

Social inclusion of people with disabilities: a case from Nepal's decade-long civil war

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This paper discusses the issue of social inclusion of people with disabilities who acquired impairments through Nepal's decade-long insurgency. In-depth qualitative interviews have been conducted with nine individuals. A disparity in government facilities and services was observed, whereby the combatants reported receiving fewer services than the Nepali army. In relation to their impairments, participants experienced mostly non-discriminatory behaviour from their families, whereas their perceived impression of the community's behaviour was mixed. Additionally, participants were anxious about their daily living in part resulting from insufficient facilities and inadequate community inclusion strategies, as well as the lack of activities that can help increase opportunities for their economic well-being.

Keywords: conflict; acquired impairments; inclusion; facilities; Nepal

1. Introduction

Nepal, one of the poorest countries in South Asia with a high rate of poverty and low level of human development (Deraniyagala 2005), has a population of about 26.6 million distributed over 140,800 square kilometers of land (CBS 2006, 2011). Nepal experienced a violent civil conflict from 1996 to 2006 (CBS 2006, 2011) between the then-Maoist rebels and the state, leading to the loss of several thousand lives, which negatively affected the development prospects of Nepal (CBS 2006, 2011).

During the decade-long civil war, besides the reported loss of 16,453 lives, Uppadhya (2010) stated that around 4305 people became either injured or impaired through the civil war, but official numbers remain unclear. Though the disability prevalence remains low because of the lack of an explicit definition and coverage of disability, the latest population census in Nepal states that 1.94% of the total population have some form of disabilities (CBS 2011). It is however important to note that the prevalence of disability or impairment tends to be lower in developing countries due to unstandardized measurement instruments and differences in the conceptual definitions or categorizations of disability among countries (Eide and Loeb 2005).

The UN Convention on the Rights of Persons with Disabilities (UNCRPD) states that 'disability results from the interaction between persons with impairments and attitudinal and environmental barriers that hinders their full and effective participation in society on an equal basis with others' (UN 2006). As impairment is a natural part of the human

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experience, it should also be acknowledged that disability is the combination of impairment and disabling environment of the societies, which can create activity limitations to the individuals. The idea is that an individual's impairment does not restrict enjoying life to the fullest and achieving economic independence. Rather, it is about disabling limiting barriers such as systemic exclusion, environment with low accessibility and discrimination. Based on this distinction, I have used 'people with physical or visual impairments' throughout the paper.

Numerous studies have focused on the civil war in Nepal (Michael, Benjamin, and Samii 2011; Blattman and Miguel 2009; Acharya 2009; Iyer and Do 2007; Macours 2006; Murshed and Gates 2005; Nepal, Bohara, and Gawande 2011). The focus of these studies has been limited mainly to the causes and consequences of the insurgency. However, even though many people – including government personnel and insurgents – have acquired impairments from the decade-long civil war, no study has been conducted to comprehensively explore their situation.

There is also a very limited body of studies on disability and conflict, especially in developing countries. For example, in the case of Luanda, Angola, some disability-related organizations have released a report stating the establishment of a government ministry, the government's recognition of the need for regional shelter centers and social welfare programs for those who acquired impairments (AllAfrica 2011). Santos-Zingale and McColl (2006) also emphasized how '[i]t is important that people working in post-conflict nations with people with disabilities evaluate the challenges they face and find out what their desires are' to facilitate the implementation of policies and services. While Santos-Zingale and McColl's work discusses the four main themes of what people with disabilities want, this study seeks to provide an insight into the perspectives and experiences of both military officers and insurgents who have acquired impairments through civil war.

