

*Aref & Attia, 2017*

*Volume 3 Issue 3, pp. 563-579*

*Date of Publication: 15th December, 2017*

*DOI-<https://dx.doi.org/10.20319/pijss.2017.33.563579>*

*This paper can be cited as: Aref, A., & Attia, M. (2017). Disability Protection in Work-Family Balance Policies in the Gulf Cooperation Council. PEOPLE: International Journal of Social Sciences, 3(3), 563-579.*

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## **DISABILITY PROTECTION IN WORK-FAMILY BALANCE POLICIES IN THE GULF COOPERATION COUNCIL**

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### **Disclaimer**

*This policy oriented research article was accomplished by Ahmed Aref and Mostafa Attia in their personal capacity for their participation in the 23<sup>rd</sup> International Conference on Social Science and Humanities, Imperial College London, 11-12 September, 2017. The analysis and opinions expressed in this article are the authors' own and do not reflect the view of the University of Leeds or Doha International Family Institute.*

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### **Abstract**

*Work-family balance (WFB) has come to the forefront of policy discourse globally in recent years. The emergence of both the Convention on the Rights of Persons with Disabilities (UNCRPD), along with Sustainable Development Goals (SDGs), has forced disability protection*

*to be a major policy concern as a cross cutting theme within the WFB frameworks. Disability protection has numerous variables and indicators through research and policy analysis. This paper highlights one important aspect of disability protection; which is how the WFB policies give priority to the employed parents of children with disabilities in the GCC. In order to address an existing research gap in this area, this policy-oriented paper will provide a critical overview of institutional and legislative mapping on the situation of disability protection from a WFB perspective in the GCC, ending up by suggesting policy recommendations towards better WFB provisions for employed parents of children with disabilities. The paper will depend on some document analysis to the current legislations that govern the rights of disabled people within GCC. The methodological framework will also include the MAP approach to present the current benefits given to parents who have disabled children.*

**Keywords**

Disability Protection, Work-Family Balance Policies, Countries of Gulf Cooperation Council (GCC)

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**Disability Protection in Work-Family Balance Policies in the GCC**

**1. Introduction: Disability in Policy Making**

The widespread and rapid ratification to the UNCRPD which declared in 2006 could be considered as an important milestone in changing the perspective in which the states are interacting with disability. Another fundamental nudge is the recent development of the 2030 Agenda of SDGs, which gave more consideration to disability, bringing the topic as a priority for public policy making.

There are diversified perspectives in policy making related to disability; examples of these perspectives are: community inclusion, anti-discrimination, empowerment, protection, employment, health, education, rights-based and service-based perspectives, etc. (Oorschot & Hvinden, 2001). In general, some policies are explicitly designed for the rights of people with disabilities, their protection and empowerment; while others are considered as implicit policies mainstreaming disability in public policies (Fulcher, 2015).

WFB policies are designed to reconcile the paid work and care work. This reconsolidation is fundamental to the lives of adult family members to manage successfully a job alongside care for dependents in the context of rapid and dramatic family and labour market change (Lewis, 2009). Evidence shows that the competing demands of work and family are more

stressful on the employed parents of children with disabilities, as it has become increasingly difficult to balance the paid work with the unpaid work in the form of the constant care provided to their dependent children.

Accordingly, WFB policies themselves are not considered as explicit policies for disability protection. However, they include a fundamental implicit aspect of disability protection, in terms of how these policies specifically pay attention to the rights of employed parents of children with disabilities due to their special caregiving demands, such as extra time allocation to fulfil daily responsibilities.

Hence, the objective of this policy-oriented paper is to analyze how policies in the Gulf Cooperation Council (GCC) countries -Bahrain, Kuwait, Oman, Qatar, Saudi Arabia and United Arab Emirates- integrate disability in WFB provisions inclusively to support parents of children with disabilities to reconcile their jobs and family responsibilities. Although there is literature on WFB policies in the GCC, the disability protection within these policies is under-researched.

This paper will therefore begin by explaining the location of disability protection within WFB framework in general. Subsequently, factual information on disability phenomenon and different legal definitions existing in GCC will be introduced. Following this, related legislative and institutional mapping will be examined within a benchmark analysis. Accordingly, the concluding remarks of this paper will incorporate policy recommendations towards better inclusion of disability protection in WFB policies in the GCC.

## **2. Methodological Approach**

The geographical scope of this study covers the six countries of the GCC.

