**Contents**

|  |  |  |
| --- | --- | --- |
| **S.NO** |  **INDEX** | **PAGE** |
| **1** | **PROJECT PROPOSAL** |  |
| **2** | **DISABLED SUPPORT PROGRAMME** |  |
| **3** | **CONTENTS** |  |
| **4** | **THE CURRENT SITUATION OF DISABLED CHILDREN IN WEST BENGAL*** **MEDICAL/REHABILITATION**
* **EDUCATION**
* **EMPLOYMENT**
 |  |
| **5** | **NORTH 24 PARGANAS DISTRICT (PROJECT AREA)*** **MEDICAL**
* **EDUCATION**
* **EMPLOYMENT**
 |  |
| **6** | **PROJECT PROPOSAL** |  |
| **7** | **TARGET GROUP** |  |
| **8** | **GOAL** |  |
| **9** | **STRATEGY*** **OUTREACH**
* **INFORMATION AND EMPOWERMENT CENTRE**
* **SPECIAL EDUCATION CENTRE**
* **EDUCATION**
* **SATELLITE CENTRES (BRANCH CENTRES)**
 |  |
| **10** | **ACTION PLAN** |  |
| **11** | **RESULT** |  |
|  |  |  |

***Disabled Children Educational Support Project***

**The Current Situation of Disabled children in West Bengal**

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|  | In rural India a child born with a disability is destined for a life of dependency. For the poor thisburden can be extreme. Disabled children can be a social, financial, mental and physicalburden to their families. Through lack of knowledge and skills of the family, the children do notget the appropriate help they need. The children do not go to school and hardly leave theirhomes. Therefore, they are not challenged and do not develop mentally or physically. Families will often favour a healthy child over a disabled child, when it comes to food and attention. |
| **Medical/ Rehabilitation** |
|  | Medical and rehabilitation treatment does not reach the disabled children in the poorvillages. Due to the high level of illiteracy in villages, the families do not understandor know what benefits the government provides. In addition, villages are far frommedical or rehabilitation centres, therefore transportation cost is another obstacle. |
| **Education** |
|  | The children who don’t have to be carried, can sit up strait and behave in a group can go to a government school. In these schools they will have a place amongst 30-40 other children and if they cannot follow, there will be not much extra attention for them. The children will have a hard time finding friends to play with because they are not understood. Special education is rare but through a so called IED teacher, most schools get weekly support by a special teacher that visits schools that have enrolled disabled children. |
| **Employment** |
|  | Very few opportunities exist in the work place for people with disabilities. With the growing population size and the lack of jobs, very few people with disabilities get paid employment. They are often confined in their homes and are dependant on their family for life. Disabled support and awareness in the West Bengal government is in its infancy. |
|  **North 24 parganas District (Project Area)** |
|  | North 24 parganas has the eighth highest number of disabled residents out of West Bengal’s 30 districts. To date only three disabled resource centres have been established in North 24 Parganas district for a population of 71,231 disabled people. (Government of West Bengal Dept. of Economics and Statistics, 2001 census) Private clinics have set up schools and centers, but not all area’s are covered and especially in the rural area’s it’s hard to reach the children due to transport problems. |
| **Medical/ Rehabilitation** |
|  | The government provides rehabilitation support for poor families, with the help of localhealthcare workers from Non-Government Organizations (NGOs), specializing in differentdisciplines. In 2006 a scheme was finished in the district where healthcare worker’s wereemployed by the government to find the disabled people and provide them with free care, free aids, and a possible scholarship. Community Based Rehabilitation (CBR) officers visited thevillages to identify the disabled people. Based on the CBR’s survey, the NGOs scheduled aregistration day for a specific area. During the registration days, doctors assess and record thedegree of disability in a National Identity Disabled Certificates (Pass Book) for each disabledperson. In addition, the family income and caste are recorded in the Pass Book. The passbook entitles the disabled person to receive the government benefits and it must be renewedannually. Four NGO’s in the district are working alongside of the scheme; they are not askingfor government funds, but are approved by the government to work in rehabilitation anddisabled support. Currently, some NGOs have set up disabled centres to provide treatments such as physiotherapy, occupational therapy and speech therapy. A few disabled centres have provided additional vocational training. This is a positive step to addressing the immediate situation. More local and international NGO’s are trying to connect provision with the ones who need it. Some NGO's in the district have started to help disabled children that do not get help from the government program. These children live far from the existing disable centres; therefore the NGOs are providing home-based care through their outreach programs. Transportation between the villages to the hospitals and rehabilitation centres, require time and resources from the NGO’s. The NGOs, like Institute for the Handicapped and Backward People (IHBP), are still finding disabled people, who have not been registered or are still not receiving any rehabilitation. Apparently the NGO’s are not able to cover the whole area of Nityaberia. The centres are struggling to provide the care needed, with limited resources and limited skilled staff. They are mostly reaching the children that can afford to travel. In the government scheme there is nothing written about long term or follow-up treatment. Overall one can say that the children are not challenged to use their abilities or to develop them. The focus is mostly on physical needs and adjustment, which are not enough to give a child a chance in the wider society. It will also need education and skill training. Parents of disabled children are often insecure about asking for help. The provided benefits are difficult to reach when you get sent away or don’t get allthe information from the doctors or social workers. Doctors don’t give all the information because of several reasons :1. They are afraid the parents will abandon their child2. They don’t have time to do the proper assessments or tests (for free).3. They don’t always have adequate knowledge about different disabilities Also, parents feel guilty about having a disabled child due to misbelieves and fear. Family and neighbours are likely to encourage that feeling of guilt and a lot of mothers are left alone with the care of their child. In India, it is almost impossible for a woman to be independent. When a husband leaves them, they will be depending on the help of their family and charity. Because of the feeling of guilt, it is not likely they will raise their voice to stand up for the rights of their child. |