Few studies have been conducted to reflect the situation of returning military veterans in UK or in USA, who have acquired impairments through the course of their previous military deployments (Logue and Blanck 2008). This 2008 study also contributed to another study by the same authors that focuses on the experiences of African-Americans and immigrants with disabilities, looking into their decision to seek government support and treatment (Logue and Blanck 2010). While Logue and Blanck's study takes in an added dimension of race and ethnicity on top of disability issues, the point to take away is that they have examined how veterans in United States of America have asserted their rights to state support after acquiring impairments through conflict and demonstrated some of the challenges of those people. However, one limitation of Logue and Blanck's study is that while they have discussed the situation of soldiers who have fought beyond the borders of their countries, they have not addressed the situation of insurgents with impairments in civil war. Also, due to the involvement of these countries in foreign conflict and many soldiers acquiring impairments, they now have many legal provisions to rehabilitate those impaired soldiers into the community. There are also other existing literatures by disability-based organizations, but their scopes are primarily limited to what needs to be done in order to protect people with impairments in the event of conflicts and emergencies, and not on the experiences of people acquiring impairments through civil war.

We have not come across studies exploring the social inclusion and living conditions of people acquiring impairments, particularly in developing countries. The paper thus attempts to contribute to this academic gap, by providing a perspective on people with disabilities from Nepal's decade-long civil war while looking at issues such as possible

disability-based discrimination that they face and whether legal provisions that are in place to protect them are effective. The central research question posed in this paper is: to what extent are the needs of people with disabilities addressed by the government, what are the challenges and how these people perceive the government's relief and welfare scheme.

To answer these questions, I focus on support provisions made available by the government and the daily living arrangements of those who acquired impairments through the conflict. I argue that an understanding of the situation of these affected people will foster a beneficial mutual engagement in the process of inclusive development. This paper is timely, as Nepal is a least developing post-conflict country in a transitional phase. Those with disabilities are among the most vulnerable; in the absence of appropriate state support, their dependency on their families is high. This paper provides two important contributions: first, this paper sheds new light on the neglected but very important issue of social and economic inclusion of people who acquired impairments in the civil conflict; second, it looks at how state support that is made available meets the needs of these people.

The structure of this paper is as follows: section two discusses the methods and the selection of participants; results are presented in section three, followed by a discussion in section four; and we end this paper with concluding remarks in section five.

2. Methods

2.1. Participants

All participants in this survey – other than one civilian participant – are from the Nepali army and then-Maoist combatants who acquired impairments in the decade-long conflict. All of the participants are male, and all of them have single impairments (as shown in [Table 1](#)). Disability-based organizations in Dang District in mid-western Nepal facilitated the contact of combatants in Dang, which has a population of 228,291 people, covering an area of 1744 square kilometers (CBS 2011). Similarly, Nepali army members with impairments were recruited in the district of Kathmandu, the capital city of Nepal. In both cases, I used snowballing techniques to find the interviewees. Further, the study was carried out with informed consent from the participants, who were aware that they could withdraw from the interview at any time without incurring any personal consequences.

2.2. Data collection

Semi-structured interviews were conducted to understand their personal experiences on the various issues encountered after the acquisition of impairments. Six of the interviews were conducted in person by the author, and three interviews were conducted by the research assistant. The assistant was trained on the issues of disability and conflict as well as questions to be asked. The interviews were carried out at a venue of convenience for the participant. Combatants with impairments were interviewed in the Maoist combatants' cantonment in Dang District. Also, as the Rolpa District of the same mid-western region is believed to be the main affected area by the civil war, a civilian with impairments in Rolpa was selected and interviewed to give an idea of the situation even though it cannot serve as a representative case. Likewise, three individuals with impairments of Nepal army were interviewed in Kathmandu. The first round of interviews was conducted from 14 to 21 June 2011, and a second round of interviews took place in March 2012. As new issues continued to emerge through the interviews, a second round of interview was conducted, whereby

Table 1. Socio-demographic characteristics of the participants.

Participants	Age	Number of years of education	Number of years since impairment	Type of impairment	Classified severity of impairment (%)	State support received (NRs)	Marital status	
							Before disability	After disability
Civilian	47	10	15	Physical	Unclassified	0	Married	Married
Maoist Combatant 1	30	5	8	Visual	100	200,000	Unmarried	Married
Maoist Combatant 2	29	9	9	Physical	50	100,000	Unmarried	Married
Maoist Combatant 3	25	0	7	Physical	20	40,000	Unmarried	Married
Maoist Combatant 4	32	5	7	Physical	N.A.	N.A.	Unmarried	Married
Maoist Combatant 5	34	5	10	Physical	50	60,000	Married	Married
Army 1	32	10	8	Physical	50	100,000	Unmarried	Married
Army 2	38	12	10	Physical	100	200,000	Married	Married
Army 3	32	11	9	Visual	100	200,000	Unmarried	Married

additional participants were recruited to supplement the insights gained from the primary analysis from the first round of interviews.