This paper addresses a research gap on disability protection in the region. It employs a desk-review methodology for institutional, policy and legal mapping for the disability protection from a WFB perspective in the GCC. The paper will apply a 'MAP' approach, which is composed of the following three elements: (Verhulst, & Young, 2015)

- (I) Milieu: A problem does not exist in a vacuum. Mapping the problem and solution space requires a clear understanding of the ecosystem in which a problem exists. Accordingly, the context of disability protection policies within WFB policies in the GCC will be examined.

- (II) Actors: A critical component of gaining an understanding of a topic area involves developing knowledge on those working on that topic, as well as the communities affected by it. Therefore, the legal and institutional setting will be mapped.
- (III) Problem: Gaining a firm grasp on the problem and solution space requires an exploration of the literature, evidence and existing narratives. Hence, policy recommendations will be provided.

MAP approach provides flexibility in dealing with diversified resources including Gray Literature, which is valuable explicitly in this paper, due to the lack of related evidence, statistical facts and literature.

### **3. Disability within Work-Family Balance Framework**

Work–family balance (WFB) has come to the forefront of policy discourse globally in recent years, against a backdrop of globalization and rapid technological change. There is also an ageing population and concern over female participation rates in the labour market when fertility rates are falling (Gregory & Milner, 2009). Pressures from an increasingly competitive work environment are leading to conflicting priorities for employers creating considerable stresses for employees trying to “juggle” work with family responsibilities (O’Brien, 2012). Thus, achieving WFB can be made easier by family-oriented policies such as social benefits, employment-protected leave for parents, affordable formal arrangements for family care and flexibility in the organisation of work (Davis, 2013).

According to the body of knowledge on WFB policies and the International Labour Organization (2011), the components of WFB framework are categorized as follows:

- (I) Leave policies; defined as maternity leave, paternity leave, parental leave / caregivers’ leave and long care leave.
- (II) Childcare services; including nursery in / near the workplace, breastfeeding hours / break and breastfeeding facilities at work.
- (III) Flexible working arrangements; including reduction in long hours, work schedule flexi-time, part-time system, career breaks and remote jobs.
- (IV) Reducing unpaid work; which is related to transportation and accessible schools or health and day care centers.

Disability protection is a cross cutting theme within the WFB components, as a policy concern. Within the first group of leave policies, disability has to be a matter of policy consideration to increase maternity leave for employed parents of children with disabilities and to provide additional caregivers' leave. For the second group related to childcare services, it is essential from the disability protection perspective to take the necessary procedures to ensure that the nursery in / near the workplace is disability friendly. This may include offering a range of tools such as ramps and equipment, to ensure that the place is reasonably accommodating the needs of people with a disability as per the UNCRPD.

In fact, literature proved that there is a negative influence from the caregiving demands of the children with disabilities on their parents, who found it difficult to balance work and family roles (Freedman, Litchfield & Warfield, 1995). Recent evidence shows that WFB policies have been demonstrated to impact work functioning, family relations as well as child development especially for employed parents of children with disabilities (Brown & Clark, 2017).

#### **4. Factual Information concerning Disability in the GCC**

Data on child disability is available from a large array of sources, including censuses, administrative records, national disability surveys and national household surveys. Globally however, there is a challenge in producing reliable and comparable statistics on measuring child disability and providing accurate records. This could be because of the lack of consistent definitions and indicators of disability, combined with disparities in the methodologies used to gather data. As a result, a large discrepancy between governmental and international organisations' disability statistics could be found. This hinders the development of effective policies and programs (UNICEF, 2017)

Accordingly, accurate statistics related to mapping several types of disabilities across ages and gender are not comprehensively developed in the GCC. Hence, there is no available data on child disability in particular, however the below table provides an overview on the disability statistics in general in the GCC countries as per the national data and each country's definition.

