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Visit of the Independent Expert on the enjoyment of human rights by persons with albinism

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Preliminary observations

Pakistan

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A. Introduction

At the invitation of the Government of Pakistan, I undertook an official visit to Pakistan from 3 to 12 June 2026. As this is the first visit by a Special Procedures mandate holder for many years, I would like to thank the Government of Pakistan for the constructive engagement with my mandate in planning for this visit in the past year, both as a measure of good will and willingness to initiate conversation on the situation of persons with albinism in Pakistan. I am also grateful to the various layers of officials at the federal and provincial levels for facilitating several meetings with various ministerial and departmental entities, as well as local authorities in the respective provinces I visited.

The visit required substantial planning and coordination within Government and the United Nations Country Team. In this regard, I extend my gratitude to the Ministry of Foreign Affairs, who supported and coordinated my visit, and the Permanent Mission of Pakistan to the United Nations in Geneva, whose willingness to listen and engage provided inspiration for this visit. As in most visits to countries with a vast geographical expanse, logistic support is critical. This was provided by UN agencies, particularly WFP, UNICEF, WHO and UNDSS, often at very short notices, and with effective coordination by the UN Resident Coordinator's Office. I am grateful to all the staff who made this happen.

As I conclude my mission to Pakistan, I have had meetings and engagements with a broad spectrum of governmental and non-governmental entities, visited remote communities with large numbers of persons with albinism, and conducted tours of health facilities and research institutions with relevance to the intersecting issues confronted by persons with albinism. During the visit, I held meetings in Islamabad, Karachi, Dadu and Jan Muhammad Bahoto village in the Sindh province, as well as Lahore and Sahiwal in the Punjab province. In Islamabad, I met officials of the Ministry of Foreign Affairs, including the Secretary of the Ministry; Ministry of Human Rights; Ministry of Law and Justice; Ministry of National Health Services, Regulation and Coordination; Ministry of Climate Change and Environmental Coordination; and Ministry of Federal Education and Professional Training; National Commission for Human Rights; National Commission on the Rights of the Child; and the National Disaster Management Agency. I also visited the National Institutes of Health and encouraged a group of scientists to expand their research portfolio on genetic disorders to include albinism. Outside government, I had consultation meetings with the UN Resident Coordinator and officials of the British High Commission.

In Karachi, I met with persons with albinism, including parents of children with albinism, and visited the Jinnah Postgraduate Medical Centre and learned about the groundbreaking research being done there on rare diseases and the specialized treatment for conditions such as albinism. I was encouraged to learn about the state-of-the-art technology available at the Cyber Knife center to treat cancer for persons with albinism at no cost to the patients. At the invitation of the Mayor

of Sukkur, I visited the Assembly Hall in Karachi and engaged with officials on the intersecting issues faced by persons with albinism and the need for state-funded interventions to tackle the health and psychosocial impact of climate change on persons with albinism in the Sindh district—one of the hottest places in the world.

In Dadu district, I held a meeting with the District Health Officer and his team and exchanged notes on the devasting cycle of heat waves and the rising number of cancer cases amongst the albinism community in the district. As Dadu has the largest reported numbers of persons with albinism in Pakistan, I implored on the authorities to explore innovative approaches to climate resilience and adaptions, including provision of sunscreen and expanded specialized medical care for persons with albinism seeking cancer treatment in the district. This conversation was particularly instructive when I visited the Jan Muhammad Bahoto village in the outskirts of Dadu city, where 10 out of the 50 residents in the village have albinism, including a family with six children with albinism.

In Lahore, I visited and engaged with officials and research professors at the specialized health care and medical education department, where several genres of albinism, including Chediak-Higashi Syndrome and Hermansky-Pudlak Syndrome, were documented over the years by the King Edward medical university in Lahore. At the Thalassemia and rare genetic disorder institute, I learned about the ongoing efforts to tackle health consequences of rare diseases and was encouraged by the willingness of the medical team to expand their scientific research into albinism. In Sahiwal, I met an inspiring group of persons with albinism, who despite the daily struggles, have belief in themselves and are dedicated to building a better life for themselves.