Each of the interviews lasted 30–60 minutes. A flexible and open-ended interview guide was used to allow the emergence of unexpected information from the respondents (Dahlgren, Emmelin, and Winkvist 2007). The interview guide included questions to draw out personal experiences after being impaired, guided by the main topics of severity of their impairments, state support, family's perception, community's attitude, authorizing mechanism of the severity of impairments, etc.

The method of probing throughout the interview allows the opportunity and flexibility not only to address the key research questions, but also to incorporate unanticipated study outcomes and enable the discussion of a wider range of subjects, as appropriate (Kvale and Brinkmann 2009). This semi-structured approach also allows the researcher to ask questions pertaining to each participant's personal experience, and to capture all aspects relevant to that experience. Socio-demographic information was collected at the end of the interview session. Interviews were conducted and recorded digitally in Nepali, and later translated into English.

2.3. Data analysis

Thematic content analysis has been used for the data analysis as it allows interpretation of the text to discover its underlying meaning (Graneheim and Lundman 2004). Following repeated re-reading of the anonymized transcripts, excerpts from the transcripts have been put into a matrix as unit analysis, condensed into meaning units and then coded. The codes have been further clustered and condensed transforming them into categories that eventually developed into six themes:

This process has allowed the researcher to utilize the key contents of the data and reveal themes relevant to the individuals' experience within the transcripts. Assimilation and interpretation of the main themes have formed the basis of the final paper.

Since the interview was conducted in the Nepali language – the mother tongue of both the author and participants – the full contents and cultural context of their meaning are well captured. The interviews were then translated into English by a reliable source. The questionnaire used in this study – also originally written in Nepali – was translated to English, and back again to Nepali to verify the accuracy of translation. Additionally, themes have been developed through the process of coding within the translated transcripts and categorized and developed into themes, staying close to the text and letting the voices of the respondents speak for themselves. Doing so not only minimizes the risks of over-explaining the content, but also helps explore the true underlying meaning of the context.

2.4. Reliability

In order to maintain the reliability of the study, measures such as appropriate interviewer training and standardization of interview procedures and questions were adopted to enhance its internal validity or credibility. The prolonged engagement in analysing qualitative data further assures the credibility of the themes.

2.5. Limitations of the study

This study has only managed to include one civilian respondent, and all the participating respondents are male. In order to understand how these issues affect people with

impairments more generally, a greater diversity in sample characteristics is needed for future studies. Furthermore, alternative research methods such as focus group and quantitative studies can also be utilized. Additionally, it should also be noted that interviews with combatants were conducted in the cantonment, which might have led to discomfort or reluctance on the part of combatants with impairments in talking about their experience of discriminatory behaviours from colleagues. The findings in this paper, however, cannot account for their perception of community reactions, since none of the combatants had yet to begin living directly within the community at the time of interviews.

While recognizing these limitations, this study provides new and valuable insight to the existing literature on disability and conflict, and is highly relevant to the current policy debate towards mainstreaming disability in inclusive development framework.

3. Results

Table 1 gives the brief characteristics of the participants. All of the participants were male. One was in his forties, six were in their thirties and two of the participants were in their twenties. The mean age of participants, ranging between 25 and 47 years, is 32. None of the combatants completed the full ten years of school education. All combatants had the experience of more than three years of direct involvement in war and the longest was of eight years. Similarly, security personnel with impairments had relatively longer years of schooling than combatants with impairments. This suggests that in order to enter the security force, individuals had to satisfy certain criteria including educational achievements; whereas for the insurgent group, possibly only those who demonstrated a commitment to participating in the war were recruited, disregarding other eligibility criteria including educational accomplishments. Three of the interviewees acquired impairment from landmine explosions; others acquired it through direct fights and ambush attacks. Most of the respondents in this study have physical impairments and three interviewees are with visual impairments. Individuals with visual impairments used white-canes for mobility. Among individuals with physical impairments, other than two wheelchair users, others used crutches or walking sticks.

