

# NGO Initiative in Inclusion: SSA Experience



***Conceptualization***

Department of EE & L - MHRD

***Contributions***

IE Units of SSA State Mission Societies

***Text***

Dr. Anupriya Chadha, Sr. Consultant, IE

***Typing Assistance***

Ms. Deepika Masand

***Design, Layout & Printing***

Chandu Press

D-97, Shakarpur

Delhi-110 092

***Photographs***

SSA State Mission Societies & IE Unit, TSG

December, 2005

## PREFACE

The goal of Universal Elementary Education (UEE) in India entails a special thrust on Children With Special Needs (CWSN), given their traditionally low enrolment and participation in elementary education. Imparting need-based education to this group of children through good quality inclusion requires rigorous planning and preparation of the school system. Realizing the importance of mainstreaming CWSN in regular schools, the Government of India has been implementing various schemes and programmes to bring these children under the ambit of education. One such recent attempt has been through the Sarva Shiksha Abhiyan (SSA), which aims to Universalise Elementary Education.

Sarva Shiksha Abhiyan (SSA) is a comprehensive and integrated flagship programme of Government of India to attain UEE in the country in a mission mode. Launched in partnership with the State Governments, SSA aims to provide useful and relevant education to all children in the age group of 6-14 age by 2010. It is an initiative to universalize and improve the quality of education through de-centralized and context-specific planning and a process-based, time-bound implementation strategy. Its goal is consistent with the 86th Constitutional Amendment (2002), making elementary education a Fundamental Right of every child.

One of the development objectives of SSA is to increase the participation of CWSN in mainstream education. The increase in participation of CWSN has been brought about by a number of strategies: enrolment drives and community sensitization to identify out-of-school children with an emphasis on CWSN and advocating the imperatives of educating these children. In addition to improving access of CWSN to regular and alternative schools, bridge courses and residential camps, NGOs have been used in many States to reach children with disabilities who have previously failed to enrol. A need was, therefore, felt to capture how the NGOs associated with the Inclusive Education (IE) programme have contributed to its planning and implementation.

This document is an effort to capture and record the initiatives being undertaken by NGOs in the area of inclusive education in SSA, mainly to enhance reach to children with special educational needs. These initiatives range from planning for inclusion as in West Bengal, to implementation and monitoring of IE in Tamil Nadu. Other States have engaged NGOs for designing and initiating innovative programmes. These include running residential bridge courses in Andhra Pradesh and Uttar Pradesh and starting home-based education for CWSN in Uttaranchal. By and large, all the States have extensively utilized the expertise of NGOs in the areas of assessment of CWSN, teacher training and material development.

The array of experiences provided by the programme in the attempt to bring children with special educational needs into the fold of elementary education has been captured in the document as a sharing of the best practices, bought out by GO-NGO partnership.

This document will prove to be useful to the planners and implementers of IE programme in SSA and would provide some guidance to the non-DPEP States in chalking out a strategy best suited to the learning needs of CWSN.

## CONTENTS

|  |       |
|--|-------|
| A Beginning  | 1-6   |
| Facilitating Early Inclusion for CWSN in Andhra Pradesh        | 7-14  |
| NGO Involvement in Assam                                       | 15-17 |
| Developing Innovative TLM for CWSN in Karnataka                | 18-22 |
| Expanding Resource Base for CWSN in Maharashtra                | 23-28 |
| Developing Individualised Educational Plan for CWSN in Orissa  | 29-32 |
| Achieving Inclusion through NGOs in Tamil Nadu                 | 33-39 |
| Preparing CWSN for Schools in Uttar Pradesh                    | 40-53 |
| Nurturing Special Needs through Home-Based Care in Uttaranchal | 54-57 |
| Providing Structural Support through NGOs in West Bengal       | 58-64 |
| A Final Thought  | 65-66 |

### Annexes

|     |  |         |
|-----|--|---------|
| I   | Memorandum of Understanding: Voluntary Agency and Andhra Pradesh SSA Society | 67-70   |
| II  | Memorandum of Understanding for Partner NGOs of SSA Assam for IE Programme   | 71-91   |
| III | Case History and Assessment Format of IEP Developed by Orissa                | 92-99   |
| IV  | Terms of Reference Between NGOs and SSA Tamil Nadu                           | 100-102 |
| V   | Terms of Reference with NGOs: Uttar Pradesh                                  | 103-106 |
| VI  | TOR for State and District Level Resource Organization in West Bengal        | 107-113 |

## CHAPTER 1

### A BEGINNING

#### Role of NGOs

The role of Non- Government Organizations (NGOs) in imparting education to Children With Special Needs (CWSN) all over the world cannot be undermined. In fact, the education of CWSN began in India only with the setting up of special schools. “The existing policy encourages NGOs to initiate, undertake and implement projects and programmes to promote education of CWSN. To promote meaningful, effective and sustainable action, both the Government and the NGOs work in close partnership. It is estimated that there are 40 lakh local mandals existing in India. Of these, 30,000-1.00 lakh NGOs are active in the social and development sector.”<sup>1</sup> The NGOs are actively involved in creating awareness, mobilizing resources and in actual delivery of support and services to CWSN.

The key role of NGOs is in mobilizing community participation. The NGOs have made a significant contribution in the area of disability through the activities of early intervention, assessment, therapeutic services, parents’ education, formation of self-help groups. Their objectives also cover organizing training programmes for rural rehabilitation workers, special educators, teachers and parents, CWSN and the community.



*Specialized Training of CWSN in Special Schools*

“In the last two decades of the nineteenth century, the NGOs have played an active role in India to impart education to CWSN. This led to the establishment of the first school for the Deaf in Bombay in 1883 and the first school for the Blind at Amritsar in 1887. A number of special schools for the Blind and Deaf were set up before the end of the century. Thus, the NGO run special school tradition, as a prominent mode of providing education to CWSN, became deep- rooted. This tradition went unquestioned till the mid 50s. But as these schools began to increase

in number, their disadvantages of giving birth to a segregated culture and limited coverage of CWSN became evident. Moreover, it tended to be expensive and inclined to develop a specific disabilities culture, which had the disadvantage of separating children with disability from the rest of the community and creating the impression that their needs and problems were very different. Hence, the need of including them in educational system and in the community became very pressing. This paved the way for the advent of the concept of integrated education in India.”<sup>2</sup>

#### Move Towards Inclusion

Certain international agencies like Royal Commonwealth Society for the Blind and Christopher Blind Mission began experimenting the integration of visually impaired children and other children. Around 1970, the success of international experiment in placing CWSN in regular schools began to be noticed. Thus, the

1. *Disability Status in India, 2003 – Rehabilitation Council of India, New Delhi*

2. *Towards Inclusive Schools in DPEP, 2003 – Ministry of Human Resource Development, Govt. of India*

time-honoured tradition of educating CWSN in special schools began to be questioned with the dawn of the 20th Century. This gave birth to programmes/schemes on integrated education in India. The more comprehensive concept of Inclusion was enunciated in 1994 at Salamanca at a conference on education by UNESCO.

The National Policy on Education (NPE-1986) also recognized the importance of integrated education and promoted special schools for severely disabled children or for those CWSN who due to some reason or the other could not make it to the regular school. The Plan of Action (POA-1992) also affirmed the role of special schools mainly to meet the needs of multiple-handicapped children.

Special schools with hostels will be provided, as far as possible at district head quarters, for the severely handicapped children. Education of children with motor handicaps and other mild handicaps in common schools need to be augmented.

*National Policy on Education (1986)*

Special schools will be established at the district and sub-district levels. It was felt that composite special schools may be started to begin with..... sharing specialist staff like therapists and psychologists to support the education efforts, utilization of vocational centres for pre-vocational and vocational courses of the children in school as well as for post-education rehabilitation courses, meeting the needs of multiple- handicapped children.

*Plan of Action (1992).*

The appropriate Governments and local authorities shall promote setting up of special schools in Governments and private sector for those in need of special education.

*Persons With Disabilities Act, 1995*

This was followed by the provision made in Persons with Disabilities (Full Participation, Equal Opportunities and Protection of Rights) Act, 1995. Chapter V of the act on education says that special schools would be established for those who need specialized support or services.

With inclusion came a new wave of modifying the role of special schools to promote inclusion. This role can be broadly summarized as follows:

- To develop special schools as specialist /resource centres for children whose disabilities are multiple and severe and who require additional therapy and counselling support
- To use special schools as demonstration centres for professionals and others
- To draw upon the expertise of special schools to train teachers to teach more effectively in inclusive settings to deal with pupil diversity, particularly in the context of the large class sizes
- To utilize special schools for the development of educational material that will benefit all children, including those who have physical and/or communication difficulties.

### Changing Role of Special Education Centres

Against the backdrop of these facts, let us now examine “The three issues, which are critical in the discussion about changing roles of special education centres.

- Enhancing the capacity of special schools as resource centres to promote planned inclusion of CWSN.



- Enhancing linkages between special and mainstream education.
- Greater overlap between ‘special’ and ‘general’ teachers’ training.”<sup>3</sup>

### Special Schools as Resource Centres

This simply means that special schools become providers of support to inclusive schools. Some CWSN, regardless of their educational placement, need support. Special schools with their expertise and experience are the best options to provide this support from early intervention programmes, pre-integration training, mobile multi-disciplinary assessment, remedial teaching, development of teaching- learning materials etc.



*Using Special Schools as Resource Centres*

Many special schools have taken on a resource centre role and are involved in the:

- Short-time or part-time help for individual students with special needs;
- Provision for training and courses for teachers and other staff;
- Development and dissemination of materials and methods; and
- Support for mainstream schools.

Besides, special schools also play an advisory role, providing the necessary guidance and direction to programmes/schemes implementing inclusion.

### Enhancing Linkages Between Special and Mainstream Education

For inclusion to be successful, it is important to develop, continue and intensify linkages between special and regular schools. Doors have to be kept open for on-going contact and each opportunity to include students with disabilities must be used so that these children are visible in the community. If truly integrated education is the aim, it is imperative that steps are taken that will create positive changes in the teaching and learning environment in mainstream schools. The changes must be directed at all children so that the system is dynamic enough to meet a range of special needs, whether these are mild or severe, temporary or long-term. Thus, to establish a linkage between special and mainstream education is important. This can be achieved in the following ways:

- “Providing assessment and guidance services for mainstream schools in relation to both disabled and non-disabled children who are underachieving and those who have specific motor, communication, behaviour or learning difficulties;
- Collaborative action-research with mainstream schools for meeting individual needs in the classroom. This could be as a step towards a more inclusive educational system;

3. *Sen. R (2000): Facilitating Inclusive Education: The Changing Role of Special Educational Centres. Presented at International Special Education Congress, Manchester.*

- Advocacy and awareness programmes led by children with and without disabilities in mainstream schools. Programmes can include workshops on rights, walkathons, media campaigns etc;
- Joint participation in leisure and curricular activities such as dramatics, debates, dance and quiz programmes, clubs, holiday-camps.”<sup>4</sup>

### Overlap Between ‘Special’ and ‘General’ Teachers’ Training

“Special educational centres can play vitally important roles in the provision of training to teachers of regular schools because of their multi-disciplinary professional staff and the availability of facilities for demonstration and practical experience in the classrooms and other work settings. The specialist teachers from the special schools could share knowledge and skill with the regular education teacher, so that the teacher in the classroom believes that s/he has the capability to solve problems and the confidence to try out solutions and learn from experience.”<sup>5</sup> Special schools could also develop special courses for teachers working in mainstream schools. Thus, they become centres of excellence and expertise, a resource that mainstream teachers could call upon for advice and training.



*Peer Assisted Learning*

The modified role of special schools (**Box-1**) with increased convergence with NGOs was visible in the programmes like Project Integrated Education of the Disabled (1987) and District Primary Education Programme (1993). Both these programmes aimed inclusion of CWSN in regular schools and utilized the experience of NGOs to improve the quality of inclusion.

### District Primary Education Programme

District Primary Education Programme (DPEP) was launched in India in 1994 in 7 States and 42 districts for the consolidation of elementary education. It was implemented in a phased manner and covered 271 districts in 18 States at its peak. Presently, it is operational in 9 States and 129 districts

The Programme aims to achieve the long-cherished goal of Universalisation of Primary Education (UPE) in the country through district-specific planning with emphasis on decentralised management,

#### Box 1

#### New Role of Special Schools/ NGOs

- Planning for education of CWSN
- Assisting in policy-making
- Advocacy
- Promoting inclusive education
- Referral services
- Teacher training
- Production and distribution of assistive devices
- Organizing camps
- Parents’ education/ counseling
- Residential services to severe CWSN
- Development of material
- Income generation
- Vocational training
- Community-based rehabilitation
- Information centres
- Research studies
- Monitoring the impact of inclusion.

4-5. *ibid.*



participatory processes, empowerment and capacity building at all levels. Integrated Education was an integral part of DPEP.

DPEP guidelines for integrated education clearly stated “Garnering of resource support for integrated education at block/district level through arrangements with NGOs and other organizations having expertise in this field.” Thus, experienced and competent NGOs were used in various ways (**Box-2**) in the programme to include CWSN. Besides, States like Tamil Nadu, West Bengal and Uttar Pradesh completely involved NGOs in the entire implementation of the integrated education programme.

### Sarva Shiksha Abhiyan

DPEP experience on IE clearly revealed the importance of educating CWSN in regular schools if the goal of UPE had to be realized. Thus, it became an important part of SSA also.

Sarva Shiksha Abhiyan is an endeavour to provide eight years of quality education to all children in the 6-14 age group by 2010. The objectives of SSA (**Box-3**) mainly focus on increasing access, enrolment and retention of all children as well as improving the quality of education. The objectives of SSA can only be realized, if CWSN are also included under the ambit of elementary education. Realizing the importance of integrating special children in regular schools, SSA framework has made adequate provisions for educating CWSN.

### Provisions for CWSN under SSA

SSA offers the following provisions to CWSN:

- Upto Rs.1200/- per child for integration of disabled children, as per specific proposal, per year
- District plan for children with special needs will be formulated within the Rs.1200 per child norm
- Involvement of resource institutions to be encouraged.

#### Box-2

#### Using NGOs for CWSN in DPEP

- Planning of IE
- Awareness generation
- Community mobilization
- Early detection and identification of CWSN
- Assessment of CWSN (formal and functional)
- Preparation of Individualized Educational Plan
- Development of training material
- Manpower development, with a special focus on in-service teacher training and training of Key resource persons
- Pre-integration training
- Resource support
- Modifying curriculum transaction
- Improving home-school linkages
- Provision of essential assistive devices (aids and appliances)
- Removal of architectural barriers
- Monitoring and supervision.

#### Box-3

#### Objectives of SSA

- All children in school, Education Guarantee Centre, Alternate School, ‘Back-to-School’ camp by 2005
- All children complete five years of primary schooling by 2007
- All children complete eight years of elementary schooling by 2010
- Focus on elementary education of satisfactory quality with emphasis on education for life
- Bridge all gender and social category gaps at primary stage by 2007 and at elementary education level by 2010
- Universal retention by 2010.

SSA framework on Inclusive Education, among other things, clearly mentions the use of NGOs for:

- Providing aids and appliances to CWSN;
- Planning and management of inclusive education; and
- Resource support.

Besides, convergence with NGOs is also highly encouraged in the programme to implement the interventions laid down in the Framework.



*Providing Assistive Devices to CWSN*

This document is an effort to capture and record the initiatives being undertaken by NGOs in the area of inclusive education in SSA, mainly undertaken to enhance reach to children with special educational needs. It is an attempt to share why NGOs were selected by the State SSA Mission Societies, how MOUs were signed and what kind of work was undertaken by the NGOs to improve the quality of inclusion in SSA.

## CHAPTER 2

# FACILITATING EARLY INCLUSION FOR CWSN IN ANDHRA PRADESH

### Mainstreaming CWSN

To achieve the goal of Universal Elementary Education, Sarva Siksha Abhiyan has adopted a zero rejection policy for inclusive education. Realizing this, the NGOs in the State of Andhra Pradesh are playing an active role to mainstream CWSN. NGOs are working in partnership with the State SSA Mission Society to initiate appropriate programmes and support services. These NGOs are assigned the essential tasks of prevention, identification, screening, management, education, training and follow-up. Developing new programmes, innovations and accordingly modifying the existing programmes, developing appropriate educational aids and materials, research and establishing coordination with the system for delivery of services are a few among more responsibilities of NGOs.

The State SSA State Mission of Andhra Pradesh has signed Memorandum of Understanding (MoU) with the NGOs (**given at Annex -I**) involved in the implementation of IE programme in the State. The MoU focuses on the following:

- Background of the NGO;
- Objectives;
- Tasks assigned;
- Schedule for completion of tasks;
- Final output;
- Monitoring and evaluation; and
- Release of funds.



*Including CWSN with Appropriate Support*

NGOs involved in inclusive education in the State aim to integrate children with special needs into the regular schools. They provide the CWSN the specialized support and individualized attention to facilitate their retention in regular schools. NGOs also work towards enhancing the social integration of CWSN within their homes and community and help to enable the parents to accept and cope better. Besides, these organizations maintain close contact with the community in the area of their operation. The staff of these NGOs also maintains personal touch with the community, which is an essential feature for effective service delivery.

### NGO's Initiative

In Andhra Pradesh, NGOs are mainly assisting in:

- Early identification and intervention of CWSN;
- Assessment camps;
- Orientation classes for regular school teachers;

- Orientation classes for Anganwadi workers;
- Parental counselling;
- Workshops on different disabilities for the mandal resource persons; and
- Conducting Residential Bridge Courses (RBCs).

SSA Andhra Pradesh, for resolving the issue of drop-outs of disabled children, evolved a novel initiative of

### Role of Naandi in IE

As part of its programme, 'Ensuring Children Learn', Naandi Foundation, a Hyderabad-based NGO is helping mainstream CWSN from Government Primary and Upper Primary Schools into the regular school curriculum.

The objectives of the programme are:

- To identify children in government primary and upper primary schools with special needs through a screening process followed by medical assessment;
- To provide children with special needs the required medical and specialist attention, and with the necessary aids and appliances based on the medical assessment;
- To develop source education processes and material that are adopted to their needs, and hence ensure their retention in schools;
- To refer severely affected children to special institutions; and
- To facilitate the social integration of special needs children within their homes and community, by enabling parents to cope better.

The following methodology was adopted to achieve the above objectives:

- Group of professionals experienced in the field of special education helped formulate the plan of action.
- Naandi's Mandal Coordinators and the Mandal Resource Persons were trained on the theoretical aspects of disabilities and also learnt to identify children with different abilities using a simple screening format.
- The Mandal Coordinators in turn were responsible to provide this training to the school teachers, with the help of Mandal Resource Persons.
- Screening of disabled children was conducted in two phases, namely a preliminary screening by teachers, followed by specialized attention to medically assess the extent of disability and suggesting the most appropriate follow up service.
- Appropriate medical care and aids were provided to the children.
- Teachers were trained in attending to the special education needs of these children and appropriate education material was developed/sourced for their assistance.
- The foundation networked with agencies to enrol children with severe and profound disabilities that could not be handled in regular school environment.
- Referrals were made for those CWSN who required special education.
- Community involvement was ensured for effective inclusion of special children, as well as following up with the parents to ensure their cooperation.

The teachers were oriented to the screening format on the basis of which they could identify CWSN. The screening format developed was used in the Naandi project schools and 2340 children were identified in the screening analysis.

conducting Residential Bridge Courses (RBCs) in collaboration with NGOs. This section would be devoted to describing the entire process of RBCs.

### Residential Bridge Courses for CWSN in Andhra Pradesh

In SSA, bridge courses are conducted for the out-of-school children. The out-of-school children in the age group of 6 to 8 years are directly admitted in the regular schools. The out-of-school children in the age group of 9 to 14 years are enrolled in the bridge courses and then mainstreamed into regular schools.

#### Purpose of Bridge Courses

Older age children who are out of school need to be given some encouragement and training before they are admitted to schools. If they are enrolled in the schools without any training, they might exhibit problems in learning at the same pace as their peer age/grade group. If the older age children are trained before hand and then mainstreamed in age appropriate class, not only do they learn, but their self-confidence also improves.

The State SSA Mission Society is conducting bridge course for CWSN with the sole aim to help them achieve age-appropriate competencies in school subjects and then admit them in regular schools. This is being done with the help of NGOs, which means, ensuring that all children who enrolled in Bridge Courses should be admitted in the regular schools and children continue their studies in school.



*Hearing Impaired Child with Hearing Aid*

rent.

The RBC's are conducted for 100 CWSN and the duration of these RBC's is 10 months.

#### Teachers in RBC

For every 10 - 15 CWSN, one special education teacher is engaged. These selected special education teachers are given training for seven days, who also stay in the centre along with the children. This is especially necessary to develop a social emotional bond between the special teachers and CWSN enrolled in the bridge courses.



*RBC Classroom with a Special Education Teacher*

## Teaching Learning Process

The teaching learning process is not taken up as soon as the children join the RBCs. Initially, they are allowed to get acquainted with the new surroundings and atmosphere. This is done to make the children



*Special Education Teacher Teaching with TLM*



*Hearing Impaired Children with Group Hearing Aid*

feel comfortable and to prepare them for teaching and learning by way of games, songs and story telling. This is done for a period of ten days.

The time-table of RBCs for CWSN is as given below:

### Bridge Course Time-Table

| Time             | Activity                               |
|------------------|--|
| 5.00 AM          | Wake-up                                |
| 5.00 to 5.30 AM  | Morning chores                         |
| 5.30 to 7.00 AM  | Yoga and exercises                     |
| 7.00 to 7.30 AM  | Rest (self - time)                     |
| 7.30 to 8.00 AM  | Breakfast                              |
| 8.00 to 1.00 PM  | Teaching Learning Process              |
| 1.00 to 2.00 PM  | Lunch                                  |
| 2.00 to 4.00 PM  | Supervised/Self-study                  |
| 4.00 to 6.00 PM  | (Games/Songs) Co-curricular activities |
| 6.00 to 7.00 PM  | Rest                                   |
| 7.00 to 8.30 PM  | Review                                 |
| 8.30 to 9.00 PM  | Dinner                                 |
| 9.00 to 10.00 PM | Cultural Programmes/ TV Programmes     |

State syllabus is followed in these RBCs. However, speech therapy is provided to hearing impaired children. Vocational education (tailoring, candle making, toy making, cover making etc.) is also imparted to CWSN. Co-curricular and extra-curricular activities like dancing, drawing, sports, games and creative

activities are also taken up. With cooperation of the NGOs, tournaments and other work related activities and competitions are also organized for CWSN. Field trips are also arranged by NGOs to the nearby tourist places for CWSN.

The following are emphasized upon in the RBCs

- Dividing the children as per their academic level.
- Periodic assessment of the child's progress.
- Promoting the child to the next level of learning.
- Maintaining a progress card for every child and recording their progress.
- Observing the teachers teaching in RBCs and provide necessary support, through demonstrations.
- Teaching new techniques to the camp volunteers in each visit.
- Observing the co-curricular activities.
- Giving suggestions to the camp teachers on the special attention needed by slow performing CWSN.
- Discussing the difficult cases of children with camp teachers.
- Discussing with volunteers as to which child should be mainstreamed and in which class.



*Learning Joyfully in RBCs*

### Supervision of the RBC

Mandal Education Officers (MEOs) and Mandal Resource Persons (MRP) supervise the camp activities every day. In case, there is any problem with any child in the RBC, the MEO/MRP try to resolve it. If any child falls sick, it is the responsibility of MEO/MRP to immediately provide them medical assistance or refer and admit them to the nearest Government Hospital or Primary Health Centres (PHCs). Individualized Educational Plans (IEPs) are also prepared to record the academic progress of the children regularly.



*RBC Children doing Yoga*

### Cost of the RBCs

The cost of running of Bridge Course Camp for 10 months for 100 children is around Rs. 4.80 lakhs (recurring expenditure Rs. 45,200/- per month and non-recurring expenditure Rs. 28,000/-). The financial details of the RBCs are provided on the next page.