However, a much-anticipated visit to Jacobabad could not go ahead due to a heat wave and security advisory from the Ministry of Foreign Affairs. Jacobabad represents an important part of the dilemmas, dedication and the struggles for survival by persons with albinism. With a population of 810 people, 40 people have albinism, of which 65 per cent are under the age of 16 years, according to the King Edward medical college in Lahore. A visit to the village would have provided rare interaction with a large group of persons with albinism living in a close community as well as gather useful perspectives on their daily existence and survival.

B. Relevance and Context of the Visit

Prior to my visit, information and analysis on the human rights situation of persons with albinism in Pakistan was sparse, and where limited research had been done, this was largely scientific in nature with little or no references to the human story behind the people under study. My interactions with persons with albinism, including children and their parents, brought to light the remarkable resilience of this vibrant community and the extraordinary efforts they invest to navigate around daily struggles with their condition and the limitations in support services and infrastructure. Despite the expansion of research and literature, albinism remains generally

misunderstood, resulting in misperceptions which lead to poor treatment, mischaracterization and inadequate responses to the human rights needs of persons with albinism. In my interactions with authorities and the public, I sought to sensitize, assess good practices and highlight existing gaps, particularly in relation to the human rights of employment, education, healthcare, and family life for persons with albinism.

As I highlighted above, my visit was the first official visit by a Special Procedures mandate holder for almost 15 years. I hope that the interest generated by my visit and constructive interactions I have had with a range of actors, will encourage the Government of Pakistan to intensify discussions with other mandate holders with the view to facilitating visits of interested mandates. This will enrich the human rights discourse, expand spaces for engagement and provide a repository of expertise for the Government of Pakistan to tap into.

This visit has increased insights into the institutional and normative framework relevant to persons with albinism in Pakistan, as well as recent progress and ongoing reforms at the federal and regional levels in this regard. Gaps, including imbalances in the implementation of laws and policies, and in the alignment of domestic laws and policies with international human rights framework, especially in the context of disability rights as they relate to persons with albinism, were consistently highlighted. Personal stories of struggle and triumph, suffering and resilience, and persistence of parents—particularly mothers—in the face of adversity, stood out as the highlight of my visit.

I wish to express my gratitude to all who showed interest in my visit and the work of the mandate. I am particularly grateful to the Pakistan Albinism Society (PAS), which played a major role in helping organize meetings with communities and individuals with albinism. Through its efforts, I reached out to persons with albinism across the country and gained valuable insights into their lived realities, challenges and aspirations. PAS conducts its work largely through social media due to lack of resources and funding and absence of formal registration status. I call on the Government and the international donor partners to assist PAS in their efforts to help create a better environment for persons with albinism in Pakistan.

In concluding my visit, I am pleased to share some of my preliminary findings and recommendations. A longer report detailing the findings and recommendations of my visit will be presented to the United Nations Human Rights Council in March 2027.

C. Albinism in Pakistan

Albinism is a rare, non-contagious, genetically inherited condition characterized by a lack of melanin pigment in the hair, skin and eyes. It occurs in all races, ethnicities and genders. Due to a lack of melanin, persons with albinism are susceptible to skin cancer. The condition is also accompanied by visual impairment, including varying degrees of visual acuity, nystagmus, photophobia, and sometimes strabismus. The combination of visual impairment and vulnerability

to the sun means that persons with albinism are considered persons with disabilities, including under Pakistan's respective provincial legislations on disability. The exact prevalence of albinism in Pakistan is unknown due to lack of data in the national census and governmental bodies. Existing estimates indicate that there are about 30,000 persons with albinism in Pakistan. However, I believe this number is grossly underestimated, especially as cousin marriages, which may impact genetic reproduction, are common in the country.