**Table 1: Disability Statistics in the GCC**

| Country              | Legal definition of disability  | Number of population  | Percentage from the total population |
|----------------------|---|---|--------------------------------------|
| Bahrain              | A person who suffers from a deficiency in some of his or her physical, psychological or mental abilities due to illness, accident, congenital cause or genetic factor that has resulted in full or partial disability.  | 9,772   | 0.67                                 |
| Kuwait               | Anyone suffering from full or partial impairments that lead to a lack of physical, mental or sensory abilities, that may prevent him from providing life requirements to work or to equally and effectively participate in the society  | 40,368  | 4.7                                  |
| Oman                 | A person who suffers from a lack of some psychological, physical or mental abilities as a result of a genetic or congenital factor, disease or accident, which limits his ability to perform his natural role in life compared to those in his age.   | 68,000  | 3.2                                  |
| Qatar                | Any person with a total or permanent disability in any of his or her physical, psychological or mental abilities to the extent that limits his or her potential for learning, rehabilitation or work.   | 7,634   | 0.054                                |
| Saudi Arabia         | Every person has a total or partial disability in his or her physical, psychological, mental, communicative, educational or psychological capacities to the extent that it reduces the possibility of meeting his or her normal requirements in circumstances similar to that of non-disabled persons           | No available national data.<br>Estimates of 700,000 – 900,000 | 3.3                                  |
| United Arab Emirates | Any person with permanent or temporary disability, with partial or full impairment in his or her physical, psychological, mental, communicative or educational abilities, to the extent that it reduces the possibilities of meeting his or her normal requirements in comparison to those without disabilities | 25,776  | 0.34                                 |

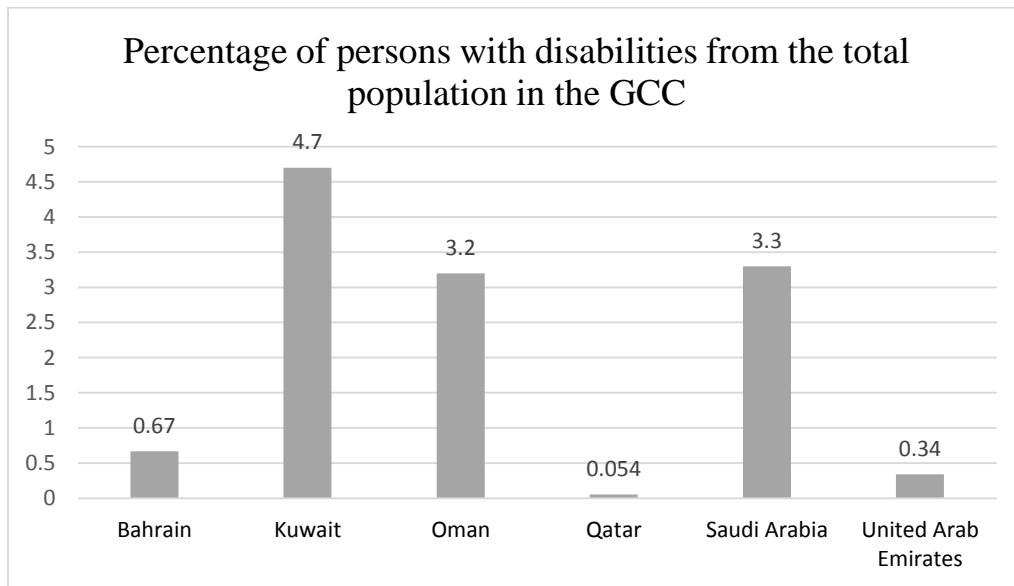
Source: (Alaza, 2017).

The analysis of the above table could be viewed in two dimensions – disability definitions and statistical information. Through different countries’ definitions of disability, it could be seen that whilst their definitions differ from one another, most of them have used words like ‘suffer’, ‘problem’ etc. as well as conflicting between the person’s impairment and

disability. Moreover, most of these definitions have considered or looked at disability from the medical perspective (Barnes, 2005), locating the problem on the capacity of individuals.

Although all GCCs have ratified the conventions on the rights of persons with disabilities, its' legal definitions of disability are still far behind. Approaches like the social model of disability (Barnes, 2006) giving more weight to removing the community barriers to build disabled people's independence somehow do not exist.

The second dimension is related to disability statistics as, according to the mentioned national records in table (1), there are discrepancies in defining disability, which makes the phenomenon intangible in terms of data and measurement. Figure (1) is extracted from table (1) to show the percentage of persons with disabilities from the total population in the GCC. However, estimations from international data; i.e. the world report on disability by World Health Organization and World Bank (2011) show higher percentages than the mentioned national ones.



**Figure 1:** *Percentage of Persons with Disability from the Total Population in the GCC According to the National Data*

## **5. Legislative Mapping**

Legislative mapping will be divided into two sections:

### 5.1 Disability Legal Frameworks in the GCC:

This section gives general overview on the legal framework of disability in the GCC in terms of legislations and national strategies on disability. During the past two decades, GCC countries have made legal progress in situating disability at the national agendas. While the six GCC countries ratified the United Nations Convention on the Rights of Persons with Disabilities (2006), literature shows that rights of disabled people are prioritized differently on different national agendas. It could be a positive sign that all the six countries have issued disability legislations, which is unfortunately not the case in other Arab countries, for example Egypt.(Rehabilitation Law39/1975) At the moment, Bahrain and Qatar have national strategies, explicitly or implicitly tackling disability as a national priority. Table (2) shows the laws and national strategies related to disability in the GCC.

