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Education of children with disabilities in India

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Education of children with disabilities in India

A background paper for GMR 2010

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List of Acronyms

AIE	Alternative and Innovative Education
CWD	Children with Disabilities
CWSN	Children with Special Needs
DEPP	Disability, Education and Poverty Project
DISE	District Information System for Education
DPEP	District Primary Education Programme
ECE	Early Childhood Education
EGS	Education Guarantee Scheme
HBE	Home Based Education
ICDS	Integrated Child Development Scheme
IE	Inclusive Education
IEDC	Integrated Education for Disabled Children
IEP	Individualised Educational Plans
MHRD	Ministry of Human Resource and Development
MSJE	Ministry of Social Justice and Empowerment
NCERT	National Council for Educational Research and Training
NCPEDP	National Centre for Promotion of Employment for Disabled People
NFE	Non Formal Education
NGO	Non-Governmental Organisation
NPE	National Policy of Education
NSSO	National Sample Survey Organisation
NUEPA	National University of Educational Planning and Administration
PAB	Project Approval Board
PIED	Project Integrated Education of the Disabled Children
PWD	People with Disabilities
RCI	Rehabilitation Council of India
RECOUP	Research Consortium on Educational Outcomes and Poverty
SC	Schedule Caste
SSA	<i>Sarva Shiksha Abhiyan</i>
ST	Schedule Tribe
TLM	Teaching Learning Materials
TN	Tamil Nadu
UP	Uttar Pradesh

Disability estimates in India: an overview

Disability is a multi-dimensional and complex construct and there is no single universally accepted, unproblematic definition of disability. Not only do definitions differ across countries but these also differ and change within a country with evolving legal, political and social discourses. It is very difficult to find reliable data about the prevalence of disability in India. In general, the search for a single prevalence rate is an illusion, and the range of estimates, and their varied origins, makes it difficult to say very much with assurance about people with disabilities. The two main large data-sets are the 2001 Census (Registrar General of India, 2001) and the 2002 National Sample Survey 58th Round (NSSO, 2003). Unfortunately, as Mitra and Sambamoorthi (2006) point out, the definitions of disability used by these two enquiries differ in some fundamental ways. The 2001 Census, covering five types of disabilities, recorded a prevalence rate of 2.13 percent, or 21.91 million people with disabilities out of a total population of 1028 million. The National Sample Survey Organisation (NSSO) 58th round (July-December 2002) survey reported that 1.8 percent of the population (18.5 million) had a disability. While 18-22 million people with disabilities is a large number, this is still arguably a gross underestimation, especially when one considers that World Health Organisation estimates a global prevalence rate of 10 percent. A leading Indian disability NGO, the National Centre for Promotion of Employment for Disabled People (NCPEDP), argues that 5 to 6 percent of the population has a disability. World Bank (2007: 12) notes that “the real prevalence of disability in India could easily be around 40 million people, and perhaps as high as 80-90 million if more inclusive definitions of both mental illness and mental retardation in particular were used”.

The Registrar General of India (2001) agrees that the Indian data on disability are unreliable, due to few well-trained field investigators, and issues of social stigma. Underreporting due to stigma and a range of other socio-cultural variables has also been noted by the World Bank (2007); Kuruvilla and Joseph (1999); Erb and Harriss-White (2002). Current survey methods are unable to minimise and/or account for these factors. They are not only unsuccessful in providing a reliable picture of prevalence rates of disability, but there is also a greater likelihood of the identification and reporting of some easily identifiable impairments, while others remain hidden. Thus, it is difficult to state if differences in estimates provided by various data-sets are ‘real’ differences in impairments or due to other factors. Moreover, societies where extended kin groups retain significant rights and obligations (as in much of Indian society) the impact of disability will be broader than where kinship groups are smaller

and more individuated¹. This is likely to impact on people's willingness to disclose disability within a family. More importantly, this lack of reliable estimates has an impact on the kind of policies and provisions that are framed for people with disabilities and indeed those for their families.

Even though current disability figures are not the most reliable, it is noteworthy that national prevalence rates suggest that about 35 percent of people with disabilities are in the 10-29 years age group. By comparison with 1991, incidence rates amongst the 0-9 age group have shown a decline, but there has been an increase in the incidence rates among the age groups of 10-29. The decreasing trends could be attributed to immunization coverage for polio eradication, especially since the figures for movement disabilities among the 0-4 age group in 2001 are well below those for the 5-9 and 10-19 age groups. The increasing rates among young adults could be due to factors such as accidents, on the road and/or at work². This raises important issues of access to education and a need for focusing on transitions (educational, socio-emotional, physical etc.) for young people with disabilities in later years.

In this paper I begin with an overview of the current educational status of children with disabilities in the Indian context. I then undertake a very brief historical review of governmental efforts to highlight how these have shaped current policies and programmes. The paper then provides an in-depth and critical examination of efforts being undertaken under the *Sarva Shiksha Abhiyan* (SSA) towards the education of children with disabilities. This focus on SSA is essential as it is currently heralded as the biggest educational movement in the country and hence examining its approach towards the education of children with disabilities brings forth important issues. Discussions here focus on issues of access, but also raise important concerns about the quality of education being delivered. The paper also examines the role of the non-governmental sector in educating children with disabilities. It also reflects briefly on the rates of participation in early childhood education. In keeping with the diversity that underpins the social, cultural and economic make up of India, the paper highlights the vast inter-state variations in responding to the educational needs of children with disabilities. It then concludes by attempting to bring together a range of disparate themes to suggest the fundamental dilemmas faced in planning and providing for children with disabilities and discusses some ways of moving forward. It is important to note here that there

¹ See Singal (2007) for an extended discussion on the cascading impact of disability on the individual's family.

² See Singal (2008) for a detailed discussion on these trends.

is currently a significant lacuna of knowledge in the field of special and inclusive education in India. Hence this paper draws primarily on government documents, work conducted under the purview of international organisations and limited academic research.

Current educational status of children with disabilities

Differing combinations of structural factors (such as caste, gender, religion, poverty etc.) intersect with disability resulting in varied individual experiences, but the broad commonalities that shape the lives of people with disabilities in India transcend these divisions. Their lives are largely marked by poverty and marginalisation from mainstream social processes. A recent study by the World Bank (2007), for example, noted that children with disability are five times more likely to be out of school than children belonging to scheduled castes or scheduled tribes (SC or ST). Moreover, when children with disability do attend school they rarely progress beyond the primary level, leading ultimately to lower employment chances and long-term income poverty.

Government documents also describe marked variations in the provisions envisaged for different marginalised groups. Historically, SCs/STs have had a strong political lobby since independence and this is reflected in the provisions made for them. Article 46 of the Constitution makes a straightforward commitment to promoting the 'special care and education' of SC/ST populations, whereas Article 41 referring to children with disabilities, states:

The State shall within the limits of its economic capacity and development make effective provision for securing the right to work, old age, sickness and disablement.

The clause, *within the limits* of the State's economic capacity and development, greatly reduces the expectation of urgent action that is seen in Article 46. Such caveats have had a significant impact on the national planning process. Majumdar (2001: 123), analysing educational provisions for various disadvantaged groups across different states, sums up the scenario for children with disabilities as:

Apparently, nothing is available other than a few government scholarships, facilities in the form of a couple of institutions for boys and girls and institutes

for training teachers for the disabled...for the mentally disabled, no conscious developmental scheme is focused on by any of the states.

Even though various efforts have been made in the recent past, both the rates of educational participation and outcomes of education, remain very poor for children and young adults with disabilities. Illiteracy rates for this group remain much higher than the general population and school attendance continues to lag behind that of non-disabled peers.