## Recurring Cost of a RBC

(In Rupees)

| S. No | Item   | Particulars      | Expenditure Per child | Total Expenditure |
|-------|--|------------------|-----------------------|-------------------|
| 1.    | Food charges   | For 100 children | 11 per day            | 33,000            |
| 2.    | Medical Expenses                                     | For 100 children |                       | 500               |
| 3.    | Soap, Oil, Paste expenses etc                        | For 100 children | 20                    | 2,000             |
| 4.    | Saloon Expenses (Boys only)                          | For 100 children |                       | 250               |
| 5.    | Honorarium to Volunteers                             | For 5            | 1000                  | 5000              |
| 6.    | Honorarium to Cook                                   | 1                | 750                   | 750               |
| 7.    | Honorarium to Female Helper (cooking + cleaning)     | 1                | 500                   | 500               |
| 8.    | Honorarium to Male Helper (cooking + night watchman) |                  | 500                   | 500               |
| 9.    | Building Rent (If it is a private building)          |                  | 1500                  | 1500              |
| 10.   | Electricity and water charges (Maximum)              |                  | 1100                  | 1100              |
| 11.   | Other expenses                                       |                  | 100                   | 100               |
|       | <b>Total</b>   |                  |                       | <b>45,200</b>     |

## Non-Recurring Cost of a RBC

| S. No | Item   | Expenditure      | Total Expenditure |
|-------|--|------------------|-------------------|
| 1.    | Utensils, Plates, Glasses, Buckets, Mugs   | For 100 children | 5000              |
| 2.    | Games Material   | For 100 children | 1000              |
| 3.    | Honorarium for Resource Persons in Training Programme  | 1x7x40           | 280               |
| 4.    | DA for Resource Persons in Training Programme  | 1x7x40           | 420               |
| 5.    | Teaching Material in Training  |                  | 100               |
| 6.    | Other expenses in Training   | 1                | 100               |
| 7.    | Travelling charges to bring the children to centre and Mobilization  | 1                | 5000              |
| 8.    | Stationery and teaching material to be used in classroom   |                  | 1,850             |
| 9.    | Learning material for children (Notebooks, Pens, per student Rs.60, Bridge Course books per student Rs.50) | 110x100 children | 11,000            |
| 10.   | Training to Volunteers   | 5X7X50           | 1,750             |
| 11.   | Purchase of Camp Registers and Records   |                  | 500               |
| 12.   | Library books  |                  | 1,000             |
|       | <b>Total</b>   |                  | <b>28,000</b>     |



These RBCs affirm the commitment on the part of the teachers to value and nurture diversity. So far, the State has conducted 54 such camps in 15 districts covering 3021 CWSN (details provided in Table-I). Teachers and staff of RBCs work to develop curricula that facilitate critical thinking skills and promote empathetic interaction. They support students in becoming confident to combat discriminatory attitudes. This indeed is one of the most crucial aspects of inclusion.



Vocational Training

**Table – I Districtwise Residential Bridge Course Camps for IE run by NGOs in A.P. and CWSN enrolled**

| S. No. | Name of the District | No. of IE RBCs run by NGOs | Name of the NGO  | No. of Children Enrolled               |
|--------|----------------------|----------------------------|--|--|
| 1      | Cuddapah             | 2                          | <ul style="list-style-type: none"> <li>Alshifa Minority Institution for Mentally Retarded</li> <li>Sri A. Stanislaus, MPSSS</li> </ul>   | 68<br>72                               |
| 2      | Visakhapatnam        | 3                          | <ul style="list-style-type: none"> <li>Sunflower Education Society</li> <li>Gargamma Trust</li> <li>Uppalapali, Pattabiramayya Foundation</li> </ul>   | 50<br>50<br>25                         |
| 3      | Srikakulam           | 3                          | <ul style="list-style-type: none"> <li>Saranya Manovikasa Kendram</li> <li>Santosh Manovikasa Kendram</li> <li>Behara Manovikasa Kendram</li> </ul>  | 75<br>50<br>20                         |
| 4      | Warangal             | 3                          | <ul style="list-style-type: none"> <li>Space, Ba-asamudram, Hanamakonda</li> <li>Mallikamba Manovikasa Kendram</li> <li>Manochethana</li> </ul>  | 42<br>115<br>50                        |
| 5      | Nalgonda             | 7                          | <ul style="list-style-type: none"> <li>Adrasha Institute for Welfare of Disabled</li> <li>Kasarabad, Suryapet, Society for Education and Rehabilitation</li> <li>Asha Jyothi Welfare Society</li> <li>Valigonda, Sadhana Society</li> <li>Sri Bhavani Disabled Society</li> <li>Nalgonda, Mother Rural Development Society</li> <li>K. Mallepally, Deverkonda, Mission for Integrated Society</li> </ul> | 65<br>62<br>67<br>40<br>35<br>65<br>18 |
| 6      | Hyderabad            | 3                          | <ul style="list-style-type: none"> <li>Vidhya Centre for Special Children</li> <li>Special Education Centre for Mentally Handicapped Institute of Genetics</li> <li>Aathmeetyas Abhyaasan</li> </ul>   | 35<br>50<br>38                         |
| 7      | Anantapur            | 2                          | <ul style="list-style-type: none"> <li>Penukonda, Rural Development Trust</li> <li>Madakasira, Rural Development Trust</li> </ul>  | 51<br>50                               |

| S. No. | Name of the District | No. of IE RBCs run by NGOs | Name of the NGO  | No. of Children Enrolled  |
|--------|----------------------|----------------------------|--|---|
| 8      | Adilabad             | 2                          | <ul style="list-style-type: none"> <li>• Swarna Shayamkrushi</li> <li>• Asha Jyothi, Ramnagar</li> </ul>   | 52<br>52  |
| 9      | Nellore              | 2                          | <ul style="list-style-type: none"> <li>• Vasantha Lakshmi, Charitable Trust &amp; Research Centre</li> <li>• Karunya Mano Vikas Seva Sadan</li> </ul>  | 150<br>51   |
| 10     | Krishna              | 1                          | <ul style="list-style-type: none"> <li>• RIDES, Sncha Buildings</li> </ul>   | 85  |
| 11     | West Godavari        | 3                          | <ul style="list-style-type: none"> <li>• Byrraju Foundation</li> <li>• Asakiranam, St. Theresa's Degree College</li> <li>• Parivarthana, Ganavaram</li> </ul>  | 87<br>52<br>26  |
| 12     | Chittoor             | 6                          | <ul style="list-style-type: none"> <li>• Velgu</li> <li>• RAAS, Pachika Palem</li> <li>• RAAS, Kalyana Puram</li> <li>• SIREEDS, Nagiri</li> <li>• Mother Teresa, Puttor</li> <li>• Narein Rehabilitation Institute</li> </ul>   | 90<br>48<br>52<br>55<br>64<br>45  |
| 13     | Mahbubnagar          | 2                          | <ul style="list-style-type: none"> <li>• Kavya Rehabilitation Institute</li> <li>• VALDO, Vangur</li> </ul>  | 78<br>24  |
| 14     | East Godavri         | 1                          | <ul style="list-style-type: none"> <li>• Vivekananda Manovikas Kendra</li> </ul>   | 45  |
| 15     | Kurnool              | 14                         | <ul style="list-style-type: none"> <li>• Voluntary Organisation for Rural Development Society, Nandyal</li> <li>• Healers Society, Nandyal</li> <li>• Healers Society, Banaganapalli</li> <li>• Anantha Jyothi Vocational Rehabilitation Centre, Yenimigamur</li> <li>• Anantha Jyothi Vocational Rehabilitation Centre, Yenimigamur</li> <li>• Backward Areas Rural Development Society, Kullor</li> <li>• Kranthi Educational Society</li> <li>• Voluntary organisation for Rural Development Society, Allagudda</li> <li>• Marianilayam Social Service Society</li> <li>• Backward Areas Rural Development Society</li> <li>• Jana Chaitanya Yuvajana Abyhudaya Sangam</li> <li>• Jana Chaitanya Yuvajana Abyhudaya Sangam</li> <li>• Core Land</li> <li>• Arunodaya Mahilamandali</li> </ul> | 50<br>50<br>50<br>50<br>50<br>50<br>50<br>50<br>50<br>52<br>50<br>100<br>50<br>70 |
|        | <b>Total</b>         | <b>54</b>                  |  | <b>3021</b>   |

## CHAPTER 3

### NGO INVOLVEMENT IN ASSAM

#### Participatory Planning

Axom Sarba Shiksha Abhijan Mission (ASSAM) is an effort to universalize elementary education by community ownership of the school system. It stresses on bridging social, regional and gender gaps with the active participation of the community in the management of the schools. The programme places a special focus on the groups with special needs. One such category is disabled children, in and out of school. Diversity in approaches is required to deal with the educational needs of CWSN. On account of separate administrative arrangements of schools, there is also a need to coordinate and converge interventions across Departments and local bodies responsible for elementary education for disabled children. This calls for a provision of planning in partnership with civil society groups, which already exist. Thus, State SSA Mission Society of Assam has taken up initiatives to reach out to CWSN with a special focus, in collaboration with the local NGOs.

Initially after a survey, it was felt that no organization was working on integrated/inclusion education. All organizations, having expertise in special education catered, mainly to urban towns/cities. All these had their areas of specialization (visual impairment, hearing impairment, cerebral palsy and mental retardation etc). But none of them had exposure to teaching CWSN in rural classrooms, generally over-crowded and multi-graded in nature.

The State SSA Mission Society with the NGO partnership strategy used the credible special education centres as resource organizations. These organizations were first given a basic orientation on IE so that they could develop necessary skills to work in this area. Involving NGOs in the programme served dual purpose of :

- Creating awareness about SSA in the community at large; and
- Strengthening ties between the Govt. and NGOs through convergence.

In the first phase, a MOU (**given as Annex-II**) with 9 NGOs for 7 districts was signed at the State Mission Office (SMO). In the second phase, 4 NGOs were selected for 4 districts (as given below). Training on IE was conducted for 5 days after which these NGOs started work at the block level.

#### NGO's main Tasks

The main tasks allotted to the NGOs were:

- Survey and identification;
- Compile data on CWSN after survey and functional assessment;



*Learning My Own Way*

**Table II : NGOs Associated with SSA in Assam****Phase-I**

| S. No. | Name of the NGO  | District  | Blocks  | Number of CWSN Covered |
|--------|--|-----------|---|------------------------|
| 1.     | Assam Mental Welfare Society   | Nalbari   | Pub Nalbari   | 400                    |
| 2.     | Voluntary Health Association of Assam and Prerona, Pratibandhi Bikash Kendra | Jorhat    | East and Central<br>Titabar and Jorhat                  | 450<br>750             |
| 3.     | Voluntary Health Association of Assam and Upper Assam Handicapped Centre     | Golaghat  | East and West<br>South                                  | 1425<br>500            |
| 4.     | NER Multi-purpose Handicap School  | Dhemaji   | Dhemaji and<br>Bordoloni                                | 1578                   |
| 5.     | Asha Deep  | Lakhimpur | Narayanpur and<br>Bihpuria                              | 881                    |
| 6.     | Mon Vikash Kendra<br>Dristidan<br>Asha deep                                  | Kamrup    | Rangiya and Boko<br>Hajo and Karara<br>Dimoria and Rani | 858<br>604<br>659      |
| 7.     | Mrinal Jyoti   | Dibrugarh | Joypur and Tengakhat<br>Tengakhat                       | 750                    |

**Phase-II**

| S. No. | Name of the NGO                              | District                        | Blocks                    | Number of CWSN Covered |
|--------|--|---------------------------------|---------------------------|------------------------|
| 1.     | NER Multi-purpose School and Training Centre | Sonitpur<br>-Bishwanathchariali | B. Chariali and<br>Behall | 857                    |
| 2.     | Handicaps Multi-Development Society          | Barpeta                         | Barpeta and<br>Bhawanipur | 485                    |
| 3.     | Upper Assam Handicapped Centre               | Golaghat                        | North block               | 200                    |
| 4.     | Sreemanta Sankar Mission                     | Nagaon                          | Khagarijan and<br>Rupahi  | 1111                   |

Each NGO was entrusted with a maximum of 2 blocks only, to begin with. All possible support for implementation of inclusion in these blocks was provided by SSA.

- Create awareness and sensitization of community, Village Education Committee and counselling of parents and peers on detection, identification and early intervention;
- Help placement of children in general schools;
- Impart pre-integration skills to children with moderate disability with the help of resource teacher and Anganwadi workers at ECCE/EGS centres;

- Conduct training of general teachers of primary school;
- Provide resource support to the schools and teachers through resource teachers and Gram Panchayat volunteers;
- Do preparation of IEPs and case studies;
- Network with the Department of Welfare, Health and other related institutions to provide required aids and appliances;
- Coordinate the activities of the Departments like Social Welfare, Health, Rehabilitation and other voluntary agencies working in the field;
- In case of children with severe disabilities, make necessary referrals, access to special school and other services etc; and
- Submit monthly and quarterly reports to SMO.



*Celebrating World Disabled Day*

## Conclusion

Assam's experience with the NGOs was an experience of learning. It was observed that while some NGOs grasped the concept of inclusion, there were still others that took time to understand the principles of inclusion and put them into practice. Some of the NGOs also had initial problems of record keeping, maintaining the case studies of CWSN and lack of coordination.

However, on the whole, the performance of the NGOs was satisfactory, as it opened new doors of convergence between the govt. and the voluntary sector. It was generally felt that any SSA State Mission Society, that used NGOs for inclusive education, had to undertake intensive supervision and monitoring to review the activities conducted at the field level. More capacity building exercises of the field level functionaries were also necessary, especially on data related aspects and, in particular, on issues related to school quality and classroom transaction.

## CHAPTER 4

# DEVELOPING INNOVATIVE TLM FOR CWSN IN KARNATAKA

### Networking with NGOs

Another example of active participation of NGOs in Inclusive Education is that of Karnataka, where more than 100 NGOs, in some way or the other, are involved in the programme. **Box-4** shows the NGOs and their areas of assistance in the State. **Table-III** shows the district-wise involvement of NGOs.

#### Box – 4

##### Areas of Assistance of NGOs

- Conducting Surveys.
- Assessment of Disabled.
- Starting / Maintaining Resource centres.
- Provide consultation to State Resource. Group & District Resource Groups.
- Training of Resource Teachers.
- Awareness Programme for general teachers and public.
- Enrolment Drives.
- Home based education.
- Development of instructional materials.
- Conducting Orientation Programmes for field functionaries.



*Teachers Developing TLM for CWSN*

#### Box –5

##### Reasons for Involving NGOs

- Reaching the unreached by providing educational facilities in remote areas.
- Maintaining the quality of education, imparted to CWSN.
- Provide essential services to the needy.
- Early identification and assessment of CWSN.
- Utilising the professional expertise and resources available with NGOs.
- Giving better infrastructure facilities and barrier-free environment to all CWSN.
- Involving volunteers for community participation.
- Having a richer and wider resource base.
- Sustainability and transparency.
- Wider coverage.

The NGO experience in inclusion in the State began in Magadi block of Bangalore Rural District in 1998 wherein, with the help of Seva in Action, under DPEP, 758 CWSN were identified and enrolled. Intensive teacher training was also conducted and a resource kit was developed for resource teachers. Based on the experience of DPEP and Janashala, it was decided to involve NGOs in the IE programme under SSA also. **Box-5** cites the important reasons as to why the NGOs were selected for IE:

The State has established networking with NGOs to build linkage and capacities among individual organizations and groups; to provide an accessible forum for exchange of information, ideas and good practices; and to focus on issues with in-built mechanisms for expansion and sustainability.

Karnataka has adopted the policy for inclusion of children with disabilities since 1981 by passing a Government Order to take into consideration the needs of the special children. Since then, under IEDC ,

Janashala, DPEP as well as SSA, the State has been involving the reputed NGOs to Universalise Elementary Education by providing a favourable learning environment for CWSN in the least restrictive environment possible.

NGOs have emerged as a strong support system for inclusive education. Besides the government supported programmes and activities, many private and aided schools as well as NGOs have been implementing inclusive education at their own initiative. As different activities are involved under IE, NGOs are selected on the basis of their experience in the particular field for which they are funded under SSA. NGOs/ Institutions/individuals are being involved in planning and organizing teachers training, distribution of aids and appliances, organising awareness campaigns, TLM workshops, resource support to CWSN, parental counselling, impact study, etc. In particular cases, the NGO proposals are verified and selected by the selection committee.

The State's Policy in involving NGOs under SSA is as follows:

- Identify NGOs that are competent and prepare them to work in different areas of IE.
- Motivate and involve more NGOs as partners for promotion of IE.
- Provide facilitating conditions to attract NGOs to work in partnership with Govt.
- Inculcate positive attitude and sensitize the Departmental functionaries on the importance of NGOs participation for achieving targets.
- Simplify the administrative procedures in the sanction of projects to NGOs.
- Release funds without delay so that they can plan, take up and start implementing the activities from the beginning of the year, resulting in maximum utilization of funds.
- Involve NGOs with excellent background in the policy formulation experience at state and district level.



*Strengthening Human Resource Base for CWSN*

### Criteria for Selection of NGOs

- The track record and excellence of the NGOs in the implementation of Inclusive Education is the prime factor considered while selecting NGOs.
- Institutions that have grown methodically and systematically from pre-school training to higher education.

### Other Criteria Include

- Institutions with the heads who have undergone special training in IE.
- Institutions, which lay great stress on pre-school education and undertake preventive measures.
- Institutions that focus on assuring quality in education to CWSN by appointing qualified teachers with necessary qualification, attitude, aptitude and commitment.

- Institutions when faced with paucity of qualified staff have taken trouble to sponsor their staff to undergo further training at reputed institutions at their own cost.
- Institutions which focus on the all-round development of children with very special needs.

Further, NGOs, that lay have laid immense stress in creating provisions and distribution of suitable aids and appliances to CWSN; have built up a good referral system along with a strong network base; use specified assessment tools, kits and specially designed teaching learning materials; provide special services like Braille reading room and Braille transcription, preparation of curriculum based TLM, vocational training and sponsor CWSN for further vocational training, enabling them to acquire life-long skills, are given preference.

Besides, in Karnataka more than 120 NGOs are practising inclusion. Institutes like District Disability Rehabilitation Centres, District Rehabilitation Centres, All India Institute of Speech and Hearing, National Institute of Mental Health and Neurological Sciences (NIMHANS) have rendered their coordination in medical assessments of CWSN, counselling of parents and children and training of teachers. The state also procures assistive devices through ALIMCO.

### Development of TLM for CWSN: NGO Initiative

The focus of the State is an inclusive philosophy in education, wherein all children are encouraged to a part of regular classrooms. The general school system needs to be equipped with the adequate human resources and material to meet the challenges of CWSN. Teachers having the necessary attitude and competency need to be oriented to inclusion.

Keeping this in mind, the State decided to conduct 7 days training of CRPs in preparing Teaching-Learning Materials (TLM) to enhance their capacity in training the teachers at cluster level. These TLMs aimed at teaching the slow learners, learning disabled children, hearing impaired and visually impaired children. The aim was to help the CRC develop their own TLM kits for CWSN.

Four workshops on TLM development were conducted for 7 days at the state level with 6 CRPs from each district with 50 participants in each batch. The main objectives of these workshops were:

- To support the regular teachers with TLM for general school in view of CWSN.
- To ease the learning process of various disabled children.
- To prepare TLM in view of Multi -grade and multi-level CWSN.



*TLM for CWSN*

### Conclusion

With the help of NGOs, the State SSA Society of Karnataka is now focusing on the never-enrolled and dropped-out CWSN. The main aim is to provide opportunities to CWSN for inclusion and to integrate them in the fabric of mainstream education.



Table-III NGOs Actively Associated with SSA Karnataka

| Name of the NGO                                    | Name of the Districts   | Areas of Assistance   |
|--|---|---|
| Seva-in-Action                                     | Bangalore Rural   | <ul style="list-style-type: none"> <li>• Multi-category training programmes for teachers</li> <li>• Resource support</li> <li>• Training of resource teachers and preparation of resource teacher kits.</li> </ul>  |
| RV Integrated School for the Disabled              | Bangalore Rural   | <ul style="list-style-type: none"> <li>• Integrated education for hearing impaired children</li> <li>• Conduct training and orientation programmes</li> <li>• Development of innovative, indigenous and suitable teaching and learning materials for Hearing Impaired children</li> <li>• Distance home training programme for parents of special children</li> <li>• Repair of hearing aids and supply of chords and ear moulds</li> <li>• Short-term vocational training programme</li> </ul>                                   |
| JSS Mahavidyapeetha                                | Tumkur  | <ul style="list-style-type: none"> <li>• Integrated school for mentally retarded</li> <li>• Multi-category teacher training</li> <li>• Survey of disabled children</li> <li>• Preparation of handbooks for parents and teachers</li> </ul>  |
| National Association for Blind (N.A.B.), Bangalore | Hassan  | <ul style="list-style-type: none"> <li>• Integrating blind and low vision children in normal schools</li> <li>• Rehabilitation and basic training centre for visually impaired children</li> <li>• Running technical training centre for blind</li> </ul>   |
| Ramana Mahrshi Academy for the Blind               | Bangalore Rural, Mandya, Bellary, Bidar, Bagalkot, Gulbarg, Dharwad, Haveri, Gagag, Mysore and Chamrajnagar | <ul style="list-style-type: none"> <li>• Direct and indirect services through community-based rehabilitation (CBR) programmes in semi-urban and rural areas covering 1800 villages.</li> <li>• Training to visually impaired children on science and mathematics with tactile geometrical aids.</li> <li>• Conducting RCI recognised foundation courses for regular teachers.</li> <li>• Conducting in-service teacher training programmes.</li> <li>• Residential school for hearing impaired and mental retardation.</li> </ul> |
| CBR Network for South Asia                         | All the districts   | <ul style="list-style-type: none"> <li>• Translation of RCI teacher guides into local language.</li> <li>• Teacher training and community rehabilitation services.</li> </ul>   |
| Mobility India                                     | All the districts   | <ul style="list-style-type: none"> <li>• Providing aids and appliances and rehabilitation therapy.</li> </ul>   |

| Name of the NGO  | Name of the Districts                            | Areas of Assistance  |
|--|--|--|
|  |  | <ul style="list-style-type: none"> <li>Capacity building of organisations working in rural and urban slums to deliver quality rehabilitation services to CWSN to ensure equal rights and opportunities.</li> <li>Research and Development.</li> </ul>                                      |
| Mangala Jyothi Integrated School                                   | Dakshina Kannada                                 | <ul style="list-style-type: none"> <li>Training teachers on RCI foundation course.</li> <li>Mainstreaming CWSN in schools.</li> </ul>  |
| Skanda Educational Medical Seva Trust Spastic Society of Karnataka | Tumkur, Belloar, Kollar<br>Bangalore Urban       | <ul style="list-style-type: none"> <li>Conduct medical camps, aids and appliances are yet to be supplied</li> <li>Conduct medical camps for identification of CWSN.</li> <li>Organize workshops and awareness camps for parents and teachers.</li> </ul>                                   |
| Provision Asia   | Bangalore Urban                                  | <ul style="list-style-type: none"> <li>Free calipers for all the locomotor impaired children.</li> <li>Corrective surgery for children whose disability can be rectified through surgery.</li> </ul>   |
| Rotary Club  | Bangalore Urban                                  | <ul style="list-style-type: none"> <li>Is supporting special schools for the hearing impaired by providing infrastructure staff and aids and appliances</li> </ul>   |
| Association for the Physically Disabled                            | Bangalore Urban                                  | <ul style="list-style-type: none"> <li>Has established the special integrated school for CWSN from Nursery to 7<sup>th</sup> std.</li> <li>Conduct meetings, awareness camps and workshops for parents</li> <li>Conduct speech and hearing special therapy classes for the CWSN</li> </ul> |
| JSS Sahana   | Bangalore Urban, Tumkur, Bangalore Rural, Hassan | <ul style="list-style-type: none"> <li>Integrate CWSN to general schools</li> <li>Impart multi-category teachers' training</li> </ul>  |
| Association for the Rehabilitation of the Disabled                 | Gangavathi, Raichur                              | <ul style="list-style-type: none"> <li>Conducting 90 days' training for the teachers</li> </ul>  |
| Shrusti  | Bangalore Urban                                  | <ul style="list-style-type: none"> <li>Conducting awareness camp in the schools through cultural activities by the disabled children</li> </ul>  |
| Bhagavan Mahaveer Artificial Limbs and Calipers Centre, Hubli      | Gadag, Dharwad                                   | <ul style="list-style-type: none"> <li>Free supply of calipers, clutches and shoes</li> <li>Assistance in corrective surgeries</li> </ul>  |
| Indian Red Cross Society, Bangalore                                | Bidar, Bangalore, Gulbarga                       | <ul style="list-style-type: none"> <li>Supply of spectacles with a nominal registration fee</li> </ul>   |

## CHAPTER 5

### EXPANDING RESOURCE BASE FOR CWSN IN MAHARASHTRA

Inclusive Education in DPEP-Maharashtra started in 1999 in 9 clusters of 9 districts. At that time, the state began with identification of CWSN. The main activities undertaken were:

- Survey of CWSN
- Convergence with Ministry of Social Welfare for aids and appliances.
- Recruitment of resource teachers.
- Planning workshops for resource support.
- General teacher training.

In the State, NGOs are broadly of 3 types:

- Organizations comprising social workers, disabled people or their parents/relatives, which mainly provide people-centric services.
- Advocacy groups in which the disabled people form the core resource group as they best know about their problems.
- Agencies with specific mission goals who work with their partners by providing them funding, support and expert guidance.

Support from NGOs came in the year 2000 when the State developed its strategy for resource support at the block level through training of master trainers. Further convergence was established with Spastic Society of India to provide overall guidance and direction to the programme. This NGO was also a part of the State Resource Group (SRG) formed by the State on IE. However, a strong convergence could not be established with NGOs in DPEP by the State.