**Table 2:** *Laws and National Strategies of Disability in the GCC*

| Country              | Disability Law   | National Strategy   |
|----------------------|--|---|
| Bahrain              | Law No. 74 of 2006 on the Welfare, Rehabilitation and Employment of Persons with Disabilities                                    | National strategy for the rights of persons with disabilities (2012-2016) and its implementation plans. |
| Kuwait               | Law No. 8 of 2010 concerning Rights of People with Disabilities  | Under progress.   |
| Oman                 | Welfare and Rehabilitation Act of Disabled Persons, issued by Royal Decree. No. 63/2008  | Under progress.   |
| Qatar                | Law No. 2 of 2004 in respect of People with Special Needs  | - Qatar National Vision 2030<br>- National Development Strategy 2011-2016                               |
| Saudi Arabia         | National Law issued by the Royal Decree No. (M / 37) dated 09/23/1421 (Hijri Calendar) for the care of persons with disabilities | Under progress.   |
| United Arab Emirates | Federal law no 29 of 2006 on the rights of persons with disabilities, amended by federal law no 14 of 2009                       | Under progress.   |

Analyzing this table could show that while the 6 countries have issued a national disability law trying to follow the principles and language of the UNCRPD, most of them do not have a disability national strategy shaping the disability future and the governments' pathways to reach the goals of the 2030 inclusive development agenda that they signed. What is positive is that comparing the history of disability laws on these countries, with the new ones, could show a



development on the terminologies used, expressing more the rights based language and sensitive terminologies, although with different levels. The same development could be observed when it comes to disability definitions and concepts, although to a limited extent. An indicator could be to what extent each country has been influenced by the global disability development, specifically both the UNCRPD and SDGs.

## **5.2 Disability Protection in National GCC WFB legislations**

This section examines in particular the provisions of disability protection within WFB legislations in each country, through mapping the benefits given to the employed parents of children with disabilities in the GCC. This will include exploring the location of disability in the national legislations as per the ILO mentioned framework on WFB (2011). The mapping will be based on the first three components of the framework which are: (1) Leave policies; (2) Childcare services; and (3) Flexible working arrangements. The mapping process will not include the fourth component of ILO WFB framework, which is related to “Reducing unpaid work” through infrastructure, transportation, schools and health, as this specific component broadly comprises all explicit and implicit settings that might be considered as family disability friendly policies. Therefore, it might be a topic for discussion in another paper.

In order to map the benefits given to the employed parents of children with disabilities in the GCC, (in terms of leave policies, childcare services and flexible working arrangement), the labour provisions were analysed. The legal framework that regulates labour provisions in the GCC countries is usually divided into two laws: one for public sector and the other for private sector, except Saudi Arabia where there is one labour law for both sectors. In general, the laws of public sector in the GCC give more benefits to the employees in terms of WFB than the laws that regulate the private sector. These benefits may include inclusive childcare leaves, longer maternity leaves and inclusive childcare leaves for employee mothers of children with disabilities (Aref & Al-Kahlout, 2015).

Accordingly, the legislative mapping will be in this paper limited to the laws of the public sector. The below table no. (3) shows the legislative provisions that employed parents with children with disabilities can benefit from.