Based on NSS data, the World Bank (2007: 64) report categorically states that, “it is very clear that both educational attainment of all PWD and current attendance of CWD are very poor and far below national averages”. Data suggests that people with disabilities have much lower educational attainment rates, with 52 percent illiteracy against a 35 percent average for the general population. Illiteracy levels are high across all categories of disability, and extremely so for children with visual, multiple and mental disabilities (and for children with severe disabilities across all the categories). Equally, the share of children with disabilities who are out of school is around five and a half times the general rate and around four times even that of the ST population. Even in states with good educational indicators and high overall enrolments a significant share of out of school children are those with disabilities: in Kerala figures stand at 27 percent and in Tamil Nadu it is over 33 percent. Data also indicates that across all levels of severity, CWD very rarely progress beyond primary school.

Policy developments: historical review and current trends

Analysis of various government reports and policy documents clearly suggests that international mandates and policy frameworks have provided a significant impetus to efforts undertaken at the national level. The UN General Assembly’s declaration of 1981 as the International Year of Disabled Persons; proclamation of 1983-1992 as the Decade of the Disabled by UN; followed by the UNESCAP Decade of the Disabled Persons from 1993-2002; and subsequently the World Conference on Special Needs Education in Salamanca in June 1994, have all played an important role in bringing the spotlight on to people with disabilities, especially on education as a vehicle for integration and empowerment. Not surprisingly, many of these mandates have shaped new national legislations and policies. Here the following four legislations have had a significant impact on the government and the NGO sector, of these the first three are specific to people with disabilities:

- *Rehabilitation Council of India Act (1992)*: states that CWSN will be taught by a trained teacher.
- *Persons with Disabilities Act (1995)*: educational entitlement for all CWSN up to 18 years in an appropriate environment.
- *National Trust Act (1999)*: provide services and support to severely disabled children.
- *The 86th Constitutional Amendment (2007)*: free and compulsory education to children, up to 14 years.

These legal mandates have also helped shape the comprehensive National Action Plan for Inclusion in Education of the Children and Persons with Disabilities (MHRD, 2005), and the National Policy for Persons with Disabilities in 2006 (an MSJE initiative). While some have argued that India has one of the most progressive disability policy frameworks amongst the developing economies, I would note that there remains a huge challenge in operationalising this vision, which is in itself marked by contradictory and conflicting messages. Thus, there is a need to critically re-examine some of the assumptions that have underpinned these frameworks. For example, while the PWD Act makes an attempt at purporting a rights-based approach, the guidance in achieving the vision it offers is very weak, and there remain too many caveats. Additionally, the Act lacks any strong enforcement mechanisms.

Singal (2006a: 357) undertaking an analysis of two Government reports, nearly two decades apart—the Sargent Report produced in 1944 and written prior to independence (Central Advisory Board of Education, 1944), and the Kothari Commission (Education Commission, 1966)—highlights the government’s approach towards the education of children with disabilities. Both these reports recommended the adoption of a “dual approach” to meet the educational needs of these children. These reports suggested that children with disabilities should not be segregated from normal children; rather, integrated education should be adopted. The Kothari Commission observed that “many handicapped children find it psychologically disturbing to be placed in an ordinary school” (Education Commission, 1966, p. 109) and in such cases they should be sent to special schools. The Sargent Report also endorsed similar recommendations. Thus both these reports stressed the need to expand special and integrated facilities. This dual approach continued for the next 20 years and was reaffirmed in the National Policy of Education (MHRD, 1986). Section IV of the National Policy of Education entitled “Education for Equality” states that “where feasible children with motor handicaps and other mild handicaps will be educated with others, while severely

handicapped children will be provided for in special residential schools” (MHRD, 1986: 6). A similar focus is articulated in the Persons with Disabilities Act, 1995 (Ministry of Law and Justice, 1996), which notes that, “it [the Act] endeavours to promote the integration of students with disabilities in the normal schools” (p. 12) and also promotes the “establishment and availability of special schools across the nation” (p. 12) in both Government and private sectors.

Over the years, the government has launched various programmes and schemes to meet its commitments towards the education of children with disabilities. Among the first of these efforts was the Project Integrated Education of the Disabled Children (PIED) launched in 1987 in collaboration with UNICEF, in 10 blocks in 10 States and Union Territories across the nation. Taking note of the outcomes and recommendations of the PIED, the Integrated Education for Disabled Children (IEDC) scheme, which was initially launched in 1974, was subsequently revised in 1992. This scheme was shifted from the Ministry of Welfare to the Department of Education and greater assistance was provided to children with disabilities in mainstream schools. The IEDC is currently operative and offers financial assistance towards the salary of teachers, assessment and provision of aids and appliances, training of special teachers, removal of architectural barriers, provision of instructional materials, community mobilization, early detection and resource support (MHRD, 1992). It covers 15,000 schools and has enrolled a total of 60,000 children (RCI, 2000).

With India becoming signatory to the Salamanca Statement (UNESCO, 1994), the 1990s saw the rapid incorporation of the term ‘inclusive education’ in various official documents, reports published by institutions such as the NCERT and media. The background paper of a workshop organised by the RCI stated:

while special education began in India with the establishment of special schools, it was in 1960s–1970s that integrated education began to be advocated; however, after 1994, inclusive education is strongly recommended (RCI, 2001: 2).

This focus on inclusive education is evident in the approach adopted by the District Primary Education Programme (DPEP). At a national workshop organised to discuss the role of inclusive education, the Director of Elementary Education and Literacy argued:

Zero rejection policy had to be adopted as every disabled child had to be educated. But multiple options could be used ... [these] include inclusive

education, distance education, home-based education, itinerant model and even alternative schooling. (DPEP, 2001: 3)

The *Sarva Siksha Abhiyan*, SSA (into which DPEP was incorporated) thus extends the dual approach historically adopted towards the education of children with disabilities, by propagating a “multi-optional delivery system”. It categorically brings the concerns of children with disabilities, or those it terms as “children with special needs (CWSN)³” under the framework of “inclusive education” (IE):

SSA will ensure that every child with special needs, irrespective of the kind, category and degree of disability, is provided education in an appropriate environment. SSA will adopt ‘zero rejection’ policy so that no child is left out of the education system. (SSA, 2007:1)

SSA further extends the range of options from special and mainstream/ ‘regular’ schools to Education Guarantee Scheme/Alternative and Innovative Education (EGS/AIE) and Home Based Education (HBE). Therefore the implicit assumption that inclusion should strengthen or enable mainstream educational participation of children with disabilities does not necessarily hold true in the model proposed by SSA. Rather it seems to advocate a stance that education should be imparted in an environment that is most suited to the child’s needs and there should be flexibility in planning. While the SSA objectives are expressed nationally, it is expected that various states and districts will endeavour to achieve universalisation in their own respective contexts and by 2010. It therefore offers each district flexibility to plan for activities aimed at educating CWSN, depending on the number of children identified and the resources available to effectively implement the IE programme. While such flexibility might be regarded as a positive step, it is not surprising that this has resulted in many different models of inclusive education operative across the country- raising concerns about the quality and effectiveness of provision.

This is particularly pertinent for the Indian scenario as the popularity of ‘inclusive education’, like in many other developing countries, can be attributed largely to Northern influences. Vislie (2003) states that since Salamanca ‘inclusion’ has become a global descriptor, and the international community, by signing the declaration has adopted its usage; however, there is no formally fixed and stable use of terminology. Indeed, whilst inclusive education is not a

³ When referring to issues of inclusive education, Indian documents refer to the education of children with special needs (CWSN). This term is not defined, rather is seen as being synonymous for children with disabilities (CWD).

given, it cannot be overlooked that this concept “has acquired increasing international currency, which poses the danger that wishful thinking about the way it is used or applied may distract people from exploring the realities of practice” (Booth and Ainscow, 1998: 3). Thomas and O’Hanlon (2001: vii) are even more critical in their reflections and note that the term is often used ‘merely (as) a filler in the conversation’ and ‘people can talk about “inclusion” without really thinking about what they mean’. These concerns resonate with the observations made by Kalyanpur (2007: 5) in her exploration of inclusive practices in India. She states that the usage of inclusive education highlights “a tendency to be ‘politically correct’ by taking on current trends in the west without a real or common understanding of their meaning, resulting in dilution of service quality”. While the terminology has changed, the principles and practices underpinning it have remained fixed.

