





Graham Bell Centre for the Deaf (GBCD) is a NGO established in 1991 by a group of young and enthusiastic persons in Pandua Block of Hooghly District, West Bengal. Now GBCD has entered its 25th year and continues to extend service to the children/persons with disabilities (PwDs) through CBR approach covering 3 blocks of Hooghly District in West Bengal. The vision of the organization is to create a non-threatening and non-discriminating environment within the society, so that the PwDs can enjoy a life with equal rights, equal opportunities and full participation with all other members of the society. The mission of the organization is to empower the PwDs and promote economic self-reliance among them.

PLANNING LIVELIHOODS, SUPPORTING FAMILIES

Manirul, 42 years old, is a person with visual impairment living in Hooghly district of West Bengal. Before he lost his eyesight nearly 20 years ago, Manirul was a scrap selling hawker who travelled from one village to another with a rickshaw to collect and sell scrap. One day while he was sorting the scrap, a bomb burst in his face and he fainted from the impact and pain. His family members quickly rescued him from the place and admitted him in hospital. But he lost his eyesight and had to stop his work.

Manirul was overcome with frustration after losing not only his eyesight but also his means of earning a living. The family plunged into poverty with little income. Manirul had seven children and a wife to feed. He felt his life was valueless as he could not do anything, and started suffering from depression.

The CBR team of GBCD identified him when they went to the village to meet one of his neighbours, who is also a PwD. The CBR team, in consultation with doctors from the local hospitals, sent Manirul to see an eye specialist. However there was nothing that could be done to restore his eyesight. The CBR team started working with Manirul and his family to motivate them to think of alternate sources of livelihood. He received entrepreneurship development and capacity building training as part of the CBR programme interventions planned by GBCD. With financial support from both the livelihood component of the CBR programme and the DPO of which he became a member, Manirul set up his own shop for selling scrap. At present he earns Rs. 200 – Rs. 400 per day from scrap selling. His wife supports him in his business.

"Though I am blind, disability could not hamper my life. I earn a living and maintain my family."

Manirul Islam

Lohardaga Gram Seva Sansthan (LGSS) has been working in Lohardaga and Gumla Districts of Jharkhand State since 1985. The key focus of their work is to promote and strengthen Community Based Organizations to address their basic needs and issues, especially productive livelihoods. They also promote decentralized management of the local resources in NRLM, education and health. Currently, LGSS is working with more than 1000 women SHGs, 39 Farmers Clubs and 86 School Management committees (SMCs).

ADVOCACY WITH LOCAL GOVERNMENTS

SWABALAMBI VIKLANG MAHASANGHA, LOHARDAGA

This district level federation of collectives of Persons with Disabilities (PwDs) was set up in 2006 under the CBR programme being carried forward in partnership with Caritas India CBR Forum (CBRF). Today, it covers 353 villages in 66 Gram Panchayats in Lohardaga district of Jharkhand. Under the guidance of CBRF, the federation was born with the mission of promoting the rights of persons with disabilities through advocacy initiatives in Lohardaga District of Jharkhand. The major thrust has been on creating awareness of rights and entitlements through collectives and linking them with government programmes to facilitate their empowerment and to enable them to become a part of mainstream society.

Stress has also been laid on bringing about systemic changes as and when required. Swabalambi Viklang Maha sangha has been able to effect positive changes in the district level policy and practice of different government departments by projecting PwDs as a group of people deserving respect and dignity accorded to all other people in the society. Their major strategy for advocacy has been to encourage PwDs to contest in and win the elections to the local body, whereby they have been able to greatly influence and sensitise state departments and political structures to implement rights and entitlements for PwDs already instituted through laws, programmes and schemes. The President of the Federation is an elected representative to the Zilla Parishad and through his efforts as member



of the District Planning Board, the Federation has been able to have interface meetings and discussions with many government departments and officials. Other PwD members who are elected representatives have raised issues of PwDs in the Gram Sabha and Panchayat Samities at different levels to ensure inclusion and consideration of the concerns of PwDs and their families. They have been able to streamline the process of securing disability certificates in the district, in establishing their claims for disability certification and putting pressure on the state government to constitute the district medical board. Due to their advocacy and lobbying, a team of the district mental health programme from Gumla supported by a doctor from the state medical college and hospital in Ranchi are running a monthly clinic in the area, assessing and providing medicines free of cost to people with mental illness and epilepsy.

The Mahasangha has been able to ensure that PwDs from BPL families have access to financial help in the form of disability living allowance as well as scholarships, stipends etc. Through direct advocacy with the District Magistrate's office, they have also ensured that the District Development Commissioner issued a government order enforcing that 3% of all development related funding be allocated for PwDs in the district. This has ensured that leaders of the Mahasangha have been able to lobby for more benefits for PwDs and their families in terms of housing, disability living allowance and other benefits at different levels of governance, the Gram Sabhas and the Panchayat Samities. The Mahasangha has also actively worked for ensuring livelihood rights of PwDs, through government recruitments in different jobs and also in the Mahatma Gandhi National Rural Employment Guarantee Act (MNREGA)