This issue was constantly taken up with the State from the national level. The state was also provided a list of NGOs, who were contacted by the State SSA Mission Society. A one-day meeting was convened with all the NGOs wherein each NGO made a presentation on their areas of competence, experience and scope and nature of work. This meeting was followed by a series of meetings, in which NGOs with a minimum of 2-3 years of experience were selected. Each NGO was assigned a district. Technical assistance was taken from the NGOs in the area of their expertise. By and large, it was decided to involve NGOs in the following areas:

- Identifying the reasons for CWSN being out of school.
- Mainstreaming CWSN either in regular schools or alternative schooling centres.



*Children Engaged in a Joyful Activity*

- Undertaking door-to-door survey to identify CWSN and identification of CWSN through checklist, arranging camp and giving training to other teachers on IE.
- Preparing CWSN for mainstreaming in schools or AIE/EGS centres
- Training of teachers through RCI developed foundation course on IE
- Conducting orientation courses for Teachers/Head Masters and Officers of Education Department.

### Teachers' Training/Orientation

The details of the NGOs, along with their catchment area and areas of assistance in the IE programme is given in **Table-IV**.

This section will focus on the role of Late Jankidevi Atkar Special Teachers' Training Centre, Nagpur, which is assisting the State Mission Society in conducting the 45/90-day training of teachers on inclusion. This institute has 9 years' experience in the field of disability and covers the districts of Akola, Nagpur, Gondiya, Bhandara, Chandrapur, Gadchiroli, Yavatmal, Nanded, Parbhani and Wardha. After the completion of 45 days of regular teacher training under IE, regular teachers developed skills of identification and assessment of CWSN, educational assessment and placement of CWSN, arrangement of camps, classroom management of CWSN etc. So far the institute has trained 371 regular teachers as shown below:



*Teacher Involved in teaching a Child with Special Need*

The State selects five young and experienced teachers from each block and calls them at the district for a two-day orientation programme about IE. They are then deputed for training on IE for 45/90 days in NGOs.

| S. No. | District     | Teachers Trained | Training Duration |
|--------|--------------|------------------|-------------------|
| 1.     | Nagpur       | 40               | 45/90 Days        |
| 2.     | Nanded       | 12               | 45 Days           |
| 3.     | Yavatmal     | 47               | 45 Days           |
| 4.     | Wardha       | 28               | 45 Days           |
| 5.     | Gondiya      | 21               | 45 Days           |
| 6.     | Chandrapur   | 38               | 45 Days           |
| 7.     | Gadchiroli   | 33               | 45 Days           |
| 8.     | Bhandara     | 65               | 90 Days           |
| 9.     | Parbhani     | 34               | 90 Days           |
| 10.    | Nagpur       | 48               | 90 Days           |
| 11.    | Akola        | 5                | 90 Days           |
|        | <b>Total</b> | <b>371</b>       |                   |

## Training Inputs

During the training period, teachers are trained on the following aspects of IE.

- Educational implications of each impairment, that is :
  - Visual impairment;
  - Hearing impairment;
  - Locomotor impairment;
  - Mental retardation and Learning Disabilities.
- Limitations of blindness and low vision.
- Limitations of hearing impairment.
- Various models of integrated education (resource room model, itinerant teaching model, dual teaching model, distance learning and alternative schooling).
- Philosophy, principles and strengths of inclusive education.
- Functions of resource room.
- Equipment and TLM required by children with special needs.
- Special schools as resource centres for the district and block level.
- Causes of different kinds of special needs.
- Role of teacher in early identification of children with special needs.
- Types of seeing and hearing problems.
- Development of speech and language among hearing impaired.
- Use of sign language.
- Total communication.
- Characteristics of mentally retarded and learning disabled children.
- State and centre schemes for assistance to NGOs.
- Behavioural management of children with special needs.
- Principles of curriculum adaptation.
- Understanding concepts through locally prepared TLM.
- Development of language:
  - Receptive and expressive language
  - Discovering rules of language
  - Reading and writing



*Teachers Trained on IE*

- Numerical skills and arithmetic
- Listening skills – gross and speech
- Teaching of elementary science and mathematics at the primary level.
- Exposure of the visually impaired children to special equipment: Braille slate, Thermoform machine, Braille, Abacus, Taylor frame, Geometry device, measuring devices including magnifying lenses.
- Parental attitude.
- Social attitude.
- Parental counselling.
- Education of Cerebral Palsy Children.
- Observations lesson in visual impairment, locomotor impaired, hearing impaired and intellectual retardation.
- Learning needs of children with special needs.
- Case conferences.
- Community mobilization including role of Village Education Committee.
- Peer sensitization.
- Practice teaching.
- Monitoring the IED programme.
- Overview.
- Evaluation.

During training period, teachers also visit the special schools for practical exposure.



*Inclusion through Play*

This experience of involving NGOs in training of teachers has helped them develop the competencies for inclusion, so that they can offer better education, particularly, in plus curriculum to students with various special needs. These teachers also assist CWSN in understanding those subjects, which they cannot readily comprehend in regular classroom. Further, they advise the classroom teacher on special arrangements to be made in the classroom for locomotor impaired children and how to conduct remedial teaching for slow learning CWSN. With

this training, some resource support is being provided to CWSN, which would require strengthening, if CWSN are to be retained and provided quality education.

**Table-IV: NGOs Involved in SSA-Maharashtra**

| S. No. | Name of Institute  | Catchment Areas   | Areas of Assistance   |
|--------|--|---|---|
| 1      | Ayodhya Charitable Trust   | Pune  | Involved in training programme on inclusive education for regular teachers, both 45 days/90 days foundation course as well as two days training at district & Block level |
| 2      | Matoshri Jankidevi Atkar Special Teachers Training Centre              | Nagpur, Bhandara, Gondia, Gadchiroli, Chandrapur, Wardha, Amravati, Yavatmal, Akola, Parbhani |   |
| 3      | Navjeevan School for Mentally Retarded, Aurangabad                     | Jalgaon, Dhule, Nandurabar, Aurangabad, Jalna, Beed, Latur, Osmanabad, Nanded, Hingoli        |   |
| 4      | National Association for the Blind, Nasik                              | Nashik, Dhule, Jalgaon, Aurangabad, Nandurbar   |   |
| 5      | Nandvan School and Sheltered Workshop for Mentally Handicapped, Nagpur | Gadchiroli, Gondia, Bhandara  |   |
| 6      | Central Institute of Teachers of Deaf Mumbai                           | Mumbai & Suburban   |   |
| 7      | Spastic Society of India, Mumbai                                       | Mumbai & Suburban<br>Nashik, Dhule, Jalgaon,  |   |
| 8      | Prabodhini Vidya Mandir Matimand Prashikshan Kendra, Satara            | Parbhani, Aurangabad, Hingoli   |   |
| 9      | H.V.Desai Eye Hospital, Pune   | Pune, Dhule, Nashik, Kolhapur, Solapur, Ahmednagar, Raigad, Osmanabad.                        | Helps in eye testing & surgery of CWSN  |
| 10     | KEM Hospital and Research Centre, Pune                                 | All the districts   | Monitors collection of the data of CWSN   |
| 11     | Aliyavar Jung National Hearing Impaired Centre, Bandra, Mumbai         | All the districts   | Helps in assessment of hearing impaired & distributing the hearing aid  |
| 12     | ALIMCO   | All the districts   | Assessment and providing the aids and appliances to CWSN.   |
| 13     | Ayodhya Charitable Trust   | Pune, Nashik, Dhule and Ahmednagar.   | Assessment of hearing impairment & providing hearing aids   |

| S. No. | Name of Institute  | Catchment Areas   | Areas of Assistance                                       |
|--------|--|---|---|
| 14     | District Disability Rehabilitation Centres                         | Kolhapur, Latur, Sindhudurg, Aurangabad, Buldhana, Wardha, Nagpur, etc. | Rehabilitation of CWSN                                    |
| 15     | Centre for the Job Opportunities for the Spastics                  | Mumbai City & Suburban  | Teacher-training, training on ADL, technical assistance   |
| 16     | Pune School & Home for the Blind Trust                             | Pune  | Eye testing and provide suggestions for TLM for the blind |
| 17     | National Association for the Welfare of the Physically Handicapped | Mumbai, Thane, & Thane Municipal Corporation                            | Teacher-training  |
| 18     | Akshar Sanstha's Matimand Prashikshan Kendra                       | Raigad, Ratnagiri, Ahmednagar, Kolhapur, Sangli, Satara                 | Teacher training and assistance in development of modules |



## CHAPTER-6

### DEVELOPING INDIVIDUALISED EDUCATIONAL PLAN FOR CWSN IN ORISSA

#### Need for Individualised Planning

The experience of the State in implementing DPEP in the first phase has provided useful experience to include children with special needs into the fold of primary education by following a specific strategy. All students regardless of their disabilities are able to learn. However, some CWSN may learn at a slower pace as compared to their non-disabled peers. Thus, planning programme for these students needs to be individualized. Therefore, the programme of Individualized Educational Plan (IEP) has been introduced for each child with the active involvement of NGOs. This IEP can ensure both equity and quality in respect of CWSN.

For better implementation of the programme, development of IEPs for CWSN has been assigned to NGOs who have the experience of working effectively in this area. Since the formal system might not always provide adequate attention to a child with special needs, the NGOs can play a very effective role in making the programme individualized.



*Parents' Training on IEP*

| Name of the District | Name of the Block | Name of the NGO                                | No. of CWSN |
|----------------------|-------------------|--|-------------|
| Angul                | Angul             | DPO  | 350         |
| Balasore             | Remuna            | Handicapped Welfare Association                | 514         |
| Baragarh             | Baragarh          | Vikash Bhawan                                  | 350         |
| Cuttack              | Barang            | Aaina  | 279         |
| Bhadrak              | Dhamnagar         | Centre for Rehabilitation Service and Research | 950         |
| Mayurbhanj           | Samakhunta        | Sadhna   | 282         |
| Dhenkanal            | Hindol            | Jibanjyoti                                     | 564         |
| Jajpur               | Dharmasala        | DPO  | 212         |
| Khurda               | Balianta          | Pratibandhi Kalyan Kendra                      | 272         |
| Puri                 | Puri Sadar        | Opening Learning System                        | 198         |
| Sundargarh           | Subdega           | Old Rourkela Education Society                 | 234         |
| Sambalpur            | Dhankauda         | VSS Institute for Mentally Handicapped         | 450         |
| <b>Total</b>         |                   |  | <b>4655</b> |

Thus, on experimental basis, one block each in 12 districts has been taken up for developing IEPs. DPOs of two districts of Angul and Jajpur are taking up this initiative with the help of trained volunteers, whereas the remaining ten are taking the help of NGO's. District-wise details of CWSN for which IEP's have been prepared are provided below.

It is now proposed to upscale the project to 30 districts of the state based on the feedback received from this pilot project.

### Plan for Implementation of IEP

The District Project Office takes all possible steps to select a good NGO through which this programme is to be implemented. A convergence meeting is convened at block level. The Aaganwadi workers, BRCCs, CRCCs, CDPO, ICDS supervisors, dedicated persons of the concerned block, representatives of youth organizations and SHGs are invited to attend the meeting to formulate plan for implementation of IEP. The entire block is divided into a few sectors for smooth monitoring of the programme.

The volunteers are engaged at the rate of one per sector. They are provided 15-day orientation for their capacity building in the field of inclusive education. The case history format developed by the SPO (**given as Annex-III**) is distributed to the volunteers for collection of data. The work plan for the CWSN of respective clusters is prepared by the volunteers and placed in the sector level committee and block level committee for approval. The volunteers prepare the time-table keeping in mind the regular education initiative and special education services required by them. The progress is reviewed every month by the block level committee and every activity is documented systematically in simple language, so as to facilitate the learning process of CWSN.

### Role of NGOs

The primary work of the NGO is to identify the CWSN of that particular block. The entire block is divided into some sectors for smooth monitoring. Two to three Gram Panchayats constitute a sector keeping in view the number of CWSN available in the sector. The volunteers are appointed by the concerned NGO. These volunteers are incharge of their respective sectors and move round the sector and provide necessary support to the CWSN of their sector. The funds required for the purpose are released to the NGO by the District Project Office.

The NGO pays the remuneration of the volunteers and also develops capacity building programmes for them. The NGO also furnishes periodic progress report.

### Objectives of IEP

- To identify and enroll out-of-school CWSN in appropriate educational setting.
- To orient the parents on home management for CWSN.
- To generate community awareness in community about CWSN.
- To monitor and record the periodic changes in the student through this programme by means of continuous assessment and evaluation of students achievement.
- To ensure quality education for all CWSN.

### Role of NGOs in Preparation of IEP's

- Identifies the CWSN.
- Locates the cluster.
- Prepares a plan.
- Implements the plan to be monitored by DPO/SPO.
- Appoints volunteers and pays their remuneration.
- Develops capacity building programme.
- Conducts evaluation.
- Reports periodic progress.
- Assumes the responsibility to show quality results.

## Criteria for Selection of Volunteers

Preference is given to the educated family members of the CWSN at the time of selection of volunteers. If no person from the above category is available, then any member of the village supported by the family of the CWSN is engaged as a volunteer. It is necessary for the volunteer to be a minimum class 10<sup>th</sup> pass. The selection will be done in presence of the VEC and representatives of the NGO. The engagement order is issued by the NGO. The term of volunteers will be for one year and further extension will be given only after assessment of their performance. They are paid Rs. 1000/- (rupees one thousand only) per month, including TA/DA etc. and work five days in a week for five hours per day



*Volunteers involved in IEP Training*

## Formation of Committees

The following committees are being formed to monitor and supervise implementation of the programme:

### 1. Village Level Committee

The village level committee is formed by taking 5-6 people of the village, preferably the disabled people or parents of the disabled children. They supervise and also assist in proper implementation of the programme. The volunteer reports to the Village Level Committee. The committee assesses the activities of the volunteer.

### 2. Sector Level Committee

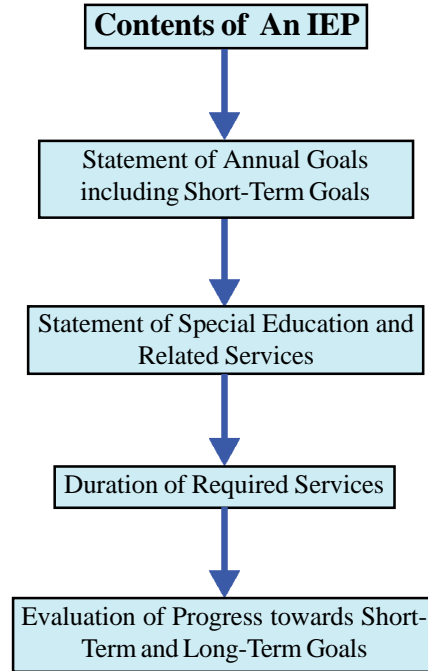
To supervise the activities of the volunteers and to monitor the progress of the programme, each block is divided into some sectors. A committee is formed in each sector by taking 5-6 members (preferably a disabled person or relative of a disabled child), as in the constitution of VEC. If such type of members is not available, then the community selects volunteers from that sector as members of the committee. The committee meets at least once in a month and assesses the progress. The sector committee sends its representative to the block level committee. The work plan is prepared by the volunteers in consultation with the committee members.

### 3. Block Level Committee

The block level committee is formed with 9-10 people with BRCC as the coordinator. The block level committee supervises and monitors the entire programme. The review meeting is conducted each month to monitor the progress of the IEP. The BRCC of the concerned block is the Chairman of the block level committee. The work plan for each sector is discussed in the meeting and is implemented only after approval by the committee.

The IEP in Orissa is an initiative being implemented with the help of NGOs. Development of IEP in collaboration with NGOs helps teachers in delivering specific special education services and in monitoring

the progress of each child in respect of different developmental goals, both at home and school. This initiative is still at the initial stage and its utility in determining the placement of a child with a special need in the most appropriate environment is yet to be assessed.



## CHAPTER 7

### ACHIEVING INCLUSION THROUGH NGOS IN TAMIL NADU

In the State of Tamil Nadu, the activities of the NGOs supplement the programmes taken up through Government initiatives. One such attempt was the implementation of Inclusive Education (IE) programme through DPEP, in which steps were taken to enroll the mild and moderately affected children in regular schools. This programme was launched in 1998-99. At that time, parents were reluctant to send the children with disabilities to regular schools, since it was a general impression that CWSN could not be educated in regular schools along with other children. Hence, awareness campaigns were conducted. Publicity measures such as advertisement through media, distribution of pamphlets and handbills were taken up.

In the beginning, as a pilot project, only one block was selected in the selected seven DPEP districts of Cuddalore, Dharmapuri, Perambalur, Pudukkottai, Ramanathapuram, Thiruvannamalai and Villupuram. IED programme was implemented for the year 1999-2000 in only 7 blocks.

As there is another Department namely Rehabilitation of the Disabled incharge of the Education of the Disabled in special schools, very few CWSN were integrated in regular schools before the introduction of DPEP.



*Resource Teacher interacting with Parents*

DPEP experience showed that at the outset, though the special children got enrolled in the schools, the teachers were not ready to welcome them since they were not aware of the teaching methods and follow up. They thought that inclusion of these children would imply additional use of their time and attention.

Hence, experts in the area of disability were called in as members along with the heads of important Government Departments to form the State Resource Group (SRG). The SRG meets and evaluates the programme and gives suggestions whenever required. District Resource Group (DRG) is formed at District level with a parent of the special child or a disabled person as a member in the Resource Group. This Group is helpful in enrolling the children in schools at the district level and to provide the overall direction to the IE programme.

As Implementing Agencies of the IE programme, the NGOs have meetings at State Project Office. Their performance is reviewed at the State Project Office. Issues and strategies are discussed during the meetings. Meeting for the NGOs helps them to share their views and to exchange their practices.

As an outcome of the meetings of the SRGs, some of them were made as implementing agencies in the districts. Six NGOs were chosen to implement the programme in 7 DPEP districts. The programme was introduced in only one block in 1999-2000. The next year two more blocks were added. Gradually, all the blocks were taken up by the NGOs and District Resource Groups.

When SSA was introduced in the State, DPEP was at its last phase, and thus, the same procedure was adopted in SSA too.

### **Selection of NGOs and Role Identification**

The State has involved 42 NGOs in 29 districts covering 391 blocks as shown in **Table-V**. Since the entire Programme of IE is being implemented through the NGOs, the State SSA Mission Society developed formal Terms of Reference. **(as given in Annex-IV)**. Only those NGOs with enough experience in educating CWSN are selected after seeking the approval of the Executive Committee.

The most important role that the NGOs play in the State is to provide all kinds of resource support for inclusive education. This support comes in the form of early intervention, assessment and therapeutic services, parental education and community development. They are responsible for identification and enrolment of the special children either in regular school or any other suitable educational centre. The NGOs select qualified special teachers and appoint them at block level. If the special teachers are trained in dealing with a particular category of disability, the NGOs provide cross-disability training to resource teachers so that all the categories of children are provided the needed support.

The NGO makes necessary arrangements to conduct medical assessment camps in every block in co-ordination with District Collector, District Disability Rehabilitation Officer (DDRO) and District Medical Officer. Aids and Appliances to CWSN are provided either through SSA or any other source. If necessary, surgery is also carried out. The NGO also helps CWSN obtain scholarship from the Disability Rehabilitation Officer.



*Training a Hearing Impaired Child*

The special teachers give training to block/cluster level teachers on classroom management of CWSN.

Training is also given to teachers at cluster level meetings on week-ends, in which issues regarding various pedagogical aspects are discussed. In these meetings, the special teachers teach them to identify, teach, maintain and develop peer group activity in the classroom.

Parental counselling and community awareness are also carried out by NGOs, through self-help groups and VECs, for whom special orientation programmes are conducted.

Some of the other initiatives taken up by NGOs in the State are as follows:

- Mainstreaming CWSN in the age group 3-5 years either in the ECCE centres or providing them home-based education according to their needs. The number of CWSN in ECCE is 14257. Steps are also being taken to mainstream the dropped-out CWSN in AIE centres.



*Helping a Special Child to Sit Properly*

- The special teachers visit the ECCE centres and provide the need-based support. The severely disabled children, who are unable to attend school, are given home-based training by the special teachers.
- Resource room for CWSN having relevant TLM and other educational aids, useful for children to improve their learning is maintained in all the BRCs. The NGOs guide the DPCs in purchase of required materials and set up the resource room in BRCs.
- Vocational training such as tailoring, soap making, wire bag etc. is given to girls studying in class VI–VIII. Special children studying in the same classes also attend this training. This enables to increase the self-confidence of CWSN as they also try to learn these skills.
- Yoga is provided to CWSN for their physical and mental development, especially to improve mental ability of the retarded children. Hyperactive children are given practice in learning to concentrate more. Children with cerebral palsy are made to practice yoga. This helps them breath properly and enhance the clarity of their speech. The voluntary movements of cerebral palsied children are improved. Presently, yoga is being given to 20 children with cerebral palsy and 40 mentally retarded children as a pilot attempt. The teachers are given training in handling these children.



*Special Chair for a Child with Cerebral Palsy*

As can be seen from forgoing that the NGOs are not only involved in the usual activities of inclusive education, namely identification, enrolment, assessment, aids and appliances, but they also provide comprehensive resource support to CWSN. So far, in SSA, 71204 CWSN have been identified and 59,560 have been successfully enrolled in schools. One initiative of the State that deserves special attention is home-based education programme for CWSN. This is described below.

### **Home-Based Education and Training**

The special children are special in every way. They need an environment most suited to their learning needs. Some severely orthopaedic children or children affected with cerebral palsy may not benefit from instruction in a regular school. Some children with multiple disabilities also face the problem of reaching the school on their own.

Some children can be easily mainstreamed in regular schools, some others can come to regular schools when once they are prepared for it and still there might be others who would require special education programme beyond the purview of the regular classroom.

Research has cited the following reasons to place CWSN in an option other than the regular classroom:

- Some disabled children need highly specialized skills taught by specially trained teachers.
- Some disabled children might never respond to the demands of an academic curriculum and will require alternatives.

- Some disabled children could participate in an academic curriculum, but would require longer amount of time and attention from a regular class teacher, which could be inequitable for other children in the class.
- Some disabled children need the support of a peer group, that is more like they themselves, rather than being thrust into the mainstream and left to fend for themselves.
- Some disabled children might experience school failure without a special education curriculum tailored to their needs.
- Some disabled children need a pipeline of services that begins with special education and proceeds requiring all kinds of help from a social agency and a support service that may extend throughout life.
- Some disabled children have greater opportunities to succeed in special education because there is a greater emphasis on parents' partnerships, parents' cooperation, and active parents' participation in the education of the child.
- Some disabled children may not succeed in a regular classroom as they might not respond to the dictates of standardized curriculum and might require special education.

The State of Tamil Nadu is now providing home-based education to 14257 CWSN with the help of NGOs. The home-based education is basically provided to teach CWSN activities of daily living such as toileting, dressing, eating etc. These CWSN are identified in the survey, but a decision regarding their placement is taken in the assessment camp. The placement could be EGS/AIE, regular schools, special school or home, depending on the needs of the child.

The home-based education is carried out in two ways: One is to train the children with severe mental retardation and cerebral palsy for their day-to-day communication and functional independency. Another one is to prepare a child with severe orthopedic condition, but with good cognitive skills, for academic intervention. Let us discuss these two options in detail.

### Option I

For children with severe mental retardation or cerebral palsy expressing their need itself is a great problem. Parents and other family members would not even realize that their child needs to communicate. Sarva Shiksha Abhiyan is teaching these children these skills through home-based training. The steps adopted in this programme are as follows:

#### Step 1

The resource teachers visit the homes of the children with disabilities who are not attending the school. They do a thorough assessment to find out the strengths, weaknesses and needs of the child. At the same time they interact with the family members to identify their level of expectation from their child.



*Resource Teacher visiting home of CWSN*



## Step 2

Based on the assessment details, the resource teacher fixes goals and develops a teaching procedure and visits the home again (initially resource teachers visit the home frequently i.e. weekly 2 to 3 times). S/he prepares the parents or sibling and explains to them the importance of proper sitting, eating, positioning and providing opportunity to the child to interact with others, demonstrates some activities to enhance the communication skill of the child and lets the parents observe those activities. The child may be communicating with varied vocalization or eye movement or body movement or facial expression. Whatever way the child tends to communicate, the teacher teaches the parents to read meaningful expressive skills from these movements. To elicit these responses, s/he uses locally available indigenous materials.

## Step 3

All these activities are undertaken when the parents are present. Parents observe the special educators do these activities and learn from them. In this way, the capacities of the parents to deal with their CWSN are built. A child's learning-ability-plan is then drawn up.

## Step 4

After 4-5 visits, the parents are asked to do the activities without the resource teacher's help. The resource teacher fixes new goals and activities for the following week. The parents or the family members are to carry out the activities regularly. During this course of training, necessary aids and appliances are also provided.



*Resource Teacher providing Speech Therapy*

The resource teachers mainly train these children on the following activities:

- Activities of Daily living (with minimal help and with appropriate adaptation).
- Day-to-day communication, using Alternative Augmentative Communication.
- Functional literacy and numeracy (to read their own name and that of their family members and to identify the coins and currencies, using flash cards).