SSA and its focus on children with special needs (CWSN)

The SSA lists 8 priority areas of intervention for inclusive education:

- 1) Survey for identification of CWSN
- 2) Assessment of CWSN
- 3) Providing assistive devices
- 4) Networking with NGOs/Government schemes
- 5) Barrier free access
- 6) Training of teachers on IE
- 7) Appointment of resource teachers
- 8) Curricula adaptation/textbooks/appropriate TLM

Here it is noteworthy that of the priorities listed, majority on these focus on issues of access, and only the last three are associated with classroom based ‘processes’, which in essence are vital in determining the quality of the educational experience. Each of these priority areas has received varied degree of emphasis in planning, and in most cases there is significant lack of information to evaluate the worthiness and success of these initiatives. In the following sections I cluster these eight priority areas under the broad sub-headings of ‘access’ (incorporating the first 5 points) and ‘processes’ (incorporating the last 3 areas) to critically examine the focus of government efforts and where possible, reflect on the realities of practice. It is important to stress here that the lack of empirical evidence in the field makes it very difficult to make any strong claims, however it is an opportunity to critically examine the underlying principles shaping these efforts.

Identification of CWSN

Similar to the discrepancies in estimates regarding the total population of people with disabilities in India, there are large discrepancies in the number of CWD identified between census data, school based records through DISE (District Information System for Education), and PAB survey aggregates used by the SSA. According to estimates made under SSA, around 1.5 percent of children in the 6-14 age groups have special needs, while the 2001 Census data indicates the proportion to be around 2.2 percent. The picture is more confusing when examined across the states where differences between identification rates are much higher. Data gathered for PAB 2005-06 suggests that in Rajasthan and Uttar Pradesh only 0.31 percent and 0.7 percent children have special needs, while the rates for Maharashtra and Himachal Pradesh were much higher at 2.45 and 2.3 percent respectively (figures quoted in World Bank, 2007). While these discrepancies could be attributed to different definitions, perceptions and indeed training of the enumerators, they do raise concerns about the effectiveness and reliability of the identification procedures.

The issue of identification of CWSN has been of main focus in SSA and reports note a steady increase in their numbers, as shown in table: 1.

Table 1: *Identification of CWSN*

Year	Total numbers identified as CWSN
2002-03	683554
2003-04	1459692
2004-05	1592722
2005-06	2017404
2006-07	2399905
2007-08	2621077

Source: Sarva Shiksha Abhiyan (2007)

While increased numbers suggest that there is a growing awareness of the concerns of CWSN, assumptions underpinning the process of identification and assessment need to be critically examined. SSA documentation does not provide a definition of CWSN rather it assumes that this group is synonymous with children with disabilities, as is evident from the Annex to the manual where different kinds of disabilities, which are the focus of inclusive education (IE), are listed:

- Visual impairment
- Hearing impairment⁴
- Mental retardation
- Locomotor impairment
- Learning disability
- Cerebral palsy
- Multiple disabilities and
- Others

Thus, the assumption here is that all disabilities will give rise to a special education need which must be identified and catered for. Interestingly, while the SSA has a category titled “Special Focus Groups Under SSA”, and includes CWSN, girls, SC and ST children, urban deprived children, children in difficult circumstances (street children, migrant children, etc.) it does not acknowledge the presence of *intersectionalities* between these groupings and how these might be addressed.

The naturalness of this grouping, of those identified as CWSN, is further reinforced by the immense faith placed in the knowledge of the ‘expert’. SSA (2007: 13) makes a distinction between formal and functional assessment, and states that these should be “done by a competent team comprising of doctors, eye specialist, ENT specialist, resource teachers and general teachers”. Here the complete absence of the voices of parents and the child is noteworthy. Such a belief in the ‘expert’ for CWSN is further supported by the existing structures of educational delivery and professional training. The assumption thus holds that within-child factors, such as her/his IQ result in her/his legitimate exclusion from the mainstream. This is then evident in the micro-processes of the classroom, where mainstream teachers draw rigid boundaries between ‘regular’ children and the ‘included’ child (Singal, 2006b). Thus, even though the argument that learning in an ‘appropriate’ environment is important, there is lack of critical reflection on what this appropriate environment might look like, and more significantly, who makes decision about where a child is appropriately placed. Also the current overly medicalised view of the CWSN takes the focus away from the learning needs of the child. The emphasis is largely on efforts directed at fixing child related factors through the provision of aids and appliances.

⁴ There is no clarification of the assumed difference between impairment and disability.

Issues of access and enrolment

The unreliability of data on the educational participation of children with disabilities is marked- both in terms of estimates in the school going age group and indeed the numbers actually attending school. Mukhopadhyay and Mani (2002) quote a NCERT survey, suggesting that about 84,000 children with disabilities were enrolled in schools in 1998; and unpublished data gathered for the MHRD suggested that approximately 55,000 children with disabilities were enrolled in schools in 1999. Hence these authors state that “the picture (of school enrolment for children with disabilities) is dismal” since (by these counts, and using the highest estimate of the total population of children with disabilities) less than 1 percent of children with disabilities attend school (p: 101). Even using the Census estimates for the total population of children with disabilities, rather than the 5 percent figure preferred by Mukhopadhyay and Mani, would only increase the figure of those attending school to about 2 percent of the disabled age cohort.

A position paper drafted by the NCERT (2005) notes that “the Office of the Chief Commissioner of Persons with Disabilities stated that not more than 4 percent of children with disabilities have access to education”. Yet the MHRD claimed in 2004 that 1.08 million children with disabilities were being educated, and by using a very low estimate of the total number of children with disabilities, thus arriving at an estimate of 67.5 percent of children with disabilities receiving education (MHRD, 2004). Again, a different figure would be found by using the Census estimates for the total number of children with disabilities, and the MHRD data would then suggest that around 28 percent of children with disabilities were enrolled in school.

These discrepancies are so huge– from less than 1 percent to over 67 percent – and so little information is provided in these sources about how the figures were calculated, that the obvious explanations (different definitions of disabilities, varying notions of education, whether enrolment or attendance data are used, and so on) are inadequate to make sense of what is going on.

According to the NSS 58th round (Jul.- Dec. 2008) 25 percent of the literate population of people with disabilities had received education up to the primary level (five years of schooling), 11 percent up to the middle level (eight years), while a mere 9 percent had nine or more years. Interestingly, enrolment ratios for those with disabilities aged 5 to 18 years in a

mainstream school were higher in rural areas than in the urban areas. This is not surprising because there is some empirical research to the effect that children with disabilities in rural areas are more likely to attend mainstream schools- referred to as “casual integration” (Miles, 1997). Moreover, it is also possible that with the advent of increased bureaucratic reporting children may get listed on the enrolment register but never attend school. The classroom for these children may remain an alien space in which they are not seen as equal participants.

In this section of the paper, I will draw primarily on the most recent data available, which is the DISE⁵ data 2006-2007. The reason for doing so is because lately DISE has become a regular and perhaps the only comprehensive source of data on children with disabilities. Together with information on enrolments, availability of ramp in schools, it also collects data by nature of disability and according to grade levels.

Data on children with disabilities in elementary classes collected under DISE reveals that their number varies from year to year. In the year 2003-04, there were 1.75 million such children as against 1.40 million in 2004-05. However, their number has always remained around one percent of the total enrolment in elementary classes. In 2006-07, about 1.42 million children with disabilities were enrolled in elementary classes across the country, of which 1.04 million were in primary and 0.38 million in upper primary classes. The percentage of children with disability, in primary, is 0.79 and in upper primary 0.80 of the total enrolment in these classes. The corresponding percentage at the elementary level is 0.80.