Based on the interviews, the following six main themes have been generated and presented in this section:

3.1. Perceived difference in family behaviour after acquiring impairment

There was a variety of perceived attitudes from participants' family members. All except one combatant perceived their families' behaviour positively and described no serious changes to that of before their impairment. Combatants commonly stated that they feel supported by their families, particularly their wives: *'She married me knowing my impairment. We have a good understanding of each other.'* (Combatant 1). For all the combatants who married after joining the insurgency, the party played a crucial role in making the intra-party marriages happen. Despite most combatants experiencing positive support from their family members, one of the combatants shared how his family members wanted to avoid him due to his impairment. *'My family does not want to live with me. They frequently underestimate me and often say bad things about me because I have an impairment'* (Combatant 4). The same interviewee said that despite being ignored by his parents and wife, he felt supported by his sister: *'I am looked after only by my sister. Others do not care about me'*. Both security personnel and the civilian respondents also reported

feelings of positive support from their family. *'So far, I think my family treats me the same way as they used to do before'* (Civilian interviewee).

Army 1 gave credit of his family's unchanged behaviour towards him to his involvement in several activities after becoming impaired. He engaged in painting after the acquisition of impairment, which brought him small earnings and thus his family did not view him negatively. Besides enjoying the supportive and caring attitude of his family, the same respondent shared how anxious his family, particularly his mother, is about his future. *'My mother sometimes worries that after her death I may suffer. When I need to go from one place to another, they help me a lot'*.

However, another interviewee (Army 2) described contemptuous treatment by his family members due to his impairments: *'My family members often use bad words and disrespect me on the grounds of my impairment'*.

3.2. Perceived difference in societal behaviour after acquiring impairments

Alongside family reactions, societal attitude is another major factor that can promote the social inclusion of individuals with acquired impairments. At the time of interview, combatants were hopeful that they would be treated well once they return to society and their communities, since their impairment was a result of their contribution to the country. Even though they were not fully living in the community, they occasionally take leave from the cantonment to visit their friends and relatives in the community. For example, Combatant 1 said that since *'people know why I have an impairment, I am hopeful that people in society where I was from will behave me well'*. The same interviewee acknowledged support from his friends after being impaired: *'friends are helping me more than before instead of discouraging, which happen for others who have no impairments'*.

Similarly, two combatants, despite enjoying support from their family, experienced negative reactions from their relatives and community. Combatant 3 described a difference in the behaviour of their relatives and community members after being impaired: *'People feel that we are involved in violent civil war so I am not asked to join social functions. When I go out, I hear some people using negative words on me'*. However, Combatant 2 was optimistic that he will be treated well in his community after returning. His optimism is mainly due to the non-discriminatory attitudes of his colleagues:

If I had become visually impaired by my own cause or all of a sudden, I might be hated or discriminated against. But I am not experiencing discrimination from my colleagues because they know how I acquired visual impairments.

Despite his friends' supportive attitude in the cantonment, he too was doubtful about how he would be treated in the community later: *'But I don't know how I will be treated in the society once I start living there'*.

While security personnel were not experiencing serious discrimination and negative reactions from the society at large, the lack of support in public transportation was a major concern for them. *'Even public vehicles do not help by stopping when I want to ride the bus'* (Army 1). Likewise, Army 2 experienced similar negative societal behaviour after being impaired:

In the past when I had no impairments, I used to get respect from friends and society, but these days I do not experience similar behavior. Another hurting thing is that people often use bad words on my impairments. Some used to come to me for help but after I became

impaired, they hesitate to ask me for help thinking that I am no longer useful for them. I feel that people are negatively changing toward me.