**Table 3: Legislative Provisions of WFB in the GCC**

| GCC Countries         |   | Bahrain                       | Kuwait   | Oman  | Qatar  | Saudi Arabia                          | United Arab Emirates  |
|-----------------------|---|-------------------------------|--|---|--|---------------------------------------|---|
| Legal framework       |   | Civil Service Law no 35/ 2006 | Decree Law No 15 of 1979, on the Civil Service & Executive Order No. 3 of 2016 | Royal Decree No. 120/2004 issuing the Civil Service Law | Civil Human Resources Law No.15 of 2016                          | Labour Law, Royal Decree No. M/51     | Federal Decree Law No. 17 of 2016, amending provisions of Law No. 11 of 2008 on Human Resources |
| Leave provisions      | Maternity leave (Day)   | 60                            | 70   | 50  | 60   | 60                                    | 90  |
|                       | Extended Maternity Leave in case of giving birth to twins                 | 0                             | 0  | 0   | 90   | 0                                     | 0   |
|                       | Childcare leave for female employees                                      | 6 years (unpaid)              | 6 years (unpaid)   | 1 year (unpaid)   | leave to care for a sick child, based on a medical report (paid) | 1 month (paid) + 1 month (unpaid)     | 0   |
|                       | Childcare leave for female employees of children with disabilities        | 6 years (unpaid)              | 0  | 0   | 5 years (paid)   | 3 years (25% paid)                    | 0   |
|                       | Paternity leave   | 0                             | 0  | 0   | 0  |                                       | 3   |
| Childcare arrangement | Employer to provide nursery in / near the workplace                       | –                             | If female employees are more than 50   | –   | –  | If female employees are more than 100 | –   |
|                       | Breastfeeding hours/ break  | 2                             | 2  | 0   | 2  | 1                                     | 2   |
|                       | Duration the female employee can benefit from breastfeeding hours (Month) | 24                            | Not specified  | 0   | 24   | 24                                    | 4   |
|                       |   |                               |  |   |  |                                       |   |

|                              |  |   |   |   |   |   |   |
|------------------------------|--|---|---|---|---|---|---|
| Flexible Working arrangement | Provision on providing flexible work arrangements including part-time system | √ | - | - | √ | √ | √ |
|------------------------------|--|---|---|---|---|---|---|

Analyzing the manner in which the different countries have interacted with disability protection in WFB framework, it could be seen that in three GCC countries (Bahrain, Qatar and Saudi Arabia) a fundamental explicit benefit was given to the employed parents of children with disabilities, which is the “Childcare leave for female employees of children with disabilities”. While Qatar was the most generous in granting five years fully paid leave for female employees of children with disabilities, Saudi Arabia offers three years partially paid with 25 percent of the salary. Bahraini law grants a longer period of six years, however, this period is considered as unpaid leave, while the female employee in this case is in high need of financial support. On the other hand, Kuwaiti, Omani and Emirati laws give no specific attention to childcare leave for female employees of children with disabilities.

Comparing this to the international practice, the mentioned countries achieved a high standard of progress in regards to childcare leave period for mothers of children with disabilities. Some examples could be given from the OECD experiences: in Portugal and Italy, the period is up to 3 years; in Sweden it is 120 days per child; in France, the maximum duration is 310 days within a period of three years; in Ireland, it is 12 months; in Greece it is only 10 days (OECD, 2010).

Although there is such progress in the three GCC countries in terms of granted period, and in terms of financial support in the case of Qatar, still there is a need for more explicit provisions to take into account some impairments which may need more support than others, and provisions to provide specific flexible working arrangements for employed parents of children with disabilities. Moreover, new policies regarding the disabled families’ demands and what support mechanisms should be put in place - for example, providing disability-friendly nurseries near the work place - would facilitate more reconciliation of work and family responsibilities for the employed parents of children with disabilities.

## 6. Institutional Setting

As mentioned, WFB policies are not the implicit policies of disability, but rather they are explicit, providing specific provisions to the employed parents of children with disabilities. Hence, there are no specific national machineries or committees to develop policies in this regard. However, this section will give a general analysis on the current institutional setting of disability in the GCC. When it comes to disability and institutional settings, the literature has presented a wider debate around how this institutional approach can either empower disabled people within their communities or just position them as care receivers. In other words, could the institutional based approach lead to medical encapsulation of disability? The below table captures the disability national machineries (in terms of ministries, councils and public authorities) and the existence of national committees in the six GCC countries.

**Table 4:** *National Machineries of Disability in the GCC*

| Country | National Machinery/<br>Institutions                                 | National Committees   |
|---------|---|---|
| Bahrain | Disabled Services Center, Ministry of Labour and Social Development | Based on article 16 of Law no. 74/2006 concerning the care, rehabilitation and operation of services for the disabled, a High Commission for Disabled Affairs headed by the Minister of Social Development was formed, including representatives of government, civil society and the private sector. Special conditions of the High Commission as per Article 18 of the mentioned law delegate major responsibilities to this Commission, especially that it was assigned to study and prepare the general policy on care for the disabled and Rehabilitation in the Kingdom of Bahrain. |
| Kuwait  | Public Authority of the Disabled                                    | –<br>Existence of the Public Authority of the Disabled, based on law No. 8 of 2010 concerning rights of people with disabilities, is replacing the institutional setting of a national committee.   |
| Oman    | Directorate of Persons with Disabilities, Ministry of Social        | The National Committee for Disabled Care issued by the Ministerial Decision   |