| **Education** |
|  | The educational policy states that if a child is "less than 50% disabled" they can attend regularclasses. There are 25 government run special schools in West Bengal catering for 1919 disabledchildren. (Government of West Bengal Dept. of Economics and Statistics, Statistical Handbook2004) In North 24 parganas district there is one special school catering to children with speech and hearing impairments. Within the government schools, some teachers have completed thecourse in special education and can provide inclusive care for the disabled children. Theprogram is called Inclusive Education for the Disabled (IED). In the education system there iscurrently some provision for special needs children, who are enrolled in mainstream government schools. These provisions include scholarships, bus passes and special education from IED teachers .In reality, a lot of disabled people do not have the opportunity toget the appropriate education, due to poverty and illiteracy in their family. The free benefits do not reach the villages because children are not registered after birth and the familiesdo not know they are entitled to government provisions. Also, children will be sent away from schools because the school cannot provide the care needed and parents don’t know how toask for special education or where else to go to. Children who do get enrolled in the normal schools are often neglected and are sitting in the back of the class without a possibility to learnat their own speed. Again, parents are not raising their voice to change this, because they risk being sent away. The IED program does not guarantee that the child will be able to learn at his own speed. Disabled children are not getting the additional attention they require due to the large class size. Parents fight to keep their failing children in the school so they are able to work, providing what income they can to support the family. |
| **Project Proposal** |
|  | Based on the information above, we can conclude that many disabled children in theNorth 24 parganas district do not get the appropriate support. This project would like to contribute to the improvement of the current support. Institute for the Handicapped and Backward People (IHBP) will work with other NGOs in the area, as well as provide additional support. The project will focus on promoting awareness of the existing benefits, offer support and influence the government policy.IHBP’s outreach team will visit the villages in the district to assess the community services and villagers. They will identify the disabled children and determine what their initial needs are. Then the outreach team will decide what the best provision will be and who will provide those provisions. Based on the assessment of the current situation, we need to provide additional support. IHBP’s vision is to build a Special Education Center. The center will include special education, rehabilitation and vocational training. A future residential facility will also be available. The organization wants to be the catalyst in the process, so that eventually Institute for the Handicapped and Backward People (IHBP) can take the responsibility with local staff. |
| **Target group** |
|  | The target group for the disabled support program will be children in the age of 0-15 with amental and/or physical disability in North 24 parganas district, West Bengal who live in poor needy families that cannot afford (medical) care for their children. |
| **Goal** |
|  | The overall goal of the Disabled Support Centre project is to improve the quality of life fordisabled children in poor families in North 24 parganas district :Increased and more appropriate support for disabled children and their familiesIncreased social interaction between families with disabled children in villages in the area.Integration of disabled children and young adults into the wider community.Education and Life skills development. |
| **Strategy** |
|  | ***The best way to achieve the goals will be through education. Challenging the children to develop themselves and by giving them a chance to come out of their isolation and******mean something for their environment. This is why we want to set up a centre for******special education with multidiscipline support for mental and physical disabilities.*** |
| **Outreach** |
|  | Currently, the outreach team visits the families to educate them on their rights and benefits, as well as showing them how to receive the benefits. In the IHBP day-care centre in Nityaberia, we have started a successful workshop program for parents and caretakers. Through this we have taken away the feeling of guilt and empowered the attending parents to stick up for their child and find ways to create a better future. The parents with enthusiasm have invited topics like causes of disabilities, children’s rights and how to share worries. |
| **Information and empowerment centre** |
|  | In the first phase of the project we will set up a centre where parents can come for support and education about government benefits and available provisions in the district. We will educate the parents that come individually and in groups. We will continue the workshops to give knowledge about the disabilities, possible treatment, provided facilities and benefits.This centre will also help to make individual future plans for the children. We will help theparents make decisions about care for their child. Also this will include making a financial plan to secure future treatment and other plans. If needed, we can provide financial support in a way that the parents will be responsible through micro credits or sponsoring. A plan we need to work out is to increase the income level of the parents through small businesses that can be set in or close by the centre. |
