeniable fact: they confront interconnected challenges that hinder their complete integration into society. In addition to physical constraints, these challenges incorporate systemic prejudice, restricted opportunities for education, employment, healthcare, and social services, and entrenched societal attitudes that sustain stigma and marginalisation. Women with disabilities face significant obstacles in overcoming these challenges, given that they must contend with multiple forms of exclusion and oppression. They frequently encounter educational obstacles that restrict their prospects for both personal and professional growth. Furthermore, the insufficiency of healthcare services customised to address their specific requirements continues to worsen health inequalities and sustain recurring patterns of susceptibility.

Women with disabilities face substantial barriers when it comes to obtaining meaningful employment opportunities. They encounter widespread discrimination and unsuitable work environments, both of which impede their ability to achieve economic autonomy and sustain cycles of destitution. Moreover, social isolation and exclusion frequently result from societal perceptions of disability, which deprive individuals with disabilities of crucial support systems and social interaction opportunities.

The importance of this endeavour is underscored by the thorough examination of data from the Disability Assessment Boards in Punjab, furnished by the Social Welfare & Bait-ul-Mal Department. The purpose of this report is to gain insights that can guide the development of policies and targeted interventions to address the specific needs and obstacles encountered by women with disabilities in Punjab through an in-depth analysis of this data.

This report is the first step for achieving the targets of the project which include engaging in cooperative efforts with stakeholders from civil society, public, private and non-governmental sectors for objectives such as identifying critical domains that require further focus and development and develop strategies grounded in empirical evidence to foster empowerment and inclusiveness for women with disabilities. This report provides an overview and analysis of the information gathered from the disability assessment boards across Punjab. District-specific reports have also been prepared, to be published division-wise. While the project confronts the intricacies of inclusive development, its unwavering commitment to promoting gender equality and empowering women with disabilities remains intact. All stakeholders, collaborators, and contributors who have provided assistance to this undertaking are thanked. With sincere aspirations that this report will function as a catalyst for enduring progress and paradigmatic transformation in the lives of women with disabilities residing in Punjab.

# ACKNOWLEDGEMENTS

The Women Development Department (WDD) extends heartfelt appreciation to the Social Welfare & Bait-ul-Mal Department and the Punjab Information Technology Board for their invaluable contribution in providing the data-set of Persons with Disabilities (PWDs) in Punjab, which serves as the cornerstone of this report. Their cooperation and dedication in facilitating access to vital information has played a pivotal role in enabling WDD to conduct a thorough analysis and gain insights into the challenges faced by women with disabilities in the province.

Additionally, WDD expresses sincere gratitude to all team members within the department who have diligently worked to compile and organize the PWDs data-set. Their meticulous efforts in ensuring the accuracy and completeness of the data have laid a robust foundation for the analysis presented in this report. Their steadfast commitment to addressing the needs of marginalized communities, including women with disabilities, aligns with the core values of inclusivity and social justice upheld by the department.

# MESSAGES

**Maryam Nawaz**
Chief Minister, Punjab

In the realm of socioeconomic development and governance, integral to the vision and policies of the government of Punjab is an equitable and just inclusion of all its citizen, especially those confronted by vulnerability and marginalization. While both women and persons with disabilities represent vulnerable groups of the society, the hardship and deprivation enfolding women with disabilities are two-fold. Increasingly marginalized within an already vulnerable group of persons, women with disabilities suffer from an inadequate access to essential services in the realms of education, health, and employment, and hold, consequently, an emphatic presence in the concerns and aspirations of the Government of Punjab.

An improvement in the conditions of women with disabilities demands ineluctably collection, analysis, and intelligent compilation of data and information related to their conditions of existence. Unfortunately, at present, the existence of such data and information is punctuated by profound insufficiency. Cognizant of the imperative, the Women Development Department of the Government of Punjab, through its project titled "Mainstreaming Women with Disabilities," is committed to unprecedentedly gathering data and information related to women with disabilities and intelligently utilizing it for the development and implementation of policies and interventions which improve their lives.

This report endeavors to present, inter alia, the state of affairs of women with disabilities with respect to accessing the 'Disability Assessment Board' and acquiring the 'Disability Assessment Certificate,' a document which is a sine qua non for acquiring diverse essential provisions and dispensations for persons with disabilities, including eligibility for jobs reserved under the three percent quota for persons with disabilities. Its contents and analysis will help not only in improving the access of women with disabilities to the 'Disability Assessment Certificate' but also in generating information which can be used meaningfully for designing interventions across several socioeconomic sectors important for women with disabilities.

More than ever before, the Government of Punjab is relentlessly devoted to making certain that its women with disabilities stand shoulder to shoulder with all other citizens of Punjab and claim their rightful place within an inclusive Punjab with dignity, honour, and prosperity!

## Zahid Akhtar Zaman

Chief Secretary, Punjab

The journey for persons with disabilities is marked with formidable barriers, including limited access to education, employment, skills, healthcare, and social services. Discrimination and societal stigma further compound their difficulties, often relegating them to the margins of society. Within this vulnerable group, women with disabilities are a further marginalised group with their own peculiar challenges in every area of life. The Government of Punjab, being cognizant of this area of concern, is committed to ensuring the mainstreaming of women with disabilities and it is in this context that the "Mainstreaming women with disabilities" project of the Women Development Department is being implemented.

This report is a step in the right direction for showing where women are placed within the context of the Disability Assessment Boards, how that impacts their position within society and what lessons emerge which will direct policy for ensuring that women with disabilities get access to the services of the Disability Assessment Board as well as the allied services.

Gender disaggregated data is imperative for focused, nuanced and inclusive planning, project design and implementation. Systemic inequities can only be addressed when they are systematically made visible-data speaks. Only then can we ensure full participation of vulnerable groups such as women with disabilities.

The findings of the report show a big gap in access of women to the services of the Disability Assessment Board and this then results in a gap in access to services and provision that require the disability assessment certificate. The report points to and provides recommendations for targeted efforts to increase the number of women getting disability assessment certificates and their onward access to services that depend upon that.

I call upon all stakeholders, from government agencies, civil society and private sector to join hands in fostering an environment of inclusivity and empowerment for persons with disabilities. By harnessing the insights presented in this report and implementing targeted interventions, we can collectively pave the way for a future where every person, irrespective of disability and gender, is afforded the dignity, opportunities, and respect they rightfully deserve.

# MESSAGES

**Sumaira Samad**
Secretary, Women Development Department, Punjab

Women Development Department (WDD) has been established with the express purpose to ensure gender mainstreaming and inclusive development across Punjab. The mandate of the department is inter-sectoral and cross-cutting. While the department is working for all women, across the board, its work is cognizant that women are not a monolithic group and there is a wide range of different sub-groups and contexts within the major category of women. It is very important for development to cater to all these different sub-groups in a customised manner. Women with disabilities is one such sub-group.

"Integrating Women with Disabilities into the Mainstream" is a project of WDD that is designed to focus on women with disabilities exclusively. The project aims to gather data and information regarding women with disabilities in Punjab from public and non-government sources, map the organisations involved in work that is connected with women with disabilities, and identify areas for policy input and design of interventions for integrating women with disabilities into the mainstream. This report is a step in that direction.

The report analyses data of the Disability Assessment Boards of the Social Welfare and Bait ul Maal department through a gender lens. These boards have been established in all thirty six districts and have gone down to the tehsil level as well. Disability assessment is a fundamental and key service through which persons with disability (PWDs) are provided disability certificate. This certificate is a mandatory documents for many provisions of the government for PWDs such as insertion of disability status in CNIC, eligibility for three percent quota in jobs and for admission to educational institutes and appraisal for Benazir Income Support Programme grants. This report serves as a pivotal tool in understanding the unique challenges faced by women with disabilities in Punjab. By meticulously examining the PWDs' dataset, the report helps to highlight the barriers and disparities that hinder full participation of women with disabilities in society. Through this analysis, we seek to inform targeted interventions and policy formulations that prioritize the welfare and empowerment of this marginalized segment of our population.

Achieving gender equality and equity necessitates prioritizing the needs and rights of women with disabilities. It is imperative that we channel our efforts towards dismantling the systemic barriers and discriminatory practices that perpetuate inequality. I look forward to the engagement of all stakeholders with the findings of the report and to their feedback.

The government of Punjab, under the leadership of the Chief Minister, Madam Maryam Nawaz, is fully committed to ensuring a life of dignity and full involvement of women with disabilities in the socio-economic and political life of Pakistan. This requires all stakeholders to join hands to work towards the goal of advancing the welfare and empowerment of women with disabilities in Punjab and achieving a society free from all kinds of discrimination.

I want to extend my gratitude to the Social Welfare and Bait ul Maal Department for their generous support in accessing and gathering this data and look forward to continuing collaboration with them.

# ABBREVIATIONS

| | | |
|---|---|---|
| B | BISP | Benazir Income Support Program |
| N | NADRA | National Database and Registration Authority |
| N | NGOs | Non-governmental organizations |
| P | PWDs | Persons with Disabilities |
| P | PVTC | Punjab Vocational Training Council |
| P | PITB | Punjab Information Technology Board |
| P | PWTD | Punjab Welfare Trust for the Disabled |
| S | SW&BM | Social Welfare & Bait-ul-Mal Department |
| T | TEVTA | Technical Education & Vocational Training Authority |
| W | WDD | Women Development Department |

# INTRODUCTION TO WOMEN DEVELOPMENT DEPARTMENT (WDD)

The Women Development Department Government of the Punjab was established in 2012 to ensure women empowerment and for developing enabling environment for the women through various initiative and policies. The department focuses on enhancing women's socio-economic status, providing opportunities for their education and skill development, and ensuring their active participation in decision-making processes at all levels of society.

# EXECUTIVE SUMMARY

Women Development Department (WDD) has initiated a scheme titled **"Integrating Women with Disabilities into Mainstream"** in Punjab in 2022-23. The project aims to gather data and information regarding women with disabilities in Punjab from various sources such as Social Welfare and Bait ul Maal department, Benazir Income Support Program, Punjab Social Protection Authority, NGOs etc. and to analyze this through a gender lens in order to formulate policy inputs and development interventions.

WDD has compiled a detailed report analyzing the Disability Assessment Board data from the Social Welfare Department of Punjab. The report thoroughly explores different aspects such as comparison of number men and women accessing disability assessment boards, gender profiles, age wise distribution, literacy rates, geographical spread, number of women in the four categories of disabilities the boards provide assessment for and comparative analysis of women judged as fit to work or not fit to work. This analysis has revealed significant trends like how disabilities are distributed among various age groups and genders, providing insights into the specific challenges women with disabilities face at different life stages. Additionally, it examines literacy rates among people with disabilities, noting differences between genders and age groups

Fitness status emerges as another crucial aspect, with the report dissecting the proportion of individuals deemed fit-to-work versus those classified as not fit-to-work. This analysis underscores the need for tailored interventions to support individuals with disabilities, especially women with disabilities in gaining meaningful employment and accessing opportunities for economic empowerment.

Iidentified gaps in the report point towards areas needing urgent attention, such as the gender disparity in disability representation, unequal access to education and literacy, and the need for targeted interventions to improve overall fitness and employability among women with disabilities.

The report serves as useful resource for policymakers, stakeholders, and communities, urging them to prioritize inclusivity and equity in their efforts to support women with disabilities. By bridging the gender gap, improving literacy rates, and enhancing opportunities for economic participation, Punjab can foster a more inclusive society where every individual has the chance to thrive.

# 01

# 01. INTRODUCTION

## 1.1. Background

In Pakistan, the field of disabilities has seen limited development, leaving Persons with Disabilities (PWDs) as a marginalized group. Within this demographic, women face a dual marginalization due to their relatively neglected status in society. There is a pressing need for concerted efforts to integrate women with disabilities into mainstream society. Unfortunately, disaggregated data on women with disabilities, encompassing the types of disabilities and their impact, is either unavailable or riddled with gaps. The absence of such data makes it challenging to accurately assess the scale and severity of the issues faced by women and girls with disabilities and hampers the formulation of effective interventions, projects, and policies.

Understanding the condition of women and girls with disabilities is critical since these subgroups of PWDs face the most severe social, economic, and cultural marginalization. Women and girls with disabilities in Pakistan face widespread persecution and discrimination. They are unable to fight for their rights and face sexual, physical, and psychological abuse and exploitation.

Women Development Department has initiated a scheme titled “Integrating Women with Disabilities into Mainstream” in Punjab. The project aims at collection, analysis and meaningful data compilation and other forms of information regarding women with disabilities. By engaging with various sectors and conducting workshops, the project seeks to improve accessibility and provide necessary facilities to enhance the socio-economic outcomes and empowerment of women.

## 1.2.Project Objectives

The project titled “Integrating Women with Disabilities into Main Stream” has the following objectives;

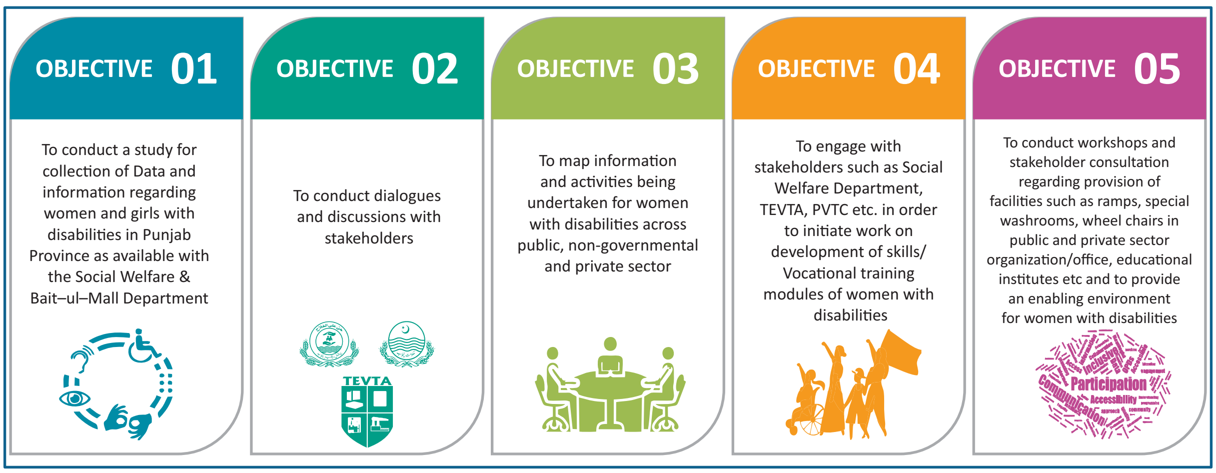



*Figure 1.1*

The project will also help to achieve the targets of the Punjab Growth Strategy 2023 by improving Gender equality and socio-economic outcomes for women. The project is aligned with sectoral objectives. This will help to achieve the internationally agreed Sustainable Development Goals, particularly Goal No. 05 "ACHIEVE GENDER EQUALITY AND EMPOWER ALL WOMEN AN GIRLS.''

## 1.3. Rationale of Study (Why Studying Disability Data is Important in Punjab)

The rationale for conducting this study on disability data of Persons with Disabilities (PWDs) in Punjab stems from the pressing need to address the systemic challenges and barriers faced by this marginalized population. Understanding the prevalence, types, and severity of disabilities among the population is crucial for informed decision-making and effective policy formulation aimed at promoting the rights, inclusion, and well-being of PWDs.

Firstly, comprehensive data on disabilities is essential for identifying the scope and scale of the issues faced by PWDs in Punjab. Without accurate data, it is challenging to assess the magnitude of the challenges and prioritize areas for intervention. By conducting a thorough analysis of disability data, policymakers and stakeholders can gain valuable insights into the needs and vulnerabilities of PWDs, thereby guiding targeted interventions and resource allocation.

Secondly, this study aims to address the dearth of disaggregated data on disability in Punjab, particularly concerning women with disabilities. Women with disabilities often face intersecting forms of discrimination and marginalization, yet their specific needs and challenges are often overlooked in mainstream discourse and policy initiatives. By focusing on gender-disaggregated disability data, this study seeks to fill this crucial gap and highlight the unique experiences and vulnerabilities of women with disabilities.

Furthermore, the study seeks to generate evidence to inform the development and implementation of inclusive policies and programs for PWDs in Punjab. Disability data serves as a foundational tool for designing interventions that address the specific needs of PWDs, whether in the areas of education, healthcare, employment, or social protection. By conducting a rigorous analysis of disability data, this study aims to provide policymakers with actionable insights to drive meaningful change and promote the social and economic inclusion of PWDs in Punjab.

Overall, the rationale for this study is grounded in the imperative to advance social justice, equity, and inclusion for PWDs in Punjab specifically women with disabilities. By generating robust disability data and leveraging evidence-based insights, this study aims to catalyse policy reforms and initiatives that empower women with disabilities, enhance their quality of life, and ensure their full participation in all aspects of society.

## 1.4.Significance of The Study (Impact of Research on Policies & Practices)

The significance of this report lies in its endeavour to shed light on the marginalized and neglected status of women with disabilities in Punjab. By addressing the dual marginalization faced by this demographic, the report aims to highlight the urgent need for concerted efforts towards their integration into mainstream society. The scope of this report encompasses a comprehensive analysis of the challenges, barriers, and gaps in the existing data and policies concerning women with disabilities in Punjab.

Furthermore, this report seeks to emphasize the critical importance of disaggregated data on women with disabilities to accurately assess their needs, challenges, and opportunities. By providing insights into the types of disabilities and their impact on women, the report aims to facilitate informed decision-making and the formulation of effective interventions, projects, and policies to address their unique needs.

Through its analysis and recommendations, this report strives to contribute toward creating a more inclusive and equitable society where women with disabilities are empowered to participate fully in social, economic, and cultural spheres. Ultimately, the significance and scope of this report extend beyond mere documentation to advocate for tangible actions and policy changes that prioritize the rights and well-being of women with disabilities in Punjab.

Moreover, the study's recommendations offer actionable strategies for improving the accessibility of services, facilities, and opportunities for women with disabilities. By advocating for the implementation of these recommendations, policymakers and practitioners can contribute to creating a more inclusive and equitable society where women with disabilities are able to fully participate and thrive. Additionally, the study's emphasis on the importance of disaggregated data underscores the need for improved data collection mechanisms to accurately capture the experiences and realities of women with disabilities.

Furthermore, the study's impact extends beyond the realm of policymaking to influence societal attitudes and perceptions towards women with disabilities. By raising awareness about the challenges they face and the importance of their inclusion, the study contributes to changing societal norms and practices that perpetuate discrimination and exclusion. Through collaborative efforts between government agencies, civil society organizations, and other stakeholders, the study's findings can serve as a catalyst for fostering a more inclusive and supportive environment for women with disabilities in Punjab.

In conclusion, this study has the potential to drive meaningful change in policies, practices, and societal attitudes towards women and girls with disabilities in Pakistan. By providing evidence-based insights and actionable recommendations, the study serves as a catalyst for advancing the rights, well-being, and socio-economic empowerment of this marginalized group. Through concerted efforts and collaborative action, stakeholders can work towards creating a more inclusive and equitable society where women and girls with disabilities are able to fully participate and thrive.

# 02

# DATA COLLECTION

# 02. DATA COLLECTION

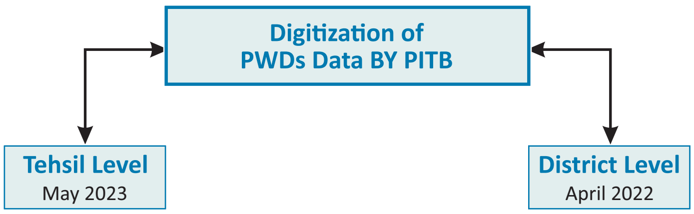
## 2.1. Methodology

Pakistan lacks updated statistics on the overall number of persons with disabilities, and specific statistics on women and girls with disabilities are notably absent. Additionally, data detailing the types of disabilities affecting them is insufficient. Although disability has been acknowledged and included in the census, the statistics on disability are marred by inadequacies such as a lack of standardized definitions.

### 2.1.1. Data Source

The data on registered Persons with Disabilities (PWDs) was meticulously gathered from the Social Welfare & Bait-ul-Mal Department (SW&BM). The data of registered PWDs was further digitized by Punjab Information Technology Board (PITB);

- PITB started to digitize the data of Districts of the Punjab from April 2022.
- PITB started to digitize the data of Tehsils of the Punjab from May 2023.




### 2.1.2. List of Indicators

The received data from SW&BM and PITB contains 14 indicators;

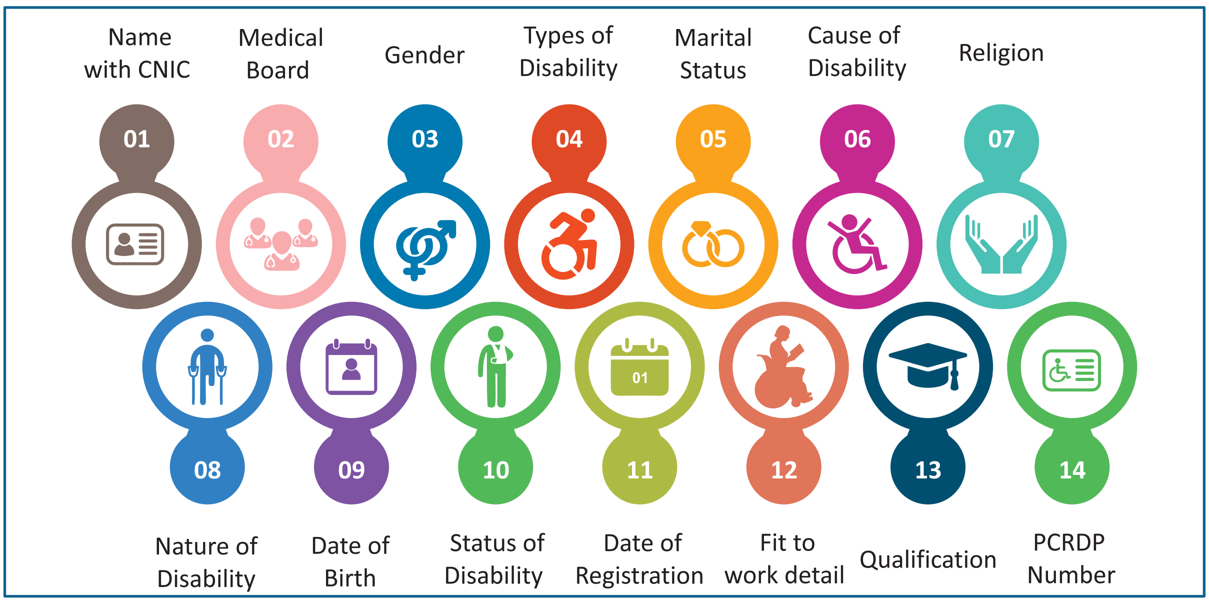



*Figure 2.1*

### 2.1.3.Scope & Limitations

The findings of this study are expected to have a profound impact on policies and practices concerning women with disabilities in Punjab. By highlighting the challenges and barriers faced by this marginalized group, the study provides valuable insights that can inform the development of targeted policies and interventions aimed at addressing their specific needs. These insights are crucial for policymakers and practitioners seeking to design inclusive programs and initiatives that promote the rights, well-being, and socio-economic empowerment of women with disabilities.

PITB started to digitize the district level data from April 2022 and Tehsil level data from May 2023 regarding persons with disabilities maintained by the SW&BM department. The data used to complete this study was collected till 22nd August 2023.

In addition to shedding light on the challenges and barriers faced by women with disabilities in Punjab, this study also underscores the importance of data-driven decision-making in policy formulation and implementation. The digitization efforts initiated by the Punjab Information Technology Board (PITB) to compile and analyze data on persons with disabilities represent a significant step towards understanding the demographic profile, needs, and experiences of this vulnerable population. By harnessing the power of data analytics, policymakers can gain a deeper understanding of the nuanced issues affecting women with disabilities and devise targeted strategies to address them effectively.

The study's emphasis on fostering collaboration among government agencies, civil society organizations, and stakeholders underscores the importance of a multi-sectoral approach in addressing the challenges faced by women with disabilities in Punjab. By leveraging resources and expertise through partnerships, stakeholders can work towards dismantling systemic barriers and promoting accessibility. However, one limitation of the study lies in its reliance on existing data collected by the SW&BM department until August 22, 2023. This reliance may overlook recent developments or changes in the circumstances of women with disabilities, potentially limiting the comprehensiveness of the study's findings. Additionally, the study's focus on quantitative data may not fully capture the nuanced experiences of women with disabilities, highlighting the need for future research to incorporate qualitative methodologies. Integrating both quantitative and qualitative approaches can provide a more holistic understanding of the challenges and needs of this marginalized group, ultimately contributing to more effective policy and programmatic responses.

### 2.1.4.Types of Disability

The data received from Social Welfare & Bait-ul-Mal Department based on four (4) types of disabilities i.e.

- Physical Impaired
- Deaf & Mute
- Visually Impaired
- Mentally Challenged

## 2.1.5. Districts for Data Analysis

This section contains the analysis of 36 districts of the Punjab. The map of 36 districts is mention below;

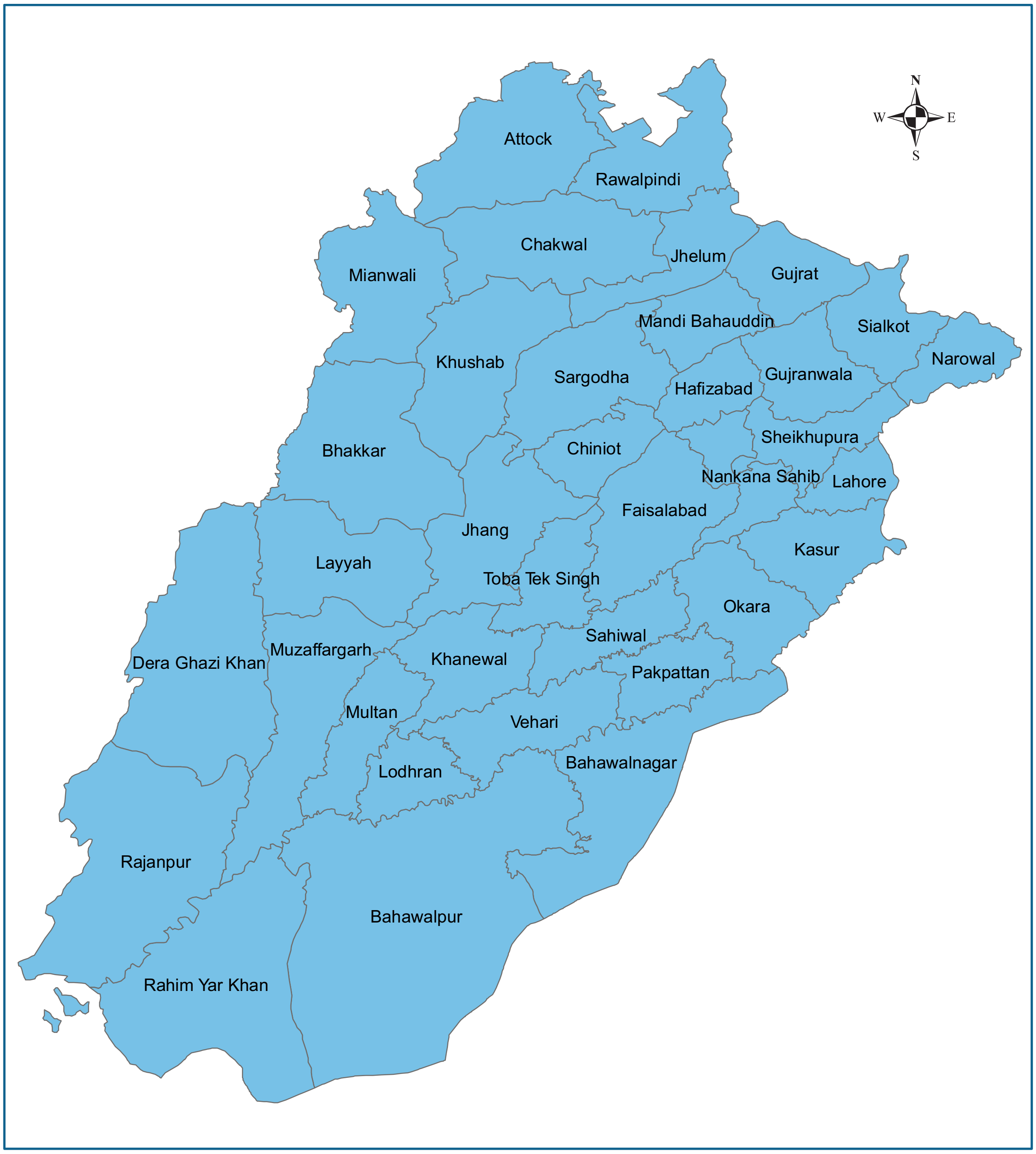



*Figure 2.2*

The collected data of PWDs has been cleaned by separating the male and female populations. First, the analysis was carried out individually for males and females. Then the collective contribution of PWDs has been computed.

https://punjab.gov.pk/districts

# 03


PUNJAB

PUNJAB DATA ANALYSIS

# 03. PUNJAB DATA ANALYSIS

Analyzing the situation of Persons with Disabilities (PWDs), and specially women with disabilities in Punjab is important for various reasons:

## Inclusivity and Equality:

Understanding the status of PWDs helps ensure inclusivity and equal opportunities for all members of society. Analyzing their situation helps identify barriers to their full participation in various aspects of life, such as education, employment, and social activities.

## Policy Formulation:

Accurate data on the number and needs of women with disabilities is crucial for formulating effective policies. This investigation sheds light on the many sorts of impairments that exist in the region, as well as the unique problems that individuals confront. This information helps authorities to modify policies to meet the specific demands of women with disabilities.

## Resource Allocation:

Understanding the prevalence and characteristics of women with disabilities helps governments and organizations to distribute resources more efficiently. This ensures that programs and services are directed toward regions and persons in greatest need.

## Advocacy and Awareness:

Analyzing the current situation of women with disabilities helps raise awareness about their rights and problems. Advocacy groups, non-governmental organizations (NGOs), and government agencies can utilize this information to educate the public, promote inclusiveness, and fight to reduce social stigmas connected with disability.

### Employment Opportunities:

By understanding the employment status and issues faced by women with disabilities in Punjab enables the formulation of focused measures to improve their employability. This involves making workplaces more accessible and encouraging diversity and inclusion in the workforce.

## Education Accessibility:

Analyzing the educational status of women with disabilities helps identify barriers to education, whether they are physical, financial, or social. This information is crucial for developing strategies to make education more accessible and inclusive for individuals with disabilities.

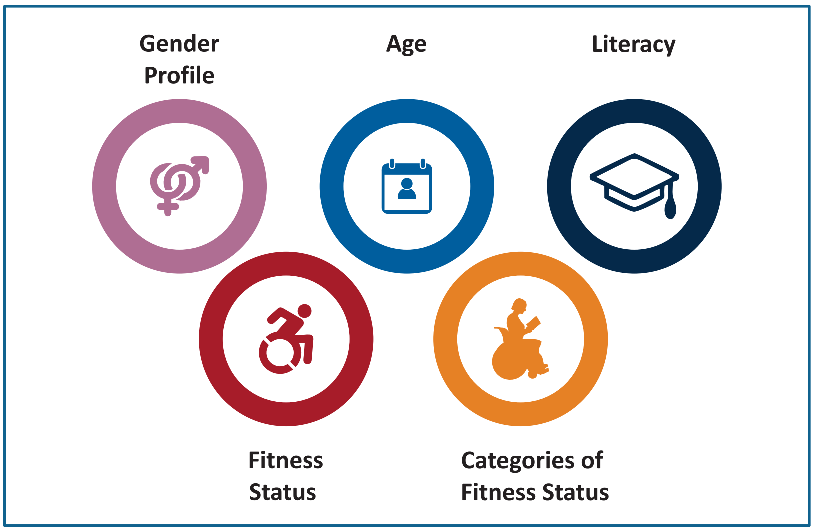
## Healthcare Planning:

The analysis can provide insights into the healthcare needs of this population. It helps in the development of accessible healthcare services, and rehabilitation facilities, and ensures that medical staff are properly prepared to handle the unique requirements of people with disabilities.

