



## An analytical report

ON

BASE LINE SURVEY FOR IMPLEMENTING  
COMMUNITY BASED REHABILITATION  
PROGRAMME FOR  
PERSONS WITH DIFFERENT DISABILITIES

Name of the Institution: Prabhat Education Foundation

Title of the Project:

Community Based Rehabilitation-Creating Awareness  
and Sensitizing Community

## The Organization.

Prabhat began its journey toward opening opportunities for children with special needs in 2003, when Keshav Chatterjee was an educator at the renowned Eklavya School. By 2005, Prabhat had begun a modest centre for special children, followed by a Summer Workshop in cooperation with the Ahmedabad Education Society. In response to community needs identified in a survey, a Prabhat Centre was opened in Maninagar in 2007. Basic services began of counseling, assessment, education, therapy and contact with specialists. The same year, the reputed Anand Niketan School hosted Prabhat's Satellite Centre, helping to reach another section of society.

Starting with one child in 2007, over 80 children now attend the Centres, while Prabhat also extends its support to other children, homes and communities through outreach and advocacy efforts. Partnerships with the well-known Riverside School, municipal and other schools have followed to support the national effort toward the rights of special children to be recognized and served within the mainstream.



Today, Prabhat works in 3 major areas: services and facilities through the Prabhat Centres at Maninagar and Satellite, the Community-Based Rehabilitation Programme (CBR) serving children, families and communities who can not access the Centres for problems of mobility or awareness, and Advocacy through networking and partnerships to help build and strengthen special education in Ahmedabad. Prabhat has embarked on a 3-year perspective plan to strengthen each of these services, and to bring more than 100 children into the direct care of its Centers.

Prabhat Education Foundation , a leading registered non-profitable organization located at Maninagar area of Ahmedabad is running number of Humnaitarian programmes focusing more on persons with different disabilities. Apart from running a Training and , Educational Institute for the intellectually disabled children, the trust has undertaken various other rehabilitation and welfare programmes for people with different disabilities. The main Center of the organization is located at Maninagar , where in 65 of such children are being provided specialized training in daily living skills, formal and non -formal education and other rehabilitation and supportive service . These children include children with Cerebral Palsy, Autism, Mentally Challenged and Low vision and other multi disabilities.

The agency has a very reputed service history in the area with it's constant endeavor in reaching all the un-reached needy differently abled people of the area, where people do not have any access to various social security schemes that are available from the government department. Prabhat Education Foundation is a Public Charitable Trust registered in 2006 under the Bombay Public Trust Act 1950. Donations to Prabhat are exempted from income-tax under Section 80(G) of the Income-Tax Act 1961. Prabhat is authorized to receive donations from overseas under the Foreign Contribution (Regulation) Act (FCRA Registration No.041910406). Prabhat is a GiveIndia partner and a member of Credibility Alliance. Contributions to Prabhat from the USA have 501C3 tax-exemption.



(<http://www.giveindia.org/m.954.prabhat.education.foundation.aspx>). Prabhat is registered by the Government of Gujarat as a recognized institution for persons with disabilities under The Persons with Disabilities Act (1955). Mr. Keshav Chatterjee a self motivated known Social Worker in the area, has been leading the organization with number of resourceful persons involved in the organization volunteering the activities of the organization along with a team of committed staff members who are well trained in the services of differently abled people. The agency has also been doing commendable job advocating the cause at various concerned levels and linkage services with other voluntary groups and Government departments.

The Prabhat Board of Trustees includes Mr Sridhar Rajagopal (Director, Education Initiatives Pvt.Ltd.), Ms Renu Seth (Programme Leader, Pratham), Mr Geet Sethi (sports person and Managing Trustee of the Riverside Foundation), Ms Hasyalatha D Mehta (special educator, trainer and former Director of the Ambica Sishukendra, Kurnool), Prof Ashoke Chatterjee (former Director, National Institute of Design) and Mr Keshav Chatterjee (founder Director and Managing Trustee)

Though the PWD Act 1995 had encoded adequate provisions to look into the various needs of persons with different disabilities still scorers of people who are marginalized from getting any of these services are in need of some kind of support . Prabhat , in it's persistent endeavor to mitigate the sufferings of the poor and underprivileged segments of the population, could realize the need for

extending their existing institutional programs to the other un reached areas like training and rehabilitation and providing linkage services to persons with different disabilities living in the various urban and sub-urban slums of Ahemdabad.. It was found that the organsiation has adequate trained manpower, knowledge and other required infrastructure for undertaking the proposed Community Based Rehabilitation Programmes which has necessary components, needed towards meeting the various basic requirements PWDs. It was also observed that the agency has designed an appropriate planning for the execution of this approved project as per the guidelines given by the donor agency and is working towards achieving the desired outcome in adherence with the T&C.