3.3. Challenges and difficulties in daily living

Although the government provides some financial support to persons who acquired impairments through the civil war, participants were found to be pessimistic about their lives due to the disabling environment and lack of appropriate institutions to provide counseling and training programs on independent living skills. They described being faced with challenges in daily living, especially with regard to accessibility. In the absence of appropriate and sufficient state facilities, all except two security personnel with visual impairment were found to be dependent on their families to go from one place to another. Combatant 5 said *'my treatment is going on. I can't walk myself. I am dependent on others, mainly my family members. I face difficulty due to the inaccessible location of my house, roads and toilets'*. Similarly, mobility was a major challenge for participants with visual impairments. Army 3 shared how he encountered difficulties in his daily living after being visually impaired. *'I cannot walk as per my wish. I cannot read books or newspaper. You do not know where things are, you cannot recognize persons, and when you cannot see, the major challenge is mobility'*.

Additionally, after being impaired, participants said that their participation in many social activities such as wedding ceremony and religious functions have become seriously limited. Army 3 said *'I don't like to join these social functions because since I cannot see, I often need someone if I want to go'*.

3.4. Provisions of state facilities to citizens who are impaired in the conflict

In 2007, with the end of the decade-long civil war, the government of Nepal established a separate Ministry of Peace and Reconstruction to look into the cases of conflict, gather data of the insurgency-affected people and provide state support to the victims. In association with the Ministry of Local Development, this newly established Ministry of Peace and Reconstruction has been providing state support to injured or impaired people (Peace and Reconstruction Ministry 2012).

To determine state support, the government of Nepal has prepared guidelines to classify people with disabilities into different categories based on the severity of their impairments, (Nepal Government 2006).

In defining peoples' impairments and their severity, the government document uses the term 'disabled' to reflect one's impairments. According to the guidelines prepared, impairments are categorized into four levels: Fully disabled, severely disabled, moderately disabled and mildly disabled. The government's definition of fully disabled (100%) basically implies that either a person has multiple impairments or s/he cannot move anywhere due to limitations caused by the impairments.

To categorize severity of the impairments, the Nepal Government decided to distribute disability identity cards from 2008. There are four types of color-coded categorical cards, depending on the severity of the impairments, ranging from Type 1 for those who are recognized to be fully disabled to Type 4 for those who are recognized to be mildly disabled. All individuals with disabilities are issued with this card. All district administrative offices (DAOs) are authorized to distribute the disability identity card, as per the recommendations from organizations of people with disabilities.

With regard to providing state facilities for people who acquired impairments through conflict, a person recognized to be fully disabled (100% disabled) is given NRs.200,000 (Nepalese Rupees (NRs), approximately USD2500). Similarly, a person recognized to have impairments of 75% severity is given 75% of the full amount. Subsequently, if a person is recognized to be 50%, 40% or 20% impaired, s/he is provided with 50%, 40% and 20% of the amount, respectively. However, people considered to have impairments of below 20% are not eligible for this support provision. In addition, this financial support is given out only once.

The provision of free medical treatment through the Ministry of Health and Population is also available under the recommendation of the DAOs. However, only those whose impairments have been categorized to be of at least 50% severity are entitled to this facility (Peace and Reconstruction Ministry 2012). Additionally, scholarship provision, for the children of people whose impairments are recognized to be of at least 50% severity, is also available.

In another case, on 14 April 2012, the government made a decision to provide retirement packages to Maoist combatants, ranging from NRs.500,000 to NRs.700,000, depending on the designation of the individual in the Maoist army. Maoist combatants with impairments are entitled to receive this facility in addition to the previously given monetary support of the state. Similarly, the Ministry of Peace and Reconstruction has also decided to provide a life-long monthly allowance of NRs.10,000 to people who have acquired impairments through the conflict.

Despite these provisions for state facilities, there are several unresolved questions and dissatisfaction over the categorization of severity of the impairments. The categorization of the severity of impairments seems to be neither clear nor scientific; there is also no form of verification of the disability of applicants as claimed.

Despite having their functional limitation categorized and being distributed identity cards, it is unclear as to how the assessment process and distribution is carried out in the rural areas of the country. Moreover, for individuals with impairments in the government army and police, they continue to gain access to regular facilities of the army and police force. Though they enjoy equal access to facilities, they may no longer be assigned with responsibilities depending on the severity of their impairments. Moreover, depending on the severity of their impairments, the Nepali army provides personal assistants to its members, and these individuals can continue to be members up till their retirement age.