## Legal Compliance:

Understanding the reality of PWDs is critical for maintaining compliance with national and international laws and agreements that promote the rights of people with disabilities and women with disabilities. This covers legislation regarding accessibility, nondiscrimination, and equal chances.

The analysis is based on Five (5) highlighted and important indicators given as;



# Demographic Overview

3.1. Gender Profile

3.2. Age wise Distribution of PWD's

3.3. Literacy Rate of PWD's

3.4. Fitness Status of PWD's

## 3.1. Gender Profile

### 3.1.1. Gender Distribution of Persons with Disabilities

Based on the data provided by the Social Welfare and Bait-ul-Mal, in collaboration with the Punjab Information Technology Board, the population of persons with disabilities is presented in the following figure:

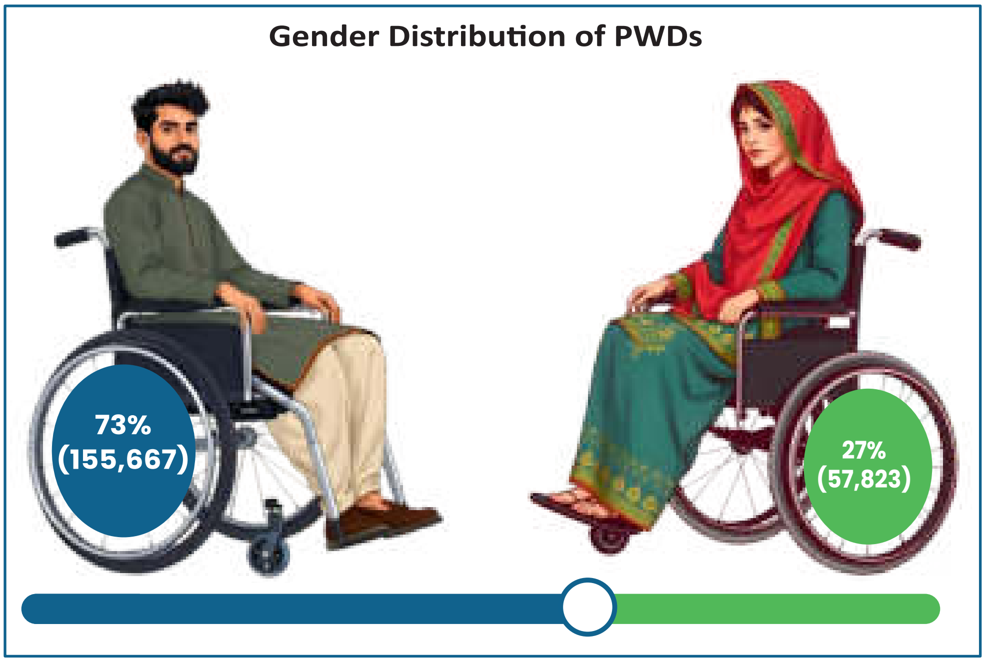



*Figure 3.1.1*

The comprehensive count of registered Persons with Disabilities (PWDs) in Punjab as of August 22nd, 2023 is presented in figure3.1.1. According to the data, the aggregate number of registered PWDs in Punjab stands at 213,516. 73% of the total population, which amounts to 155,667 individuals, are registered males with disabilities. In contrast, the registered females with disabilities number 57,823, accounting for 27% of the total registered PWDs. This disparity in registration rates between males and females with disabilities highlights a significant difference, with a higher proportion of males being registered compared to females. The significant difference between the counts of males and females with physical disabilities indicates societal, cultural, or systemic obstacles that impede females from registering in disability assessment boards.

Furthermore, according to the data, only 22 transgender individuals with disabilities are registered as PWDs. Additionally, the gender of 4 persons with disabilities is not specified in the analysed data.

### 3.1.2. Gender Wise Type of Disability

A disability is a condition or impairment that significantly affects a person's capacity to conduct daily tasks, fully participate in society, or engage in normal life functions. Disabilities can be physical, sensory, intellectual, visual, or developmental in character, and they can occur at birth or later in life. According to United Nation Convention on the Rights of Persons with Disabilities "Persons with disabilities include those who have long-term physical, mental, intellectual or sensory impairments which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others." It is vital to recognize that disability is a broad and multifaceted notion, and persons with disabilities have a diverse set of talents, skills, and experiences. The categories of disability according to disability guidelines includes;

https://www.un.org/esa/socdev/enable/rights/convtexte.htm Disability and Health Overview | CDC

### Mild:

Disability of the patients does not affect the major activities of daily living. Seen individuals qualify for medical treatment, financial assistance, or compensation only.

### Moderate:

The disability of the patients affects one or more major activities of daily living. These patients qualify for jobs/admission for education/ medical treatment/ financial assistance.

### Severe:

The disability of the patients affects one or more major activities of daily living and such individual qualifies for medical treatment /financial assistance but may qualify for job/admission under special sheltered conditions.

### Very Severe:

The disability of the patients is so severe that it affects his/her major activities of daily living (so badly that such individuals are unfit for any job, or admission for education but qualify only for medical/ financial assistance.

The gender-wise analysis of disabilities in Punjab is important for understanding the unique challenges faced by individuals at the intersection of gender and disability. This information is essential for developing inclusive policies, providing tailored support services, ensuring equal access to education and employment, planning healthcare services, addressing social inclusion and stigma, and upholding legal protections for all individuals with disabilities.

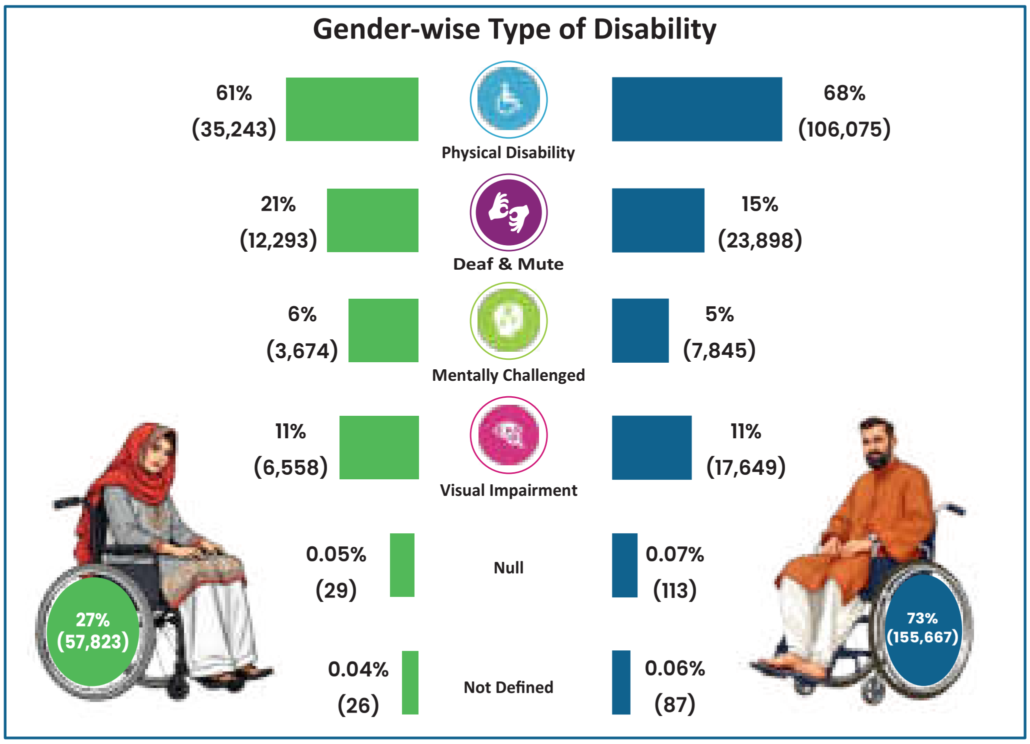



*Figure 3.1.2*

Figure 3.1.2 describes the gender-wise ratio of disability type of registered PWDs of Punjab.

The term "Physically Impaired" refers to a condition in which an individual has restrictions or issues with their physical skills, which usually include the body's mobility, coordination, or functioning. This disability may be caused by inherited causes, acquired injuries, medical disorders, or other reasons that limit the individual's physical skills. Physical disabilities can range in severity and impact several parts of the body, including the limbs, muscles, and sensory organs.

The data reveals that a total of 57,823 are registered females with disabilities. Among them, 35,243 females have physical disabilities, constituting 61% of the total female population. Similarly, 155,667 are registered males with disabilities. Among them 106,075 males have physical disabilities, constituting 68% of the total male population.

The term “Deaf” refers to those who have severe hearing loss or are completely deaf. Some people who are deaf may communicate using sign language or other visual means. Similarly, the term “Mute” describes individuals who do not use spoken language as their primary means of communication. This can include people who are Deaf and communicate through sign language or other nonverbal means, as well as those who have various ailments that limit their ability to talk.

The results depict that a total of 12,293 females are registered as deaf & mute constituting 21% of the total female population. Same as a total of 23,898 males are registered as deaf & mute constituting 15% of the total male population.

The term “Intellectual disability” or “mentally challenged” describes a condition characterized by limitations in intellectual functioning and adaptive behavior. Individuals with intellectual disabilities may experience challenges in reasoning, problem-solving, learning, and general cognitive abilities. These limitations often manifest before the age of 18 and can impact a person's daily life and social interactions.

Moreover, Intellectual disabilities vary in severity, ranging from mild to profound. People with intellectual disabilities may require varying levels of support to participate in activities, communicate effectively, and lead independent lives. It's important to note that individuals with intellectual disabilities have diverse strengths, abilities, and potential, and the focus should be on providing appropriate support to help them thrive and participate fully in society.

The results depict that a total of 3,674 females are registered as mentally challenged constituting 6% of the total female population. Same as a total of 7,845 males are registered as mentally challenged constituting 5% of the total male population.

“Visually impaired" is a term used to describe individuals who experience some degree of vision loss or blindness. This condition can range from mild visual impairments, where individuals may have difficulty with certain tasks, to complete blindness, where there is a total lack of vision. It's important to note that this term is more inclusive and respectful than outdated terms like "blind" or "blindness," as it acknowledges a spectrum of visual abilities and challenges.

The results depict that a total of 6,558 females are registered as visually impaired constituting 11% of the total female population. Same as, a total of 17,649 males are registered as visually impaired constituting 11% of the total male population.

The results also show that some individuals with disabilities do not fall into any of the aforementioned categories and are registered as Null and Not defined. A total of 29 females are registered in the Null category, constituting 0.05% of the total female population. Similarly, a total of 113 males are registered in the Null category, constituting 0.07% of the total male population.

The results indicate that a total of 26 females are registered in the Not defined category, constituting 0.04% of the total female population. Likewise, a total of 87 males are registered in the Not defined category, constituting 0.06% of the total male population.

### 3.1.3 Gender and Category-wise Ratio of Disability in Punjab

Analyzing the category-wise ratio of persons with disabilities is essential for tailoring policies, allocating resources effectively, planning for accessibility, promoting inclusivity in education and employment, raising awareness, ensuring legal compliance, and monitoring progress in addressing the diverse needs of the disabled population.

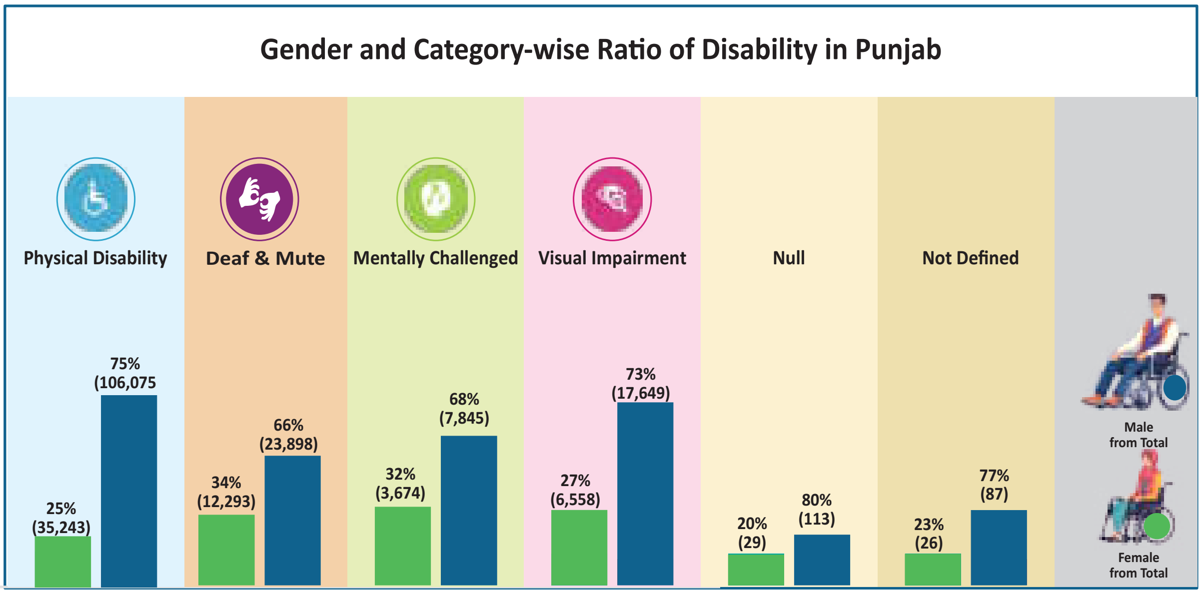



*Figure 3.1.3*

Figure 3.1.3 describes the gender and category-wise ratio of disability of registered PWDs of Punjab. The data reveals that a total of 141,318 individuals with disabilities (PWDs) are classified as physically impaired. Among them, 106,075 are male, constituting 75%, while 35,243 are female, making up 25% of the physically impaired population. This indicates a higher proportion of males in the physically impaired category compared to females.

The significant difference between the counts of males and females with physical disabilities indicates societal, cultural, or systemic obstacles that impede females from registering in disability assessment boards.

Moreover, the data depicts that a total of 36,191 individuals with disabilities (PWDs) are classified as deaf & mute. Among them, 23,898 are male, constituting 66%, while 12,293 are female, making up 34% of the deaf & mute population. This also indicates a higher proportion of males in the deaf & mute category compared to females. The difference between the deaf & mute counts of males and females with disabilities indicates societal, or systemic obstacles that impede females from registering in disability assessment boards.

While discussing the mentally challenged category, the data indicates that a total of 11,519 individuals with disabilities (PWDs) are classified as mentally challenged. Among them, 7,845 are male, constituting 68%, while 3,674 are female, making up 32% of the mentally challenged population. This indicates a higher proportion of males in the mentally challenged category compared to females the analysis also indicates, the number of females registered in the mentally challenged category is lower compared to males due to societal, cultural, or systemic obstacles that impede females from registering in disability assessment boards.

In the visually impaired category, according to the data, a total of 24,207 individuals are classified as visually impaired. Among them, 17,649 are male, constituting 73%, while 6,558 are female, making up 27% of the visually impaired population. This indicates a higher proportion of males in the visually impaired category compared to females however the analysis reveals that total registered females with disabilities in the visually impaired category are also lower compared to males in the disability assessment boards.

The analysis reveals that within the studied population, individuals are classified into two categories: "Null" and "Not Defined". In the "Null" category, comprising a total of 142 individuals, 29 are females and 113 are males. Interestingly, females constitute approximately 20% of this category, while males make up the predominant 80%.

On the other hand, the "Not Defined" category encompasses 113 individuals, with 26 females and 87 males. Females represent approximately 23% of this category, with males comprising the larger portion at 77%. These findings underline the presence of individuals whose disabilities do not align with the predefined categories, with both genders represented across these classifications.

### 3.1.4 Gender Wise Qualification of Persons with Disabilities

Literacy among people with disabilities is critical for a variety of reasons since it contributes greatly to both individual well-being and national progress. Here are some major aspects that emphasize the necessity of reading for people with disabilities:

- **Empowerment & Inclusion:**

Literacy empowers women with disabilities by providing them with the knowledge and skills needed to participate actively in society. It encourages their participation in educational, economic, and social activities.

- **Access to Opportunities:**

Literacy opens doors to various opportunities, including education, employment, and personal growth. It enables women with disabilities to achieve their goals and dreams while removing obstacles to access.

- **Independence and Self-advocacy:**

Literacy promotes freedom by allowing women with disabilities to access information, communicate effectively, and make educated decisions. It helps them advocate for their rights and needs.

- **Enhanced Quality of Life:**

Literacy improves the quality of life for women with disabilities. It enables them to access healthcare information, engage in recreational activities, and participate in community life, leading to overall well-being.

- **Social and Public Participation:**

Literacy enables more active engagement in civic and communal activities. women with disabilities who are literate can participate in social and political activities, contribute to community projects, and enjoy their civil rights.

- **Reduced Stigma and Stereotypes:**

Literacy addresses cultural preconceptions and misunderstandings regarding women with disabilities. women who are educated are better able to break down stereotypes, resulting in a more inclusive and understanding society.

- **Employability and Economic Contribution:**

Literate women with disabilities are more likely to access employment opportunities, contributing to economic productivity. This not only benefits individuals but also positively impacts the country's economy by tapping into a diverse workforce.

- **Educational Inclusivity:**

A focus on literacy promotes inclusive education, ensuring that persons with disabilities have equal access to educational resources and opportunities. This can lead to increased educational achievements and lifelong learning.

- **Legal and Human Rights:**

Literacy is essential for comprehending and implementing legal and human rights. women who are well-informed are better able to fight for their rights, confront prejudice, and actively engage in legal proceedings.

The gender-wise analysis of the qualifications of persons with disabilities in Punjab is crucial for assessing educational inclusivity, identifying barriers, formulating targeted policies, promoting gender equality, planning for workforce participation, guiding skill development programs, empowering individuals, addressing health and well-being, and fostering community awareness. This information is instrumental in creating a more inclusive and equitable society for disabled individuals of all genders.

Addressing the literacy requirements of women with disabilities entails building inclusive educational environments, providing accessible learning resources, and providing enough support services. It is a vital component in fostering a society that values diversity, inclusion, and the full participation of all its members.

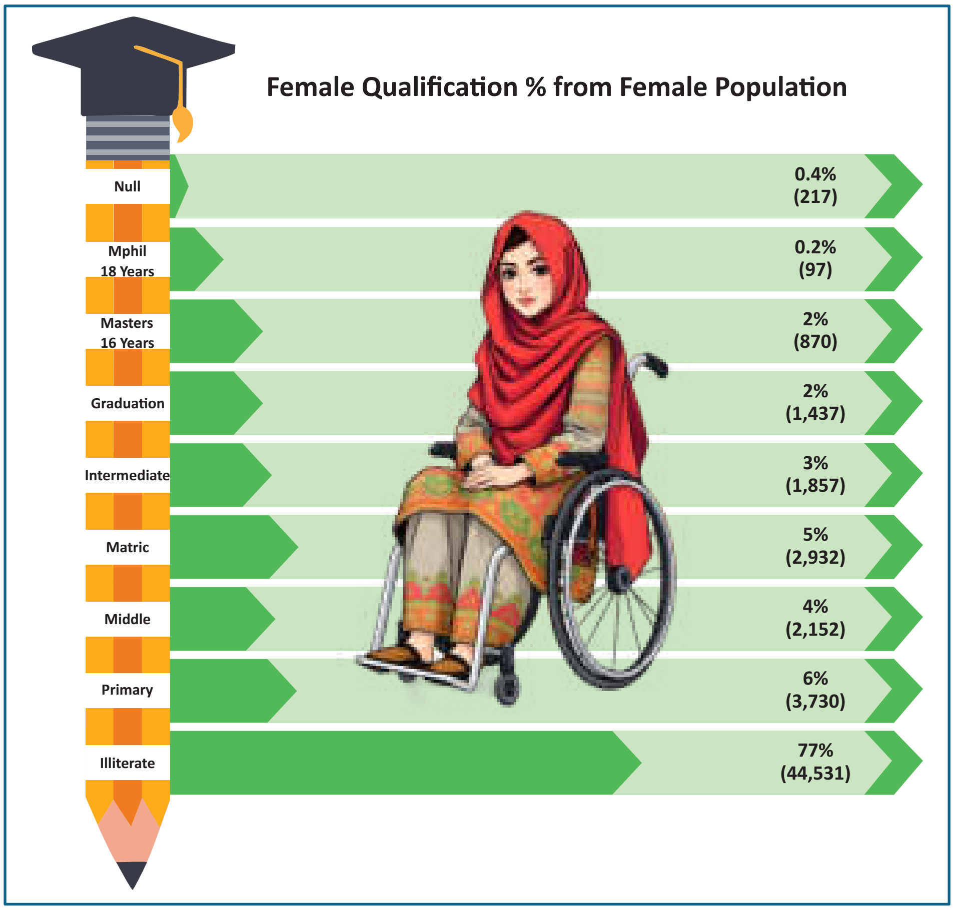



*Figure 3.1.4(a)*

Figure 3.1.4(a) indicates that the non-literacy rate in females is very high within the female population. The data reveals that 44,531 females are not literate accounting for 77%, 3,730 females with disabilities have primary level education accounting for 6%, 2,152 females with disabilities have middle-level education accounting for 4%, 2,932 females have matric level education consisting of 5%, 1,857 females have intermediate level consisting 3%, 1,437 females have graduation level accounting to 2%, 870 females have Masters (16 Years) education consisting of 2%, while 97 females with disabilities have MPhil (18 Years) education consisting of 0.2% of the total female population i.e. 57,823.

Similarly, Figure 3.1.4(b) depicts that the non-literacy rate in males is also very high within the male population. The data reveals that 109,878 males are not literate accounting for 71%, 11,493 males with disabilities have primary level education accounting for 7%, 12,366 males with disabilities have middle-level education accounting for 8%, 12,253 males have matric level education consisting of 8%, 4,747 males have intermediate level consisting 3%, 2,728 males have graduation level accounting to 2%, 1,464 males have Masters (16 Years) education consisting of 0.9%, while 223 males with disabilities have MPhil (18 Years) education consisting of 0.1% of the total male population i.e. 155,667.

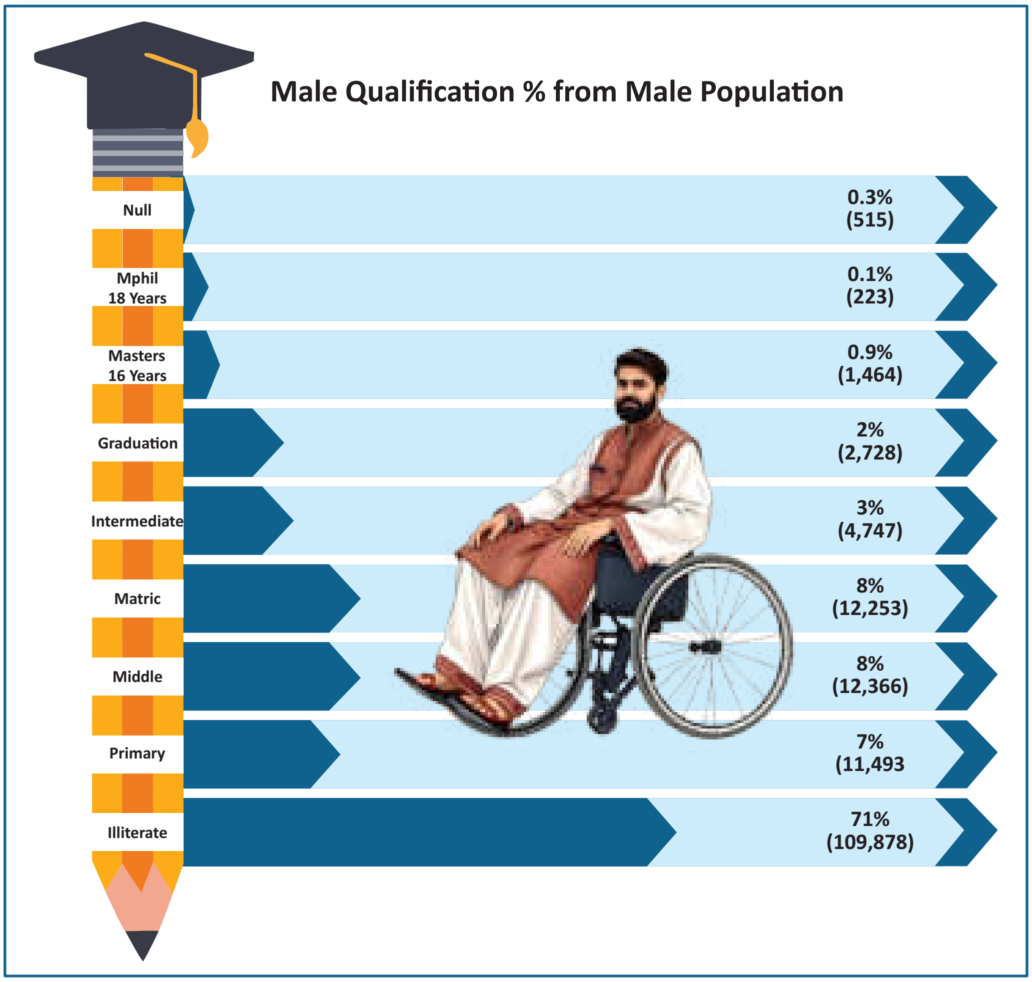



*Figure 3.1.4(b)*

Furthermore a category labeled as "Null" is also observed. Among the 213,490 individuals of total PWDs, 732 are classified under the "Null" category. Specifically, there are 217 females, constituting approximately 0.4% of the total population, and 515 males, accounting for about 0.3% of the total population.

## 3.2 Age Wise Distribution of Persons with Disabilities

### 3.2.1 Age Wise Distribution of Persons with Disabilities in Punjab

The age of persons with disabilities (PWDs) is an important factor in the analysis of various aspects related to their well-being, rights, and needs. Here are several reasons why age is considered an important factor:

- **Developmental Stages and Milestones:**

Different age groups experience varying developmental stages and milestones. Understanding the age of a person with disabilities helps in assessing their specific needs and challenges at different life stages. For example, the needs of a child with a disability will differ significantly from those of an older adult with the same disability.

- **Educational Needs:**

Age is a critical factor when considering the educational requirements of PWDs. Children with impairments may require specific educational interventions and support, while adults may require vocational training or aid in obtaining further education.

- **Healthcare & Medical Support:**

The healthcare needs of PWDs might differ depending on their age. Certain medical conditions and disabilities may become more prevalent or require different forms of management as individual's age. The availability of healthcare services and assistive devices may also differ based on age.

- **Social inclusion and participation:**

Socialization and inclusion are important aspects of people with disabilities' lives. Age impacts the type and intensity of social activities, community involvement, and peer relationships that are suitable and useful for PWDs.

- **Employment Opportunities:**

Age impacts vocational and job options for PWDs. Youngers may need assistance entering employment, but older may encounter particular issues linked to job modifications or moving to retirement.

To summarize, taking age into account when analyzing pesons with disabilities allows us to customize treatments, support services, and policies to their individual requirements at various phases of life. It enables a more nuanced understanding of the problems and possibilities experienced by people with disabilities, as well as a more inclusive and responsive approach to their well-being.

The age distribution of persons with disabilities in Punjab is critical for policy development, resource allocation, early intervention programs, educational planning, healthcare services, employment efforts, social inclusion programs, accessibility planning, advocacy, and long-term planning. This data gives a thorough understanding of the numerous needs and obstacles that people with disabilities confront throughout their lives at different ages.

**Note:** The age of registered persons with disabilities is calculated from their date of birth up to December 31, 2023. This cut-off date is selected to categorize PWDs into age brackets: (0-12), (13-20), (21-30), (31-40), (41-50), (51-60), (61-70), 70+ for data analysis purposes.

Figure 3.2.1(a-f) illustrates the age distribution of men and women with disabilities. The above mentioned ratio is derived using the respective total. Following that, the cumulative ratio is computed for each age group.

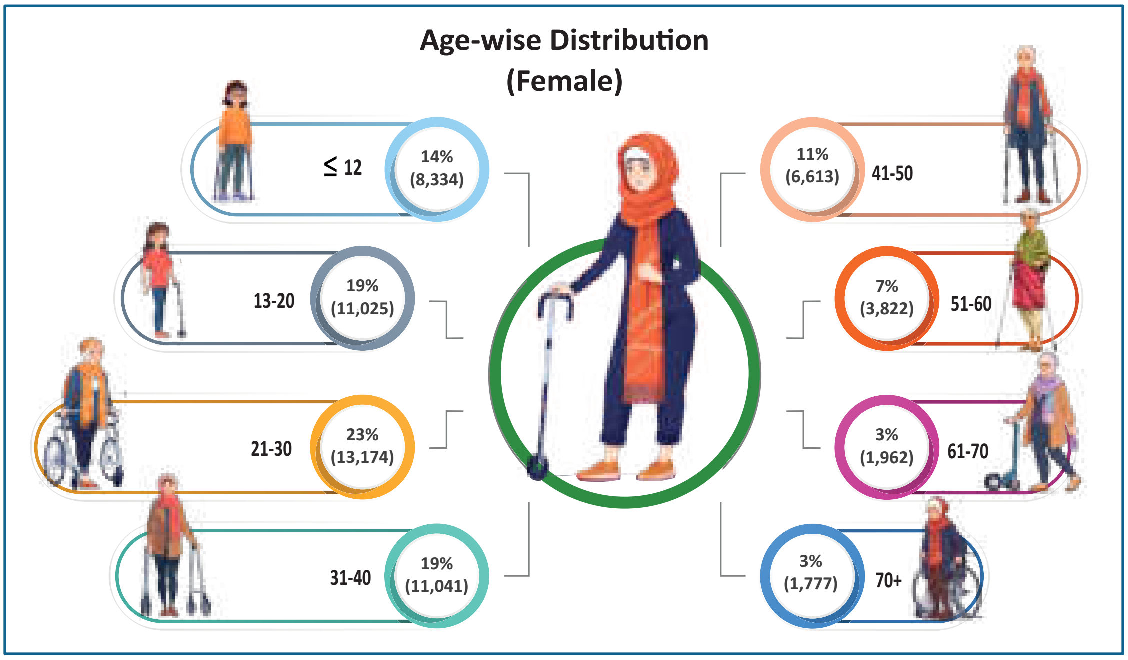



*Figure 3.2.1(a)*

The data showed that females had a considerable prevalence of impairment between the ages of 21-30, 13,174 accounting for 23% of the total population of females with disabilities i.e. 57,823.