## The CBR programme

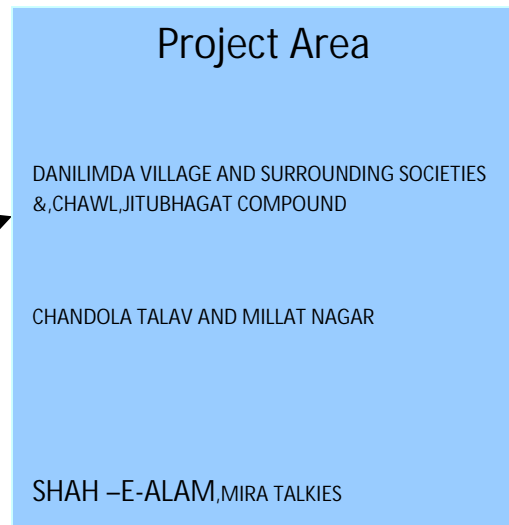
Prabhat has identify 600 persons with disabilities from various slums and Mohallas of Ahmedabad and provides services for their rehabilitation at community level. Various proposed and approved components of the project include, Medical care , Economic Support, Counseling, provisions for providing Aids and appliances or other assistive devises and supportive services like, helping the PWDs to get disability certificate, medical certificate, buss pass and other social security schemes available for PWDs from Government and other agencies. Category of disabilities to be covered under the project include categories like, Visual Impairment, Hearing Impairment, Mentally Retardation, Physically Challenged, Low Vision, Mental Illness, Multiple Disability, Cerebral Palsy, Locomotors disability and autistic cases.

## CBR programme area

Danilimda is one of the most thickly populated slums of Ahmedabad Municipal Corporation which is also one of the 48<sup>th</sup> wards of the corporation was selected for implementing this project , which is located towards the east of Ahemdabad. Very few organizations or voluntary groups are working in this area since it is one of the most communally sensitive areas in the old city. The area was also affected very badly during the Communal Riots of 2002, in the aftermath of Godhra carnage. This area was selected for the project taking into account the special need of the area. Before finalizing the project area a pilot survey was done to find out the need and also to see if any other agencies are present in the area. It was also finalized in consultation with the programme staff, people of the local communities, local government machineries and community leaders. The project area was further devised into four different clusters like;

### DANILIMDA VILLAGE AND SURROUNDING SOCIETIES, CHAWL, & JITUBHAGAT COMPOUND

1. CHANDOLA TALAV AND MILLAT NAGAR
2. SHAH –E-ALAM, MIRA TALKIES ROAD, RASULABAD
3. NAVABKHAN'S CHAWL, BHILVAS, VASUDEV DHANJI'S AREA, SOURROUNDING SOCIETIES OF BRTS.



## Demographic Details of the project Area.

Ahmedabad has been a trading city throughout history. Eastern Ahmedabad, within the Ahmedabad Municipal Corporation (AMC) limits, but outside of the walled city, was the first area to industrialize, with textile mills near the railway. The earliest low-income housing were the chawls, single-room housing units built for the industrial workers. Chawls mushroomed as the accommodation for the (migrant) workers during the late 19th and the early 20th centuries. Controls kept rentals extremely low, discouraging maintenance, and many chawls deteriorated rapidly. This was particularly the case following a crisis in the textile industry and the closure of the factories. From the 1950s onwards, urban growth largely took place in the eastern and, particularly, the urban peripheries, where illegal occupation took place by the newly arrived migrants and other economically weaker urban groups.

Although migrants who arrived after independence largely settled in informal settlements at the urban periphery, chawls are still present in large numbers. Eastern Ahmedabad has about 44 per cent of the total housing units in the AMC region, with 54.8 per cent of the total dwelling units in the category of chawls and slums. It accounts for 75 per cent of the chawl units and 47 per cent of the slum units in the city.

There are two dominant types of low-income residential areas found in the city: chawls residential units, originally built in the mill premises for workers, and slums that represent illegal occupation of marginal areas of the city. The latter typically lack facilities and basic amenities.