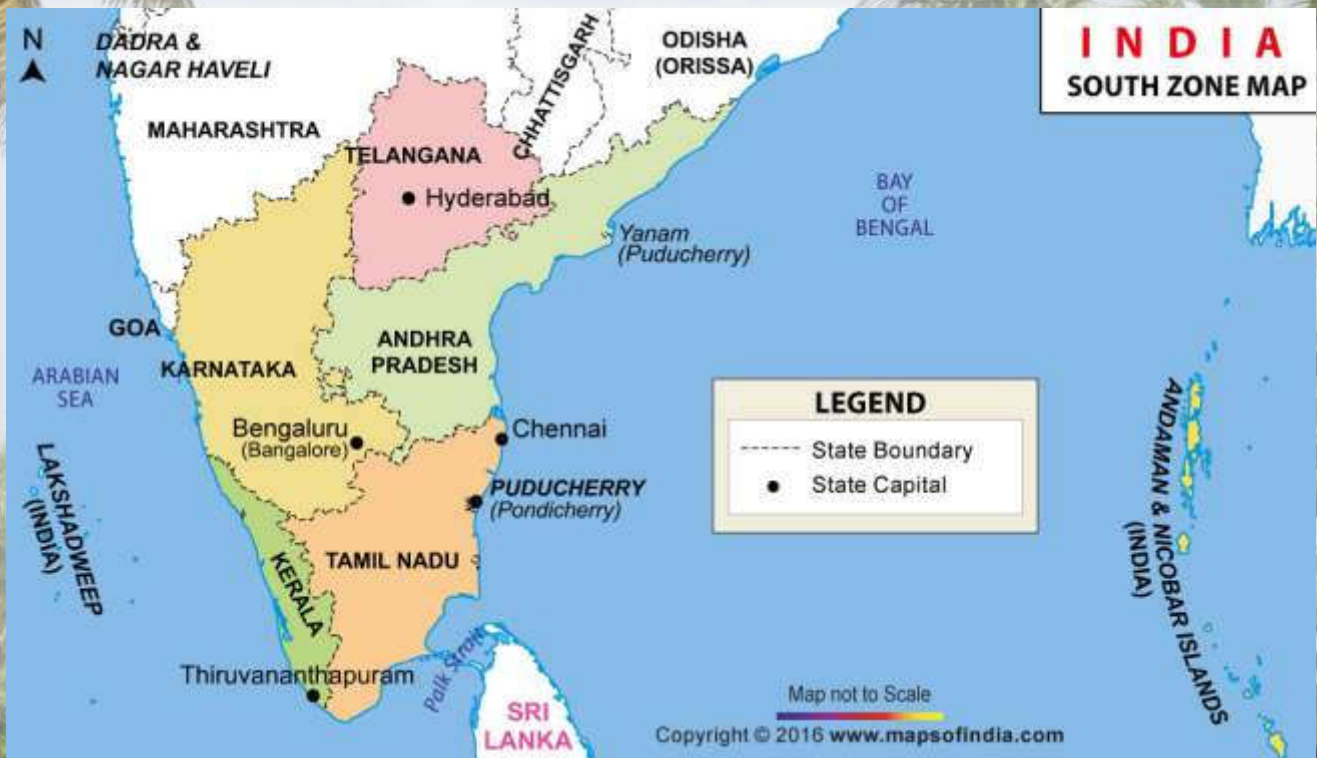
scheme that ensures minimum 100 days work for rural populations to maintain food security. The Mahasangha ensured not only that 3 % of the workers would be PwDs but also that they would be provided work that is apt, keeping in mind their impairments. So, many PwDs in the area have worked under this scheme keeping records, providing water to workers and maintaining the child care centres provided to the workers.

All these efforts have brought about changes in the lives of PwDs in the district, with neglect and isolation now turning into positive action to claim their rights. As PwDs have acquired a growing awareness of their own rights, they demand respect and dignity by seeking livelihood and a more proactive role in the life of the community. Where government officials treated PwDs with disrespect and disdain, they are now according due respect and are addressing their issues on a priority basis. Panchayats have started consulting the Mahasangha before taking any decisions at the Gram Sabha so that they can include PwDs and their families in the life of the community. PwDs have emerged as leaders in their own right and have reached a level of confidence and faith in their abilities to become agents of change in their own community, within the district and even at the state level. At present the Mahasangha has more than 2000 members covering all types of impairments, of whom 35 are representatives in the General Body.

Its President has been appointed as member of the District Planning Committee and the Local Level Committee of National Trust.

Some of their leaders have also been elected as members of the National DPO Federation being initiated through Caritas India CBR Forum with DPO members from across the country.

Southern India



The southern region consists of the states of Karnataka, Tamil Nadu, Kerala, Andhra Pradesh and Telangana, and the union territory of Pondicherry. The states in the southern region are quite densely populated with large cities, big and small towns and villages spread across. The distances between the cities, towns and villages are not too far. They are well connected by bus service, both government and private, and there are also other modes of transport easily available, even in the hilly region. Educational and medical services from the government and private service providers are available in most towns. Villages have government schools up to primary or middle level, and for high school, children go to the nearby town or city. The structural condition of schools in the south is reasonably good with regular attendance by teachers. The panchayat system in these states is quite effective, especially in Kerala and Tamil Nadu. They meet regularly and discuss issues related to village development. Over the last 10 years, they have also been discussing the needs of persons with disabilities (PwDs). Women are active in panchayats, wherein many, especially in Kerala, are panchayat leaders.

There are a significant number of service providing organizations and institutions in the southern region catering to the rehabilitation/intervention needs of persons with different types of disabilities. Though many are urban based, they have extension/outreach programmes with CBR approach for persons with disabilities in the rural areas. There are also a number of organizations providing such services in rural areas. The State governments in this region have been pro-active in the inclusion of persons with disabilities in programmes and schemes. For e.g., three large government funded programmes in Andhra Pradesh, Telangana and Tamil Nadu have a pro-active policy to ensure inclusion of persons with disabilities along with other marginalized groups, in which a large number of PwDs have gained from them in the last decade. At the local administration level, much effort has been made by NGOs to sensitize the local government officials and panchayat members on disability issues, the rights of PwDs and on the provisions in the Disability Act on non-discrimination, equal opportunities and inclusion.

Promotion and formation of DPOs has resulted in thousands of DPOs working at present at local, block and district levels, with a few functioning at the state level. Many of these DPOs are active with a large membership and have raised awareness among PwDs and in the community on the rights of PwDs. As a result, most PwDs enjoy all their entitlements, from disability certificates to maintenance allowance, free bus pass, old age pension etc. There is greater inclusion of PwDs by accessing 3% allocation in all developmental schemes as specified in the Disability Act. DPOs have also played an active role in encouraging income generation and livelihood programmes for PwDs by linking them with banks and financial institutions.

In the southern region, the level of awareness about disability related issues among PwDs, in the community and in the administrative system – is higher than in the rest of the country. Much of this is due to efforts of the disability groups and organisations which have found a favourable/receptive response among the people who have a higher level of education and are well informed about the local administrative system. Overall, the situation of PwDs has improved significantly in the last decade in this region, with much effort also being put in by them either individually or through DPOs to improve their status.



Jeeva Jyoti is working on issues of child rights and bonded labourers working in brick industries in Tiruvallur district in Tamil Nadu. They have community development programmes and special programmes for children, including a home for children in crisis. They started to work with people with disabilities as partner of CBRF as they found many such persons in their area of work.

TAKING SMALL STEPS TOWARDS LIFE



The CBR team from Jeeva Jyoti took Lokesh, accompanied by his mother, to the Block Resource center (BRC) in Cholavaram, about 5 kms away for assessment. Following this, his mother took Lokesh to the therapy center regularly and also learnt to give him therapy at home. Later, the BRC provided a walker for Lokesh with which he practiced and slowly learned to walk with support. With time and practice, he also started to speak a few words.

Seeing the progress in his condition, the CBR team got him admitted to the local school where he is happy being with other children.

Lokesh is a happy and emotionally self-reliant child. He is friendly with other children and he loves plants and pets like dogs and cats. His mother is very hopeful that his condition will improve and he will be able to socialize with others.

“I would like him to have the opportunity of childhood like any other child and have the opportunity of life as a total human being,”

says his mother.