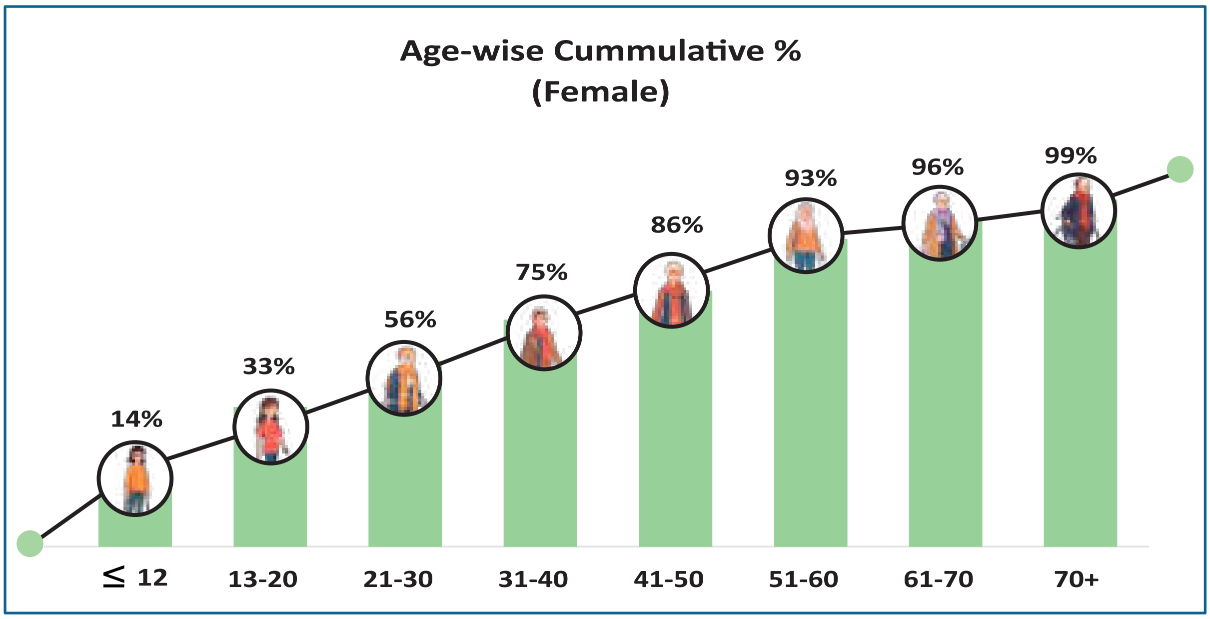



*Figure 3.2.1(b)*

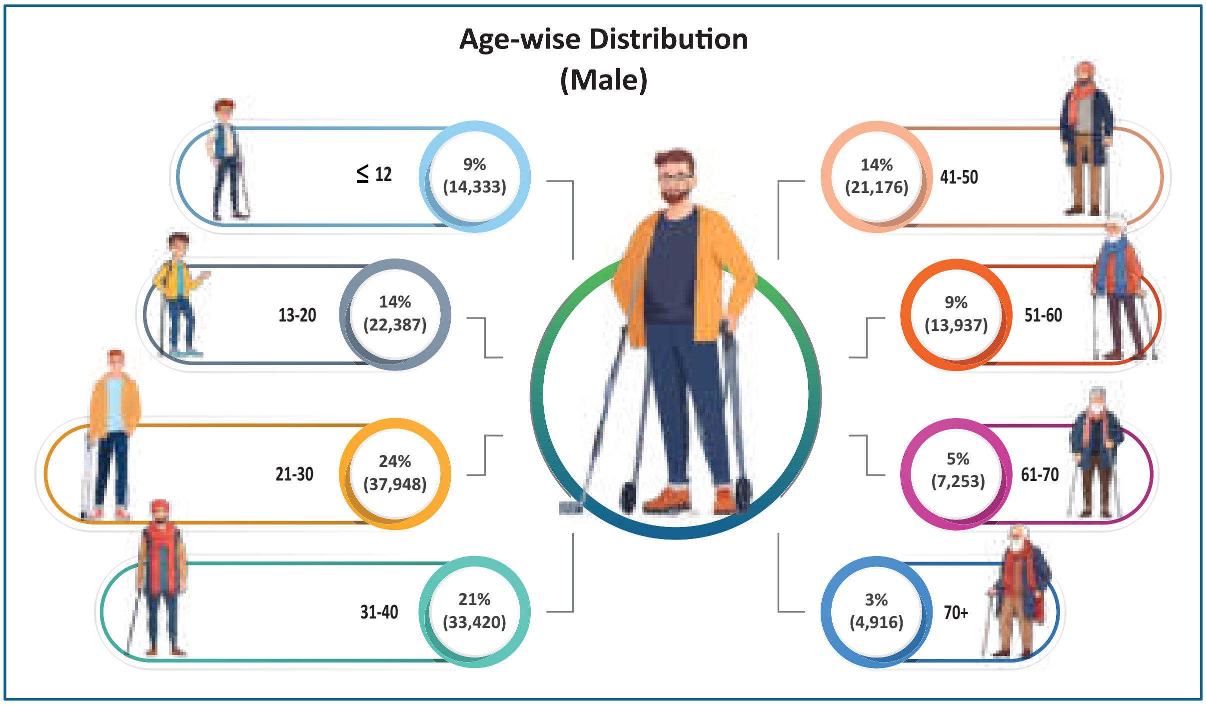



*Figure 3.2.1(c)*

The results revealed that males had a high ratio of disability between the ages of 21 and 30, accounting for 37, 948 (24%) of the entire population of males with disabilities i.e. 155,667.

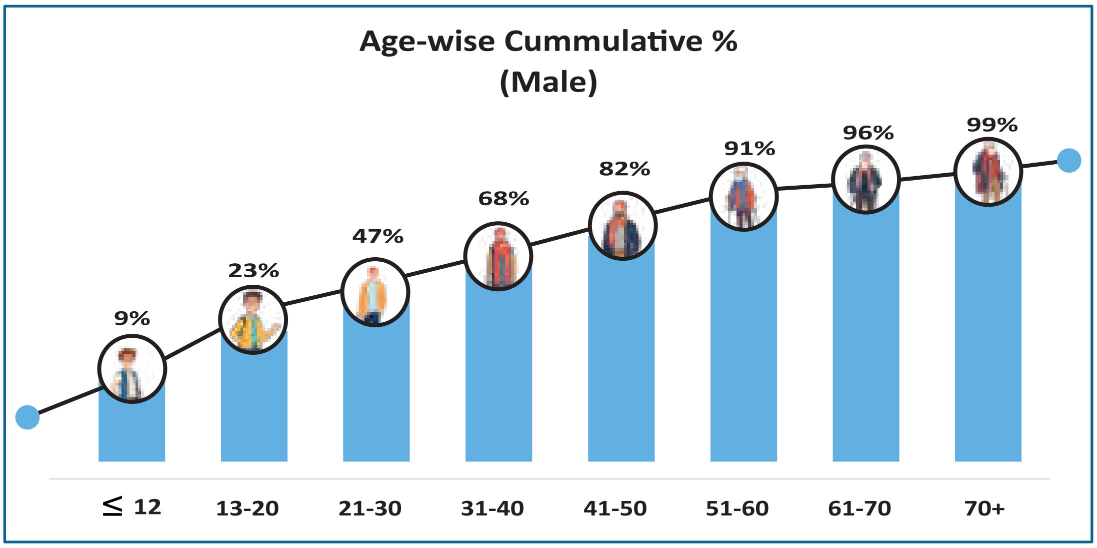



*Figure 3.2.1(d)*

Furthermore, the cumulative data of female and male reveals a significant disability ratio among those aged 31-40. It can be shown that the cumulative ratio in the indicated age group is 75% in females and 69% in males with disabilities.

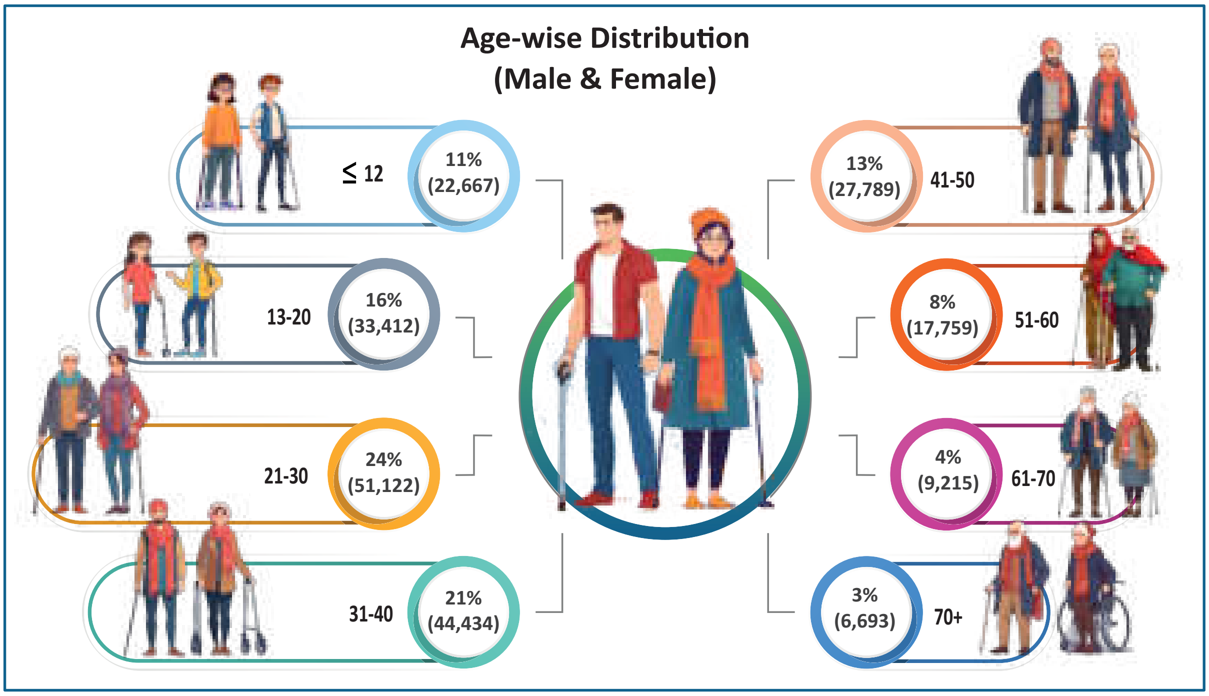



*Figure 3.2.1(e)*

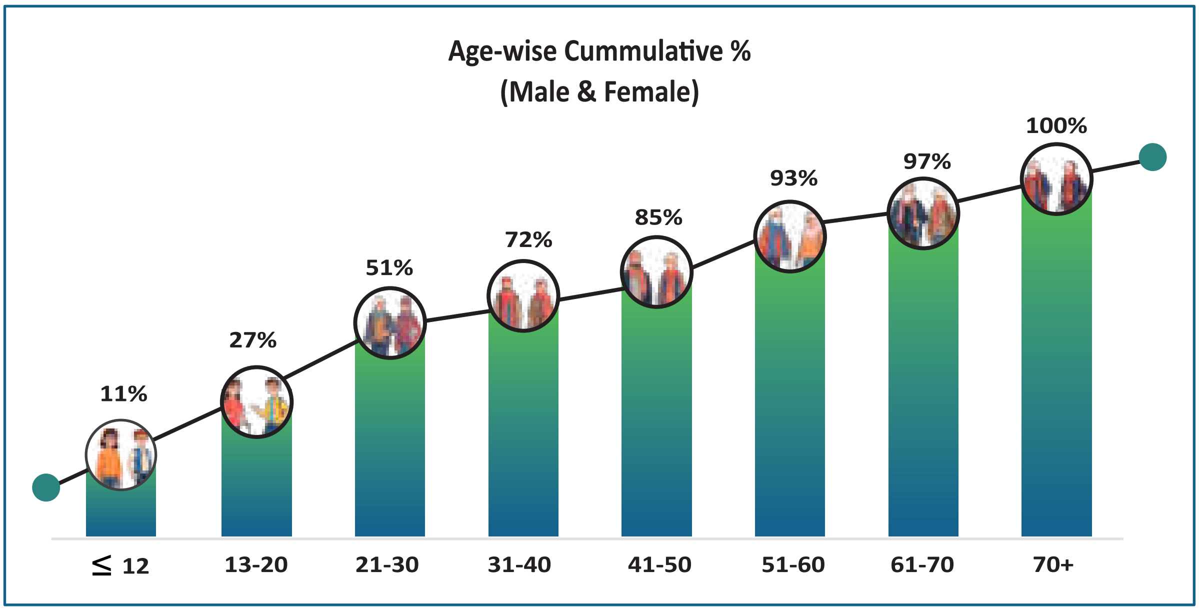



*Figure 3.2.1(f)*

The total cumulative analysis within the age bracket of 31-40 reveals that 72% of the total population has high ratio of disability. This indicates a significant concentration of individuals facing disabilities during their thirties.

Furthermore, the analysis delineates the gender distribution within the "Null" category among individuals with disabilities in Punjab, alongside the total count within this category. 399 individuals fall under the "Null" classification. Among them, 102 are females, representing approximately 0.2% of the total female population, while 297 are males, also constituting around 0.2% of the total male population. These findings underscore the presence of individuals whose disabilities do not fit neatly into predefined categories, regardless of gender.

## 3.2.2 Ratio of Person with Disabilities by Age Group (Male & Female)

Analyzing the ratio of persons with disabilities by age group and gender in Punjab is crucial for tailoring support services, implementing early interventions, planning inclusive education and healthcare services, enhancing employment opportunities, designing social inclusion programs, advocating for diverse needs, allocating resources effectively, formulating inclusive policies, and monitoring progress towards a more equitable and inclusive society for individuals with disabilities.

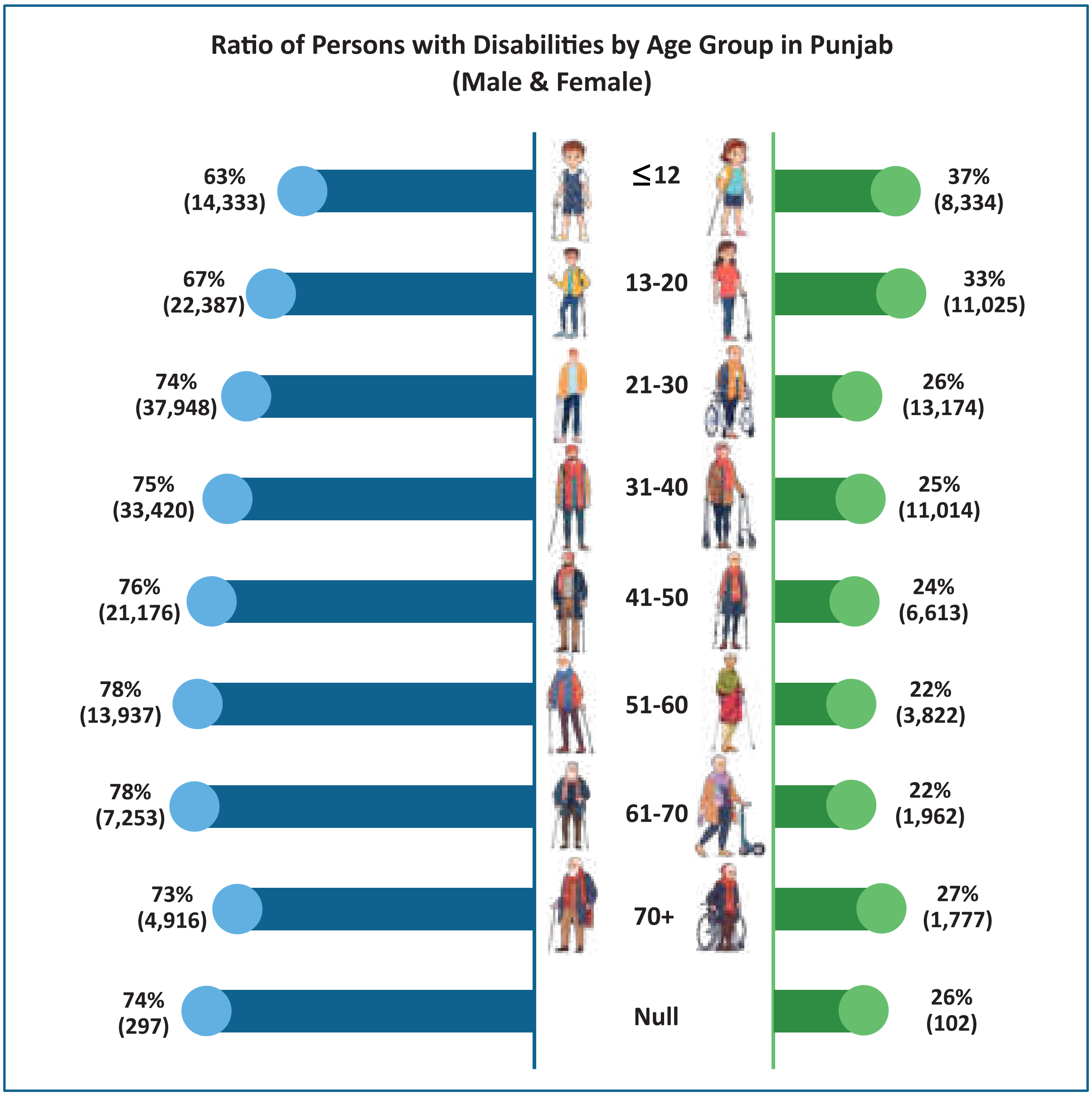



*Figure 3.2.2*

Figure 3.2.2 shows the disability ratios by age group. The calculation is carried out by dividing each individual age group population (male and female) by the respective age group total.

The results reveal that females with disabilities have a high ratio of disability in the age group 0-12 accounting for 37% of the respective total i.e. 22,667. Similarly, males with disabilities have a high ratio of disability in the age group 31-40 accounting for 75% of the respective total i.e. 44,434.

Moreover, when examining the gender-wise breakdown within the "Null" category among individuals with disabilities in Punjab. Among a total of 399 individuals classified under the "Null" category, 102 are females, representing approximately 26% of the Null category while 297 are males, also constituting around 74% of the respective category population. These findings suggest a similar prevalence of the "Null" category among both genders, with no significant difference in representation.

## 3.3.Literacy Rate of Persons with Disabilities

### 3.3.1 Age Wise Literacy Rate of Female

The age-specific literacy rate of PWDs in Punjab is critical for understanding educational trends, identifying early intervention needs, tailoring educational programs, formulating policies, allocating resources effectively, promoting lifelong learning, addressing educational barriers, promoting inclusive practices, and tracking progress toward inclusive and equitable education for PWDs. The data is analyzed separately for females and males with disabilities by considering the age and their literacy level. The individual detail is given as;

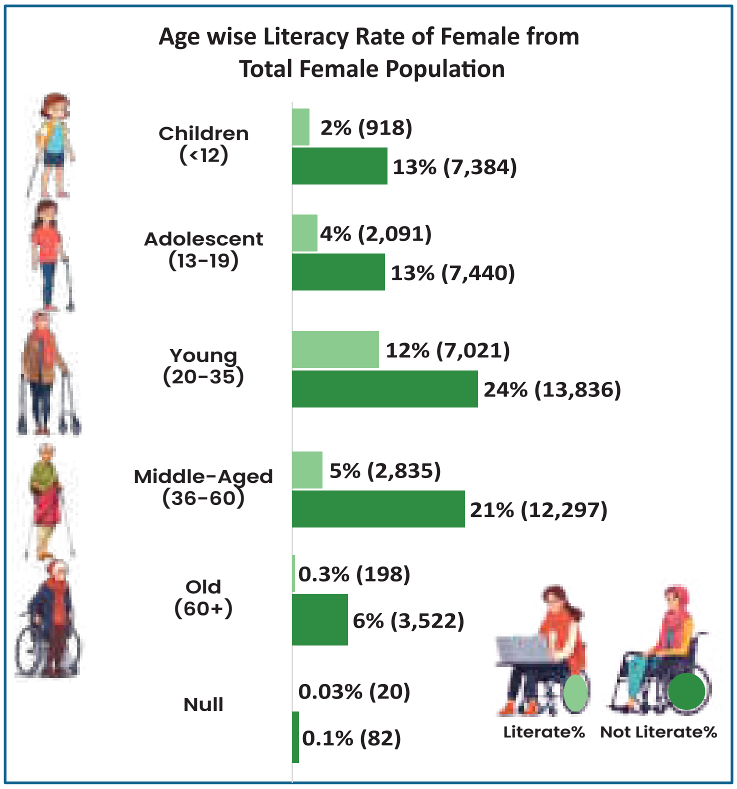



*Figure 3.3.1*

Figure 3.3.1 defines the age-wise literacy ratio of registered females with disabilities in Punjab.

The data reveals that a total of 8,302 females with disabilities are registered under the age of 0-≤12. Among them, 7,384 (13%) are illiterate females, while 918 (2%) are literate females from the total population of registered females with disabilities.

The data depicts that a total of 9,531 females with disabilities are registered under the age of 13-19. Among them, 7,440 (13%) are illiterate females, while 2,091 (4%) are literate females from the total population of registered females with disabilities.

Similarly, a total of 20,857 females with disabilities are registered under the age of 20-35. Among them, 13,836 (24%) are illiterate females, while 7,021 (12%) are literate females from the total population of registered females with disabilities.

The result reveals that a total of 15,132 females with disabilities are registered under the age of 36-60. Among them, 12,297 (21%) are illiterate females, while 2,835 (5%) are literate females from the total population of registered females with disabilities.

Moreover, the data reveals that a total of 3,720 females with disabilities are registered at the age of 60+. Among them, 3,522 (6%) are illiterate females, while 198 (0.3%) are literate females from the total population of registered females with disabilities.

Moreover, among a total of 102 female with disabilities classified under the "Null" category, 822 are not literate females, representing approximately 0.1% of the Null category while 20 are literate females, also constituting around 0.03% of the respective category population. These findings based on the null category from the age of female with disabilities. Furthermore, the qualification level of 179 females with disabilities is not defined in the data, thus they are excluded from this analysis.

## 3.3.2 Age-wise Literacy Rate of Male

Figure 3.3.2 defines the age-wise literacy ratio of registered males with disabilities in Punjab.

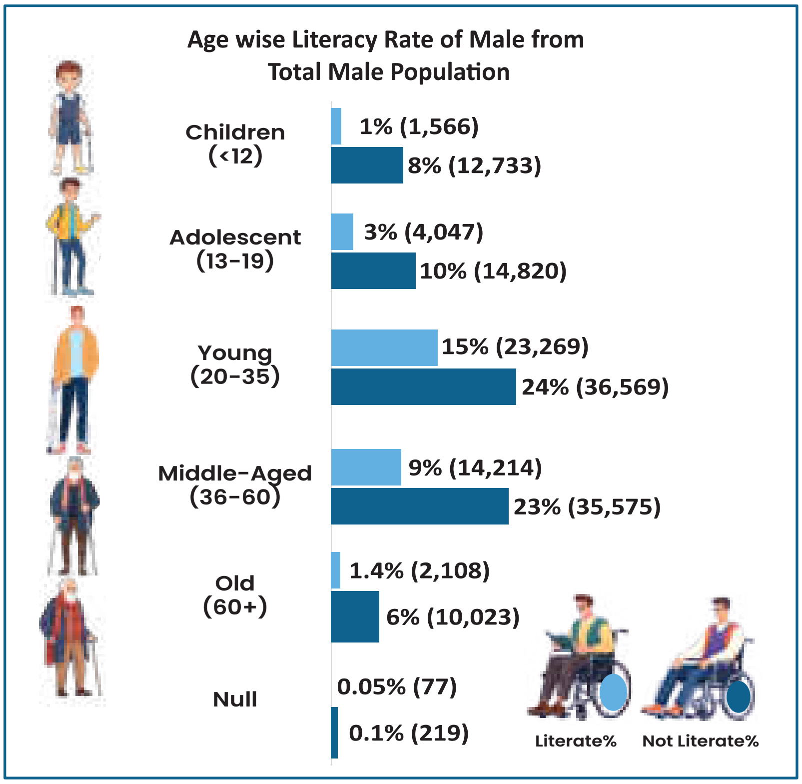



*Figure 3.3.2*

The data reveals that a total of 14,299 males with disabilities are registered under the age of 0-≤12. Among them, 12,733 (8%) are illiterate males, while 1,566 (1%) are literate males from the total population of registered males with disabilities.

The data depicts that a total of 18,867 males with disabilities are registered under the age of 13-19. Among them, 14,820 (10%) are illiterate males, while 4,047 (3%) are literate males from the total population of registered males with disabilities.

Similarly, a total of 59,838 males with disabilities are registered under the age of 20-35. Among them, 36,569 (24%) are illiterate males, while 23,269 (15%) are literate males from the total population of registered males with disabilities.

The result reveals that a total of 49,789 males with disabilities are registered under the age of 36-60. Among them, 35,575 (23%) are illiterate males, while 14,214 (9%) are literate males from the total population of registered males with disabilities.

Moreover, the data reveals that a total of 12,131 males with disabilities are registered at the age of 60+. Among them, 10,023 (6%) are illiterate males, while 2,108 (1.4%) are literate males from the total population of registered males with disabilities.

Moreover, among a total of 296 male with disabilities classified under the "Null" category, 219 are not literate males, representing approximately 0.1% of the Null category while 77 are literate males, also constituting around 0.05% of the respective category population. These findings suggest a similar prevalence of the "Null" category among both genders, with no significant difference in representation.

**Note,** the qualification level of 447 males with disabilities is not defined in the data, thus they are excluded from this analysis.

## 3.3.3 Literacy Rate of Persons with Disabilities by Age Group (Male & Female)

Figure 3.3.3 defines the age-wise literacy ratio of registered PWDs (female & male) in Punjab.

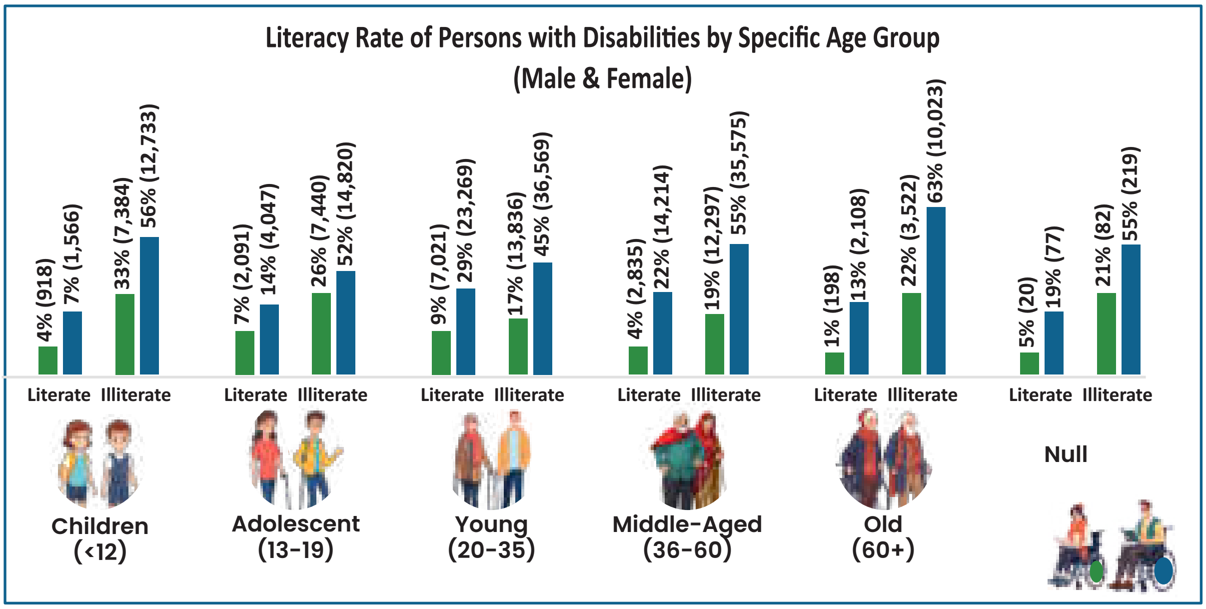



*Figure 3.3.3*

The data reveals that a total of 22,601 PWDs are registered under the age of 0-≤12. Among them, 12,733 (56%) are illiterate males, while 1,566 (7%) are literate males from total population of this age group. Similarly, 7,384 (33%) are illiterate females, while 918 (4%) are literate females from total population of this age group.

The data depicts that a total of 28,398 PWDs are registered under the age of 13-19. Among them, 14,820(52%) are illiterate males, while 4,047 (14%) are literate males from total population of this age group. Similarly, 7,440 (26%) are illiterate females, while 2,091 (7%) are literate females in the total population of this age group.

Similarly, a total of 80,695 PWDs are registered under the age of 20-35. Among them, 36,569 (45%) are illiterate males, while 23,269 (29%) are literate males from total population of this age group. Similarly, 13,836 (17%) are illiterate females, while 7,021 (9%) are literate females from total population of this age group.

The result reveals that a total of 64,921 PWDs are registered under the age of 36-60. Among them, 35,575 (55%) are illiterate males, while 14,214 (22%) are literate males from total population of this age group. Similarly, 12,297 (19%) are illiterate females, while 2,835 (4%) are literate females in the total population of this age group.

Moreover, the data reveals that a total of 15,851 PWDs are registered at the age of 60+. Among them, 10,023 (63%) are illiterate males, while 2,108 (13%) are literate males in the total population of this age group. Similarly, 3,522 (22%) are illiterate females, while 198 (1%) are literate females from the total population of this age group.

Moreover, the data reveals that a total of 398 PWDs are defined as "Null". Among them, 219 (55%) are illiterate males, while 77 (19%) are literate males in the total population of this age group. Similarly, 82 (21%) are illiterate females, while 20 (5%) are literate females from the total population of this age group.

**Note:** The qualification level of 179 females & 447 males with disabilities is not defined in the data, thus they are excluded from this analysis.

## 3.3.4 Ratio of Persons with Disabilities by Qualification Level

Analysing the ratio of persons with disabilities by qualification level in Punjab is crucial for assessing educational inclusivity, identifying disparities, formulating targeted policies, allocating resources effectively, enhancing employability, guiding skill development programs, promoting inclusive workforce planning, raising community awareness, and monitoring progress towards creating an inclusive and equitable society for individuals with disabilities.

Figure 3.3.4 defines the qualification-wise ratio of registered PWDs of Punjab.

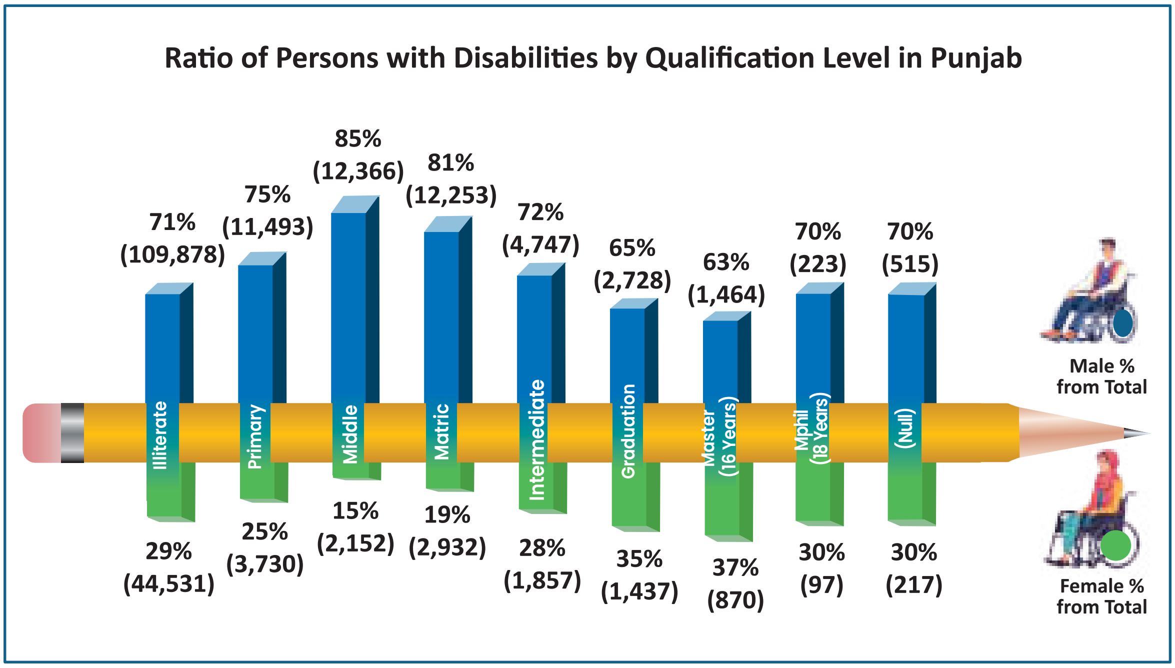



*Figure 3.3.4*

The data reveals that a total of 154,409 PWDs are illiterate. Among them, 109,878 are male with 71%, while 44,531 are female 29% from the illiterate population.

It can be seen that a total of 15,223 PWDs have primary education. Males with disabilities contribute 11,493 with 75% while females with disabilities contribute 3,730 with 25% from the primary pass population of PWDs.

Moreover, a total of 14,518 PWDs have middle education. Among them, 123,66 are males with 85% while females with disabilities contribute 2,152 with 15% of the middle pass population of PWDs.