My interaction with professorial research scientists at the King Edward medical college in Lahore indicates that syndromic types of albinism, namely Chediak-Higashi Syndrome, Griscelli syndrome, and Hermansky-Pudlak Syndrome, which are accompanied by further life-threatening health complications, have been diagnosed in the Punjab region. At least one case of Hermansky-Pudlak Syndrome amongst the Aghan refugee community has also been documented by medical practitioners in the Quetta region of Pakistan.

D. Positive initiatives

The Constitutional, legislative and policy framework in Pakistan provide a foundation for the advancement of the rights of persons with disabilities, including persons with albinism. The Constitution of Pakistan (1973) contains provisions to protect and promote the social and economic well-being of all citizens, including persons with disabilities. Article 27 of the Constitution provides for a regime of rights framed around equality, non-discrimination, and protection of dignity, while Article 38 imposes obligations on the state to cater for individual needs and wellbeing, including food, education, and medical support.

At the international human rights level, Pakistan has ratified seven of the nine core international human rights instruments, which provide responsibilities to fulfil obligations on individual rights in relation to civil, political, economic, social, and cultural rights. These include ICCPR, ICESCR, CEDAW, CRC, CAT, ICERD, and CRPD. Obligations arising from these core treaties and the body of federal and provincial legislation provide a foundational basis for the advancement of non-discrimination for persons with disabilities.

Pakistan functions as a federal state and authority is devolved to the four provinces and two self-governing territories, which exercise power to legislate and enact policy. Several legislations at the provincial level on disability rights have been enacted to strengthen non-discrimination especially in education, health and employment. The Islamabad Territory enacted the Rights of Persons with Disability Act of 2020, while Sindh and Punjab provinces enacted similar legislation in 2018 and 2022 respectively. Strong principles of non-discrimination in employment have been integrated with a mandatory quota system for persons with disabilities of between 2 to 3 per cent. This has to some degree helped in opening opportunities for persons with disabilities.

As persons with albinism are recognized as persons with disabilities, their right to non-discrimination is protected by constitutional and provincial legislation. In the 2020 Islamabad Territory Act, there are provisions against discrimination by public or private institutions. To

ensure specialized support for persons with disabilities, the 2020 Act imposes an obligation on the state to ensure reasonable accommodation, including assistive devices, mobility aids, and rehabilitation services that are made available upon request and at the point of need.

The issue of non-discrimination and available support for persons with disabilities was consistently highlighted during my interactions with federal and provincial authorities, who shared several positive features of the disability rights support architecture. A key component of the support is the disability certificate which is issued by the Council on Rights of Persons with Disabilities upon an assessment by a medical board. The certificate forms the basis of the issuance of a disability card by the National Database and Registration Authority (NADRA). Several persons with albinism I met, had applied and successfully obtained the disability certificate. This provides a range of benefits, including free or highly subsidized education, health care and discounts on rail and air travel. For many persons with albinism, the disability certificate has provided a critical lifeline in their quest for access to education with some achieving multiple advanced postgraduate degrees in diverse areas of study.

While Pakistan has no albinism-specific law or policy at the federal and provincial level, the government entities I interacted with highlighted that the laws on equality, non-discrimination and access to education, employment and health, are adequately inclusive to apply to persons with albinism. In both education and health, the authorities emphasized that services are free to all, and where specialised services are needed, the infrastructure exists to support. They acknowledged that gaps may exists and that ongoing reforms through policy and legislative review are meant to address gaps. They further highlighted the roles of specialised bodies such as the National Human Rights Commission and the National Commission on the Rights of the Child, which continue to play pivotal roles to reconcile the rights and responsibilities of rights holders and duty bearer. In particular, they noted the progressive role of the Ministry of Human Rights, created as a separate entity in 2015 to review and harmonize legislation with international human rights treaties.