Nature and severity of disability

Table: 2 indicates the differences in enrolment according to the type of disability. Almost one in every three children with disabilities in elementary classes has some problem in moving (28.56 percent). About 24 percent are visually handicapped⁶, 12 percent hard-of-hearing, 12 percent disabled in speech, about 17 percent are mentally retarded and 7 percent have other

⁵ District Information System for Education database : In the districts covered under DPEP, computerised EMIS cells were established at the district level to create and maintain DISE database which includes a time series database on students’ enrolment, location characteristics of schools, teachers, school buildings etc. for each primary school in the district. The DISE began with coverage of 42 Phase I districts and provided the base level data for 1995-96. The DISE now covers more than 250 districts covered under DPEP/SSA, out of a total of 612. By the end of 2003, the coverage of DISE had extended to about 460 of the 593 districts (spared over 18 DPEP states) of the country. For more details on DISE see: <http://www.dise.in/>

⁶ The use of labels here is in keeping with the language used in the DISE survey.

types of disabilities. This percentage is quite similar to percentages in the previous year DISE data-sets.

Some interesting differences are evident as children make the transition from primary to upper primary classes. Compared to 20.79 percent of children with visual impairment in primary classes, their percentage in upper primary classes is as high as 32.87. On the other hand, figures for children with mental retardation show a significant decline in numbers.

Table 2: *Enrolment according to the type of disability*

Disability in	Grades		
	I-V	VI-VIII	I-VIII
Seeing	20.79	32.87	24.02
Hearing	11.69	11.04	11.52
Speech	13.04	8.28	11.77
Moving	27.28	32.09	28.56
Mentally Retarded	19.68	8.62	16.73
Others	7.51	7.10	7.40
% to total enrolment	0.79	0.80	0.80

Source: Compiled from DISE 2006-2007

The World Bank (2007) report drawing on the NSS data, further reminds us that the severity of impairment is an important variable, with almost three quarters of children with severe disabilities being illiterate and the same share do not attend school. At the other end, those with only mild disabilities, who do not necessarily need any aids/appliances or significant modifications in teaching and learning methods (TLM), close to one third of these are not in school. Thus, across the levels of severity, irrespective of the nature of disability, a shared picture of lack of progress beyond primary school emerges starkly.

More recently, there have been growing concerns regarding the type of school attended by children with disabilities and implications for their integration into society. Here debates have focused on mainstream or special schools, and more lately with the changing Indian educational landscape distinctions between the quality of schooling offered in private fee paying (called public schools) and government schools has also come under scrutiny.

Type of school attended

Mainstream and special: DISE data does not provide information regarding enrolment figures in special schools. Therefore relying on findings from the NSS data it is evident that while an overwhelming majority of children with disabilities attend a regular school, there is significant variation in terms of location. In urban areas around 11 percent of those with disabilities in the 5 to 18 years age group were enrolled in special schools, while this was less than 1 percent in rural areas. This reflects the recent growth in the number of special schools, especially in urban areas. In the early 1990s there were about 1,035 and nearly a decade later it was estimated that their numbers had risen to 2,500 (Rehabilitation Council of India, 2000)⁷. Majority of these are located in urban areas, with Mumbai having the highest number (Mukhopadhyay & Mani, 2002). Quoting somewhat higher figures, a 2003 DPEP report stated that there are more than 3,200 special schools throughout India. Interestingly, it further noted:

However, these special schools have certain disadvantages which became evident as the number of these schools increased. These institutions reached out to a very limited number of children, largely urban and they were not cost effective. But most important of all, these special schools segregated CWSN from the mainstream, thus developing a specific disability culture. (Janshala, 2003: 1)

Such reflections are very rare in government documents, which have largely propagated the development of special schools in India. Efforts under the SSA however suggest a change in the perceived nature and role of special schools, as they are increasingly being advocated as ‘resource centres’, with efforts aimed at greater collaboration between mainstream and special settings. SSA (2003: 20) elaborates on their new role as:

undertaking the task of providing consultative resource support to regular schools enrolling these (disabled) children. They (special schools) could also assist in many other areas or steps required for implementing inclusive education in SSA, such as teacher preparation or providing aids and appliances. Special schools may also assist in implementing IE activities in remote and difficult to access blocks and regions in a particular state.

The National Focus Group on Children with Special Needs (NCERT, 2006: 17) noted that, “Special and general education, in other words, are gearing for a significant move to come closer together”. However, evidence of such shift in practice is still lacking.

⁷ The Second Five-Year Plan (Planning Commission, 1956) stated that there were only 118 special schools across the country.

Even though special schools in rural areas remain largely absent, in a community based study (Singal *et.al.*, 2008) it was evident that the presence of a special school in a nearby town/city had a significant impact on the educational journeys of young people with disabilities. This study was undertaken as part of the Research Consortium on Educational Outcomes and Poverty (RECOUP⁷) and focused on examining the social and human development outcomes of education for young people with disabilities living in deprived urban and rural communities. Amongst other things, this research entailed in-depth interviews with 30 young people (15-30 years) with disabilities, namely visual, hearing and physical impairments, to focus on their educational journeys, experiences and its role in their current lives- ranging from employment, marriage to construction of self. Interviews were also conducted with their significant others, namely parents to develop a more holistic understanding of the lives of these young adults. Even though there is an absence of research which examines (compares and contrasts) the experiences of children with disabilities in special and mainstream settings, the DEPP study provides some interesting insights into the nature of young people's schooling experiences and their perceptions of current educational practices.

Some noteworthy trends in our sample were:

- Young people with visual impairments had completed the highest numbers of years of education. All of them, except the two young men living in the rural area who had never attended any school, had attended a special school for a considerable number of years at some point in their educational journey.
- Young people with hearing impairments had considerably less years of schooling; the highest class completed was only class 8. Their school journeys, unlike those of people with visual impairments, seemed more anchored in one system or the other, rather than shifts from special to mainstream or vice versa. While most of these young people had attended a mainstream school, two of them had studied in special schools.
- All our sample young men and women with physical impairments had received some school education and they had studied only in the mainstream setting.

During the interviews, young people and/or their significant others recounted experiences of

not being able to cope in the mainstream school because of the absence of adequate and appropriate resources (this seemed to be more evident in the accounts provided by those with visual impairments). Raj Singh, a visually impaired man who had completed two years of a BA degree and had experienced both mainstream and special settings, contrasted these settings as:

the difference is that in the special school everyone was like us...everything was taught according to our levels...there was no problem of blackboards and so on...there everything used to be explained orally and practically...there were teachers...they were all in touch with us...they knew Braille also...and whatever could not be understood through Braille, they used to touch and hold with their hands and explain...like, made one stand up...when explaining some map, the teacher also stood up...then turned him this side, that side...said that this looks like this, looks like that...but in a normal school what happens is that the teacher explains on the board...but that I used to be able to understand because I had already studied in a special school till class 10.

Such accounts of lack of resources, suitable facilities, inability of teachers to adapt their teaching abounded in mainstream experiences. These experiences seemed to encourage some young people to lend support to the functioning of special schools, but on being probed further they highlighted the need for more mainstream participation for people with disabilities. Their support for special schools seemed to be based not on the merits of this system, but as a reaction to the inadequacies of the mainstream. This is well illustrated in the argument put forth by Raj Singh:

special school is good for the visually impaired till a point till when he becomes sensible...after that a general school is much better for him...because in the special school one can only get the knowledge as much as would be provided by the teachers...and in a general school along with studies, outside knowledge, outside environment, living style, meeting different kinds of boys and having different experiences...then one can deal with the difficulties that one faces after coming outside very easily...how to talk to whom, how to do what...one would have ease to understand that...and one would find it beneficial to make his own friend circle that how to deal with normal people.

Nonetheless, inaccessibility of the mainstream in terms of the teachers' unwillingness to teach, inappropriateness of the pedagogy adopted and irrelevance of the curriculum followed resulted in the child dropping out and/or shifting to a special school. The lack of suitable facilities and trained teachers seemed to be the biggest challenge in making this feasible. These factors were also reiterated in the accounts provided by head teachers of schools in the vicinity, and have also been discussed in other classroom based studies on inclusive education in other parts of India (Singal, 2008).