The hallmark of this initiative is the preparation and implementation of an individualised Educational Plan for each and every Child with a Special Need.

Home-based training is not only for children with mental retardation and cerebral palsy, but also for children with blindness and profound hearing loss to prepare them for schooling. If there is no special schools to admit children with total visual problem and hearing problem, the resource teachers train them under home-based programme, before bringing them to regular school.

For a child with total vision loss the resource teacher trains the child on orientation and mobility, identification of objects (using tactile and sense of smell) and activities of daily living. The parents are trained to make the child independent in communication and mobility. This preparatory stage takes at least six months to equip the child with basic needs and bring them to school. Likewise for a child with profound hearing loss, the aim is to develop language competence in the child and make the child interact with others.

The peers are also sensitized about the child's need and methods of assistance. Everyday the children in the neighborhood visit the child's home and interact with the child.

### Option II

As a rare situation, children with age appropriate cognitive level, but severe orthopaedic condition are also benefited through home-based education. Due to the geographical condition and natural barriers, where mobility becomes a great problem, these teachers provide home-based tutoring.

Thus, the home-based education programme through its focus on community development is teaching parents and CWSN to help themselves, which in turn, is making a significant difference in their lives.

**Table-V: NGOs Involved in Tamil Nadu**

| S. No. | Name of the District | Implementing Agencies   | No. of Blocks |
|--------|----------------------|---|---------------|
| 1      | Coimbatore           | Vidya Sagar<br>UDAVI  | 6<br>4        |
| 2      | Coimbatore           | Sri Ramakrishna Mission Vidyalaya   | 22            |
| 3      | Cuddalore            | G.V.School for the Disabled<br>Integrated Education Promotion Council                       | 6<br>8        |
| 4      | Dharmapuri           | Bala Gnana Illam, CSI School for MR   | 8             |
| 5      | Dindigul             | Association for Rehabilitation of Village & Impairment                                      | 8             |
| 6      | Erode                | Cheran Region Christian Society for Disabled  | 20            |
| 7      | Kancheepuram.        | Vidya Prakasam<br>Keelvottivakkam Gramma  | 3<br>10       |
| 8      | Kanyakumari          | Oral School for the Hearing Impaired  | 9             |
| 9      | Karur                | Barivalaya School for Mentally Retard   | 8             |
| 10     | Krishnagiri          | St. Louis Institute for the Deaf and Blind  | 10            |
| 11     | Madurai              | Leonard School for the Hearing Impaired<br>Sadana School for the Deaf and Mentally Retarded | 12<br>3       |
| 12     | Nagapattinam         | Anbagam<br>Nehru Social Education Centre  | 6<br>5        |
| 13     | Namkkal              | People's Movement for Rights<br>SERVICE   | 8<br>7        |
| 14     | Perambalur           | National School for Deaf and Mentally Retarded<br>Shri Gowthamabuther Trust                 | 8<br>2        |
| 15     | Ramanathapuram       | Vijay Human Services  | 11            |
| 16     | Salem                | Ecomwell Orthopaedic Centre<br>Welfare Centre for Women & Children                          | 11<br>10      |

| S. No. | Name of the District | Implementing Agencies  | No. of Blocks |
|--------|----------------------|--|---------------|
| 17     | Sivagangai           | St. Anne's Karunalaya Rehabilitation Centre for the Disabled     | 12            |
| 18     | Tanjore              | SUDAR<br>Integrated Education Promotion Council                  | 10<br>5       |
| 19     | The Nilgiris         | CRUTCH   | 4             |
| 20     | Theni                | Sadana School for the Deaf and Mentally Retarded                 | 8             |
| 21     | Thiruvannamalai      | District Society for the Disabled                                | 18            |
| 22     | Thiruvarur           | Bharatha Matha Family Welfare Foundation                         | 10            |
| 23     | Thiruvallur          | The Spastic Society of Tamil-Nadu                                | 14            |
| 24     | Truchirapalli        | Sevai  | 16            |
| 25     | Thirunelveli         | Amar Seva Sangam<br>Navajeevan Trust<br>Victory Trust            | 7<br>7<br>7   |
| 26     | Thoothukudi          | TRUE   | 13            |
| 27     | Vellore              | Pallava Council for Integrated Education<br>CSI.Central<br>NESAM | 12<br>10      |
| 28     | Villupuram           | Clarke School for the Deaf & MR<br>V.Excel Education Trust       | 12<br>10      |
| 29     | Virudhunagar         | Uphar-Madurai  | 11            |
|        | <b>Total</b>         |  | <b>391</b>    |

## CHAPTER 8

### PREPARING CWSN FOR SCHOOLS IN UTTAR PRADESH

Uttar Pradesh 'Education for All' Project Board initiated IE programme for children with disabilities in 1999 in two blocks of 5 districts under DPEP-II. Thereafter, 17 more districts were added in year 2000-01. In 2001-02, the programme was implemented in two blocks of 54 districts. In year 2002-03, two additional blocks each of DPEP-II and III districts were covered under IE. Based on DPEP experience, IE was expanded to all the blocks in SSA. The first step undertaken was a survey for CWSN.

On basis of household survey, 2,63,060 children with disabilities were identified. This comprised 20,949 visually impaired, 37,952 hearing impaired, 1,11,386 orthopaedically impaired, 25,104 intellectually impaired and 67,669 children in the category of others. Out of identified disabled children, 2,40,923 were integrated. For environment building, 945 awareness camps were organized. Further, to manage specialized manpower needs, 1690 master trainers were trained, 390 resource teachers received essential training and 2,04,804 primary schools teachers were also oriented towards educational needs of children with disabilities through short-term training programmes. Furthermore 49,112 appliances were supplied free of cost to children with disabilities through convergence with other agencies. Modules, course materials and teaching-learning materials were also developed. NGOs were actively involved in the implementation of the IE programme, which were selected by an intensive desk appraisal. The TOR developed by the State for the NGOs is provided (at Annex-V).

The Framework for implementation of Sarva Shiksha Abhiyan (SSA) aims to ensure that every child with special needs, irrespective of the kind, category and degree of disability, is provided education in an appropriate environment. The thrust of SSA is on providing inclusive education to all children with special needs in general schools.



*Bridge Course for CWSN*

Uttar Pradesh 'Education for All' Project has adopted 'zero rejection policy' by ensuring that every child with special needs is provided meaningful and quality education. Inclusive education is a process of developing and making education of CWSN an integral part of the general education system, rather than a separate system within general education. This also comprised home-based education for severe CWSN.

SSA State Mission Society realized the need of some innovative practices for severely disabled children for three main reasons. Firstly to support zero rejection policy, it was important to impart education to severe CWSN. Moreover, children with severe disabilities are not easily accepted in the school. They lack school readiness skills and orientation in use of special equipment. The general school teachers have their own limitations in terms of expertise to provide intensive and individualized training till the children with severe disabilities learn plus curriculum skills. Therefore, it was decided that some intensive and specialized

### Plus Curriculum Skills for CWSN

| For Visually Impaired       | For Hearing Impaired            |
|-----------------------------|---------------------------------|
| Orientation and mobility    | Use of special equipments       |
| Activities of daily living  | Speech and language development |
| Sensory training            | Auditory training               |
| Braille reading and writing | Communication skills            |
| Use of special equipment    | Activities of daily living      |
| Social skill development    | Social skill development        |

short-term training had to be provided to the children with severe visual and hearing impairment before placing them in general schools. Once the child is trained in plus curricular areas (as given below), s/he is generally well accepted in the general schools.

Last, but not the least, the importance and need of Early Childhood Care and Education (ECCE) to the overall development of all children (normal, at risk or disabled) cannot be undermined. It ensures that every child with a disability, for effective inclusion, must be placed in a pre-school. Further, pre-school education and care can prevent and mitigate the overall impact of disabilities, as well as counter-act the negative effect of delayed interventions.

Thus, the State Mission Society of U.P. undertook two important projects under innovative practices to serve as useful inputs for CWSN.

- Bridge course for severely visually and hearing impaired children, Gorakhpur
- Pre-school centres for young children with disabilities (Bachpan), Lucknow.

These are described in the succeeding paragraphs.

#### 1. Bridge Course for Children with Severe Disabilities

Bridge course for children with severe visual and hearing impairment in U.P. is a short-term (minimum 3 months and maximum 6 months) residential intensive training programme focusing on developing skills required for successful integration of CWSN in the regular school.

The objectives of the bridge course are:

- To develop skills of readiness for successful integration in regular schools
- To equip students with severe disabilities with required skills to use special equipment independently.
- To develop adequate 3R skills as well as academic competencies required for immediate inclusion in the regular classroom appropriate to the child's grade level.
- To develop sense of independence, self-confidence and motivation for personal growth.
- To orient these children with various environments, not only for school inclusion, but also for community and social inclusion.

The main components of bridge course are:

- Individualized as well group instruction by special teachers;
- PTR of 1:10 ratio (i.e. one teacher for every 10 CWSN);
- Training in plus curriculum and ensuring total independence in handling special equipment;
- Development of disability - specific compensatory skills;
- Academic readiness;
- Development of skills for integration; and
- Intensive child-centered training.

The following policies have been adopted by the State:

- Bridge courses are organized at district level.
- Only children with severe visual and hearing impairment are enrolled in the course.
- Out-of-school CWSN are given preference.
- Courses are organized by District Project Office, but special support is provided by teachers trained by good and competent NGOs.
- Residential programmes and necessary resources are made available at bridge camp.
- Regular monitoring and evaluation is done to ensure progress of children with severe disabilities.
- After completion of the course, the children are placed in regular school and resource teacher/ itinerant teachers do the follow up.



*Eager to Learn*

### **Strategies for Success**

This part describes the success story of bridge course for children with visual impairment organized at Gorakhpur district. To experiment the efficacy of bridge course on children with severe disabilities, district Gorakhpur was randomly selected. After consultation with District Project Office (DPO) at Gorakhpur, it was decided to start the course for severely visually impaired children. The strategies undertaken by DPO Gorakhpur in organizing the bridge course are discussed below.

### **Identification/Selection of Children**

The very first step involved for the bridge course was selection of children. Basic Shiksha Adhikari (BSA) assigned the responsibilities to District IE Coordinator, who, in turn, had discussions with the Block Resource Centre Co-ordinator (BRCC) and Master Trainers-Inclusive Education (MT-IE) about this course. Information about the severely visually impaired children was compiled habitation-wise. The criteria adopted were that the CWSN were out of school and were between 6-11 years of age.

About 120 children with severe visual impairment were identified. This was followed by a series of meetings with BRCC and MT-IE to discuss their role. As a result of these meetings, BRCC and MT-IE undertook the following activities in the field:

- Physical verification of the child's presence in the village; and
- Seeking information on the extent/degree of visual impairment.

The strategy helped to select the target group and about 60 children with total visual impairment were found. Parents were asked to sign the letter of consent. In many instances, BRCC and MT-IE personally motivated the parents (those who were not willing) to send their child for bridge course. MT-IEs were instructed to bring the children along with the parents to the camp for the bridge course. Thirty four such children reported at the camp.

### Preparation

The preparation made for the bridge course were:

- Board and lodging.
- Appointment of special (resource) teacher and staff.
- Preparation of teaching-learning materials and procurement of special equipments.
- Curricular planning and schedule.

The girls hostel at District Institute of Education and Training (DIET) was selected as the venue for the bridge course. Renovation and repair works were undertaken before the commencement of the course. The same institute provided rooms for lodging as well as classrooms. A catering contractor was hired to provide food during the course.

Advertisement were floated in newspapers for special educators who could run this course. Personal contacts were also made with various RCI recognized institutions for the appointment of competent special teachers. Applications were called and interviews held. Two special educators for visual impairment and two support staff were selected and immediately appointed on contractual basis.

Prior to the course, assessment kit and necessary teaching learning materials were developed at the camp. Local Blind Inter College provided special equipments such as Braille slates etc. till the same were procured from the Composite Rehabilitation Centre (CRC) Lucknow. Curricular plans, formats for individualized education plans (IEP) and schedules were developed prior to the course.



*TLM Development Workshop*

### Final Selection and Functional Assessment

34 children with severe visual impairment reported at the camp for the final selection, based on their functional assessment. It was important that the children fulfilled the criteria of being adequately toilet trained with sufficient cognitive ability for final selection.

On the basis of the above criterion, 30 children were selected. They underwent a comprehensive functional assessment. These included assessment on:

- Activities of daily living;
- Psycho-social behaviour and communication;

- Conceptual understanding including number identification and counting;
- Tactile discrimination ability (shape, size, texture, light-heavy etc);
- Other sensory abilities such as auditory localization etc; and
- General awareness.

The parents were involved in the assessment process and accurate information regarding child's current level of functioning was given to them. Many parents were asked to stay with their children for a day or two till the child got oriented with the new set up. A visually impaired employee from Basic Education Department was deputed at the camp to give emotional support both to parents and children.

### **Beginning of the Course**

When visually impaired children are put in an unfamiliar place, they feel uneasy, isolated and confined to a fixed place-they wish to run away and reach their home. Therefore, orienting to a new place is an important activity at the beginning of the course. The orientation included familiarization with teachers, caretakers and classmates/room-mates by touching and conditioning with their voice. Orientation is associated with mobility - the skills of the children in moving about in their environment. The mobility skills depend, to a great extent, on spatial ability. Orientation and mobility training studies have indicated two ways that visually impaired individuals can process spatial information:

- a sequential route; or
- as a map depicting, the general location of various points in the environment.

The latter method, referred to as cognitive mapping, is preferable because it offers more flexibility to the visually impaired children in navigating their environment. At the beginning of orientation-mobility class, children were given a tactile map of their current environment to explore and develop a cognitive mental map of their surroundings. This was done to enhance their mobility.

As the children started moving, they were oriented with the trailing method. They used the method while moving from their living room to either toilet or washing area or dining space or vice versa.

Children with visual impairment also rely on visual imagery to a great extent. They recall landmarks and other clues while walking. Children in the bridge camp learnt how to take advantage of a brick-line or a landmark like line separating the concrete road and the ground. Spatial ability was reinforced by rigorous practice on walking between two ropes,



*Blind Children Learning to Orient Themselves to the Environment*



*Learning to Use a Cane*



while maintaining a straight direction.

Under spatial ability development programme, children were oriented to the concept of direction such as left-right; front-centre and back or exact direction while facing the sun in the morning.

The training also included the skill of veering. The training was important for the children to walk straight or taking turn. The training also included maintenance of appropriate posture. Every child was provided with a white cane and trained to use it as a mobility aid.



*Learning Gardening Skills*

A large part of a visually impaired individual's skill in mobility is the result of ability to detect physical obstructions in the environment. Therefore, self-protection was an important part of training.

### **Training for Activities of Daily Living (ADL)**

Orientation-mobility and training in activities of daily living (ADL) are parallel activities. Thus, it is important to expose a visually impaired child to both these activities simultaneously. The self-confidence of visually impaired children develops as soon as they learn and achieve independence in activities of daily living.

The ADL training to the children is an important part of the plus curriculum. Like toileting and brushing, bathing is also a complex skill to learn. Drying clothes in a specified area and identifying them after they dry is a complex skill to master.

Dressing and grooming are also very important ADL skills. The children who learnt these skill were used as peer tutor to teach others. Orientations were given to identify front and back of any dress as well as left and right chappal/shoe. The sensory abilities are reinforced to develop such skills. Similarly, parting while combing was learnt by most of the students within one week of duration. This was possible due to the opportunities and precision teaching that took place in the camp.

### **Sensory Training**

Sensory training is important for the development of the visually impaired child's concept. The tactual sense is one of the important senses, which helps a blind child acquire a variety of concepts. There are two different kinds of tactual perception: synthetic touch and analytic touch. Synthetic touch refers to a person's tactual exploration of objects (generally small enough to be encased by one or both hands). Most physical objects are too large for synthetic touch to be useful. For these, analytic touch has to be used. Analytic touch involves touching of various parts of an object and then constructing the image of these separate parts in one's mind.



*Sensory Training*

### Training in ADL

- ✓ **Toilet training**
  - Access to toilet (by trailing method).
  - Concept of objects in the toilet (cognitive mapping).
  - Using toilet and washing (task analysis and prompting).
- ✓ **Training on how to apply paste on tooth brush**
  - With the outward flow of paste from the tube, the finger guides the quantity and applying the paste on the brush.
- ✓ **Training on applying oil before bathing**
  - Since visually impaired children cannot see, hence the tactile sensation on the palm guides them. Initially the bottle is filled with water and the children are trained to pour the water on palm. After achieving the skill, they are given oil containers to handle.
- ✓ **Teaching feeding skills**
  - Visually impaired children use food plate clockwise. They are trained to do so. The hand movement starts from roti and/rice to dal, then sabji in a sequential order. The left hand is used for drinking water placed on left hand side.

The children attending bridge course were given enough experiences to explore their tactual perception. They were also exposed to different textures and tactual tolerance was developed.

Sensory training was given through their activities of daily living. Sorting own possessions and arranging them in a suitcase was also an activity that developed sensory acuity among the children.

Auditory discrimination and localization were part of sensory training programme. Some training also took place through various forms of games. For example, the children were asked to track the sound of a ball to enhance their ability to localize sound.

### Grouping for Classroom Instruction

Children admitted to the bridge course differed in age, sex and abilities. Thus, individual differences were encountered. Group instruction was, therefore, important. Hence, three groups were formed based on the following criteria:

- Tactile ability;
- Listening skills;
- Writing skills using Braille; and
- Cognitive skills;

### Characteristics of Three Groups

**Group one:** The group comprised children with above-average intelligence. They had adequate sensory abilities. They were basically taught the skill of Braille reading and writing and use of Taylor Frame for mathematical computations.



**Group two:** The group comprised children with average abilities. Sensory training was one of the important inputs given to this group, besides training in Braille reading and writing as well as use of Taylor frame.

**Group three:** The group comprised children with below-average abilities and few children were slow learners also. Sensory training, mainly tactual and listening was imparted to the group as part of the plus curriculum. This group was referred to as the remedial group.

### Braille Reading and Writing

Braille is a tactile approach used to teach reading and writing to the visually impaired children in which letters are formed by combination of six raised dots in cell. Braille dots are embossed on a slightly thick paper with the help of a stylus. As the dots appear on the reverse sides of the paper, Braille writing is done from left side to right side.



*Learning Braille*

The children at the bridge course were trained to punch all the dots of the Braille cell. After sufficient practice, they were asked to fill in the dots of upper cell on the Braille paper and then to fill the dots of the lower cell. The punching of the particular dots and the combination of dots followed the training. To increase their pace of writing in Braille, the children were trained to use their left hand to identify the Braille cells on stylus and the right hand to punch the letters in the cells.

The children were also trained on Braille reading. While their right hand moved through the Braille line, the left hand followed it from left to right. Lightness of touch was stressed and the scribing of the dots was discouraged.

Learning to read Braille is much more difficult than learning to read print. Braille contractions are not logical and do not correspond to phonetic rules. Despite this, the children at bridge course were able to master both reading and writing within three months of intensive training.

### Training in Curricular Areas

By using special equipments, children at the bridge camp learnt reading and writing. This helped them to familiarize themselves and understand contents from the curricular areas. Children of class IV level (group one) were introduced to various textbooks prescribed by Basic Education Department. These were Hindi, English, Sanskrit, Mathematics, Social studies (Hamara Samaj), Science (Gyan-Vigyan).

### Training in Co-curricular Activities

A part-time music and a part-time sports teacher were engaged to develop students' all-round development through co-curricular activities. Children at bridge camp were taught both vocal and instrumental music.

Physical training and sports activities were regularly organized as per schedule. Cricket, Kho-kho, Kabaddi, Races were some of the games that the children played. Cricket was the most popular game. The sounding

ball invited great response from the visually impaired children in the field. Adapted chess was given to the children as an indoor game.

### **Social Skill Training**

A few visually impaired children show stereotypical behaviours, which generally include repetitive movements such as rocking or rubbing eyes. Some of them have difficulty attaining certain social skills (such as appropriate facial expressions). Teaching visually impaired students social skills can be a very challenging task, as such skills are traditionally acquired through modelling and using behavioural techniques. Students attending bridge course were taught appropriate social behaviours. The behaviour modification techniques such as feedback and reminders coupled with reinforcement were used to eliminate self-stimulatory behaviours and rocking mannerisms.



*Socialising through Play*

### **Community Orientation and Integration**

Efforts were made to orient the students of bridge camp to local community, to enhance their social integration.

Children were regularly taken to vegetable market/shops for minor purchases and places of worships. Besides, they were given opportunity to move in the park and play with sighted children too.



*Learning to Greet*

Sighted children were regularly invited to the camp. The visually impaired children interacted with them either through story telling activities or Anantakshari and competitions.

### **Evaluation of Children's Achievement**

An external committee was set up to evaluate children's achievement and progress. The team comprised three special educators including a blind teacher from Blind Inter College, Gorakhpur. The evaluation was done on Braille reading and writing and mathematical computations by using Taylor frame. Oral test was taken for other curricular areas. Performance of the children before and after the bridge course improved greatly. The entry level of the 30 children before they came to the bridge course was not known. 12 children were mainstreamed in class-IV, 8 in class-III and the remaining in class as I and II (**details provided in Table-VI**).

### **Disability Certification and Regular Health Check-up**

Under the direction of Chief Medical Officer of Gorakhpur District Hospital, all required facilities were made available to the children. The Medical Board constituted for Disability Certification visited the bridge camp and provided disability certificates to each child after medical examination.

Routine health check-ups on fortnightly basis were conducted for which three doctors were engaged on rotation basis. Sick children were examined at District Hospital and medicines were given free of cost.

### Monitoring and Feedback

There was regular monitoring of progress of children attending bridge course. IE unit of State Project Office took continuous feedback from District Project Office. Visits to the camp were undertaken and feedback provided to improve the quality of bridge course.

### Resource Mobilization and Community Support

The bridge course was also able to solicit cooperation from different schemes/agencies involved in disability. The District Blindness Prevention Society undertook surgery of one child and provided corrective lenses free of cost. Composite Rehabilitation Centre, Lucknow, under Ministry of Social Justice & Empowerment, distributed Braille slates, Taylor frame, white canes and Abacus to all children. They also provided adapted chess kit, free of cost. All staff members from BSA office donated Rs. 7,000/- towards purchase of uniform and chappals for the children.

Donations also came for the children in the form of blankets, bed sheets and woolen caps attending the bridge course.

## 2. Project 'Bachpan' Pre-school for Young Children with Disabilities

Considering the importance of pre-school education for young children with special needs, under SSA, 'Bachpan,' a nursery school has been started in Lucknow, on an experimental basis, for children with visual hearing and intellectual impairment. This is a collaborative programme of U.P. 'Education for All' State Project office and Department of Handicapped Welfare, Govt. of Uttar Pradesh. This section is an effort to document the success story on 'Bachpan'.

Bachpan is a unique pre-school for children with disabilities. The mission of Bachpan is to ensure a move towards an inclusive environment (for disabled infants and pre-schoolers) that facilitates children's development of social, motor, communication, self-help, cognitive and behavioural skills and enhances children's self concept, sense of competence, control and independence.

The main objectives of 'Bachpan' project are:

- To provide early intervention and pre-school education to young children between 3 to 6 years, irrespective of type and severity of disabilities.
- To create a conducive environment for learning and growth.
- To develop and implement appropriate curriculum focusing on individualized programme with the assistance of multi-disciplinary team.



*Joyful Inclusion*

- To help parents understand and appreciate their child's capabilities to optimize their participation.
- To prepare the child for inclusion so that s/he is well accepted in a regular school.

Bachpan is a pre-school education centre for children with disabilities, where:

- Multi-disciplinary comprehensive assessments are undertaken at the beginning followed by periodic assessment;
- Need-based educational goals are determined individually for each child, unique in his/her needs;
- Goals aimed to meet the learning needs of a child are developed;
- Educators, parents and peers share the responsibilities towards optimum development of a child with a disability;
- Aids and appliances as well as special equipment for teaching and learning of children with disabilities are provided;
- Small classroom size is maintained;
- Freedom to develop at one's own pace play activities in child's learning is given;
- Realizing that students have the right to inclusion, instruction and participation are adapted to increase the children's readiness for mainstream education.

Bachpan provides:

- Specialized instructions by well trained and experienced special educators.
- Speech therapy.
- Physio-occupational therapy.
- Psychological testing and counseling.
- Family training, counselling and home visit.
- Medical services necessary for diagnostic purpose.
- Assistive technology.
- Early identification, screening and assessment services.
- Transportation.



*Imparting Pre-Inclusion Skills*

### **Why is Bachpan Different ?**

Four elements make Bachpan different:

- Environment;
- Manpower;

- Regular interactions; and
- Admissions and grouping.

### **Environment in Bachpan**

Bachpan provides an environment facilitative to a child's growth. The classroom size is usually small giving more opportunity for interaction, sharing of experience and a better understanding of a child's needs. Moreover, multi-level teaching and individualized instruction is also easily achieved in a small group. Children learn better, but at their own pace. Free inhibited interaction of children develops in them a feeling of ownership and equity. Individualized instructions bring about awareness in children about their own capacities and a confidence to realize their inherent potential.