The percentage of Ahmedabad housing categorized as slums increased from 17.2 per cent in 1961 to 22.8 per cent in 1971 and 25.6 per cent in 1991. It is estimated that 17.1 per cent of Ahmedabad's population lived in slums in 1971. This rose to an estimated 21.4 per cent in 1982.

The last estimate, based on a population census for the year 1991, nevertheless indicates that 40 per cent of households lived in slums and chawls.

Muslims, SCs (scheduled casts) and OBCs (other backward casts) constitute 91 per cent of the slum households, and more than 95 per cent of slum dwellers are migrants, indicating how rural poverty levels are now spilling over into urban areas. Often fleeing rural inter-caste exploitation and debts, slum populations require their children to contribute to the household income. Victimized by the police, municipal authorities and the upper classes alike, this group represents a particularly vulnerable section of society.

A series of shifts to improve the conditions in low income settlements have occurred since the 1950s. From initial slum clearance, the focus is now more on environmental and slum upgrading and community-based slum networking. With 40 per cent of its population of more than 3 million living in slums, the AMC functioned, until the early 1990, as a small welfare state. It deliberately made life easier for the poor by applying a regime that did not enforce anti-poor regulations, while tolerating squatter settlements on public and private land and allowing public space to be used for income-generating activities, with forced evictions rare. The AMC even constructed a small number of low-income houses.

An amendment to the Municipal Corporation Act during the 1970s obliged the AMC to spend 10 per cent of its revenue on improving basic services in slums and chawls. Based on a soft international loan, the AMC extended urban services to slums in its eastern suburbs. Under the Slum Improvement Partnership, the AMC now coordinates and facilitates the activities of other agencies, while picking up a considerable proportion of the costs in an effort to link slum upgrading with city-level service-delivery standards.

Nevertheless, the AMC had still failed to fully include many of the new insights in their overall urban planning. It is, in particular, their unwillingness to grant security of tenure for periods of longer than 10 years that sends out strong negative signals. Furthermore, the labyrinth of regulatory mechanisms and the complex procedures of the urban planning process have not helped the poor either. Although the AMC has not executed wholesale slum demolitions, public housing agencies have not provided city-level shelter programmes for the poor.

The selected four clusters of the Danilimda Ward are highly populated with predominantly occupied by minority communities. The socio economic conditions of the area is comparatively very much poor than other areas in the city. Majority of the residents were employed under local textile Mills and all of them lost their livelihood when all the textile Mills were closed in eighties and nineties due to union strike. More than 805 of the residents in this slums are either casual laborers or industrial workers with an average of five to six dependents in their families to look after. More than 60% differently abled people living in this area do not have even medical certificate or disability certificate to avail the benefits that are available for them and priority was given for selecting this areas which is done rationally and with high degree of justification.

### Classification according to categories.

Sr.N	Category of disability	Male	Female	Total
1	Visually Impaired	23	18	41
2	Hearing Impaired	20	16	36
3	Orthopedic -handicapped	179	109	288
4	Mentally Retarded	63	43	106
5	Mentally ill	13	10	23
6	Multi- Disabled	62	26	88
7	Cerebral Palsy	3	2	5
	Total	363	224	587

Out of 588 cases identified 41 cases are visually handicapped and the percentage of male is slightly more than that of females with a total 23 male and 18 females. 36 persons are hearing impaired with 20 males and 16 females. Orthopedic - handicapped persons are recorded to be 288 out of which 179 male and the remaining 109 are females , which accounts for 49 percentage of the total identified cases. 106 are mentally retarded with 63 males and 43 females , which is the second highest category of identified cases. . Mentally ill are 23 with 13 males and 10 females. 88 of them are found to be multi-disabled with persons having more than one disability . Five cerebral palsy cases have also been identified with three males and two females.