Lokesh, 5 years old at present, was born with multiple disabilities, having difficulty of both speech and mobility. His father is employed, while his mother does odd jobs besides managing the home. His elder sister studies in class 4 in the local school. Under the guidance of CBRF and ADD India, the CBR team identified him two years ago. He could crawl a little inside the home but had to be carried by his mother whenever going out of the house. His mother is his friend and care giver and devotes most of her time for him despite her other schedules of work for earning an income. At other times, Lokesh would sit silently by himself and weave dreams of going to school as he watched other children pass by on their way to school. His mother bought him a school bag to pack everyday so that he would be ready to go to his school one day.

Society of Daughters of Immaculate Mary (DMI) has development programmes for the empowerment of women and children at grassroots level in Tiruvallur district in Tamil Nadu. The mission of DMI is to serve the poor and the marginalized by enabling them to get their legitimate share of the socio, economic and political development in the area. They commenced a CBR initiative with Caritas India CBR Forum to reach out to PwDs in the rural areas.

SUPPORTING EDUCATION, CREATING POSSIBILITIES

Monica, 18 years old at present, was diagnosed with severe low vision when she was ten years old. She was studying in a local school and continued her studies as she was happy being with friends. After two years, her mother observed that Monica was becoming increasingly silent, slow in her day to day activities and erratic in her communication. At times she could not even communicate or fulfil her own self care needs. She also started having epileptic fits, often. Her parents took her to the children's hospital in Chennai and the diagnosis this time was symptoms of mild intellectual disability. With increasing effects of her disabilities, Monica discontinued studies after Class 8.

Two years ago, under the guidance of CBRF and ADD India, the CBR team contacted Monica and made an intervention plan together with her family, focusing mainly on helping her to continue her studies. With support from family members and school teachers, Monica resumed her studies in the nearest Government school. She was happy to be with her classmates. Her mother took Monica to school every day and brought her back and spent most of her time with her, talking and encouraging her. Her daily schedules got systematized and her focus on whatever she was doing increased. Monica passed the 10th standard scoring high marks.

Monica, now 18 years old, is studying in Class 11 in a girl's school close to her home.



“She wants to become a teacher. There are many who have walked the path with me and Monica over the past years. My sincere thanks to them.”

Monica's mother.

Swamy Vivekananda Angavikalara Kshemaabivirudhi Samsthe (SVAKS) is a federation of persons with disabilities promoted by ADD India, working in the Chikballapur district in Karnataka. They work for the rights, non-discrimination and inclusion of persons with disabilities in the community and in all development programmes of the government. They focus especially on the rights and needs of women and children with disabilities.

HELPING TO DEVELOP SPEECH

Nithyashree, now 7 years old, was born with hearing impairment. It took time for her parents to recognize her impairment. 'We thought there was nothing wrong with her as we mistook her silence for her nature. We assumed that she would be fine as she grew up but we got worried when her hearing did not get better even at the age of five,' said her parents. With the help of SVAKS, a DPO promoted by ADD India, she was taken to a hospital for assessment and was given a hearing aid. Therapists from different organizations trained her mother to provide speech therapy at home.

Nithyashree is in class two now. She is a happier child than before as she is able to interact with her classmates and teachers. She is doing well in her studies and also participates in games and activities with more confidence and enthusiasm.

“The therapists helped us to understand that her impairment is manageable. They taught us the 'do how' of managing it effectively at home in a disability friendly manner. A lot of our understanding on hearing impairment has changed.

The therapy exercises helped me to understand her more as a person, and her preferences. The bonding between me and her became stronger and functional. I came to know more of myself as a person, as a parent of a child with impairment.”

-Nithyashree's mother





BUILDING CAPACITIES, EXPANDING POSSIBILITIES

Shameem is 28 years old and is from Sidlaghatta taluk in Karnataka. She had polio when she was 1½ years old, and since then has lost the use of both her legs. As she was unable to walk properly, she remained closeted within her home, except to go to the primary school in her village. She had few good friends in school but going back and forth to the school was strenuous and painful. She continued till Class 5 and then discontinued as the middle school was too far away. She remained at home most of the time, did household work and made garlands to earn some income.

She was contacted by the CBR team of ADD India a few years ago as part of their community contact. She was encouraged to become a member of the DPO, which changed her life in many ways. Being a part of the DPO and interacting with other persons with disabilities gave her a purpose in life. She joined the savings and credit group and this strengthened her motivation and confidence in herself. With her disability maintenance grant, she started contributing more to the family finances, which brought a change in her status and identity. 'This made me a more equal member in the family,' she said.

Shameem made a plan for socio economic self reliance with guidance from the CBR worker of the ADD India team. She identified two enterprises: knitting wire bags and making garlands with artificial flowers. Both these trades were popular in her neighbourhood and would thus have a steady market. She approached the DPO for a loan and started a new business of making artificial flowers. She began earning Rs. 80 – 100 daily. 'I could meet my needs and the needs of my family members better with this income. I set aside some money for my own capital.' However, she had to spend her savings for the treatment of her mother who fell seriously ill. Now she earns her living by making artificial flowers for a local businessman and earns nearly the same amount as she did before.