3.5. Perception of state support

All of the interviewees received some form of state support as their categories permit. However, most of the participants expressed their dissatisfaction on the support provided by the state and urged for the increase of it. Especially, combatants with impairments felt discriminated against compared to those from the Nepali army. For example, Combatant 1 said: *'We contributed to the establishment of the federal republican system in Nepal, but there is a disparity in the facilities provided to us and to the Nepal army personnel by the state'*.

Other than their living conditions (including food and shelter), most participants were concerned about their impairment-based health care. They cited government facilities to be insufficient and expressed concern on how they can feed their family members in the absence of sufficient state support. *'Due to my blindness, I may not work and instead have to depend on my family. I am also worried about my child's education'* (Combatant 2). This participant received the full amount of NRs.200,000 as he was in the category of

fully disabled. Similarly, Combatant 3 (classified as having impairments with 20% severity) received NRs.40,000, was worried about his health and felt that the government should provide a special facility for the treatment of his impairments. Combatant 5 also shared the need for a life-long monthly allowance by the government. However, despite having acquired impairments of a similar nature to those from the Nepali army, one civilian interviewee was not receiving any support from the state and said: *'The Government is ignoring the severity of my physical situation'*.

Similarly, all security personnel were receiving their salary as before, and did not report facing discrimination. Besides the facilities provided by the Nepali army, they were also eligible to receive financial support from the state depending on the severity of their impairments, based on earlier mentioned criteria to determine the severity of impairments. Respondent Army 1 reported receiving NRs.100,000. Army 2 reported receiving NRs.200,000. Additionally, Army 3 who reported receiving NRs.200,000 has also been provided with a life-time personal assistant by the Nepali army. Because of this service, the interviewee from Nepali army said, *'it has helped me to move from one place to another'*.

3.6. Poor mechanism of assessing the severity of impairments

In order to gain access to state facilities, it is necessary to have their severity of impairment classified. Though state facilities are determined by the type of disability identity cards, our interviewees reported some inconsistency in the classification of severity of the impairments. Combatant 1 expressed his dissatisfaction on having the severity of his impairments decided only through filling up an application form. He said:

I do not agree to the classification of severity of impairments. There are several inconsistencies in deciding the categories. For example, one of my relatives from Rukum District who is my brother-in-law has severe impairments and cannot control his urine. But he was categorized only as 50% whereas those who are less severe are categorized as more than 50%. I suggest it should be decided through observing the daily life of the individual, rather than deciding without seeing them. Someone can write in the application he is blind but in fact that may not be the case. To control such irregular distribution of facilities, a monitoring mechanism is very necessary.

Similarly, Combatant 4 suggested establishing an independent authority to classify the severity of the impairments. Further, Combatant 2 said: *'I was never inquired about the severity of my impairments but I was given the financial support'*. Combatant 5 also reported that *'though the Government has classified me as a person with 50% severe impairments, I was given only 30% of the support'*. Combatant 3 said that he is not aware of how the severity of their impairments is decided.

Security personnel also shared similar experiences in terms of determining the severity of their impairments. Army 1 said that despite having similar severity of impairments, some of his colleagues were able to receive full support whereas he and some others were given only 50%.

4. Discussion

Although participants expressed mixed feelings towards the family and community support received, combatants reported a comparatively lower level of perceived discrimination compared to their counterparts. Since combatants were schooled about war differently, their

non-impaired family members might feel more positively about their impairments considering they acquired it while serving the nation. Thus, Maoist combatants with impairments may perceive less disability-based discrimination and experience higher levels of positive reactions from their family members. Even though combatants are not fully confident about living within their communities and people's perceptions towards them, they are satisfied by support from their friends.

Members of the Nepali army with impairments also observed various reactions from their families and communities, where only few experienced discriminatory behaviour. This implies that family members of the security personnel are aware that these injuries were sustained through the course of serving the nation.