### **Manpower**

The pre-school education centre 'Bachpan' has the best staff. They are trained in the field of special education and have good experience of teaching at pre-school level. These special educators are specialized to handle children with various disabilities.

### **Regular Interaction Among Staff Members**

With a teacher student ratio 1:10, each child gets more attention and time from the teacher. Programme coordinator attached to the project coordinates the complete academic activities. Special educators are oriented to the goals and objectives of the project. The programme coordinator does regular monitoring and provides feedback to them. The centre takes specialized services of audiologist-speech therapist, physiotherapist and psychologist on a regular, but part-time basis.

### **Admission and Grouping**

On admission, every child undergoes a comprehensive assessment and his/her current level of functioning is recorded. Based on types of disabilities, the children attend separate classes, but for recreational and outdoor activities, all groups are integrated. Children with visual impairment, hearing impairment and mental retardation attend their curricular activities separately. Children with cerebral palsy and autism associated with mental retardation are also admitted to the centre.

Further based on children's level of functioning and age, three sub-groups are made:

- Play group;
- Preparatory group; and
- Nursery group.

The children are generally trained on:

- Concept of body parts;
- Concepts of shape and size of different objects;
- Concept of fast-slow, right-left, up-down etc;
- Concept about home and school environments;

- Time and money concept; and
- Recognizing various birds, animals, fruits, vegetables, flowers from sound, smell and shape.

Overall, the children, after going to Bachpan, have shown an overall improvement in activities of daily living and social behaviour.

### Conclusion

Bachpan has proved that early education:

- Is crucial to the development of language, intelligence, personality and self worth.
- Care can prevent and lessen the overall impact of disabilities as well as counteract the negative effects of delayed intervention.
- May in the long run be less costly and more effective than providing services later to the child with a special need.

This example shows that if the education system is responsive and sensitive to the needs of CWSN, then positive attitudes develop. As attitudes develop/change for the better, CWSN gain self-assurance. They begin to learn and start feeling good about themselves.



Table – VI: Details of CWSN Mainstreamed after Bridge Course at Gorakhpur

| S. No. | Name         | Sex/Age | % of Disability | Entry Grade Level* | Current Grade Level |
|--------|--------------|---------|-----------------|--------------------|---------------------|
| 1.     | Rahul        | M/8     | 100%            | —                  | IV                  |
| 2.     | Sudhanshu    | M/11    | 100%            | —                  | III                 |
| 3.     | Shashikant   | M/11    | 100%            | —                  | IV                  |
| 4.     | Rinku        | M/10    | 100%            | —                  | II                  |
| 5.     | Sannulal     | M/9     | 75%             | —                  | IV                  |
| 6.     | Rahdeyshyam  | M/10    | 75%             | —                  | II                  |
| 7.     | Krishna      | M/10    | 100%            | —                  | IV                  |
| 8.     | Shailesh     | M/10    | 75%             | —                  | IV                  |
| 9.     | Kuldeep      | M/11    | 75%             | —                  | III                 |
| 10.    | Orendra      | M/10    | 100%            | —                  | IV                  |
| 11.    | Govind       | M/11    | 75%             | —                  | IV                  |
| 12.    | Sonu I       | M/10    | 100%            | —                  | III                 |
| 13.    | Buddiram     | M/12    | 100%            | —                  | IV                  |
| 14.    | Jagatnarayan | M/11    | 75%             | —                  | IV                  |
| 15.    | Surendra     | M/10    | 75%             | —                  | III                 |
| 16.    | Ranjan       | F/8     | 75%             | —                  | III                 |
| 17.    | Shamirum     | F/9     | 100%            | —                  | III                 |
| 18.    | Meena        | F/11    | 100%            | —                  | III                 |
| 19.    | Akash        | M/11    | 100%            | —                  | III                 |
| 20.    | Sonu II      | M/10    | 75%             | —                  | IV                  |
| 21.    | Anita        | F/7     | 80%             | —                  | II                  |
| 22.    | Rambhjan     | M/12    | 75%             | —                  | IV                  |
| 23.    | Mallu Pd.    | M/12    | 100%            | —                  | IV                  |
| 24.    | Birju        | M/7     | 100%            | —                  | I                   |
| 25.    | Balchand     | M/7     | 100%            | —                  | I                   |
| 26.    | Ramnarayan   | M/10    | 60%             | —                  | IV                  |
| 27.    | Somnath I    | M/8     | 60%             | —                  | III                 |
| 28.    | Somnath II   | M/10    | 100%            | —                  | III                 |
| 29.    | Satrughan    | M/8     | 100%            | —                  | III                 |
| 30.    | Sona         | F/11    | 100%            | —                  | III                 |

\* All CWSN admitted to bridge course had never attended school before.

## CHAPTER 9

### NURTURING SPECIAL NEEDS THROUGH HOME-BASED CARE IN UTTARANCHAL

*As long as there are children with different and varying needs, there will be a need for services that go beyond what a regular classroom ordinarily provides.*

The Uttranchal SSA Society with the support of the NGOs is providing intensive home-based learning programmes to boost student's skills. These interventions are being provided at home to those CWSN who are out of school. These children are either severely physically disabled or mentally retarded. This programme strives to understand the reason behind a child's behaviours or non-adaptive skills and works toward developing new, more functional skills to replace the old ones. Students who require home-based programmes need a highly structured approach to learning because they are not spontaneously self-learning. It places a strong emphasis on parent involvement and collaboration between NGOs and the District SSA Society.

In Uttranchal, for a long time, the support from NGOs was mainly being sought in the area of teacher training. It was only after a survey conducted by the State, which showed that there were 1481 CWSN who are out of school, that the State decided to provide education in some form to these children. These were basically those hardest to reach CWSN who could not participate in school due to their disability. The idea is to provide special education and other rehabilitation facilities to CWSN in their home environment. Besides, home-based education could also be an effective tool to increase awareness, by soliciting community participation and parents' involvement through development of local resources.



*Assessing the Needs of CWSN*

#### **Pilot Study**

With this idea, the home-based education programme is being implemented in Bagheshwar district with the help of Divya Jyoti Special School, Research and Rehabilitation Institute. Before the inception of this intervention, the organization undertook a small study for assessment of knowledge on the part of the parents about the rights and facilities available to CWSN. The study primarily showed that:

- Parents were not keen to send their CWSN to school because of inferiority complex and low acceptance of their children by the society.
- The geographical terrain had made impossible for the parents to access any kind of information.
- Lack of transportation facilities prevented parents to use any specialized service available for rehabilitation of CWSN.

The study also showed that the parents and community were interested in starting a home-based programme for these children. Hence, this intervention began with the following objectives:

- To promote skill development in CWSN to help them attain functional independence;
- To provide education and rehabilitation programme to never-enrolled or dropped-out CWSN who could not attend regular or special school;
- To create awareness in parents and community about the rights and facilities available to CWSN;
- To deal with the needs of severe CWSN in a cost-effective manner using local approach; and
- To help CWSN using locally available low-cost/no-cost material.

Moreover, managed home care is more cost-effective than keeping a child in a hospital or other institutional setting. More specifically, its aim was to determine and develop strategies to respond to the home-based care needs of medically/educationally fragile children (those with chronic diseases, multiple disabilities and/or developmental delays) and their families.

The strategy for home-based education programme for CWSN mainly comprised four elements:

- Survey;
- Training;
- Skill development programme; and
- Community mobilization programme.

### Survey

The very first step was to conduct a survey to assess the number of CWSN requiring home-based care. Door-to-door survey was conducted for this purpose by the organization and it was found that there were 80 such children in the district. Assistance was also taken from local community / social workers/ teachers/ AWW. These children were assessed by a professional/expert team of the organization. Further parental counselling was also conducted by the team to motivate them to be involved in this programme.

### Training of Care-givers

Following the survey, training was provided to teachers/ AWW, community health workers, volunteers/care-givers on disability management. This training, was provided by the special educators of the organization, which is recognized under the National Trust. The training mainly comprised theory work, field-work, assessment of CWSN, project planning, counselling and rehabilitation. The contents of the training programmes are given in **Box-6**. So far, 15 teachers have been provided 10 day care-giver training. These teachers are now involved in identification and counselling parents' of CWSN. Since these teachers are placed at the Gram Panchayat, maintaining home-school linkage through them is easy and effective.

#### Box-6

#### Contents of Care-givers' Training Programme

- Rationale and objectives of care-givers' training.
- Learning process and impact of an environment.
- Psycho-social implications of special needs.
- Vocational rehabilitation.
- Skill acquisition and training.
- Teaching-learning strategies.
- Strategies for home-based education.
- Working with families and communities.
- Language and communication.
- Disability-specific information (VI, HI, MR).
- Activities of daily living.

### **Skill-Development Training**

Following the training, these teachers conducted skill-based training for CWSN. In this training, the strengths and abilities of the CWSN are focused upon and the care-givers, with the help of special educators of the NGO, plan lessons, tailored to the needs of CWSN. The main elements of this training are pre-vocational training, activities of daily living and rehabilitation. The activities for skill development differ from child to child. Some of the basic activities included information on personal hygiene, participation in activities of daily living, including social activities, functional academics and self-help skills. Besides, teachers also developed activities and TLM to help parents and CWSN learn through this programme.



*Training of Care Givers*

The trained care-gives visit the homes of CWSN thrice a week to provide skill-based training.

### **Community Mobilization**

This is primarily done with the help of parents and VECs. The VECs maintain direct contact with the parents and also monitor that the care-givers visit the homes of CWSN regularly. Since the volunteers trained as care-givers were directly taken from the community, it increased awareness to mobilize resources to impart home-based care to the identified CWSN.

The main outcomes of this programme have been that:

- Early identification and timely rehabilitation has facilitated mainstreaming of CWSN.
- Community has been actively involved in the identification of CWSN.
- Parents are more positive about their CWSN.
- Parents are involved in assessing the needs of their CWSN.
- Awareness about the rights of CWSN has increased.

The home-based education programme in Uttaranchal is just a beginning of a novel intervention to meet the learning needs of CWSN. There is a need for more consistent and improved case management so that interventions begin as soon as the child is detected having some kind of a severe disability and early linkages to community services and support groups can be arranged. Parents should be encouraged to function as independently as possible and to assume active roles in the case-management process; they should also have a greater voice in the selection of care-givers and their role as service providers for their children.

### **Recommendations**

The following recommendations can further help improve the quality of home-based education programme:

- Develop and provide additional flexible supports to assist families in meeting their care-giving roles, based on a family-centered approach.

- Improve access to respite care so that a greater variety of options or creative models, that are cost-effective, are developed.
- Clarify the roles of parents, other family members and caregivers within a more flexible case management framework.
- Improve case-management so that intervention starts prior to discharge from hospital; linkages are made to community services and support groups; and parents are encouraged to function as independently as possible while being allowed a reprieve when needed.
- Increase training of community health professionals to improve competency of care and utilize a home-teaching intervention style that responds to parents' individual differences.

In short, a continuum of services for CWSN has to be preserved. A wide range of support services/ options are needed to cater to the range of different special needs of CWSN. If zero rejection policy has to be implemented, then home-based education has to become a crucial part of the learning continuum for children with complex educational needs.

## CHAPTER 10

### PROVIDING STRUCTURAL SUPPORT THROUGH NGOs IN WEST BENGAL

#### Pooling Manpower Resources

Just like Maharashtra, the concept of using NGOs for inclusive education emerged in West Bengal in 1999, as it was felt, at that time, that neither under the School Education Department nor under the DPEP project, adequate manpower or resource personnel were available. Thus, the decision to involve NGOs was taken. To begin with 1 block each from the 5 districts of Bankura, Birbhum, Murshidabad, Cooch Behar and South 24 Parganas were chosen. The coverage of IE programme was then extended to 4 more blocks in these districts. By 2000, as many as, 25 blocks were being covered for IE, out of a total of 135 blocks in these districts. More and more blocks were gradually taken up and 57 blocks were covered for IE by 2001. This number increased to 106 blocks in 8 districts in 2002 and to 139 blocks in 2003.

In this context, initially to implement IE activities under SSA, NGOs provide support in the form of State Level Resource Organizations (SLROs) and District Level Resource Organizations (DLROs). Under IE activities of SSA West Bengal, activities like identification of CWSN, distribution of aids and appliances, teacher training, school readiness, enrolment, providing resource support to the enrolled CWSN and home-based rehabilitation to address zero rejection policy etc. are undertaken by the districts with the help of DLROs. The overall aim is to bring out-of-school CWSN to general schools and provide individualized education to the enrolled disabled children.



*Training through SLROs*

In the State, the NGOs are involved at two levels, State and District. State level NGOs are called State Level Resource Organisation (SLRO), while District Level NGOs are called District Level Resource Organisation (DLRO). Whereas, on one hand, at the State level the role of the SLRO(s) is mainly advisory, on the other hand in the districts, DLROs are actively involved in the process of implementation. A support mechanism has, thus, been developed and NGOs already working in the field of disabilities facilitate implementation of this task in collaboration with SSA State and district level functionaries. Detailed TOR for State and District level organizations is provided (at Annex-VI).

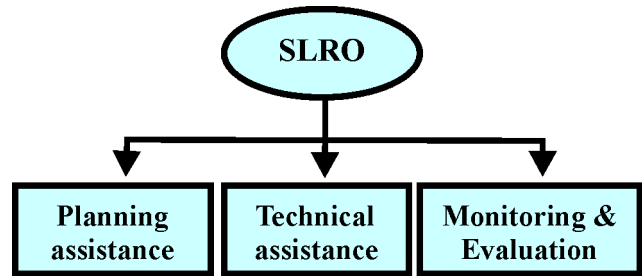


*Making Inclusion Happen*

## State Level Resource Organisation (SLRO)

Currently, the following 4 NGOs form the SLRO for IED in the State:

1. Society for Visually Handicapped (SVH).
2. Indian Institute of Cerebral Palsy (IICP).
3. Bikashayan Institute for Persons with Mental Retardation..
4. Speech and Hearing Institute & Research Centre (SHIRC).



These institutes have had a long experience of working on issues of disability and education of CWSN. The SLRO has mainly been formed to draw upon the resources available within the State in the process of programme planning, implementation and monitoring. The SLRO provides assistance in planning and conceptualizing the strategies and interventions, implementation, monitoring, supervision, research and evaluation, addressing area-specific problems, development of training materials/modules, training master trainers, key resource persons and DLRO members, drawing up time-bound calendar of activities, carrying out specific field-based assignments. Some of the other functions of SLRO are:

- Establishing linkages between various institutions and NGOs working in the area of disability;
- Co-ordination with medical, government departments like Welfare, Health, Department of Women and Child and Development;
- Standardization and finalization of curriculum/ modules for training at various levels;
- Arranging for supply of aids and appliances;
- Support on planning and implementation; and
- Deciding the state programme's policy on special needs/inclusive education.

Besides, the SLRO is also involved in various training programmes such as:

- Sensitization of primary and upper primary teachers;
- Refresher courses for DLRO for updating their skills;
- Holding of short-term course (3/4 days) for the children, parents, siblings, teachers and special educators;
- Multi-category orientation of special educators to enable them to implement inclusion in classrooms, including also training on audiometry and proper utilization of audiometer to overcome the problem of availability of audiologist and air mold laboratory to distribute hearing aids to the identified children with hearing impairment in district etc.;
- Training of KRPF members and Gramin Protibondhi Bandhu Prakalpa; and
- Sensitization of the administrators to facilitate the implementation of inclusive education.

The SLRO also provides technical assistance in the areas of preparation of materials/manuals, TLM for CWSN, resource kits for resource teachers and curriculum adaptation. They also oversee the implementation of IEPs.

### District Level Resource Organisation (DLRO)

The state with the help of DLROs is implementing IE activities in 20 educational districts. 99 DLROs are functioning along with 270 special educators. District wise DLROs involved is given below.

**Table-VII: District wise DLROs Involved**

| S. No. | Name of District  | Name of DLRO   | Number of Blocks | Number of Special Educators |
|--------|-------------------|--|------------------|-----------------------------|
| 1      | Birbhum           | Bangia Saksharata Prosar Samity                                    | 5                | 45                          |
|        |                   | Joyprokash Institute for Social Change                             | 2                |                             |
|        |                   | Rampurhat Spastic and Handicapped Society                          | 1                |                             |
|        |                   | Organisation for Protection of Environment and Consumers (O.P.E.C) | 3                |                             |
|        |                   | Vivekananda Adibasi Kalyan Samity                                  | 6                |                             |
| 2      | Bankura           | Dr. Sailen Mukherjee Muko Bodhir Vidyalaya.                        | 3                | 21                          |
|        |                   | Bikash Society, Kenduadihi   | 2                |                             |
|        |                   | Barjora Ashar Alo  | 1                |                             |
|        |                   | Bivekananda Adibasi Kalyan Samity                                  | 1                |                             |
| 3      | North-24          | K arakpur Siksha Samaj   | 2                | 20                          |
|        |                   | Barakpur Ramkrishna Vivekananda Misson                             | 1                |                             |
|        |                   | North 24 Parganas Disabled Persons Association                     | 1                |                             |
|        |                   | Basirhat Relief Handicapped Welfare Society                        | 1                |                             |
| 4      | Purba Midnapur    | Pratibondhi Sahayak Samity   | 1                | 3                           |
| 5      | South-24 Parganas | Paschimbanga Rajya Protibondhi Sambilani                           | 3                | 20                          |
|        |                   | Sanchar  | 5                |                             |
|        |                   | Sarishapally Unnayan Samity  | 2                |                             |
|        |                   | Durbachati Sundarbone Rural Development Society.                   | 1                |                             |



| S. No. | Name of District | Name of DLRO   | Number of Blocks | Number of Special Educators |
|--------|------------------|--|------------------|-----------------------------|
| 6      | Hooghly          | Shelter  | 1                | 15                          |
|        |                  | Paschimbanga Rajya Protibondhi Sambilani                   | 2                |                             |
|        |                  | Grahambel Centre for the Deaf                              | 1                |                             |
|        |                  | Bikash Bharati Welfare Society                             | 1                |                             |
| 7      | Kolkata          | Bangia Saksharata Prosar Samity                            | 1                | 12                          |
|        |                  | Care and Counselling Centre                                | 1                |                             |
|        |                  | Bikash Bharati Welfare Society                             | 1                |                             |
|        |                  | Behala Bodhayan  | 1                |                             |
| 8      | Murshidabad      | Chatra Physically Handicapped and Social Welfare Institute | 2                | 18                          |
|        |                  | Y.M.C. Vocational Training Centre                          | 1                |                             |
|        |                  | Institute of Social Welfare Education and Rehabilitation   | 1                |                             |
|        |                  | Berahampur Nabadisha                                       | 1                |                             |
|        |                  | Alokendu Bodh Niketan                                      | 2                |                             |
| 9      | Coochbehar       | Spastic Society of Coochbihar                              | 1                | 6                           |
|        |                  | Akrahata Dishari Welfare Organisation                      | 1                |                             |
|        |                  | Vekrapul Netaji Club                                       | 1                |                             |
|        |                  | Jnan Deep School and Training Centre                       | 1                |                             |
| 10     | Howrah           | Anand Bhavan Deaf and Blind School                         | 1                | 9                           |
|        |                  | Anandabhavan Education-cum-Training Centre                 | 1                |                             |
|        |                  | Howrah South Point   | 1                |                             |
| 11     | Uttar Dinajpur   | Saint Johns Ambulance                                      | 2                | 23                          |
|        |                  | Raiganj Debinagar Welfare Education Centre                 | 2                |                             |
|        |                  | Islampur Ramkrishnapally Rural Welfare Society             | 1                |                             |
|        |                  | Ramendra Mahilam Samity                                    | 1                |                             |
|        |                  | Raiganj Chittaranjan Suchetana Society                     | 2                |                             |
|        |                  | Uday Nagar Chetana   | 1                |                             |

| S. No. | Name of District    | Name of DLRO                                     | Number of Blocks | Number of Special Educators |
|--------|---------------------|--|------------------|-----------------------------|
| 12     | Dakshin<br>Dinajpur | Suchetana Abasik Protibondhi Vidyapith           | 1                | 11                          |
|        |                     | Indian Redcross Society                          | 1                |                             |
|        |                     | Dr. B.R.Ambedkar Special                         | 1                |                             |
|        |                     | Gurullya Pratibondhi Kalyan Samiti               | 1                |                             |
| 13     | Burdwan             | Swayambhar Burdwan Blind Academy                 |                  |                             |
|        |                     | Sreema Protibondhi Kalyan Kendra                 |                  |                             |
|        |                     | Aniket   |                  |                             |
| 14     | Jalpaiguri          | Jalpaiguri Welfare Organisation                  | 2                | 21                          |
|        |                     | Latagury Social Welfare Organisation             | 1                |                             |
|        |                     | Torsa Kaljani Social Welfare Society             | 1                |                             |
|        |                     | Paschimbanga Rajya Protibondhi Sambilani         | 1                |                             |
|        |                     | Mal Social Welfare Organisation                  | 1                |                             |
|        |                     | Alipurduar Welfare Organisation                  | 1                |                             |
| 15     | Purulia             | Majhihira National Basic Educational Institution | 1                | 9                           |
|        |                     | Pialsole Sabyasachi                              | 1                |                             |
|        |                     | Purulia Protibondhi Kalyan Samity                | 1                |                             |
| 16     | Malda               | Nari Kalyan Samity                               | 1                | 16                          |
|        |                     | Malda Dishari Misson                             | 1                |                             |
|        |                     | Malda Sahayogita Samity                          | 1                |                             |
|        |                     | R. P.Roy Memorial Blind School                   | 1                |                             |
|        |                     | Malda Physically Handicapped Management Society  | 1                |                             |
|        |                     | Milky Kutir Shilpa Unnayan samity                | 1                |                             |
| 17     | Siligury            | North Bengal Handicapped Rehabilitation Society  | 1                | 5                           |
|        |                     | North Bengal Council For the Disabled            | 1                |                             |
| 18     | Darjeeling          | Darjeeling Hope Brahmosamaj BLDG.                | 1                |                             |
|        |                     | Darjeeling Sparsh Shamrock                       | 1                |                             |
|        |                     | <b>Total</b>                                     | <b>99</b>        | <b>270</b>                  |

Compared to SLROs, the DLROs are more closely involved with the process of implementation. These DLROs devote more time to the programme and undertake field-based assignments/tasks. Future course of action and ways of tackling specific problems are also a part of their agenda.

Generally, the main tasks of the DLRO is to:

- Supervise the work of special teachers in all the blocks/ clusters in the district;
- Provide resource support to special teachers in all the blocks/ clusters;
- Conduct survey of CWSN in the district;
- Collect data on CWSN from all blocks/ clusters;
- Assess the inclusion of CWSN;
- Oversee the orientation of teachers and community sensitization;
- Planning and organization of training programmes for teachers, parents etc.;
- Awareness programmes for IE;
- Consultation with other district level organizations; and
- Monitoring the supply of required aids and appliances.



*DLRO Member providing Home Based Education*



*Training of Master Trainers/ DLRO Members*

The specific activities carried out by DLRO are given as **Box-7**.

**Box-7**

**Specific Role of DLRO**

**Survey**

- Providing assistance to DPO in survey and screening activities

**Administrative and Planning Activities**

- Preparing micro plan for each identified child and macro plan for IE activities in the Block.
- Convergence with different Departments such as education, health, social welfare etc. to keep a track of Govt. orders related to disability.

**Academic Activities**

- Advice the HMs/regular class teachers/ SSK/ MSK/parents on problems encountered in the regular classroom with the CWSN and teach plus curriculum skills, through school and home visits.

**Capacity Building**

- To strengthen capacities of district based functionaries/ panchayat functionaries/parents/peer group/ teachers
- Assisting in setting up a Resource Centre
- Providing home based rehabilitation services to severe CWSN

**Monitoring and Feedback**

- Provide support service to the DPO to facilitate the activities related to aids and appliances
- To keep record and proper report on IEP.