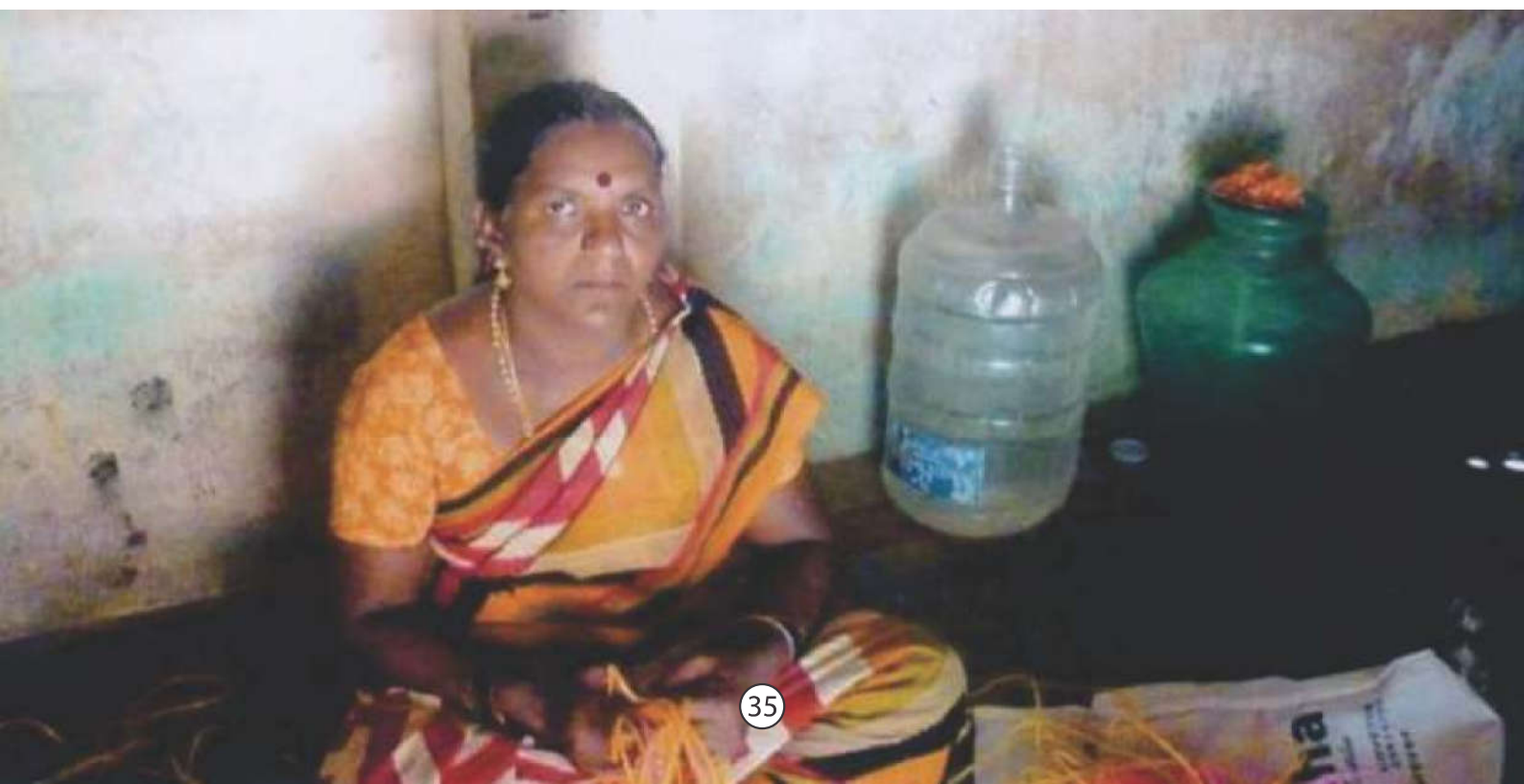
“Life is what we make out of it. The DPO was the start up to have this change in my thinking. I now play a more active role in the activities of the DPO. I am planning to apply for a licence to run a ration shop. Today I am more confident of planning my life and managing my life successfully!”

Madras Social Service Society (MSSS) is a diocesan programme focusing on working with women, landless agri-labourers, the fishing community, farmers, youth and children. The focus of their work is on women, as they feel if women are empowered, others can be taken care of at the family and community levels. As a partner of Caritas India CBR Forum, MSSS has included persons with disabilities from their area in education, health, livelihood and self-governance programmes. BNI came on board later to include persons with mental illness in the CBR Programme.

REINTEGRATING INTO FAMILY AND COMMUNITY

Mercy, 45 years old, living in Tiruvallur district in Tamil Nadu, underwent surgical removal of a tumor in her ovary in 2014. Her husband explained that she had severe bleeding after three months of the surgery. She became emotionally upset with symptoms of isolation and depression with suicidal tendency. She stopped eating properly or even taking interest in her personal care like bathing or changing into clean clothes. She refused to step out of the house, and did not participate in any of the household work. She could not sleep at night and this had an effect on her health. Her husband said, 'My children and I want to help her. But she does not cooperate. We just do not know how to help her.'

Under the guidance of BNI, the CBR team from MSSS met Mercy one year ago and initiated an intervention plan that included medication and counseling for its use. The goal was reintegrating her into the daily life of the family. Mercy is being visited regularly and members of the family who are taking care of her receive counseling along with Mercy, twice a week. It is ensured that she takes the prescribed medicines regularly. The first sign of change in Mercy was her interest to knit wire bags! Now, Mercy is attending to her personal care without anybody's insistence. She has started cooking, washing and shopping. Her interaction with her husband and children has increased. She goes for MGNREGA work but also earns by knitting and selling wire bags. She attends public functions and has now become a regular member in the local DPO which is helping her to interact with others.



Integrated Women Development Institute (IWDI) is working for the betterment of women who are discriminated and marginalized in Tiruvallur district in Tamil Nadu. They started by forming self help groups of women as an entry point in the villages. They have promoted skill and vocational training to youth and livelihood programmes in the community. When they found that women and children with disabilities were often excluded from family and society, they joined hands with Caritas India CBR Forum to reach out to persons with disabilities in their area of operation.



RESPECT THROUGH LIVELIHOOD

Devika, 24 years old from Tamil Nadu, has severe locomotor disability. She has studied up to class 8. “Right from my childhood days something within me kept telling me, 'Make your best efforts to be of use to yourself and others. Do not make your impairment an excuse for not doing it,' I found the opportunity coming my way in the DPO in Karani.” She learnt tailoring from IWDI and joined a DPO as a member. Soon she became an active leader in the DPO. “The membership in the DPO gave me a collective identity and strength. The training and input that I received helped me to develop my leadership skills and personal initiatives. The planned activities that we took up collectively gave us all the confidence for negotiation with the Government and others in society.”

As part of the intervention plan for her in the CBR programme, Devika took training in 'servicing and repairing of mobile phones' at the Regional engineering college, Tiruchirapalli and passed with merit. She is presently working in a mobile phone servicing company. After ensuring her career and becoming a leader in her DPO, Devika grew confident to seek her own partner in marriage. “I attended the SUYAMMVARAM (matrimonial programme) event organized by the District Federation for persons with disabilities. I was happy that I found a good partner.” Along with getting married and setting up their new home, her husband has started supporting her in her work both in the company and in the DPO.

Devika is now a role model for women in her village. “Three things helped me to be successful. First is my confidence and effort. Second is the understanding and mutual support of my family, consisting of my husband and me. Third is the society which has a place for people with disabilities.”

CONFIDENT TO WORK

Maheshwari, 18 years old, is from Tamilnadu. She has 70 percent locomotor disability due to an accident at the age of 4. 'But I was determined to do something out of my life!' she reiterated. This determination helped her complete her class 11. She became a member of the DPO in her village one year ago when the CBR programme was started by IWDI in the area, under the guidance of CBRF. She was not active in the beginning as she did not believe that the meetings and activities would do her any good.

“When I saw a change in the lives of some of the women in the group, I changed my attitude. I decided to make the best out of my membership in the DPO. The CBR team was of great help in bringing about this change in me. My parents also encouraged me in my efforts for change.”