|                      |  |   |
|----------------------|--|---|
|                      | Development  | No. 1/2009 headed by the Minister and the membership of a number of the Excellences the Undersecretaries of the concerned ministries, a representative from the private sector, a representative from the disabled rehabilitation centers and a representative from the disabled. |
| Qatar                | Division of Elderly and Persons with Disabilities, Department of Family Affairs, Ministry of Administrative Development, Labor and Social Affairs. | –   |
| Saudi Arabia         | Department of the Disabled Care and Rehabilitation, Ministry of Labour and Social Development.   | –   |
| United Arab Emirates | Welfare and rehabilitation of Persons with Strength Department, Ministry of Community Development.   | The Government of Dubai launched Law No. (2) of 2014 to protect the rights of people of determination in the Emirate of Dubai in March 2014, and created “The Higher Committee for the Rights of people of determination in the Emirate of Dubai”.                                |

Looking at the disability institutional setting in the GCC as per the above table; except Kuwait, where there is a “Public Authority for the Disabled”, established in 2010 due to law No. 8 of 2010 concerning rights of people with disabilities, none of the rest of the GCC countries has a specialized independent national machinery for people with disabilities. The rest of the GCC countries have directorates/ departments/ divisions/ centers of disability affairs which are governed under the ministries of social affairs. The question may arise: is the disability affairs encapsulation within the ministries of social affairs only segregating disabled people and their demands to benefit from other ministries and does it position them as only service receivers rather than being empowered and mainstreamed within their communities?

Regarding the existence of related national committees, three of the GCC countries have higher committees/ commissions responsible for developing and monitoring disability policies at the national level: Bahrain, Oman and United Arab Emirates. Among the three the UAE developed new conceptual terminologies in the institutional setting of disability; where the national machinery is called welfare and rehabilitation of “Persons with Strength” department,

and the national committee is entitled the higher committee for the rights of “people of determination”. The establishing of these national committees could be seen as a positive move towards dealing with disability as a crosscutting issue with a higher level of priority. This may lead to more inclusivity when the rights of children with disability are acknowledged through the holistic countries strategy as response to the current SDGs.

## **7. Conclusion and Recommendations**

Evidence shows that the GCC countries achieved certain progress in locating disability protection as a cornerstone in social policies in general, such evidence is found through the recent national disability laws and strategies. Benchmark analysis of leave policies showed that the GCC is more advanced in terms of maternity leave for mothers of children with disabilities compared to the OECD countries in terms of leave duration and payment.

However, still there are major structural challenges facing the disability protection within WFB framework in the GCC, especially when it comes to childcare arrangement and flexible working arrangement policies.

In addition, although some of the GCC countries developed well-structured institutional settings for disability, some other countries still lack the existence of such independent national machineries.

Disability definitions in the GCC legislations is considered as another challenge as most of these definitions have considered or looked at disability from the medical perspective locating the problem on the capacity of individuals rather than empowerment and inclusion perspectives. The use of disablist language and medical approach terminologies in some policies is a related factor in situating disability affairs in an awkward position among policy makers. This lack of measurable disability definitions predisposes a challenge of producing reliable and comparable statistics on the number and the types of children with disabilities.

Overall, according to this critical overview, the below recommendations might add new milestones to the progress the GCC achieved in disability protection in general and disability protection in the WFB framework in particular:

- 1- Develop the legal provisions related to childcare arrangement and flexible working arrangements in order to help parents of children with disabilities reconcile their work and family responsibilities.

- 2- Establish national machineries responsible for the design, development, monitoring and evaluation of explicit and implicit policies for the persons with disabilities, including policies related to WFB. This is aligned with the GCC ratification of the UNCRPD, which urges each country to establish an independent entity expressing the rights of disabled people, to be run by disabled people themselves.
- 3- Enhance the current legal definitions of disability in the GCC legislations using the recent social and rights based approaches condoned by the UNCRPD and Convention of the Rights of a Child (CRC) which are ratified by GCC countries.
- 4- Develop the current census about persons with disabilities, aiming to have more accurate numbers with subdivisions for each type of impairment. This will assist the policy makers in developing more realistic policies representing the true demands.

## **Acknowledgment**

The Authors would like to express their thankfulness to Dr. Saleh Al-Ghadory, Director of Social Affairs Department, Executive Bureau, Council of Ministers of Labour and Social Affairs in GCC States, for providing his expertise and related GCC documentation.

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