While these legislative and policy provisions, and measures are positive and lay the foundation for further reform and progress, my visit found some gaps, inconsistencies and concerns.

E. CONCERNS AND CHALLENGES

- **Data and statistics**

In all my meetings with government institutions, public health officials and research institutions, I was informed of the lack of statistics on persons with albinism in Pakistan. Both government officials and health professionals utilized figures obtain from the Pakistan Albinism Society, which are based on estimates likely to underrepresent the population of persons with albinism in Pakistan. In my meetings with officials, I underlined the value of disaggregated data in evidence-based decision-making and intervention programs, particularly in ensuring the effective implementation of the Sustainable Development Goals and the Leaving No One Behind framework – of which persons with albinism tend to be among the furthest left behind. As there is no data on albinism,

the prevalence of the condition in Pakistan is not adequately known. I had requested a meeting with the Pakistan Bureau of Statistics to discuss this issue, but they were not available. While the Pakistan Albinism Society is compiling data on persons with albinism, lack of resources and expertise in data collection imply that their approach and results are limited.

- **Disability related support**

Since the adoption of the 1971 Constitution, the disability rights architecture in Pakistan has evolved through policy guidance and provincial legislation. Despite the ratification of the CRPD, the medical model of disability prevails through the exclusive authority granted to medical assessment boards to determine eligibility for the disability certificate and related identification documents. Consequently, for persons with albinism this excludes the need to remove barriers interacting with the lack of melanin, including through the provision of sunscreen. Furthermore, there is no unified law to reconcile constitutional provisions, policy guidance and provincial legislations. As differences in focus and language in provincial legislation may exist, this could open up gaps and inconsistencies in implementation. The absence of a unified law has also resulted in a variation in understanding and interpretation from one province to another.

A recurrent example highlighted during my visit includes the inconsistency in the determination of a disability by the medical board. Some persons with albinism who applied for a disability certificate had their application rejected, in most cases without explanation. Others who had obtained the certificate faced bureaucratic hurdles in having this registered with NADRA and thereby included on their national identity cards so they could more easily obtain relevant benefits. Many persons with albinism, however, were unaware of the disability certification, its benefits, or how to obtain it. Even among those who successfully obtained the certificate, many were unclear about the benefits beyond discounted air and rail travel.

I also noticed a reluctance among some persons with albinism to obtain the certification or have disability reflected on their national identity cards due to stigma against persons with disabilities in the country. Some believed such an identification on their card would exclude them from certain jobs and even marriage opportunities due to stigma against persons with disabilities.

There is need to tackle stigma associated with disability in the country, as well as a harmonization of the application process of the disability certification with clear and publicly accessible guidance, including a public campaign to explain the benefits.

Poor visual acuity is a common challenge for persons with albinism, which often has consequential impact on their lives. Prescription glasses may improve, but not fully correct eyesight. Magnifiers and sunglasses are also essential assistive devices for persons with albinism. Furthermore, due to their vulnerability to skin damage from the sun and skin cancer, sunscreen is essential. Despite some of the notable benefits of the disability card, prescription glasses, sunglasses, and magnifiers are not part of the support package, nor is there any financial support to assist in the purchase of sunscreen.

- **Physical and mental health**

Persons with albinism often need regular and specialized health interventions from childhood to their adult life. Such services include ophthalmologists, dermatologists and oncologists. For those with Chediak-Higashi Syndrome and Hermansky-Pudlak Syndrome, specialized services also include those of a hematologist, pulmonologist, and/or gastroenterologist. They will further require geneticist for early diagnosis to ensure appropriate, critical and timely medical interventions to prevent complications and untimely death.