Maheshwari's main anxiety was regarding earning a living. “Who will give me a job? What kind of a job can I get with my disability?” she mused. A change in her life happened when the CBR team with the assistance of the DPO helped Maheshwari to get admission for training in Tally software in Tiruvallur along with a stipend to cover her travel expenses. “My confidence in myself and in the society around me increased phenomenally.” The training was a life experience for Maheshwari. “My identity changed in my family and neighborhood. My family started talking about my future plans! Neighbours invited me for occasions in their homes.”

Maheshwari completed her training and is now employed in a private company. She contributes to the family budget from her income. She puts aside some amount for her future and is planning for her future with a long term perspective.

“Many people contributed to what I am today. All their efforts helped me to gather my efforts and strength and have the determination to include myself as equal to any other.”

Her message is, “Anything is possible for people with disabilities, who focus on success, if they make the effort!”



Kerala State Disability Forum (KSDF) was promoted in 2013 with representation through District level DPOs in seven districts in the state. These DDPOs were the outcome of a nine year partnership with Caritas India CBR Forum (CBRF) and ADD India in a CBR Programme. KSDF has a governing body of 16 members, of which three are women. The district level DPOs have built good rapport with government departments, Panchayats and other service providing organisations in the region. Through their efforts, 6,331 PwDs have been identified as members. They have formed village level DPOs which are linked with government departments, banks and other financial institutions. These DPOs have been successful in accessing various benefits and entitlements from the panchayats and government departments for their members. They are also making efforts to bring some systemic change for the inclusion of PwDs in programmes and in the society. The Kerala State Disability Forum has moved a step further – it has become a member of the National Federation of DPOs initiated by CBRF representing 60,742 persons with disabilities, where they take up issues that need to be addressed at the National level.



FREEDOM TO MOVE AROUND INDEPENDENTLY

Thangamani S., 59 years old, President of Safalayam Federation of PwDs, keeping 30 goats for his livelihood, goes to the market on his adapted four wheel scooter, visits village level DPOs and goes to attend local panchayat meetings.

Raju, 55 years old, member of a DPO, cuts grass for cattle feed and carries it to the market for sale on his adapted four wheel scooter.

Nirmala, 35 years old, who runs a petty shop selling fruits, bakery items etc. goes to the market on her adapted four wheel scooter to purchase the required items for the shop. Earlier she had to request others to get these items for her.

Lijji, 24 years old, who is learning to work on computers, goes on her adapted four wheel scooter to the coaching class to prepare for her public sector exam. She is hoping to get a job under the special employment quota for PwDs.

There are 43 persons with different types of disabilities in this federation in Trivandrum District in Kerala, engaged in coconut selling, carpentry, lathe work, newspaper selling, delivery service etc. who got the adapted four wheel scooters from the panchayats.

The process of getting adapted four wheel scooters for PwDs started in the year 2011 when the District Disability Rehabilitation Officer (DDRO) recommended that the panchayat give these vehicles from their 3% reserve fund. He had heard many PwDs complain about the disabled unfriendly buses and how useful it would be if they had their own vehicle to travel around. Since these vehicles are expensive, they could not afford to buy them on their own.

The District Planning Committee had issued a circular to panchayats to utilise the 3% reserve fund for the benefit of PwDs. The five federations formed in Kerala gave suggestions on how this fund could be used. On hearing the suggestion of the DDRO, the DPOs lobbied and put pressure on their panchayats to provide adapted scooters to their members. In the last four years, nearly 400 PwDs have accessed such adapted scooters through the five federations in Kerala. The applicant members have to give a certificate from the doctor that they are capable of driving. They also have to give an undertaking that the vehicle will not be sold.

With this vehicle, the lives of these people has become easier as they are free to go around as they wish and they also feel included in the society. Accessibility has changed their life and the way society looks at them!



Annai Theresa Disability and Development Trust

Annai (Mother) Theresa Disability and Development Trust (ATDDT), a district level DPO Federation formed in 2009, is working in 119 panchayats in three blocks of Pudukottai district in Tamil Nadu. This cross disability DPO has 2,605 members from 147 village level DPOs (sanghas). Its main objectives are to enable all PwDs in the district to access their rights and entitlements for their social and economic development which will help them to gain equal status in society. It also takes up issues of discrimination faced by PwDs and sensitizes communities to respect and include them in all activities.

The major activities taken up by the Federation include support for girls and women with disabilities in education, up-gradation of their skills, health awareness and linkages promoting inclusive education for children with disabilities through Sarva Sikhsha Abhiyan, identifying PwDs, especially children within communities and referring them for appropriate interventions. In addition, the Federation promotes livelihood opportunities for persons with disabilities through linkage with banks and supports agriculture related supplementary income programmes and capacity building of members on the objectives of the sanghas and federation. They also work actively with families of persons with mental illness, forming Caregiver's (of persons with mental illness) Associations and help them to access medication from government hospitals.

Under the guidance of ADD India, ATDDT, over the last five years, has successfully accessed many provisions and entitlements from the government for persons with disabilities through advocacy actions. These include disability certificates and identity cards, social security benefits, travel concessions in buses and trains, scholarship for children in schools and appropriate aids and appliances. The federation has facilitated loans for 328 PwDs from banks to increase their income through self employment or livelihood activity and ensured the repayment of such loans, which has increased the financial credibility of PwDs and ensured that bank officials sanctioned further loans for them.