So far, with this SLRO/DLRO arrangement, 109397 CWSN have been identified and through assessment and screening camps, 62416 CWSN have been enrolled in general schools. The detailed progress (district-wise) achieved in the area of IE with the help of SLRO/DLRO is as follows:

| S. No. | Name of District     | CWSN Identified | CWSN Enrolled | Appliances Distributed | Total Teachers Trained | DLROs Engaged | Total Special Educator | KRPF        |
|--------|----------------------|-----------------|---------------|------------------------|------------------------|---------------|------------------------|-------------|
| 1      | Bankura              | 4383            | 3520          | 682                    | 5196                   | 7             | 21                     | 50          |
| 2      | Birbhum              | 7846            | 6488          | 1572                   | 8176                   | 15            | 46                     | 42          |
| 3      | Coochbehar           | 6605            | 3597          | 410                    | 549                    | 4             | 6                      | 46          |
| 4      | Murshidabad          | 7412            | 6701          | 1410                   | 1137                   | 7             | 18                     | 40          |
| 5      | South 24 Pgs.        | 14080           | 9430          | 7251                   | 11532                  | 9             | 20                     | 500         |
| 6      | D.Dinajpur           | 3541            | 1186          | 575                    | 1051                   | 4             | 11                     | -           |
| 7      | Jalpaiguri           | 7521            | 3140          | 2475                   | 6591                   | 7             | 21                     | 150         |
| 8      | Malda                | 14912           | 5066          | 279                    | 6033                   | 6             | 16                     | 1190        |
| 9      | Purulia              | 3382            | 1391          |                        | 3270                   | 3             | 8                      | -           |
| 10     | U.Dinajpur           | 5085            | 2766          | 747                    | 2152                   | 9             | 23                     | 42          |
| 11     | Burdwan              | 3633            | 3332          | 8                      | 179                    | 4             | 10                     | 20          |
| 12     | Darjeeling           | 903             | 408           |                        |                        | 2             | 6                      | -           |
| 13     | Siliguri             | 2173            | 750           | 49                     | 1668                   | 2             | 5                      | -           |
| 14     | Hooghly              | 5133            | 1900          |                        | 50                     | 5             | 15                     | -           |
| 15     | Howrah               | 2358            | 856           | 145                    | 1544                   | 3             | 9                      | -           |
| 16     | Kolkata              | 334             | 297           |                        | 11630                  | 4             | 12                     | -           |
| 17     | North 24 Pgs         | 11008           | 5569          | 845                    | 450                    | 7             | 20                     | -           |
| 18     | Nadia                | 454             | 100           |                        | 550                    | -             |                        | -           |
| 19     | Purba<br>Medinipur   | 8563            | 5846          |                        |                        | 1             |                        | -           |
| 20     | Paschim<br>Medinipur | 71              | 71            |                        |                        | -             |                        | -           |
|        | <b>Total</b>         | <b>109397</b>   | <b>62416</b>  | <b>16448</b>           | <b>61758</b>           | <b>99</b>     | <b>270</b>             | <b>2080</b> |

It can be seen from the foregoing that professional involvement of NGOs is an important feature of the planning and management process of the IE programme in the state. Using NGOs as resource groups to undertake an advisory role has led to significant contributions for achievement of programme goals. This mechanism has allowed collective decision making in a participatory mode, generation and exchange of ideas, encouraged debate and dialoge in the area of inclusion and above all, supported the entire process of implementation.

## CHAPTER 11

### A FINAL THOUGHT

#### Many An Innovative Initiative

This document provides a bird's eye view of the varied ways by which NGOs have been involved in the inclusive education programme under SSA. Organizations like Spastic Society of Tamil Nadu in Chennai, Blind People's Association in Gujarat, Society for Visually Handicapped (SVH) and Indian Institute of Cerebral Palsy (IICP) in West Bengal and Seva-in-Action in Karnataka and many more are involved in the programme in a variety of ways. Many more and smaller NGOs are also associated with the programme and are contributing in various capacities.

An important and note-worthy feature of this involvement is the range of activities that the NGOs have undertaken in the States for IE. These activities vary from planning for inclusion as in West Bengal to implementation and monitoring of IE in Tamil Nadu. Other States have engaged NGOs for designing and initiating innovative programmes. These include running residential bridge courses in Andhra Pradesh and Uttar Pradesh and starting home-based education for CWSN in Uttaranchal.

The role of NGOs in the qualitative aspects of inclusion inside the classroom has only made a beginning. Karnataka and Orissa State Mission Societies have prepared special TLM for CWSN to be used in the classroom. Low cost aids have also been developed for CWSN. By and large, all the States have extensively utilized the expertise of NGOs in the areas of assessment camps, teacher training and material development.



*Low Cost Parallel Bar developed by an NGO  
in Tamil Nadu*

NGOs involved in the IE programme have been successful mainly for their ability to:

- Experiment freely with innovative approaches;
- Be flexible in adapting to local situations and responding to local needs;
- Enjoy good rapport with the community and can render micro-assistance to CWSN and their parents as they can identify those who are most in need and tailor assistance to their needs;
- To communicate at all levels, from the grassroot to the state/district level functionaries;
- Reach poor communities and remote areas with few basic resources or little infrastructure, and where government services are limited;
- Promote local participation in designing and implementing programmes by strengthening organizational capability;
- Operate by using appropriate technologies and streamlined services; and
- Identify local needs, build upon existing resources, and develop models.

Although the NGOs involved in this programme have played a major role in responding to the needs of CWSN, yet there still remain areas where they need to play a more pro-active role. These include providing quality inclusion to CWSN inside the classroom through a richer resource support base. Further, the overall impact of IE on the learning achievement and level of inclusion achieved by CWSN should also be evaluated by the NGOs. Research studies, periodic monitoring and evaluation of IE programme are other specialized areas where the expertise of the NGOs might have to be drawn upon.

### **Unto the Final Goal**

The flexibility offered by SSA does provide sufficient space for innovative designs and management practices. This can be further optimized if the GO–NGO alliance in achieving full inclusion is further strengthened, so that each and every child with a special need in the remotest corners is really INCLUDED. Shouldn't this be the ultimate goal?

*To be a part and not stand apart  
To belong and not to be isolated  
To be accepted and not accommodated  
To have opportunities and not favours  
Is to be really included.*



*The Spirit of Inclusion Continues*

# **ANNEXES**

## MEMORANDUM OF UNDERSTANDING VOLUNTARY AGENCY AND ANDHRA PRADESH SSA SOCIETY

### 1. Background

In order to protect the rights of the children and to give every child a place in school, one of the main strategies adopted for bringing out-of-school SEN in general, and child labour in particular, is Bridge Courses (Residential) through active participation of local community.

The Government of Andhra Pradesh has set goals to achieve the Universalisation of Elementary Education by 2005. The AIE aims at mainstreaming all out-of-school SEN, street children, deprived children in urban slums, bonded child labourers, children of sex workers, girls of the minority community, girls involved in domestic chores or sibling care, children involved in cattle grazing etc., through bridge courses into regular schools and achieve Universalization of Elementary Education by 2005.

The experience of programmes like Lok Jumbish and DPEP and various schemes implemented through NGOs across State (where flexible strategies of Alternative Schooling have been implemented in the past few years) have shown that programmes for out-of-school children could be implemented with considerable community participation and reasonable quality.

Hence, the Government has decided to involve Voluntary Agencies (hereafter called as VA) in implementing Alternative strategies for SEN to achieve UEE. Thus, District Level Committee for EGS & AIE (District Committee) wishes to enter into MOU with \_\_\_\_\_ in \_\_\_\_\_ district to implement Bridge Courses in the approved mandals to achieve UEE.

### 2. Objectives

- The major objective of the voluntary agency is to achieve SSA objectives by active involvement of village community through SEC / PTA as stated below:
- To admit the SEN to Residential Bridge Course Centres.
- To ensure regular participation and completion of elementary level of education with satisfactory levels of learning.

### 3. Tasks and Non-Negotiables

The following are the specific tasks to be performed by the VA:

The 5-16 years out of school SEN Children should be covered. The main focus should be on bringing SEN to Bridge Course Centres.



The main thrust is on mainstreaming the children from Bridge Course Centres. All the SEN children who are enrolled in Bridge Course Centres should be mainstreamed into regular formal schools during a period of 6-10 months only or for a period specifically prescribed by the SPO/Government under SSA norms.

Community involvement will be central to the implementation of any of the Alternative Education strategies. The involvement of community would be operationalised through Parents' Groups i.e., School Committees, Panchayat Committees, PTA and Mothers' Associations.

All RBCs should follow the same timings of bridge centres for SEN children.

The RBC centre should be run in the allotted area.

The selection of special educators/junior teachers for Bridge Course Centres should be made by the respective NGO. Preference should be given to women in case of selection of special educators/junior teachers.

Timely and regular payment of honorarium to the special educators/junior teachers should be ensured. The honorarium should be paid as per SPO/SSA norms.

The books, other teaching-learning materials and equipment for the centres shall be decided by Education Department, and the same should be provided prior to the starting of the centre.

Teacher Pupil Ratio is 1:10 as prescribed by the SPO/SSA norm.

The training programme for special educators/junior teachers shall be organized by Education Department. The period of training shall be decided by Education Department.

Suitable accommodation, drinking water facility, toilet facility etc. should be provided for the children of Bridge Course Centres.

Fortnightly/Monthly academic review and planning meetings of the special educators/staff should be held. The teaching-learning materials should be adopted according to the academic levels of the learners to tackle the diversified needs of the children for this Bridge Course. Books shall be provided in centres for children and teachers.

Mainstreaming is an important component in the programme. The VA should furnish the details of children mainstreamed (name-wise list with the name of the formal school and hostel where admitted).

The testing and certification at appropriate time and levels shall be taken up by the State for smooth running of RBCs.

Close linkage between alternative and formal systems should be maintained at all levels. The headmasters of the local schools shall supervise the RBC from which children are to be admitted in the same formal school / nearby schools.

Coordination between VA and Mandal / District Project Authorities should be maintained.

An intensive Monitoring System should be established through the involvement of Resource Groups, DIETs, SCERT and some good voluntary agencies at mandal, district and state levels. Regular visits to bridge course centres, review meetings with VAs and District Level Committees and Management Information System (MIS) should be undertaken. Child profiles with photos should be maintained.



The overall monitoring i.e., both placement of inputs as per the financial break-up and processes output shall be closely monitored from time to time. The VA should ensure above things.

Qualitative and quantitative indicators should be worked out for effective monitoring of the scheme. The most important indicator of effective functioning of the bridge course centre is the progression of learners to higher grades within appropriate time-frames.

Simple and continuous assessment procedures should be followed to ensure smooth transition of children into formal schools in an appropriate class according to their age and academic level.

Evaluation of Bridge Course Centres shall be done by: (i) State Society; (ii) Central Government; and also by External Agency.

#### **4. Schedule for Completion of Tasks**

The Time Schedule for implementing the programme is the period as prescribed by the Government.

The NGO has to run SEN children RBC with in the period as prescribed by the Govt.

The NGO has to run the SEN children RBC with the budget approved by the SPO. The advances released to the VAs will be adjusted from time-to-time conforming to the norms laid out by SPO.

The NGO has to run the RBCs for moderate and severely disabled children in each category and encourage inclusive approach for partially affected children.

6-14 disabled children who required special education should be covered in the given geographical area i.e. entire block though RBC or a particular mandal.

#### **5. Final Outputs**

The final outputs that will be required of VA are as follows:

Achievement of Objectives in para – 2 through the cooperation of the community organized for the purpose i.e., mainstreaming the targeted “out-of-school children” into formal schools.

#### **6. Monitoring and Evaluation of VA’s Work**

Monitoring and evaluation of the VA’s work will be done by the District and State Societies, along with necessary reviews at district and state levels.

In order to ensure the objectives of the AIE scheme, time-to-time evaluation should be undertaken in respect of placement of inputs, processes and finances, through visits and supervisions by district and state level Societies. If any lapses are found, at any point of time, during the implementation of the scheme, with regard to placement of inputs, processes and finances, suitable instructions shall be issued to the VA to rectify the situation.

#### **7. Release of Funds**

The grants to the VA for running the centres would be released in three installment i.e., 40:40:20.

The first installment of Grant would be released after approval of the project and receipt of the Intimation from the VA regarding commencement of the Project to facilitate setting up of the centres.

The VA shall submit the list of children i.e., out-of-school SEN children in the age group of 10-14 years to the State Project Office, duly certified by concerned Chairperson of School Education Committee, Mandal Education Officer and Additional Project Coordinator, SSA within 15 days, after receipt of Grants to avoid unnecessary duplication and strict follow-up of coverage.

The next installments of Grant would be released on production of the following documents.

- (1) The VA has to provide the following documents.
  - a. The audited accounts which should consist of
    - i. Utilization Certificate
    - ii. Balance Sheet, progress report
    - iii. Receipt and payment statement and
    - iv. Income and expenditure statement along with original Vouchers as well as Auditor's Report.
- (2) Written request for release of Grants, inter-alia intimating that 75% or more of the Grant already released have been spent.

## 9. Termination of MOU

## 8. Target for Execution

| S No. | Name of the Mandal | Total No. of Children |
|-------|--------------------|-----------------------|
|       |                    |                       |

This MOU is automatically terminated on completion of the Project Period.

The District Committee can terminate the MOU earlier, if the performance of the VA in achieving benchmarks and performance indicators is not satisfactory and the Society can recover the amount to that extent from VA.

We solemnly affirm our commitment towards inclusion of all forms of disabled children in the area / mandals assigned to the organizations and work towards achieving Universalisation of Elementary Education and enable the State to become barrier free.

Signature

Name

(Block Letter)

President / Secretary / Director

Chairman

of Voluntary Agency

District Level Committee / Society

Stamp



## MEMORANDUM OF UNDERSTANDING

### FOR PARTNER NGOS OF SSA ASSAM FOR IE PROGRAMME

Annex- II

Name of the NGO :

District :

Reg. No

Name of Block/s:

#### SECTIONS:

- |                |                            |
|----------------|----------------------------|
| 1. Section I   | Introduction               |
| 2. Section II  | Tasks In IE                |
| 3. Section III | General Agreement points.  |
|                | Review and Monitoring      |
|                | Roles and responsibilities |
|                | Budget Guideline           |

#### Section I

##### Background/Rationale

Assam along with rest of the country has a very large number of disabled children; most of them are out of school. Universalisation of Elementary Education cannot be achieved unless 5-10 per cent children who have physical or intellectual impairments are brought to school. Mild to moderate disabled children are to be integrated in general stream of formal education.

Axom Sarba Siksha Abhijan Mission (ASSAM) is an effort to universalize elementary education by community ownership of the school system. It stresses on bridging social, regional and gender gaps with the active participation of the community in the management of the schools. The programme puts a special focus on the groups with special needs. One such category is disabled children in and out of school. A diversity of approaches is required to tackle the educational scenario due to the distinct problems present. On account of separate administrative arrangements of schools, there is also a need to coordinate and converge interventions across Departments and local bodies responsible for elementary education for disabled children. This calls for a provision of planning in partnership with civil society groups, which are already existing. Thus, the State has taken up initiatives to cover the children with special needs (CWSN) with a special focus, in collaboration with the local NGOs.

##### Present Status

Survey i.e. house-to-house survey, in different districts to identify CWSN has been conducted in SSA districts, which is not complete related to disabled children. Due to this, the category of disability is missing.



## Structures

Every school has a school management committee (SMC). Every village has a Village Education Committee (VEC). At the District level, District Programme Officer (DPO) is placed to especially monitor activities on IE programme in the district. At the District level, a District Core Committee (DCC) is constituted, which is the apex planning body for the IE interventions at the District level. Both the NGO partner and the DPO, IE are members of this DCC. At the state level, an IE unit will coordinate the interventions from the State.

## Section II

The NGO might be asked to undertake any other activity pertaining to CWSN as required by the mission office from time-to-time. Special financial norms would be issued for undertaking any such activity.

## Section III

### Agreement

This agreement is made at Mission Director's Office, Kahilipara, Guwahati-19 on this .....the day of ..... 2003, between Axom Sarba Siksha Abhijan Mission Assam (a Society registered under the Societies Registration Act, 1860 and having its Head Office at Kahilipara, Guwahati-19) represented by its Mission Director (hereinafter referred to as the First Party).

AND .....having its registered office at..... (Hereinafter referred to as the Second Party) and whereas the parties of the Agreement are desirous of recording in following terms and conditions:-

Now this agreement witnessed and it is hereby agreed by and between the parties as follows (Terms & Conditions)

1. That on and since the execution of this agreement the Second Party shall act as Block NGO under the First Party from ..... 2003 and this agreement shall automatically lapse on ..... 2004 afternoon. However, the contract would be continued subject to performance and a negotiated plan of action for a further period of six months.
2. The Second Party shall be responsible for Universalisation of Elementary Education of all educable CWSN in the Block..... of the district .....
3. The second party should implement the programme with the assistance of their Resource Teachers and volunteers.
4. The First Party may terminate the agreement at any time as follows –
  - If it finds that the services rendered by the Second Party are unsatisfactory or if there is any breach of the terms of the agreement. The decision of the State Level Committee / District LEVEL Committee for NGOs as to whether the services rendered by SECOND Party in terms of this agreement are satisfactory or whether there has been any breach of the terms of the agreement shall be final and binding on the second party and shall not be subject to challenge. This will be based on the assessment of progress as discussed in the review of the following committees:

- State Level Committee for SMO-Mission Director, Executive Director, State Programme Officer, IE, State Programme Officer, Planning, 1 SRG member.
  - District Level Committee for all District-Deputy Commissioner, District Mission Coordinator/ District Project Coordinator, District Programme Officer, IE, 1 DRG member.
  - The First Party may terminate this agreement by giving one month's notice to Second Party in writing.
5. As and when required SSA would arrange for training/workshops/orientation programmes for NGOs/workers. Second party would be required to participate in these.
  6. Specific targets would be provided for the various periods in consultation with the NGOs. If the performance on these milestones are not satisfactory, SSA would review the contractual agreement.
  7. SSA would also monitor field level activities as per agreed methodology.
  8. On pedagogy issues, the material, training modules etc if developed by State/District will have to be used by the NGOs in different activities.
  9. The second party will abide by the suggestions/conditions/changes as intimated from time-to-time within programme framework of Mission Office in view of the fact that the development of a holistic plan for the IE. However, it is expected that with detailed fieldwork, a comprehensive action plan would be developed by the NGOs in coordination with the district/State Mission Office which will be agreed upon.

**NGO shall complete the assignment in one year. Main activities are to be completed according to following schedule**

|    |  |  |
|----|--|--|
| 1. | Selection of staff 2/3 Resource Teachers for block, 1 volunteer per GP where interventions will be initiated | 15 days                                |
| 2. | Orientation of above staff   | 10 days                                |
| 3. | Survey for Identification of Disabled children   | 01 month                               |
| 4. | Functional assessment & Enrollment of disabled children  | 02 months                              |
| 5. | Counselling of Parents / sensitization of community / various education committees.                          | 01 month                               |
| 6. | Listing of Resource materials and networking with other organisations to provide aids and appliances.        | 02 months                              |
| 7. | Training of Primary school teachers of selected area.  | 03 months                              |
| 8. | Ongoing regular support  | As a continuous process in every month |

### **Final outputs (reports etc) that will be required of the consultant**

1. To provide numbers & list of target group of children with disabilities of different types after survey and functional assessment in format prescribed by SMO.
2. To provide resource support to the schools and teachers.
3. To maintain records and case studies of children with disabilities.
4. To send monthly and quarterly reports in prescribed format given by SMO.
5. To send regular tour programme of Resource teacher to the DMO. The organization will establish an office in the proposed district and block.

### **Review and Monitoring**

#### **Composition of Review Committee and Review Procedure to Monitor Consultant's Work**

##### **District Level**

DMC/ADMC with support from District Core group members (excluding NGO member) of concerning districts will be responsible to monitor and review the IE programme at district level. To monitor and review of the consultant's work, the following actions will be initiated:

- Regular field visit and submission of visit report to the SMO and consultants. The field visit covers scrutiny of records, observation of field works and interaction with workers and beneficiaries.
- Analysis of consultant's periodical report and submission feedback/suggestion for follow-up action.
- Holding quarterly review meeting and submission report to the SMO and consultants.

##### **At State level, review committee will consist of –**

(a) Mission Director; (b) State consultant, IE; (C) Master trainer of an Institution; and (d) State Programme Officer, Planning .

##### **State level review committee will look into following specific matters**

- Analysis of field reports received from the district.
- Arrangement of field visit .
- Providing suggestion for any mid-course correction and further improvement.

Besides the regular monitoring of the programme by the State and District officials, a team selected by the SMO may be formed to assess the achievement levels / progress of the disabled children periodically. The report of the team may be placed for review and follow up action.

**The State and district review team may visit programme area / programme office of the consultant any time, without prior notice, and will be furnished with any records requested for scrutiny.**

- The bi-monthly review meeting at block level would be occasions to share the work done, preparing action plan for future and highlight key issue, which need to be followed at the administrative level/ policy level.
- **Reporting:** On a bi-monthly basis, **NGO** would prepare an activity report, which it would share with the district office. A copy of the same would be sent to the state office. DMO would also send the minutes of the review meetings to the State Office for information of the State Office.

## Monitoring and Evaluation

### Evaluation Report (Quarterly)

NGO would develop their monitoring formats, which they would use to monitor their implementation. These would be primarily of two kinds:

- (a) Pedagogical issues; and
- (b) Management issues

SSA would also develop their own monitoring formats to track the implementation. These would be shared with NGO before use.

1. The academic group of education department viz DIET/BRC/CRC would be authorized to visit the project area with a prior understanding with the NGO to review academic progress of children.
2. Quarterly reports on the progress of children in schools, done with the formal schools to mainstream children using the monitoring formats should be prepared and submitted to the District Office.
3. Report on children enrolled with age, children left out and follow up action for them should be submitted at the end of each 3months
4. Follow up report on regular intervals for the mainstreamed children.

### Services and Facilities to be provided by the Client (SSA)

SSA will provide

- Training modules for Project staff, RT's, volunteers and primary school teachers.
- Initial capacity building, especially for orientation on Integrated Education for the Disabled Children.
- Orientation module for awareness and sensitization programmes.
- Assessment formats for identified children.
- Data reverification formats.
- Operational guidelines.



## **Monitoring and Evaluation of Progress (apart from NGO's own monitoring and evaluation)**

### **Responsibility of District Mission Office**

- Overall supervision and monitoring for SSA.
- Short-term status update on the programme.
- Key unit for coordination between NGO, District Mission Office, State Office.

### **NGO's Responsibility**

- Implementation of programme.
- Internal monitoring and evaluation.
- Activation of various peoples committee's for the programme.
- Suggestion to SSA for future strategies.
- Mobilizing additional activities.

### **School Management Committee's Responsibility**

- Monitoring of children's progress in their individual schools.
- Support to the NGO for working with the formal schools, particularly in sensitizing school authorities and support to the newly enrolled children and children mainstreamed after bridge courses.

### **Financial Allocations**

- The work will be initially assigned for 1 year and likely to be terminated or extended depending upon the progress.
- Pay and allowances to the resource teachers are to be on a consolidated basis with a minimum of Rs. 4000/- pm, besides actual traveling allowances. The specially qualified teachers are to be trained in educating other disabled children also and are liable to visit the schools in the area in assisting the general teachers.
- The annual cost of running the Integrated Education Programme in the area specified will be limited to approved activities as per AWP& B planned by the agency. \*
- The fund release will be in 3 installments as below:
- First installment: On ..... as advance of 40% of the Total allocation.
- Second installment: On ..... as advance 40% of the Total allocation on submission of 2<sup>nd</sup> quarterly report.
- Third installment: Remaining 20% of the Total allocation. The Voucher and other connected records are to be produced to the audit wing before settling the final payment.

\*The 2<sup>nd</sup> party on receipt of each installment will maintain proper accounts of utilization of the fund as per approved budget. The books of record will be kept ready for inspection by Mission Official as and when necessary. The next installment will be released on performance and receipt of Utilisation Certificate (UC) in details. The UC will be supported with audit report. The installments will be stopped if UC is found made beyond approved programme and execution of tasks.

I hereby declare that all the terms and conditions laid down are agreeable to me.

In witness whereof the First Party – Mission Director or person authorized on his behalf and Second Party put their respective hands and seals unto this agreement at..... on the date and day aforementioned.....

(Second Party)

(First Party)  
Mission Director or his  
authorized person

Witness:

1.....

2.....

## GUIDELINE FOR SELECTION OF NGO FOR IE FOR DMC'S

### 1. Background

Assam along with rest of the country has a very large number of disabled children and most of them are out of school. Universalisation of Elementary Education can not be achieved unless 5-10 percent children who have physical or intellectual impairments are brought to school. Mild to moderate disabled children are to be integrated in general stream of formal education. To provide technical support NGO will be identified to work as District / Block Resource Organisation.

### 2. Scope of Work

- Community mobilisation and early detection.
- In-service Teachers' Training.
- Resource Support.
- Educational Aids and Appliances.

### 3. Objectives

- To integrate the children with mild to moderate disabilities to formal Govt. schools.
- To ensure equal opportunities to the children with disability of 6-14 age group.
- To create an enabling environment in school.
- Parental guidance to generate Community Support.
- To support manpower development activities and train required personnel such as teachers, VEC members and parents.
- To set up resource centres at block and district level.
- To ensure that children with disabilities remain and complete the primary education.

### 4. Specific Tasks

- Enumerate and identification of children with disability in and out of school. (reverification of HHS data)
- Functional assessment of each disability.
- To study and develop the present scenario of facilities available for the education of the disabled in the selected intervention area.
- Target group of children with disability of different types to be taken into consideration for IED to devise special programmes and interactions for their enrolment and continued retention in schools.
- Placement of 3 Resource Teachers of different categories with minimum 1 yr. Diploma in Special Education at Block level.
- Orientation of resource teachers on integrated education and type of resource support.