However it is important to reiterate here that the choice for the majority of children with disabilities is not between accessing a special or mainstream school, rather between no schooling or attending a mainstream school. Thus, at a time when majority of the current share of CWD are attending a regular school⁸, there is a need to promote quality education in these settings.

Private and government schools: Another recurring theme in many of the accounts in the DEPP study was the issue of private and government schools. There were accounts of children being withdrawn from special schools as the fee being charged was not affordable. In many cases parents were aware of the special schools (both private and government aided) available in Indore (30 km away from Dewas and easily accessible by public transport) but the financial conditions of the family did not allow them to spend money on one child's education. In many cases, the young people had preferred the private mainstream school, but the pull factor of government schools was in terms of absence of school fees and indeed the disability benefits that students were likely to access through various schemes. The parent of a young person with physical impairments was advised by the private school teacher to shift his child to the government school so that he could get a scholarship and other benefits. However what was most striking was the marked difference in the perceived quality of provision in government and private schools. The difference between those residing in rural and in urban areas was not in relation to special versus mainstream settings, but in terms of their experiences in government and in private schools.

In O'Keefe's account of the World Bank's village survey conducted in Uttar Pradesh and Tamil Nadu he notes that "the share of CWD in private schools is rural UP and TN is only

⁸ Of the 5-14 year olds children with disabilities attending school, 94.3 percent are attending a regular school and 5.7 percent are in a special school- according to figures given in World Bank (2007) based on NSS 2002 data.

slightly less than for children without disabilities”. He goes on to argue that “the result is interesting in that parents of CWD who are in school seem equally willing to make the investment in private education despite the factor that labour market outcomes of PWD are so obviously worse” (World Bank, 2007: section 3.19). Qualitative data from DEPP allows for a closer examination and understanding of this trend. While it would be unwise to argue against O’Keefe’s point of low returns in the labour market as a significant majority of the young people in our study, irrespective of their levels of schooling, remained unemployed, however in-depth accounts from parents and the young people elucidated the many perceived benefits of education, which seemed to shape their willingness to invest in the child’s education. Parents argued for a need to educate their child with disabilities out of a necessity to reduce their dependency on others. Most of these young people were first generation learners, and grew up in households where they had been ‘privileged’ to attend school, because of a range of reasons. In such instances, the pursuit of education was driven by a belief that it would lead to job opportunities and better life conditions (marked by less dependency on their families-parents and siblings). Young people with disabilities who had been to school elucidated its many benefits in terms of ability to make friends, and indeed the respect and dignity it accorded them in social interactions. Quotes from different interviewees capture the immense faith placed in schooling.

Mother of Sangeeta, a young woman with visual impairment who had completed her graduation...*“if she will study then only people will ask for her otherwise not. If she studies and gets a job then good people will take her, otherwise no one will take her. She does not even have eyes then who will take her? But if she studies and gets a job then she will have value and she can marry. Otherwise who will bother”*

Anant, a young man with visual impairment who had passed Class 10... *“If you have education then you can do anything. Without education you can do nothing”*.

Pramod, a young man with physical impairment who had completed BA first year...*“The benefit from school is that from education and studies one gets information. See, the one who is educated, he will know about history, about the past, the meaning of the present, he will get knowledge from schooling, and after getting knowledge one can give it to others ... Education is very important in life”*.

While statistical figures capture an increase in the numbers of children with disabilities accessing schooling, they make invisible concerns about the quality and effectiveness of the schooling experience.

Provision of aids and appliances

Government efforts over the past few years have been largely focused on increasing access, taking attention away from factors which have a direct impact on the quality of education imparted in classrooms. The First Joint Review Mission of SSA in 2005 (Department of School Education and Literacy, 2005), commenting on the education of children with disabilities, noted:

whilst invariably improving, coverage remains incomplete and an examination of the physical and financial progress reported by States thus far for the current year shows implementation to be poor, suggesting that this area is not receiving sufficient priority. Interventions reported tend to follow a medical model with attention to providing aids and appliances to physically challenged children.

Similar views were expressed in the Third Joint Review Mission for Bihar undertaken in Jan. 2006, where it was noted that while enrolment was being considered “attention will now need to be given to the provision of quality education to children with disabilities” (Department of School Education and Literacy, 2006). Thomas, reporting a conversation with a government official, states that:

the significant financial resources allocated to the SSA programme were actually a problem,... there is great pressure on education staff to spend, and be seen to be spending, their budgets. The result is that money is thrown at very visible and easy areas. Shiny new ramps and rails are a suitable quick fix.

(Thomas, 2006: 45)

In both, DPEP and SSA considerable attention has been given to the provision of aids and appliances. The SSA (2003) provides a one-page “List of aids and appliances required by children with special needs” for four impairment types- visual, hearing, orthopaedic and intellectual. These aids and appliances are largely directed towards equipping the child’s functioning (day-to-day and educational), through the provision of aids such as white cane, hearing aid and thick pens. This document also notes the provision of 500 rupees to teachers to develop low cost teaching and learning materials

to meet the educational needs of a CWSN in a regular classroom. The main focus however remains on the distribution of wheel chairs, crutches, braces etc.

SSA (2007) notes the increased distribution of aids and appliances to children with CWSN (see table: 3).

Table 3: *Distribution of aids and appliances*

Year	Distribution of aids and appliances to CWSN
2003-04	121,467
2004-05	286,922
2005-06	370,397
2006-07	711,971
2007-08	832,828

Source: *Sarva Shiksha Abhiyan (2007)*

While provision of these is indeed very useful and enhances the functional capacity of many children, again these statistics give an incomplete picture. Quoting a study undertaken in Gujarat, Thomas notes that only 25 percent of the people with disabilities were using aids and appliances (Thomas, 2005). People found it difficult to access these provisions, as rehabilitative services tend to be concentrated in urban areas, and the devices given were inappropriate, difficult to repair and maintain in rural areas. Appliances from the Artificial Limbs Manufacturing Corporation of India, the government provider, were generally recognised as being poor in quality, and accessing them was time consuming and bureaucratic. This becomes especially problematic for young people, who would require replacements at regular intervals, especially of some prosthetic devices, such as artificial limbs and wheel chairs. Also there is much more to be done in making people aware of these provisions. In the UP and TN village survey conducted by the World Bank, the team noted that 72.3 percent of households with disabilities were not aware of the schemes for free aids and appliances- rather it is observed that “while assistive technologies are a right under the SSA, they are in practice rationed, making them instead a privilege” (World Bank, 2007). Similar concerns regarding the quality of physical provisions are raised in SSA’s Sixth Joint Review Mission report, which noted that:

Ramps have been constructed in over half of all schools- over 500,000 schools – in an attempt to make schools barrier free but the quality of ramp construction including the quality of the surface and the angle of the ramp remain a question mark.

These observations are no different from the findings of a research conducted across 41 villages in Andhra Pradesh. Of the 1,843 people with disabilities surveyed, only 123, or less than 7 per cent, had received any kind of disability aids and appliances during their entire lifetimes. The ones who had received some aids were not given these free of cost, rather they had to pay or bribe officials. Also, the design of these was not suited to rural settings and equipment such as tricycles were difficult to manoeuvre and maintain in the undulating, untarred, stony rural pathways. Only eight persons with hearing difficulties had received hearing aids, but the quality of these was poor. People complained of these devices echoing noisily in their ears, causing frequent headaches, and the little gadgets often broke down. Therefore all the users covered in the survey ultimately had abandoned their use (Mander, 2002).

Process based issues

As noted earlier, government efforts have been primarily focused on issues of access, which are easier to address. However, a focus on access is only the first and not the most difficult step in bringing CWSN into the education system. In order to bring about an effective change in the culture of the classroom that is responsive to learner diversity there is a need to address process based issues- issues which impact on the teaching and learning processes. Within the SSA framework the focus is on teacher training, resource teachers and adaptation of teaching and learning materials. Each of these factors is now discussed, however it is important to note that there is lack of evidence in how many of these factors are being implemented in practice.