In Pakistan, access to health care in government facilities is free at the point of contact and with sporadic specialized services available in hospitals. A small administrative fee is sometimes paid to see a specialist, but even this can be out of the reach of some persons with albinism who tend to be among the poorest in society. Persons with albinism I interacted with highlighted serious challenges in accessing specialists due to the limited number in some hospitals, as well as financial, geographic and time constraints. Those who can afford are compelled to resort to private medical services. However, these are expensive and out of reach of many. Two persons with albinism I met in the Sindh province informed me that after being diagnosed with skin cancer, they were compelled to raise 1.2 million Pakistan rupees to seek treatment at a private hospital in Jamshoro. They could not continue with the follow-up treatment as the cost was beyond their reach.

Sunscreen, which was recently added to the WHO's Essential Medicines List for persons with albinism, does not yet appear to have been added to the national essential drug list. While authorities acknowledge a lack of support for persons with albinism in this regard, they highlighted growing production of local sunscreen, some of which apparently cost as low as 400 to 600 rupees. Several persons with albinism I met, however, mentioned that even this was pricey for them, while others expressed concern about the quality of these products. Others informed me of the lack of a culture applying sunscreen despite the extreme heat and vulnerability to skin cancer. With rising temperatures in Pakistan with some areas in the Sindh province hitting 52 degrees, there is need for an urgent national conversation and strategy to integrate use of sunscreen, especially for persons with albinism.

I am further concerned about the mental health of persons with albinism, many of whom described feelings of anxiety and depression due to constantly being subjected to microaggressions, rejection, social exclusion, and unwelcome stares due to their hypervisibility. Most described self-isolation and avoidance of public gatherings, including family gatherings as a coping mechanism. Some parents mentioned aggressive behaviour of their children with albinism which they believed was due to bullying. Adults also mentioned previously being aggressive as a response to bullying when they were children. One young woman mentioned that she had been diagnosed with obsessive compulsive disorder (OCD) apparently as a result of the constant stares and negative judgement and sexual comments. Most stated that they had not sought or received mental health support despite feeling they needed it. In my discussions with authorities, it did not appear that the

need for mental health support for persons with albinism was accommodated in the health service chain..

- **Education**

As a federal system, education is largely devolved to the provinces which formulate policy and legislative requirements for the broad spectrum of education needs and support services. At the federal level, policy guidelines exist to shape an inclusive education system with flexibility accorded to school administration to tailor support and programs according to local needs. In my interaction with officials at the Ministry of Education and Professional Training, I was informed that efforts are being made to strengthen the special education system, including the enactment of a bill on dyslexia in 2023. The officials highlighted several initiatives to make schools more accessible, and health and nutrition programs to provide school meals, as well as provision of integrated technologies such as smart boards.

I drew attention of the authorities to concerns raised by persons with albinism I met during the visit who highlighted slow pace in the implementation of guidelines and standard operating procedures on bullying and called for more robust action to ensure a safe and productive learning environment. While the officials acknowledged incidents of bullying, they stated that this is not endemic and that incidents are often dealt with by relevant school management at both public and private institutions. I further raised the need to ensure greater awareness of educators of the needs of persons with albinism and include these in inclusive education policies.

The poor visual acuity of persons with albinism implies that access to reasonable accommodation at all levels of their education journey is extremely important for their intellectual development and subsequent professional life. Persons with albinism I met and their parents were adamant that reasonable accommodations in schools hardly exist. Almost all had no access to magnifiers and prescription glasses. While some were enabled to sit closer to the board, others stated that even this accommodation was not allowed by some teachers. Only two out several persons with albinism I met had been granted extra time in exams. For the majority, the facility was never provided to them, while some had no knowledge of the possibility of provision of accommodations. Some persons with albinism in rural communities grew up without going to school due to their poor visual acuity, lack of support at the local level, as well as distance in getting to the schools, particularly in hot conditions in some cases. Stigma, bullying and lack of understanding of educational capacity of persons with albinism also often lead to school dropout or non-registration of persons with albinism.