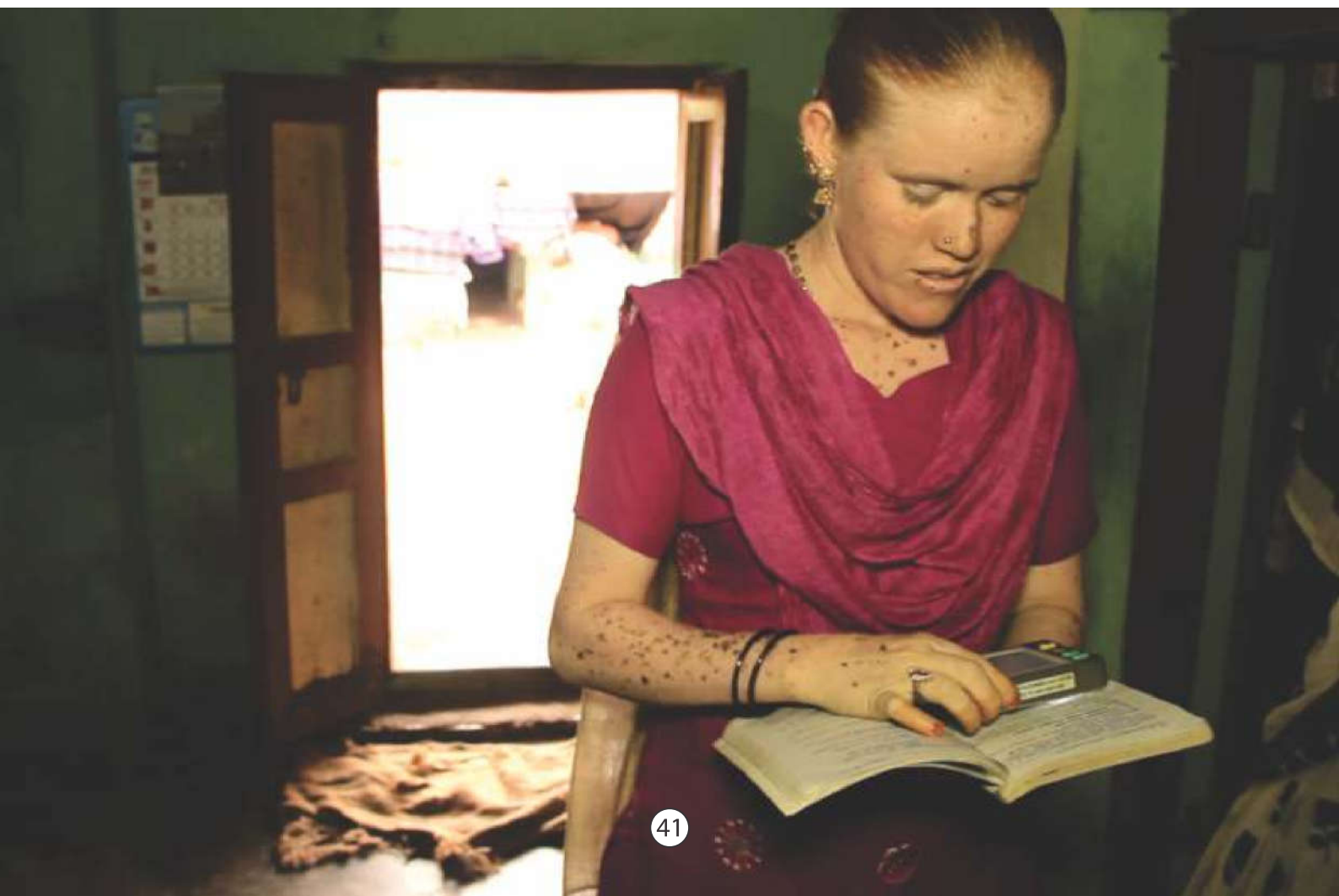
Under the District Mental Health Programme (DMHP), medicines for mentally ill persons are meant to be available at the local/district hospitals. However, as this scheme was being poorly implemented, most families had to spend both time and money to travel nearly 40 kms to Trichy to get the medicines. The federation members made a representation to the health department, which eventually agreed to supply medicines through the local hospital to a specific number of persons who have the card issued by the authorities. Mentally ill persons and their families are now able to access medicines in the local hospital regularly.

PRESSING FOR SYSTEMIC CHANGE IN EDUCATION

Noorjahan, 22 years old, is from Keeranur in Tamil Nadu. She has low vision and Albinism. She lives with her parents and two younger brothers who are working in a factory; and is well taken care of by her family members. One of her brothers is also with low vision and Albinism. When they were young, the parents took both of them to the Government hospital. The doctors informed them that the disability was not degenerative and asked them to get devices for reading.

Noorjahan studied in the Government school. When she had to appear for her 12th standard public exam, the school headmaster didn't allow her to write the exam since she wanted a little longer time to write. She approached the ATDD Federation for support. The federation members approached the Chief Education Officer and got the permission to permit her to write the exam with the help of a scribe. She passed the examination and presently she is pursuing a Bachelor of Arts Degree at a college in Trichy.

She is a member of ATDD federation and of the Sadhana women's group. Through the federation she got a bank loan for buying an auto rickshaw for her father. Her father is earning well now and she is proud to have supported her family financially. Through the ATDD Federation she got a disability I.D card and her entitlements. During the World Disability day celebration, the District Rehabilitation office gave her an electronic magnifying lens in appreciation of her efforts to study further.



Vasantham has been making inroads into high level committees:

- The District level Coordination Committee for the welfare of PwDs had not been set up in the District. Vasantham's intervention resulted in its being set up in April 2014 and its president was included as one of its members.
- Mr. Livingston, the president of the Federation is also included as a member on the Divisional Railway Users' Consultative Committee of Southern Railways, Chennai. They review accessibility issues in the railways.



Integrated Rural Community Development Society (IRCDS) is a development organisation established in 1986 to facilitate community based action among the poor and marginalized communities in Tiruvallur District of Tamilnadu. IRCDS concentrates on building the capacity of the people to be responsible for their own development. The target communities have been organised into self-help groups to take up development issues. A long standing partner of Caritas India CBR Forum, it started working with persons with disabilities since 2002 through CBR approach.

ADVOCATING FOR SYSTEMIC CHANGE

Vasantham Federation of Differently Abled Persons, Tiruvallur District, Tamil Nadu

Vasantham District level DPO Federation was established in 2005 federating 290 persons with disabilities across 21 village level DPOs as an outcome of the CBR Programme commenced in partnership with Caritas India CBR Forum. When PwDs of the neighbouring blocks got to know about the success of the CBR project and the DPO initiatives, they approached IRCDS to seek an expansion of the project interventions. By 2008, Vasantham increased its membership base to 1,236 persons with disabilities across a total of 131 Village level DPOs. It emerged as a District Level DPO and was registered under Tamil Nadu Societies Act in 2010. The Executive members of the DDPO were elected through a democratic process in May 2010. In view of giving a fillip to the already thriving DDPO, Caritas India CBR Forum started its District Level Initiative in partnership with 8 other local NGOs in Tiruvallur District in 2012 giving Vasantham, the opportunity to extend its membership to 10,070 persons with disabilities across 14 Blocks.

In 2012, IRCDS and Vasantham have jointly compiled a handbook on Government Welfare schemes and orders for PwDs and have shared it with State level DPO Networks, other DPOs and NGOs and also made it available online.

One of the foremost issues taken up by the Federation was to ensure that PwDs were able to express and register their grievances. The office of the District Collector was inaccessible and often PwDs had to stand for long hours to register their complaint as there was no seating arrangement. After collecting data about the number of PwDs coming to meet the District Collector every Monday and documenting the ordeal faced by them, leaders of Vasantham Federation met the District Collector and submitted a memorandum, requesting him to make arrangements for accessible facilities. Now the Federation has been authorized by the District Collector to depute volunteers on Mondays to assist PwDs in writing their complaints, and to guide them to meet the District level authorities. A separate accessible grievance desk has been created near the main entrance of the Collectorate, where the Collector himself receives the grievances from persons with disability.