- Training of all general teachers of primary school.
- Awareness and Sensitization of community, village education committee and counselling of parents and peers on detection, identification, early intervention and attitude towards disability.
- Trainee Programmes to these special programmes and General teachers are to be handled by the agency with the help of other resource person, if necessary (Trained DIET faculty, State Resource person etc.).
- Preparation of IEPs (Individualized Education Plans) and case studies.
- To provide resource support to the schools and general teachers through RT.
- Network with the department of Welfare, Health and other related institutions to assess and provide aids and appliances.
- To co-ordinate the activities of the departments like Social Welfare, Health, Rehabilitation and other Voluntary agencies working in the field.
- Placement of children in general schools.
- Pre-integrating skill to children with moderate disability with the help of resource teacher and anganwadi workers at ECCE/AS centres.
- In case of children with severe disability, the NGO may render necessary assistance (referral, access to special school and other services, etc.)

## 5. Geographical Unit of Work

- Present work will be confined to 14-non DPEP (SSA) districts viz. Cachar, Dhemaji, Dibrugarh, Golaghat, Hailakandi, Jorhat, Kamrup, Karimganj, Lakhimpur, Nagaon, Nalbari, NC Hills, Sibsagar, Tinsukia.
- Block with GP's which has more than 10 children with disabilities already identified by the district core team will be the initial intervention area.

## 6. Eligible Organisation

Registration under the Societies Registration Act 1860 or any relevant Act of the State / Union territory of minimum 3 years.

Registration under the section 52 of Persons with Disability (Equal opportunities. Protection of Rights and Full Participation) Act 1995(optional).

Scope/source of placement of 3 resource teachers with minimum 1 Yr. Diploma in Special Education.

Work experience of at least 3 (three) years in the field of educational and rehabilitation of children / persons with disabilities.

The Organisation has the financial capacity to run a programme (Rupees Fifty Thousand) on its own for a period of six months.



## 7. Procedure and Submission of Application

The application has to be submitted on prescribed Proforma along with necessary enclosure to the concerned District Mission Office. Initial scrutiny of and shortlisting will be done by a district level committee based on defined criteria. Final sanction will be accorded on the recommendation of the State Appraisal Committee.

No claim / query will be entertained on the projects which are not sanctioned. The concerned authority will be fully authorized to sanction / reject any project without assigning any reason.

## 8. Extent of Support

The quantum of support may be determined on the scope and merits of the proposal, which could be up to 90% of the total cost of project.

## 9. Schedule for Completion of Tasks

NGO shall complete the assignment in one year. Main activities are to be completed according to following schedule

|  |  |
|--|--|
| Selection of staff- 1BRP per block, 3 Resource Teachers per block, 1 worker per GP where interventions will be initiated | 15 days                                |
| Orientation of above staff   | 07 days                                |
| Survey for Identification of Disabled children   | 01 month                               |
| Functional assessment & Enrollment of disabled children  | 02 months                              |
| Counselling of Parents / sensitization of community / various education committees                                       | 01 month                               |
| Listing of Resource materials and networking with other organisations to provide aids and appliances.                    | 02 months                              |
| Training of Primary school teachers of selected area   | 03 months                              |
| Ongoing regular support  | As a continuous process in every month |
| Evaluation   | On every third month (quarterly)       |

## 10. Services and Facilities to be provided by the Client (SMO)

SMO will provide

- Training module for master trainers and primary school teachers.
- Orientation module for awareness and sensitization programmes.
- Assessment formats for identified children.
- Data Reverification formats.
- Operational guidelines.

## 11. Final Outputs (reports etc) that will be required of the Consultant

- To provide numbers & list of target group of children with disabilities of different type after survey and functional assessment in format prescribed by SMO.
- To provide resource support to the schools and teachers.
- To maintain records and case studies of children with disabilities.
- To send monthly and quarterly reports in prescribed format given by SMO.
- To send regular tour programme of Resource teacher to the DMO. The organization will establish an office in the proposed district and block.

## 12. Composition of Review Committee and Review Procedure to Monitor Consultant's Work

### District Level

1. DMC/ADMC with support from District Core group members (excluding NGO member) of concerning districts will be responsible to monitor and review the IE programme at district level.

To monitor and review of the consultants work, the following actions will be initiated:

- Regular field visit and submission of visit report to the SMO and consultants. The field visit covers - scrutiny of records, observation of field works and interaction with workers and beneficiaries.
  - Analysis of consultant's periodical report and submission feedback/suggestion for follow-up action.
  - Holding quarterly review meeting and submission report to the SMO and consultants.
2. At State level, review committee will consist of –
    - a) Mission Director
    - b) State consultant, IE
    - c) Master trainer of an Institution
    - d) State Programme Officer, Supervision & Monitoring

State level review committee will look into following specific matters:

- Analysis of field reports received from the district
- Arrangement of field visit
- Providing suggestion for any mid-course correction and further improvement.

Besides the regular monitoring of the programme by the State and District officials, a team selected by the SMO may be formed to assess the achievement levels / progress of the disabled children periodically. The report of the team may be placed for review and follow up action.

**The State and district review team may visit programme area / programme office of the consultant any time, without prior notice, and will be furnished with any records requested for scrutiny.**

### **13. Financial Allocations**

- The work will be initially assigned for 1 year and is likely to be terminated or extended depending upon the progress.
- Pay and allowances to the resource teachers are to be on a consolidated basis with a minimum of Rs. 4000/- pm, besides actual traveling allowances. The specially qualified teachers are to be trained in educating other disabled children also and are liable to visit the schools in the area in assisting the general teachers.
- The annual cost of running the integrated Education Programme in the area specified will be limited to activities as per AWP& B planned by the agency.
- Account should be rendered for the amount released before the further release of installments. Accounts should be maintained properly.
- The Voucher and other connected records are to be produced for audit by the audit wing before settling the final payment.

## APPLICATION FORMAT

1. Organization
  - (i) Name (Office)
  - (ii) Address
  - (iii) Phone / Fax
2. Societies Registration Act No. & Date (Please attach a attested Photocopy)
3. Whether organization is registered under the section 52 of Person with Disability (Equal Opportunities, Protection of Right and Full Participation) Act. 1995. If yes, Please give Registration No. and validity date. (Pl. attach photocopy)
4. FCRA NO, if any (Pl. attach photocopy):
5. Please describe the administrative structure of the Organisation with profile of Board members:

|  |  |  |
|--|--|--|
|  |  |  |
|  |  |  |

6. Details of area of work done and specialisation of the Organisation
7. Does the organization have any branch offices? Give address, if any
8. Existing Monitoring System of organization.
9. How does the organization have the financial capacity to run a programme (Rs. 50 Thousand) on its own for a period of six months?
10. How does the organization have the scope/ source /capacity for placement of 3 resource teachers with minimum 1 year Diploma in Special Education?
11. Whether the organization is receiving any grant from some other source (If yes, please give year)

| Source | Activities | Annual Amount |
|--------|------------|---------------|
|        |            |               |

12. Details of the Programmes carried so far by the organization:
13. Write briefly about the experience in the field of Disability:
14. Is the organization a member / partner of any issue based recognized network? Yes / No. If yes, give details.



15. List of documents to be attached:

- (i) A copy of Article of Association containing the detail of management committee / office bearers of organization and Area of Activity.
- (ii) A copy of the annual report for the two last years.
- (iii) Details of skilled workers and staff, procedure of recruitment already employed.
- (iv) Detail of target beneficiaries.
- (v) Resource material developed by organization (If any, please attach copy)
- (vi) Audited statement of Accounts duly certified by C.A. for the last three years.

Date:

Yours faithfully

Signature of the Authorised Signatory

Designation:

Address:

**Note: Please use extra sheet for responses, if required. The above is the format to be followed.**

## PROPOSAL FOR INTEGRATED EDUCATION

### 1. Need of Project

### 2. Object of Project

### 3. Area of Work

- i. District.
- ii. Number and name of work.
- iii. Number of villages.
- iv. Number of proposed beneficiary and age group.
- v. Duration of project.
  - a. Date of commencement.
  - b. Date of ending of project.

### 4. A Proposed Work/Activities

- i. Action plans for identification functional assessment and integration of children with disability of 6-11 age group.
- ii. Proposed work/ specific methods and activities for community participation and sensitization.
- iii. Proposed work/ activities for parent's participation.

### 4. B Training Strategy

- i. Total number of teachers of government primary schools in the block.
- ii. Venue of training (Venue will not be away from the block).
- iii. Duration of training.
- iv. Training module to be used.
- v. Training schedule (batch wise).
- vi. Number of primary teachers to be covered in one batch.
- vii. Number of primary teachers who will provide training.
- viii. Training of master trainers duration/ module to be used/ venue.
- ix. Regular (once in two month at least.)
- x. Capacity building of CRC and BRC personnel for integrated education and follow up.

**Note:** Conduct of teachers' training programme will be in co-ordination with expert Master Trainers and coordinator of integrated education of the district concerned.

## 5. Aids and Appliances

- i. To indicate the methods by which the physical/ diagnostic assessment of children with disability through competent medical assistance will be done.
- ii. The method of maintaining records of such children and their medical recommendation.
- iii. The name of the institution from where necessary aids and appliances will be supplied by convergence.
  - a. For orthopaedically disabled children.
  - b. For visually, hearing and mentally disabled children.

## 6. Action Plan for Early Detection of Disabilities through ICDS Workers and Teachers

## 7. Monitoring System

## 8. Follow up

1. Any other.

- Note:**
1. During first year of the project, only two blocks of one district are required to be covered.
  2. Extension of the approved project will be considered only after satisfactory performance of first year.

## BUDGET

### Administrative Cost

1. Salaries
  - a. Project Co- Ordinator
  - b. Staff
1. Accountant
2. MIS Assistant
3. Helper

### Programme Costs

1. (a) Identification (if required by NGO or use micro planning data).
  - (b) Medical assessment and record maintenance.
2. (I) Honoraria of resource personnel (not more than 4 for block for mental retardation, visual, hearing and orthopedic).
  - (II) Master trainers (as per EFA Norms)
3. Training of Primary teachers (as per EFA Norms).
4. Environment building with the community, parents and panchayat (VEC).
5. Resource material development and dissemination.
6. Two monthly meetings of CRC with teachers and development of classroom / lesson based educational plans and follow up.
7. Feed back systems, monitoring and evaluation.
8. Follow up in classroom, CRC as well as community, parents, teachers and resource persons.
9. Traveling allowances.
10. Stationery and postage.
11. Contingency.

### Activity-Wise Time Schedule

| S. No | Activity  | Time Frame |
|-------|---|------------|
| 1.    | Selection of staff  |            |
| 2.    | Environment Building  |            |
| 3.    | Training<br>I. Master Trainers<br>II. All primary school teachers of Government School  |            |
| 4.    | Identification of children with disabilities.   |            |
|       | I. Survey Compilation<br>II. Functional assessment<br>III. Assessment of necessary aids and appliances<br>IV. Distribution of aids and appliances with convergence.<br>V. Integration of children with special needs<br>VI. Any other |            |
| 5     | Monitoring system   |            |
| 6     | Follow up   |            |
| 7     | Evaluation  |            |

## ACTION PLAN OF INTEGRATION OF DISABLED CHILDREN

1. Name of Block
2. Name of GP
3. Name of district
4. Total population of the Block
5. Population 6-11 year group children
6. No. of children

| S. No. | Months | No. of Out-of-School Children with Disabilities to be enrolled in Formal School | Progressive Number of Disabled Children Enrolled | Any Other |
|--------|--------|---|--|-----------|
| 1      | 2      | 3   | 4  | 5         |
| 1.     |        |   |  |           |
| 2.     |        |   |  |           |
| 3.     |        |   |  |           |
| 4.     |        |   |  |           |
| 5.     |        |   |  |           |
| 6.     |        |   |  |           |
| 7.     |        |   |  |           |
| 8.     |        |   |  |           |
| 9.     |        |   |  |           |
| 10.    |        |   |  |           |
| 11.    |        |   |  |           |

**Note:**

- i. Only mild to moderate non-school going disabled children are required to be integrated.
- ii. Severe and profound disabled children are required to be identified and referred to other rehabilitation and training centres.

## SAMPLE BUDGET-PROPOSAL FOR THE IE ACTIVITIES FOR 2003-2004

**District** : **Kamrup**  
**Name & Address of N.G.O** : **ASHADEEP,**  
 Islampur Road, Gandhi Basti,  
 Guwahati – 781003, Assam, India, Ph-0361-666794  
 e-mail: ashadeep@sancharnet.in

**Name of the block** : **Dimoria & Rani.**

| S. No. | Particulars  | Budget Head of A/C & Name of Activity  | No. of Participants/ Volunteer | Financial Norms/ Cost  | Financial Outlay                 |
|--------|--|--|--------------------------------|--|----------------------------------|
| 1      | Administrative cost / Salaries<br>(a) Project Coordinator<br>(b) Accountant<br>(c) Assistant               | Office Management  | 1<br>1<br>1                    | 2000/- x 12 Months<br>1000/- x 12 Months<br>1000/- x 12 Months             | 24,000/-<br>12,000/-<br>12,000/- |
| 2      | Honorarium for volunteers  | (a) Training<br>(b) Identification etc   | 20                             | 1000/- per head x 12 months x 20   | 2,40,000/-                       |
| 3      | Remuneration for (DSE) Resource Teacher<br>Master Trainers   | (a) Teacher training<br>(b) Identification etc<br><br>15 days  | 3                              | 4000/- per head x 12 Months x 3<br><br>300/- per day                       | 1,44,000/-<br><br>4,500/-        |
| 4      | - Induction training<br>- Identification & medical assessment camps<br>- Record maintenance and case study | 10 days residential training for volunteers & RTs<br>Camp, assessment and distribution of aids & appliances<br>Record maintenance and case study | 25<br>659<br>659               | 50/-per head x 10 days x 25<br>150/- per head x 659<br>20/- per head x 659 | 12,500/-<br>98,850/-<br>13,180/- |

| S. No. | Particulars   | Budget Head of A/C & Name of Activity   | No. of Participants/ Volunteer | Financial Norms/ Cost              | Financial Outlay |
|--------|---|---|--------------------------------|------------------------------------|------------------|
| 5      | Training of primary teacher (block level)             | Training 35 no. per batch (5 days)      | 100                            | 50/-per x 5 days<br>x 100          | 25,000/-         |
| 6      | Awareness of community, parents and panchayat members | Meeting per GP<br>1 meeting             | 100                            | 200- per meeting<br>x 20           | 4,000/-          |
| 7      | One review meeting (block level)                      | Meeting and follow up (1 day per block) | 24                             | 25/- per head<br>x 6 meetings x 24 | 3,600/-          |
|        | Feedback, monitoring and evaluation                   | Contingency, Audit fee, reporting etc.  | 25                             | 700/- per head L/S                 | 17,500/-         |
|        | (a) Travelling allowance (above 8 K.M.)               |   |                                | x 25                               | 5,000/-          |
|        | (b) Stationery and postage                            |   |                                | L/S                                | 5,000/-          |
|        | (c) Miscellaneous                                     |   |                                | L/S                                |                  |
|        | <b>TOTAL</b>  |   |                                | <b>6,21,130/-</b>                  |                  |



## Annex-III

### Case History and Assessment Format for Individualized Educational Plan

General Information \_\_\_\_\_ Date \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_ Sex \_\_\_\_\_

Address \_\_\_\_\_ Village \_\_\_\_\_ Gram Panchayat \_\_\_\_\_

Block \_\_\_\_\_ Dist \_\_\_\_\_

Pin Code \_\_\_\_\_ Tel. No. (if any) \_\_\_\_\_

Father's Name \_\_\_\_\_

Occupation \_\_\_\_\_

Mother's Name \_\_\_\_\_

Occupation \_\_\_\_\_ Income \_\_\_\_\_

Total Income of the Family per month \_\_\_\_\_

No. of family members \_\_\_\_\_

Adult: Male \_\_\_\_\_ Female \_\_\_\_\_ Total \_\_\_\_\_

Child: Male \_\_\_\_\_ Female \_\_\_\_\_ Total \_\_\_\_\_

Total \_\_\_\_\_

Educational background of the family (No. of \_\_\_\_\_)

Illiterate \_\_\_\_\_ Literate \_\_\_\_\_ School going \_\_\_\_\_

School certificate holder \_\_\_\_\_ Graduate \_\_\_\_\_ P.G. \_\_\_\_\_

Description of the problems of the child (Impairment/additional/associated problems as reported by the parents)

---



---



---



---

History (specify, if any thing is reported by the parents)

---



---



---

**Type of Intervention Required**  
(for Children with Hearing Impairment)

Name \_\_\_\_\_ Age \_\_\_\_\_ Sex \_\_\_\_\_

Medical intervention \_\_\_\_\_

Intervention in relation to facilities (HID Card/ Others) \_\_\_\_\_

Intervention required for Education/ Training & Therapy \_\_\_\_\_

Language & Communication \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Mathematical Concept

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Environmental Concept

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Prevocational

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Independence and Self Confidence

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Recreational

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Therapeutic Intervention

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Intervention required regarding educational and social inclusion \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Assessed by \_\_\_\_\_

**Assessment Report**  
(for Children with Mental Handicap)

Name \_\_\_\_\_ Age \_\_\_\_\_ Sex \_\_\_\_\_

Severity of the problem

Mild  Moderate  Severe  Profound

Additional Handicap (if any multiple problem) \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Associate behavioural problem/speech problem etc. \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Presence of Epilepsy

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Physical health and mental health (please specify, if there is any problem) \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Recommendation

\_\_\_\_\_

Treatment

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Therapy

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Present State of Performance**  
(of Children with Mental Handicap)

Name \_\_\_\_\_ Age \_\_\_\_\_ Sex \_\_\_\_\_

Personal Skill  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Social Skill  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Academic Skill  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Occupational Skill  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Recreational Skill  
\_\_\_\_\_  
\_\_\_\_\_

Behaviour Therapy  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Speech therapy  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Others, if any  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Assessment Report**  
(of Children with VD/PH/CP)

Name \_\_\_\_\_ Age \_\_\_\_\_ Sex \_\_\_\_\_

Present Conditions \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Recommendation \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Does the child have any additional problem \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Presence of Epilepsy \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Physical health and mental health (if there is any problem, state in details) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Recommendation \_\_\_\_\_  
\_\_\_\_\_

Treatment \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Therapy \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Present State of Performance**  
(of Children with VD/PH/CP)

Name \_\_\_\_\_ Age \_\_\_\_\_ Sex \_\_\_\_\_

Mobility \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Self-Help \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Functional Academic \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Confidence Building \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Independence \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Occupational \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Pre-vocational \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Recreational \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Others (if any) \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

### Current Level of Performance

Name of the resource teacher \_\_\_\_\_

Name of the child \_\_\_\_\_ Age/Sex \_\_\_\_\_

Mode of testing \_\_\_\_\_

Instruments/ materials used for testing

---

---

---

#### 1. Speech and language development

- Verbal/Non-verbal
- Speech clarity
- Use of appropriate language

#### 2. Physical or psychomotor skill

- Perception skill
- Gross motor skill
- Fine motor skill
- Physical activities

#### 3. Self-help skills

- Personal care, health and safety
- Mobility
- Home and family living
- Leisure time (hobbies)

#### 4. Social skills

- Self-concept
- Relation with peers
- Relation with elders
- Social customs

## 5. Academic performance

- Reading readiness
  - General reading skill
  - Functional reading
  - Quantitative concepts
  - General mathematics
  - Mechanics of writing
  - Spelling skills
  - Functional writing skill
  - Teacher's evaluation
- 
- 
- 

## Goals setting and evaluation

Skills aimed at:

Long-term goal:

Short-term goals:

( a )

( b )

( c )

( d )

( e )

( f )

Monthly progress

Date

Signature



## TERMS OF REFERENCE BETWEEN NGOs AND SSA TAMIL NADU

### I. Background

SSA is a programme designed to give quality education before 2010 to all school age children including children with mild and moderate disabilities. Though access to education is available, the goal of Universalization of Elementary Education cannot be achieved without providing quality education to children with mild and moderate disabilities. Hence, special emphasis has been given for 'inclusive education' and special strategies and interventions have been proposed in the plans.

### II. Objectives

1. To develop strategies and programmes for the integrated education of the disabled.
2. To co-ordinate the activities with all other agencies involved in the education of the disabled.
3. To conduct training programme to NGOs, special teachers, teacher educators and teachers.
4. To supply Aids and Appliances according to the special needs of the disabled children.
5. To implement inclusive education in the blocks successfully.

### III. Tasks Assigned

1. Studying and developing the present scenario of facilities available for the education of the disabled in the selected blocks.
2. Appointing three specially qualified teachers (1 VI, 1 HI, 1 MR) per block to impart inclusive education to all categories of differently-abled children.
3. Enumeration of the actual number of children with various disabilities in and out of school in the locality.
4. Preparation and handing over of the names of children with postal address, school in which admitted and other details to DPC in duplicate.
5. Issuing Identity Cards to all types of the disabled children.
6. Devising special programmes and interactions for their enrolment and continued retention in schools.
7. Organising awareness campaigns for the enrolment and retention of the disabled children.
8. Planning and organising medical camps to identify and assess the severity of disabilities; Making arrangements for the supply of aids and appliances from the funds allocated to them or, if necessary, with the assistance of other Departments.
9. Assessing the special needs of such children and provide facilities.

10. Planning and organising training programmes for NGOs, special teachers, teacher educators, teachers and others to build their capacity in educating the disabled children.
11. Co-ordinating the activities with other departments like Social Welfare, Health, Rehabilitation and other Voluntary Agencies working in the field.
12. Assisting the DPCs in carrying out IE programmes under SSA.
13. To supervise and guide school teachers in integrating the disabled children in formal schools.
14. To submit periodical reports and information to the district office as well as to State Head Quarters.
15. The NGO/Implementing Agency to render necessary assistance to admit the children with severe disability in special schools.
16. The implementing agency to seek the co-operation/assistance of other specialised agencies in educating children with various disabilities.
17. The NGO/Implementing Agency to render all technical support to the DPC, BRC and teachers in implementing the IE Programme.

#### IV. Implementation

1. The duration of the contract will be for one year subject to termination or extension depending on the performance of NGO in implementation of IE programme.
2. The appointment and training of NGOs and special teachers in educating children with other disabilities should be completed immediately.
3. The implementing agencies should report every month to the DPC/BRC about the progress in implementation of IE programmes.
4. Monthly reports should be furnished on time about the progress in the achievement of disabled children.
5. The NGO/Implementing Agency should procure necessary stationery and other materials required for the programme by themselves.
6. The SPO will instruct the DPC/BRC to render necessary assistance as required by the NGO/Implementing Agency in executing the IE Programme.
7. For aids and appliances, the agency should maintain a close link with the District Rehabilitation Centre and other agencies for assistance and supply.
8. The co-operation of the Health Department may be secured for the medical examination of the disabled children.
9. The survey details of disabled children in and out of the school should be furnished to DPCs for enrolling them in formal schools.

## V. Monitoring Mechanism

1. Besides the NGO/Implementing Agency, the SSA officials at the State, District and Block level will supervise the implementation of the programme.
2. The SRG will send its nominee to monitor the scheme and to suggest suitable modification for the successful implementation of the programme.
3. At the end of the year, an evaluation study will be undertaken by the State Project Office to assess the impact of the programme.
4. The implementation of the IE Programmes by the NGO/Implementing Agency will be reviewed periodically by the SPD.
5. The Special Teachers will report to both the BRC Supervisors and the NGO/Implementing Agency.
6. Besides regular monitoring of the programme by the State and district officials, a team selected by the SRG may be formed to assess the achievement levels/progress of the disabled children periodically. The report of the team shall be placed in SRG meeting for review and follow-up action.

## VI. Budget Estimate

The budget sanctioned is Rs.1,200 per child per year as per SSA norms. The tentative items of expenditure are given below.

1. Special Teacher's Salary – 3 per block - Rs.3,000 per teacher.
2. Conducting Awareness Camp – one-time lumpsum provision of Rs.5,000.
3. Conducting Assessment Camp – one-time lumpsum provision of Rs.5,000.
4. Supply of Aids & Appliances - lumpsum provision of Rs.30,000 per block.
5. Training to PTA, VEC, Volunteers SHG – 2 days - Rs.30 per day per participant.
6. Training to DPO staff, BRC staff, NGO, Special Teachers & School Teachers – 3 days – Rs.30 per day per participant + one up and down bus fare.
7. Contingency Expenditure - Rs.500 per month per block.
8. Report & Documentation, stationery – Rs. 400 per block.

## VII. Grant Release

The expenditure incurred every month towards admissible items along with the statement of expenditure and the original vouchers should be submitted to the DPC before 7<sup>th</sup> of the succeeding month. DPC will scrutinize the entire report and payment will be made before 15<sup>th</sup> of the same month. It should be ensured that the calendar of activities is strictly adhered to, and progress made in pupil's achievement before the payment is made.