### Classification of the Data on the basis of medical certificate

Sr.N	Category of disability	No.of Persons having medical certificate	No.of persons do not have medical certificate	Total
1	Visually Impaired	19	22	41
2	Hearing Impaired	12	24	36

3	Orthopedically handicapped	223	55	288
4	Mentally Retarded	62	44	106
5	Mentally ill	6	17	23
6	Multi Disabled	19	69	88
7	Cerebral Palsy	2	3	5
	Total	343	234	588

Data based on Percentage wise on various categories

Sr.N	Category of disability	Male % male	Female % female	Total	Total %
1	Visually Impaired	23 3.91%	18 3.06%	41	6.98%
2	Hearing Impaired	20 3.40%	16 2.72%	36	6.13%
3	Orthopedically handicapped	179 30.49%	109 18.56%	288	49.05%
4	Mentally Retarded	63 10.73%	43 7.32%	106	18.05%
5	Mentally ill	13 2.21%	10 1.70%	23	3.91%
6	Multi- Disabled	62 10.56%	26 4.42%	88	14.99%
7	Cerebral Palsy	3 0.51%	2 0.34%	5	.085%
	Total	363 61.81	224 38.12%	587	100%



Percentage of each category of disability has been worked out and orthopedic handicapped cases are the highest among all the 587 identified cases with 49.05% . The second highest number of cases are identified among the Mentally Retarded category with 18.05% towards the sex ration, out of 587 61.81 % are males and the remaining 38.12% are Females .

#### SOCIAL MAPPING OF THE CBR programme AREA.

Religious Centers : Temples : , mosques:-

Educational Institutes : Municipal school-4 (gujarati medium), & Municipal school , Prviate primary/higher scondary school, Municipal urdu school:- and colleges, Anganwadi, and other NGOs working in disabilities

Govt. hospital:- , Police station

Transportation facilities: Bus, train, auto, private

#### CIVIL SOCIETY SUPPORT:-

The Prabhat's team members have created a very friendly atmosphere in the programme area, despite of the area being very communally sensitive with a large number of violent and communal clash recorded in the past years. A well known and reputed local agency known as Nawabkhan Memorial Trust, which has been extending all it's supports to Prabhat Education Foundation for executing this programme. A large number of volunteers associated with Nawabkhan Memorial Trust and Kanku Pragati Vachat Mitra Mandal have been also instrumental in conducting medical camps under this project. This Trust provided logistic supports and permitted to organize one camp at their premises already and has consented to organize few more camps in coming months. The Corporate of the Area is also extremely supportive for carrying out the project activities and during our interaction with the localities the community leaders and local volunteers came forward to extend their support to the project .

#### CASE STUDY . 1.



**Tejal Prajapati** , a fourteen years old girl was congenitally Deaf , and was identified by the field staff of Prabhat during the survey under the CBR Programme sponsored by Tata Dorabji Foundation Mumbai. Hansaben and Prajapati , the parents of the girl have 5 more children to look after besides Tejal. The family stays in a rented one room apartment behind Meera Talkies in Danilimda slums. Prajapati does masonry works in the neighborhood areas and whenever he does not get the job he along with his wife Hansaben collects crapes as an alternative livelihood option.

All their six children are not going to school, when asked , Hansaben replied life has been very tough in the past with six children for them to raise without a proper livelihood source; let alone their education!

Tejal, is a bright and intelligent girl , though she does not hear or speak , she manages to do all the works given to her says Hansaben. She added that nobody has supported them till date and they are not even aware about the facilities and rights she is entitled for. She has not even provided a medical certificate . It was indeed a happy moment for all the family members that when our field staff informed them that they would help Tejal to get a Medical /disability certificate and she would be entitled for various government benefits.

Prabhat has drawn an action plan for many cases like Tejal for supporting and rehabilitating her economically as well as getting access to eligible social security schemes under the proposed CBR Programmes

## Case study 2.



Kosarbanu is one of the three daughters of Mansubahi Ansari who live at Meera talkies behind Shah Alam, with his wife and other two daughters in a rented room belong to his sister. Kosarbanu is an intellectually Disabled girl from her childhood and is not being given any training in daily living skills or not being given medical certificate. Mr. Ansari is a casual employee in neighbourhood area and his wife is a house wife who has to lookafter Kosarbanu along with her two younger sisters.

Kosarbanu was keeping good health till recently when she was diagnosed with tuberculosis and is under medication now. Her father says with whatever little earnings they have , they are trying to give best treatment to their daughter and he is hopeful that his daughter will fully recover very soon.

Bhupendrabhai the filed worker says that her name has been included in the CBR Programmes and she would be taken to the civil hospital and arrangements will be done to get her medical/disability certificate . Special efforts will be taken to get her treatment either free or at subsidized rate from the nearby hospital . It was indeed , an enjoyable movement for all the family members when we visited them and came to know that there are people to care their daughter .