Results show that a total of 15,185 PWDs have education till matric. Among them, 12,253 are males with 81% while females with disabilities contribute 2,932 with 19% from the matric pass population of PWDs.

Results indicate that a total of 6,604 PWDs have education till intermediate. Among them, 4,747 are males with 72% while females with disabilities contribute 1,857 with 28% from the intermediate pass population of PWDs.

The data indicates that a total of 4,165 PWDs have education till graduation. Among them, 2,728 are males with 65% while females with disabilities contribute 1,437 with 35% of the graduation pass population of PWDs.

The data indicates that a total of 2,334 PWDs have education till Masters (16 Years). Among them, 1,464 are male with 63% while females with disabilities contribute 870 with 37% from the master (16 years) pass population of PWDs.

Moreover, the data indicates that a total of 320 PWDs have education till MPhil (18 Years).

Among them, 223 are males with 70% while females with disabilities contribute 97 with 30% from MPhil (18 years) past population of PWDs.

Furthermore, the analysis delves into the "Null" category within the ratio of persons with disabilities by qualification level in Punjab, providing a gender-wise breakdown alongside the total count within this category. Among a total of 732 individuals in the "Null" category, females account for 217, constituting approximately 30% of the total, while males comprise 515 individuals, representing about 70% of the total. In the context provided, "Null" indicates that the qualification level is not specified or mentioned.

## 3.4 Fitness Status of Persons with Disabilities

### 3.4.1 Fitness Status of Persons with Disabilities (Male & Female)

The fitness level of PWDs is important in their analysis for a variety of reasons. Fitness evaluations include more than just physical health; they also consider total well-being and functioning ability. Fitness status gives information about people with disabilities general health and functioning capacities. It helps in understanding their physical capabilities and limits, which is critical for designing rehabilitation programs, medical treatments, and support services.

Fitness assessments help rehabilitation experts in designing individualized programs that meet particular requirements, increase mobility, and improve general physical function. Moreover, the type and level of disability can greatly influence the choice and customization of assistive devices. Assessing fitness helps in determining the most suitable devices and adaptations to enhance independence and mobility. Fitness is directly connected to a person's quality of life. Improving fitness can have a beneficial impact on everyday activities, increase independence, and contribute to a sense of well-being for PWDs.

Analyzing the fitness status of PWDs in Punjab, taking gender into account, is critical for promoting health and well-being, tailoring healthcare services, implementing preventive measures, designing inclusive fitness programs, planning rehabilitation, encouraging active lifestyles, providing sports and recreational opportunities, fostering empowerment and inclusion, raising community awareness, and informing advocacy and policy development efforts. Subsequently, considering the fitness status of PWDs is essential for holistic and individualized care. It informs the development of targeted interventions, promotes inclusivity in various aspects of life, and contributes to the overall well-being of individuals with disabilities.

Figure 3.4.1 illustrates the fitness status of men and women with disabilities. The abovementioned ratio is derived from individual's total of PWDs.

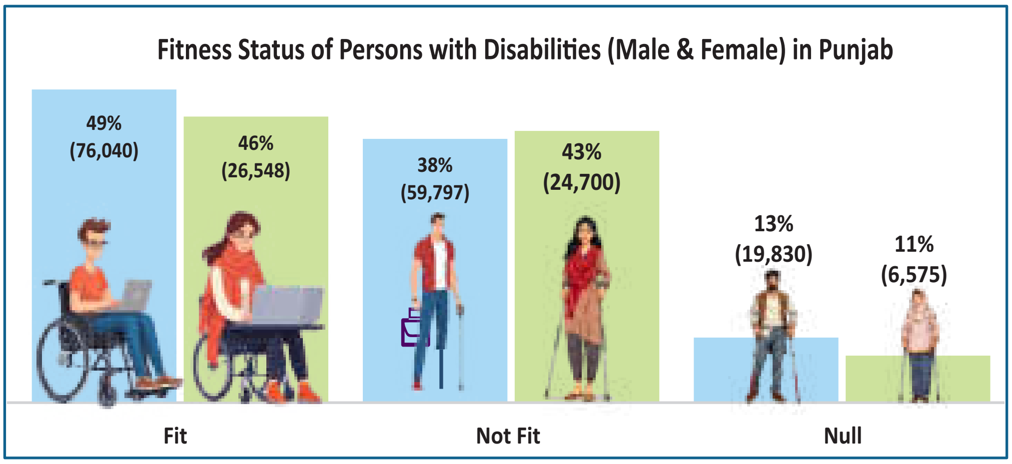



*Figure 3.4.1*

It is noted that females with disabilities have a significant ratio of Fit, accounting for 26,548 (46%) of the overall population of females i.e. 57,823. Similarly, male with disabilities have a significant ratio of Fit, accounting for 76,040 (49%) of the overall population of males i.e. 155,667.

The analysis focuses on the "Null" category within the fitness status of persons with disabilities in Punjab, providing a gender-wise breakdown alongside the total count within this category. Among a total of 26,405 individuals, females constitute 19,830, representing approximately 13% of the total male population, while males comprise 6,575 individuals, accounting for about 11% of the total female population. These figures indicate a higher representation of females compared to males within the "Null" category, despite differences in the overall prevalence rates between genders. In this context, the "Null" category signifies that the fitness status of individuals with disabilities is not confirmed or specified.

## 3.4.2Ratio of Fitness Status Persons with Disabilities by Each Category (Male & Female)

It is critical to examine the fitness ratios of PWDs within fitness categories in order to determine their fitness state and execute relevant exercises.

Figure 3.4.2 shows the fitness status by each category. The calculation is carried out by dividing each individual category (male and female) by the respective group total

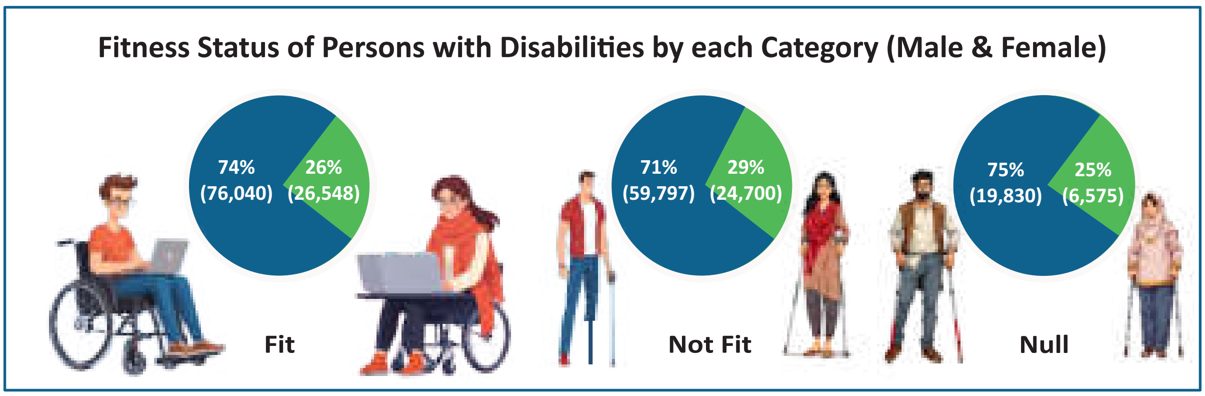
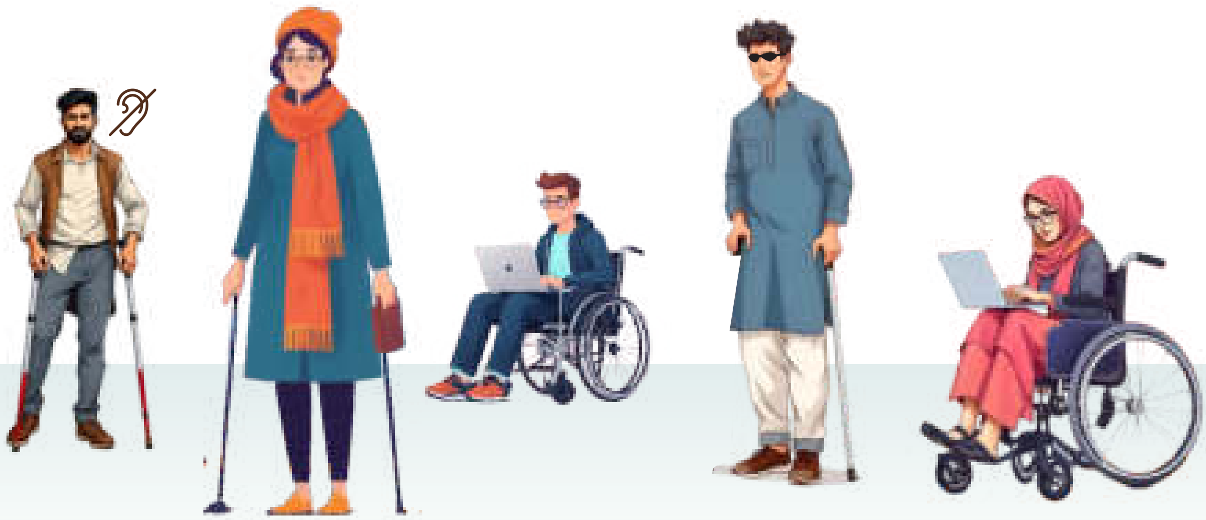



*Figure 3.4.2*

The results show that males with disabilities have a high ratio of fit to work i.e. 76040 74% while females with disabilities have 26% (26548). Moreover, males have a high ratio of not fit to work i.e. 71% (59797) while females have 29% (24700) of the total of respective category. In conclusion, females with disabilities have a high ratio of not fit to work i.e. (24700) 29% within the female category.

The analysis examines the 'Null' category within the ratio of fitness status of persons with disabilities for each category, offering a gender-wise breakdown alongside the total count within this category. Among a total of 26,405 individuals, males account for 19,830 individuals, constituting approximately 75% of respective Null category, while females comprise 6,575 individuals, representing about 25% of the respective NULL category. It's noteworthy that the "Null" category denotes that the fitness status of these individuals is not confirmed or specified.

**Note:** It is pertinent to mention here that a total of 26,405 individuals with disabilities (6,575 females with disabilities and 19,830 males with disabilities) are not included in the analysis of the Age-wise Literacy Rate of Fit & Not Fit to work PWDs. The reason for the exclusion of such a significant portion is that their status is not defined in the data sheet.



# Category Wise Fit-to-Work and Not Fit-to-Work PWD's

**3.5. Fit-to-Work Persons with Disabilities (PWD's)**

**3.6. Not-Fit-to-Work Persons with Disabilities (PWD's)**

## 3.5 Fit to Work Persons with Disabilities (Male & Female)

### 3.5.1. Age Wise Literacy Rate of Fit to Work Female with Disabilities in Punjab

Examining the literacy rates specific to different age groups among working-age women with disabilities is essential for comprehending various facets of their lives. This analysis can serve as a foundation for shaping policies and initiatives dedicated to fostering inclusion, empowerment, and equal opportunities. Literacy rates offer valuable perspectives into the historical accessibility of education for this demographic, revealing variations across distinct age categories. Grasping literacy levels is instrumental in pinpointing disparities in educational opportunities, and guiding the development of strategies to enhance access to high-quality education and training programs.

Literacy is a key factor in empowering individuals to make informed decisions about their lives. Higher literacy rates among fit-to-work females with disabilities can contribute to increased autonomy, self-advocacy, and decision-making power, leading to improved overall well-being. Literacy rates are crucial for advocacy activities aimed at influencing legislation that protects the rights and well-being of fit-for-work females with disabilities. This research supports the case for inclusive educational policy, job accommodations, and other support services.

The literacy rate among fit-to-work females in Punjab is critical for fostering employment, workforce engagement, economic empowerment, equality, inclusion, information access, health literacy, educational planning, empowerment, and effective policy-making. Monitoring and boosting literacy rates among fit-for-work females helps to create a more inclusive, empowered, and equitable society for PWDs in Punjab. In the end, examining the age-specific literacy rate of fit-to-work females with impairments gives useful information about their educational, economic, and social experiences. This data is critical for developing inclusive policies, programs, and support services that meet the specific needs and problems experienced by this demographic group.

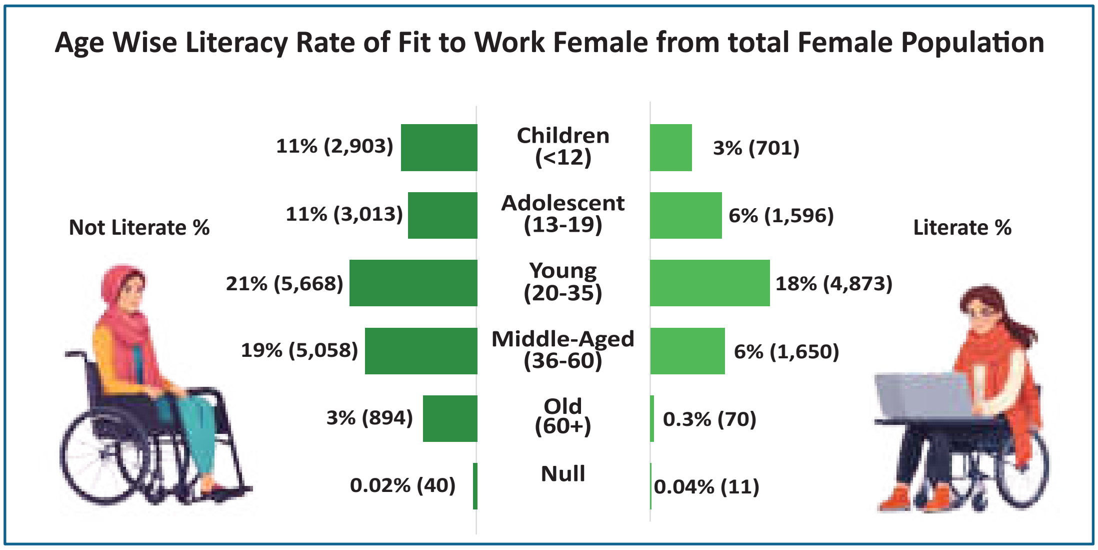



*Figure 3.5.1*

Figure 3.5.1 shows the literacy rate of fit-to-work females considering the age groups. It is noted that the literacy rate of fit-to-work females is high in the age group of 20-35, accounting for 18% (4,873) while the non-literacy rate of fit-to-work females is high in the age group of 20-35, accounting for 21% (5,668) from total population of fit to work females i.e. 26,477.

The data reveals that the literacy rate of fit-to-work females in the age group of 0-12 is 3% (701), while the non-literacy rate of fit-to-work females in the same age group is 11% (2,903). Similarly, the literacy rate of fit-to-work females in the age group of 13-19 is 6% (1,596), while the non-literacy rate in this age group is 11% (3,013). Furthermore, the literacy rate of fit-to-work females in the age group of 36-60 is 6% (1,650), while the non-literacy rate in this age group is 19% (5,058).

Moreover, among a total of 51 female with disabilities classified under the "Null" category, 40 are not literate females, representing approximately 0.2% of the Null category while 11 are literate females, also constituting around 0.04% of the respective category population. These findings based on the "Null" category of age.

**Note:** The qualification level of 71 females with disabilities is not defined in the data, thus they are excluded from this analysis.

## 3.5.2. Age Wise Literacy Rate of Fit to Work Male with Disabilities in Punjab

Analyzing the age-specific literacy rate of fit-to-work males with disabilities is critical for a variety of reasons, including insights into their educational attainment, employability, and overall health

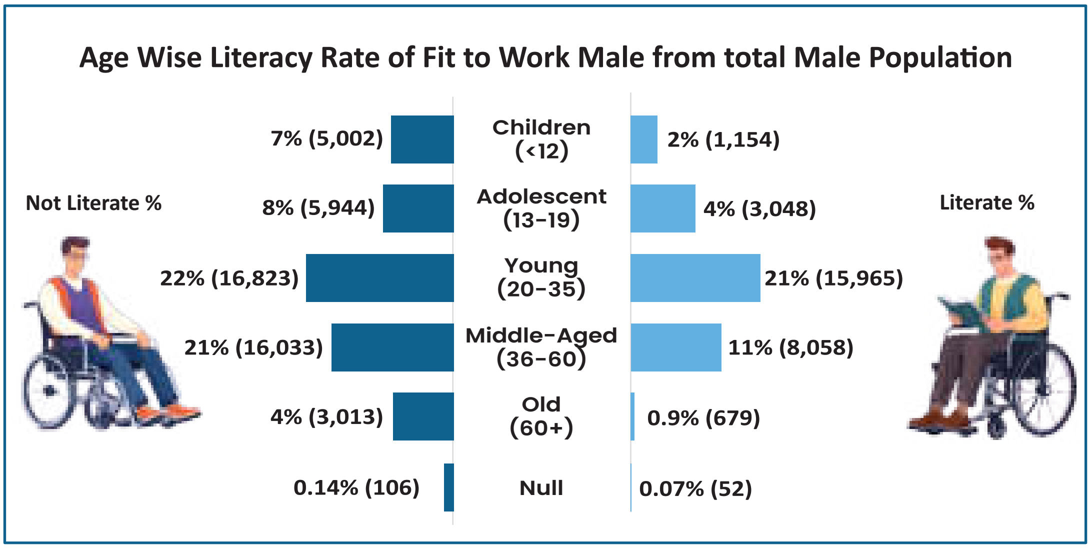



*Figure 3.5.2*

Figure 3.5.2 shows the literacy rate of fit-to-work males considering the age groups. It is noted that the literacy rate of fit-to-work males is high in the age group of 20-35, accounting for 21% (15,965) while the non-literacy rate is high in the same age group accounting for 22% (16,823) of the total population of fit to work males i.e. 75,877.

The data reveals that the literacy rate of fit-to-work males in the age group of 0-12 is 2% (1,154), while the non-literacy rate in the same age group is 7% (5,002). Similarly, the literacy rate of fit-to-work males in the age group of 13-19 is 4% (3,048), while the non-literacy rate in this age group is 8% (5,944). Furthermore, the literacy rate of fit-to-work males in the age group of 36-60 is 11% (8,058), while the non-literacy rate in this age group is 21% (16,033).

Moreover, among a total of 158 male with disabilities classified under the "Null" category, 106 are not literate males, representing approximately 0.14% of the Null category while 52 are literate males, also constituting around 0.07% of the respective category population. These findings based on the "Null" category of age.

**Note:** The qualification level of 163 males with disabilities is not defined in the data, thus they are excluded from this analysis.

## 3.5.3 Age Wise Literacy Rate of Fit to Work PWDs (Male & Female)

The age-specific literacy rate of fit-to-work Persons with Disabilities (PWDs) is significant in their analysis for multiple reasons, including insights into different elements of education, employability, and overall empowerment. Literacy is an essential skill that greatly impacts employment. Understanding the literacy rates of fit-for-work PWDs in various age groups aids in determining their prospective contributions to the workforce. It informs policies and initiatives designed to improve work possibilities for people with impairments.

Literacy rates reflect the degree of education and training acquired by PWDs. Analyzing literacy rates across age groups reveals disparities in educational possibilities and the need for specific actions to promote access to education and skill development programs. Moreover, by examining literacy rates by age, it becomes possible to identify age-specific barriers to education for PWDs. This information is essential for designing inclusive educational policies and addressing challenges that may be more prevalent in certain age groups.

Literacy rates serve as a key indicator for advocacy efforts and policy development. By highlighting literacy disparities across age groups, advocates and policymakers can work towards creating targeted initiatives to improve educational outcomes and employment prospects for PWDs.

The analysis related to the literacy rate of fit-to-work PWDs in Punjab, disaggregated by gender, is essential for promoting employability, guiding workforce planning, tailoring education programs, ensuring equal opportunities, facilitating access to information, supporting entrepreneurship, advocating for inclusive education, informing policy formulation, promoting social inclusion, and monitoring progress towards creating an inclusive and literate society for individuals with disabilities.

Age-wise literacy rates are an important measure for advocacy and policy formulation. By emphasizing literacy inequalities across age groups, campaigners and politicians may work toward implementing targeted measures to enhance educational achievements and career opportunities for people with disabilities.

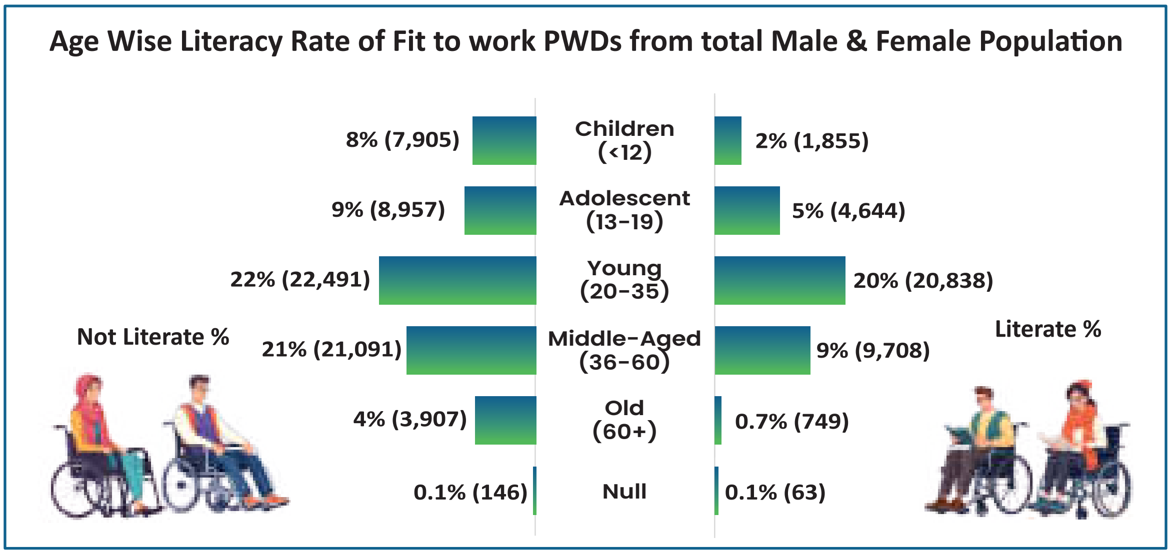



*Figure 3.5.3*

Figure 3.5.3 shows the literacy rate of fit-to-work PWDs in Punjab considering the age groups. It is noted that the literacy rate of fit-to-work PWDs is high in the age group of 20-35, accounting for 20% (20,838) while the non-literacy rate of fit-to-work PWDs is high in the same age group, accounting for 22% (22,491) from total population of fit to work PWDs i.e. 102,354.

The data reveals that the literacy rate of fit-to-work PWDs in the age group of 0-12 is 2% (1,855), while the non-literacy rate of fit-to-work PWDs is 8% (7,905). Similarly, the literacy rate of fit-to-work PWDs in the age group of 13-19 is 5% (4,644), while the non-literacy rate of fit-to-work PWDs in this age group is 9% (8,957). Furthermore, the literacy rate of fit-to-work PWDs in the age group of 36-60 is 9% (9,708), while the non-literacy rate of fit-to-work PWDs in this age group is 21% (21,091).

Moreover, among a total of 209 PWDs with disabilities classified under the "Null" category, 146 are not literate & fit to work PWDs, representing approximately 0.1% of the Null category while 63 are literate & fit to work PWDs, also constituting around 0.1% of the respective category population. These findings suggest a similar prevalence of the "Null" category among both genders, with no significant difference in representation.

It is important to mention here that the fitness status of total 234 persons with disabilities (females with disabilities = 71 & males with disabilities = 163) is not defined in the data set of Social Welfare & bait-ul-Mal Department, thus they are excluded from this analysis.

### 3.5.4 Literacy Rate of Fit to Work Female by Age-Group

It is critical to estimate the ratio of literate and fit-to-work females among age groups in order to establish which age group of females has a high literacy ratio and is fit to work.

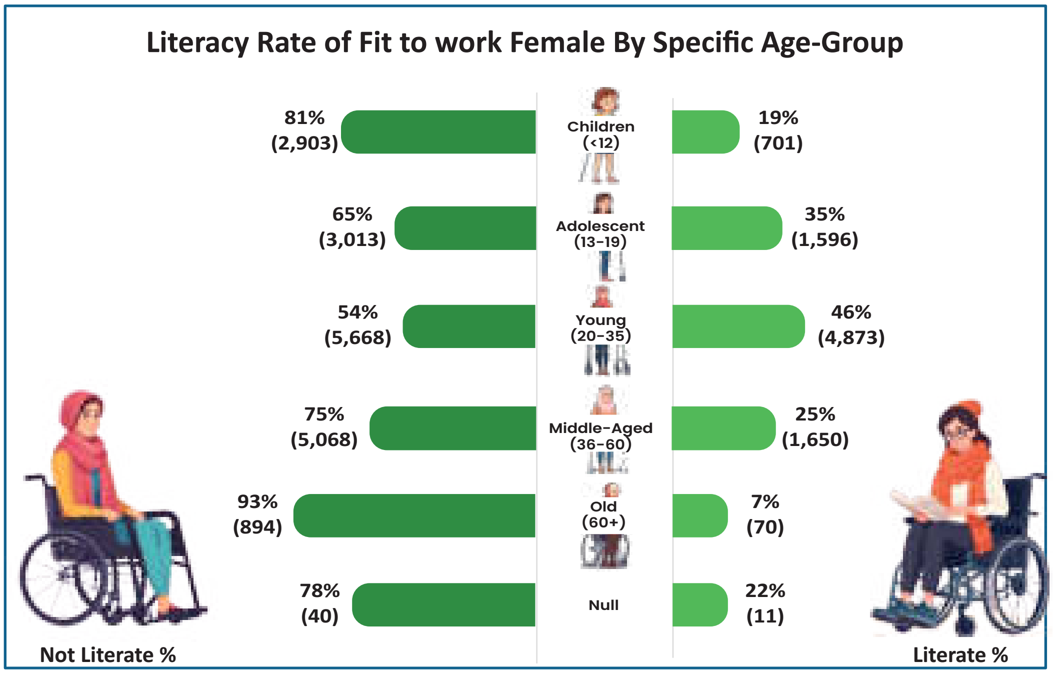



*Figure 3.5.4*

Figure 3.5.4 shows the age-wise literacy rate of fit-to-work females considering the respective age groups total. It is noted that the literacy rate of fit-to-work females is high in the age group of 20-35, accounting for 46% (4,873) of the respective age group total i.e. 10,541. Similarly, the ratio of non-literate & fit-to-work to work females is high at the age group of 0-12, accounting for 81% (2,903) of the respective age group total i.e. 3,604.

### 3.5.5 Literacy Rate of Fit to Work Male by Age-Group

It is critical to calculate the ratio of literate and fit-to-work males across age groups in order to establish which age group of guys has a high literacy ratio and is fit to work.

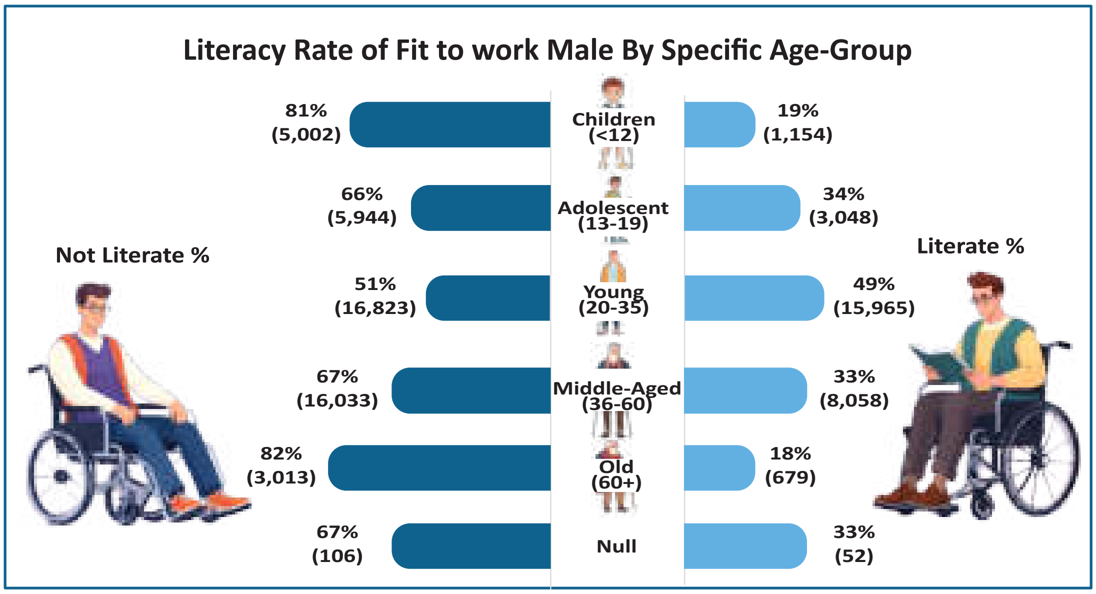



*Figure 3.5.5*

Figure 3.5.5 shows the age-wise literacy rate of fit-to-work males considering the respective age groups total. It is noted that the literacy rate of fit-to-work males is high in the age group of 20-35, accounting for 49% (15,965) of the respective age group total i.e. 32,788. Similarly, the ratio of non-literate & fit males is high in the age group of 0-12, accounting for 81% (5,002) of the respective age group total i.e. 6,156.

Moreover, there are 52 literate males and 106 illiterate males in the 'Null' category. These findings are based on an undefined age group. The 'Null' category represents those whose qualification status is not defined in the dataset.

### 3.5.6 Literacy Rate of Fit to Work PWDs by Age Group (Male & Female)

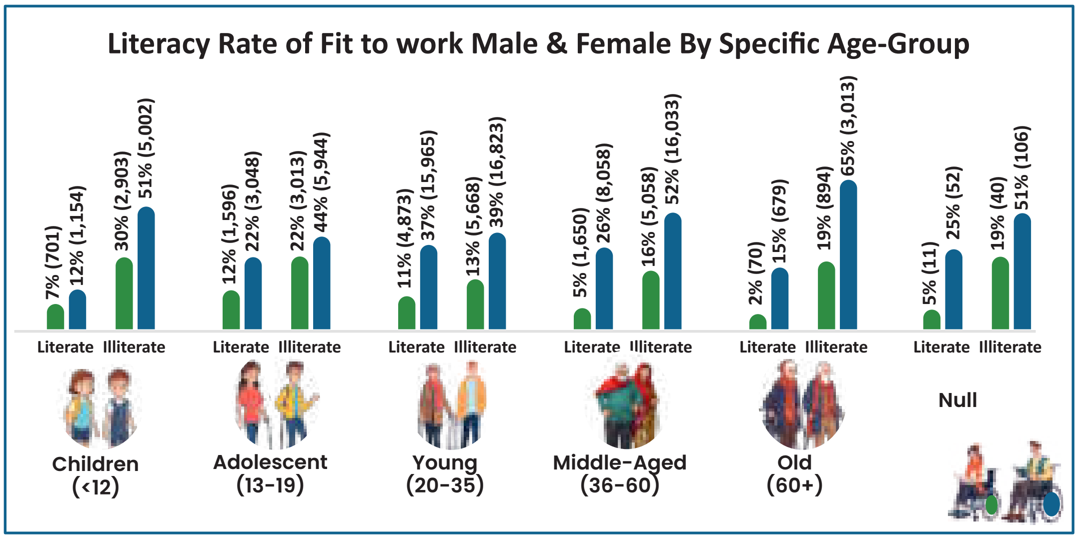



*Figure 3.5.6*

Figure 3.5.6 defines the age-wise literacy ratio of fit to work PWDs (female & male) of Punjab.

The data reveals that a total of 9760 PWDs are registered under the age of 0-≤12. Among them, 5002 (51%) are illiterate males, while 1154 (12%) are literate & fit to work males from total population of this age group. Similarly, 2903 (30%) are illiterate females, while 701 (7%) are literate & fit to work females from total population of this age group.

The data depicts that a total of 13601 PWDs are registered under the age of 13-19. Among them, 5944 (44%) are illiterate males, while 3048 (22%) are literate & fit to work males from total population of this age group. Similarly, 3013 (22%) are illiterate females, while 1596 (12%) are literate & fit to work females from total population of this age group.