Training of teachers

There is currently no pre-service training offered to regular teachers' which familiarises them with the education of CWSN; the focus is only on providing in-service training. Under SSA this training is varied and ranges from 1-2 days, 3-5 days or 45-90 day orientations. There is as usual a large inter-state variation as evident from table: 4. Analysis of the content of these training programmes highlights the very basic nature of the 1-5 days orientation, which covers merely issues of identification and management, but is the most preferred medium in

preparing teachers. While the number of teachers undertaking the 45-90 days foundation course has remained very low. As of 2005 less than 0.2 percent of all SSA teachers had been through this larger programme (quoted in World Bank, 2007), raising concerns about the effectiveness of such programmes impacting pedagogical practices.

Table: 4. Teacher training on IE in SSA

Name of the State	No. of Teachers	1-2 day orientation on IE	% of 1-2 day orientation	3-6 day training	% of 3-6 orientation	45/90 day training
AP	277724	161031	58	223604	81	633
Assam	154010	154010	100.00	86824	56	540
Gujarat	174504	174504	100.00	25816	15	5116
Punjab	73246	0	0.00	0	0.00	300
Uttarakhand	44917	38170	85	42465	95	9587

Source: Sarva Shiksha Abhiyan (2007)

While there is lack of empirical research evaluating the effectiveness of these teaching training programmes various studies in the field suggest that teachers do not feel confident in teaching CWSN (Singal, 2006b). Moreover, it can be argued that the model being adopted by SSA is further deskilling mainstream teachers by assuming that the educational needs of CWSN are not the primary concern of the general teacher, rather they need to be addressed by a resource teacher or indeed teachers in special schools. This deskilling of teachers is recognised in the NCERT (2006) paper which recommended that there is a need to, “gear all teacher education programmes (both pre-service and in-service) to developing the pedagogical skills required in inclusive classrooms”, the document goes on to categorically state that:

Make the class teacher responsible for all the children in the class. In case special support is required on account of SEN, this should be in the form of assistance to the class teacher (p.30)

Even though the quality of teaching is becoming a concern for all children (NCERT, 2007), and there is growing international research evidence to suggest that pedagogical practices adopted for children with disabilities are primarily good teaching practices for all children,

the government continues to largely neglect this area. NCERT (2006) provides useful reflections when it notes that:

In India, the concept of Inclusive Education has not yet been linked to a broader discussion of pedagogy (Anita, 2000) and quality education (Taneja, 2001). Any broad reform in education cannot be implemented without taking the inclusion of learners with SEN into consideration (p. 33)

By fundamentally revisiting its conception of teaching and learning for CWSN the government can make plans for more effective teacher training which can work at scale, especially in rural areas rather than solely relying on the resource teacher model, which is too limiting in outreach.

Resource teachers

Government plans regard resource teachers as essential in facilitating the education of CWSN. SSA (2003: 18) elaborates on their roles and responsibilities by stating that:

...(they) are specially trained teachers capable of teaching children with special needs in all settings. Their main role is to provide remedial assistance to a child in those content areas in which he/she is having comprehension problems in a regular classroom. This assistance is ideally provided in a resource room. A resource teacher also advises the general teacher on how to cope with the needs of special children in the regular classroom.

The functions identified for these teachers mainly focus on diagnostic issues, teaching children with special needs either during or after school hours and also helping the regular classroom teacher by suggesting various modifications to the curriculum and adaptations to teaching strategies.

There is however little evidence from the field to highlight the effectiveness of resource teachers. A growing body of literature from countries such as UK highlights the many pitfalls in such an approach. Firstly, the tendency to attribute the resource teacher as being in-charge of CWSN continues to frame them in an 'expert' role, where it is perceived that only these teachers have the requisite skills and knowledge to work with CWSN, further deskilling the regular teacher. Secondly, while collaboration between special and regular teachers is desirable there is much documented evidence to highlight how challenging such collaborations can be due to distinct professional identities. Both these issues remain

unaddressed in the Indian context. Rather recent years have seen a rapid increase in the number of resource teachers (as evident in Table: 5).

Table 5: *Number of resource teachers for IE under SSA*

Year	Resource teachers for IE
2004-05	4693
2005-06	5325
2006-07	6678
2007-08	7459

Source: Sarva Shiksha Abhiyan (2007)

However, evidence from the field suggests that even these numbers remain short of those required at a national level. A presentation made by an official of the MSJE (2007) highlights this inadequacy, by noting that currently there are “1 teacher for 182 children”, but the desired requirement for teachers for CWSN is “1 teacher for 8 children”.

The final process related factor identified in the SSA priority areas relates directly to issues which have an immediate impact on the classroom environment- curriculum, textbooks and teaching-learning materials. In majority of the cases the SSA documentation does not give any details of what is expected in this regard, rather the tendency seems to be on either encouraging special teachers to work alongside mainstream teachers in adapting the curriculum, or shifting the child for certain amount of time from the mainstream classroom to a resource room for “remedial tutoring”, such as “a visually impaired child may not be able to read from the blackboard what the teacher writes, when teaching mathematics. He/she may be taken to the resource room and taught the use of pertinent equipment and explained the methodology of solving a particular problem” (SSA, 2003: 11). Thus, the focus is primarily on the child to enable her/him to cope with the curriculum etc rather than bringing about substantial changes within the classroom processes in order to respond to differentiated needs. Even though the National Curriculum Framework for School Education (NCERT, 2000) categorically recommended inclusive schools for CWSN by making appropriate modifications in the content, presentation and transaction strategies, preparing teachers and developing learning-friendly evaluation procedures- these concerns have not been addressed in any sustained depth within the Indian setting. These are important concerns, which have

yet to be acted upon in practice. However, an area which has received greater attention is the issue of assessment, where certain concessions are given by different states to CWSN, such as “providing a writer/amanuenses to the visually impaired, dyslexic or physically challenged children, allowing additional time for writing a paper to blind, physically handicapped and dyslexic students and permitting the hearing impaired children to study only one language” (SSA, 2003: 20). However, the inadequacy of efforts aimed at influencing the TLM processes is recognised within the SSA documentation (SSA, 2007: 6), where it is noted that “classroom practices and teaching methods adopted by teachers for effective classroom management of CWSN” have remained neglected and it is important to address these issues.

In addition to the above discussed issues, two additional aspects which have gained increased prominence in the government’s approach to the education of children with disabilities are home based education and the role of non-governmental organisations.

Home Based Education (HBE)

Heralded as “New paths in Inclusion” HBE has a central place in SSA, and is defined as:

The education of children with severe intellectual/physical disabilities, who can be educated in the combination of home-based and alternate educational settings to enable them to achieve independent living skills.

(SSA, 2006: 5)

Even though the government is highly supportive of this endeavour, the rationale for HBE is based on a very fuzzy account. SSA (2006: 6) notes that, “Although, no evaluation/impact assessment studies are available to gauge the efficacy of HBE programmes, research highlights the following advantages...”, the document lists these as “parents become effective teachers”, “progress in overall development” etc. However, the ‘*research*’ evidence this document draws upon is not stated (or even referenced).

The justification put forth for HBE argues that children attending these provisions will never respond to the demands of an academic curriculum and require alternatives, and they also need the support of a peer group that is more like they are. The same document however purports the aim of HBE as “school preparedness and preparation for life”. These inherent contradictions remain overlooked in the rationale and aims of the home based programme.

Additionally, it is unclear how parents, especially from low income families, with little or no education and with other pressing concerns of income generation will be equipped to take on the role of parent-teachers.

Official statistics note that a total of 61,290 CWSN have been covered through this arrangement. Table: 6 highlights the significant inter-state variation, where states such as West Bengal and Tamil Nadu have pushed forward HBE in a big way.