Vasantham has ensured access of persons with disabilities and their families to the MNREGA scheme that aims at enhancing the livelihood security of people in rural areas. The implementation of this scheme for PwDs in the district had been minimal, as the socio-cultural ideologies consider them to be unproductive. After Vasantham submitted a list of PwDs living in 25 GPs and in need of work to the State Commission for Rural Development, District Collector, Project Director (DRDA) and BDO, proactive action has been taken to facilitate the employment of PwDs, through sensitisation of Supervisors, which has ensured that many PwDs are now getting job cards, appropriate jobs and full wages under this scheme. It has not only helped them to earn money but has also created opportunities for PwDs to come out from the house and integrate with others.

INFLUENCING FINANCIAL INSTITUTIONS

Balaji, a 42 year old visually impaired person, living in Tiruvallur District, Tamil Nadu, is the eldest son in the family. He had low vision from a very young age and was able to study up to the 7th standard.

Along with his wife and one son, Balaji lives with his mother and younger brother. Balaji lived in isolation as people in his village used to call him derogatory names. Family members also hesitated to take him to social functions. Though this joint family had 6 acres of agricultural land, they were not able to engage in agriculture due to lack of water. Hence they had given the land for lease and earned very little income. Balaji was able to get only agricultural work.

In May 2012 Balaji was identified through the CBR project and Balaji and his wife were encouraged to attend training inputs organized by IRCDS. As a result of these small group meetings and capacity building programmes for DPO members, changes occurred in the life of Balaji. He has received his disability ID card and became a member in the village level DPO. He started participating in the village level DPO meetings, sharing his needs, and involving himself in the monthly savings in the group.



As a result of advocacy by the DPO with the help of the CBR team, Balaji has got a job according to his ability under MGNREGA. This helped the family to have an income during those times of the year when there are no opportunities for agricultural work. Balaji decided to dig a bore well with the support of a loan, after attending training on Livelihood. He received a bank loan of Rs 20,000/- through the VDPO and has used the same for digging a bore well. After that he started cultivating paddy on his family land. Now he is waiting for the harvest (30 bags per acre x 6 acres – 180 bags). He is also repaying the loan promptly.

The cooperation extended by Balaji's wife, family and the community contributed to the change in his life. The role of the Panchayat, the Bank and the Govt. authorities – all helped bring about a change in Balaji's life today. He has gained more confidence and feels much more secure now. He has gained recognition from his family and the community. He attends gramasabha meetings and in the evening, he chats with his peer group.

“The training given through the DPO kindled my motivation and made me look towards the possibility of cultivating our land by ourselves,”

Balaji

Canossa is an organization that works in Draksharama, East Godavari District, in Andhra Pradesh since 1998. They work in the areas of health, education, rehabilitation, empowerment and vocational skills. The main target groups are women, children, persons with disability, persons with mental health problems, HIV affected persons and persons addicted to alcohol. They have extended their work to care for persons with disabilities as part of the DLI approach commenced by Caritas India CBR Forum. Since 2009 they have also partnered with BNI.

Uma Educational and Technical Society (UETS), is a leading NGO in East Godavari District of Andhra Pradesh founded in 1988. Their activities include a school for children requiring special education, a Diploma course in intellectual impairment and Hearing Impairment, early intervention and rehabilitation center for Deaf-blindness, an aids and appliances workshop and supporting inclusive education for students with disabilities at the secondary stage. They are also involved in HIV/AIDS projects. A long standing partner of Caritas India CBR Forum (since 2000), UETS has been implementing CBR Programmes in various Mandals of East Godavari District. Since 2009 they have also partnered with BNI.

The District level Initiative (DLI) approach aims at mobilizing and capacity building of stakeholders' resourcefulness over the seven years of the project period. As a result, it is expected that there will be sustained and effective engagement with the public provider system at different levels in the district, benefiting in sustained access to services and entitlements for the affected groups.

The DLI in East Godavari district was initiated by Caritas India CBR Forum in the year 2009 with the participation of 8 NGOs and the technical support from Basic Needs India and ADD India for the capacity building of the multiple stakeholders.

The decision to focus on mental health issues as part of the DLI approach emerged in the year 2011 from the realization that despite working with other disabilities, partner NGOs had not included mental health as part of their programmes. Further, local communities were found to have stigmatising attitudes towards people with mental illness due to beliefs such as - MI was caused by black magic, possession by evil spirits etc. Most people in the community also believed that mental illness was contagious and unmanageable. Thus PwMI and their families lived on the verge of isolation with limited social contact and were left out of social and cultural activities. Further there was little help for PwMI due to non availability of proper support and guidance.

With training support from BNI and ADD India, the beliefs and attitudes of the staff of UETS and Canossa Society changed and they adopted an inclusive framework in practice. Community level mobilization adopted by both organizations involved both families and communities in the process of rehabilitating PwMI. The Disabled Person's Organisations (DPOs) were sensitized about the situation of PwMI, who had till then been peripheral members of these groups and their issues largely ignored. DPO members were facilitated to change their attitudes and accept and respect the PwMI in their groups. When PwMIs found that the DPO members respected them as persons they were happy and started participating in all activities. PwMIs also take active part in the DPO meetings and voice their need for disability certificates, better living facilities, livelihood support and access to free psychiatric medication and counselling. They are aware of their need for training to educate themselves about their condition, the means to overcome the same and the manner in which they can become more functional and contribute to the community as well as earn economically.

Using the DLI approach, members of the DPOs and Federations engaged in advocacy to ensure access to disability assessment and medical support (both of which constitute a part of the process of rehabilitation of PwMI). Intensive lobbying with Government officials at different levels by the DPOs and Federations has ensured that PwMI are issued Disability Certificates, which enables their access to social security benefits. Due to the efforts of DLI partners, an additional Psychiatrist has been posted in the district and the government is providing continuous medication through the medical college psychiatric department. The state employed community health workers have been sensitized and are also identifying and referring PwMI.

Community level changes have also occurred. PwMIs are now invited to functions and ceremonies in the village and community members also attend the functions held in the houses of the PwMI. Inclusion at the level of employment is being achieved.



REINTEGRATING INTO COMMUNITY LIFE

Venkatalakshmi, 40 years old and a tailor, developed mental illness when her husband started living with another woman. Later she became chronically ill on the death of her husband four years ago. She started wandering in the village and gathering garbage from dustbins. She used to curse her daughters, abuse and beat them. People called her a mad woman and she would get very angry. She would beat them. All her relatives were afraid of her.