The widespread absence of reasonable accommodation is a cause for concern and requires urgent review and introduction of a national policy to ensure that no person with albinism is left behind in the pursuit of education and employment opportunities. Integrated support within the tertiary and vocation school system is also required to help build a pool of professionals with the albinism community. In Punjab, a young woman who loves the art recounted to me how a teacher discourages her from pursuing her passion on the ground of her limited visual acuity. A

coordinated sensitization within the public and private education system is necessary to ensure uniformity in access to reasonable accommodations for persons with albinism.

- **Employment**

While federal and provincial levels laws tend to encourage employment through the adoption of a quota system as outlined in Article 27 of the Constitution, there is lack of a strong legal regime to ensure the promotion of employment as a right rather than a principle or aspiration. A possible source of this disconnect could be traced to the legacy of the Disabled Persons (Employment and Rehabilitation) Ordinance of 1981. Subsequent administrative circulars issued by the federal government has sought to add clarity, but this was confined to the quota rather than the elevation of the principle to a right status.

While I had no interaction with any organization that provides support for persons with disabilities, including persons with albinism to obtain skills to enhance their employment opportunities, I am encouraged that the Network of Organizations Working for People with Disabilities and the Disabled Welfare Association offer training to help persons with disabilities to secure jobs and placement opportunities. Similarly, the Pakistan Independent Living Centre provides skill development to prepare persons with disabilities for long term employment.

Despite these initiatives and the implementation of the disability quota system, persons with albinism struggle to find work that correspond to their skills and qualifications. Several who shared their experiences spoke about discrimination, stigma and lack of recognition of their abilities and qualification. While some were able to find work after being unemployed for several years, large numbers remain unemployed with some opting for self-employment in technology, agriculture and on demand social media. Others who had expressed interest in starting small businesses, could not secure the necessary financing to pursue their dreams. The challenges in securing employment also forced a large number of persons with albinism to engage in subsistence farming, Informal and irregular work in the gig economy where they are vulnerable to abuse, exploitation and prolonged exposure to extreme heat.

Persons with albinism also raised serious doubts about the effectiveness of the employment quota system with many indicating that although encouraging as an element of employment law, in practice the system hardly works due to reluctance of employers to recruit persons with disabilities often arguing that their productivity would be hampered due to their disability. Others highlighted the unwillingness of employers, especially private businesses in the hospitality industry to employ persons with albinism as it may affect the public image of the businesses. For the few who are employed, no support is granted in the form of assistive devices or related reasonable accommodation. A comprehensive review of employment laws and policies would go a long way to integrate persons with albinism in the labour market.

- **Discrimination, Stigma and Micro-aggression**

In my interaction with government officials, there has been a consistent messaging that Pakistan laws and culture prohibit and discourages discrimination of all kind. While my visit has not documented any incidents or serious violence against persons with albinism in Pakistan, there have been several accounts of micro-aggressions, name calling and harassment of a sexual nature. In all the provinces I visited, persons with albinism spoke about instances of being ridicule because of their look with some called "Gora" and other unpleasant names, particularly those equating them to animals and even genies. For female persons with albinism, the experiences could range from unpleasant glances to harassment of a sexual nature. Women with albinism I spoke to, mentioned unwelcome sexual comments and vulgar sexual objectification.

Both men and women mentioned challenges in finding marriage partners, with men being rejected by potential suitors and their families due to their albinism. However, all stated that the chances of marriage for men with albinism increases with their socio-economic status. Men and women both stated that women with albinism face greater challenges in finding a marriage partner due to a misbelief that they are not able to bear children or when they do, will give birth to children with albinism. Despite albinism being a genetic condition requiring both parents to carry the gene, many appear to wrongly believe that women with albinism are more likely to give birth to a child with albinism than men with albinism. Furthermore, due to stigma and discrimination the birth of a child with albinism appeared to be a concern even with women with albinism who expressed anxiety that their children would be subjected to the same negative experiences as them.