Table: 6. CWSN provided through HBE

Name of state	CWSN provided HBE
West Bengal	20,000
Tamil Nadu	16,718
Karnataka	5,092
Orissa	4,655

Source: Sarva Shiksha Abhiyan (2006)

Various states have undertaken this task in different ways, for example, Himachal-Pradesh and Uttarakhand are using NGOs for this purpose while Tamil- Nadu is using special schools as resource centres to provide short-time or part-time help to individual children with special needs and their parents. There is however a need for evaluating the effectiveness of these approaches in practice.

Increasing role of the Non Governmental (NGO) sector

A key player identified in the SSA plans for fulfilling the vision of IE is the NGO sector. NGOs have played a central role in the development of educational provisions for children with disabilities across the globe and more so in developing economies, such as India. Not only has their involvement been historically revered as bringing the concerns of this marginalised group into the spotlight, they continue to have a significant impact on current practices. Both the IEDC and the DPEP clearly outlined the involvement of NGOs in a range of activities encompassing community mobilization, early detection, to the delivery of services. This focus has been maintained under the SSA where convergence with NGOs is highly encouraged to implement the goals of the framework for IE (SSA, 2005).

Data suggests that the number of NGOs involved in IE under the SSA has steadily increased from 470 in 2004-05 to 796 in 2007-08. These organisations are identified as being important players in:

- providing aids and appliances to CWSN
- planning and management of inclusive education and
- resource support

While NGOs continue to be the sole players in the delivery of special education through grants-in-aids received from the government, particularly the MSJE⁹, their involvement is being actively sought in efforts towards changing the role of special education centres and in meeting the goals of mainstreaming. SSA (2005) outlines three ways of facilitating these developments:

- Developing special schools as resource centres,
- Greater links between mainstream and special schools, and
- Greater overlap between training for special and general teachers.

While these are laudable aims, little attention is being paid to the presence of the required expertise needed to bring such changes in their functioning. Alur (2007) reflecting on some of these concerns notes that NGOs might themselves be acting as barriers to inclusive education as their work is anchored in the field of special education, which is “dominated by technique and mystique¹⁰”.

Additionally, even though there has been an increased involvement of NGOs in some states, there is limited systematic documentation of their success at the level of practice- an aspect which is currently overlooked in the monitoring mechanisms of SSA¹¹. Moreover, by continually allocating responsibility to the NGO sector the government has in effect further marginalized CWSN from the mainstream and led to a dilution of services. Majority of these

⁹ It is important to point out here that special schools are not run by the government, rather NGO are given grants to set up these schools. These grants are given by the MSJE and not the MHRD. It is the former which is responsible for special education, and the latter (within it the Department of Education) is responsible for the education of children with disabilities in mainstream schools.

¹⁰ The field of special education is criticised by many as working in ways which reinforce its ‘exclusivity’ and ‘expert status’, thus excluding others who are seen as non-experts.

¹¹ SSA (2005) recognises that there is a need for ‘research studies, periodic monitoring and evaluation of IE programmes’ (p.66), and the need to draw on the expertise of the NGOs, however it does not recognise the need for greater mechanisms for monitoring the work of the NGOs themselves.

NGOs tend to be perceived as ‘public acts’¹² of charity and their focus is limited to delivering life skill activities rather than education for better life opportunities. SSA (2005) alludes to these concerns by noting that:

...yet there still remain areas where they [NGOs] need to play more pro-active role. These include providing quality inclusion to CWSN inside the classroom....overall impact of IE on the learning achievement and level of inclusion achieved by CWSN.

Thus there is a need and growing urgency to examine the role, purpose and quality of provision offered by these organisations.

Early Childhood Education (ECE)

As per Census 2001, there are approximately 60 million children in the age group of 3-6 years. While the 86th Amendment to the constitution does not cover children less than 6 years of age, the government acknowledges that there is a need for early childhood care, crèches and pre-school initiatives for this group, especially for those belonging to deprived communities. The government has been attempting to meet this commitment through the Integrated Child Development Scheme (ICDS). ICDS along with a few private initiatives covers approximately 34 million children and discrepancies in provision are widely varied according to location (rural-urban divide) and quality. Because of the involvement of the unorganised private sector (alongside the state sector largely through the Department of Women and Child Development) for which no statistics are collected, the data on early childhood is extremely inadequate (Aggarwal, 2008).

According to the NSS, 58th round (2005), the proportion of persons with disabilities aged 5-18 years who attended a pre-school intervention programme was only about 13 percent of the total population of persons with disabilities (NUEPA, 2008: 32). Of these 20 percent were in urban areas and only an estimated 11 percent in rural areas. Not only has the outreach of the ICDS been limited, its pre-school component (known as *Anganwadi*) has been very weak with high repetition and low learning levels. Research also indicates that children with disabilities are not found in the *anganwadis* and the workers here are not trained in handling

¹² Notably many of these NGOs are also recipients of food, old clothes and money from the wider society, gifts which are driven by a cultural expectation of doing one’s duty towards the needy in the same spirit as one would give alms to beggars.

their needs. Noting the lack of government focus on ECCE for CWSN, recent years have seen increased demands for revamping the existing ICDS scheme (Alur, 2007).

State level variations in educational provisions

Even though consolidated state level figures seem difficult to find, a review of various state level reports on SSA (which are themselves of varying quality) indicate a range of different approaches and varied levels of progress. Govinda and Bandyopadhyay (2008) in their country level analysis of elementary education note that while almost all states have taken steps to identify children with disabilities and provide for them in regular schools there is considerable variation in efforts.

For instance, Himachal Pradesh began a push towards IE in 1999-2000. A total of 25,476 children have been identified as CWSN which is 2.34 percent of the total school going population at elementary level. At present, 23,011 of these have been integrated in mainstream schools and those out of school (2,465) are being brought into the system using different strategies, such as alternative schooling etc. A recent NCERT report notes that, “the State has done some commendable work in the area of IE. Some activities like undertaking survey for identification of CWSN, training teachers through the foundation course, converging with a large number of NGOs and assessment camps for CWSN are specifically being carried out by the State. Besides capacity building of teachers, organizing camps and day care centres, it has also started HBE for severely disabled children. TLM, books and aids and appliances have been given as per the need”.

Similarly, the state of Andhra Pradesh has also given high priority to the integration of CWSN into regular schools. As many as 211,189 children in the 5-14 year age group were found to have disabilities at the time of the survey in 2000. Out of these, 154,610 were enrolled in schools. Teachers had been trained to identify such children and respond to their special educational needs. In addition, efforts are continuously being made to prevent educational disadvantage due to disability through early intervention at a pre-school stage and early detection followed by suitable assistance. In this state, NGOs have been active in the area of disability since 2000. Currently there are nearly 474 NGOs and 141 of are receiving grants-in-aid from the government.

Another state which has taken up activities on all the aspects of IE is that of Orissa. In fact some novel initiatives have been taken up such as like setting up of assessment camps for identification of impairments, issuing of disability certificates and provision of aids and appliances. Additionally, the state has also undertaken training of teachers for developing individualised educational plans (IEPs¹³). It has shown good coverage of CWSN through various modes, though identification has remained low. In 2007- 08, 103,276 children were identified as having a special need, which is 1.53 percent of the total child population.

However, it is unclear why some states show better performance on various indicators of IE than others. For instance, Jharkhand, which by virtue of being a DPEP state, has some initiatives like assessment camps, aids and appliances, teacher training etc., but has been largely noted as having a very weak strategy and approach towards IE. In 2007-08, the State identified 41,665 CWSN, which is only 0.6 percent of the total child population. Other States not performing well have a wide geographical spread and are not necessarily located in one region. The progress in Mizoram has also been slow and poor. In the year 2006-07, the State had identified only 4,838 CWSN. Even though its efforts have largely been focused on identification of CWSN and basic training of teachers, it has lacked a coherent approach to capacity building. Punjab has been similarly very slow in its progress. It has neither involved NGOs in the IE programme nor conducted intensive capacity building exercises for functionaries at the various levels to increase awareness on IE. However, few activities such as identification, assessment, aids and appliances etc. have been taken up. In the year 2006-07, the State had identified 46,320 CWSN which is 1.15 percent of the total child population.