Maoist combatants also expressed their belief that they will probably not experience discrimination once they start living in communities. Their confidence is the result of a number of reasons, including their individual personal characteristics, support provided by the party and facilities given by the country. For example, due to higher level of motivations from their schooling during the war, they may exhibit a higher level of determination and resilience than expected that would help them to persist in daily living and be more positive about the community's reaction towards their newly acquired impairments.

Furthermore, the study found a disparity in state support for civilians, combatants and members of the Nepali army with impairments, as less state provisions have been found to target civilians. For members of the Nepali army with impairments, they have been provided with continued access to the facilities of the army, or even provided with personal assistants. These individuals can continue to be in the Nepali army up till their retirement age.

Since there is already a system of support in the government security force, members of the security force with impairments were found to manage their daily lives through dual support provision – both from the Nepali army and the Ministry of Peace and Reconstruction. According to a welfare document of the Nepali army entitled *Kalyankari Darpan* (2010), their members with impairments are provided with essential support such as wheelchairs and prosthetic organs for free, in addition to the government relief package. Combatants with impairments were also found to be dissatisfied about the disparity in state facilities between them and government security force members, as the latter gain dual support.

However, despite such special provisions for state facilities including free medical treatment and disability compensation, the civilian interviewee's reported situation in this study might shed some light on the possibility that state facilities might not actually be reaching the many civilians with impairments who are living in rural Nepal. Among the 4305 people who acquired impairments in conflict, Uppadhya (2010) stated that only 1157 have received relief packages from the government, indicating poor implementation on the ground. It can thus be argued that while the combatants have the army to support them, there is no such mechanism to protect civilians with impairments.

It is also clear that there is a lack of a systematic approach to classify the severity of the impairments of the participants to determine state support. Acknowledging the ambiguity and globally debatable definition of disability and impairments, the assessment of impairments and the management of state facilities' distribution to rural areas of the country have not been made transparent. Though Nepal has its own system of classifying disability (Nepal Government 2006), there have been ongoing global work on the definition of disability and impairments. World Health Organization (WHO) has its own definition and classification of impairments (WHO 2001). For more accurate and

consistent disability statistics that take into consideration the human condition of those with impairments, international work on classification might also be useful and relevant for categorization in Nepal and other developing countries.

5. Conclusion

This paper discusses the situation of individuals who have acquired impairments from the decade-long insurgency in Nepal, with a particular focus on social inclusion, state support provisions and family and community attitudes. It was found that combatants generally experience acceptance and positive reactions from their families, while they were found to be simply hopeful to receive the same from the community. This is because the combatants believe that their impairments are the result of their contribution transforming Nepal from a monarchy into a federal republic, which promotes the inclusive participation of marginalized people in the country's development. Security personnel also experienced no serious discriminatory behaviour from their families. Moreover, participants from both the security forces as well as civilians reported almost unchanged attitudes from the community towards them after acquiring impairment. Some of them, however, reported that their participation in the community was seriously restricted after being impaired, as they were not able to go from one place to another, in part, the environment being inaccessible. Furthermore, despite offering some financial support for people who acquired impairments in civil war, state provisions were found to be not only insufficient, but also lacking long-term programs targeting their reintegration into community. In order to achieve community inclusion and economic sufficiency for the broad spectrum of people with impairments, programs such as community-based rehabilitation, training on independent living and vocational skills development are necessary. Beside these training programs, it is also necessary to develop policies to increase state support, access to labor market and address accessibility issues.

A key finding of this study is that, in the absence of sufficient state support, people with impairments clearly struggle to manage their daily life. The UNCRPD has in place a provision for disasters, emergencies and insurgencies. Since Nepal ratified the treaty in 2010, it should commit to protecting and promoting the rights of these people to live in their own communities with appropriate and sufficient facilities.

Finally, a valuable next step could be to compare whether people who acquire impairments in the later age from civil war or those with congenital impairments receive different treatments from their families and the community. These further studies will help not only Nepal but also other post-conflict nations in developing appropriate policies and strategies towards improving the quality of life of people with impairments.

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