When the CBR field worker visited her house and counseled the house members, they provided Venkatlakshmi a lot of motivation to get treated. Since Venkatlakshmi had the spirit to fight her illness, she listened to the CBR worker who said help was available. The family, along with Venkatlakshmi, was taken to a Psychiatric hospital at Visakhapatnam. There Venkatalakshmi was diagnosed with Schizophrenia and provided in-patient medical treatment. UETS paid for her medication and she made good use of the treatment. On her return, she was involved in women's group meetings and DPO meetings where they provided awareness regarding mental health and regular medication intake to Venkatlakshmi and tips for her daughters to care for her.

Presently, Venkatalakshmi is maintaining herself and her daughters by doing housekeeping work. She has established a good rapport with her employers who are very understanding. She gets involved in the family affairs, has stopped abusing others, has stopped wandering all over the place and comes home every night. She has re-built a great relationship with her daughters. She wants to engage in tailoring which she is good at doing - she stitches beautiful Punjabi clothes. The neighbours are co-operative and have played a great role in facilitating her recovery. There is mutual sharing of views between her and the neighbours.



INCLUDED WITH COMMUNITY SUPPORT

Parvathi came back to her parental home after two years of marriage during the course of which she was treated brutally by her husband and her mother-in-law. At 20 years of age, she was 3 months pregnant and following her miscarriage, she started showing symptoms of mental illness. Her family took her to a private psychiatrist in Rajmandri Town. Parvathi has been on psychiatric medication for major depression for the past 15 years. Her family sold off part of their land to meet the cost of treatment. Though Parvathi was under medication for 15 years, it was not regular.

The CBR worker identified her through the DPO and arranged for her to access medication from Kakinada District Hospital. Every month she gets free medicines for the first 10 days and has to pay only for the medicines required in the next 20 days.

Regular treatment for the past seven years has improved Parvathi's condition greatly. She now socializes well with the people, whereas previously she didn't want to talk to anybody. She involves herself in the day to day activities and helps her mother cook food. She sweeps the compound. She also tends to the vegetable garden with the help of her mother. She carries water and keeps the house clean. She takes part in all the festivities and social gatherings in the community. She is part of the village DPO which she joined in 2012 and has succeeded in building rapport with the community. The community understands her now and so there is very little stigma.

Parvathi has started a petty shop with financial support from the Village level DPO (VDPO) and gets a profit of Rs. 300 per month selling toiletries, vegetables and flowers grown in their garden. She has also bought a goat and looks after it. With her earnings she is now able to save Rs. 50 every month.



Epilogue

Community Based Rehabilitation, as a strategy for inclusive development, has demonstrated its potential for changing attitudes towards disability within families and communities, often resulting in corresponding changes within community structures and practices. The efforts of these three organizations focused on using CBR as a community development strategy in resource poor remote areas in different parts of India in order to improve the quality of life of persons with disabilities and their families. It has resulted in innovative usage of perspectives, skills, abilities and knowledge to bring about changes in the lives of PwDs. Taking cognizance of prevailing social, economic and cultural issues, different programmes have developed in response to local needs, priorities and resources. Changes have been effected at individual level and within families and communities, through provision of services for development as well as facilitating access to their rights to health, education, livelihood and social security, using advocacy by persons with disabilities and their families in different parts of the country. As a result, there has been a definite improvement in the quality of life and enjoyment of human rights for PwDs. This has, in turn, created space for the realisation of the philosophy enshrined in the UNCRPD.

As CBR has involved partnerships with PwDs, both, adults and children, their families and communities, it has evolved as an holistic approach encompassing physical, social, educational, livelihood, protection and other requirements. Implementing CBR has led to building of capacities of PwDs and their families in the context of their community and cultures. This has also led to transfer of skills to the community aimed at achieving broader social and systemic changes as well as maximizing social inclusion and improvements in the individuals' functional capacity. Thus CBR has ultimately promoted greater community participation of PwDs along with inclusion in existing mainstream services available for all people in the community. As PwDs and their families have started achieving, the local community has become confident of supporting the PwDs' self-empowerment. The role of PwDs and their organisations is central to this process of demystifying impairments and advocating that disability needs to be seen as a development issue - social and political.

CBR as a strategy has touched lives, families and communities, engendered empathy for PwDs and their families and sensitized communities to take up necessary action. CBR has given strength to many PwDs and their families to dream of a life and a future that allows them to express themselves in their own ways, emerge from an existence of relative isolation and protection to lives that are more participatory within families and communities. Many of them have become role models and leaders in their own right, not only for PwDs but for all people in the community. Yet a lot remains to be done ... the focus now is on building upon the lessons learnt over the years and in different regions in order to move forward so as to ensure that empowerment and social inclusion of PwDs within communities becomes a reality in all parts of India.

Abbreviations

ADD India	Action on Disability and Development India
ADL	Activities of Daily Living
ANM	Auxiliary Nurse Maid
ARUNIM	Marketing Federation for Economic Empowerment of Persons with Disabilities
ASHA	Accredited Social Health Activist
AWC	Anganwadi Centre
BDO	Block Development Office/Officer
BDPO	Block Disabled People's Organization
BNI	Basic Needs India
BPL	Below Poverty Line
CBR	Community Based Rehabilitation
CBRF	Caritas India Community Based Rehabilitation Forum
CBRW	Community Based Rehabilitation Worker
CMHD	Community Mental Health and Development
CP	Cerebral Palsy
DDPO	District Disabled People's Organization
DDRC	District Disability Rehabilitation Centre
DLI	District Level Initiative
DPO	Disabled People's Organisation
DRDA	District Rural Development Agency
GP	Gram Panchayat
HIV/AIDS	Human Immunodeficiency Virus/Acquired Immunodeficiency Syndrome
MGNREGA	Mahatma Gandhi National Rural Employment Guarantee Act
NE	North East
NGO	Non-Governmental Organisation
NPRPD	National Programme for Rehabilitation of Persons with Disabilities
NRLM	National Rural Livelihood Mission
NDPO	National Disabled People's Organization
PESA	Panchayats (Extension to Scheduled Areas) Act, 1996
PHC	Public Health Centre
PwDs	Persons with Disabilities
PwMI	Persons with Mental Illness
RTI	Right to Information
SC/ST	Scheduled Caste /Scheduled Tribe
SHG	Self Help Group
SMC	School Management Committee
SSA	Sarva Shiksha Abhiyan
UNCRPD	United Nations Convention on the Rights of Persons with Disabilities
VDPO	Village Disabled People's Organization
ZP	Zilla Panchayat



Caritas India Community Based Rehabilitation Forum

a unit of Caritas India

46, 1st Cross, Vivekananda Nagar,
Maruthi Sevanagar P.O., Bengaluru - 560 033.

Ph : (+91) - 80 - 2549 7387

Telefax : (+91) - 80 - 2549 7388

E-mail : cbrforum.admblr@gmail.com