Similarly, a total of 43329 PWDs are registered under the age of 20-35. Among them, 16823 (39%) are illiterate males, while 15965 (37%) are literate & fit to work males from total population of this age group. Similarly, 5668 (13%) are illiterate females, while 4873 (11%) are literate & fit to work females from total population of this age group.

The result reveals that a total of 30799 PWDs are registered under the age of 36-60. Among them, 16033 (52%) are illiterate males, while 8058 (26%) are literate & fit to work males from total population of this age group. Similarly, 5058 (16%) are illiterate females, while 1650 (5%) are literate females from total population of this age group.

Moreover, the data reveals that a total of 4656 PWDs are registered at the age of 60+. Among them, 3013 (65%) are illiterate males, while 679 (15%) are literate & fit to work males from total population of this age group. Similarly, 894 (19%) are illiterate & fit to work females, while 70 (2%) are literate females from total population of this age group.

The data reveals that a total of 209 PWDs are registered as “Null”. Among them, 106 (51%) are illiterate males, while 52 (25%) are literate & not fit to work males from total population of this age group. Similarly, 40 (19%) are illiterate & not fit to work females, while 11 (5%) are literate females from total population of this age group.

It is important to mention here that the age wise literacy rate of 209 fit-to-work persons with disabilities (females with disabilities = 51 & males with disabilities = 158) is not defined in the data set of Social Welfare & bait-ul-Mal Department, thus they are excluded from this analysis.

### 3.5.7 Categories Of Literate & Fit To Work Pwds With Type Of Disabilities & Cause (male & Female)

The assessment of Persons with Disabilities (PWDs) who possess literacy skills and are considered competent for employment is important in identifying the various disability kinds and investigating the variables influencing the disability status of literate PWDs. This inquiry focuses on four types of disabilities: physical impairments, hearing and speech impairments, visual impairments, and cognitive problems.

A total of 37,416 PWDs are listed as literate & fit to work. Among them, 8,500 are females and 28,916 are males registered as literate & fit to work.

The analysis reveals that at the primary level, 9,036 PWDs are listed as literate and fit to work. There are 2,060 females and 6,976 males with disabilities who are literate & fit for work. At this level of education, the total number of Physically Impaired (Neuromuscular) PWDs is 528, consisting of 101 females and 427 males. The total Physically Impaired (Musculoskeletal) PWDs are 3,546, consisting of 430 females and 3,116 males. The total of Hearing Impaired (Deaf & mute) PWDs is 4,092 consisting of 1,348 females and 2,744 males. Moreover, the total number of visually impaired PWDs is 681, consisting of 139 females and 542 males. The total of intellectually disabled PWDs is 189, consisting of 42 females and 147 males.

Similarly, at the middle level, 9,229 PWDs are listed as literate & fit to work. There are 1,399 females and 7,830 males with disabilities who are literate and fit for work. At this level of education, the total number of Physically Impaired (Neuromuscular) PWDs is 670, consisting of 101 females and 569 males. The total Physically Impaired (Musculoskeletal) PWDs are 6,026, consisting of 607 females and 5,419 males. The total of Hearing Impaired (Deaf & mute) PWDs is 1,727 consisting of 557 females and 1,170 males. Moreover, the total number of visually impaired PWDs is 758, consisting of 130 females and 628 males. The total of intellectually disabled PWDs is 48, consisting of 4 females and 44 males.

Results revealed that at the matric level, 9,996 PWDs are listed as literate and fit to work. There are 2,059 females and 7,937 males with disabilities who are literate & fit for work. At this level of education, the total number of Physically Impaired (Neuromuscular) PWDs is 700, consisting of 167 females and 533 males. The total Physically Impaired (Musculoskeletal) PWDs are 6,803, consisting of 1,076 females and 5,727 males. The total of Hearing Impaired (Deaf & mute) PWDs is 1,731 consisting of 671 females and 1,060 males. Moreover, the total number of visually impaired PWDs is 727, consisting of 136 females and 591 males. The total of intellectually disabled PWDs is 35, consisting of 9 females and 26 males.

Moreover, at the intermediate level, 4,518 PWDs are listed as literate and fit to work. There are 1,316 females and 3,202 males with disabilities who are literate & fit for work. At this level of education, the total number of Physically Impaired (Neuromuscular) PWDs is 354, consisting of 119 females and 235 males. The total Physically Impaired (Musculoskeletal) PWDs are 3,245, consisting of 908 females and 2,337 males. The total of Hearing Impaired (Deaf & mute) PWDs is 487 consisting of 187 females and 300 males. Moreover, the total number of visually impaired PWDs is 419, consisting of 97 females and 322 males. While the total of intellectually disabled PWDs is 13, consisting of 5 females and 8 males.

At the graduation level, 2,796 PWDs are listed as literate and fit to work. There are 969 females and 1,827 males with disabilities who are literate & fit for work. At this level of education, the total number of Physically Impaired (Neuromuscular) PWDs is 201, consisting of 65 females and 136 males. The total Physically Impaired (Musculoskeletal) PWDs are 2,124, consisting of 773 females and 1,351 males. The total of Hearing Impaired (Deaf & mute) PWDs is 178 consisting of 48 females and 130 males. Moreover, the total number of visually impaired PWDs is 289, consisting of 82 females and 207 males. The total of intellectually disabled PWDs is 4, consisting of 1 female and 3 males.

Furthermore, at the masters (16 years) level, 1,611 PWDs are listed as literate and fit to work. There are 621 females and 990 males with disabilities who are literate & fit for work. At this level of education, the total number of Physically Impaired (Neuromuscular) PWDs is 130, consisting of 45 females and 85 males. The total number of Physically Impaired (Musculoskeletal) PWDs is 1,200, consisting of 493 females and 707 males. The total of Hearing Impaired (Deaf & mute) PWDs is 55 consisting of 17 females and 38 males. Moreover, the total number of visually impaired PWDs is 222, consisting of 66 females and 156 males. While the total of intellectually disabled PWDs is 4, consisting of 4 males.

At the MPhil (18 years) level, 230 PWDs are listed as literate and fit to work. There are 76 females and 154 males with disabilities who are literate & fit for work. At this level of education, the total number of Physically Impaired (Neuromuscular) PWDs is 24, consisting of 7 females and 17 males. The total Physically Impaired (Musculoskeletal) PWDs is 143, consisting of 49 females and 94 males. The total of Hearing Impaired (Deaf & mute) PWDs is 19 consisting of 9 females and 10 males. Moreover, the total number of visually impaired PWDs is 44, consisting of 11 females and 33 males.

## 3.6 Not Fit to Work Persons with Disabilities

### 3.6.1 Age Wise Literacy Rate of Not Fit to Work Female with Disabilities

Examining the relationship between literacy rates and the classification of females with disabilities as not fit to work involves a nuanced understanding of gender-specific challenges, educational disparities, social and cultural factors, and the potential for double discrimination. The goal is to inform targeted interventions and policies that promote inclusivity and empower females with disabilities in both educational and employment contexts.

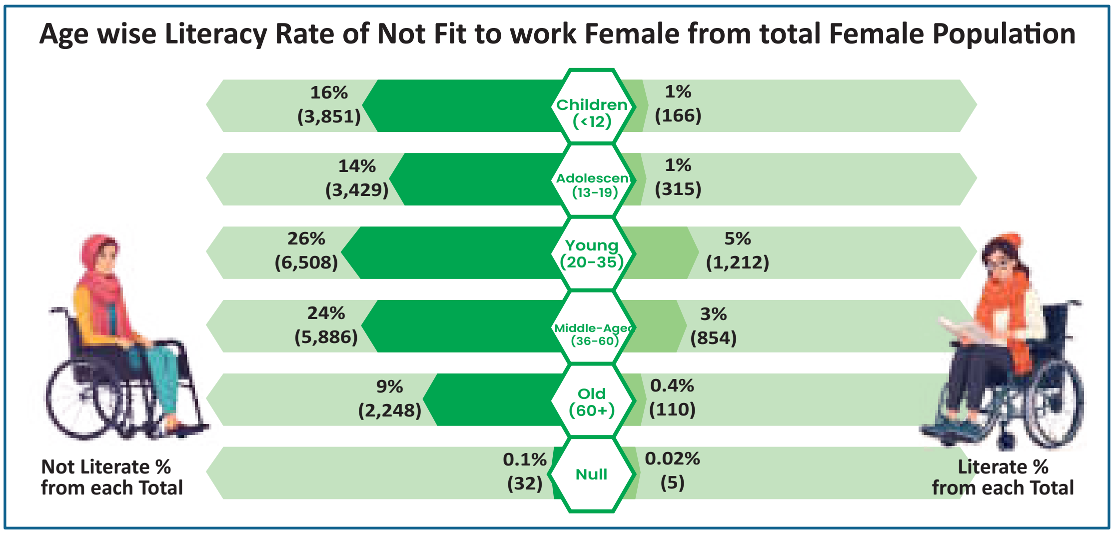



*Figure 3.6.1*

Figure 3.6.1 shows the literacy rate of not fit to work female in Punjab considering the age groups. It is noted that the literacy rate of not fit to work females in Punjab is high in the age group of 20-35, accounting for 5% (1,212) while the non-literacy rate is high in the same age group accounting for 26% (6,508) from total population of not fit to work females i.e. 24,616.

The data reveals that the literacy rate of not fit work females in Punjab in the age group of 0-12 is 1% (166), while the non-literacy rate in the same age group is 16% (3,851). Similarly, the literacy rate of not fit to work females in the age group of 13-19 is 1% (315), while the non-literacy rate in this age group is 14% (3,429). Furthermore, the literacy rate of not fit to work females in the age group of 36-60 is 3% (854), while the non-literacy rate in this age group is 24% (5,886).

Moreover, there are 5 literate females (0.02%) and 32 illiterate females (0.1%) in the 'Null' category. These findings are based on an undefined age group. The 'Null' category represents those whose qualification status is not defined in the dataset.

**Note:** The qualification level of 84 females with disabilities is not defined in the data, thus they are excluded from this analysis.

### 3.6.2 Age Wise Literacy Rate of Not Fit to Work Male with Disabilities

It is important to examine the ratio of literate and employable males with disabilities in the Punjab region, taking into consideration different age groups. This analysis aims to identify the age category among males with disabilities that demonstrates a higher literacy rate and suitability for work.

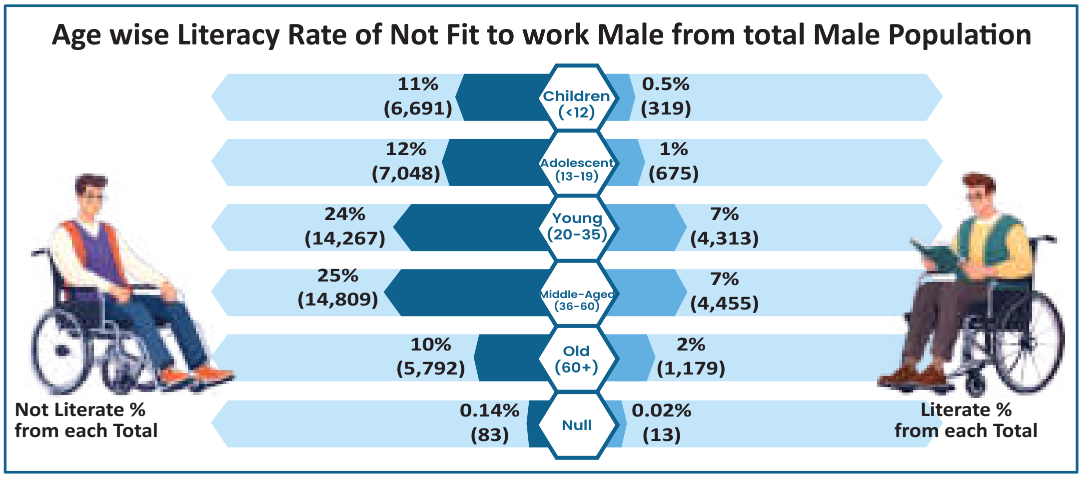



*Figure 3.6.2*

Figure 3.6.2 shows the literacy rate of not fit-to-work males in Punjab by considering the age groups. It is noted that the literacy rate of not fit-to-work males in Punjab is high in the age group of 20-35, accounting for 7% (4,313) while the non-literacy rate is high in the age group of 36-60 accounting for 25% (14,809) from total population of not fit to work males i.e. 59,644.

The data shows that the literacy rate of the not fit-to-work males in the age group of 0-12 is 0.5% (319), while the non-literacy rate in the same age group is 11% (6,691). Similarly, the literacy rate of not fit-to-work males in the age group of 13-19 is 1% (675), while the non-literacy rate in this age group is 12% (7,048). Furthermore, the literacy rate of not fit-to-work males in the age group of 36-60 is 7% (4,455), while the non-literacy rate in the age group of 20-35 is 24% (14,267).

Moreover, the literacy rate of not fit to work males defined as "Null" is 0.02% (13), while the non-literacy rate is 0.14% (83). These findings are based on not defined age group.

**Note:** The qualification level of 153 males with disabilities is not defined in the data, thus they are excluded from this analysis.

### 3.6.3 Age wise Literacy Rate of Not Fit To Work PWDs in Punjab (Male & Female)

Examining the literacy rate of individuals deemed unfit for employment allows us to understand the circumstances and reasons behind disabilities, leading to the classification of literate Persons with Disabilities (PWDs) as not suitable for work. This involves exploring the understanding of the disability causes that contribute to their inability to engage in certain work activities. Understanding the reasons behind declaring literate PWDs as not fit to work may have implications for policy development and interventions. It can inform strategies to address barriers and create more inclusive environments for individuals with disabilities.

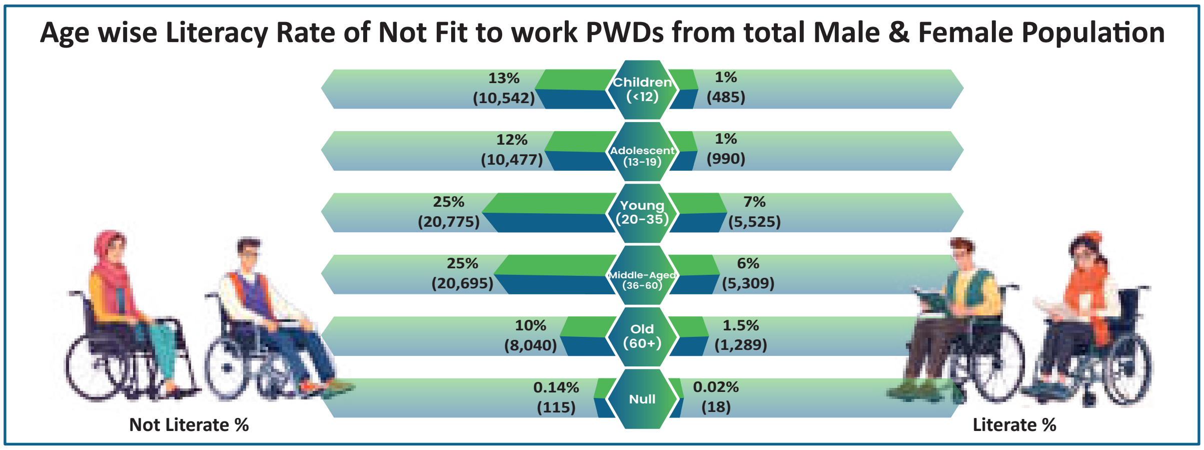



*Figure 3.6.3*

Figure 3.6.3 shows the literacy rate of not fit to work PWDs in Punjab considering the age groups. It is noted that the literacy rate of not fit-to-work PWDs is high in the age group of 20-35, accounting for 7% (5,525) while the non-literacy rate of not fit-to-work PWDs in Punjab is high in the age group of 20-35, accounting for 25% from total population of not fit to work PWDs in Punjab i.e. 84,260.

The data reveals that the literacy rate of not fit to work PWDs in the age group of 0-12 is 1% (485), while the non-literacy rate is 13% (10,542). Similarly, the literacy rate of not fit to work PWDs in the age group of 13-19 is 1% (990), while the non-literacy rate in this age group is 12% (10,477). Furthermore, the literacy rate of not fit-to-work PWDs in the age group of 36-60 is 6% (5,309), while the non-literacy rate of fit-to-work PWDs in this age group is 25% (20,695).

Moreover, the literacy rate of not fit to work PWDs defined as “Null” is 0.02% (18), while the non-literacy rate is 0.14% (115).

It is important to mention here that the fitness status of total 237 persons with disabilities (females with disabilities = 84 & males with disabilities = 153) is not defined in the data set of Social Welfare & bait-ul-Mal Department, thus they are excluded from this analysis.

### 3.6.4 Literacy Rate of Not Fit to Work Female by Age-Group

In this part, the analysis provides valuable insights into the unique challenges and opportunities faced by this specific demographic group and informs targeted interventions to enhance their well-being and inclusion.

Literacy is a critical component in enabling people to make educated decisions about their lives. Higher literacy rates among unfit-to-work females with disabilities can lead to higher autonomy, self-advocacy, and decision-making capacity, resulting in better overall well-being. Thus, it is crucial to assess the proportion of females who are both literate and not fit for work in the Punjab region. This evaluation should take into account different age groups to identify which specific age range exhibits a higher literacy rate and greater fitness for employment among females.

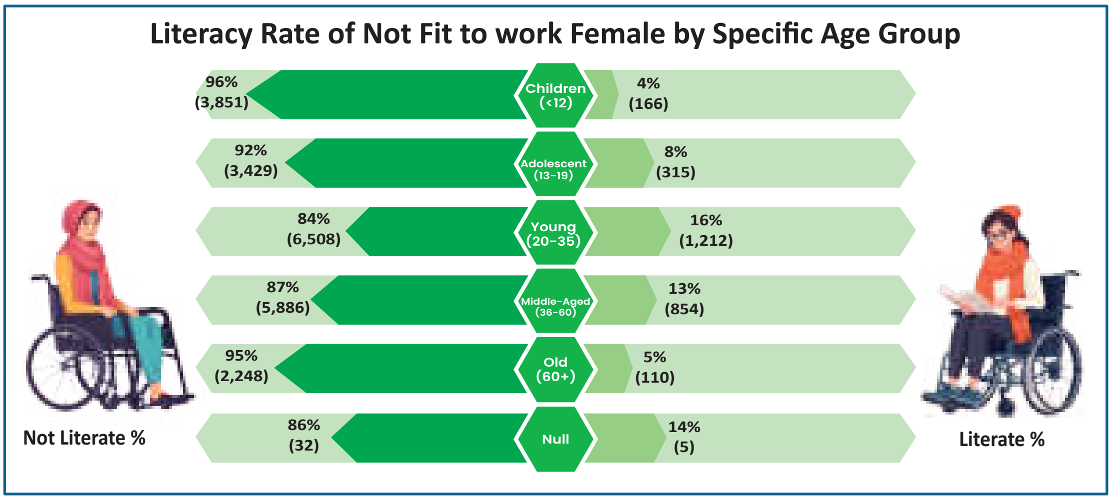



*Figure 3.6.4*

Figure 3.6.4 shows the age group literacy rate of not fit-to-work females in Punjab by considering the respective age groups total. It is noted that the literacy rate of not fit to work females in Punjab is high at the age group of 20-35, accounting for 16% (1,212) of the respective age group total i.e. 7,720. Similarly, the ratio of non-literate & not fit-to-work females is high in the age group of 0-12, accounting for 96% (3,851) of the respective age group total i.e. 4,017.

Moreover, the literacy rate of not fit to work females defined as “Null” is 14% (5), while the non-literacy rate is 86% (32) calculated from the total population of not fit to work female.

### 3.6.5 Literacy Rate of Not Fit to Work Male by Age-Group

It is crucial to ascertain the ratio of males in Punjab who are literate but deemed unfit for work, considering various age groups. This analysis aims to identify the specific age range among males with a high literacy ratio that is also classified as not fit for employment.

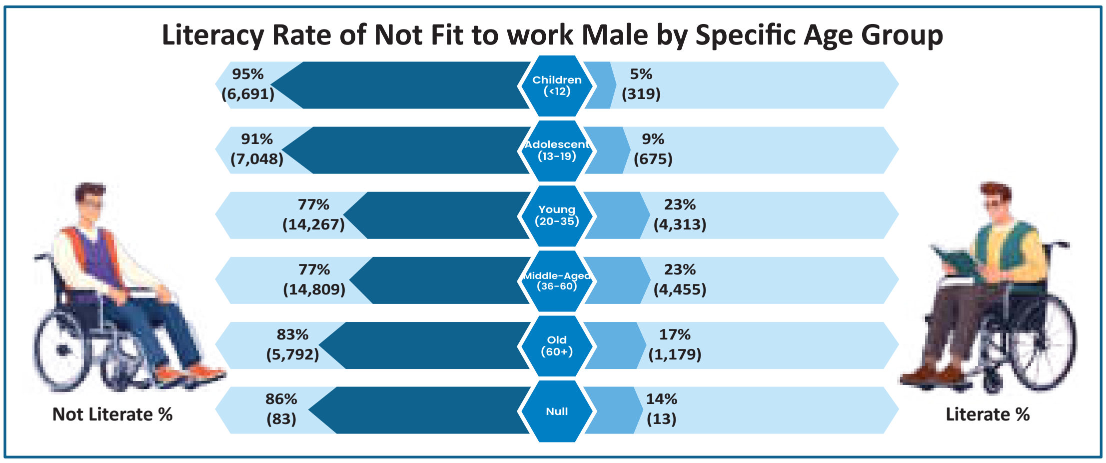



*Figure 3.6.5*

Figure 3.6.5 shows the age-wise literacy rate of not fit-to-work males in Punjab considering the respective age groups total. It is noted that the literacy rate of not fit to work males is high in the age group of 20-35, accounting for 23% (4,313) of the respective age group total i.e. 18,580. Similarly, the ratio of non-literate & not fit-to-work males is high at the age group of 0-12, accounting for 95% (6,691) of the respective age group total i.e. 7,010.

Moreover, the literacy rate of not fit to work males defined as "Null" is 14% (13), while the non-literacy rate is 86% (83) calculated from the total population of not fit to work male.

### 3.6.6 Literacy Rate of Not Fit to Work PWDs by Age Group (Male & Female)

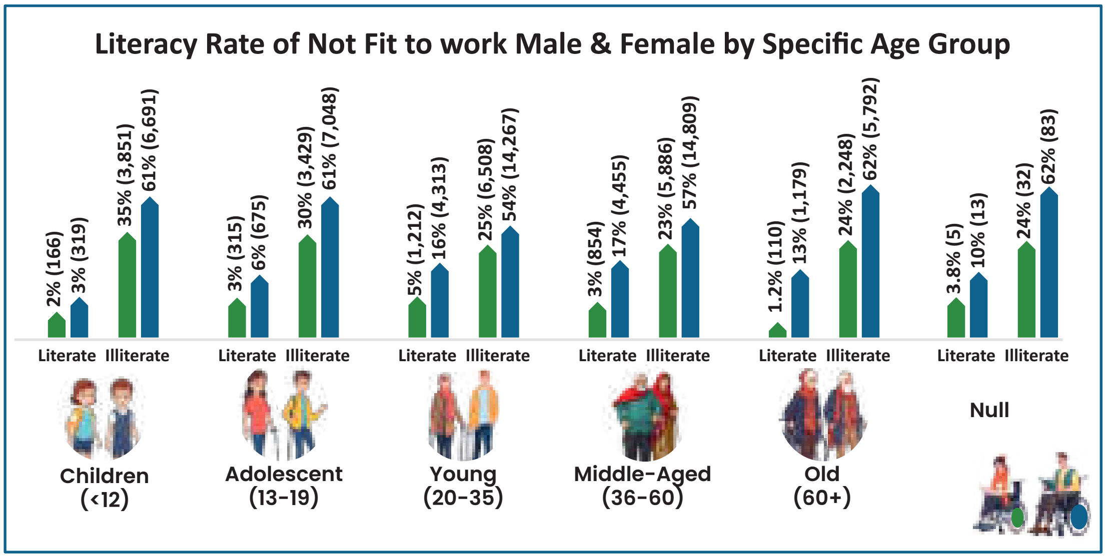



*Figure 3.6.6*

Figure 3.6.6 defines the age-wise literacy ratio of not fit to work PWDs (female & male) of Punjab.

The data reveals that a total of 11,027 PWDs are registered under the age of 0-≤12. Among them, 6,691 (61%) are illiterate males, while 319 (3%) are literate & not fit to work males from total population of this age group. Similarly, 3,851 (35%) are illiterate females, while 166 (2%) are literate & not fit to work females from total population of this age group.

The data depicts that a total of 11,467 PWDs are registered under the age of 13-19. Among them, 7,048 (61%) are illiterate males, while 675 (6%) are literate & not fit to work males from total population of this age group. Similarly, 3,429 (30%) are illiterate females, while 315 (3%) are literate & not fit to work females from total population of this age group.

Similarly, a total of 26,300 PWDs are registered under the age of 20-35. Among them, 14,267 (54%) are illiterate males, while 4,313 (16%) are literate & not fit to work males from total population of this age group. Similarly, 6,508 (25%) are illiterate females, while 1,212 (5%) are literate & not fit to work females from total population of this age group.

The result reveals that a total of 26,004 PWDs are registered under the age of 36-60. Among them, 14,809 (57%) are illiterate males, while 4,455 (17%) are literate & not fit to work males from total population of this age group. Similarly, 5,886 (23%) are illiterate females, while 854 (3%) are literate females from total population of this age group.

Moreover, the data reveals that a total of 9,329 PWDs are registered at the age of 60+. Among them, 5,792 (62%) are illiterate males, while 1,179 (13%) are literate & not fit to work males from total population of this age group. Similarly, 2,248 (24%) are illiterate & not fit to work females, while 110 (1.2%) are literate females from total population of this age group.

The data reveals that a total of 133 PWDs are registered as "Null". Among them, 83 (62%) are illiterate males, while 13 (10%) are literate & not fit to work males from total population of this age group. Similarly, 32 (24%) are illiterate & not fit to work females, while 5 (3.8%) are literate females from total population of this age group.

It is important to mention here that the fitness status of total 237 persons with disabilities (females with disabilities = 84 & males with disabilities = 153) is not defined in the data set of Social Welfare & bait-ul-Mal Department, thus they are excluded from this analysis

### 3.6.7 Categories Of Literate But Not Fit To Work PWDs With Type Of Disabilities & Cause (Male & Female)

Analyzing persons with disabilities who are literate but are deemed inappropriate for work is critical for understanding the various disability categories and the variables that influence the decision to designate literate individuals with disabilities as unfit for employment. As previously stated, the data gathered for this study includes four categories of disability i.e. physically impaired, deaf & mute, visually impaired and mentally challenged.

Table 25 indicates that a total of 13,590 PWDs are listed as literate but unfit to work. Among them, 2,652 are females and 10,938 are males registered as literate but not fit to work.

The analysis reveals that at the primary level, 4,097 PWDs are listed as literate but unfit to work. There are 880 females and 3,217 males with disabilities who are literate but not fit for work. At this level of education, the total number of Physically Impaired (Neuromuscular) PWDs is 940, consisting of 222 females and 718 males. The total number of Physically Impaired (Musculoskeletal) PWDs is 1,922, consisting of 335 females and 1,587 males. The total of Hearing Impaired (Deaf & mute) PWDs is 593, consisting of 158 females and 435 males. Moreover, the total number of visually impaired PWDs is 435, consisting of 109 females and 326 males. The total of intellectually disabled PWDs is 207, consisting of 56 females and 151 males.

Similarly, at the middle level, 3,536 PWDs are listed as literate but unfit to work. There are 515 females and 3,021 males with disabilities who are literate but not fit for work. At this level of education, the total number of Physically Impaired (Neuromuscular) PWDs is 605, consisting of 106 females and 499 males. The total Physically Impaired (Musculoskeletal) PWDs are 2,143, consisting of 258 females and 1,885 males. The total of Hearing Impaired (Deaf & mute) PWDs is 352, consisting of 94 females and 258 males. Moreover, the total number of visually impaired

PWDs is 385, consisting of 46 females and 339 males. The total of intellectually disabled PWDs is 51, consisting of 11 females and 40 males.

Results revealed that at the matric level, 3,338 PWDs are listed as literate but unfit to work. There are 542 females and 2,796 males with disabilities who are literate but not fit for work. At this level of education, the total number of Physically Impaired (Neuromuscular) PWDs is 438, consisting of 75 females and 363 males. The total number of Physically Impaired (Musculoskeletal) PWDs is 1,976, consisting of 269 females and 1,707 males. The total of Hearing Impaired (Deaf & mute) PWDs is 523, consisting of 140 females and 383 males. Moreover, the total number of visually impaired PWDs is 365, consisting of 54 females and 311 males. The total of intellectually disabled PWDs is 36, consisting of 4 females and 32 males.

Moreover, at the intermediate level, 1,303 PWDs are listed as literate but unfit to work. There are 309 females and 994 males with disabilities who are literate but not fit for work. At this level of education, the total number of Physically Impaired (Neuromuscular) PWDs is 179, consisting of 51 females and 128 males. The total number of Physically Impaired (Musculoskeletal) PWDs is 783, consisting of 172 females and 611 males. The total of Hearing Impaired (Deaf & mute) PWDs is 203, consisting of 56 females and 147 males. Moreover, the total number of visually impaired PWDs is 127, consisting of 28 females and 99 males. The total of intellectually disabled PWDs is 11, consisting of 2 females and 9 males.

At the graduation level, 860 PWDs are listed as literate but unfit to work. There are 266 females and 594 males with disabilities who are literate but not fit for work. At this level of education, the total number of Physically Impaired (Neuromuscular) PWDs is 113, consisting of 32 females and 81 males. The total Physically Impaired (Musculoskeletal) PWDs are 570, consisting of 174 females and 396 males. The total of Hearing Impaired (Deaf & mute) PWDs is 68, consisting of 29 females and 39 males. Moreover, the total number of visually impaired PWDs is 103, consisting of 30 females and 73 males. The total of intellectually disabled PWDs is 6, consisting of 1 females and 5 males.

At the masters (16 years) level, 401 PWDs are listed as literate but unfit to work. There are 129 females and 272 males with disabilities who are literate but not fit for work. At this level of education, the total Physically Impaired (Neuromuscular) PWDs are 70, consisting of 20 females and 50 males. The total Physically Impaired (Musculoskeletal) PWDs are 252, consisting of 82 females and 170 males. The total of Hearing Impaired (Deaf & mute) PWDs is 9, consisting of 2 females and 7 males. Moreover, the total number of visually impaired PWDs is 63, consisting of 21 females and 42 males. While the total of intellectually disabled PWDs is 7, consisting of 4 females and 3 males.

Furthermore, at the MPhil (18 years) level, 55 PWDs are listed as literate but unfit to work. There are 11 females and 44 males with disabilities who are literate but not fit for work. At this level of education, the total number of Physically Impaired (Neuromuscular) PWDs is 18, consisting of 1 female and 17 males. The total Physically Impaired (Musculoskeletal) PWDs are 27, consisting of 8 females and 19 males. The total of Hearing Impaired (Deaf & mute) PWDs is 9, consisting of 1 female. Moreover, the total number of visually impaired PWDs is 7, consisting of 1 females and 6 males. While the total of intellectually disabled PWDs is 2, consisting of 2 males.