Additionally, as noted in the World Bank Report (2007) there does not appear to be any correlation between a State's out of school population rate and the number of children with disabilities who are not attending school. Neither is there any clear pattern between state income levels and outcomes for CWD. These points are well illustrated by the fact that even States with excellent outcomes on their general child population such as Kerala and Tamil Nadu have very high out of school rates for CWD (as noted earlier in the paper).

¹³ An IEP is a statement which is jointly prepared by the special and general teacher, stating the needs, special services required and the possible achievement of a child with special needs within a specified time frame. It also states the most appropriate learning environment for the child. It is meant to be reviewed at regular intervals by the district/block level functionaries.

Even though large State level variations are evident it is very difficult to analyse the reasons for this patchy progress. Current macro level data collection exercises are not conducive to making claims about the reasons for progress or lack of it. However, efforts towards the education of children with disabilities in the Indian context have been facilitated and/or inhibited by a range of common factors, some of which I will critically examine in the final section of this paper.

Critical reflections: concluding thoughts and future possibilities

Need to move beyond redistribution to reorganisation

Efforts aimed at the education of children with disabilities in India have been largely framed by the distributive paradigm of social justice, where the focus has been on equality in terms of access and provision of resources (as evident from the overwhelming focus on aids, appliances and assistive devices). However working with such a conception of justice is rather limiting and has two basic flaws. Firstly, it is too individualistic in its perspective and locates the problem ‘within’ the child, and secondly it takes attention away from questioning how social structures and institutions uphold patterns of injustice.

On one hand, it can be argued that this focus on redistribution of resources and access is desirable and important, as children with disabilities tend to belong to the lower economic strata, and without these special schemes are likely to remain deprived of basic essentials. However, such a narrow focus on structural issues is wholly inadequate and does not deliver the whole of justice. Here the tendency is to ‘fix’ first level concerns, wherein access does not automatically deliver equality.

Evidence from efforts aimed at educating the girl child have highlighted that while ensuring basic conditions for ensuring girl’s access to education such as infrastructure is essential, there is also a need to focus on transformations in the curriculum and pedagogy. More recent research in this field has begun to challenge the role of schooling in reinforcing gender inequalities of socialisation and social control. This focus has been very useful in developing more nuanced debates around issues of quality of provision alongside concerns aimed at addressing gender equity. These second generation concerns, focusing on curriculum and

pedagogy, need to be become an integral part of efforts towards the education of children with disabilities. The current approaches which are largely directed towards identification of more children, transforming special schools into resource centres, or even shifting children to mainstream settings, are inadequate. The focus needs to shift from the outside to the 'inside'- we need to be concerned about what children are being offered in these educational settings and its relevance to the lives they would like to lead (rather than the kind of lives which we think are appropriate for them).

Another important issue which cannot be overlooked is the quality of general education being offered in Indian schools, which has come under scrutiny- flagging teacher morale, pedagogical inadequacies, rigid and irrelevant curriculum, high drop-out and repetition rates-highlight a pressing need which demands a critical engagement and re-examination of a general education system, which has failed to deliver its promise of greater equality. However, efforts towards addressing these issues cannot be seen in isolation from the socio-cultural context of education. Any attempt to develop a truly inclusive system (which extends beyond the narrow conceptions of education of children with disabilities as currently envisaged) ultimately requires a careful consideration of every aspect of schooling and societal context. It entails a need to address issues at macro, micro, and interpersonal levels. Here not only does society's conception of difference become important, but it also brings into critical focus the need to reflect on the responsibilities of schools, the attitude and role of teachers and indeed the vision of education for a developing society. Evidence from Singal (2006b) and Jha (2002) suggests that awareness of a concept, such as 'inclusive education' is no guarantee for ensuring that the desired teaching-learning practices are in place. Changes in the classroom require simultaneous development of reforms in professional development, curriculum, alongside a change in attitudes and beliefs as reflected in the culture of the school. While it is essential that teachers are made aware of and assisted in developing innovative teaching strategies, such a skewed focus on knowledge underplays the need for focusing upon and changing values, beliefs and attitudes. There is a need for re-examining perceptions around the values and purposes of education for children with disabilities. The on-going debates around 'inclusion' in India might provide the impetus for a critical reflection on the current teaching practices and educational policies. Inclusion needs a different school culture, and this might be an opportunity for the Indian education system to

critically re-examine its many failings to enable the purposeful participation of the nation's children.

It should, and will be our objective to make mainstream education not just available but accessible, affordable and appropriate for students with disabilities. I also believe that if we make our schools accessible to children with disabilities, we will also be improving the quality of education for all children.

Statement made in the Rajya Sabha on 21.3.2005 by the Minister for Human Resource Development on the subject of the Inclusive Education of Children with Disabilities. shift this to a more apt place

Addressing unique needs or perpetuating inequalities

The government currently fails to acknowledge that issues addressing the education of children with disabilities reflect broader challenges in an education system which is grappling with issues of quality, drop-out/ push-out factors for *all* children. Thus many of the issues discussed with respect to CWD are more acute manifestations of broader challenges. A dominant trend in the government's approach to addressing educational equality for various marginalised groups has been its tendency to adopt a differentiated approach, by drawing rigid boundaries between groups that are not necessarily homogeneous. This is done either through devolving responsibilities across Ministries and departments or setting up alternative systems. For example, the EGS/AIE (previously, known as NFE introduced in 1978), caters to the requirements of children, primarily from the weaker sections (especially, SC/STs), who are unable to attend formal schooling. However, the NFE has been accused of diluting learning achievement, while its characteristics of flexibility, localization and need-specific strategy have often been used as loopholes for offering sub-quality education. Nambissan (2000) and Drèze and Sen (1995) have criticised it as offering second-track education, which perpetuate inequalities of outcomes. While such an arrangement was expected to be transitory in nature, the government continues to invest in the development of these alternative systems. These alternative systems, along with the development of special schools and home based education are also been propagated as viable educational arrangements for children with disabilities. However, these systems are growing without little regard of the effectiveness of such provisions. There continues to be a significant lack of research which compares the outcomes of education for people with disabilities who have navigated these different

education systems— mainstream, special and home schools – making it difficult to make any powerful claims regarding the benefits or pitfalls of each. As the government continues to invest significant amounts of money into these alternative systems it is essential that research is conducted to establish the effectiveness of these efforts.

Similarly, the government has devolved responsibilities for education across different ministries and departments raising issues of lack of coordination, inability to develop a coherent strategy and duplication of efforts. For example, the education of children with disabilities attending special schools is the responsibility of the MSJE, whereas children with disabilities in mainstream settings fall under the purview of the MHRD. While the former is financing special schools, the latter is trying to evolve an inclusive approach. This fragmented approach historically adopted by the government in response to the perceived unique needs of certain group of children raises an important dilemma.

On one hand, highlighting these groups (for example, girls, children with disabilities) as being in need of specific attention may ensure that their needs are being met. However, making them stand apart also exposes them to marginalisation from mainstream developments, and there is a danger that they are not accounted for within the framework of general education. Such a concern highlights the classic “dilemma of difference” discussed by Minow (1990: 20), where the stigma of difference may be recreated both by ignoring it and also by focusing on it. This is further complicated by how the very notion of ‘difference’ is construed. Difference might be seen as celebration of diversity, but is more often construed as undesirable, thus leading to stigma, rejection or denial. This is even more of a concern in relation to people with disabilities because of their unique historical, socio-cultural and economic marginalisation from mainstream. The dominant medicalised understanding of disability further reinforces this difference, hence it seems convenient to make a distinction between children who can access educational opportunities available to the majority, while others are limited by their own restricted (disabled) capabilities, and therefore must attend special schools with little regard to possible lifetime of existence on the margins of society. Current efforts must address issues of equity in consonance with quality for the education of children with disabilities.

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