| **Special Education Centre** |
|  | In order to have an effective program, Institute for the Handicapped and Backward People (IHBP) would like to bring different disciplines under one roof. The primary focus will be on special education with additional support, such as physiotherapy and vocational training. All the disciplines will be working together for the same goal. Each child will have a specific treatment plan with individual goals that the whole team will work towards. The Special Education Centre will comprise of 2 therapy rooms, a day-care centre, classrooms for education and training, an office and a staff room. There will be showers, toilets and a place to wash clothes. If funding permits, there will be a therapy pool. In the future, Institute for the Handicapped and Backward People (IHBP) would like to accommodate children who can not live at home or who do not have a home. Although Institute for the Handicapped and Backward People (IHBP) would like the children to live with their families as long as possible, it may be more beneficial in some cases for the child to live at the centre. A residential home will be added as part of the centre during Phase VI of the program. The Special Education Centre will be built in a location close to a government school for the children to attend. It will be close to major bus routes so that the centre is easily accessible. Special, individually tailored education will be provided at the centres for those children who are unable to attend the main stream schools. |
| **Education** |
|  | The centres will provide education appropriate to the needs of the individual children. The 0-5year old children will benefit from day-care with basic skills training such as walking, talking and small, manageable domestic tasks. Those from 6 - 13 will receive formal education, either in a local government school or, alternatively, in the centre itself. A program of skills training will be available for children over 14. A long-term goal of the program is to be able to influence policy at governmental level. Through this, special needs education will be given a higher priority and changes implemented at State level enabling all children with disabilities to access appropriate support and education in their area. |
| **Satellite Centres (Branch centres)** |
|  | The Special Education Centre will support locally based satellite centres that are implementedthrough the Disabled Support Program, developed and managed by locally trained coordinators.These will provide similar services to the Special Education Centre and will be able to reachthose families who are unable to regularly access the Special Education Centre due to distanceor level of disability. |
| **Action Plan** |
|  | 1. In depth assessment of the area to include numbers and needs of children with disabilitiesand the provision available for them (with knowledge of other NGO’s) in affiliation with therehabilitation centre of Kancheepuram district2. Make contact and links with other providers in the area, such as schools, clinics and homes(government and private).3. Set up an empowerment centre for the empowerment of disabled children and their parents.4. Find locations for satellite centres and recruit staff.5. Equip the families of disabled children with the knowledge and skills to provide targeted carefor children and provide means by which the children can develop a level of independencerelevant to their needs.6. Equip the families of disabled children with the knowledge and skills to provide targeted carefor children and provide means by which the children can develop a level of independencerelevant to their needs.7. Train staff in order to help them understand how they can take care of the children andchallenge them to develop.8. Provide workshops in the villages through outreach and the satellite centres.9. Improve the accessibility of the provisions.10. Educate about the benefits and how to get them.11. Arrange transportation to provisions (hospitals, clinics and the Special Education Centre).12. Satellites will provide local support, such as outreach, education and care to those villagesthat are too far from the primary Special Education Centre.13. Build a Special Education Centre with a provision as complete as possible for disabledchildren and their care-takers and recruit staff for the centre.14. Sustain and expand the centre by assessing needs and program effectiveness, by provisionof Institute for the Handicapped and Backward People (IHBP) coordinators to monitor and support the centre's activities and byidentifying potential community members to continue with and develop appropriateprograms.15. Find financial support from the local government and local/international sponsors. |
| **Results** |
|  | 1. A complete assessment of all organizations that provide disabled care in the area andwhether the families can reach them.2. Effective coverage of provision in the area.3. An empowerment centre for education of parents and mediation between provisions.4. A Special Education Centre will exist with the followingprovisions:\_ Medical Care, Physiotherapy and mental support.\_ Day-care and rehabilitation for the children ages 0-5.\_ Early intervention centre.\_ Vocational training for children.\_ Resource centre for school going children, separatefrom the day-care.\_ A resident for children who have nowhere else togo.\_ Utilization of disability aids, such as crutches,braces and wheel chairs.5. A sufficient amount of satellites with the followingprovisions:\_ Day-Care for children who live too far away fromthe primary centre or who do not need specialized treatment.\_ Education to families about specific disabilities and how to deal with them.\_ Personalized support for the families with disabled children.6. Families with disabled children are financially and mentally supported to take care oftheir child at home.7. Children develop and are challenged to do so by their environment.8. All disabled children in Thirupporur, Tirukalukundram and Cheyur blocks have access tothe provisions needed.9. The local staffs that understands and maintains the goals guarantees sustainability.10. Financial support for long term is guaranteed for at least 5 years |
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