# 04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# MAIN FINDINGS

# 04. MAIN FINDINGS

After the detailed analysis following are the main findings;

- Total fit to work males are 76040 and females are 26548.
- Total not fit to work males are 59797 and females are 24700.
- Literate males from the targeted age bracket 0-40 are 33,836 and females are 11,204.
- Literate and fit to work males from the targeted age bracket 0-40 are 23,184 and females are 7,899. The details of PWDs literate and fit to work are as follow

*Table 4.1*

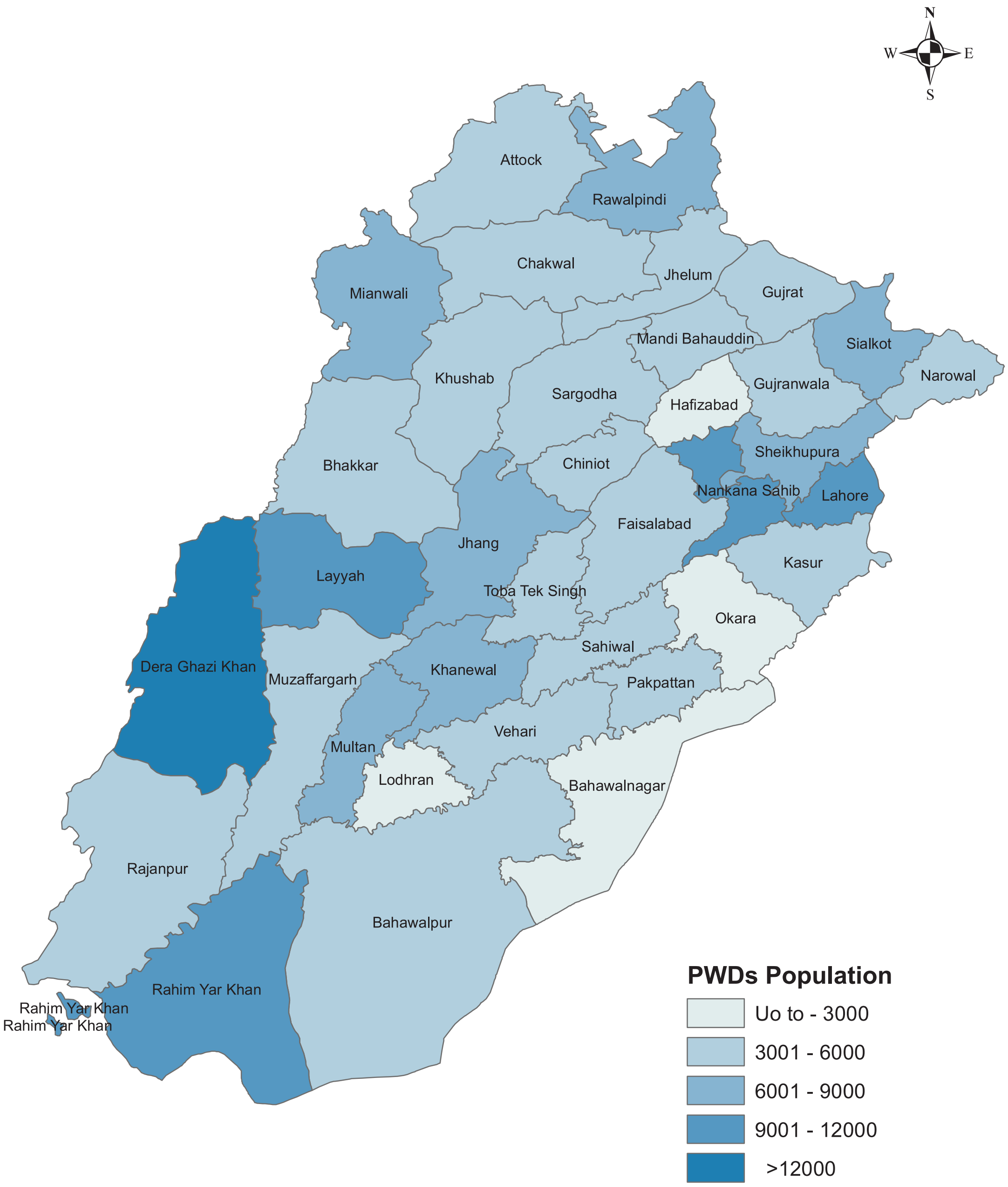
| Qualification | Male | Female | Total |
|---|---|---|---|
| Primary | 5841 | 2330 | 8171 |
| Middle | 6294 | 1257 | 7551 |
| Matric | 6348 | 1793 | 8141 |
| Intermediate | 2704 | 1184 | 3888 |
| Graduation | 1307 | 813 | 2120 |
| Masters (16 Years) | 611 | 463 | 1074 |
| MPhil (18 Years) | 79 | 59 | 138 |
| NULL | 105 | 56 | 161 |
| **Grand Total** | **23289** | **7955** | **31244** |

- Illiterate but fit to work males from the targeted age bracket 0-40 are 32,510 and females are 13,175.
- Literate but not fit to work males from the targeted age bracket 0-40 are 6,649 and females are 1,986. The detail of PWDs literate but not fit to work is as;

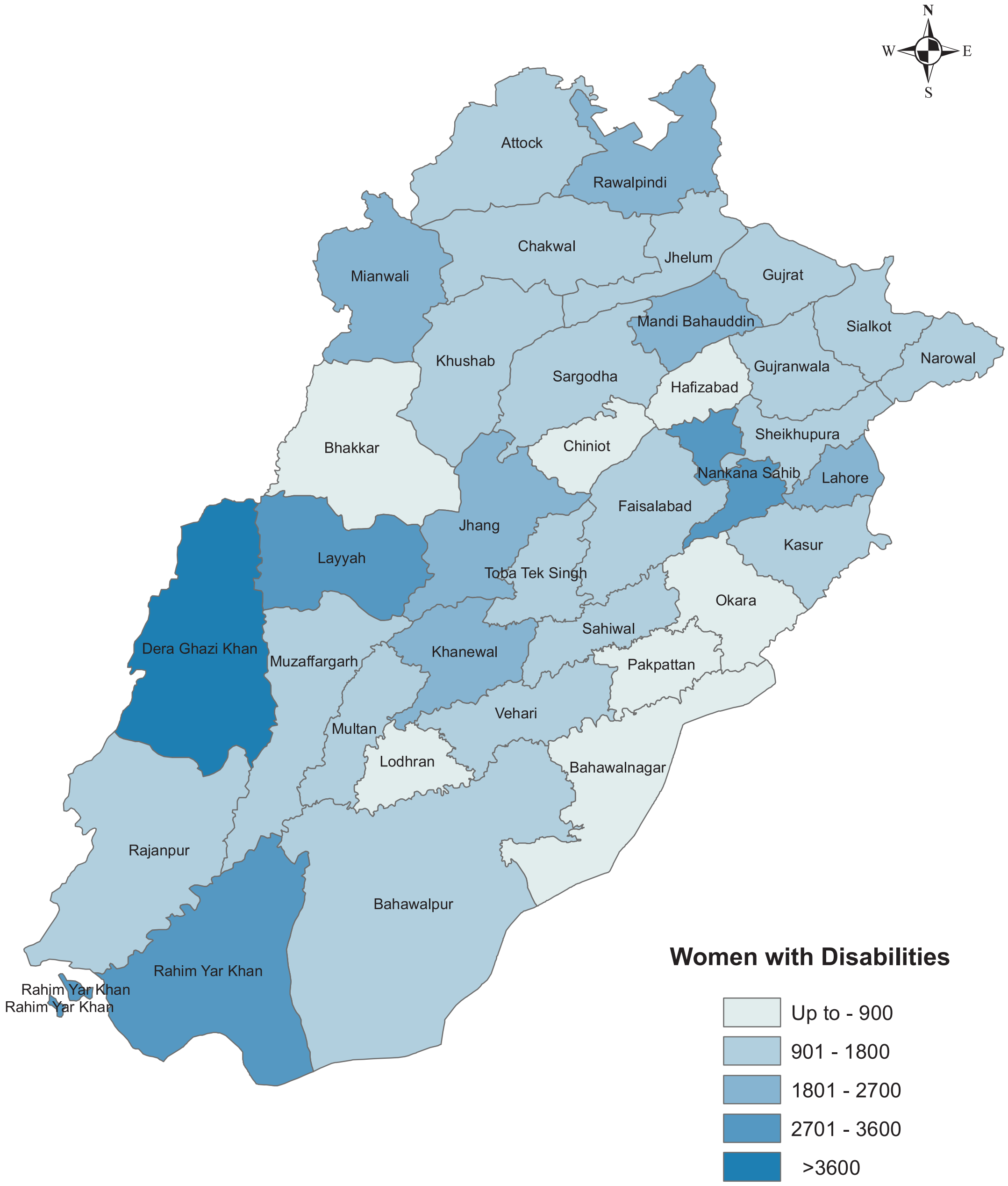
*Table 4.2*

| Qualification | Male | Female | Total |
|---|---|---|---|
| Primary | 2130 | 717 | 2847 |
| Middle | 1787 | 409 | 2196 |
| Matric | 1632 | 361 | 1993 |
| Intermediate | 663 | 236 | 899 |
| Graduation | 300 | 186 | 486 |
| Masters (16 Years) | 114 | 71 | 185 |
| MPhil (18 Years) | 23 | 6 | 29 |
| NULL | 31750 | 59 | 31809 |
| **Grand Total** | **38399** | **2045** | **40444** |

**Total Population of Persons with Disabilities (PWDs) in Punjab by District**



## Population of Women with Disabilities (PWDs) in Punjab by District



# 05


POLICY

# RECOMMENDATIONS

# 05. RECOMMENDATIONS

Based on the detailed analysis of the data regarding the fit-to-work status, literacy levels, and qualifications among males and females, with a specific focus on women with disabilities, here are some targeted recommendations to improve assessments in the disability boards, educational and employment opportunities and quality of life for women with disabilities:

## 5.1. Disability Assessment Boards

- Awareness Campaigns: It is recommended to Launch awareness campaigns to enhance the registration of women with disabilities in the disability assessment boards. As per available data, Total 27% women with disabilities are registered in the disability assessment boards. The significant difference between the counts of males and females with disabilities indicates societal, cultural, and systemic obstacles that impede females from applying for disability certification.

### Accessibility and Infrastructure Enhancement:

- Disability Assessment boards for the assessment of Women with Disabilities be arranged on ground floors of hospitals for enhanced accessibility.
- Transportation facilities be restructured for persons with Disabilities in order to facilitate their mobility.
- Invest in disabled-friendly infrastructure to facilitate seamless mobility and navigation within hospital premises.
- Ensure Accessible Washroom for women with disabilities in Public and Private Premises.

### Clear Categorization of Fit to Work Status:

- Implement a transparent and standardized categorization system for determining the Fit to Work status of Women with Disabilities during disability assessment boards, facilitating effective decision-making and ensuring fair employment opportunities.
- Designate a dedicated examination room exclusively for women with disabilities during medical assessments.
- Ensure the presence of qualified female nursing staff at assessment venues to address the specific needs of women with disabilities.

- Enforce the inclusion of at least one female doctor per disability category to conduct examinations for female patients, promoting gender sensitivity and comfort.

### Enhance Educational Opportunities

- Expand Access to Education: Develop and implement inclusive educational programs specifically designed for women with disabilities. This includes primary to higher education with required accommodation.

### Improve Employment Opportunities

- Job Placement Services: Develop job placement services specifically for women with disabilities to bridge the gap between education and employment.
- Entrepreneurship Programs: Support entrepreneurship among women with disabilities through grants, microloans, and business development training.
- Disability Support Services: Provide comprehensive support services, including counseling, mentorship programs, and peer support groups to empower women with disabilities.
- Workplace Adaptations: Promote workplace adaptations such as flexible work hours, remote work options, and accessible office spaces to accommodate women with disabilities.
- Policy Advocacy: Advocate for policies that protect the rights and promote the inclusion of women with disabilities in all sectors.
- Healthcare Accessibility: Ensure accessible healthcare services, including reproductive health support, for women with disabilities.

### Skill Development and Career Guidance:

TEVTA and Labour Departments need to design vocational training courses according to various types of disabilities and the requirements of women with disabilities to empower them.

### Vocational Training Programs:

Establish vocational training centers that offer courses tailored to market demands, ensuring women with disabilities acquire relevant skills.

## 5.2. Community Interventions

Community interventions are pivotal for improving data quality while fostering inclusivity and sensitivity towards Women with Disabilities

### Community Workshops and Training Sessions:

- Collaborate with local community organizations to conduct workshops and training sessions aimed at raising awareness among community members about the importance of registering Women with disabilities (PWDs) through disability assessment board. Encourage Women with Disabilities to register themselves to avail benefits designed specifically for their welfare.

### Awareness Campaigns and Outreach Events:

- Initiate targeted awareness campaigns emphasizing the significance of maintaining comprehensive records of Women with Disabilities across all sectors.

### Community Data Advocacy Groups:

- Establish inclusive data advocacy groups that represent the interests of Women with Disabilities and advocate for improved data quality.

- Empower Women with Disabilities to actively engage with policymakers and advocate for policies that address their unique needs.

# CONCLUSION

# CONCLUSION

The ''Analysis of Data of Disability Assessment Boards'' report, pioneered by the Women Development Department (WDD), marks the first-ever comprehensive examination of the status and needs of women with disabilities in our region. At its core, it champions the "Integrating Women with Disabilities into Mainstream" initiative, spearheaded by the WDD, aimed at establishing a robust database that will serve as the foundation for future policymaking and planning endeavors. By collaborating closely with key stakeholders such as the Social Welfare and Bait-ul-Mal department, this project seeks to delve into the current landscape for women with disabilities, identify existing gaps in their socio-economic integration, and assess the efficacy of public sector interventions thus far.

Utilizing a methodology that integrates data collection from relevant agencies and inclusive consultative sessions, this study not only endeavors to inform policy formulation but also strives to raise awareness among the general populace about the unique challenges faced by women with disabilities. One of the key methodologies employed is the analysis of data through a gender lens, allowing for a nuanced understanding of the experiences and needs of women in this demographic.

Furthermore, this report provides gender-segregated data, allowing for a precise comparison between the literacy rates and fitness statuses of men with disabilities and registered women with disabilities. By employing such an approach, it illuminates the disparities that exist and highlights areas where women with disabilities may face particular challenges or barriers to full integration and participation in society. Through this meticulous analysis, the report aims to catalyze targeted interventions and policies that address the specific needs of women with disabilities, ultimately fostering greater inclusivity and empowerment within our communities.

In tandem with this initiative, a detailed demographic analysis of individuals aged 0-40, delineated by gender and literacy levels, has unveiled notable findings. Among the 187,085 individuals in this age group, 102,588 are deemed fit for work, comprising 76,040 males and 26,548 females. Conversely, 84,497 individuals, including 59,797 males and 24,700 females, are identified as not fit for work. Within this demographic, 45,528 individuals are literate, with 33,836 males and 11,204 females possessing basic literacy skills, while 49,277 individuals are illiterate, encompassing 32,946 males and 13,331 females.

Further analysis reveals that 31,400 individuals, consisting of 23,184 males and 7,899 females, are both fit for work and literate. Notably, 8,756 individuals, including 6,649 males and 1,986 females, are literate yet unable to work, with primary education emerging as the predominant qualification among this group.

These findings underscore the multifaceted nature of workforce readiness, with gender and literacy playing pivotal roles. Addressing the challenges encountered by specific subgroups, such as literate individuals unable to work, necessitates targeted interventions focusing on enhancing employability through vocational training and fostering inclusive workplace policies.

Ultimately, these endeavors are poised to be transformative, paving the way for a more inclusive workforce and fostering socio-economic empowerment. By leveraging these insights and implementing tailored strategies, policymakers and stakeholders can nurture an environment conducive to the integration of women with disabilities into mainstream society, thereby bolstering economic productivity and fortifying social cohesion.

The report advocates for empowering women with disabilities through a multifaceted approach. It suggests establishing rigorous data quality standards and technological solutions to enhance accuracy at the institutional level. Community-based interventions are deemed crucial, including awareness campaigns to combat stigmatization, skill development programs tailored for women with disabilities, and initiatives to improve their registration ratio in assessment boards. By engaging local communities in data collection and fostering skill development, the recommendations aim to create a more inclusive society where women with disabilities can pursue economic independence and have their voices heard in decision-making processes.

Overall, a collaborative approach that integrates institutional reforms with community involvement is essential for overcoming the identified challenges and advancing data-driven decision-making in Punjab. By implementing the recommended strategies and empowering communities to take ownership of the data collection process, Punjab can strengthen its data infrastructure, enhance the reliability of information, and ultimately improve the delivery of services and resources to its residents.

ANNEXURE-I

# Tables

***Table 3.1.1***
**Gender Distribution of PWDs in Punjab**

| Gender | Number | %age |
|---|---|---|
| Male | 155667 | 73% |
| Female | 57823 | 27% |
| Transgender | 22 | |
| Null | 4 | |
| **Total** | **213,516** | |

***Table 3.1.2***
**Gender-wise Type of Disability in Punjab**

| Category | Females | Female % (From Female Population) | Males | Male % (From Male Population) | Total |
|---|---|---|---|---|---|
| Physical | 35243 | 61% | 106075 | 68% | 141318 |
| Deaf & Mute | 12293 | 21% | 23898 | 15% | 36191 |
| Mentally Challenged | 3674 | 6% | 7845 | 5% | 11519 |
| Visually Impaired | 6558 | 11% | 17649 | 11% | 24207 |
| Null | 29 | 0.05% | 113 | 0.07% | 142 |
| Not Defined | 26 | 0.04% | 87 | 0.06% | 113 |
| **Total** | **57823** | | **155667** | | **213490** |

***Table 3.1.3***
**Gender and Category-wise Ratio of Disability in Punjab**

| Category | Females | Males | Total | Female % (from Total) | Male % (from Total) |
|---|---|---|---|---|---|
| Physical | 35243 | 106075 | 141318 | 25% | 75% |
| Deaf & Mute | 12293 | 23898 | 36191 | 34% | 66% |
| Mentally Challenged | 3674 | 7845 | 11519 | 32% | 68% |
| Visually Impaired | 6558 | 17649 | 24207 | 27% | 73% |
| Null | 29 | 113 | 142 | 20% | 80% |
| Not Defined | 26 | 87 | 113 | 23% | 77% |
| **Total** | **57823** | **155667** | **213490** | | |

***Table 3.1.4(a-b)***
**Gender wise Qualification of Person with Disabilities in Punjab**

| Level | Females | Female % (From Female Pop.) | Males | Male % (From Male Pop.) | Total |
|---|---|---|---|---|---|
| Illiterate | 44531 | 77% | 109878 | 71% | 154409 |
| Primary | 3730 | 6% | 11493 | 7% | 15223 |
| Middle | 2152 | 4% | 12366 | 8% | 14518 |
| Matric | 2932 | 5% | 12253 | 8% | 15185 |
| Intermediate | 1857 | 3% | 4747 | 3% | 6604 |
| Graduation | 1437 | 2% | 2728 | 2% | 4165 |
| Masters (16 Years) | 870 | 2% | 1464 | 0.9% | 2334 |
| MPhil (18 Years) | 97 | 0.2% | 223 | 0.1% | 320 |
| Null | 217 | 0.4% | 515 | 0.3% | 732 |
| **Total** | **57823** | | **155667** | | **213490** |

***Table 3.2.1(a-f)***
**Age-wise Distribution of Persons with Disabilities**

| Age Group | Females | | | Males | | | Total | | |
|---|---|---|---|---|---|---|---|---|---|
| | Female | Female % | Cum. % | Males | Male (%) | Cum. % | Total | Total % | Cum. % |
| **≤12** | 8334 | 14% | 14% | 14333 | 9% | 9% | 22667 | 11% | 11% |
| **13-20** | 11025 | 19% | 33% | 22387 | 14% | 23% | 33412 | 16% | 27% |
| **21-30** | 13174 | 23% | 56% | 37948 | 24% | 47% | 51122 | 24% | 51% |
| **31-40** | 11014 | 19% | 75% | 33420 | 21% | 68% | 44434 | 21% | 72% |
| **41-50** | 6613 | 11% | 86% | 21176 | 14% | 82% | 27789 | 13% | 85% |
| **51-60** | 3822 | 7% | 93% | 13937 | 9% | 91% | 17759 | 8% | 93% |
| **61-70** | 1962 | 3% | 96% | 7253 | 5% | 96% | 9215 | 4% | 97% |
| **70+** | 1777 | 3% | 99% | 4916 | 3% | 99% | 6693 | 3% | 100% |
| **Null** | 102 | 0.2% | 100% | 297 | 0.2% | 100% | 399 | 0.2% | 100% |
| **Total** | **57823** | | | **155667** | | | **213490** | | |

***Table 3.2.2***
**Ratio of Persons with Disabilities by Age Group**
**(Male & Female)**

| Age Group | Female | Males | Total | Male % (from respective Total) | Female % (from respective Total) |
|---|---|---|---|---|---|
| **≤12** | 8334 | 14333 | 22667 | 63% | 37% |
| **13-20** | 11025 | 22387 | 33412 | 67% | 33% |
| **21-30** | 13174 | 37948 | 51122 | 74% | 26% |
| **31-40** | 11014 | 33420 | 44434 | 75% | 25% |
| **41-50** | 6613 | 21176 | 27789 | 76% | 24% |
| **51-60** | 3822 | 13937 | 17759 | 78% | 22% |
| **61-70** | 1962 | 7253 | 9215 | 79% | 21% |
| **70+** | 1777 | 4916 | 6693 | 73% | 27% |
| **Null** | 102 | 297 | 399 | 74% | 26% |
| **Total** | **57823** | **155667** | **213490** | | |

*Table 3.3.1*

**Age-wise Literacy Rate of Female from total Female Population**

| Category | Literate | Literate % | Not Literate | Not Literate % | Total |
|---|---|---|---|---|---|
| Children (<12) | 918 | 2% | 7384 | 13% | **8302** |
| Adolescent (13-19) | 2091 | 4% | 7440 | 13% | **9531** |
| Young (20-35) | 7021 | 12% | 13836 | 24% | **20857** |
| Middle-Aged (36-60) | 2835 | 5% | 12297 | 21% | **15132** |
| Old 60+ | 198 | 0.3% | 3522 | 6% | **3720** |
| NULL | 20 | 0.03% | 82 | 0.1% | **102** |
| **Total** | **13083** | | **44561** | | **57644** |

*Table 3.3.2*

**Age-wise Literacy Rate of Male from total Male Population**

| Category | Literate | Literate % | Not Literate | Not Literate % | Total |
|---|---|---|---|---|---|
| Children (<12) | 1566 | 1% | 12733 | 8% | **14299** |
| Adolescent (13-19) | 4047 | 3% | 14820 | 10% | **18867** |
| Young (20-35) | 23269 | 15% | 36569 | 24% | **59838** |
| Middle-Aged (36-60) | 14214 | 9% | 35575 | 23% | **49789** |
| Old 60+ | 2108 | 1.4% | 10023 | 6% | **12131** |
| NULL | 77 | 0.05% | 219 | 0.1% | **296** |
| **Total** | **45281** | | **109939** | | **155220** |

*Table 3.3.3*

**Literacy Rate of Persons with Disabilities by Specific Age Group (Male & Female)**

| Category | Literate | | Not Literate | | Total | Literate % (From Each Total) | | Not Literate % (From Each Total) | |
|---|---|---|---|---|---|---|---|---|---|
| | Female | Male | Female | Male | | Female | Male | Female | Male |
| Children (<12) | 918 | 1566 | 7384 | 12733 | 22601 | 4% | 7% | 33% | 56% |
| Adolescent (13-19) | 2091 | 4047 | 7440 | 14820 | 28398 | 7% | 14% | 26% | 52% |
| Young (20-35) | 7021 | 23269 | 13836 | 36569 | 80695 | 9% | 29% | 17% | 45% |
| Middle-Aged (36-60) | 2835 | 14214 | 12297 | 35575 | 64921 | 4% | 22% | 19% | 55% |
| Old 60+ | 198 | 2108 | 3522 | 10023 | 15851 | 1% | 13% | 22% | 63% |
| NULL | 20 | 77 | 82 | 219 | 398 | 5% | 19% | 21% | 55% |
| **Total** | **13083** | **45281** | **44561** | **109939** | **212864** | | | | |

*Table 3.3.4*
**Ratio of Person with Disabilities by Qualification Level in Punjab**

| Level | Females | Males | Total | Male % (from Total) | Female % (from Total) |
|---|---|---|---|---|---|
| Illiterate | 44531 | 109878 | 154409 | 71% | 29% |
| Primary | 3730 | 11493 | 15223 | 75% | 25% |
| Middle | 2152 | 12366 | 14518 | 85% | 15% |
| Matric | 2932 | 12253 | 15185 | 81% | 19% |
| Intermediate | 1857 | 4747 | 6604 | 72% | 28% |
| Graduation | 1437 | 2728 | 4165 | 65% | 35% |
| Masters (16 Years) | 870 | 1464 | 2334 | 63% | 37% |
| MPhil (18 Years) | 97 | 223 | 320 | 70% | 30% |
| Null | 217 | 515 | 732 | 70% | 30% |
| **Total** | **57823** | **155667** | **213490** | | |

*Table 3.4.1*
**Fitness Status of Persons with Disabilities in Punjab**
**(Male & Female)**

| Category | Male | Male% (From Male Pop.) | Female | Female % (From Female Pop.) | Total |
|---|---|---|---|---|---|
| Fit | 76040 | 49% | 26548 | 46% | 102588 |
| Not Fit | 59797 | 38% | 24700 | 43% | 84497 |
| Null | 19830 | 13% | 6575 | 11% | 26405 |
| **Total** | **155667** | | **57823** | | **213490** |

*Table 3.4.2*
**Ratio of Fitness Status of Persons with Disabilities by Each Category**
**(Male & Female)**

| Category | Male | Female | Total | Male % (from Total) | Female % (from Total) |
|---|---|---|---|---|---|
| Fit | 76040 | 26548 | 102588 | 74% | 26% |
| Not Fit | 59797 | 24700 | 84497 | 71% | 29% |
| Null | 19830 | 6575 | 26405 | 75% | 25% |
| **Total** | **155667** | **57823** | **213490** | | |

***Table 3.5.1***

**Age-wise Literacy Rate of Fit to work Females from total Female Population**

| Category | Literate | Literate % | Not Literate | Not Literate % | Total |
|---|---|---|---|---|---|
| Children (≤12) | 701 | 3% | 2903 | 11% | **3604** |
| Adolescent (13-19) | 1596 | 6% | 3013 | 11% | **4609** |
| Young (20-35) | 4873 | 18% | 5668 | 21% | **10541** |
| Middle-Aged (36-60) | 1650 | 6% | 5058 | 19% | **6708** |
| Old 60+ | 70 | 0.3% | 894 | 3% | **964** |
| NULL | 11 | 0.04% | 40 | 0.2% | **51** |
| **Total** | **8901** | | **17576** | | **26477** |

***Table 3.5.2***

**Age-wise Literacy Rate of Fit to work Male from total Male Population**

| Category | Literate | Literate % | Not Literate | Not Literate % | Total |
|---|---|---|---|---|---|
| Children (≤12) | 1154 | 2% | 5002 | 7% | **6156** |
| Adolescent (13-19) | 3048 | 4% | 5944 | 8% | **8992** |
| Young (20-35) | 15965 | 21% | 16823 | 22% | **32788** |
| Middle-Aged (36-60) | 8058 | 11% | 16033 | 21% | **24091** |
| Old 60+ | 679 | 0.9% | 3013 | 4% | **3692** |
| NULL | 52 | 0.07% | 106 | 0.14% | **158** |
| **Total** | **28956** | | **46921** | | **75877** |

***Table 3.5.3***

**Age-wise Literacy Rate of Fit to work PWDs from Total Male & Female Population**

| Category | Literate | Literate % | Not Literate | Not Literate % | Total |
|---|---|---|---|---|---|
| Children (<12) | 1855 | 2% | 7905 | 8% | **9760** |
| Adolescent (13-19) | 4644 | 5% | 8957 | 9% | **13601** |
| Young (20-35) | 20838 | 20% | 22491 | 22% | **43329** |
| Middle-Aged (36-60) | 9708 | 9% | 21091 | 21% | **30799** |
| Old 60+ | 749 | 0.7% | 3907 | 4% | **4656** |
| NULL | 63 | 0.1% | 146 | 0.1% | **209** |
| **Total** | **37857** | | **64497** | | **102354** |

***Table 3.5.4***
**Literacy Rate of Fit to work Females by Specific Age-Group**

| Category | Literate | Not Literate | Total | Literate % (From Each Total) | Not Literate % (From Each Total) |
|---|---|---|---|---|---|
| Children (≤12) | 701 | 2903 | 3604 | 19% | 81% |
| Adolescent (13-19) | 1596 | 3013 | 4609 | 35% | 65% |
| Young (20-35) | 4873 | 5668 | 10541 | 46% | 54% |
| Middle-Aged (36-60) | 1650 | 5058 | 6708 | 25% | 75% |
| Old 60+ | 70 | 894 | 964 | 7% | 93% |
| NULL | 11 | 40 | 51 | 22% | 78% |
| **Total** | **8901** | **17576** | **26477** | | |

***Table 3.5.5***
**Literacy Rate of Fit to work Male by Specific Age-Group**

| Category | Literate | Not Literate | Total | Literate % (From Each Total) | Not Literate % (From Each Total) |
|---|---|---|---|---|---|
| Children (≤12) | 1154 | 5002 | 6156 | 19% | 81% |
| Adolescent (13-19) | 3048 | 5944 | 8992 | 34% | 66% |
| Young (20-35) | 15965 | 16823 | 32788 | 49% | 51% |
| Middle-Aged (36-60) | 8058 | 16033 | 24091 | 33% | 67% |
| Old 60+ | 679 | 3013 | 3692 | 18% | 82% |
| NULL | 52 | 106 | 158 | 33% | 67% |
| **Total** | **28956** | **46921** | **75877** | | |

***Table 3.5.6***
**Literacy Rate of Fit to work Male & Female by Specific Age Group**

| Category | Literate | | Not Literate | | Total | Literate % (From Each Total) | | Not Literate % (From Each Total) | |
|---|---|---|---|---|---|---|---|---|---|
| | Female | Male | Female | Male | | Female | Male | Female | Male |
| Children (≤12) | 701 | 1154 | 2903 | 5002 | 9760 | 7% | 12% | 30% | 51% |
| Adolescent (13-19) | 1596 | 3048 | 3013 | 5944 | 13601 | 12% | 22% | 22% | 44% |
| Young (20-35) | 4873 | 15965 | 5668 | 16823 | 43329 | 11% | 37% | 13% | 39% |
| Middle-Aged (36-60) | 1650 | 8058 | 5058 | 16033 | 30799 | 5% | 26% | 16% | 52% |
| Old 60+ | 70 | 679 | 894 | 3013 | 4656 | 2% | 15% | 19% | 65% |
| NULL | 11 | 52 | 40 | 106 | 209 | 5% | 25% | 19% | 51% |
| **Total** | **8901** | **28956** | **17576** | **46921** | **102354** | | | | |