- **Climate Change**

Exposure to climate change related disasters and extreme weather events affect persons with albinism disproportionately, as it does with many people with disabilities. While specific data may be scarce, the mortality rate for persons with disabilities across many disaster situations is reportedly up to four times higher than that of persons without disabilities.

Within the context of Pakistan, the most noticeable climate change related concern for persons with albinism is the rising temperatures of up to 55 degrees Celsius in some parts of the country. These high temperatures are often accompanied by extreme UV index which pose a major risk of skin damage and skin cancer for the general population at large. Due to the lack of melanin, the risk of skin cancer and the incidence of sunburn and other skin damage is multiplied for persons with albinism. I met with persons with albinism in Dadu and had planned to travel to Jacobabad, both of which have extremely high UV index and a sizeable population of persons with albinism. In one village in Dadu, a fifth of the population comprised persons with albinism. Despite this, persons with albinism remain invisible in climate action policies.

In my interaction with both the Ministry of Climate Chage and the National Disaster Management Agency, I learned that Pakistan has strengthened its legal and policy framework on disaster mitigation and response. Authorities highlighted the existence of the National Adaption Policy and

associated component on disability rights as well as a revamped National Climate Mitigation Framework which seeks to enhance the adaptive capacity of infrastructure and services delivery within the health and education sectors.

Pakistan is vulnerable to climate-induced disasters, and persons with albinism have been impacted in recent floods. In Dadu district and other areas, large numbers of persons with albinism were forced to abandon their homes in 2022 due to floods and extreme heat and relocated to other cities, including Karachi, Hyderabad and Jamshoro. Those who remained in the district had to deal with the loss of livelihoods and psychosocial trauma. I am encouraged that the Government and humanitarian actors responded to the aftermath of the 2022 floods in Dadu and built homes for persons with albinism in the Jan Muhammad Bhaoto village.

The multi-dimensional adverse impact of climate change on persons with albinism underscores the need to include them in climate action – in the national, regional and global responses to the threats of climate change. Fundamentally, persons with albinism need to be represented in climate change dialogue so that data on how they are affected are collected as part of wider policy discussions. Broader support including free access to sunscreen and specialized training on mitigation and adaption could make a significant difference for persons with albinism. While I welcome the scaling up of local production of sunscreen to enable better access for persons with albinism, I encourage the Government to initiate a holistic review of the particular impact of climate related disasters on persons with albinism and incorporate finds into the disaster response and mitigation framework.

Preliminary recommendations

I have found progress and positive elements in the legal and policy framework that apply to persons with disabilities. If implemented consistently and coherently, some of the elements could have a transformative impact on the human rights of persons with albinism. However, my preliminary finding also found gaps and inconsistencies in the application of law and policies. As I conclude my visit to Pakistan, I provide the following preliminary recommendations for further action by the Government of Pakistan:

- Initiate a data collection strategy across all federal and provincial authorities on albinism
- Provide support and build capacity of the Pakistan Albinism Society, including facilitating their registration
- Ensure persons with albinism are consulted and included in the development of climate change adaptation, mitigation and other policies.
- Expand access to the Benazir Income Support Program to include persons with albinism as special category
- Review and harmonize the disability rights framework and recognize persons with albinism as persons with disabilities in line with international human rights standards

- In line with the recent decision of the WHO's Essential Medicines List Committee, include sunscreen on the list of essential drugs for persons with albinism
- Review and harmonize school and workplace accommodations to ensure adequate access and clarity for persons with albinism
- Ensure access to assistive devices, including prescription glasses, sunglasses, magnifiers, and monocular for persons with albinism
- Develop and implement a sensitization campaign on albinism in schools, universities, and within the healthcare system
- Support non-governmental organisations working in the disability space with funding and representation in key policy discussions
- Build the capacity of health professionals to respond to the physical and mental health needs of persons with albinism, including through continuing professional development programs
- Harmonize the implementation of the inclusive education system to ensure standardization and universality in access to quality support.