**Implementing Agency**

**District Programme Coordinator**



## TERMS OF REFERENCE WITH NGOS: UTTAR PRADESH

### Background

India has a very large number of children with disability, most of whom are out of school. The main purpose of DPEP is to universalize primary education. This cannot be achieved unless 5-10% children who have physical or intellectual impairments are brought to school. Mild to moderate disabled children are to be-integrated in general stream of formal education. To provide technical support, BRGs are constituted. NGO is identified to work as Block Resource Group.

### A Concise Statement of Objectives

- To facilitate the impaired children to receive education in general schools.
- To make all the disabled children enrolled in general schools receive medical help and quality education.
- To get all concessions for the disabled children from both Government and non-government organizations.
- To facilitate suitable teaching-learning process catering to the need of the disabled children.
- To make all the disabled children achieve the minimum level of learning.
- To integrate out-of-school children with disability in general schools. This presumes that children with residual sight and partial hearing will also be covered.
- To support human resource development activities and training required personnel.

### An Outline of the Tasks to be Carried Out

- Identification of children with disability in and out of school.
- Functional assessment of each disability.
- Target group of children with disability of different types to be taken into consideration for IE.
- Placement of resource teachers.
- Orientation of resource teachers.
- Training of all general teachers of primary school.
- Sensitization of community, village education committee and counselling of parents and peers.
- Preparation of IEPs (Individualized Educational Plans).
- To provide resource support to the schools and teachers.
- To provide aids and appliances with networking with the department of welfare and handicapped and other related institutions.

- To provide aids and appliances to children with disabilities.
- Placement of children in general schools.
- Pre-integrating skill to children with moderate disability with the help of resource teacher and Anganwadi workers at ECCE centres.

### Schedule for Completion of Tasks

NGO will complete task in one year. Main activities are to be completed according to following schedule:

|    |  |  |
|----|--|--|
| 1. | Orientation of staff   | 1 week   |
| 2. | Survey for identification of disabled children   | 1 month  |
| 3. | Functional assessment and enrollment of disabled children  | 2 months   |
| 4. | Listing of resource materials and networking with other organization for providing aids and appliances | 2 months   |
| 5. | Training of master trainers  | 10 days  |
| 6. | Training of primary school teachers and sensitization of VECs  | 3 months   |
| 7. | Regular support  | On-going, as per need of enrolled disabled child |
| 8. | Evaluation   | 1 month  |

### Data Services and Facilities to be provided by the Client

SPO will provide training module for master trainers and primary school teachers.

### Final Outputs (i.e. reports, drawings etc) that will be Required of the Consultant

- To provide number and list of target group of children with disabilities of different types after survey and functional assessment in format prescribed by SPO.
- To provide resource support to the schools and teachers.
- To maintain records of children with disabilities.
- To send monthly and quarterly reports in prescribed format given by SPO.

### Composition of Review Committee and Review Procedure to Monitor Consultant's Works

- Expert Basic Shiksha Adhikari of concerned district will be responsible to monitor and review the IE programmes at the district level.
- At State level, review committee consisting of (1) Director, (2) Additional Director (3) Senior Professional' (IE) (4) Director/ Nominee from Director of Handicap will review the IE programme with the help of monthly report and field visits.

### List of Key Position whose CV and Experience would be Evaluated

Consultant Organization National Association for the Blind, Lucknow, has been working, striling to develop services on the education and rehabilitation of the visually handicapped covering Lucknow city and its adjoining rural areas. National Association for the Blind has integrated blind children in normal schools.

The budgetary details are provided below:

| S. No. | Particulars  | Monthly                         | Annual                       |
|--------|--|---------------------------------|------------------------------|
| 1.     | Salaries:<br>Resource experts – 6<br>Project coordinator –1<br>MIC Assistant   | 4000x6x12<br>6000x12<br>3500x12 | 2,88,000<br>72,000<br>42,000 |
| 2.     | Travelling allowances<br>Resource teachers (6)   | 400x6x9                         | 21,600                       |
| 3.     | Identification, functional, assessment and enrollment  | 3000x2                          | 6,000                        |
| 4.     | Medical assessment (Nyay Panchayat wise) of those who were not assessed in previous year including travelling and other expenses of experts, doctors and others miscellaneous exp. Rs. 5000/- per block  | 5,000x2                         | 10,000                       |
| 5.     | Resource material for sensitization of children, parents, community and others (posters, leaflets, banners, camps at school and at block level on days of national importance Rs. 3000/- per block)  | 3000x2                          | 6,000                        |
| 6.     | Teaching-learning material development like Braille charts for learning Braille alphabets in Braille for teachers as well as needy students small Braille slates, Braille books and materials on integrated education at school level Rs. 6500/- per block | 6500x2                          | 13,000                       |
| 7.     | Networking with NGOs and other organizations for providing aids and appliances<br>Rs. 5000/- per block   | 5000x2                          | 10,000                       |
| 8.     | Visits by physiotherapist and experts from Limb Centre for those OH children who need physiotherapy<br>Rs. 450/ monthly  |                                 | 5,400                        |

| S. No. | Particulars  | Monthly   | Annual          |
|--------|--|---|-----------------|
| 9.     | Eye care<br>Eye check up programme in first phase<br>Preliminary eye check up by resource teachers<br>and listing out of children with eye problem.<br>In second phase, eye checkup by ophthalmologist for<br>listed of children NP-wise Rs. 4000/- per block  | 4000x2  | 8,000           |
| 10.    | Speech therapy programme for those children who<br>have hearing aids and need speech therapy by<br>hearing experts and technicians who maintain their<br>aids Rs. 4000/- per block   | 4000x2  | 8,000           |
| 11.    | Parents' counselling would be done continuously to<br>encourage them for the education of their disabled<br>child 1500/- per block   | 1500x2  | 3,000           |
| 12.    | Sensitization programme of VEC's ICDS workers for<br>early deduction and care in their concerning area<br>2500/- per block   | 2500x2  | 5,000           |
| 13.    | Sports meet to encourage disabled children in sports<br>activities at school level or at block level<br>2500/- per block   | 2500x2  | 5,000           |
| 14.    | Integrated camp for VI & HI children along with their<br>sighted counterparts to improve their educational and<br>social performance. 3 days camp for at least<br>30 children Rs. 50 per child<br><b>2 camps</b><br>Breakfast, lunch, dinner, refreshment etc.<br>Educational material for camp<br>Sight seeing, picnic, cultural prog. etc.<br>Accommodation<br>Miscellaneous | Rs. 50x36x6=<br>10,800<br>2,000<br>2,000<br>3,500<br>5,00 | 18,800          |
| 15.    | Follow up programme at village level<br>Rs. 500/- monthly  | 500x12  | 6,000           |
| 16.    | Feed back, monitoring and evaluation<br>Arranging monthly meetings for special teachers to<br>assess the development of programme  | 400x12  | 4,800           |
| 17.    | Accounting and audit charges   |   | 8,000           |
| 18.    | Stationery and postage with telephone charges  | 1300x12   | 15,600          |
| 19.    | Vehicle operating and maintenance<br>as it will be used in all above activities in both the<br>blocks by the project coordinator and other staff   |   | 14,000          |
|        | <b>Total</b>   |   | <b>5,70,200</b> |

## PART – I

### TOR FOR STATE AND DISTRICT LEVEL RESOURCE ORGANIZATION IN WEST BENGAL

Another example of involvement of NGO in IE is SSA West Bengal, which is using NGOs as District Level Organization to implement the programme of inclusion in the districts. In West Bengal, so far, four blocks of Bardwan, Howrah, Hooghly, Nadia, Purba Medinipur, Paschim Medinipur, Darjeeling, Siliguri, Kolkata and North 24 Parganas have been identified and selected for SSA intervention for IE. CWSN are being enrolled in schools in these blocks after their initial screening and assessment. A need was felt to strengthen the capacity of teachers to develop individualized education programme for the enrolled disabled children. The identified children were also to be assisted by providing aids and appliances along with school readiness packages. Parental counselling, community sensitization and awareness activities also had to be taken up in a big way. Above all this, project was to be extended to other blocks of the district. These tasks obviously could not be undertaken by District Project Office alone. Hence, a support mechanism had to be developed. For this, NGOs already working in the field of disabilities were called upon to facilitate implementation of these tasks in collaboration with SSA and other district functionaries. Thus, Paschim Banga Rajya Prarambhik Unnyan Sanstha (PBRPSUS) decided to select NGOs as District Level Resource Organization (DLRO) for the purpose.

#### Objective of DLRO Engagement

- To implement the programme of IE in the district;
- To develop and implement school based Individualized Education Programme (IEP) for the already enrolled integrated disabled children as well as for those to be enrolled subsequently;
- To monitor, coordinate and evaluate IE activities in the district;
- To develop plan of action for successful implementation of IE and assist DPO to strengthen the activities on inclusion;
- To strengthen capacities of teachers and district-based functionaries in the field of disabilities;
- To ensure convergence of SSA intervention with all Govt. schemes/programmes running for disabled children;
- To take up parental counselling through home visit; and
- To take up community awareness/sensitization programme in the district.

#### Scope of Work

Three special educators from the fields of visual disability, hearing disability and mental disability are engaged by DLRO in order to:

1. Assist DPO in conducting special survey in the IE blocks and make a detailed database at different levels: VEC/WEC, circle, block and district level.



2. Organize screening and assessment camp at the block level to identify the extent and severity of disability and ascertain the number of integrable disabled children.
  3. Follow up at home and functional skill development of integrable children facilitating school readiness and organizing 'school readiness camp' at grassroot level.
  4. Ensure enrolment of integrable children in schools/SSKs/MSKs in collaboration with VEC/WEC, Panchayats/Municipalities. And also to take up regular moping up drives for enrolment of the out of school integrable children.
  5. Make proposals and send to NIOH/ALIMCO/AYJNIHH for procuring aids and appliances.
  6. Develop records, report and individual case profile (Individualized Education Programme) for CWSN.
  7. Sensitize family members, peers and community on different aspects of disability.
  8. Take up school (including SSA/MSK) and curriculum related responsibility. For this, the teachers would —
    - Undertake regular dialogue with the headmaster and other school teachers/ SS of SSK/MSJ through school visit about disabled child's special needs and find ways and means of meeting's those needs within the existing infrastructure.
    - Do parental counselling through home visit on the need of educating CWSN.
    - Have regular dialogue with district IE coordinators and DPOs regarding infrastructure requirements.
    - Undertake periodic evaluation of performance and seek guidance from DPO, whenever needed.
    - Manifest a command on the plus curriculum skills needed for a child with special needs. For instance, teaching Braille, Abacus, sensory training, adapted games, teaching aids and developing innovative materials for education of special needs children.
    - Identify areas of convergence such as scholarships, aids and appliances, resource room appliances and other benefits under various Govt. schemes.
  9. Providing assistance to DPO for organising —
    - Sensitization training of school teachers throughout the district.
    - Intensive training of school-teachers in the IE blocks..
- This assistance may be required by Shiksha Sahayikas of Sishu/Madhyamik Siksha Kendras as well.
10. Administrative responsibilities mainly familiarization with different departments and functionaries such as education, health, social welfare etc. and knowledge of Govt. orders related to disability.
  11. Monthly report (data-wise) presentation to DPO, SSA
  12. All the schools having CWSN in the IE block(s) must be visited by the special educator of DLRO regularly. Other similar schools of the district, outside the IE blocks, must also be visited
  13. Any other IE related activity in the district as assigned by DPO.

For the selection of NGOs as DLRO, it was seen that DLRO had registered office, with regular office staff in the district. It was also important that the DLRO had experienced and well-qualified special educators. These three special educators had to travel to schools and children' houses at any time of the day according to the need, as decided by the DPO. DLRO has to maintain a weekly diary for special educators indicating day-wise activities and the progress thereof.

The assignment of NGO as DLRO is on a contract basis, for a period of one year, renewable annually on the basis of performance as assessed by DPO and SPO. The DLRO works as per the plan prepared by the DPO. It functions through its office set up at the district and informs the DPO on the following particulars on monthly basis:

- Proposed plan of action of each special educator for each month.
- Actual achievements against the above, data-wise.

A monitoring committee consisting of 3 members evaluates/ monitors the activities of DLRO. Additional District Project Officer (ADPO), Deputy District Project Officer (DDPO) and District IE Coordinator (D-IEDC) are the members of the monitoring committee.

### Financial Components

DLRO is given @ Rs. 18,000/- p.m. on the following counts:-

- Three special educators in different fields such as mental disability, visual disability and hearing disability will be engaged by the DLRO having requisite qualification of RCI recognized course. For each such special educator, Rs. 5000/- per month will be provided by DLRO through the DPO. In addition, Rs. 3000/- per month for TA and other administrative expenses for the office set up of each DLRO will also be provided by DPO to DLRO.
- The monthly remuneration for special educator would be proportionate to the number of such educators engaged during the period.
- The payment of this monthly fees is subject to the special educator rendering satisfactory service with assured outcome which will be assessed by the District Project Office through the Monitoring Team regularly.
- Attempts should be made to engage all the three special educators simultaneously, but in the eve of any difficulty, one month time may be allowed for such induction subject to necessary curtailment of fees of Rs. 5000/- per month for each such special educator yet to be engaged. The proportionate deduction of administrative charges will also be effected during the period of non-engagement of such special educator(s).
- A separate account reflecting the receipt of fund from the PBRPSUS as well as the expenditure incurred should be maintained which will be subject to audit by PBRPSUS team.
- The monthly payment of Rs. 18000/- will depend on the report of the monitoring team about the performance of DLRO.
- The monthly payment will be on a reimbursement basis i.e. the initial payment will be made by DLRO out of its own fund which will be reimbursed within a week or so in the following month from DPO on placement of reimbursement claim by the DLRO with the DPO, subject to satisfactory performance by the DLRO during the month.

## PART-II

### CONSULTANCY CONTRACT

- a) Contract name : Consultancy with DLRO for IE activities  
 Contract number :  
 This contract dated is made between:

District Project Officer (DPO), SSA, (hereinafter referred to as DPO) action on behalf of the District Project Office.

and

- b) Name of the DLRO  
 (hereinafter referred to as the Consultants)  
 (DPO, SSA requires the Consultants to supply certain services as defined in Part-I hereof (The Services) to the DPO, SSA)

The Consultants, having represented to DPO that they have the professional skills, personnel and technical resources, have agreed to provide the Services as per Appendix I.

#### 1. Construction of Contract

1.1 The Contract shall be governed by and construed in accordance with the laws of India.

#### 2. Duration of Contract

2.1 The Contract shall commence on \_\_\_\_ and expire on \_\_\_\_ unless terminated earlier in accordance with the provisions of Clause 14 of the Contract.

#### 3. Financial Limit

3.1 The financial limit for this Contract is upto Rs. 2,16,000/-. The components of the financial limit are set out in Appendix II Schedule of prices.

3.2 No expenditure or liability may be incurred in excess of the financial limit or any of its components as set out in the Contract.

#### 4. General Administration

4.1 Though services undertaken under the Contract may be supplied to DPO, SSA and may thus require close cooperation with their appointed representatives on site, formal instructions for implementation may only be given by DPO who will be responsible for all matters concerning this Contract.

No variation in the terms or scope of this Contract shall be valid or binding unless previously expressly agreed in writing by the DPO and the Consultants in the form of letters issued by

DPO entitled “Amendment to Contract”, DPO takes no responsibility for work outside the scope of services as stated in this Contract.

## 5. Personnel

- 5.1 Nothing contained in this Contract shall be construed or have effect as constituting a relationship of employer and employee between DPO and staff of the Consultants and in particular (but without prejudice to the foregoing) the Consultants shall at all times be responsible for or ensure any third party personnel are responsible for any payments of tax or insurance due to the employees status as a self-employed person. The use of any of the Consultant’s standard internal procedures in respect of any payment made to any third party personnel shall not render such personnel an employee of DPO.
- 5.2 The Consultants shall obtain the written approval of DPO in respect of each person engaged by the Consultants in connection with the Contract. Such personnel shall perform the services with all due diligence, efficiency and economy, in accordance with appropriate professional standards as mentioned in Part-I.
- 5.3 All Consultants’ personnel provided shall be suitably qualified, experienced and physically fit to carry out the work required of them. In the event that any are deemed by DPO to be unsuitable, he may, notwithstanding any prior approval, so notify the Consultants, in writing, giving reasons for unsuitability. On receipt of such notification, the Consultants shall without charge provide a suitably qualified and acceptable replacement for any such person with the minimum of disruption and delay to the project in relation to which the defined services are being provided. During disruption period, no payment as regards remuneration of the incumbent will be allowed.
- 5.4 The Consultants shall not be entitled to substitute personnel unless the DPO gives written consent to such substitution.
- 5.5 The Consultants shall be responsible for all acts and omissions of persons engaged by the Consultants whether or not in the course of performing the services and for the health, safety and security of such persons and their property.

## 6. Fees

As mentioned in Part-I.

## 7. Payments

- 7.1 Invoices should be submitted in arrears in accordance with specific instructions set out in Part-I of TOR.
- 7.2 Subject to DPO being satisfied that the Services have been carried out to its satisfaction, the sums due shall be paid within 30 days of the invoice being received and approved.
- 7.3 If for any reason DPO is dissatisfied with the performance of the Services, an appropriate sum may be withheld from any payment otherwise due under the terms of the Contract. In

such event, DPO will identify the particular services with which it is dissatisfied together with the reasons for such dissatisfaction, and payment of the amount outstanding will be made upon remedy of any unsatisfactory work or resolution of outstanding queries.

- 7.4 Should DPO determine, after paying for a particular service, that the particular service has not been completed satisfactorily, he may recover or withhold from further payments, an amount not exceeding that previously charged for that service until such time that the unsatisfactory service is remedied to its satisfaction.

## 8. Invoicing Institutions

- 8.1 Invoices for work undertaken by the Consultants must be presented in duplicate to DPO, SSA.
- 8.2 Invoices should bear the Contract reference, be numbered sequentially and dated and submitted for the attention of the DPO.
- 8.3 All invoices should include a certificate saying:

“This invoice is in respect of a supply of services to SSA, WB and is addressed to DPO, purely for payment purposes. We certify that the amounts claimed in this invoice have been wholly and necessarily incurred for the purpose of the engagement and have not been claimed before”.

This should be signed by the competent person of the Consultancy organization.

## 9. Assignment to Others

- 9.1 The Consultants shall not assign or transfer or caused to be assigned or transferred whether actually or as the result of takeover, merger or other change of identify of character of the Consultants, any of its rights or obligations under the Contract of any part, share or interest therein. Upon any such assignment or transfer, the Contract may forthwith be terminated by DPO.

## 10. Termination

- a. If in the opinion of DPDO, it appears desirable that this Contract should be terminated s/he may, at any time, inform the Consultants of his decision by written instruction to that effect. In the event of the Contract being terminated, the Consultants shall take steps as are necessary to bring the Services to an end.
- 10.1 The Contract may be terminated by DPO by notice in writing to the Consultants at any time the Consultants commit any breach of their obligations.

## 11. Settlement of Disputes

- 11.1 Should the Consultants and DPO be unable to reach agreement on the meaning on interpretation of any of the terms set out hereto or any other matters arising out of the Contract, the matter in dispute shall be referred to State Project Office for a decision which will be binding to both the Parties.

## 12. Audit

- 12.1 The Consultants shall keep accurate and systematic accounts and records in respect of the Services provided under the Contract and in such form and detail as will clearly identify all relevant costs claimed in respect of Fees of Reimbursable nature. DPO or his representative has the right at any time to visit the Consultants' offices to audit the relevant books and accounts held in relation to payments made under the Contract and make copies of the same. In the event that the results of the audit demonstrate that the Consultants have claimed any sums in excess of the Consultants' entitlements under the terms of the Contract, the Consultants shall within 28 days of a written demand by DPO reimburse to DPO in respect of any such over-payment.
- 12.2 The Consultants shall make available to the persons carrying out the audit such personnel records, and all information relating to the provision of the Services which these persons may reasonably require and shall give them the necessary facilities for verifying the accuracy of the records and information made available.

The Consultants shall confirm acceptance of the terms of this Contract by signing and returning to DPO the duplicate copy enclosed herewith within a period of 30 days.

For and on behalf of  
(acting for and on behalf of  
District Project Office)

Name :  
Position : District Project Officers  
Signature :  
Date :

For and on behalf of  
(acting for and on behalf of  
The Consultants (DLRO))

Name :  
Position : District Project Officers  
Signature :  
Date :

## GLOSSARY

|         |   |   |
|---------|---|---|
| ADL     | : | Activities of Daily Living                                    |
| ADPO    | : | Additional District Project Officer                           |
| ALIMCO  | : | Artificial Limbs Manufacturing Corporation                    |
| AWP&B   | : | Annual Work Plan and Budget                                   |
| AYJNIHH | : | Ali Yuvar Jung National Institute for the Hearing Handicapped |
| A.P.    | : | Andhra Pradesh  |
| AIE     | : | Alternative Innovative Education                              |
| AWW     | : | Aaganwadi Worker  |
| BRC     | : | Block Resource Centre   |
| BRCC    | : | Block Resource Centre Coordinator                             |
| BRG     | : | Block Resource Group  |
| BSA     | : | Basic Shiksha Adhikaari                                       |
| CLRC    | : | Circle Level Resource Centre                                  |
| CP      | : | Cerebral Palsy  |
| CRC     | : | Composite Regional Centre                                     |
| CRCC    | : | Cluster Resource Centre Coordinator                           |
| CWSN    | : | Children With Special Needs                                   |
| DA      | : | Daily Allowance   |
| DRC     | : | District Rehabilitation Centre                                |
| DIET    | : | District Institute of Education and Training                  |
| DLRO    | : | District Level Resource Organisation                          |
| DMC     | : | District Mission Co-ordinator                                 |
| DPEP    | : | District Primary Education Programme                          |
| DCC     | : | District Core Committee                                       |
| DPC     | : | District Project Co-ordinator                                 |
| DPO     | : | District Project Office                                       |
| DRG     | : | District Resource Group                                       |
| ECCE    | : | Early Childhood Care and Education                            |
| Ed. CIL | : | Educational Consultants India Limited                         |
| EE & L  | : | Elementary Education & Literacy                               |
| EFA     | : | Education For All   |
| EGS     | : | Education Guarantee Scheme                                    |

|         |   |   |
|---------|---|---|
| HHS     | : | House-to-House Survey                                 |
| HI      | : | Hearing Impairment                                    |
| IE      | : | Inclusive Education                                   |
| IED     | : | Integrated Education of Disabled                      |
| IEDC    | : | Integrated Education of Disabled Children             |
| IEP     | : | Individualized Educational Plan                       |
| KRPF    | : | Key Resource Person from the Family                   |
| MEO     | : | Mandal Education Officer                              |
| MHRD    | : | Ministry of Human Resource Development                |
| MoSJ&E  | : | Ministry of Social Justice and Empowerment            |
| MOU     | : | Memorandum of Understanding                           |
| MRP     | : | Mandal Resource Person                                |
| MR      | : | Mental Retardation                                    |
| MSK     | : | Madyamik Shishu Kendra                                |
| MTA     | : | Mother Teacher Association                            |
| NAB     | : | National Association of the Blind                     |
| NGO     | : | Non-Governmental Organization                         |
| NIOH    | : | National Institute of Orthopaedically Handicapped     |
| NP      | : | Nyaya Panchayat                                       |
| NPE     | : | National Policy on Education                          |
| OH      | : | Orthopaedic Handicap                                  |
| PBRPSUS | : | Paschim Bengal Rajo Prarambhik Shiksha Unnyan Sanstha |
| PH      | : | Physical Handicap                                     |
| PHC     | : | Primary Health Centre                                 |
| PIED    | : | Project Integrated Education for the Disabled         |
| POA     | : | Plan of Action  |
| PTA     | : | Parent Teacher Association                            |
| PWD     | : | Person With Disability                                |
| PTR     | : | Pupil Teacher Ratio                                   |
| RBC     | : | Residential Bridge Course                             |
| RCI     | : | Rehabilitation Council of India                       |



|        |   |   |
|--------|---|---|
| RTs    | : | Resource Teachers   |
| SEC    | : | School Education Committee                                  |
| SLRO   | : | State Level Resource Organization                           |
| SMC    | : | School Management Committee/ State Mission Co-ordinator     |
| SMO    | : | State Mission Office  |
| SPD    | : | State Project Director                                      |
| SPO    | : | State Project Office  |
| SRG    | : | State Resource Group  |
| SSA    | : | Sarva Shiksha Abhiyan                                       |
| SSK    | : | Shishu Shiksha Kendra                                       |
| TA     | : | Traveling Allowance   |
| TLM    | : | Teaching-Learning Material                                  |
| TSG    | : | Technical Support Group                                     |
| UPE    | : | Universalisation of Primary Education                       |
| UEE    | : | Universalisation of Elementary Education                    |
| UNESCO | : | United Nations Educational Scientific Cultural Organization |
| U.P.   | : | Uttar Pradesh   |
| VA     | : | Voluntary Agencies  |
| VD     | : | Visual Disability   |
| VEC    | : | Village Education Committee                                 |
| VI     | : | Visual Impairment   |
| WEC    | : | Ward Education Committee                                    |