***Table 3.5.7***

**Categories of Literate & Fit to work PWDs in Punjab with Type of Disabilities (Male & Female)**

| Level | Type of Disability | Cause of Disability | Literate & Fit to Work | | Total (M&F) |
|---|---|---|---|---|---|
| | | | Male | Female | |
| Primary | Physically Impaired (Neuromuscular) | Cerebral palsy, Neuropathy, Myopathy, Movement Disorder, Post Polio Limb Weakness-Paralysis, Congenital, Post Infective Permanent Consequences, Stroke, Mental Retardation, Myelopathy, Congenital Bilateral, Neuromuscular problems-Congenital, Spinal Deformities-Post Traumatic, Neurodegenerative Disorder, Anterior Horn Cell Disorder, Congenital, Neuro Muscular Junction Disorder, Plexopathy, Epilepsy, Kyphoscoliosis, Radiculopathy, Amelia (congenital), Spinal Deformities-Congenital, Paraparesis, Foot Deformities-Congenital, Neuromuscular problems-Post Traumatic, Bilateral Disc Pallor, Achondroplasia, Post Trauma Weakness Motor/ Sensory, Congenital Spinal/Brain Disorder | 427 | 101 | 528 |
| | Visually Impaired | Congenital, Bilateral retinitus pigmentosa, Bilateral Nystagmus, Bilateral Maculopathy, Bilateral Atrophic Retinal Detachment, Bilateral Cone Dystrophy, Bilateral anterior staphyloma total corneal opacity with ingrowing vessels, Congenital Glaucoma, Bilateral Pthysical Eye, R.P + Nystagmus, Billateral Optic Atrophy, Bilateral Anophthalmia, bilateral Opaque Cornea, Foot and Hand Deformities-Congenital, Congenital Retinal Dystrophy Bilateral, Bilateral degenerative myopia with macular atrophy, Bilateral Enucleated Eyes Post Retinoblastoma, Bilateral Pthysical Eye with Nystagmus, Bilateral Stargardt Disease, Bilateral Vascularized corneal opacity, PDR(Proliferative diabetic retinapathy), Cortical Blindness e No response to VEP, Congenital Bilateral, Bilateral Retinal Detachment, Bilateral nystagmus with retinitus pigmentosa, Bilateral Macular Dystrophy, Bilateral Disc Pallor, Bilateral Cone Dystrophy, Bilateral Esotropia with Micro Cornea, Bilateral Atrophic Retinal Detachment, Oculocutaneous Albinism With Fovea Dysplasia, Bilatetral advanced gulucoma, Bilateral retinal degeneration, Cryptophthalmos, Bilateral comlicated ocular surgery | 542 | 139 | 681 |
| | Physically Impaired (Musculoskeletal) | Achondroplasia, Amputation-Below Elbow, Amputation-Below Knee, Amputation-Above Elbow, Amputation-Above Knee, Amputation-Lower Limb, Amputation-Upper Limb, Amelia (congenital), Atrophy, Acquired, Acquired Drug Induced, Bilatetral advanced gulucoma, Bilateral retinitus pigmentosa, Bilateral lower limb congenital, Bilateral comlicated ocular surgery, Bilateral Nystagmus, Bilateral Acquired Post-traumatic, Bilateral Anophthalmia, Bilateral Pthysical Eye, Cerebral palsy, Cerebrovascular Accident (CVA), Congenital, Congenital Anomaly, Congenital Bilateral, Cortical Blindness e No response to VEP, Congenital/acquired contractures, Congential Familial Disorders, Foot Deformities-Amputated Toes, Foot and Hand Deformities-Congenital, Foot Deformities-Congenital, Foot Deformities-Post Traumatic, Hand Absent Phocomelia, Hand Deformities-Amputated Fingers, Hand Deformities-Post Traumatic, Hand Deformities-Congenital, Neuromuscular problems-Post Traumatic, Machine Injury, Arm Amputation, Inflammatory Arthritis, Paraparesis, Post Polio Limb Weakness-Paralysis, Post Polio Limb Weakness-Paresis Deformities, Post cerebral palsy limb weakness-Paralysis, Post cerebral palsy limb weakness-Paresis Deformities, Scoliotic Ankylosis Spare, Congenital Absent Thumbs Of Left/Right Hand, Degeneratif Knee Joint (Left/Right), Diffuse Axonal injury, Dementia, Disarticulation Of Right/Left Hip, Epilepsy, Flexion Contracture of Right Knee, Flexion Contracture of Left Knee, Ischemic Contracture, Myopathy, Mental Retardation, Movement Disorder, Kyphoscoliosis, Neuromuscular problems-Congenital, Neuropathy, Pectus Excavatum, Post Infective Permanent Consequences, Osteogenesis Imperfecta, Osteomyelitis, Osteoarthritis for degenerative disease, Post Infective Permanent Consequences, Post Traumatic-Joint Deformities, Post Traumatic Ankylosis Knee, Post Traumatic-Limb Deformities, Rheumatoid Arthritis Hand Deformities, Right Leg and Left Leg Weakness, Spinal Deformities-Post Traumatic, Spinal Deformities-Congenital | 3116 | 430 | 3546 |

| Level | Type of Disability | Cause of Disability | Literate & Fit to Work Male | Literate & Fit to Work Female | Total (M&F) |
|---|---|---|---|---|---|
| | Hearing Impaired (Deaf & Dumb) | Congenital, Congenital Bilateral, Acquired Bilateral, Bilateral Acquired Post-traumatic, Epilepsy, Bilateral Acquired Post-infective, Acquired, Post Polio Limb Weakness-Paresis Deformities, Bilateral Optic Atrophy, Acquired Post-infective | 2744 | 1348 | 4092 |
| | Intellectual Disability | Congenital | 147 | 42 | 189 |
| **Total** | | | **6976** | **2060** | **9036** |

| Level | Type of Disability | Cause of Disability | Literate & Fit to Work | | Total (M&F) |
|---|---|---|---|---|---|
| | | | Male | Female | |
| **Middle** | Physically Impaired (Neuromuscular) | Cerebral palsy, Neuropathy, Stroke, Movement Disorder, Post Infective Permanent Consequences, Congenital, Neurodegenerative Disorder, Paraparesis, Mental Retardation, Neuromuscular problems-Congenital, Myelopathy, Epilepsy, Dementia, Post Traumatic-Limb Deformities, Myopathy, Bilateral Stargardt Disease, Congenital Bilateral, Congenital Spinal/Brain Disorder, Neuro Muscular Junction Disorder, Congenital, Post Polio Limb Weakness-Paralysis, Hand Deformities-Congenital, Post Tumor Surgery, Kyphoscoliosis, Neuromuscular problems-Post Traumatic, Scoliotic Ankylosis Spare, Spinal Deformities-Post Traumatic, Bilateral Nystagmus, Spinal Deformities-Congenital, Foot and Hand Deformities-Congenital, Post Traumatic-Joint Deformities, Amputation-Below Knee, Amputation-Above Knee, Congenital/acquired contractures, Foot Deformities-Congenital, Anterior Horn Cell Disorder, Radiculopathy, Demyelinating Diseases, Post Trauma Weakness Motor/ Sensory | 569 | 101 | 670 |
| | Physically Impaired (Musculoskeletal) | Achondroplasia, Amputation-Below Elbow, Amputation-Below Knee, Amputation-Above Elbow, Amputation-Above Knee, Amputation-Lower Limb, Amputation-Upper Limb, Amelia (congenital), Atrophy, Bilateral lower limb congenital contracture, Bilateral retinitus pigmentosa, Bilateral Nystagmus, Bilateral Maculopathy, Billateral Optic Atrophy, Cerebral palsy, Cerebrovascular Accident (CVA), Congenital, Congenital Anomaly, Congenital Bilateral, Congenital/acquired contractures, Foot Deformities-Amputated Toes, Foot and Hand Deformities-Congenital, Foot Deformities-Congenital, Foot Deformities-Post Traumatic, Hand Absent Phocomelia, Hand Deformities-Amputated Fingers, Hand Absent Phocomelia, Hand Deformities-Post Traumatic, Hand Deformities-Congenital, Neuromuscular problems-Post Traumatic, Machine Injury, Arm Amputation, Inflammatory Arthritis, Paraparesis, Post Polio Limb Weakness-Paralysis, Post Polio Limb Weakness-Paresis Deformities, Post cerebral palsy limb weakness-Paralysis, Post cerebral palsy limb weakness-Paresis Deformities, Scoliotic Ankylosis Spare, Congenital Absent Thumbs Of Left/Right Hand, Degeneratif Knee Joint (Left/Right), Diffuse Axonal injury, Dementia, Disarticulation Of Right/Left Hip, Epilepsy, Flexion Contracture of Right Knee, Friquent need of blood transfusion, Flexion Contracture of Left Knee, Ischemic Contracture, Myelopathy, Myopathy, Movement Disorder, Kyphoscoliosis, Neuromuscular problems-Congenital, KlippeL-Feil Syndrome, Neuropathy, Post Infective Permanent Consequences, Osteogenesis Imperfecta, Osteomyelitis, Post Sciatic Injury, Osteoarthritis for degenerative disease, Post Traumatic-Joint Deformities, Post Traumatic Ankylosis Knee, Post Traumatic-Limb Deformities, Radiculopathy, Rheumatoid Arthritis Hand Deformities, Right Leg and Left Leg Weakness, Spinal Deformities-Post Traumatic, Spinal Deformities-Congenital, Pectus Excavatum | 5419 | 607 | 6026 |

| | | | | | |
|---|---|---|---|---|---|
| Middle | Hearing Impaired (Deaf & Dumb) | Congenital, Congenital Bilateral, Acquired Bilateral, Acquired, Bilateral Acquired Post-traumatic, Bilateral Acquired Post-infective, Acquired Post-infective, Foot and Hand Deformities-Congenital, Bilateral Acquired Snile, Bilateral Acquired Drug Induced | 1170 | 557 | 1727 |
| | Visually Impaired | Bilateral retinitus pigmentosa, Congenital Glaucoma, Congenital, Bilateral Macular Dystrophy, Bilateral nystagmus with retinitus pigmentosa, Bilateral Pthysical Eye, Cortical Blindness e No response to VEP, Bilateral Maculopathy, Bilateral Esotropia with Micro Cornea, Billateral Optic Atrophy, Bilateral Nystagmus, bilateral Opaque Cornea, Bilateral Anophthalmia, Bilateral Stargardt Disease, Bilateral Atrophic Retinal Detachment, Bilateral Macular Dystrophy With Hyperpigmented Central Macular Scarring, Bilateral degenerative myopia with macular atrophy, Bilateral Macular scarring, Bilateral Cone Dystrophy, Oculocutaneous Albinism With Fovea Dysplasia, Congenital Retinal Dystrophy Bilateral, R.P + Nystagmus, Bilateral Vascularized corneal opacity, Bilateral Disc Pallor, Bilateral Pthysical Eye with Nystagmus, Myopathy, Bilateral Retinal Detachment, Bilateral retinal degeneration, Foot Deformities-Congenital, Bilatetral advanced gulucoma, Bilateral anterior staphyloma total corneal opacity with ingrowing vessels, PDR(Proliferative diabetic retinapathy), Bilateral comlicated ocular surgery | 628 | 130 | 758 |
| | Intellectual Disability | Congenital | 44 | 4 | 48 |
| **Total** | | | **7830** | **1399** | **9229** |

| Level | Type of Disability | Cause of Disability | Literate & Fit to Work | | Total (M&F) |
|---|---|---|---|---|---|
| | | | Male | Female | |
| **Matric** | Physically Impaired (Neuromuscular) | Congenital, Epilepsy, Cerebral palsy, Post Infective Permanent Consequences, Post Polio Limb Weakness-Paralysis, Demyelinating Diseases, Myopathy, Achondroplasia, Spinal Deformities-Congenital, Movement Disorder, Mental Retardation, Stroke, Neuro Muscular Junction Disorder, Neuromuscular problems-Congenital, Plexopathy, Neuropathy, Post Trauma Weakness Motor/ Sensory, Myelopathy, Bilateral Nystagmus, Neuromuscular problems-Post Traumatic, Congenital Bilateral, Anterior Horn Cell Disorder, Neurodegenerative Disorder, Post Traumatic -Limb Deformities, Radiculopathy, Kyphoscoliosis, Paraparesis, Cerebrovascular Accident (CVA), Foot Deformities-Congenital, Hand Deformities-Amputated Fingers, Congenital/acquired contractures, Hand Deformities-Congenital, Amputation-Above Knee, Ischemic Contracture, Spinal Deformities-Post Traumatic, Post Tumor Surgery, Dementia | 533 | 167 | 700 |
| | Hearing Impaired (Deaf & Dumb) | Congenital, Congenital Bilateral, Acquired Bilateral, Acquired, Bilateral Acquired Post-traumatic, Epilepsy | 1060 | 671 | 1731 |
| | Intellectual Disability | Congenital | 26 | 9 | 35 |
| | | Achondroplasia, Amputation-Below Elbow, Amputation-Below Knee, Amputation-Above Elbow, Amputation-Above Knee, Amputation-Lower Limb, Amputation-Upper Limb, Amelia (congenital), Atrophy, Bilateral lower limb congenital, Bilateral Maculopathy, Bilateral retinitus pigmentosa, Cerebral palsy, Cerebrovascular Accident (CVA), Congenital, Congenital Anomaly, Congenital Bilateral, Congenital/acquired contractures, Congential Familial Disorders, Foot Deformities-Amputated Toes, Foot and Hand Deformities-Congenital, Foot Deformities-Congenital, Foot Deformities-Post Traumatic, Hand Absent Phocomelia, Hand Deformities-Amputated Fingers, Hand Deformities-Post Traumatic, Hand Deformities-Congenital, Neuromuscular problems-Post Traumatic, Machine Injury, Arm Amputation, Inflammatory Arthritis, Paraparesis, | | | |

| | | | | | |
|---|---|---|---|---|---|
| **Matric** | Physically Impaired (Musculoskeletal) | Plexopathy, Post Polio Limb Weakness-Paralysis, Post Polio Limb Weakness-Paresis Deformities, Post cerebral palsy limb weakness-Paralysis, Post cerebral palsy limb weakness-Paresis Deformities, Scoliotic Ankylosis Spare, Congenital Absent Thumbs Of Left/Right Hand, Degeneratif Knee Joint (Left/Right), Diffuse Axonal injury, Disarticulation Of Right/Left Hip, Epilepsy, Flexion Contracture of Right Knee, Friquent need of blood transfusion, Flexion Contracture of Left Knee, Ischemic Contracture, Myopathy, Movement Disorder, Kyphoscoliosis, Neuromuscular problems-Congenital, Post Infective Permanent Consequences, Osteogenesis Imperfecta, Osteomyelitis, Post Sciatic Injury, Osteoarthritis for degenerative disease, Post Traumatic-Joint Deformities, Post Traumatic Ankylosis Knee, Post Traumatic-Limb Deformities, Radiculopathy, Rheumatoid Arthritis Hand Deformities, Right Leg and Left Leg Weakness, Spinal Deformities-Post Traumatic, Spinal Deformities-Congenital, Meningomyelocele, Oculocutaneous Albinism With Fovea Dysplasia, Stroke, Demyelinating Diseases, Pectus Excavatum, Cortical Blindness e No response to VEP, bilateral Opaque Cornea, Bilateral Acquired Post-infective, KlippeL-Feil Syndrome | 5727 | 1076 | 6803 |
| | Visually Impaired | Bilateral retinitus pigmentosa, Congenital, Bilateral Maculopathy, Bilateral Macular Dystrophy With Hyperpigmented Central Macular Scarring, Congenital Glaucoma, Cortical Blindness e No response to VEP, Billateral Optic Atrophy, Bilateral Nystagmus, R.P + Nystagmus, Congenital Retinal Dystrophy Bilateral, bilateral Opaque Cornea, Bilateral Pthysical Eye, Bilateral retinal degeneration, Bilatetral advanced gulucoma, Bilateral Pthysical Eye with Nystagmus, Oculocutaneous Albinism With Fovea Dysplasia, Bilateral degenerative myopia with macular atrophy, Bilateral Anophthalmia, Bilateral Esotropia with Micro Cornea, PDR(Proliferative diabetic retinapathy), Bilateral Atrophic Retinal Detachment, Bilateral Vascularized corneal opacity, Bilateral nystagmus with retinitus pigmentosa, Bilateral inverse hypopyon due to silicon oil with band Keratopathy and Retinal Detachement on R B-Scan, Bilateral Macular Dystrophy, Bilateral Disc Pallor, Bilateral Onophtholnos, Bilateral Macular scarring, Bilateral comlicated ocular surgery, Bilateral | 591 | 136 | 727 |
| | | Stargardt Disease, Bilateral Retinal Detachment, Bilateral comlicated Retinal surgeries, Bilateral Cone Dystrophy | | | |
| **Total** | | | **7937** | **2059** | **9996** |

| Level | Type of Disability | Cause of Disability | Literate & Fit to Work | | Total (M&F) |
|---|---|---|---|---|---|
| | | | Male | Female | |
| | Physically Impaired (Neuromuscular) | Cerebral palsy, Congenital, Epilepsy, Neuropathy, Plexopathy, Paraparesis, Post Infective Permanent Consequences, Stroke, Myelopathy, Post Traumatic-Limb Deformities, Movement Disorder, Neuromuscular problems-Congenital, Kyphoscoliosis, Myopathy, Foot Deformities-Congenital, Neurodegenerative Disorder, Congenital Bilateral, Hand Deformities-Congenital, Anterior Horn Cell Disorder, Demyelinating Diseases, Mental Retardation, Post Polio Limb Weakness-Paralysis, Neuro Muscular Junction Disorder, Post Trauma Weakness Motor/ Sensory, Neuromuscular problems-Post Traumatic, Radiculopathy, Cerebrovascular Accident (CVA), Spinal Deformities-Congenital, Hand Deformities-Amputated Fingers, Congenital/acquired contractures, Achondroplasia, Amputation-Above Knee, Ischemic Contracture, Spinal Deformities-Post Traumatic, Hand Deformities-Post Traumatic, Post Tumor Surgery, Dementia, Post Segenerative Spinal Surgery, Bilateral Nystagmus, Scoliotic Ankylosis Spare, Post Traumatic-Joint Deformities | 235 | 119 | 354 |
| **Intermediate** | | Achondroplasia, Amputation-Below Elbow, Amputation-Below Knee, Amputation-Above Elbow, Amputation-Above Knee, Amputation-Lower Limb, Amputation-Upper Limb, Amelia (congenital), Atrophy, Acquired, Bilateral lower limb congenital contracture, Bilateral Macular Dystrophy, Cerebral palsy, Cerebrovascular Accident (CVA), Congenital, Congenital Anomaly, | | | |

| | | | | | |
|---|---|---|---|---|---|
| **Intermediate** | Physically Impaired (Musculoskeletal) | Congenital Bilateral, Congenital/acquired contractures, Congential Familial Disorders, Foot Deformities-Amputated Toes, Foot and Hand Deformities-Congenital, Foot Deformities-Congenital, Foot Deformities-Post Traumatic, Hand Absent Phocomelia, Hand Deformities-Amputated Fingers, Hand Deformities-Post Traumatic, Hand Deformities-Congenital, Neuromuscular problems-Post Traumatic, Machine Injury, Arm Amputation, Inflammatory Arthritis, Paraparesis, Plexopathy, Post Polio Limb Weakness-Paralysis, Post Polio Limb Weakness-Paresis Deformities, Post cerebral palsy limb weakness-Paralysis, Post cerebral palsy limb weakness-Paresis Deformities, Scoliotic Ankylosis Spare, Congenital Absent Thumbs Of Left/Right Hand, Degeneratif Knee Joint (Left/Right), Diffuse Axonal injury, Disarticulation Of Right/Left Hip, Flexion Contracture of Right Knee, Friquent need of blood transfusion, Flexion Contracture of Left Knee, Ischemic Contracture, Hydro cephalus, Myopathy, Movement Disorder, Kyphoscoliosis, Neuromuscular problems-Congenital, Neuropathy, Post Infective Permanent Consequences, Osteogenesis Imperfecta, Osteomyelitis, Post Sciatic Injury, Osteoarthritis for degenerative disease, Post Traumatic-Joint Deformities, Post Traumatic Ankylosis Knee, Post Traumatic-Limb Deformities, Rheumatoid Arthritis Hand Deformities, Right Leg and Left Leg Weakness, Spinal Deformities-Post Traumatic, Spinal Deformities-Congenital, Neurodegenerative Disorder, Pectus Excavatum, KlippeL-Feil Syndrome | 2337 | 908 | 3245 |
| **Intermediate** | Hearing Impaired (Deaf & Dumb) | Congenital, Congenital Bilateral, Bilateral Acquired Post-infective, Post Polio Limb Weakness-Paresis Deformities, Epilepsy, Acquired, Acquired Bilateral, Bilateral Acquired Post-traumatic, Acquired Post-infective | 300 | 187 | 487 |
| | Visually Impaired | Bilateral Vascularized corneal opacity, Bilateral retinitus pigmentosa, Congenital, Bilateral Pthysical Eye, Bilateral nystagmus, bilateral Opaque Cornea, Billateral Optic Atrophy, Cortical Blindness e No response to VEP, Bilateral Atrophic Retinal Detachment, Congenital Glaucoma, R.P + Nystagmus, Bilateral Anophthalmia, Bilateral Esotropia with Micro Cornea, Oculocutaneous Albinism With Fovea Dysplasia, Bilateral Maculopathy, Bilateral retinal degeneration, Congenital Retinal Dystrophy Bilateral, Bilateral Stargardt Disease, Bilateral Nystagmus, Bilateral Pthysical Eye with Nystagmus, Bilateral Retinal Detachment, Bilateral Macular scarring, Bilateral Disc Pallor, Bilateral Cone Dystrophy, Bilateral degenerative myopia with macular atrophy, Bilatetral advanced gulucoma, Bilateral nystagmus with retinitus pigmentosa, Bilateral Macular Dystrophy With Hyperpigmented Central Macular Scarring, Bilateral Macular Dystrophy | 322 | 97 | 419 |
| | Intellectual Disability | Congenital | 8 | 5 | 13 |
| **Total** | | | **3202** | **1316** | **4518** |

| Level | Type of Disability | Cause of Disability | Literate & Fit to Work | | Total (M&F) |
|---|---|---|---|---|---|
| | | | Male | Female | |
| **Graduation** | Physically Impaired (Neuromuscular) | Cerebral palsy, Congenital, Neuropathy, Plexopathy, Paraparesis, Post Infective Permanent Consequences, Stroke, Myelopathy, Post Traumatic-Limb Deformities, Movement Disorder, Neuromuscular problems-Congenital, Kyphoscoliosis, Myopathy, Neurodegenerative Disorder, Anterior Horn Cell Disorder, Demyelinating Diseases, Mental Retardation, Bilateral retinitus | 136 | 65 | 201 |

| | | | | | |
|---|---|---|---|---|---|
| | | pigmentosa, Scoliotic Ankylosis Spare, Billateral Optic Atrophy, Neurodegenerative Disorder, Neuro Muscular Junction Disorder, Radiculopathy, Post Polio Limb Weakness-Paralysis, Atrophy, Neuromuscular problems-Post Traumatic, Cerebrovascular Accident (CVA), Post Traumatic-Joint Deformities | | | |
| | Hearing Impaired (Deaf & Dumb) | Congenital, Congenital Bilateral, Acquired Bilateral, Acquired, Acquired Post-infective | 130 | 48 | 178 |
| | Visually Impaired | Bilateral Vascularized corneal opacity, Bilateral retinitus pigmentosa, Congenital, Bilateral Pthysical Eye, Bilateral nystagmus, bilateral Opaque Cornea, Billateral Optic Atrophy, Cortical Blindness e No response to VEP, Congenital Glaucoma, Bilateral Esotropia with Micro Cornea, Oculocutaneous Albinism With Fovea Dysplasia, Bilateral Maculopathy, Bilateral retinal degeneration, Congenital Retinal Dystrophy Bilateral, Bilateral Stargardt Disease, Bilateral Macular Dystrophy, Congenital Bilateral, Bilatetral advanced gulucoma, Bilateral degenerative myopia with macular atrophy, Bilateral Enucleated Eyes Post Retinoblastoma, Bilateral Cone Dystrophy, Retinal Nerve Fiber Layer Thinning, Bilateral Disc Pallor, Bilateral Macular scarring, Bilateral Retinal Detachment, Bilateral comlicated ocular surgery, Bilateral Macular Dystrophy With Hyperpigmented Central Macular Scarring Congenital | 207 | 82 | 289 |
| | Intellectual Disability | | 3 | 1 | 4 |
| **Graduation** | Physically Impaired (Musculoskeletal) | Achondroplasia, Amputation-Below Elbow, Amputation-Below Knee, Amputation-Above Elbow, Amputation-Above Knee, Amputation-Lower Limb, Amputation-Upper Limb, Amelia (congenital), Atrophy, Bilateral lower limb congenital, Cerebral palsy, Cerebrovascular Accident (CVA), Congenital, Congenital Anomaly, Congenital/acquired contractures, Congential Familial Disorders, Foot Deformities-Amputated Toes, Foot and Hand Deformities-Congenital, Foot Deformities-Congenital, Foot Deformities-Post Traumatic, Hand Deformities-Amputated Fingers, Hand Deformities-Post Traumatic, Hand Deformities-Congenital, Neuromuscular problems-Post Traumatic, Machine Injury, Arm Amputation, Inflammatory Arthritis, Paraparesis, Plexopathy, Post Polio Limb Weakness-Paralysis, Post Polio Limb Weakness-Paresis Deformities, Post cerebral palsy limb weakness-Paralysis, Post cerebral palsy limb weakness-Paresis Deformities, Scoliotic Ankylosis Spare, Congenital Absent Thumbs Of Left/Right Hand, Degeneratif Knee Joint (Left/Right), Diffuse Axonal injury, Disarticulation Of Right/Left Hip, Epilepsy, Flexion Contracture of Right Knee, Friquent need of blood transfusion, Flexion Contracture of Left Knee, Ischemic Contracture, Myopathy, Movement Disorder, Kyphoscoliosis, Neuromuscular | 1351 | 773 | 2124 |
| | | problems-Congenital, Neuropathy, Osteogenesis Imperfecta, Osteomyelitis, Post Sciatic Injury, Osteoarthritis for degenerative disease, Post Traumatic-Joint Deformities, Post Traumatic Ankylosis Knee, Post Traumatic-Limb Deformities, Radiculopathy, Rheumatoid Arthritis Hand Deformities, Right Leg and Left Leg Weakness, Spinal Deformities-Post Traumatic, Spinal Deformities-Congenital, Post Tumor Surgery, Stroke, Mental Retardation, Lower Limb Deformity | | | |
| **Total** | | | **1827** | **969** | **2796** |

| Level | Type of Disability | Cause of Disability | Literate & Fit to Work | | Total (M&F) |
|---|---|---|---|---|---|
| | | | Male | Female | |
| Masters (16 Years) | Physically Impaired (Neuromuscular) | Cerebral palsy, Congenital, Post Segenerative Spinal Surgery, Post Polio Limb Weakness-Paralysis, Epilepsy, Neuropathy, Plexopathy, Paraparesis, Post Infective Permanent Consequences, Stroke, Myelopathy, Post Traumatic-Limb Deformities, Movement Disorder, Neuromuscular problems-Congenital, Myopathy, Neurodegenerative Disorder, Demyelinating Diseases, Mental Retardation, Scoliotic Ankylosis Spare, Neuro Muscular Junction Disorder, Post Trauma Weakness Motor/ Sensory, Foot Deformities-Post Traumatic, Radiculopathy | 85 | 45 | 130 |
| | Hearing Impaired (Deaf & Dumb) | Congenital, Congenital Bilateral, Acquired Bilateral, Acquired Post-infective, Acquired | 38 | 17 | 55 |
| | Intellectual Disability | Congenital | 4 | 0 | 4 |
| | Physically Impaired (Musculoskeletal) | Achondroplasia, Amputation-Below Elbow, Amputation-Below Knee, Amputation-Above Elbow, Amputation-Above Knee, Amputation-Lower Limb, Amputation-Upper Limb, Atrophy, Acquired, Bilateral lower limb congenital, Bilateral retinitus pigmentosa, Cerebral palsy, Cerebrovascular Accident (CVA), Congenital, Congenital Anomaly, Congenital/acquired contractures, Congential Familial Disorders, Foot Deformities-Amputated Toes, Foot and Hand Deformities-Congenital, Foot Deformities-Congenital, Foot Deformities-Post Traumatic, Hand Deformities-Amputated Fingers, Hand Deformities-Post Traumatic, Hand Deformities-Congenital, Neuromuscular problems-Post Traumatic, Machine Injury, Arm Amputation, Inflammatory Arthritis, Paraparesis, Plexopathy, Post Polio Limb Weakness-Paralysis, Post Polio Limb Weakness-Paresis Deformities, Post cerebral palsy limb weakness-Paralysis, Post cerebral palsy limb weakness-Paresis Deformities, Scoliotic Ankylosis Spare, Congenital Absent Thumbs Of Left/Right Hand, Degeneratif Knee Joint (Left/Right), Disarticulation Of Right/Left Hip, Friquent need of blood transfusion, Flexion Contracture of Left Knee, Ischemic Contracture, Myopathy, Kyphoscoliosis, Neuromuscular problems-Congenital, Osteogenesis Imperfecta, Osteoarthritis for degenerative disease, Post Traumatic-Joint Deformities, Post Traumatic Ankylosis Knee, Post Traumatic- | 707 | 493 | 1200 |
| Masters (16 Years) | | Limb Deformities, Rheumatoid Arthritis Hand Deformities, Right Leg and Left Leg Weakness, Spinal Deformities-Post Traumatic, Spinal Deformities-Congenital, bilateral Opaque Cornea | | | |
| | Visually Impaired | Congenital, Bilateral retinitus pigmentosa, Bilateral Maculopathy, R.P + Nystagmus, Bilateral Pthysical Eye, Bilateral Nystagmus, Billateral Optic Atrophy, Congenital Glaucoma, Bilatetral advanced gulucoma, Bilateral Cone Dystrophy, Bilateral Macular scarring, Bilateral Macular Dystrophy, Bilateral comlicated ocular surgery, Bilateral Enucleated Eyes Post Retinoblastoma, bilateral Opaque Cornea, Cortical Blindness e No response to VEP, PDR(Proliferative diabetic retinapathy), Bilateral degenerative myopia with macular atrophy, Bilateral retinal degeneration, Bilateral Disc Pallor, Bilateral Stargardt Disease, Oculocutaneous Albinism With Fovea Dysplasia, Bilateral Esotropia with Micro Cornea, Bilateral Retinal Detachment, Retinal Nerve Fiber Layer Thinning, Congenital Retinal Dystrophy Bilateral, Bilateral nystagmus with retinitus pigmentosa, Bilateral Vascularized corneal opacity | 156 | 66 | 222 |
| **Total** | | | **990** | **621** | **1611** |

| Level | Type of Disability | Cause of Disability | Literate & Fit to Work | | Total (M&F) |
|---|---|---|---|---|---|
| | | | Male | Female | |
| **MPhil (18 Years)** | Physically Impaired (Neuromuscular) | Post Polio Limb Weakness-Paralysis, Cerebral palsy, Demyelinating Diseases, Myelopathy, Congenital, Stroke, Movement Disorder, Radiculopathy, Myopathy | 17 | 7 | 24 |
| | Visually Impaired | Bilateral Nystagmus, Bilateral Macular Dystrophy, Congenital, Cortical Blindness e No response to VEP, Bilateral Pthysical Eye, Bilateral retinitus pigmentosa, Billateral Optic Atrophy, Bilateral Maculopathy, Bilatetral advanced gulucoma, Oculocutaneous Albinism With Fovea Dysplasia, Congenital Glaucoma, Bilateral | 33 | 11 | 44 |
| | | Vascularized corneal opacity, Bilateral nystagmus with retinitus pigmentosa, Bilateral degenerative myopia with macular atrophy, Bilateral anterior staphyloma total corneal opacity with ingrowing vessels, PDR(Proliferative diabetic retinapathy) | | | |
| **MPhil (18 Years)** | Physically Impaired (Musculoskeletal) | Foot Deformities-Congenital, Achondroplasia, Amputation-Above Knee, Amputation-Below Elbow, Amputation-Below Knee, Amputation-Lower Limb, Amputation-Upper Limb, Amelia (congenital), Atrophy, Bilateral lower limb congenital, Congenital/acquired contractures, Hand Deformities-Congenital, Inflammatory Arthritis, Myopathy, Movement Disorder, Kyphoscoliosis, Neuromuscular problems-Congenital, Neuromuscular problems-Post Traumatic, Post Polio Limb Weakness-Paralysis, Post Polio Limb Weakness-Paresis Deformities, Post Traumatic-Joint Deformities, Post Traumatic Ankylosis Knee, Post Traumatic-Limb Deformities, Right Leg and Left Leg Weakness, Spinal Deformities-Post Traumatic, Spinal Deformities-Congenital, Osteomyelitis, Paraparesis, Hand Deformities-Amputated Fingers, Foot Deformities-Amputated Toes, Rheumatoid Arthritis Hand Deformities, KlippeL-Feil Syndrome | 94 | 49 | 143 |
| | Hearing Impaired (Deaf & Dumb) | Congenital Bilateral, Congenital, Acquired | 10 | 9 | 19 |
| **Total** | | | **154** | **76** | **230** |
| **Grand Total** | | | **28916** | **8500** | **37416** |

***Table 3.6.1***
**Age Wise Literacy Rate of Not-Fit to work Females from total Female Population**

| Category | Literate | Literate % | Not Literate | Not Literate % | Total |
|---|---|---|---|---|---|
| Children (≤12) | 166 | 1% | 3851 | 16% | **4017** |
| Adolescent (13-19) | 315 | 1% | 3429 | 14% | **3744** |
| Young (20-35) | 1212 | 5% | 6508 | 26% | **7720** |
| Middle-Aged (36-60) | 854 | 3% | 5886 | 24% | **6740** |
| Old 60+ | 110 | 0.4% | 2248 | 9% | **2358** |
| NULL | 5 | 0.02% | 32 | 0.1% | **37** |
| **Total** | **2662** | | **21954** | | **24616** |

***Table 3.6.2***
**Age Wise Literacy Rate of Not-Fit to work Male from total Male Population**

| Category | Literate | Literate % | Not Literate | Not Literate % | Total |
|---|---|---|---|---|---|
| Children (≤12) | 319 | 0.5% | 6691 | 11% | **7010** |
| Adolescent (13-19) | 675 | 1% | 7048 | 12% | **7723** |
| Young (20-35) | 4313 | 7% | 14267 | 24% | **18580** |
| Middle-Aged (36-60) | 4455 | 7% | 14809 | 25% | **19264** |
| Old 60+ | 1179 | 2% | 5792 | 10% | **6971** |
| NULL | 13 | 0.02% | 83 | 0.14% | **96** |
| **Total** | **10954** | | **48690** | | **59644** |

***Table 3.6.3***
**Literacy Rate of Not-Fit to work PWDs from total Male & Female Population**

| Category | Literate | Literate % | Not Literate | Not Literate % | Total |
|---|---|---|---|---|---|
| Children (≤12) | 485 | 1% | 10542 | 13% | **11027** |
| Adolescent (13-19) | 990 | 1% | 10477 | 12% | **11467** |
| Young (20-35) | 5525 | 7% | 20775 | 25% | **26300** |
| Middle-Aged (36-60) | 5309 | 6% | 20695 | 25% | **26004** |
| Old 60+ | 1289 | 1.5% | 8040 | 10% | **9329** |
| NULL | 18 | 0.02% | 115 | 0.14% | **133** |
| **Total** | **13616** | | **70644** | | **84260** |

***Table 3.6.4***

**Literacy Rate of Not-Fit to work Females by Age-Group in Punjab**

| Category | Literate | Not Literate | Total | Literate % (From Each Total) | Not Literate % (From Each Total) |
|---|---|---|---|---|---|
| Children (≤12) | 166 | 3851 | 4017 | 4% | 96% |
| Adolescent (13-19) | 315 | 3429 | 3744 | 8% | 92% |
| Young (20-35) | 1212 | 6508 | 7720 | 16% | 84% |
| Middle-Aged (36-60) | 854 | 5886 | 6740 | 13% | 87% |
| Old 60+ | 110 | 2248 | 2358 | 5% | 95% |
| NULL | 5 | 32 | 37 | 14% | 86% |
| **Total** | **2662** | **21954** | **24616** | | |

***Table 3.6.5***

**Literacy Rate of Not-Fit to work Males by Age-Group in Punjab**

| Category | Literate | Not Literate | Total | Literate % (From Each Total) | Not Literate % (From Each Total) |
|---|---|---|---|---|---|
| Children (≤12) | 319 | 6691 | 7010 | 5% | 95% |
| Adolescent (13-19) | 675 | 7048 | 7723 | 9% | 91% |
| Young (20-35) | 4313 | 14267 | 18580 | 23% | 77% |
| Middle-Aged (36-60) | 4455 | 14809 | 19264 | 23% | 77% |
| Old 60+ | 1179 | 5792 | 6971 | 17% | 83% |
| NULL | 13 | 83 | 96 | 14% | 86% |
| **Total** | **10954** | **48690** | **59644** | | |

***Table 3.6.6***

**Literacy Rate of Not Fit to work PWDs by Age Group (Male & Female)**

| Category | Literate | | Not Literate | | Total | Literate % (From Each Total) | | Not Literate % (From Each Total) | |
|---|---|---|---|---|---|---|---|---|---|
| | Female | Male | Female | Male | | Female | Male | Female | Male |
| Children (≤12) | 166 | 319 | 3851 | 6691 | 11027 | 2% | 3% | 35% | 61% |
| Adolescent (13-19) | 315 | 675 | 3429 | 7048 | 11467 | 3% | 6% | 30% | 61% |
| Young (20-35) | 1212 | 4313 | 6508 | 14267 | 26300 | 5% | 16% | 25% | 54% |
| Middle-Aged (36-60) | 854 | 4455 | 5886 | 14809 | 26004 | 3% | 17% | 23% | 57% |
| Old 60+ | 110 | 1179 | 2248 | 5792 | 9329 | 1.2% | 13% | 24% | 62% |
| NULL | 5 | 13 | 32 | 83 | 133 | 3.8% | 10% | 24% | 62% |
| **Total** | **2662** | **10954** | **21954** | **48690** | **84260** | | | | |

***Table 3.6.7***

**Categories of Literate but Not Fit to work PWDs in Punjab with Type of Disabilities (Male & Female)**

| Level | Type of Disability | Cause of Disability | Literate but Not Fit to Work | | Total (M& F) |
|---|---|---|---|---|---|
| | | | Male | Female | |
| Primary | Physically Impaired (Neuromuscular) | Cerebral palsy, Neuropathy, Myopathy, Movement Disorder, Post Polio Limb Weakness-Paralysis, Post Infective Permanent Consequences, Stroke, Mental Retardation, Myelopathy, Congenital Bilateral, Neuromuscular problems - Congenital, Demyelinating Diseases, Down Syndrome, Neurodegenerative Disorder, Anterior Horn Cell Disorder, Congenital, Neuro Muscular Junction Disorder, Plexopathy, Epilepsy, Kyphoscoliosis, Paraparesis, Foot Deformities-Congenital, Post Trauma Weakness Motor/ Sensory, Cerebrovascular Accident (CVA), Dementia, Congenital Anomaly, Foot and Hand Deformities-Congenital, Right Leg and Left Leg Weakness | 718 | 222 | 940 |
| | Physically Impaired (Musculoskeletal) | Achondroplasia, Amputation-Below Elbow, Amputation-Below Knee, Amputation-Above Elbow, Amputation-Above Knee, Amputation-Lower Limb, Amputation-Upper Limb, Amelia (congenital), Atrophy, Bilateral lower limb congenital contracture, Cerebral palsy, Cerebrovascular Accident (CVA), Congenital, Congenital Anomaly, Congenital/acquired contractures, Congential Familial Disorders, Foot Deformities-Amputated Toes, Foot and Hand Deformities-Congenital, Foot Deformities-Congenital, Foot Deformities-Post Traumatic, Hydro cephalus, Hand Absent Phocomelia, Hand Deformities-Amputated Fingers, Hand Deformities-Post Traumatic, Hand Deformities-Congenital, Neuromuscular problems-Post Traumatic, Machine Injury, Arm Amputation, Inflammatory Arthritis, Paraparesis, Post Polio Limb Weakness-Paralysis, Post Polio Limb Weakness-Paresis Deformities, Post cerebral palsy limb weakness-Paralysis, Post cerebral palsy limb weakness - Paresis Deformities, Scoliotic Ankylosis Spare, Congenital Absent Thumbs Of Left/Right Hand, Degeneratif Knee Joint (Left/Right), Disarticulation Of Right/Left Hip, Flexion Contracture of Right Knee, Flexion Contracture of Left Knee, Friquent need of blood transfusion, Ischemic Contracture, Myopathy, KlippeL-Feil Syndrome, Kyphoscoliosis, Neuromuscular problems-Congenital, Pectus Excavatum, Osteogenesis Imperfecta, Osteomyelitis, Osteoarthritis for degenerative disease, Post Traumatic-Joint Deformities, Post Traumatic Ankylosis Knee, Post Traumatic-Limb Deformities, Rheumatoid Arthritis Hand Deformities, Right Leg and Left Leg Weakness, Spinal Deformities-Post Traumatic, Spinal Deformities-Congenital, Plexopathy, Post Sciatic Injury, Post Trauma Weakness Motor/ Sensory | 1587 | 335 | 1922 |
| Primary | Hearing Impaired (Deaf & Dumb) | Congenital, Congenital Bilateral, Acquired Bilateral, Bilateral Acquired Post-traumatic, Bilateral Acquired Snile, Bilateral Acquired Post-infective | 435 | 158 | 593 |
| | Visually Impaired | Congenital, Bilateral retinitus pigmentosa, Bilateral Nystagmus, Bilateral Maculopathy, Bilateral Atrophic Retinal Detachment, Bilateral Cone Dystrophy, Congenital Glaucoma, Bilateral Pthysical Eye, R.P + Nystagmus, Billateral Optic Atrophy, Bilateral Anophthalmia, bilateral Opaque Cornea, Congenital Retinal Dystrophy Bilateral, Bilateral degenerative myopia with macular atrophy, Bilateral Pthysical Eye with Nystagmus, Bilateral Stargardt Disease, Bilateral Vascularized corneal opacity, PDR(Proliferative diabetic retinapathy), Cortical Blindness e No response to VEP, Bilateral Retinal Detachment, Bilateral nystagmus with retinitus pigmentosa, Bilateral Macular Dystrophy, Oculocutaneous Albinism With Fovea Dysplasia, Bilatetral advanced gulucoma, Bilateral retinal degeneration, Cryptophthalmos, Bilateral Macular scarring | 326 | 109 | 435 |
| | Intellectual Disability | Congenital | 151 | 56 | 207 |
| **Total** | | | **3217** | **880** | **4097** |

| Level | Type of Disability | Cause of Disability | Literate but Not Fit to Work | | Total (M&F) |
|---|---|---|---|---|---|
| | | | Male | Female | |
| Middle | Physically Impaired (Neuromuscular) | Amputation-Lower Limb, Atrophy, Cerebral palsy, Neuropathy, Myopathy, Movement Disorder, Post Polio Limb Weakness -Paralysis, Congenital, Post Infective Permanent Consequences, Stroke, Mental Retardation, Myelopathy, Neuromuscular problems -Congenital, Demyelinating Diseases, Neurodegenerative Disorder, Anterior Horn Cell Disorder, Neuro Muscular Junction Disorder, Epilepsy, Kyphoscoliosis, Radiculopathy, Spinal Deformities-Congenital, Foot Deformities-Congenital, Neuromuscular problems-Post Traumatic, Paraparesis, Post Trauma Weakness Motor/ Sensory, Post Traumatic -Limb Deformities, Cerebrovascular Accident (CVA), Post Segenerative Spinal Surgery, Right Leg and Left Leg Weakness, Hand Deformities -Post Traumatic, Post Polio Limb Weakness-Paresis Deformities, Ischemic Contracture | 499 | 106 | 605 |
| | Visually Impaired | Congenital, Bilateral retinitus pigmentosa, Bilateral Nystagmus, Bilateral Maculopathy, Bilateral Atrophic Retinal Detachment, Bilateral Cone Dystrophy, Congenital Glaucoma, Bilateral Pthysical Eye, R.P + Nystagmus, Billateral Optic Atrophy, Bilateral Anop hthalmia, bilateral Opaque Cornea, Congenital Retinal Dystrophy Bilateral, Bilateral degenerative myopia with macular atrophy, Bilateral Vascularized corneal opacity, PDR(Proliferative diabetic retinapathy), Cortical Blindness e No response to VEP, Bilater al Retinal Detachment, Bilateral nystagmus with retinitus pigmentosa, Bilateral Macular Dystrophy, Bilateral Disc Pallor, Bilateral Cone Dystrophy, Bilateral Esotropia with Micro Cornea, Oculocutaneous Albinism With Fovea Dysplasia, Bilatetral advanced gulucoma, Bilateral retinal degeneration, Cryptophthalmos, Bilateral comlicated ocular surgery, Bilateral Macular Dystrophy With Hyperpigmented Central Macular Scarring | 339 | 46 | 385 |
| Middle | Physically Impaired (Musculoskeletal) | Achondroplasia, Amputation-Below Elbow, Amputation-Below Knee, Amputation-Above Elbow, Amputation-Above Knee, Amputation-Lower Limb, Amputation-Upper Limb, Amelia (congenital), Atrophy, Bilateral lower limb congenital contracture, Cerebral palsy, Cerebrovascular Accident (CVA), Congenital Anomaly, Congenital/acquired contractures, Congential Familial Disorders, Friquent need of blood transfusion, Foot Deformities-Amputated Toes, Foot and Hand Deformities-Congenital, Foot Deformities-Congenital, Foot Deformities-Post Traumatic, Hydro cephalus, Hand Deformities-Amputated Fingers, Hand Deformities-Post Traumatic, Hand Deformities-Congenital, Neuromuscular problems-Post Traumatic, Machine Injury, Arm Amputation, Paraparesis, Post Polio Limb Weakness-Paralysis, Post Polio Limb Weakness -Paresis Deformities, Post cerebral palsy limb weakness-Paralysis, Post cerebral palsy limb weakness-Paresis Deformities, Scoliotic Ankylosis Spare, Congenital Absent Thumbs Of Left/Right Hand, Degeneratif Knee Joint (Left/Right), Disarticulation Of Right/Left Hip, Flexion Contracture of Right Knee, Flexion Contracture of Left Knee, Ischemic Contracture, Myopathy, Movement Disorder, KlippeL -Feil Syndrome, Kyphoscoliosis, Neuromuscular problems-Congenital, Pectus Excavatum, Osteomyelitis, Osteoarthritis for degenerative disease, Post Traumatic-Joint Deformities, Post Traumatic Ankylosis Knee, Post Traumatic-Limb Deformities, Rheumatoid Arthritis Hand Deformities, Right Leg and Left Leg Weakness, Spinal Deformities-Post Traumatic, Spinal Deformities-Congenital, Post Sciatic Injury | 1885 | 258 | 2143 |
| | Hearing Impaired (Deaf & Dumb) | Congenital Bilateral, Congenital, Acquired Bilateral | 258 | 94 | 352 |
| | Intellectual Disability | Congenital | 40 | 11 | 51 |
| **Total** | | | **3021** | **515** | **3536** |

| Level | Type of Disability | Cause of Disability | Literate but Not Fit to Work Male | Literate but Not Fit to Work Female | Total (M&F) |
|---|---|---|---|---|---|
| Matric | Physically Impaired (Neuromuscular) | Amputation-Above Knee, Cerebral palsy, Bilateral retinitus pigmentosa, Neuropathy, Myopathy, Movement Disorder, Congenital, Post Infective Permanent Consequences, Stroke, Mental Retardation, Myelopathy, Neuromuscular problems-Congenital, Demyelinating Diseases, Spinal Deformities-Post Traumatic, Neurodegenerative Disorder, Anterior Horn Cell Disorder, Neuro Muscular Junction Disorder, Plexopathy, Dementia, Epilepsy, Neuromuscular problems-Post Traumatic, Paraparesis, Post Trauma Weakness Motor/ Sensory, Post Traumatic -Limb Deformities, Congenital Spinal/Brain Disorder, Post Tumor Surgery, Dorsal Root ganglionopathy | 363 | 75 | 438 |
| | Visually Impaired | Congenital, Bilateral retinitus pigmentosa, Bilateral Nystagmus, Bilateral Maculopathy, Bilateral Atrophic Retinal Detachment, Bilateral Cone Dystrophy, Congenital Glaucoma, Bilateral Pthysical Eye, R.P + Nystagmus, Billateral Optic Atrophy, Bilateral Anop hthalmia, bilateral | 311 | 54 | 365 |
| | | Opaque Cornea, Bilateral degenerative myopia with macular atrophy, Bilateral Enucleated Eyes Post Retinoblastoma, Bilateral Pthysical Eye with Nystagmus, Bilateral Stargardt Disease, Bilateral Vascularized corneal opacity, PDR(Proliferative diabetic retinapathy), Cortical Blindness e No response to VEP, Bilateral Retinal Detachment, Bilateral nystagmus with retinitus pigmentosa, Bilateral Disc Pallor, Oculocutaneous Albinism With Fovea Dysplasia, Bilatetral advanced gulucoma, Bilateral retinal degeneration, Bilateral Macular Dystrophy With Hyperpigmented Central Macular Scarring, Retinal Nerve Fiber Layer Thinning | | | |
| Matric | Physically Impaired (Musculoskeletal) | Achondroplasia, Amputation-Below Elbow, Amputation-Below Knee, Amputation-Above Elbow, Amputation-Above Knee, Amputation-Lower Limb, Amputation-Upper Limb, Amelia (congenital), Atrophy, Acquired, Bilateral retinitus pigmentosa, Bilateral lower limb congenital contracture, Cerebral palsy, Cerebrovascular Accident (CVA), Congenital Anomaly, Congenital/acquired contractures, Foot Deformities-Amputated Toes, Foot and Hand Deformities-Congenital, Foot Deformities-Congenital, Foot Deformities-Post Traumatic, Friquent need of blood transfusion, Hydro cephalus, Hand Deformities-Amputated Fingers, Hand Deformities-Post Traumatic, Hand Deformities-Congenital, Neuromuscular problems-Post Traumatic, Machine Injury, Arm Amputation, Paraparesis, Post Polio Limb Weakness-Paralysis, Post Polio Limb Weakness -Paresis Deformities, Post cerebral palsy limb weakness-Paralysis, Post cerebral palsy limb weakness-Paresis Deformities, Scoliotic Ankylosis Spare, Congenital Absent Thumbs Of Left/Right Hand, Degeneratif Knee Joint (Left/Right), Disarticulation Of Right/Left Hip, Flexion Contracture of Right Knee, Flexion Contracture of Left Knee, Ischemic Contracture, Myopathy, Mental Retardation, KlippeL-Feil Syndrome, Kyphoscoliosis, Neuromuscular problems-Congenital, Neuropathy, Osteogenesis Imperfecta, Osteomyelitis, Osteoarthritis for degenerative disease, Post Traumatic-Joint Deformities, Post Traumatic Ankylosis Knee, Post Traumatic-Limb Deformities, Rheumatoid Arthritis Hand Deformities, Right Leg and Left Leg Weakness, Spinal Deformities-Post Traumatic, Spinal Deformities-Congenital, Stroke, Post Sciatic Injury | 1707 | 269 | 1976 |
| | Hearing Impaired (Deaf & Dumb) | Congenital, Congenital Bilateral, Bilateral Acquired Snile, Acquired Bilateral | 383 | 140 | 523 |
| | Intellectual Disability | Congenital | 32 | 4 | 36 |
| **Total** | | | **2796** | **542** | **3338** |

| Level | Type of Disability | Cause of Disability | Literate but Not Fit to Work | | Total (M&F) |
|---|---|---|---|---|---|
| | | | Male | Female | |
| Intermediate | Physically Impaired (Neuromuscular) | Amputation-Below Knee, Cerebral palsy, Neuropathy, Myopathy, Movement Disorder, Congenital, Post Infective Permanent Consequences, Stroke, Mental Retardation, Myelopathy, Demyelinating Diseases, Spinal Deformities-Post Traumatic, Neurodegenerative Disorder, Anterior Horn Cell Disorder, Neuro Muscular Junction Disorder, Dementia, Epilepsy, Radiculopathy, Neuromuscular problems-Post Traumatic, Paraparesis, Post Trauma Weakness Motor/ Sensory, Post Traumatic-Limb Deformities, Congenital Spinal/Brain Disorder, Friquent need of blood transfusion, Cerebrovascular Accident (CVA), Post Segenerative Spinal Surgery | 128 | 51 | 179 |
| | Visually Impaired | Congenital, Bilateral retinitus pigmentosa, Bilateral Nystagmus, Bilateral Maculopathy, Bilateral Atrophic Retinal Detachment, Bilateral anterior staphyloma total corneal opacity with ingrowing vessels, Congenital Glaucoma, Bilateral Pthysical Eye, R.P + Nystagmus, Billateral Optic Atrophy, bilateral Opaque Cornea, Bilateral Vascularized corneal opacity, Cortical Blindness e No response to VEP, Bilateral nystagmus with retinitus pigmentosa, Bilateral Macular Dystrophy, Bilateral Disc Pallor, Oculocutaneous Albinism With Fovea Dysplasia, Bilatetral advanced gulucoma, Retinal Nerve Fiber Layer Thinning, Bilateral Onophtholnos, Bilateral Macular Dystrophy With Hyperpigmented Central Macular Scarring | 99 | 28 | 127 |
| Intermediate | Physically Impaired (Musculoskeletal) | Achondroplasia, Amputation-Below Elbow, Amputation-Below Knee, Amputation-Above Elbow, Amputation-Above Knee, Amputation-Lower Limb, Amputation-Upper Limb, Atrophy, Bilateral lower limb congenital contracture, Cerebrovascular Accident (CVA), Congenital Anomaly, Congenital/acquired contractures, Congential Familial Disorders, Foot Deformities-Amputated Toes, Foot and Hand Deformities-Congenital, Foot Deformities-Congenital, Foot Deformities-Post Traumatic, Friquent need of blood transfusion, Hand Deformities-Amputated Fingers, Hand Deformities-Post Traumatic, Hand Deformities-Congenital, Neuromuscular problems-Post Traumatic, Machine Injury, Arm Amputation, Inflammatory Arthritis, Paraparesis, Post Polio Limb Weakness-Paralysis, Post Polio Limb Weakness-Paresis Deformities, Post cerebral palsy limb weakness-Paralysis, Post cerebral palsy limb weakness-Paresis Deformities, Scoliotic Ankylosis Spare, Degeneratif Knee Joint (Left/Right), Disarticulation Of Right/Left Hip, Flexion Contracture of Right Knee, Ischemic Contracture, Myopathy, Movement Disorder, Kyphoscoliosis, Neuromuscular problems-Congenital, Osteogenesis Imperfecta, Osteomyelitis, Osteoarthritis for degenerative disease, Post Traumatic-Joint Deformities, Post Traumatic Ankylosis Knee, Post Traumatic-Limb Deformities, Rheumatoid Arthritis Hand Deformities, Right Leg and Left Leg Weakness, Spinal Deformities-Post Traumatic, Spinal Deformities-Congenital, Plexopathy, Post Sciatic Injury | 611 | 172 | 783 |
| | Hearing Impaired (Deaf & Dumb) | Acquired, Congenital Bilateral, Congenital, Bilateral Acquired Post-traumatic | 147 | 56 | 203 |
| | Intellectual Disability | Congenital | 9 | 2 | 11 |
| **Total** | | | **994** | **309** | **1303** |

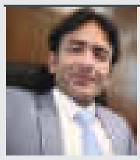
| Level | Type of Disability | Cause of Disability | Literate but Not Fit to Work | | Total (M&F) |
|---|---|---|---|---|---|
| | | | Male | Female | |
| Graduation | Physically Impaired (Neuromuscular) | Cerebral palsy, Neuropathy, Myopathy, Movement Disorder, Congenital, Post Infective Permanent Consequences, Stroke, Mental Retardation, Neuromuscular problems-Congenital, Demyelinating Diseases, Spinal Deformities-Post Traumatic, Neurodegenerative Disorder, Cerebrovascular Accident (CVA), Ischemic Contracture, Anterior Horn Cell Disorder, Dementia, Epilepsy, Hand Deformities-Congenital, Paraparesis | 81 | 32 | 113 |
| | Visually Impaired | Congenital, Bilateral retinitus pigmentosa, Bilateral Nystagmus, Congenital Glaucoma, Bilateral Pthysical Eye, Billateral Optic Atrophy, bilateral Opaque Cornea, Cortical Blindness e No response to VEP, Bilateral Retinal Detachment, Bilateral nystagmus with retinitus pigmentosa, Oculocutaneous Albinism With Fovea Dysplasia, Bilatetral advanced gulucoma | 73 | 30 | 103 |
| | Hearing Impaired (Deaf & Dumb) | Congenital Bilateral, Congenital, Acquired Snile | 39 | 29 | 68 |
| Graduation | Physically Impaired (Neuromuscular) | Cerebral palsy, Neuropathy, Myopathy, Movement Disorder, Congenital, Post Infective Permanent Consequences, Stroke, Mental Retardation, Neuromuscular problems-Congenital, Demyelinating Diseases, Spinal Deformities-Post Traumatic, Neurodegenerative Disorder, Cerebrovascular Accident (CVA), Ischemic Contracture, Anterior Horn Cell Disorder, Dementia, Epilepsy, Hand Deformities-Congenital, Paraparesis | 81 | 32 | 113 |
| | Visually Impaired | Congenital, Bilateral retinitus pigmentosa, Bilateral Nystagmus, Congenital Glaucoma, Bilateral Pthysical Eye, Billateral Optic Atrophy, bilateral Opaque Cornea, Cortical Blindness e No response to VEP, Bilateral Retinal Detachment, Bilateral nystagmus with retinitus pigmentosa, Oculocutaneous Albinism With Fovea Dysplasia, Bilatetral advanced gulucoma | 73 | 30 | 103 |
| | Hearing Impaired (Deaf & Dumb) | Congenital Bilateral, Congenital, Acquired Snile | 39 | 29 | 68 |
| Graduation | Physically Impaired (Musculoskeletal) | Amputation-Below Elbow, Amputation-Below Knee, Amputation-Above Elbow, Amputation-Above Knee, Amputation-Lower Limb, Amputation-Upper Limb, Atrophy, Bilateral lower limb congenital contracture, Cerebrovascular Accident (CVA), Congenital Anomaly, Congenital/acquired contractures, Congential Familial Disorders, Foot Deformities-Amputated Toes, Foot and Hand Deformities-Congenital, Foot Deformities-Congenital, Foot Deformities-Post Traumatic, Hand Deformities-Amputated Fingers, Hand Deformities-Post Traumatic, Hand Deformities-Congenital, Neuromuscular problems-Post Traumatic, Paraparesis, Post Polio Limb Weakness-Paralysis, Post Polio Limb Weakness-Paresis Deformities, Post cerebral palsy limb weakness-Paralysis, Post cerebral palsy limb weakness-Paresis Deformities, Scoliotic Ankylosis Spare, Degeneratif Knee Joint (Left/Right), Flexion Contracture of Right Knee, Ischemic Contracture, Myopathy, Kyphoscoliosis, Neuromuscular problems-Congenital,Osteomyelitis, Osteoarthritis for degenerative disease, Post Traumatic-Joint Deformities, Post Traumatic Ankylosis Knee, Post Traumatic-Limb Deformities, Rheumatoid Arthritis Hand Deformities, Right Leg and Left Leg Weakness, Spinal Deformities-Post Traumatic, Spinal Deformities-Congenital, Post Sciatic Injury | 396 | 174 | 570 |
| | Intellectual Disability | Congenital | 5 | 1 | 6 |
| **Total** | | | **594** | **266** | **860** |

| Level | Type of Disability | Cause of Disability | Literate but Not Fit to Work | | Total (M&F) |
|---|---|---|---|---|---|
| | | | Male | Female | |
| Masters (16 Years) | Physically Impaired (Neuromuscular) | Atrophy, Cerebral palsy, Neuropathy, Myopathy, Movement Disorder, Congenital, Post Infective Permanent Consequences, Stroke, Mental Retardation, Myelopathy, Demyelinating Diseases, Spinal Deformities-Post Traumatic, Neurodegenerative Disorder, Neuro Muscular Junction Disorder, Dementia, Radiculopathy, Neuromuscular problems-Post Traumatic, Paraparesis, Foot Deformities-Post Traumatic | 50 | 20 | 70 |
| | Physically Impaired (Musculoskeletal) | Amputation-Below Elbow, Amputation-Below Knee, Amputation-Above Elbow, Amputation-Above Knee, Amputation-Lower Limb, Amputation-Upper Limb, Cerebrovascular Accident (CVA), Congenital Anomaly, Congenital/acquired contractures, Foot Deformities-Amputated Toes, Foot and Hand Deformities-Congenital, Foot Deformities-Congenital, Foot Deformities-Post Traumatic, Hand Deformities-Amputated Fingers, Hand Deformities-Post Traumatic, Hand Deformities-Congenital, Neuromuscular problems-Post Traumatic, Paraparesis, Post Polio Limb Weakness -Paralysis, Post Polio Limb Weakness-Paresis Deformities, Post cerebral palsy limb weakness-Paresis Deformities, Disarticulation Of Right/Left Hip, Ischemic Contracture, Myopathy, Kyphoscoliosis, Neuromuscular problems-Congenital, Osteomyelitis, Osteoarthritis for degenerative disease, Post Traumatic-Joint Deformities, Post Traumatic Ankylosis Knee, Post Traumatic-Limb Deformities, Rheumatoid Arthritis Hand Deformities, Right Leg and Left Leg Weakness, Spinal Deformities-Post Traumatic, Spinal Deformities-Congenital, Post Sciatic Injury | 170 | 82 | 252 |
| | Hearing Impaired (Deaf & Dumb) | Congenital Bilateral, Congenital, Acquired | 7 | 2 | 9 |
| Masters (16 Years) | Visually Impaired | Congenital, Bilateral retinitus pigmentosa, Bilateral Nystagmus, Bilateral Maculopathy, Bilateral Cone Dystrophy, Congenital Glaucoma, Bilateral Pthysical Eye, Billateral Optic Atrophy, Cortical Blindness e No response to VEP, Bilateral Macular Dystrophy | 42 | 21 | 63 |
| | Intellectual Disability | Congenital | 3 | 4 | 7 |
| **Total** | | | **272** | **129** | **401** |

| Level | Type of Disability | Cause of Disability | Literate but Not Fit to Work | | Total (M&F) |
|---|---|---|---|---|---|
| | | | Male | Female | |
| **MPhil (18 Years)** | Physically Impaired (Neuromuscular) | Cerebral palsy, Congenital, Post Infective Permanent Consequences, Stroke, Mental Retardation, Paraparesis | 17 | 1 | 18 |
| | Physically Impaired (Musculoskeletal) | Amputation-Lower Limb, Amputation-Upper Limb, Friquent need of blood transfusion, Neuromuscular problems-Post Traumatic, Post Polio Limb Weakness-Paralysis, Myopathy, Post Traumatic-Joint Deformities, Post Traumatic-Limb Deformities | 19 | 8 | 27 |
| | Hearing Impaired (Deaf & Dumb) | Null | 0 | 1 | 1 |
| | Visually Impaired | Congenital, Bilateral retinitus pigmentosa, Cortical Blindness e No response to VEP, Bilatetral advanced gulucoma | 6 | 1 | 7 |
| | Intellectual Disability | Congenital | 2 | 0 | 2 |
| **Total** | | | **44** | **11** | **55** |
| **Grand Total** | | | **10938** | **2652** | **13590** |

# ABOUT THE TEAM

## PROJECT DIRECTOR



### Mr. Azher Abbas

Mr. Azher Abbas oversees a diverse development portfolio in Punjab, bringing over 15 years of experience in Program & Project Management, Government Liaison, Advocacy, and Humanitarian Efforts. He holds a deep interest in policy making and gender analysis.

## RESEARCH TEAM

## RESEARCH ASSOCIATE

### Ms. Zainab Naveed

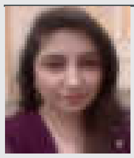
Zainab is a research associate whose interests lie in gender-related topics, policy processes, inclusive and sustainable development, and social protection. She holds an MPhil degree in Gender Studies.

## RESEARCH ASSOCIATE

### Mr. Muhammad Tariq Saleem

Muhammad Tariq Saleem- is a research associate with a profound interest in policy-making, gender analysis, and capacity building.

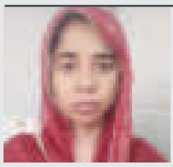
## DATA ANALYST



### Ms. Madiha Muazam

Madiha Muazam is a Statistician. She has a profound understanding of datasets and quantitative analysis skills. She holds a master's degree in Statistics.

## COMPUTER OPERATOR



### Ms. Aneela Parveen

Aneela Prveen – She is a proficient computer operator, skilled in data entry, file management, and office software applications.

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